HSAC Health Services Assessment Collaboration

A systematic review of the literature

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The effectiveness of compulsory, residential treatment of chronic alcohol or drug addiction in non-offenders

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Review Team

This review was undertaken by the Health Services Assessment Collaboration (HSAC). HSAC is a collaboration of the Health Sciences Centre of the University of Canterbury, New Zealand and Health Technology Analysts, Sydney, Australia. Marita Broadstock (Senior Researcher) conducted the literature search strategy, prepared the protocol, appraised included papers, and drafted the report. David Brinson (Assistant Researcher) assisted with all aspects of the review process and specifically was responsible for applying selection criteria to titles/abstracts, drafting most of the background and part of the discussion sections, and preparing the executive summary. Consideration of the economic implications of the technology was undertaken by Dr Adele Weston, Director, HSAC.

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Staff at the University of Canterbury Libraries assisted with the retrieval of articles.

The following researchers were contacted in the course of the review and provided useful information to clarify the eligibility of their publications in this review, and also identified other published literature that may be relevant:

- Dr Alex Stevens, Senior Researcher, European Institute of Social Services, University of Kent, Canterbury, United Kingdom
- Amy Swan, Acting Program Leader, Health Services Research and Evaluation, Turning Point Alcohol and Drug Centre, Fitzroy, Australia
- Dr Cameron Wild, School of Public Health, University of Alberta, Edmonton, Canada

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- Ms Joy Green, Nova Trust, Christchurch, New Zealand
- Major Lynette Hutson, National Manager, Addiction & Supportive Accommodation Services, Salvation Army Bridge Programme, Auckland, New Zealand

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A working group provided advisory input to the review (see Appendix A for membership). The systematic review of the evidence will ultimately be used by the Ministry of Health to inform decision making in its review of the Alcoholism and Drug Addiction Act 1966 in conjunction with other information. The content of the

systematic review alone does not constitute clinical advice or policy recommendations.

Acknowledgment is made of the contribution of the working group which undertook an external peer review of a late draft and also assisted with queries throughout the review process.

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Executive summary

Introduction

The purpose of this systematic review was to critically appraise the evidence pertaining to the effectiveness of compulsory detention for residential treatment in people with chronic alcoholism and/or drug addiction. Compulsory detention was considered where it occurred as a civil committal, rather than through the criminal justice system, to be relevant to its use within New Zealand's Alcoholism and Drug Addiction Act 1966.

This systematic review was requested by the New Zealand Ministry of Health's Mental Health Group within the Population Health Directorate. The systematic review was requested, in conjunction with information from other sources, to inform the current review of the Alcoholism and Drug Addiction Act 1966 (ADA) for repeal, replacement or amendment.

Methods

The study research question was: what is the effectiveness of compulsory, residential treatment of chronic alcohol or drug addiction in non-offenders?

A systematic method of literature searching, study selection, data extraction and appraisal was employed in the preparation of this report. The literature was searched using the following bibliographic databases: Medline, Embase, Psycinfo, CSA social services abstracts, CSA sociological abstracts, various databases within the Cochrane Library and the National Guideline Clearing House database. In addition, the bibliographies of included papers were examined for relevant studies. Searches were undertaken in September 2007 and were limited to English-language material.

Studies were included if they reported on comparative studies evaluating the effectiveness of involuntary detention through the civil court for residential treatment of alcoholism/drug addiction. Comparators considered included no treatment, voluntary residential treatment, and involuntary outpatient/community-based treatment.

NHMRC dimensions of evidence, levels of evidence and quality assessment criteria were used to evaluate each of the included studies. Data was extracted onto data extraction forms by one reviewer.

Key results

Efficacy and harm

This report systematically reviewed the international evidence for the effectiveness of compulsory residential treatment of chronic alcohol or drug addiction in non-offenders. The search strategy identified a total of 1121 citations. After consideration of titles and abstracts using the study selection criteria, 192 full papers were retrieved and scrutinised in detail for possible inclusion in the review. As a result, four review publications were eligible for inclusion in the review and were critically appraised. These four reviews described results primarily drawn from the *offender* literature and no primary research paper met the study selection criteria for inclusion in the current review.

From the current evidence base identified in this review, there is minimal evidence reporting on the effectiveness of compulsory residential treatment of non-offenders alone. There is however some weak evidence to suggest that at least some people benefit from compulsory treatment. Many studies reporting on compulsory treatment in populations which include offenders appear to report comparatively positive outcomes, and others less so.

Reviewers have concluded that:

- Compulsory treatment has generally demonstrated better outcomes in terms of treatment *process* (that is, uptake of treatment following referral).
- Longer treatment has been demonstrated to be a consistent predictor of positive therapeutic *outcomes* in the offender literature.
- Some treatment retention studies report lower drop-out rates for clients receiving compulsory treatment as compared to voluntary treatment.
- The generalisability of these findings to compulsory residential treatment in New Zealand's non-offender population is not known.

In the main, the international research evaluating voluntary versus compulsory treatment described above has been conducted within 'offender' populations (that is, within the criminal justice system, for example arrest-referral and diversion schemes) and/or is non-empirical. Within this context, it is extremely difficult to carry out randomised control trials. Of the evidence base considered, the study design, implementation and reporting is generally inadequate for the assessment of efficacy, and results have been inconsistent. Also, there is wide variation in the implied meaning and usage of specific terminology (for example, compulsion, coercion, voluntary, mandated treatment, civil commitment) and this generally makes meaningful comparison of findings difficult.

With respect to this review's scope, some inferences can be drawn from only moderately robust research conducted within other legal frameworks (the criminal justice system) rather than within the civil legal framework as applied in New Zealand. However these studies have tended to be of small heterogeneous populations, without suitable controls, meaningful comparators and/or utilising poorly operationalised baseline and/or outcome variables. It remains difficult to ascertain if the variability in outcomes reported are a function of the compulsory or voluntary nature of treatment, or simply due to differences in individuals' baseline characteristics and personal circumstances.

Despite this equivocal body of evidence, many countries, particularly the United States and Australia, demonstrate an increasing willingness to employ the use of more forceful means of pressuring substance users into treatment. These more forceful means involve a whole range of measures including the many forms of informal coercion through to legal coercion and compulsion, via the criminal justice system. It appears, that in the main, research attention is currently focused on this plethora of coercive means, and the 'drug court' appears to be the contemporary treatment model employed in many Western countries.

There is evidence, mainly anecdotal, that civil commitment for short periods can be an effective harm minimisation mechanism. That is, to provide short term involuntary care in life threatening circumstances. The purpose of such interventions is arguably different to interventions aimed at detoxification and/or rehabilitation.

While alcohol and drug abuse is generally viewed as a chronic condition, acute emergency situations occur, and compulsory civil commitment may be one mechanism to prevent deaths and minimise harm. However, there may be other mechanisms that are as effective, or more so.

Economic implications

A search of the literature indicated that there were no published economic evaluations directly relevant to the current review (that is, compulsory residential treatment of alcohol/drug addiction amongst non-offenders, compared to either voluntary residential treatment, compulsory outpatient treatment, or no treatment). An original quantitative economic evaluation was beyond the scope of the current review particularly in the light of the absence of evidence; however the review discusses the potential cost implications per patient, relative to the health benefits likely to be gained. In addition, the review broadly discusses the economic burden of alcohol abuse (but not drug abuse) to New Zealand society.

- The incremental cost of compulsory detention is essentially nil when compared to voluntary detention, and modest when compared to outpatient treatment or no treatment.
- If compulsory detention were shown to be even moderately more effective compared to outpatient treatment or no treatment, then the resultant cost offsets would mean the intervention would likely be cost-saving.
- Available information suggests that the intervention is likely to be highly cost-effective or dominant, when considered in the context of additional quality-adjusted life years saved through reduced mortality and improved quality of life of the user and others. Unfortunately, insufficient data are available to reliably estimate the incremental benefit at present.

Conclusions

The review conclusions are based on the current evidence available from this report's critical appraisal of literature published on the effectiveness of compulsory residential treatment of chronic alcohol or drug addiction in non-offenders.

Route of referral is but one facet of the treatment process. There is a paucity of research investigating the complex interplay of other treatment factors such as cultural appropriateness, client motivation, perceived coercion, family, whānau and community support, different therapeutic modalities and other psychosocial factors: all of which are likely confounders. Thus, at present, the evidence remains incomplete.

Treatment is perhaps best seen as a sequentially linked chain of events, with route of referral forming just one of the initial processes. As a form of short term harm minimisation, civil commitment may save lives, though this has not been empirically evaluated and there is no evidence of harm. When considering the medium to long term clinical effectiveness of compulsory versus voluntary residential treatment in the non-offender population, strong evidence does not exist.

At present it is not possible to assess the cost-effectiveness of compulsory residential treatment of alcohol/drug dependence due to insufficient clinical evidence. However, given the relatively low cost of the intervention, the costs associated with alcohol/drug addiction, and the poor quality of life experienced by alcohol/drug

addicts and their families/victims, this intervention has the potential to be highly cost-effective relative to less effective treatments or no treatment.

No indigenous research has evaluated New Zealand's alcohol and drug civil commitment legislation in terms of its effectiveness in achieving long-term behaviour change. Thus, there is a need for evaluation studies, using well operationalised baseline and outcome variables, which investigate the complex interplay between client and treatment characteristics within the New Zealand civil context.

Table of Contents

List of Tables and Figures

List of Abbreviations and Acronyms

AA	Alcoholics Anonymous
ADA	New Zealand's Alcoholism and Drug Addiction Act 1966
AHRQ/USPSTF	Agency for Healthcare Research and Quality (formerly AHCPR) (USA)
Alafam	Family-oriented conceptual models of alcoholism
ANZHSN	The Australia and New Zealand Horizon Scanning Network
AOD	Alcohol or Drug
CADTH	The Canadian Agency for Drugs and Technologies in Health
CJS	Criminal Justice System
DSM-IV TR	Diagnostic and statistical manual of mental disorders, 4th and revised edition
HSAC	Health Services Assessment Collaboration
INAHTA	International Network of Agencies for Health Technology Assessment
MOH	Ministry of Health (NZ)
MSAC	Medical Services Advisory Committee
NHMRC	National Health and Medical Research Council
NICE	National Institute for Health and Clinical Excellence
NZ	New Zealand
NZHTA	New Zealand Health Technology Assessment
QALYs	Quality Adjusted Life Years
QCT	Quasi-Compulsory Treatment
RCTs	Randomised Controlled Trial
SR	Systematic Review
TTO	Time trade off
TSF	Twelve Step Facilitation
U.S./USA	United States of America
WINZ	Work and Income New Zealand
WHO	World Health Organisation

Glossary

Age standardisation: A procedure for adjusting rates designed to minimise the effects of differences in age composition when comparing rates for different populations.

Alafam: Family-oriented conceptual models of alcoholism.

Before and after study: A situation in which the investigator compares outcomes before and after the introduction of a new intervention.

Bias: Deviation of results or inferences from the truth, or processes leading to such deviation. Any trend in the collection, analysis, interpretation, publication, or review of data that can lead to conclusions that are systematically different from the truth.

Blinded study: A study in which observers and/or subjects are kept ignorant of the group to which they are assigned. When both observers and subjects are kept ignorant, the study is referred to as double blind.

Case control study: An epidemiological study involving the observation of cases (persons with the disease) and a suitable control (comparison, reference) group of persons without the disease. The relationship of an attribute to the disease is examined by comparing retrospectively the past history of the people in the two groups with regard to how frequently the attribute is present.

Case series: A descriptive study of a subset of a defined population (i.e. a single patient or group of patients) which aims to describe the association between factors or attributes which the sample are exposed to, and the probability of occurrence of a given disease or other outcome. Case series are collections of individual case reports, which may occur within a fairly short period of time.

Civil commitment (Australia & New Zealand): The term civil commitment relates to interventions with non-offenders, where no criminal charge is laid. Civil commitment is a sub-classification of compulsory commitment. In Australia and New Zealand, the term civil commitment typically refers to non-offenders, involuntarily committed to treatment due to risk of harm to themselves or others.

Civil Commitment (USA): legally sanctioned, involuntary non-offender and offenders unwilling and/or unable to obtain services on their own.

Civil Procedure: the body of law that sets out the process that courts follow when hearing cases of a civil nature, that is, dispute resolution of *private law issues* between individuals, business entities or non-profit organizations, as opposed to a *criminal* action.

Coercion: The implicit or explicit persuasion of an unwilling person to do something by using force or threats

Cohort study: The analytic method of epidemiologic study in which subsets of a defined population can be identified who are, have been, or in the future may be exposed or not exposed in different degrees, to a factor or factors hypothesised to

influence the probability of occurrence of a given disease or other outcome. Studies usually involve the observation of a large population, for a prolonged period (years), or both.

Compulsion: The action or state of being forced or obliged to do something.

Compulsory/Involuntary treatment/commitment: The terms compulsory and Involuntary relate to interventions over a wide range of both offender and non-offender populations. Compulsory treatment encompasses a wide range of situations including custodial settings and civil commitment. Compulsory treatment refers to treatment where the individual is forced to enter treatment primarily as a result of a legal order, that is, either a civil commitment or an order disposing of a criminal case.

Cost benefit analysis: An economic analysis in which the costs of medical care and the benefits of reduced loss of net earnings due to preventing premature death or disability are considered.

Cost effectiveness (CE): Involves the relationship between costs and effects, providing information on whether a technology is being delivered to those who would benefit from it with an optimal use of resources. It is expressed as a ratio of the effects (number of lives saved, number of disability days avoided) obtained for a specific cost (expressed in dollars). For example, the numerator may be the difference in lifetime costs between one intervention and another, while the denominator may be the difference in life expectancies associated with the two interventions. Low cost effectiveness ratios are desirable.

Criminal Justice System (CJS): the system of, practices, and organizations, used by national and local governments, directed at maintaining social control, deterring and controlling crime, and sanctioning those who violate laws with criminal penalties.

Day patient: A person who is admitted and discharged from hospital on the same day.

Descriptive study: A study concerned with, and designed only to describe the existing distribution of variables, without regard to causal or other hypotheses.

Efficiency: The effects or end results achieved in relation to the effort expended in terms of money, resources and time. The extent to which the resources used to provide a specific intervention, procedure, regimen, or service of known efficacy and effectiveness are minimized.

Evidence based: Based on valid empirical information.

Formal non-criminal coercion: The pressures that substance users experience from non-criminal justice organizations and agencies, including employers and government agencies, for example, random drug testing in the work place.

Generalisability: Applicability of the results to other populations.

Grey literature: That which is produced by all levels of government, academics, business and industry, in print and electronic formats, but which is not controlled by commercial publishers.

Harm minimisation: to lessen the potential dangers and health risks associated with risky behaviours, as an alternative to the prohibition of certain potentially dangerous lifestyle choices. Examples of harm minimisation strategies are needle exchange programs and drug decriminalization.

Heterogeneous: A sample that is diverse in kind or nature; comprised of diverse patients/ subjects/individuals/communities that are unrelated or unlike each other.

Homogeneous: A sample comprising the same kind of patients/ subjects/individuals/communities. Having the same kind of characteristics, being similar and relatively uniform.

Hospitalisations: A term used as an indicator of morbidity of diseases in a community. A hospitalisation in New Zealand health statistics includes inpatients who leave hospital to return home, transfer to another hospital or institution, or die in hospital after formal admission. That is a count of episodes of care rather than individuals.

Informal non-criminal coercion: Involves the 'pressures' (but still free-choice) that substance users typically experience from their social environment, including friends, family, and employers.

Inpatient: A person admitted to hospital for medical, surgical or psychiatric treatment, observation or care, which spends at least one night in the hospital. A healthy person accompanying a sick person is included if formally admitted as a boarder.

Involuntary treatment: See Compulsory

Kaupapa: basic idea, topic, plan, principle.

Legal Coercion: A broad class of referral mechanisms involving diversionary programs. For example, pre-arrest, pre-trial, pre-sentence, post-conviction, and pre-release programmes. It is important to note that coerced treatment is not involuntary per se, but rather an "exchange" for a wavering or reduction in a penalty or sentence.

Mandated treatment: Refers to offenders required to attend treatment due to a criminal court or police sanction or status.

Meta-analysis: The process of using statistical methods to combine the results of different studies.

Morbidity: Illness.

Mortality: The number of deaths from a specified disease which are diagnosed or reported during a defined period of time in a given population.

Outpatient: A person who goes to a health care facility for a consultation, and who leaves the facility within three hours of the start of the consultation. An outpatient is not formally admitted to the facility.

Polypharmacy: The administration of two or more drugs together.

Providers: Organisations and health professionals providing health services.

Quasi-Compulsory Treatment (QCT) (European): The treatment of drug-

dependent offenders that is motivated, ordered, or supervised by the criminal justice system and takes place outside regular prisons.

Randomised controlled trial: An epidemiologic experiment in which subjects in a population are randomly allocated into groups to receive or not receive an experimental preventive or therapeutic procedure, manoeuvre, or intervention. Randomised controlled trials are generally regarded as the most scientifically rigorous method of hypothesis testing available in epidemiology.

Residential Treatment Facility: Institutions that treat people under the ADA are residential, inpatient (non-hospital) services. That is, the patient lives at the facility whilst receiving treatment for alcohol or drug addiction. Note that 'community-based treatment' and 'out-patient' treatment (usually in-hospital) are not currently used for compulsory detention under the ADA

Risk factor: An exposure or aspect of personal behaviour or lifestyle, which on the basis of epidemiologic evidence is associated with a health-related condition.

Voluntary treatment/Self-referral: No offence and 'free-choice'

Introduction

Objective

The purpose of this systematic review was to provide a summary of the evidence pertaining to the relative effectiveness of compulsory detention for residential treatment in people with chronic alcoholism and/or drug addiction, when compared to a range of comparators. Compulsory detention was considered in the context of New Zealand's Alcoholism and Drug Addiction Act 1966 (ADA), or overseas under similar legislation, such that the process occurs as a civil committal, rather than through the criminal justice system.

The review was requested by the Mental Health Rights & Protection Team, Population Health Directorate, New Zealand's Ministry of Health. The review findings will, in addition to concurrent work streams, inform the Ministry's current review of the Act.

Introduction

There is no doubt that alcohol and drug abuse is inextricably linked with many harmful consequences for the individual, the individual's immediate environment (including that of his or her significant others) and for society as a whole (World Health Organization, 2002, 2007). These may include failure to fulfil social role obligations, family and domestic problems, interpersonal violence, road and other accidents, health issues, and employment difficulties. These impacts can require the attention and resources of health care systems, the civil and/or criminal justice systems, and of other social institutions (A. Stevens, McSweeney, Van Ooyen, & Uchtenhagen, 2005; World Health Organization, 2004, 2007). In many countries, the health, social and criminal justice consequences of problematic alcohol and drug use create a significant economic (as well as social and individual) burden (Beynon, Bellis, & McVeigh, 2006). The cost to society of alcohol abuse alone typically equates to ~1-2% of GDP (Fenoglio, Parel, & Kopp, 2003; Konnopka & Konig, 2007; Nakamura, Tanaka, & Takano, 1993; Varney & Guest, 2002). It has been suggested that globally, only a minority of individuals who need treatment for chronic alcohol and/or drug use actually receive it, and in many communities alcohol and drug abuse treatment is characterised by excess demand and a deficit in resources (Cartwright & Solano, 2003).

An increasing number of countries (including New Zealand) have in place some form of medical or social legislation pertaining to drug and alcohol treatment (World Health Organization, 1999). Such legislation can be broadly divided into three categories: (1) voluntary and compulsory civil commitment (typically confinement to a certified residential treatment facility), (2) legal coercion within the criminal justice system where an offender is offered residential or outpatient treatment as an alternative to a prison sentence, probation or parole, and (3) compulsory reporting, registration, drug testing, and surveillance in the community. Most alcohol and drug legislation is derived on the basis of three assumptions. First, that the decision making capacity of the drug or alcohol dependent person is impaired or sufficiently diminished as to make the person legally incompetent. Second, that these problems place the person at an unacceptably high level of risk. And third, that they place carers and significant-others at an unacceptably high level of risk. In many

countries, particularly the United States and Australia, there is an increasing willingness to employ the use of more forceful means of persuading substance users into treatment, involving a whole range of "pressures" (Wild, 1999; Wild, Cunningham, & Ryan, 2006). In a comprehensive survey of existing policies and legislation, the World Health Organisation (1999) reported that 53 of the 70 countries surveyed had legal provisions mandating various forms of compulsory detention and treatment for alcohol and drug dependence (in addition to voluntary routes of referral).

Alcohol and drug abuse in New Zealand: burden of disease

Substance use disorders encompass a diverse range of drugs, consumption patterns and etiologies. Some of the major drug types and their prevalence and burden of disease in New Zealand are outlined briefly below.

Alcohol

The most commonly available and misused drug in New Zealand is alcohol (Ministry of Health, 2001). A national survey conducted in New Zealand in 2003-2004 found that 19.7% of male drinkers and 11.1% of female drinkers engaged in drinking large amounts of alcohol (more than 6 standard drinks for males and more than 4 standard drinks for females) at least weekly (Ministry of Health, 2007a). Overall there is a causal relationship between alcohol consumption and more than 60 types of disease and injury, and alcohol is estimated to cause about 20–30% of oesophageal cancer, liver cancer, cirrhosis of the liver, homicide, epileptic seizures, and motor vehicle accidents, worldwide (World Health Organization, 2002). In New Zealand there were a total of 9,019 alcohol-related hospital admissions in 2006. Alcohol was the primary diagnosis for 22% of the total (e.g. acute intoxication, dependence, withdrawal, harmful use), and of the remaining 78%, alcohol was the secondary diagnosis (i.e. a contributing or co-occurring diagnosis). The most represented age group for primary diagnosis admissions were young people aged 15-19 years (18.5%), followed by persons 40-44 years (9.9%) (Williams, 2007). There were 142 deaths in 1997 where the underlying cause of death was an alcohol related condition (age-standardised mortality rate 3.3 per 100, 000), and 10% of all deaths due to external causes (for example, falls, motor vehicle accidents, suicide) involved a positive blood alcohol concentration in the deceased.

There is increasing evidence that besides the volume of alcohol consumed, the pattern of drinking is relevant for health outcomes (World Health Organization, 1999, 2004). A recent World Health Organisation study of accident related hospital admissions (World Health Organization, 2007) collected information from 5,410 participating patients admitted to hospital emergency departments in 12 countries including New Zealand. The study found the proportion of injury cases with alcohol involvement ranged from 6% to 45%, and South Africa ranked highest (45%), followed by New Zealand with 36%. The report suggested that the differences between countries were attributable to differing

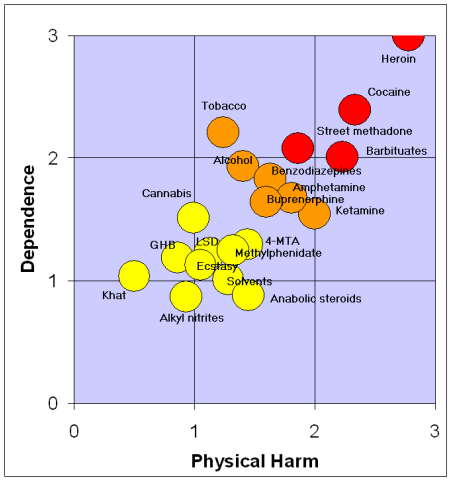

Figure 1: Matrix of physical harm and dependence across the more common drugs of addiction. From: Nutt, King, Saulsbury, & Blakemore (2007)

patterns of consumption (for example heavy episodic or 'binge' drinking), cultural differences, differences in alcohol policies as well as differences in service provision. In 1998 there were 26,512 prosecutions for traffic offences involving alcohol and approximately 91 percent of these prosecutions resulted in a conviction (Ministry of Health, 2001).

Illegal and other drugs: prevalence (including depressants, opiates hallucinogens)

Marijuana

Marijuana is the most popular recreational drug used in New Zealand (apart from alcohol and excluding tobacco and caffeine). In the 2003 New Zealand Health Behaviours Survey – Drug use (Ministry of Health, 2007b), 33.6% of New Zealanders aged between 18 and 24 years had used marijuana in the previous 12 months (13.7% in the 13–65 age group). Overall, 44.4% of New Zealanders aged 13–65 years had used cannabis during their lifetime.

Amphetamines

Amphetamines were the second most widely used recreational drug (excluding alcohol and tobacco) in New Zealand, with 6.8% of New Zealanders aged 13–65 years having used amphetamines in their lifetime, and 2.5% of New Zealanders aged 13–65 years having used amphetamines in the last 12 months. An estimated 28.4% (19.5–37.2) of past-year amphetamine users had binged on amphetamines at least once in the last 12 months (that is, used amphetamines continuously for 24 hours or more) (Ministry of Health, 2007b).

Ecstasy

Ecstasy was the third most commonly used recreational drug (excluding alcohol and tobacco). Overall, 3.7% of New Zealanders aged 13–65 years had used ecstasy in their lifetime and 1.9% of New Zealanders aged 13–65 years reported having used ecstasy in the last 12 months (Ministry of Health, 2007b). Overall, an estimated 24.1% of ecstasy users had binged on ecstasy at least once in the last year (i.e., used ecstasy continuously for 24 hours or more).

Illegal and other drugs: burden of disease

During the period 1996-1998 there were 2,722 cannabis-related hospitalisations and in 1998 there were 4.5 publicly funded cannabis-related hospitalisations per 100,000 population. In the same year there were 18,720 prosecutions for offences involving cannabis and 13,120 (70%) resulted in conviction (Ministry of Health, 2001). Between 1996 and 1998 there were 13,678 publicly funded drug related hospitalisations: 9,271 involved depressant-related conditions and/or poisoning by a depressant as the reason for admission or as a secondary diagnosis: 3,955 were opiate-related, 343 hallucinogen-related, and 109 stimulant-related. In 2000 there were 2012 apprehensions for offences involving illegal drugs (other than those involving cannabis) which represents a 46% increase since 1997. About three-quarters of those apprehensions were males (Ministry of Health, 2001).

Summary of New Zealand's Alcoholism and Drug Addiction Act 1966

New Zealand's current Alcoholism and Drug Addiction Act (ADA) was passed in 1966 and came into force in 1969. Broadly, the Act defines the mechanisms by

which persons with alcohol and drug addiction disorders may be compulsorily detained within residential treatment facilities for a period of up to two years. The goal of the Act is "to make better provision for the care and treatment of alcoholics and drug addicts" (ADA Act, 1966). The Act applies equally to alcoholics and drug addicts, defined as "persons whose addiction to intoxicating, stimulating, narcotic, or sedative drugs is causing or is likely to cause serious injury to his health or is a source of harm, suffering, or serious annoyance to others or renders him incapable of properly managing himself or his affairs" (ADA Act, Sections 2 and 3). It is of note that the Mental Health (Compulsory Assessment & Treatment) Act (1992), which provides for the compulsory and thorough assessment (and treatment) of persons with psychiatric disorders, *is not* applicable to any person based *solely* on substance abuse (Section 4). Thus, the provision of clinical assessment does not automatically or necessarily extend to persons with single diagnosis drug and alcohol disorders.

Procedures for application

In New Zealand, compulsory treatment may be initiated in four ways,

- a voluntary application for committal (Section 8)
- an involuntary application for committal (Section 9)
- transfer of a prison inmate for treatment by the Minister of Corrections (Section 21)
- involuntary transfer by a police officer of an intoxicated person to his or her residence, a detoxification shelter, or detention in a police cell for the purpose of detoxification for a period not exceeding 12 hours (Section 37).

Section 8 and Section 9 applications are currently the main routes of referral to treatment (summarized below) and are the focus of this review. Both processes occur as civil court proceedings, not through the Criminal Justice System (CJS).

Section 8: Voluntary application

Any person may apply to a district court judge to be compulsorily detained for treatment at a certified residential treatment facility for a period of up to two years. The applicant must satisfy the judge that he or she is an alcoholic or drug addict (by admission of evidence if necessary), and fully understand the nature of the application. Clinical assessment is not a requirement. Further, the managers of a certified residential treatment facility must have the capacity and be willing to admit the applicant to the institution. Note that despite the "voluntary" premise, social pressures are often an integral part of the process of seeking addiction treatment (Allen & Clarke, 2003b; T. C. Wild, Cunningham, & Ryan, 2006; T. C. Wild, Roberts, & Cooper, 2002).

Section 9: Involuntary application

A district court judge may make an order for the compulsory detention and treatment of a person at a certified residential treatment facility for a period of up to two years (on average the period is two to three months) (Allen & Clarke, 2003b). Applications to the judge may be made by a relative (direct relatives, and not *de facto* or same-sex partners), a police officer, or "any reputable person". The application must be supported by either written or oral evidence from two medical practitioners, to the effect that the person is an alcoholic or drug addict within the definition of the Act. Under Section 9, the burden of proof is on the alleged

alcoholic or drug addict to show why an order should not be made requiring him or her to be detained for treatment. The judge, if necessary, may issue a warrant for arrest of the alleged alcoholic or drug addict for medical examination and/or committal.

Discharge

People committed to a certified residential treatment facility under either Section 8 or Section 9 may be discharged at any time by the institution, or a patient may apply to the court for discharge after six months.

Service providers

Certified institutions that treat people under the Act in New Zealand provide a medium to long-term (6 week – 6 month) intensive, residential treatment programme. That is, the patient lives at the facility whilst receiving treatment for alcohol and/or drug addiction. Note that community-based and out-patient/hospital-based treatment are not currently used for compulsory detention under the Act (Allen & Clarke, 2003b). Broadly, certified treatment facilities engage patients in an intensive residential programme or in a 'therapeutic community'/'community reinforcement approach' (usually underpinned by some form of '12-step' programme and/or other psychological, psychosocial, and/or work-based therapies). A therapeutic community is one which uses the institution ('the community') as an aid to recovery, and patients are also supported by the wider external community in which the facility is located (Kennard, 2004).

There are currently four certified institutions in New Zealand that provide residential services for the compulsory detention and treatment of persons with alcohol and drug addiction disorders. These include the Nova Trust Lodge in Christchurch, and the Salvation Army Bridge Programme, operating in three cities (Auckland, Wellington and Christchurch). Currently there are no specifically kaupapa Māori services certified to receive patients under the Act (Allen & Clarke, 2003b).

The **Nova Trust Lodge** provides a 6-month residential, work orientated, alcohol and drug rehabilitation service. Patients need to have a comprehensive alcohol and drug assessment, a long history of dependence, previously attended at least one other recognised alcohol and drug treatment programme, and have been unable to remain alcohol/drug free. All clients are admitted under the ADA Act 1966 whether voluntarily via Section 8 (approximately 30% of clients) or involuntarily under Section 9 (70% of clients) and must be aged 30 years or older. Most admissions are male (83%) although there has been a steady increase in admissions of women over the last four years (Nova Trust, 2007).

Nova is a 60 bed facility funded by District Health Boards, the Ministry of Health, clients' sickness benefits, and income generated from the work programme. Nova provides residents with services including, but not limited to, a 30-minute individual counselling session each week, compulsory group sessions two to three times per week, weekly self help (AA) meetings, and other courses as required (e.g., anger management). All residents at Nova Trust must participate in the work programme which includes horticulture, maintenance, cooking and household duties.

The **Salvation Army Bridge Programme** provides an integrated treatment service to people whose lives have been affected by the harmful use of, or dependency on, alcohol or drugs. A 6-8 week alcohol and drug treatment programme (not

detoxification) is offered for men and women. Referrals may be by self-referral, medical practitioner, committal via Section 8 or Section 9 of the ADA Act 1966, or via other alcohol and drug agencies. Admission criteria include: alcohol and drug dependency, aged over 18 (usually 20) years, motivated towards abstinence, and solvents not being the primary drug of choice. Comprehensive alcohol and drug assessment is required to access the programme (The Salvation Army, 2007).

The programme aims to provide emotional support through self-help groups and a model of abstinence. The Salvation Army has developed a National Bridge Programme Model of Treatment and this has four elements: the Salvation Army as context, a Partnership approach, the 12 Steps Programme, and the Community Reinforcement Approach (CRA). The Salvation Army's treatment services are based on this theoretical underpinning and include each of these four elements to shape the service delivery (The Salvation Army, 2007).

Treatment approaches

There is considerable ongoing debate about whether alcohol and drug education and/or treatment programmes should be driven by a focus on abstinence *or* harm minimisation. Abstention from alcohol/drug use will inevitably result in a reduction of drug-related harm, but is not necessarily a realistic objective for many people (Allen & Clarke, 2003a). Both the Nova Trust Lodge and the Salvation Army Bridge Programme include (but are not limited to) treatment elements that can be broadly described as the '12 step' approach and/or are underpinned by Alcoholics Anonymous (AA) fundamentals (Note that the Nova Trust Lodge utilises a predominantly 'work-based' therapeutic programme with optional AA attendance, and the Salvation Army, the four elements of context, partnership, 12 Step and CRA). AA is a well-established international organisation which offers a brief, structured, small group therapy intervention within a model of abstinence. A critical component is sponsorship, wherein an AA member works with newer members to orient them to the programme, offer feedback, and serve as a role model of recovery (Alcoholics Anonymous, 2001). The 12-step approach is an intervention based on the assumption that substance dependence is a spiritual and a medical disease. Although AA incorporates a spiritual approach, there are other 12-step interventions available that do not include spirituality, and these are often labelled Twelve Step Facilitation (TSF).

A recent Cochrane review (Ferri, Amato, & Davoli, 2006) investigated the effectiveness of AA and other TSF interventions in reducing alcohol intake, achieving abstinence, maintaining abstinence, improving the quality of life of affected people and their families, and reducing alcohol associated accidents and health problems. The researchers found no experimental studies that demonstrated the effectiveness of AA or TSF approaches with respect to these outcomes. From the evidence reviewed the authors concluded that "AA may help patients to accept treatment and keep patients in treatment more than alternative treatments, though the evidence for this is from one small study that combined AA with other interventions and should not be regarded as conclusive" (Ferri et al., 2006, p.2).

Utilisation

As shown in Table 1, there has been a significant decline in use of involuntary (Section 9) committals since the mid 1990s. In 1995, approximately one third of ADA orders were made under Section 8 and over two thirds under Section 9

(Ministry of Health, 1999b). However, by 2006, 78% of total orders were granted under Section 8 and only 22% under Section 9 (Ministry of Health, 2007c). Notably the number of voluntary committals under Section 8 hadn't greatly changed (64 in 1995, 60 in 2006); however there has been a large drop in involuntary committals under Section 9 (from 130 in 1995 to 17 in 2006).

It has been suggested that a lack of awareness among providers and families may underpin this apparent decline in compulsory detention (Ministry of Health, 2007c). Also, there has been a sharp decline in the number of institutions certified to treat patients under the ADA. Since the closure of many psychiatric hospitals, only 4 certified institutions remain in operation. It is also possible that the pattern of use of the ADA in New Zealand may reflect reluctance on the part of some providers/health professionals to use compulsory committal and difficulties with use of the ADA Act (Ministry of Health, 2007c).

Table 1 Outcomes of applications for granted orders for detention, 1995-2006

Year	Section 8 applications granted	Section 9 applications granted	Total applications granted
1995*	64 (33%)	130 (67%)	194
2004	45 (62%)	28 (38%)	73
2005	49 (62%)	30 (38%)	79
2006	60 (78%)	17 (22%)	77

Sources: *Ministry of Health, 1999; Ministry of Health, 2007

Context for the proposed review

New Zealand's ADA Act has drawn some criticism for being outdated, problematic and ineffective. When considering alcohol and drug treatment from a legislative perspective, there are moral, ethical and therapeutic implications for mandating treatment compulsorily compared with voluntary admissions. The "Mental Health (Compulsory Assessment & Treatment) Act " 1992 further highlighted various inconsistencies between the ADA Act 1966 and more contemporary civil rights paradigms (Allen & Clarke, 2003b; Ministry of Health, 1999a, 1999b). The 1998 National Drug Policy (Ministry of Health, 1998) led to a review of the Act to determine if it was accomplishing its goal, "to make better provision for the care and treatment of alcoholics and drug addicts" (ADA Act, 1966).

Compulsory detention raises fundamental human rights issues and a key rationale for human rights protections is to mediate the exercise of State control over citizens (Rishworth, 2003; The Human Rights Commission, 2004). Other issues raised included:

- the extent to which the Minister of Health should be involved in the clinical management or transfer of people who are detained for treatment,
- what provisions should be made for the clinical assessment of individual's needs by health professionals,
- what provisions should be made to protect the committed person (Ministry of Health, 1999a).

The review process led to a Ministry of Health discussion paper (Ministry of Health, 1999b), a subsequent analysis of submissions (Ministry of Health, 1999a), and a narrative review (Allen & Clarke, 2003b). These identified a number of practical and legal problems with the Act in New Zealand which included:

- the inability to match treatment type to client need
- a lack of certified institutions
- institutions being unable or unwilling to accept clients
- inconsistency with the New Zealand Bill of Rights Act 1990 and the compulsory assessment and treatment regime under the Mental Health (Compulsory Assessment and Treatment Act) 1992.

It is within this context that the Ministry of Health are reviewing the Act for repeal, replacement or amendment in 2008. A key issue in this process is to consider the evidence for the effectiveness of compulsory detention to residential treatment. Claims of positive medium-to-long-term outcomes of compulsory treatment have

not been supported by empirical data (Ministry of Health, 1999a), and an objective of the current review is to systematically and rigorously review the evidence available on this issue internationally.

Terminology and degrees of coercion

The literature relating to route of referral and alcohol/drug treatment includes a wide range of terms and concepts that are often used interchangeably, that sometimes have different meaning in different countries, and that sit on different points of a continuum from truly voluntary to truly involuntary. Some introduction and explanation of terminology may be helpful at this point.

Involuntary treatment

Compulsion is "the action or state of being forced or obliged to do something" (Soanes & Stevenson, 2004). Compulsion is a dichotomous concept, either a person is compelled, or not (Pritchard, Mugavin, & Swan, 2007). For example, a District Court Judge may compel a person to attend a residential treatment facility and the person may be arrested and returned to the facility if he or she fails to comply. In the case of compulsory detention under section 9 of the ADA Act, the person has the opportunity to convince the Judge why he or she should not be detained, but once the Judge orders detention the person has no choice but to comply (Allen & Clarke, 2003b; Ministry of Health, 1999a).

Compulsory treatment. It has been suggested that the term only be used to refer to commitment to treatment where the individual (offender or non-offender) has *no* choice (Pritchard et al., 2007; Swan & Alberti, 2004). However, the term has been used inconsistently in the literature to encompass a wide range of situations including circumstances where individuals are coerced (to greater of lesser degrees) as well as where treatment is mandatory. Pritchard et al. (2007) recommend that the term *legally coerced treatment* be used instead of compulsory treatment as a more general term to refer to alcohol/other drug treatment whose mandate is based in legislation and/or government implemented program and encompassing a range of coercive measures.

Court mandated treatment refers to the treatment of an offender, usually by court order, and court mandated treatment usually follows when an offender's alcohol or drug addiction has contributed to his or her offending (Pritchard et al., 2007). In New Zealand, an order disposing of a criminal case is not provided for under the ADA Act.

Civil Commitment appears to have different meanings in different countries. In New Zealand and some states of Australia, civil commitment is a process undertaken outside the criminal justice system (CJS), and refers to non-offenders involuntarily committed to treatment (Swan & Alberti, 2004). Civil commitment has been defined as "legally sanctioned, involuntary commitment of a non-offender into treatment for alcohol or drug dependence" (New South Wales Standing Committee on Social Issues, 2004). Note that the present review's scope relates to civil commitment defined in this way, to exclude coerced treatment of offenders identified through the criminal justice system.

In the USA, civil commitment includes the legally sanctioned commitment of both involuntary non-offenders and offenders unwilling and/or unable to obtain services

on their own (Pritchard et al., 2007). Although once a popular strategy, civil commitment is no longer heavily relied upon in the United States (Wild, 1999; Wild, Cunningham, & Ryan, 2006).

Coercion

Coercion is the "implicit or explicit persuasion of an unwilling person to do something by using force or threats" (Soanes & Stevenson, 2004). These may involve removal of custody of children, loss of employment, or legal penalties or sanctions. Coercion is best viewed as being on a continuum ranging from mild to strong (Pritchard et al., 2007). If the threats and persuasion are sufficiently great the degree of coercion may be *perceived* as compulsion (Pritchard et al., 2007). Wild et al. (1998) note that perceived coercion itself is seldom measured in research, but inferred by the route of referral. The varied meanings of "coercion" can create difficulty in evaluating and synthesising research.

Quasi-compulsory treatment is a term used in Europe meaning, "the treatment of drug-dependent offenders that is motivated, ordered, or supervised by the criminal justice system and takes place outside regular prisons" (A. Stevens et al., 2005). It can be compulsory (no choice), or it can involve degrees of coercion (some choice) as for court mandated treatment.

Diversion of offenders. Coerced treatment of offenders through diversion can occur in two broad ways. It can divert offenders away from the criminal justice system and into treatment (pre-arrest and pre-trial diversion) as an alternative to the offender passing through conventional CJS proceedings. Or it can occur at pre-sentence or pre-conviction stages where offenders are diverted into treatment in addition to being dealt with by the criminal justice system. Coerced treatment in this context is usually characterised by the presence of an offence and some degree of choice, albeit limited, in the individual's decision to access treatment or face legal sanctions (Pritchard et al., 2007). The coercion can act as an "exchange" for a wavering or reduction in a penalty or sentence (Klag, O'Callaghan, & Creed, 2005). In recent times, the use legal coercion has become increasingly popular within the criminal justice system and it is used extensively in the United States.

Formal non-criminal coercion refers to the pressures that substance users may experience from non-criminal justice organizations and agencies, including employers and government agencies (Klag et al., 2005). These may include random drug testing in the work place.

Voluntary treatment

Truly voluntary treatment implies free choice and self referral of a person with alcohol/drug addiction for treatment. However it is recognised that informal pressures to volunteer for treatment are frequently experienced by the individual from their social environment, including friends, family, and/or employers (Klag et al., 2005). The informal threat of involuntary committal can be a coercive force in voluntary self-referrals for treatment.

Structure of report

This remainder of this report is divided into three main sections. The next section describes the review's methodology and includes the research questions, search strategy, inclusion and exclusion criteria, the data extraction, appraisal and synthesis

methods, and the methodological limitations of the evidence review. The results section considers the included appraised studies, reporting first on the systematic reviews, and then on the original primary research. Study characteristics and findings are reported in separate tables and synthesised in the text, and the body of evidence for each research question is reported. The final section summarises results, briefly discusses the limitations of the evidence base and identified gaps in knowledge, and presents key conclusions. Detailed appendices follow, including the search strategy, all excluded papers annotated by reason for exclusion, and the completed data extraction tables for included papers.

Methods

The scope of this review was defined by staff from the Ministry of Health's Rights and Protection Team, Mental Health Group, Population Health Directorate and an informal working group (Appendix A) in conjunction with the reviewers. In general, the aim of this review was to evaluate the effectiveness of compulsory detention to inform (along side other information) a review of New Zealand's Alcoholism and Drug Addiction Act 1966 (ADA).

Research questions

The primary research question to be addressed by this review was: what is the effectiveness of compulsory, residential treatment of chronic alcohol or drug addiction in non-offenders?

The review questions are defined according to the PICO (or PICOT) criteria:

- patient population
- intervention
- comparator (where appropriate)
- outcomes
- time consideration (should be considered with regard to all of the above domains).

For inclusion in the current review, the evidence had to fulfil the criteria outlined in Table 2 and Table 3. These criteria were developed *a priori* and are described in the scoping protocol prepared prior to commencement of the review proper.

Table 2 Criteria for determining study eligibility

Patient population	**chronic alcoholics, and/or chronic drug addicts**
Intervention	compulsory (involuntary/mandatory) detention/commitment (through the civil court- see note) for residential treatment of alcoholism/drug addiction
Comparator	no treatment mandatory treatment as outpatient/community-based treatment voluntary inpatient/residential treatment
Outcomes	▪ addiction status on discharge or follow-up (e.g., length of treatment, drug-free status) ▪ short-term health outcomes (e.g., sobriety during care) ▪ long-term health outcomes (e.g., reduced co-morbidities, quality of life) ▪ life expectancy ▪ non health outcomes (e.g., life satisfaction, social functioning and interaction, vocational status) ▪ outcomes for carers/family/ whānau

Note: Offenders, who are legally coerced into having treatment by actions of the criminal justice system (CJS), as a consequence of their offending, are to be excluded.

It is important to note that studies not designed to answer the research question were deliberately excluded.

In defining chronic alcoholism and drug addiction, the literature commonly refers to DSM criteria (*Diagnostic and statistical manual of mental disorders : DSM-IV-TR*, 2000) where *chemical (drug) dependence* is defined as a maladaptive pattern of drug use, leading to impairment or distress, presenting as three or more of the following

in a 12-month period: (1) tolerance to the drug's actions, (2) withdrawal, (3) drug is used more than intended, (4) there is an inability to control drug use, (5) effort is expended to obtain the drug, (5) important activities are replaced by drug use, (6) drug use continues despite knowledge of a persistent physical or psychological problem (DSM-IV TR, 2000). Whilst clinically evaluating drug dependence using these precise criteria was not required for studies selected for inclusion in the review, this definition is included here as a general guide to the patient group of relevance to the review. How patient groups are defined and included in individual studies is reported in the review's data extraction tables.

Table 3 Nature of the evidence

Publication type	Studies published in the English language, relating to studies of human beings (i.e. not animal studies), including primary (original) research published as full original reports and secondary research (systematic reviews and meta-analyses) appearing in the published literature. Papers for which an abstract is not available for review via the bibliographic database are excluded.
Study design	Those that provide at least Level III-3 evidence according to the National Health and Medical Research Council (NHMRC) interim levels of evidence for intervention research questions (2005). Non-comparative evidence will be excluded in this review.

Literature search

A systematic method of literature searching and selection was employed in the preparation of this review. Searches were limited to English language material. The searches were completed on 18, September, 2007. Therefore, studies published (or entered on the databases) after this date were not eligible for inclusion in the systematic review.

The following databases were searched:

Bibliographic databases

- Embase
- Medline
- Psycinfo
- CSA social services abstracts
- CSA sociological abstracts

Review databases

The following were searched through the Cochrane Library: http://www3.interscience.wiley.com/cgi-bin/mrwhome/106568753/HOME:

- Cochrane Database of Systematic Reviews
- Cochrane Central Register of Controlled Trials
- Database of Abstracts of Reviews of Effectiveness
- Health Technology Assessment database
- NHS Economic Evaluation database

HTA Groups

- INAHTA website database: http://www.inahta.org/Search2/?pub=1
- MSAC: http://www.msac.gov.au/

- ANZHSN: http://www.horizonscanning.gov.au/
- NZHTA: http://nzhta.chmeds.ac.nz/
- NICE: http://www.nice.org.uk/
- AHRQ/USPSTF: http://www.ahrq.gov/
- CADTH: http://www.cadth.ca/

Clinical Practice Guidelines

- National Guideline Clearing House database: http://www.guideline.gov/

The reference lists of included papers and some recently published and highly relevant narrative papers were scanned to identify any peer-reviewed evidence that may have been missed in the literature search. The Web of Science was also searched to identify any relevant papers citing the pivotal references. Hand searching of journals, contacting of manufacturers, or contacting of authors for unpublished research was not undertaken in this review. However, some authors were contacted in the course of the research to clarify aspects of their search strategies (see Acknowledgements). Whilst grey literature and unpublished material such as conference abstracts were not included in the evidence review, they may be referred to in background sections.

Search terms were searched for as keywords, exploded where possible, and as free text within the title and/or abstract, in the Embase and Medline databases. Variations on these terms were used for Cochrane library and other databases modified to suit their keywords and descriptors. The search terms, search strategy and citations identified are presented in Table 4.

Table 4 Search strategy

Database	Search limits	Search no.	Search terms	Citations
EMBASE + MEDLINE (combined)	1966 - 18 Sept, 2007, English language, human studies, Explode, keywords, free text	1	compulsor* OR mandatory OR mandated OR enforced OR obligatory OR "without consent" OR coerc* OR "non?voluntary" OR involuntary OR "persuasive communication"	26,010
		2	"detention" OR treat* OR therap* OR "therapeutic community" OR care OR "in?patient" OR institution* OR facility OR program* OR resident* OR "sober living" OR "rehabilitation"	3,559,823
		3	"alcoholism" OR "alcoholic" OR "drug dependence" OR "drug abuse" OR "cocaine dependence" OR "heroin dependence" OR "narcotic dependence" OR "morphine addiction" OR "opiate addiction" OR "cannabis addiction" OR "lysergide" OR "multiple drug abuse" OR "substance abuse"	118,952
		4	#1 AND #2 AND #3	852
Cochrane Library	Search completed 18 Sept, 2007, considered free text and keywords	1	compulsor* OR mandatory OR mandated OR enforced OR obligatory OR "without consent" OR coerc* OR "non?voluntary" OR "persuasive communication"	1872
		2	"detention" OR treat* OR therap* OR "therapeutic community" OR care OR "in?patient" OR institution* OR facility OR program* OR resident* OR "sober living" OR "rehabilitation"	351,763
		3	"alcoholic" OR "alcoholism" OR "drug abuse" OR "cocaine-related disorders" OR "heroin dependence" OR "morphine dependence" OR "opioid-related disorders" OR "marijuana abuse" OR "substance abuse, intravenous" OR "phencyclidine abuse" OR amphetamine-related disorders"	5874
		4	#1 AND #2 AND #3	45
Psycinfo (from 1806) and CSA social services abstracts (from 1979) and CSA sociological abstracts (from 1952) (combined)	Search completed 18 Sept, 2007, considered free text and descriptors English only Journals only	1	compulsor* OR mandatory OR mandated OR enforced OR obligatory OR "without consent" OR coerc* OR "non?voluntary"	14,277
		2	"detention" OR treat* OR therap* OR "therapeutic community" OR care OR "in?patient" OR institution* OR facility OR program* OR resident* OR "sober living" OR "rehabilitation" OR "residential care institutions" OR "treatment facilities"	593,712
		3	"alcoholism" OR "alcoholic" OR "alcohol abuse" OR "drug addiction" OR "drug abuse" OR "drug dependency" OR "inhalent abuse" OR "polydrug abuse" OR "heroin addiction" OR "substance abuse" OR "cocaine addiction" OR "morphine addiction" OR "opiate addiction" OR cannabis addiction" OR lysergide OR "narcotic dependence"	57,692
		4	#1 AND #2 AND #3	427
Sub-total after exclusion of duplicate citations				1113
Bibliographies of included studies, websites, guidelines, web of science, other sources				8
Non duplicate citations				1121

Note that this doesn't include reports and papers that were retrieved or provided by the Ministry of Health purely as background material

Assessment of study eligibility

Studies were selected for appraisal using a two-stage process. First, titles and abstracts (where available) identified from the search strategy were scanned and excluded as appropriate. Second, the full text articles were retrieved for the remaining studies and selected for inclusion and appraisal in the review if they fulfilled the study selection criteria outlined below. Eligibility of studies identified by the database search was initially assessed by the second author, and then reviewed by the first author, based on title or abstract.

As mentioned earlier, non-English publications were excluded at the database searching stage. Citations were excluded for the following reasons:

1. Not a clinical study: including non-systematic/narrative reviews, case reports, animal studies, short notes, letters, editorials, conference abstracts, in-vitro studies, studies not deemed appropriate to the research question or nature of review.
2. Wrong intervention: does not include the correct intervention/s, such as studies where one group is not clearly mandatory/compulsory/involuntary detention or committal. And so studies of coercion where a patient has an alternative choice to treatment are to be excluded, such as those offered treatment as alternatives to having children removed from their custody, job loss, etc. Studies which do not offer treatment which is residential/inpatient as the main intervention of interest would also be excluded.
3. Wrong comparator: does not include the correct comparator/s. Comparators can be no treatment, mandatory community-based (outpatient) treatment, or involuntary residential treatment. Voluntary community-based treatment is not a valid comparator for this review as it would not be clear whether any differences in outcome were due to difference in voluntary/involuntary status or site of treatment (inpatient/outpatient).
4. Wrong population/setting: does not include the correct patient group or civil setting, such as detention ordered within the criminal justice system. That is, studies of offenders who are legally coerced into having treatment as alternatives to legal consequences such as conviction, jail time, parole etc. are to be excluded (for example, drug court arrest-referral schemes, deferment of indictment or punishment in favour of treatment, pre-release prison based treatment, post-release treatment in return for shorter sentence). Note that offenders or people with an offending history are not excluded per se, only those who are coerced or mandated for treatment through a criminal justice system process resulting from their offending.
5. Wrong outcomes: does not include the results relating to at least one of the identified outcomes of interest, measured post-treatment.
6. Non-comparative studies.

There were 1121 non-duplicate studies identified by the search strategy (as detailed in Table 4 above). As detailed in Table 5, 192 full text articles were eligible for retrieval after excluding studies from the search titles and abstracts. Of full papers retrieved, 189 did not fulfil the inclusion criteria. Therefore, four articles were fully appraised and are included in this review (listed in Appendix B). All excluded articles are presented in Appendix C, annotated by reason for exclusion based on the exclusion criteria detailed above. Reasons are presented hierarchically such that the

first reason in the list that applied is reported. Other publications cited in this report (including those providing background) are presented in the References.

Table 5 Application of selection criteria to citations

Exclusion criteria	Number
Total citations identified	1121
Excluded from review of title/abstract: Not a clinical study Wrong intervention/comparator Wrong indication/population Wrong outcomes Non-comparative studies	929 348 559 21 1 0
Full papers (retrieved as full text) reviewed:	192
Excluded from review of full paper: Not a clinical study Wrong intervention/comparator Wrong indication/population Wrong outcomes Non-comparative studies	188 121 30 28 4 5
Total included citations	4

Note: definitions of these exclusions are provided in the text above

Appraisal of included studies

Dimensions of evidence

The aim of this review was to find the highest quality evidence to answer the clinical question. In accordance with NHMRC guidance, the following dimensions of evidence were reviewed for each of the included studies (Table 6). It is important to recognise that the value of a piece of evidence is determined by all of these dimensions, not just the level of evidence.

Table 6 NHMRC Dimensions of evidence

Dimension	Reviewers definition
Strength of the evidence Level (see Table 7 below)	The study design used, as an indication of the degree to which bias has been eliminated by the design alone. The levels reflect the effectiveness of the study design to answer the research question.
Quality	The methods used to minimise bias within an individual study (i.e. other than design *per se*).
Statistical precision	An indication of the precision of the estimate of effect reflecting the degree of certainty about the existence of a true effect, as opposed to an effect due to chance.
Size of effect	Determines the magnitude of effect and whether this is of clinical importance.
Relevance of evidence	The considers the relevance of the study to the specific research question and the context in which the information is likely to be applied, with regard to a) the nature of the intervention, b) the nature of the population and c) the definition of the outcomes.

The evidence was assessed according to the dimensions outlined in Table 6 above. Each study was also assigned a level of evidence in accordance with the NHMRC (2005) interim levels of evidence below.

Table 7 NHMRC interim levels of evidence

Level	Intervention
I *	A systematic review of level II studies
II	A randomised controlled trial
III-1	A pseudorandomised controlled trial (i.e. alternate allocation or some other method)
III-2	A comparative study with concurrent controls: • Non-randomised, experimental trial † • Cohort study • Case-control study • Interrupted time series with a control group
III-3	A comparative study without concurrent controls: • Historical control study • Two or more single arm study ‡ • Interrupted time series without a parallel control group
IV	Case series with either post-test or pre-test/post-test outcomes

Table notes

* A systematic review will only be assigned a level of evidence as high as the studies it contains, excepting where those studies are of level II evidence. Systematic reviews that contained both RCTs and lower levels of evidence were annotated level I/III-3 (the latter reflecting the same level as the non-RCT papers that were included within the review).

† This also includes controlled before-and-after (pre-test/post-test) studies, as well as indirect comparisons (i.e. utilise A versus B and B versus C, to determine A versus C).

‡ Comparing single arm studies i.e. case series from two studies.

Note: When a level of evidence is attributed in the text of a document, it should also be framed according to its corresponding research question e.g. level II intervention evidence; level IV diagnostic evidence; level III-2 prognostic evidence.

Source: National Health and Medical Research Council (2005)

The highest level of evidence available is a systematic review of randomised controlled trials, which are considered the study type least subject to bias. Individual randomised controlled trials also represent good evidence. However, comparative observational studies such as cohort and case-control studies or non-comparative case series may often be more readily available (the latter are not included in the current review). Such studies are often conducted early in the development of a technology, or to detect rare outcomes or outcomes which develop long after an exposure (for example, cancer, and cardiovascular disease). Nevertheless, these lower levels of evidence remain subject to considerable bias. Systematic reviews that contained both RCTs and lower levels of evidence were annotated level I/III-3 (the latter reflecting the same level as the non-RCT papers that were included within the review.

Even within the levels of evidence stated above there is considerable variability in the quality of evidence. In accordance with NHMRC guidelines, it was necessary to consider the quality of each of the included studies. The characteristics and quality of each included study were assessed using a number of quality criteria, as shown in Table 8, each criteria rated adequate, partial, or inadequate, and studies/reviews rated overall as being of good, fair or poor quality.

Table 8 Quality criteria for different levels of evidence

Study type	Quality criteria
Systematic review	Was a clinical question clearly defined? Was an adequate search strategy used? Were the inclusion criteria appropriate and applied in an unbiased way? Was a quality assessment of included studies undertaken? Were the characteristics and results of the individual studies appropriately summarised? Were the methods for pooling the data appropriate? Were sources of heterogeneity explored?
RCT	Was allocation to treatment groups concealed from those responsible for recruiting subjects? Was the study double-blinded? Were patient characteristics and demographics similar between treatment arms at baseline? Were all randomised participants included in the analysis? Were the statistical methods appropriate? Were any subgroup analyses carried out?
Cohort	How were subjects selected for the 'new' intervention? How were subjects selected for the comparison or control group? Does the study adequately control for demographic characteristics, clinical features and other potential confounding variables in the study design or analysis? Was the measurement of outcomes unbiased (i.e, blinded to treatment group and comparable across groups)? Was follow-up long enough for outcomes to occur? Was follow-up complete and were there exclusions from analysis?
Case-control	How were the cases defined and selected? How were the controls defined and selected? Does the study adequately control for demographic characteristics and important potential confounders in the study design or analysis? Was measurement of exposure to the factor of interest (e.g. the new intervention) adequate and kept blinded to case/control status? Were all selected subjects included in the analysis?

Adapted from NHMRC (2000)

Data extraction

Data was extracted onto specifically designed data extraction forms, and included information regarding study design, patient characteristics, details of intervention, relevant outcomes, study quality and relevant results. Data was extracted by one reviewer.

Unless otherwise specified, the data that was most adjusted for confounders and/or multiple comparisons are reported. Furthermore, where subgroup analyses are available, these were reported if they are deemed relevant.

Completed data extraction forms containing detailed information regarding study characteristics and quality, together with a brief summary of study results, can be found in Appendix E.

Data synthesis

In addition to the level and quality of evidence of individual studies, the review will consider the body of evidence in total. This will involve consideration of the volume of evidence and its consistency.

For systematic reviews with analyses involving evidence from RCTs, a meta-

analysis should be performed when appropriate using the methodology of the Cochrane Collaboration (Mulrow & Oxman, 1997). However, this would only be undertaken if the trial characteristics and patient characteristics are sufficiently homogeneous in order to justify a meta-analysis. Quantitative pooling may not be possible for other research questions or levels of evidence. Data from observational studies is subject to considerable heterogeneity and to biases that vary between studies.

The review will present the statistical precision of the estimated effect size (pooled if possible), together with a discussion of its clinical significance. Finally, the review will consider the relevance of the evidence, both with regard to the applicability of the patient population and the intervention, as well as the relevance to the New Zealand health care setting.

Limitations of the review methodology

This review used a structured approach to review the literature. However, there were some inherent limitations with this approach[1]. All types of study are subject to bias, with systematic reviews being subject to the same biases seen in the original studies they include, as well as biases specifically related to the systematic review process. Reporting biases are a particular problem related to systematic reviews and include publication bias, time-lag bias, multiple publication bias, language bias and outcome reporting bias (Egger, Dickersin, & Davey Smith, 2001). A brief summary of the different types of reporting bias is shown in Table 9. Other biases can result if the methodology to be used in a review is not defined *a priori* (that is, before the review commences). Detailed knowledge of studies performed in the area of interest may influence the eligibility criteria for inclusion of studies in the review and may therefore result in biased results. For example, studies with more positive results may be preferentially included in a review, thus biasing the results and overestimating treatment effect.

[1] A discussion of the methodological limitations of the current evidence base is presented in the Discussion section.

Table 9 Reporting biases in systematic reviews

Type of bias	Definition and effect on results of review
Publication bias	The publication or non-publication of research findings. Small, negative trials tend not to be published and this may lead to an overestimate of results of a review if only published studies are included.
Time-lag bias	The rapid or delayed publication of research findings. Studies with positive results tend to be published sooner than studies with negative findings and hence results may be overestimated until the negative trials 'catch up'.
Multiple publication bias	The multiple or singular publication of research findings. Studies with significant results tend to be published multiple times which increases the chance of duplication of the same data and may bias the results of a review.
Citation bias	The citation or non-citation of research. Citing of trials in publications is not objective so retrieving studies using this method alone may result in biased results. Unsupported studies tend to be cited often which may also bias results.
Language bias	The publication of research findings in a particular language. Significant results are more likely to be published in English so a search limited to English-language journals may result in an overestimation of effect.
Outcome reporting bias	The selective reporting of some outcomes but not others. Outcomes with favourable findings may be reported more. For example, adverse events have been found to be reported more often in unpublished studies. This may result in more favourable results for published studies.

Adapted from Egger et al. (2001).

Some of these biases are potentially present in this review. Only data published in peer-reviewed journals is included. No attempt was made to include unpublished material, as such material typically has insufficient information upon which to base quality assessment, and it has not been subject to the scrutiny of the peer-review process. In addition, the search was limited to English-language publications only; therefore language bias is a potential problem also. Outcome reporting bias and inclusion criteria bias are unlikely as the reviewers had no detailed knowledge of the topic literature, and the methodology used in the review and the scope of the review was defined *a priori*.

The review scope was developed with the assistance of Ministry of Health staff to support policy and purchasing relevant to New Zealand. All studies included in this review were conducted outside New Zealand, and therefore, their generalisability to the New Zealand population and context may be limited and needs to be considered. This review was confined to an examination of the efficacy of the interventions and did not consider ethical or legal considerations associated with these interventions.

The studies were initially selected by examining the abstracts of these articles. Therefore, it is possible that some studies were inappropriately excluded prior to examination of the full text article. However, where detail was lacking ambiguous papers were retrieved as full text to minimise this possibility. Reasons for exclusion for every article included in the review are presented in Appendix C for transparency. Data extraction and critical appraisal was performed by a single reviewer. For a detailed description of interventions and evaluation methods, and results used in the studies appraised, the reader is referred to the original papers cited.

This review has greatly benefited from the advice provided by the Working Group

and has been reviewed by HSAC directors.

Evaluation of economic implications

In addition to the review of the clinical evidence, the current review included (i) a systematic search of the published literature to identify any relevant economic evaluations and (ii) a qualitative discussion of the incremental costs and outcomes likely to be associated with compulsory relative to voluntary residential treatment for alcohol and drug addiction.

As the search strategy for this review did not include study type limits, an additional economic search strategy was not required. Instead, the search strategy was re-run on 5 November 2007 for Embase and Medline databases combined with an additional search string to identify a sub-set of economic papers. This string was:

('cost effectiveness analysis'/exp OR 'cost effectiveness analysis') OR ('economic evaluation'/exp OR 'economic evaluation') OR ('health economics'/exp OR 'health economics') OR ('cost minimization analysis'/exp OR 'cost minimization analysis') OR ('cost minimisation analysis') OR ('cost utility analysis'/exp OR 'cost utility analysis') OR ('quality adjusted life year'/exp OR 'quality adjusted life year') OR ('qaly'/exp OR 'qaly') OR ('life year saved')

Results

Overview

Methodological information and results extracted from included studies are presented below. More detailed information is available in the data extraction tables presented in Appendix E or in the original papers. Only data relevant to the current review is presented in any detail. Of the four papers identified as eligible for inclusion in the review, all were systematic reviews.

Systematic reviews: characteristics

The search strategy identified four relevant reviews. Study characteristics are described in Table 10, and key results and authors' conclusions presented in Table 11.

Four reviews were identified as eligible for inclusion in terms of having overlapping scope with the current review, and were published since 2002 with two published in 2007. Two reports undertook systematic review processes of good quality, using clearly defined clinical question/s, comprehensive search strategies, appropriately applied selection criteria, and defined quality assessment procedures. The National Institute for Health and Clinical Excellence (NICE) review (2007) undertaken by the National Collaborating Centre for Mental Health was a guideline on drug misuse from the UK. A sub-topic within this review related specifically to residential/inpatient legally coerced treatment interventions across the spectrum of compulsory treatment. The authors reported on evidence from a single systematic review (Wild et al., 2002), which was also included in the current review.

The Wild et al. (2002) review from Canada was a systematic review of good quality, published as a Journal article, and considered compulsory substance abuse treatment broadly. Wild et al. (2002) reported on 18 quantitative comparative and longitudinal studies. Eight related to legal mandates (mainly involving offenders being mandated or coerced to treatment through the criminal justice system), five were formal mandates (via coercion outside the criminal justice system, e.g., via the employer, welfare system), three were informal mandates (family, group persuasion), and two were mixed mandates (employers, informal family, court mandated). None were eligible for inclusion in the current review as original studies, primarily because they related to coercion or offenders identified through the CJS.

The other two included reviews were from Australia. Pritchard et al. (2007) was a discussion document that included a review of Australian legislation, key informant interviews, and reference group consultation. Whilst it did refer to database searching for its literature review, its quality as a systematic review is poor, though it should be noted that it was presented as a "review of recent reviews" in the context of a broader report. Three reviews were identified by Pritchard et al. (2007) in their literature review: two systematic reviews of studies of coercion for offenders (Klag et al., 2005; Stevens et al., 2005), and a narrative review by Wild et al. (2006). All were excluded from the current review due to scope or being a narrative review.

The fourth appraised review, also from Australia, was by Swan and Alberti (2004), of Victoria's Turning Point. Similarly to Pritchard et al. (2007), it was primarily not intended as a systematic review and was of fair/poor quality in terms of the search

strategy and assessment methods. The report's objective was to review the Alcoholics and Drug-dependent Person Act (ADDPA) 1968 (legislation similar to New Zealand's ADA), and it consulted stakeholders as well as conducting a literature review, with a focus on civil commitment (compulsory treatment of non-offenders). Two case series studies (without comparators) were briefly described (Bourquin-Tieche et al., 2001; Steiner et al., 1995), both excluded from the current review due to study design.

Systematic reviews: results

The four reviews included for appraisal identified results primarily from the offender literature, involving coerced treatment through actions of the criminal justice system, and from studies conducted in the U.S.

Wild et al.'s (2002) high quality review (appraised in the current review and also reviewed in the NICE systematic review relevant to compulsory treatment) described 18 longitudinal studies of compulsory treatment. None of these were eligible for inclusion in the current review (due to intervention and population differences). The reviewers reported that mandated treatment generally demonstrated better outcomes in terms of treatment *process* (uptake of treatment following referral). Results indicated more equivocal results for retention rates with 6/11 studies reporting higher participation for clients receiving compulsory treatment than those receiving non-compulsory treatment. In terms of substance use *outcomes*, two of eight studies found superior outcomes for clients receiving compulsory treatment compared with voluntary treatment, whilst the other six studies reporting no difference in benefit.

With respect to the body of research that exists, which almost exclusively relates to offender populations and/or coercive means of offering treatment, Wild et al. (2002) noted that most empirical research had employed non-equivalent comparison groups at baseline. And so, those receiving mandatory treatment were more likely to be offenders coerced into treatment as a result of their offending and identification through the criminal justice system. Such population differences could bias results at outcome. The NICE (2007) review argued that any negative outcomes for legally mandated treatments could be due to the nature of the difficulties of those entering mandated treatment when compared with those in voluntary treatment, rather than the compulsory nature of their referral *per se*.

Pritchard et al.'s (2007) review reported on two systematic reviews specifically focussed on offender studies, (Klag et al., 2005, Stevens et al., 2005). Reported findings included that most (offender) research has so many methodological weaknesses that results are inconclusive, with compulsory treatment being considered sometimes effective in reducing alcohol and drug use and crime in some people. Longer treatment has been consistently associated with positive treatment outcomes in the offender literature, however, recommended treatment periods suggested have varied from three to 12 months.

Commenting specifically on research relating to civil commitment of non-offenders, Pritchard et al.'s (2007) review concludes that long term effectiveness has not been evaluated, with only some, mainly anecdotal, evidence suggesting that civil commitment for short periods can be effective in *harm minimisation.* The most relevant (to this review) but least robust findings identified came from two case

series studies identified by Swan and Alberti's (2004) review relating specifically to civil commitment. Both were case series studies with no comparator and as level IV evidence were excluded from inclusion in the current review. Bourquin-Tieche et al. (2001) reported on 17 consecutive cases of civil commitment in a Swiss alcohol unit, with follow-up data on 10 clients, 18 months post-commitment, eight of whom reported remaining abstinent, and most reporting that the intervention was, in retrospect, justifiable. Another case series described was by Steiner et al. (1995) which reported that 60% of the compulsory treatment clients were drinking alcohol six months post intervention. Swan and Alberti (2004) argued that from such data, little could be concluded pertaining to the effectiveness of civil commitment.

Body of evidence

Of the four systematic reviews identified, only two were of good quality. However neither appraised reviews, nor the current literature search, identified any original study eligible for inclusion in this review. That is, no original study specifically relevant to New Zealand ADA practice (i.e. compulsory residential treatment for non-offenders) was of study quality above NHMRC level IV (non comparative case series studies, see Table 7).

The volume of reliable evidence on compulsory treatment of non-offenders is therefore non-existent. Reviews of the field have consistently reported the lack of research in these populations, and conclusions have tended to have been drawn from expert opinions, stakeholder interviews, case studies, and largely anecdotal reports. It is therefore not possible to draw firm conclusions from the current evidence base about whether compulsory residential treatment is likely to be more or less effective than involuntary treatment in non-offender populations of people who chronically misuse alcohol or drugs.

There is literature identified in the systematic reviews relating to compulsory treatment of offenders identified through processes of the criminal justice system. Comment on this literature is reliant on two good quality systematic reviews and two poorer quality reviews, as original studies were not eligible for inclusion in the current review. Research suggests that compulsory treatment can sometimes be effective in reducing alcohol and drug use for some people, and no evidence of harm from compulsory treatment was identified. However, the evidence is weak and the studies are methodologically flawed. The study populations are heterogeneous, particularly in terms of the perceptions of coercion experienced by people who are admitted to treatment either voluntarily or involuntarily, and reviewers have commented that studies tend to have non-equivalent groups at baseline. The evidence is therefore weak and unlikely to be applicable to non-offenders or to clients admitted to treatment through Section 9 of the ADA Act (1966) in New Zealand, or similar routes of civil commitment internationally.

Table 10 Systematic reviews: characteristics

Citation [Level of evidence] Country	Search strategy	Number and type of included studies	Scope (Intervention/ comparator)	Outcomes of relevance	Quality of review
National Institute for Health and Clinical Excellence (2007) [Level I] UK	Searched: MEDLINE, EMBASE, CINAHL, HMIC, PsycINFO, Cochrane Library to May 2006, Table of Contents to November 2006.	1 SR: Wild et al. (2002)	Considered studies of legally mandated or compulsory alcohol and drug treatment.	abstinence, alcohol and drug misuse	Good
Pritchard et al. (2007) [Level I] Australia	Searched: Pubmed and internet.	3 reviews: Klag et al. (2005) – SR (studies of offenders) Stevens et al. (2005) – SR (studies of offenders) Wild (2006) - review	Reviews of studies of compulsory treatment (ranging from involuntary to coercion), for offenders and for non-offenders.	Alcohol and drug use, crime, motivation to change (drug use) behaviour	Poor
Swan and Alberti (2004) [Level IV] Australia	Searched CINCH, AOIS, DRUG, NCJRS, checked reference lists of retrieved papers, English language only.	2 case series studies Bourquin-Tieche et al. (2001) Steiner et al. (1995)	Voluntary, involuntary, and mandated A&D treatment.	abstinence, alcohol/drug misuse	Fair/Poor
Wild et al. (2002) [Level I] Canada	Searched Medline, PubMed, Embase, and PsycINFO, limited to human studies and English language and papers published 1988 or later. Checked reference lists of four recent reviews.	18 comparative longitudinal studies: Desland (1994); Desmond & Maddux (1996); Fugelsatd et al. (1998); Heale (2001); Bavon (2001); Berkowitz et al.; O'Loughlin (1996); Vito (1998); Batel et al. (1995); Walsh et al. (1991); Brizer et al. (1990); Lawental et al. (1996); Nelson et al. (1996); Kofoed (1989);Loneck et al. (1996); Liepman et al. (1989); Watson (1989)	Compulsory substance abuse treatment	Systematically collected qualitative and quantitative outcomes. Excluded anecdotal data, and economic cost estimates.	Good

Abbreviations: SR: systematic review

Table 11 Systematic reviews: results

Citation	Results	Author conclusions
National Institute for Health and Clinical Excellence (2007)	Wild et al. (2002) systematic review (appraised in current review). Mandated treatment generally demonstrated better outcomes in terms of treatment process (uptake of treatment following referral and retention in treatment). Compulsory treatment not superior to voluntary treatment in terms of reductions in criminal behaviour or substance misuse. Only 2 of 6 studies demonstrated lower recidivism rates for compulsory treatment relative to non-compulsory treatment; 3 of 6 studies showed no difference in recidivism between compulsory and non-compulsory treatment. Only 1 of 8 studies examining alcohol/drug use reported better outcomes for compulsory treatment relative to non-compulsory treatment; 6 of 8 studies reported no difference.	Notes limited research on the topic, mostly from the USA. Argues that research suggests that "the more negative outcomes found for legally mandated treatments may be explained by the nature of the difficulties of those entering mandated treatment when compared with those in voluntary treatment, rather than its compulsory nature" (p. 210). Suggests that access to and choice of treatment should be the same whether alcohol/drug misusers participate in treatment voluntarily or are legally required to do so.
Pritchard et al. (2007)	Klag et al. (2005) (excluded from current review, offender studies) Most research has so many weaknesses that results are inconclusive. Compulsory treatment can sometimes be effective in reducing alcohol/drug use and crime in some people. Stevens et al. (2005) (excluded from current review, offender studies) Non-English research presented less positive findings than English. Length of treatment is a consistent predictor of positive treatment but recommended periods vary from 3 to 12 months. One study found that legally coerced offenders were at least as motivated as voluntary ones. Mixed views on relationship between legal coercion & motivation. Wild (2006) (excluded from current review, narrative review): Dearth of literature on level of coercion experienced by individuals and its relationship with motivation to change. Informal coercion from family members may be more "compelling" than formal mechanisms, research has focused on legal forms of coercion.	Most research has examined diversion programmes. Indicators chosen opportunistically. Civil commitment (i.e. non-offender populations) effectiveness in achieving long-term behaviour change has not been evaluated. Some, mainly anecdotal, evidence that civil commitment for short periods can be effective in harm minimisation. Compulsory treatment can sometimes be effective in reducing alcohol/drug use and crime for some people, but the evidence is weak.
Swan and Alberti (2004)	Relating to civil commitment (excluded from current review, case series): Bourquin-Tieche et al. (2001): Follow-up data on 10/15 clients, 18 months post-commitment, suggesting 8 were abstinent (self report) and most considered the intervention to be justifiable. Steiner et al. (1995). 60% compulsory treatment clients were drinking alcohol six months post intervention.	Little can be concluded from the limited research available specifically pertaining to the effectiveness of civil commitment.

Table 11 Systematic reviews: results *(continued)*

Citation	Results	Author conclusions
Wild et al. (2002)	Of 18 comparative longitudinal studies (none eligible for current review): 4/5 studies examining referral patterns reported higher entry rates for clients receiving compulsory treatment than non-compulsory treatment. 6/11 treatment retention studies reported higher participation rates (i.e. lower drop-out) for clients receiving compulsory treatment than non-compulsory treatment. 2/8 studies reported better alcohol and drug outcomes for compulsory treatment compared with non-compulsory treatment, with 6 studies reporting no difference.	In general the majority of treatment-oriented measures showed benefits of compulsory treatment relative to non-compulsory treatment. However noted methodological limitations including that most empirical research employed non-equivalent comparison groups at baseline.

Economic considerations

Economic evaluation literature review

The economic literature search identified 56 economic papers, none of which were eligible for inclusion as an economic evaluation relevant to the current review. None considered the cost-effectiveness of compulsory residential treatment of alcohol/drug addiction amongst non-offenders, relative to voluntary residential treatment, compulsory outpatient treatment or no treatment.

Compulsory residential treatment (Section 9) versus voluntary residential treatment (Section 8)

The two providers of compulsory residential treatment in New Zealand, Nova Trust and the Salvation Army Bridge Programme, were contacted for cost information relating to the main comparators: those receiving residential treatment admitted through Section 8 referrals, and those admitted through Section 9 referrals. Questions included the following:

- what is the real, full cost per person, per day for both groups
- what is the average length of stay for both groups, and
- specifically whether there is any difference in treatment period between the two groups.

Nova Trust (Joy Green, *personal communication,* 13 November 2007) suggested that it was difficult to determine the precise real costs but that their current bed rate charged to the Ministry of Health was $95.38 + GST per client, per night, irrespective of route of admission (section 8 or 9). In addition to contract payments from the Ministry of Health, Work and Income New Zealand contributions may apply (for example regular residential support money, sickness benefits, etc), and also, some funds are generated by the work programme in which clients participate. They do not receive donations. It was stated that there is no difference in the programme offered or the cost of treatment provided based on referral route.

The programme at NOVA is of six months duration regardless of entry conditions and there is no difference in the programme offered or the cost of treatment provided based on referral route. There is no difference in the amount charged based on completion of the programme or if the client is discharged early.

At the Salvation Army Bridge Programme, it was also reported that there were no differences in treatment approaches for Section 8 versus Section 9 clients. The current contract payments from the Ministry of Health vary slightly between the Christchurch, Wellington and Auckland centres but average at $53.70 + GST per client, per night for approximately 21,000 bed nights per year (Michelle Judge, personal communication, 11 March 2008).

Compulsory outpatient treatment rarely occurs in New Zealand at present (Allen & Clarke, 2003b). If it were to be used it is probable that the cost of would be lower than that of compulsory residential treatment. However, if compulsory residential treatment is more effective than compulsory outpatient treatment, then cost-offsets will arise from reduction in the costs associated with alcohol abuse. These costs are considerable and span direct and indirect costs to the health sector and beyond (see below). The extent of cost-offsets that may be realised by compulsory residential

treatment over compulsory outpatient treatment would be dependent upon the magnitude of the incremental treatment effect between the two approaches. At present, there is insufficient evidence to quantify this effect.

Compulsory residential treatment (Section 9) versus no treatment

The cost of compulsory residential treatment is higher than no treatment (see cost of compulsory residential treatment above). However this may be largely offset by a reduction in the costs associated with alcohol abuse (see below). At present it is not possible to quantify the extent of this offset, and the incremental treatment effect of compulsory residential treatment over no treatment is not known.

Qualitative discussion of incremental cost and outcomes

To assess the cost-effectiveness of a health care intervention relative to its comparator, it is necessary to consider the incremental costs relative to the incremental outcomes. With regard to costs, one must not only consider the cost of the intervention itself, but also the impact upon related costs to the health care system, other government departments, and society more generally. If a new intervention results in a reduction in these costs relative to the comparator (for example, reduced hospitalisation) these are referred to as cost offsets. Typically these will then offset, or partially offset, the usually higher cost of the new intervention. Similarly, the net health outcome must be inclusive of positive and negative components (for example, chemotherapy may be associated with a period of reduced quality of life).

In the current context, successfully treating a patient's alcohol/drug addiction would result in many cost offsets by reducing the direct and indirect costs associated with alcohol/drug addiction that would otherwise have been incurred. When considering potential cost offsets that could be realised if a detained alcoholic/drug addict were successfully treated for their addiction, it is important to consider the breadth of the costs associated with alcohol/drug addiction in New Zealand, both with respect to direct and indirect costs.

For example, direct health care costs associated with alcohol abuse include treatment of alcoholism *per se* (if this is sought by the patient), treatment of alcohol-related trauma and alcohol-related disease. Trauma medical costs could include GP attendance, ambulance transport, casualty attendance, pharmaceuticals, hospital admission, outpatient care and rehabilitation. Similarly, treatment of alcohol-related chronic diseases such as cirrhosis, pancreatitis, chronic gastritis, upper-gastrointestinal cancers and vascular disease places considerable economic burden upon the health system. It is important to remember that these costs are not only incurred by the alcohol-consumer themselves. For example, alcohol-abuse costs are also incurred by assault or motor vehicle accident victims and children born with foetal alcohol syndrome. The latter may require specialist neo-natal care, hearing aids and residential care due to intellectual impairment.

Rayner and Chetwynd (1987) estimated that 7.8% of hospital operating costs in New Zealand were attributable to alcohol consumption (including both trauma and disease), however a more recent publication provides a somewhat lower estimate of 2.7% (Devlin, Scuffham, & Bunt, 1997). When the total societal cost of alcohol estimates of Devlin et al, 1997 are expressed relative to NZ GDP, this equates to

1.5–5.7% of GDP[2]. This is broadly comparable to estimates in the international literature for France (1.4%, Fenoglio, Parel, & Kopp, 2003), Scotland (1.5%[3], Varnay & Guest, 2002) and Germany (1.2%, Konnopka & König, 2007).

The direct costs of alcohol use reach beyond the health care sector. Alcohol-related costs are incurred by the police and fire services, the justice, education and social welfare systems, and the insurance sector. All authors agree that these non-healthcare direct costs are considerably greater than the healthcare direct costs (Devlin et al., 1997; Fenoglio et al., 2003; Konnopka & Konig, 2007; Varney & Guest, 2002). Indirect costs include loss of productivity and increased absenteeism whilst alive and lost productivity due to premature death. Devlin et al. (1997) estimate a range of indirect costs from $703 million to $3,389 million (1991 NZ dollars), depending upon the assumptions for excess unemployment rate, criminal alcohol aetiological factor and discounting. When considering the extent of potential cost offsets available, should an alcoholic be successfully treated during detention, it is important to recognise that a large proportion of the direct and indirect costs incurred above are incurred by binge-drinkers, rather than the chronic alcoholics who may be the subject of Section 8 or 9 detentions.

In addition to the cost offsets resulting from successful treatment of alcohol/drug addiction, there are considerable quality adjusted life years to be gained. Life years would be saved due to any reduction in mortality, irrespective of whether a result of trauma or disease. Furthermore, remaining years of life would benefit from an improved quality of life ('utility'). Estimates in the literature suggest that chronic alcoholics may have a utility weight as low as 0.59 (Günter, Roick, Angermeyer, & König, 2007). This represents a significant impairment in quality of life. One should also consider the quality of life of family members, work colleagues, carers and others. For example an estimate of the quality of life of children with foetal alcohol syndrome shows a utility weight of 0.47 compared to 0.93 amongst the general population[4] (Stade, Ungar, Stevens, Beyene, & Koren, 2006).

At present it is not possible to quantify the cost-effectiveness of compulsory residential treatment of alcohol/drug dependence relative to other treatment options due to insufficient clinical evidence. However, given the relatively low cost of the intervention, the high costs associated with alcohol/drug addiction, and the poor quality of life experienced by alcohol/drug addicts and their families/victims, this intervention has the potential to be highly cost-effective relative to less effective treatments or no treatment.

[2] Assumes GDP NZ$69,943 million in 1991
[3] GDP exclude Scottish oil revenues as these are distributed across the entire UK
[4] Mean TTO result = 0.59, mean British EQ-5D result = 0.74

Discussion

Summary of evidence for efficacy and harm

This report systematically reviewed the international evidence for the effectiveness of compulsory residential treatment of chronic alcohol and drug addiction in non-offenders. The search strategy identified a total of 1121 citations, and after consideration of titles and abstracts using the study selection criteria, 192 full papers were retrieved and scrutinised in detail for possible inclusion in the review. Of the 192 full papers, only four reviews were included for appraisal (National Collaborating Centre for Mental Health, 2007; Pritchard et al., 2007; Swan & Alberti, 2004; T. C. Wild et al., 2002). These reviews described results primarily drawn from the *offender* literature and no primary research paper met the study selection criteria for inclusion in the current review. Commonly, these primary studies included non-offenders *and* offenders. However, in most cases, it was essentially impossible to disentangle the non-offenders from the offenders, thus these primary research papers were excluded (primary research papers were also excluded for wrong comparators, wrong intervention, and/or non-comparative study designs). The main results from the four included reviews are summarised below, as noted, some of the results reported in the four included reviews relate to offender populations, and are not necessarily generalisable to New Zealand's non-offender population.

Treatment process and therapeutic outcomes

In their review of the Australian Drug-dependent Persons Act (ADDPA) 1968, Swan and Alberti (2004) reviewed two studies that did relate specifically to civil commitment (Note that both studies are excluded from this review due to level of evidence criteria). Firstly, Bourquin-Tieche et al.'s (2001) study, a small case series (n=17), reported on patterns of alcohol use and health related quality of life outcomes. The researchers concluded that "civil commitment not only saves the lives of endangered patients but could also be a health-promoting measure that may sometimes allow recovery from dependence" (p, 48). Steiner et al. (1995) performed a retrospective analysis of medical records and death certificates for 99 consecutive patients who had participated in civil court-ordered alcohol treatment. The authors reported that 34% of the participants were lost to follow-up, and of those remaining, 60% of the compulsory treatment clients were drinking alcohol six months post intervention. Swan and Alberti (2004) argued that from such data, little could be concluded pertaining to the effectiveness of civil commitment.

Reviewers reported that compared to voluntary treatment, mandated treatment within the criminal justice system (CJS) generally demonstrated better outcomes in terms of treatment *process* (that is, uptake of treatment following referral) (National Collaborating Centre for Mental Health, 2007; T. C. Wild et al., 2002). However, this does not necessarily prove useful if addressing the question of (therapeutic) treatment efficacy *per se*. In terms of substance use outcomes, only a small number of studies found superior outcomes for clients receiving compulsory treatment compared with voluntary treatment, whilst most studies reported no difference in benefit (T. C. Wild et al., 2002). Wild et al. (2002) suggest that "the more negative outcomes found for legally mandated treatments may be explained by the nature of the difficulties of those entering mandated treatment when compared with those in voluntary treatment, rather than its compulsory nature" (p. 210). Non-equivalent

comparison groups at baseline is an inherent methodological weakness characterising most studies in this field.

Stevens et al. (2005) (as reviewed in Pritchard et al., 2007) reviewed research of offender populations published in languages other than English. Stevens et al. (2005) reported a wider range of outcomes (including more negative effects) for compulsory treatment versus voluntary treatment than was found in the English literature. Again, the research was predominantly within the criminal justice system. Stevens et al. (2005) concluded that the international literature indicates that compulsory treatment does not inevitably produce worse outcomes than voluntary treatment, but that more methodologically sound studies were required.

Harm minimisation

Commenting specifically on research relating to civil commitment of non-offenders, Pritchard et al.'s (2007) review concludes that long term effectiveness has not been evaluated, with only some, mainly anecdotal evidence suggesting that civil commitment for short periods can be effective in harm minimisation. That is, to provide short term involuntary care in life threatening circumstances. While alcohol and drug abuse is generally viewed as a chronic condition, acute emergency situations do occur, and if compulsory civil commitment is one mechanism to prevent deaths and minimise harm, then it can be considered to play a useful role. Nevertheless, there may be other mechanisms that are as effective, or more so, as compared with compulsory treatment and this has not been robustly investigated.

Drug use and crime

Compulsory treatment has not been demonstrated to be superior to voluntary treatment in terms of reductions in criminal behaviour or substance misuse (National Collaborating Centre for Mental Health, 2007; T. C. Wild et al., 2002). However, Klag et al. (2005), in a review primarily of offender studies, note the consistent correlation between dependent drug use and criminal behaviour and conclude that compulsory treatment can *sometimes* be effective in reducing drug use and crime in *some* people, but the evidence base is weak.

Motivation, coercion and engagement with treatment

The complex interrelationships between motivation, coercion and treatment outcomes remains unclear and requires more investigation (A. Stevens et al., 2005 ; T. C. Wild et al., 2002). In offender populations, coercion has been shown to reduce motivation and the prospects of completing treatment in some studies; in others, legally coerced offenders were at least as motivated as voluntary offenders. Mixed views prevail on the relationship between legal coercion and motivation (for an overview see A. Stevens et al., 2006; A. Stevens et al., 2005 ; A. Stevens et al., 2005; T. Cameron Wild, 2006; T. C. Wild et al., 2006; T. C. Wild et al., 1998; T. C. Wild et al., 2002).

Summary of evidence for economic considerations

At present it is not possible to quantify the cost-effectiveness of compulsory residential treatment of alcohol/drug dependence relative to other treatment options due to insufficient clinical evidence. However, given the relatively low cost of the intervention, the high costs associated with alcohol/drug addiction, and the poor quality of life experienced by alcohol/drug addicts and their families/victims, this

intervention has the potential to be highly cost-effective relative to less effective treatments or no treatment.

Limitations of evidence base

The evidence considered in this review exhibited methodological limitations which are summarised below. Systematic reviews are only as good as the quality of the information contained within the included studies (Egger et al., 2001). Major methodological problems identified in the literature relating to compulsory treatment include the following:

- small sample sizes (Pritchard et al., 2007)
- lack of equivalent comparison groups (Klag et al., 2005; Wild et al., 2002)
- short follow-up periods, usually under six months (Pritchard et al., 2007; Klag et al., 2005)
- inappropriate comparison groups (Pritchard et al., 2007)
- client motivation not measured or considered (Wild, Cunningham et al., 1998)
- clients' perceptions of coercion not measured or considered (T. C. Wild et al., 1998)
- lack of consistent operational definition of coercion (Wild, Cunningham et al., 1998)
- lack of reliable and valid assessment tools (Pritchard et al., 2007).

A large proportion of the research on voluntary versus compulsory treatment is non-empirical, and researching this area is methodologically challenging. It is extremely difficult to carry out randomised controlled trials, ethically and practically, when the factor being investigated is whether treatment is voluntarily or involuntarily sought. Another general difficulty of synthesising research is that studies in compulsory treatment and coercion are extremely heterogeneous on a number of factors, including the drugs being used, the characteristics of the study populations, the different forms of coercion and referral source, the range of treatment interventions, and the outcome measures employed (Brecht, Anglin, & Wang, 1993; Pritchard et al., 2007; A. Stevens et al., 2005 ; T. C. Wild, 1999).

It is worth noting that the reviews appraised, and others identified in the course of research (e.g., Stevens et al., 2005; Klag et al., 2005), do consider compulsory treatment of offender populations identified through actions of the CJS. These studies were excluded as beyond the scope of the current review. It can also be argued that they have limited usefulness in terms of evidence on voluntary versus involuntary treatment, as the area has been criticised for not considering differences in comparator populations at baseline. The findings of such studies may therefore relate to these differences, which are a function of the population source (identified offenders), rather than the involuntary nature of their treatment.

The literature is also complicated by a wide variation in the implied meaning and use of specific study terminology (such as compulsion, coercion, voluntary, mandated treatment, civil commitment), particularly between the USA and Europe (as discussed in the Background section). This has made it difficult to determine whether research is relevant to the population and setting considered in this review, and often makes meaningful comparisons between studies difficult.

Two interrelated characteristics may act as potential confounders in research that attempts to compare voluntary and compulsory treatment outcomes: *motivation,* and participants *perceptions of coercion* (T. C. Wild et al., 1998). It has been suggested that motivation is essential for treatment and that people who are forced into treatment are less motivated than those who enter voluntarily (Brecht et al., 1993). However, other researchers suggest that all chronic substance users have an ambivalent attitude to treatment, and referral, by whatever route, results in a motivational 'crisis' (Klag et al., 2005). It is suggested that legally mandated (compulsory) patients may have different treatment needs and require different treatment approaches than voluntary self-referred patients and that there may be some threshold of coercion that may enhance treatment outcomes (Klag et al., 2005). At the Salvation Army's Bridge Programme, for example, there is no official difference between treatment approaches offered to section 8 and section 9 clients, although treatment is tailored to individual needs and issues (Major Lynette Hutson, *personal communication*, 22 November 2006).

It has been argued that some researchers have assumed that referral source (voluntary versus involuntary) defines degree of coercion, without considering the influence of an individual's *perceptions* of pressure (T. C. Wild, 1999; T. C. Wild et al., 1998). Within referral groups, there can be wide variations in perceived coercion. For example, a significant group of 'voluntary' participants reported feeling coerced into treatment (often by family members), whilst in the legally mandated group, a significant proportion of participants reported experiencing no coercion (T. C. Wild et al., 1998). The following comment by the National Manager of the Salvation Army's Bridge Programme is illustrative of the lack of distinction in perceived coercion that can occur between those admitted via voluntary and involuntary routes:

> "The key issue with these clients is to get engagement with them. It often makes little difference what section they are under because usually there is external pressure on them - it could be along the lines of a family saying either you commit yourself or we will commit you." (Major Lynette Hutson, *personal communication*, 22 November 2006).

Wild (2006) notes that there is a paucity of literature on coercion and its relationship with motivation and behaviour change. Further, that informal coercion (for example from family members and peers) may prove to be *more* compelling than formal mechanisms. Wild (2006) notes that research has predominantly focused on legal forms of coercion to date. Stevens et al., (2005) conclude that "it is not whether a person is coerced into treatment that is important in predicting outcome, but their level of motivation. A motivated and coerced client may do better than an unmotivated volunteer" (p. 275). From the evidence of variation within both voluntary and involuntary clients, it has been argued that there is little empirical support for the use of referral source as a comparator in determining the effectiveness of compulsory treatment (Wild, Roberts, & Cooper, 2002). Wild et al.'s (2002) systematic review concluded, "given that compulsory treatment samples exhibit substantial variability in perceptions of coercion, readiness to change their behaviour and perceived justifiability of social control tactics, it is perhaps not surprising that studies simply comparing referral sources do not provide strong and persuasive evidence with regard to outcomes" (p. 91).

Recommendations for future research

Pritchard et al.'s (2007) review, appraised here, advised that in light of the limited evidence for effectiveness for compulsory treatment, evaluative research is needed to develop standardised indicators, and to measure the real costs and benefits of compulsory treatment to the individual, programme and society. They further recommended that more rigorous evaluation studies be commissioned addressing the methodological limitations, as outlined above. They also recommended establishing an integrated database containing information from key agencies (including police, justice, legal aid and treatment providers) to enable monitoring of outcomes over time.

It has also been suggested that future research needs to investigate the complex interplay between client motivation, perceived coercion, client characteristics and treatment characteristics (Stevens et al.. 2005). Given the mixed results that have been apparent in the literature, it has also been suggested that it may be possible, and useful, to identify reliable subtypes of clients (characterised by, say, subjective perceptions of coercion and treatment motivation) which may respond better to different types of treatment intervention (Wild et al., 2002).

Conclusions

The area of compulsory treatment for non-offenders has attracted very little research attention. There is currently no reliable evidence relating to the efficacy of compulsory residential treatment compared with voluntary treatment in non-offender populations. No evidence of harm from compulsory treatment was identified. The evidence base is very sparse and the quality of research relating to offender populations is methodologically flawed (commonly comparing groups which are not equivalent at baseline) and unlikely to be generalisable to non-offenders or be relevant to New Zealand's ADA Act (1966). Systematic reviews suggest that significant variation exists in perceived coercion between voluntary and involuntary groups that perceived coercion may moderate motivation and individual's engagement in the therapeutic process, and that route of referral is thus an inadequate way of operationalising coercion as a factor in treatment effectiveness. In terms of deciding whether there is any place for compulsory treatment in New Zealand, it appears that policy makers need to rely on case studies, anecdotal and expert opinion evidence. Recent Australian reviews considering such evidence which are highly relevant to the Ministry of Health's review of the ADA (1966) have been identified by the current review (Swan and Alberti, 2004; Pritchard et al., 2007). These suggest that at least, short term compulsory treatment can provide benefits in harm minimisation, and may be of benefit for at least some people, some of the time, compared to voluntary treatment. Treatment is perhaps best seen as a sequentially linked chain of events, with route of referral forming just one of the initial processes. The effectiveness and cost-effectiveness of civil commitment in achieving long-term behaviour change has not yet been fully evaluated.

References

Abou-Saleh, M. T., & Miller, J. (1999). The management of drug misuse in primary care. *Primary Care Psychiatry, 5*(2), 49-56.

Alcoholics Anonymous. (2001). *"Chapter 5: How It Works"* (4 ed.): Alcoholics Anonymous World Services.

Allan, C. (1987). Seeking Help for Drinking Problems from a Community-Based Voluntary Agency. Patterns of Compliance amongst Men and Women. *British Journal of Addiction, vol, 82*(10), 1143-1147.

Allen & Clarke. (2003a). *Effective drug education for young people: literature review and analysis*. Wellington: Ministry of Youth Development.

Allen & Clarke. (2003b). *Review of the Alcoholism and Drug Addiction Act 1996: a review of current practice and legislative options for compulsory assessment and treatment of people with alcohol and other drug problems*: Allen & Clarke Ltd.

Allen, G. E. (1997). The social and economic origins of genetic determinism: A case history of the American Eugenics Movement, 1900-1940 and its lessons for today. *Genetica, 99*(2-3), 77-88.

Andrews, A. B., & Patterson, E. G. (1995). Searching for solutions to alcohol and other drug abuse during pregnancy: ethics, values, and constitutional principles. *Social work, 40*(1), 55-64.

Andrews, J. C. (1995). The effectiveness of alcohol warning labels: A review and extension. *American Behavioral Scientist, 38*(4), 622-632.

Baldwin, P. J., Dodd, M., & Rennie, J. S. (1999). Young dentists--work, wealth, health and happiness. *British dental journal, 186*(1), 30-36.

Bavon, A. (2001). The effect of the Tarrant county drug court project on recidivism. *Eval Prog Plan, 24*, 13–22.

Berkowitz, G., Brindis, C., Clayson, Z., & Peterson, S. (1996). Options for recovery: Promoting success among women mandated to treatment. *Journal of Psychoactive Drugs, 28*(1), 31-38.

Beynon, C. M., Bellis, M. A., & McVeigh, J. (2006). Trends in drop out, drug free discharge and rates of re-presentation: a retrospective cohort study of drug treatment clients in the North West of England. *BMC public health [electronic resource]. 6*, 205%N -.

Bourquin-Tieche, D., Besson, J., Lambert, H., & Yersin, B. (2001). Involuntary treatment of alcohol-dependent patients: A study of 17 consecutive cases of civil commitment. *European Addiction Research, 7*(2), 48-55.

Brecht, M. L., Anglin, M. D., & Wang, J. C. (1993). Treatment effectiveness for legally coerced versus voluntary methadone maintenance clients. *American Journal of Drug and Alcohol Abuse, 19*(1), 89-106.

Brizer, D. A., Maslansky, R., & Galanter, M. (1990). Treatment retention of patients referred by public assistance to an alcoholism clinic. *American Journal of Drug and Alcohol Abuse, 16*(3-4), 259-264.

Cartwright, W. S., & Solano, P. L. (2003). The economics of public health: financing drug abuse treatment services. *Health Policy 66*, 247-260.

Desmond, D. P., & Maddux, J. F. (1996). Compulsory supervision and methadone maintenance. *Journal of Substance Abuse Treatment, 13*(1), 79-83.

Devlin, N. J., Scuffham, P. A., & Bunt, L. J. (1997). The social costs of alcohol abuse in New Zealand. *Addiction, 92*(11), 1491-1505.

Diagnostic and statistical manual of mental disorders : DSM-IV-TR. (2000). (4th ed., text revision. ed.). Washington, DC: American Psychiatric Association.

Egger, M., Dickersin, K., & Davey Smith, G. (2001). Problems and limitations in conducting systematic reviews. In *Systematic Reviews in Health Care: Meta-analysis in Context* (pp. 43-68). London, UK.: BMJ Publishing Group.

Fenoglio, P., Parel, V., & Kopp, P. (2003). The social cost of alcohol, tobacco and illicit drugs in France, 1997. *European Addiction Research, 9*, 18–28.

Ferri, M., Amato, L., & Davoli, M. (2006). Alcoholics Anonymous and other 12-step programmes for alcohol dependence. *Cochrane Database of Systematic Reviews Issue 3. Art. No.: CD005032. DOI: 10.1002/14651858.CD005032.pub2.*

Fugelstad, A., Agren, G., & Romelsjo, A. (1998). Changes in mortality, arrests, and hospitalizations in nonvoluntarily treated heroin addicts in relation to methadone treatment. *Substance Use and Misuse, 33*(14), 2803-2817.

Günter, O., Roick, C., Angermeyer, M. C., & König, H. H. (2007). The EQ-5D in alcohol dependent patient: Relationships aomg health-related quality of life, psychopathology and social functioning. *Drug and Alcohol Dependence, 86*, 253-264.

Heale, P. (2001). A process evaluation of the CREDIT (Court Referral and Evaluation for Drug Intervention and Treatment) pilot programme. *Drug Alcohol Rev*(20), 223–230.

Kennard, D. (2004). The therapeutic community as an adaptable treatment modality across different settings. *Psychiatric Quarterly, 75*(3), 295-307.

Klag, S., O'Callaghan, F., & Creed, P. (2005). The Use of Legal Coercion in the Treatment of Substance Abusers: An Overview and Critical Analysis of Thirty Years of research. *Substance Use & Misuse, 40*, 1777–1795.

Kofoed, L., & Keys, A. (1988). Using group therapy to persuade dual-diagnosis patients to seek substance abuse treatment. *Hospital and Community Psychiatry, 39*(11), 1209-1211.

Konnopka, A., & Konig, H. H. (2007). Direct and indirect costs attributable to alcohol consumption in Germany. *Pharmacoeconomics, 25*(7), 605-618.

Lawental, E., McLellan, A. T., Grissom, G. R., Brill, P., & O'Brien, C. (1996). Coerced treatment for substance abuse problems detected through workplace urine surveillance: Is it effective? *Journal of Substance Abuse, 8*(1), 115-128.

Loneck, B., Garrett, J. A., & Banks, S. M. (1996a). A comparison of the Johnson Intervention with four other methods of referral to outpatient treatment. *American Journal of Drug and Alcohol Abuse, 22*(2), 233-246.

Loneck, B., Garrett, J. A., & Banks, S. M. (1996b). The Johnson Intervention and relapse during outpatient treatment. *American Journal of Drug and Alcohol Abuse, 22*(3), 363-375.

Mental Health (Compulsory Assessment & Treatment) Act (1992).

Ministry of Health. (1998). *National drug policy: a national drug policy for New Zealand 1998-2003*. Wellington, N.Z.: Ministry of Health.

Ministry of Health. (1999a). *Analysis of submissions on the review of the Alcoholism and Drug Addiction Act 1996*. Wellington: Ministry of Health.

Ministry of Health. (1999b). *Review of the Alcoholism and Drug Addiction Act 1966: a discussion paper for consultation*. Wellington: Policy branch, MOH.

Ministry of Health. (2001). *New Zealand Drug statistics*. Wellington: New Zealand health information services.

Ministry of Health. (2007a). *Alcohol Use in New Zealand: Analysis of the 2004 New Zealand Health Behaviours Survey – Alcohol Use*. Wellington: Ministry of Health.

Ministry of Health. (2007b). *Drug Use in New Zealand: Analysis of the 2003 New Zealand Health Behaviours Survey – Drug Use*. Wellington: Ministry of Health.

Ministry of Health. (2007c). *Repeal of Review of the Alcoholism and Drug Addiction Act 1966 (AD10-07-2)*. Wellington.

Mulrow, C. D., & Oxman, A. (1997). *Cochrane Collaboration Handbook.* Oxford: The Cochrane Collaboration.

Nakamura, K., Tanaka, A., & Takano, T. (1993). Social cost of alcohol abuse in Japan. *J Stud Alcohol, 54*, 618–625.

National Collaborating Centre for Mental Health. (2007). *Drug misuse, psychosocial interventions: National Clinical Practice Guidline Number 51*: National Institute for Health and Clinical Excellence.

National Health and Medical Research Council. (1999). *How to use the evidence: assessment and application of scientific evidence.* . Canberra: NHMRC.

National Health and Medical Research Council. (2000). *How to review the evidence: systematic identification and review of the scientific literature*. Canberra: NHMRC.

National Health and Medical Research Council. (2005). Interim Levels of Evidence., from http://www.nhmrc.gov.au/consult/_files/levels_grades05.pdf

New South Wales Standing Committee on Social Issues. (2004). *Report on Inebriates Act 1912*. Sydney: New South Wales Parliament.

Nova Trust (Writer) (2007). General NOVA presentation [Powerpoint Presentation]. In Nova Trust (Producer). Christchurch, New Zealand.

Nutt, D., King, L. A., Saulsbury, W., & Blakemore, C. (2007). Development of a rational scale to assess the harm of drugs of potential misuse. *The Lancet* (369), 1047-1053.

O'Loughlin, F., & Webb, M. (1996). Controlled assessment of alcoholics admitted involuntarily to a general psychiatric hospital. *Irish Journal of Psychological Medicine, 13*(4), 140-143.

Pritchard, E., Mugavin, J., & Swan, A. (2007). *Compulsory treatment in Australia: a discussion paper on the compulsory treatment of individuals dependent on alcohol and/or other drugs*. Canberra: Australian National Council on Drugs.

Rishworth, P. (2003). *The New Zealand Bill of Rights*. South Melbourne, Vic. ; Oxford: Oxford University Press.

Soanes, C., & Stevenson, A. (Eds.). (2004). *Concise Oxford English dictionary* (11 ed.). New York: Oxford University Press.

Stade, B., Ungar, W. G., Stevens, B., Beyene, J., & Koren, G. (2006). The Burden of Prenatal Exposure to Alcohol: Measurement of Cost. *JFAS Int, 4*(5).

Steiner, C., Lezotte, D., & Gabow, P. (1995). Court-ordered alcohol treatment for patients with medical problems. *American journal on addictions, 4*(2), 127-132.

Stevens, A., Berto, D., Frick, U., Hunt, N., Kerschl, V., McSweeney, T., et al. (2006). The relationship between legal status, perceived pressure and motivation in treatment for drug dependence: Results from a European study of Quasi-Compulsory treatment. *European Addiction Research, 12*(4), 197-209.

Stevens, A., Berto, D., Heckmann, W., Kerschl, V., Oeuvray, K., Van ooyen, M., et al. (2005). Quasi-Compulsory Treatment of Drug Dependent Offenders: An International Literature Review. *Substance Use & Misuse, 40*, 269–283.

Stevens, A., McSweeney, T., Van Ooyen, M., & Uchtenhagen, A. (2005). On coercion. *International Journal of Drug Policy, 16*(4), 207-209.

Swan, A., & Alberti, S. (2004). *The Alcoholics and Drug-dependent persons Act (ADDPA) 1968: A Review*. Melbourne: Turning Point Alcohol and Drug Centre, Department of Human Services, State of Victoria.

The Human Rights Commission. (2004). *Human Rights in New Zealand Today Ngā Tika Tangata O Te Motu: New Zealand Action Plan for Human Rights — Mana ki te Tangata*. Auckland: The Human Rights Commission.

The Salvation Army. (2007). The Salvation Army Bridge Programme (Auckland, Wellington & Christchurch). from http://www.sab.org.nz/hp1.asp

Varney, S. J., & Guest, J. F. (2002). The annual societal cost of alcohol misuse in Scotland. *Pharmacoeconomics, 20*(13), 891-907.

Vito, G. F. (1998). The impact of treatment: The Jefferson County (Kentucky) drug court program. *Fed Probat, 62*, 46–51.

Walsh, D. C., Hingson, R. W., Merrigan, D. M., Levenson, S. M., Cupples, L. A., Heeren, T., et al. (1991). A randomized trial of treatment options for alcohol-abusing workers. *New England Journal of Medicine, 325*(11), 775-782.

Wild, T. C. (1999). Compulsory substance-user treatment and harm reduction: A critical analysis. *Substance Use & Misuse, 34*(1), 83-102.

Wild, T. C. (2006). Social control and coercion in addiction treatment: Towards evidence-based policy and practice. *Addiction, 101*(1), 40-49.

Wild, T. C., Cunningham, J. A., & Ryan, R. M. (2006). Social pressure, coercion, and client engagement at treatment entry: A self-determination theory perspective. *Addictive Behaviors, 31*(10), 1858-1872.

Wild, T. C., Newton-Taylor, B., & Alletto, R. (1998). Perceived coercion among clients entering substance abuse treatment: Structural and psychological determinants. *Addictive Behaviors, 23*(1), 81-95.

Wild, T. C., Roberts, A. B., & Cooper, E. L. (2002). Compulsory substance abuse treatment: An overview of recent findings and issues. *European Addiction Research, 8*(2), 84-93.

Williams, K. (2007). *Alcohol-related hospital admissions: 2006 calendar year*. Wellington: National Drug Intelligence Bureau

World Health Organization. (1999). *Drug and alcohol dependence: policies, legislation and programmes for treatment and rehabilitation*. Geneva: Substance Abuse Department Social Change and Mental Health.

World Health Organization. (2002). *The World Health Report 2002 - Reducing Risks, Promoting Healthy Life*. Geneva: WHO.

World Health Organization. (2004). *Global Status Report on Alcohol 2004* Geneva: Department of Mental Health and Substance Abuse.

World Health Organization. (2007). *Alcohol and injury in emergency departments: summary of the report from the WHO collaborative study on alcohol and injuries*: Department of Mental Health and Substance Abuse.

Appendix A: Working Group Membership

An informal working group within the Rights and Protection Team, Mental Health Group, Population Health Directorate (New Zealand Ministry of Health) has been established including the following members.

Table 12 Working group

Name and area of expertise	Affiliation
Stephen Enright	Acting Manager, Mental Health Rights and Protection Team, Ministry of Health
Michelle Judge (contact person)	Policy Analyst, Mental Health Rights and Protection Team, Ministry of Health
Aphra Green	Contractor, Mental Health Rights and Protection Team, Ministry of Health
Trina Lowry	Analyst, Mental Health Rights and Protection Team, Ministry of Health

Appendix B: Included Studies

National Institute for Health and Clinical Excellence. (2007). *Drug misuse, psychosocial interventions: National Clinical Practice Guideline Number 51*: National Collaborating Centre for Mental Health.

Pritchard, E., Mugavin, J., & Swan, A. (2007). Compulsory treatment in Australia: a discussion paper on the compulsory treatment of individuals dependent on alcohol and/or other drugs. Canberra: Australian National Council on Drugs.

Swan, A., & Alberti, S. (2004). *The Alcoholics and Drug-dependent persons Act (ADDPA) 1968: A Review.* Melbourne: Turning Point Alcohol and Drug Centre, Department of Human Services, State of Victoria.

Wild, T. C., Roberts, A. B., & Cooper, E. L. (2002). Compulsory substance abuse treatment: An overview of recent findings and issues. *European Addiction Research, 8*(2), 84-93.

Appendix C: Excluded Studies Annotated by Reason for Exclusion

Working with Involuntary, Substance Abusing Clients in the Criminal Justice System: An Interview with Wendy Weil. (2006). Journal of Social Work Practice in the Addictions, 6(4), 131-135.
Title/abstract: Excluded. Not a clinical study.

Maternal decision making, ethics, and the law. (2005). Obstetrics and Gynecology, 106(5 I), 1127-1137.
Title/abstract: Excluded. Not a clinical study.

Youth exposure to alcohol advertising on radio--United States, June-August 2004. (2006). MMWR. Morbidity and mortality weekly report., 55(34), 937-940.
Title/abstract: Excluded. Wrong intervention/comparator

Alberta court orders methadone maintenance therapy for prisoner on interim basis. (2003). Canadian HIV/AIDS policy & law review / Canadian HIV/AIDS Legal Network, 8(1), 53-54.
Title/abstract: Excluded. Not a clinical study.

Mandatory drug testing and treatment for welfare recipients in Ontario, Canada. (2001). Addiction (Abingdon, England), 96(2), 352-353.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Opioid drugs in maintenance and detoxification treatment of opiate addiction; Substance Abuse and Mental Health Services Administration, HHS. Final rule. (2001). Federal register, 66(11), 4076-4102.
Title/abstract: Excluded. Wrong intervention/comparator

Current list of laboratories which meet minimum standards to engage in urine drug testing for federal agencies, and laboratories that have withdrawn from the program--SAMHSA. Notice. (1998). Federal register, 63(21), 5394-5396.
Title/abstract: Excluded. Not a clinical study.

Drug and alcohol services in Pevek. (1991). Alaska medicine, 33(1), 26-27.
Title/abstract: Excluded. Not a clinical study.

Current list of laboratories which meet minimum standards to engage in urine drug testing for federal agencies--ADAMHA. Notice. (1990). Federal register, 55(172), 36317-36318.
Title/abstract: Excluded. Not a clinical study.

Compulsory premarital screening for HIV. (1988). Journal of the American Medical Association, 259(7), 1011-1015.
Title/abstract: Excluded. Wrong intervention/comparator

Alcoholism recognition and treatment mandated. (1975). IMJ. Illinois medical journal, 147(2), 129-132, 136.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

The alcoholic felon. (1974). Alcohol Health & Research World. Exp Issue, Sum, 17-23.
Title/abstract: Excluded. Not a clinical study.

Abel, E. L. (1998). Protecting fetuses from certain harm. Politics and the life sciences : the journal of the Association for Politics and the Life Sciences, 17(2), 113-117.
Title/abstract: Excluded. Not a clinical study.

Abel, E. L., & Kruger, M. (2002). Physician attitudes concerning legal coercion of pregnant alcohol and drug abusers. American Journal of Obstetrics and Gynecology, 186(4), 768-772.
Title/abstract: Excluded. Not a clinical study.

Abou-Saleh, M. T., & Miller, J. (1999). The management of drug misuse in primary care. Primary Care Psychiatry, 5(2), 49-56.
Title/abstract: Excluded. Not a clinical study.

Adirim, T. A., & Gupta, N. S. (1991). A national survey of state maternal and newborn drug testing and reporting policies. Public Health Reports, 106(3), 292-296.
Title/abstract: Excluded. Not a clinical study.

Ahmed, A. G., Heigh, L. M., & Ramachandran, K. V. (2001). Polydipsia, psychosis, and familial psychopathology. Canadian Journal of Psychiatry, 46(6), 522-527.
Full paper: Excluded. Not a clinical study

Aitkenhead, A. R. (1999). The influence of the anaesthetist on outcome. Bailliere's Best Practice in Clinical Anaesthesiology, 13(3), 279-294.
Title/abstract: Excluded. Wrong intervention/comparator

Akhtar, A. J., Funnye, A. S., & Akanno, J. (2003). Gunshot-induced plumbism in an adult male. Journal of the National Medical Association, 95(10), 986-990.
Title/abstract: Excluded. Not a clinical study.

Albanese, M. J., & Suh, J. J. (2006). Risperidone in cocaine-dependent patients with comorbid psychiatric disorders. Journal of Psychiatric Practice, 12(5), 306-311.
Full paper: Excluded. Not a clinical study

Albery, I. P., Heuston, J., Ward, J., Groves, P., Durand, M. A., Gossop, M., et al. (2003). Measuring therapeutic attitude among drug workers. Addictive Behaviors, 28(5), 995-1005.
Full paper: Excluded. Not a clinical study

Albrecht, R. R. (2004). A step toward truly protecting human subjects: reviewing the review boards. The American journal of bioethics : AJOB, 4(1), 54-55.
Title/abstract: Excluded. Not a clinical study.

Alemdaroglu, A. (2005). Politics of the Body and Eugenic Discourse in Early Republican Turkey. Body & Society, vol, 11(3), 61-76.
Title/abstract: Excluded. Not a clinical study.

Alexander, B. K. (1986). What can professional psychotherapists do about heroin addiction? Medicine and Law, 5(4), 323-330.
Title/abstract: Excluded. Not a clinical study.

Al-Gomer, O., Shiles, G., Abdelghani, M., & Moselhy, H. F. (2007). Pathway to criminal behaviors: A profile of drug dependent offenders enforced for treatment by a court order. Addictive Disorders and their Treatment, 6(2), 73-76.
Title/abstract: Excluded. Not a clinical study.

Allan, C. (1987). Seeking Help for Drinking Problems from a Community-Based Voluntary Agency. Patterns of Compliance amongst Men and Women. British Journal of Addiction, vol, 82(10), 1143-1147.
Title/abstract: Excluded. Not a clinical study.

Allen & Clarke. (2003). Review of the Alcoholism and Drug Addiction Act 1996: a review of current practice and legislative options for compulsory assessment and treatment of people with alcohol and other drug problems: Allen & Clarke Ltd.
Title/abstract: Excluded. Not a clinical study

Allen, G. E. (1997). The social and economic origins of genetic determinism: A case history of the American Eugenics Movement, 1900-1940 and its lessons for today. Genetica, 99(2-3), 77-88.
Title/abstract: Excluded. Not a clinical study.

Alpert, L. T. (2005). Research review: Parents' service experience - A missing element in research on foster care case outcomes. Child & Family Social Work, 10(4), 361-366.
Title/abstract: Excluded. Not a clinical study.

Altice, F. L., Mezger, J. A., Hodges, J., Bruce, R. D., Marinovich, A., Walton, M., et al. (2004). Developing a directly administered antiretroviral therapy intervention for HIV-infected drug users: Implications for program replication. Clinical Infectious Diseases, 38(SUPPL. 5), S376-S387.
Title/abstract: Excluded. Not a clinical study.

Anderson, A. F., & Hua, X. (1998). Guangxi on the precipice: Drug abuser behavior and the nascent spread of HIV in one Chinese region. International Journal of Offender Therapy and Comparative Criminology, 42(4), 369-375.
Title/abstract: Excluded. Not a clinical study.

Andersson, K. E., & Pehrson, R. (2003). CNS Involvement in Overactive Bladder: Pathophysiology and Opportunities for Pharmacological Intervention. Drugs, 63(23), 2595-2611.
Title/abstract: Excluded. Wrong intervention/comparator

Andre, C., Jaber-Filho, J. A., Carvalho, M., Jullien, C., & Hoffman, A. (2003). Predictors of recovery following involuntary hospitalization of violent substance abuse patients. American Journal on Addictions, 12(1), 84-89.
Full paper: Excluded. Wrong intervention/comparator

Andrews, A. B., & Patterson, E. G. (1995). Searching for solutions to alcohol and other drug abuse during pregnancy: ethics, values, and constitutional principles. Social work, 40(1), 55-64.
Title/abstract: Excluded. Not a clinical study.

Andrews, J. C. (1995). The effectiveness of alcohol warning labels: A review and extension. American Behavioral Scientist, 38(4), 622-632.
Title/abstract: Excluded. Wrong intervention/comparator

Anglin, L., Kavanagh, L., & Giesbrecht, N. (2001). Alcohol-related policy measures in Ontario: Who supports what and to what degree? Canadian Journal of Public Health, 92(1), 24-28.
Title/abstract: Excluded. Not a clinical study.

Anglin, M. D. (1988). The efficacy of civil commitment in treating narcotics addiction. Journal of Drug Issues, 18(4), 527-545.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Anglin, M. D., Brecht, M. L., & Maddahian, E. (1989). Pretreatment characteristics and treatment performance of legally coerced versus voluntary methadone maintenance admissions. Criminology, 27(3), 537-557.
Title/abstract: Excluded. Wrong indication/population.

Anglin, M. D., & Hser, Y.-i. (1991). Criminal justice and the drug-abusing offender: Policy issues of coerced treatment. Behavioral Sciences & the Law, 9(3), 243-267.
Title/abstract: Excluded. Not a clinical study

Anglin, M. D., & McGlothlin, W. H. (1984). Outcome of narcotic addict treatment in California. In F. M. Tims & J. P. Ludford (Eds.), Drug abuse treatment evaluation : strategies, progress, and prospects. (Vol. NIDA research monograph ; 51, pp. 106-128). Rockvill, Md.
[Washington]: Dept. of Health and Human Services, Public Health Service, Alcohol, Drug Abuse, and Mental Health Administration U.S.G.P.O.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Angres, D. H., & Busch, K. A. (1989). The chemically dependent physician: Clinical and legal considerations. New Directions for Mental Health Services. No, 41, 21-32.
Title/abstract: Excluded. Not a clinical study.

Annas, G. J. (1989). At law. Crack, symbolism, and the constitution. The Hastings Center report, 19(3), 35-37.
Title/abstract: Excluded. Not a clinical study.

Anon. (1969). Energetic treatment of addicts. BMJ: British Medical Journal. Vol., 2(5653), 331.
Title/abstract: Excluded. Not a clinical study.

Appelbaum, P. S., & Redlich, A. (2006). Use of leverage over patients' money to promote adherence to psychiatric treatment. Journal of Nervous and Mental Disease, 194(4), 294-302.
Title/abstract: Excluded. Not a clinical study.

Appelbaum, P. S., & Rumpf, T. (1998). Civil commitment of the anorexic patient. General Hospital Psychiatry, 20(4), 225-230.
Full paper: Excluded. Not a clinical study

Appleby, L., Luchins, D. J., & Dyson, V. (1995). Effects of mandatory drug screens on substance use diagnoses in a mental hospital population. Journal of Nervous and Mental Disease, 183(3), 183-184.
Title/abstract: Excluded. Wrong intervention/comparator

Arata, C. M., Langhinrichsen-Rohling, J., Bowers, D., & O'Brien, N. (2007). Differential correlates of multi-type maltreatment among urban youth. Child Abuse and Neglect, 31(4), 393-415.
Title/abstract: Excluded. Not a clinical study.

Argeriou, M. (1978). Reaching problem-drinking Blacks: The unheralded potential of the drinking driver programs. International Journal of the Addictions, 13(3), 443-459.
Title/abstract: Excluded. Not a clinical study.

Auerhahn, K. (2004). California's Incarcerated Drug Offender Population, Yesterday, Today, and Tomorrow: Evaluating the War on Drugs and Proposition 36. Journal of Drug Issues, 34(1), 95-120.
Title/abstract: Excluded. Not a clinical study.

Ausubel, D. P. (1966). Why Compulsory Closed-Ward Treatment of Narcotic Addicts? Psychiatric Quarterly Supplement, 40(2), 225-243.
Title/abstract: Excluded. Not a clinical study.

Baird, F. X., & Frankel, A. J. (2001). The Efficacy of Coerced Treatment for Offenders: An Evaluation of Two Residential Forensic Drug and Alcohol Treatment Programs. Journal of Offender Rehabilitation, vol, 34(1), 61-80.
Title/abstract: Excluded. Wrong indication/population.

Baker, R. J., & Duarte, B. (1986). The current status of recognition and treatment of severe necrotizing pancreatitis. Surgery annual, 18(-), 129-144.
Title/abstract: Excluded. Wrong intervention/comparator

Baker, T. K., Johnson, M. B., Voas, R. B., & Lange, J. E. (2000). To reduce youthful binge drinking: Call an election in Mexico. Journal of Safety Research, 31(2), 61-69.
Title/abstract: Excluded. Not a clinical study.

Balabanova, D., & McKee, M. (1999). Patterns of alcohol consumption in Bulgaria. Alcohol and Alcoholism, 34(4), 622-628.
Title/abstract: Excluded. Not a clinical study.

Baldwin, P. J., Dodd, M., & Rennie, J. S. (1999). Young dentists--work, wealth, health and happiness. British dental journal, 186(1), 30-36.
Title/abstract: Excluded. Wrong intervention/comparator

Baragar, C. A. (1921). Prevention of Mental Breakdown. Canadian Journal of Mental Hygiene, 3, 55-64.
Title/abstract: Excluded. Not a clinical study.

Barefoot, S. W., & Smith, V. W. (1985). Intervention and alcoholism. Southern Medical Journal, 78(11), 1333-1334.
Title/abstract: Excluded. Not a clinical study.

Barnett, N. P., Goldstein, A. L., Murphy, J. G., Colby, S. M., & Monti, P. M. (2006). "I'll never drink like that again": Characteristics of alcohol-related incidents and predictors of motivation to change in college students. Journal of Studies on Alcohol, 67(5), 754-763.
Title/abstract: Excluded. Not a clinical study.

Barnett, N. P., & Read, J. P. (2005). Mandatory alcohol intervention for alcohol-abusing college students: A systematic review. Journal of Substance Abuse Treatment, 29(2), 147-158.
Title/abstract: Excluded. Wrong intervention/comparator

Barnett, N. P., Tevyaw, T. O., Fromme, K., Borsari, B., Carey, K. B., Corbin, W. R., et al. (2004). Brief alcohol interventions with mandated or adjudicated college student. Alcoholism: Clinical and Experimental Research, 28(6), 966-975.
Title/abstract: Excluded. Not a clinical study.

Barone, N. M., Weitz, E. I., & Witt, P. H. (2005). Psychological bonding evaluations in termination of parental rights cases. Journal of Psychiatry and Law, 33(3), 387-411.
Full paper: Excluded. Not a clinical study

Barrett, M. E. (1997). Wat Thamkrabok: A Buddhist drug rehabilitation program in Thailand. Substance Use and Misuse, 32(4), 435-459.
Title/abstract: Excluded. Not a clinical study.

Barry, A. E., Misra, R., & Dennis, M. (2006). Assessing Driving While Intoxicated (DWI) Offender Characteristics and Drinking Problems Utilizing the Numerical Drinking Profile (NDP). Journal of Alcohol and Drug Education, 50(3), 66-79.
Title/abstract: Excluded. Not a clinical study.

Bartholomew, N. G., Hiller, M. L., Knight, K., Nucatola, D. C., & Simpson, D. D. (2000). Effectiveness of communication and relationship skills training for men in substance abuse treatment. Journal of Substance Abuse Treatment, 18(3), 217-225.
Title/abstract: Excluded. Not a clinical study.

Basu, S., Smith-Rohrberg, D., Hanck, S., & Altice, F. L. (2005). HIV testing in correctional institutions: Evaluating existing strategies, setting new standards. AIDS and Public Policy Journal, 20(1-2), 3-24.
Title/abstract: Excluded. Wrong intervention/comparator

Batra, A. (2007). Funding support--Cui Bono? Addiction, 102(7), 1035.
Title/abstract: Excluded. Not a clinical study.

Battaglia, J., Wolff, T. K., Wagner-Johnson, D. S., Rush, A. J., Carmody, T. J., & Ramirez Basco, M. (1999). Structured diagnostic assessment and depot fluphenazine treatment of multiple suicide attempters in the emergency department. International Clinical Psychopharmacology, 14(6), 361-372.
Full paper: Excluded. Not a clinical study

Baumohl, J. (1990). Inebriate institutions in North America, 1840-1920. British Journal of Addiction, 85(9), 1187-1204.
Title/abstract: Excluded. Not a clinical study.

Baumohl, J., & Room, R. (1987). Inebriety, doctors, and the state. Alcoholism treatment institutions before 1940. Recent developments in alcoholism : an official publication of the American Medical

Society on Alcoholism, the Research Society on Alcoholism, and the National Council on Alcoholism, 5(-), 135-174.
Title/abstract: Excluded. Not a clinical study.

Bazelon, D. L. (1971). Drugs that Turn on the Law. The Journal of Social Issues, vol, 27(3), 47-52.
Title/abstract: Excluded. Not a clinical study.

Beauchamp, D. E. (1976). Exploring new ethics for public health: developing a fair alcohol policy. Journal of health politics, policy and law, 1(3), 338-354.
Title/abstract: Excluded. Not a clinical study.

Beauchesne, L. (1991). Social morality and the civil rights of Canadian drug users. Journal of Drug Issues, 21(1), 165-182.
Title/abstract: Excluded. Not a clinical study.

Becker, M. A., & Gatz, M. (2005). Introduction to the Impact of Co-occurring Disorders and Violence on Women: Findings From the SAMHSA Women, Co-occurring Disorders and Violence Study. Journal of Behavioral Health Services & Research. Special Issue: The Impact of Co-occurring Disorders and Violence on Women, 32(2), 111-112.
Title/abstract: Excluded. Not a clinical study.

Becker, M. A., Young, M. S., Ochshorn, E., & Diamond, R. J. (2007). The relationship of antipsychotic medication class and adherence with treatment outcomes and costs for Florida medicaid beneficiaries with schizophrenia. Administration and Policy in Mental Health and Mental Health Services Research, 34(3), 307-314.
Full paper: Excluded. Not a clinical study

Beckerman, A., & Fontana, L. (2001). Issues of Race and Gender in Court-Ordered Substance Abuse Treatment. Journal of Offender Rehabilitation, vol, 33(4), 45-61.
Title/abstract: Excluded. Wrong intervention/comparator

Bednar, B., & Peacock, E. (1993). Implementing a mandatory drug screening program: pros and cons for the dialysis unit. Nephrology news & issues, 7(1), 14-15.
Title/abstract: Excluded. Wrong intervention/comparator

Bekker, L. G. (2005). Can we involve adolecents in HIV vaccine trials - Can we afford not to? Southern African Journal of HIV Medicine, -, 7%N 21.
Title/abstract: Excluded. Not a clinical study.

Belenko, S., Foltz, C., Lang, M. A., & Sung, H.-E. (2004). Recidivism Among High-Risk Drug Felons: A Longitudinal Analysis Following Residential Treatment. Journal of Offender Rehabilitation, 40(1-2), 105-132.
Title/abstract: Excluded. Wrong indication/population.

Bell, J., Chan, J., & Kuk, A. (1995). Investigating the influence of treatment philosophy on outcome of methadone maintenance. Addiction, 90(6), 823-830.
Title/abstract: Excluded. Wrong intervention/comparator

Bell, N. K. (1989). AIDS and women: remaining ethical issues. AIDS education and prevention : official publication of the International Society for AIDS Education, 1(1), 22-30.
Title/abstract: Excluded. Wrong intervention/comparator

Ben Arie, O., George, G. C. W., & Hirschowitz, J. (1983). Compulsory treatment of 50 alcoholic drunken drivers. A follow-up study. South African Medical Journal, 63(7), 241-243.
Title/abstract: Excluded. Not a clinical study.

Ben-Arie, O., Swartz, L., & George, G. C. W. (1986). The compulsory treatment of alcoholic drunken drivers referred by the courts: A 7 to 9 years outcome study. International Journal of Law and Psychiatry, 8(2), 229-235.
Title/abstract: Excluded. Not a clinical study.

Benjaminsen, S., Gotzsche-Larsen, K., Norrie, B., Harder, L., & Luxhoi, A. (1996). Patient violence in a psychiatric hospital in Denmark. Rate of violence and relation to diagnosis. Nordic Journal of Psychiatry, 50(3), 233-242.
Title/abstract: Excluded. Wrong intervention/comparator

Berglund, M. (1988). Alcoholics committed to treatment: A prospective long-term study of behavioral characteristics, mortality, and social adjustment. Alcoholism: Clinical and Experimental Research, 12(1), 19-24.
Title/abstract: Excluded. Wrong outcomes.

Berkowitz, G., Brindis, C., Clayson, Z., & Peterson, S. (1996). Options for recovery: Promoting success among women mandated to treatment. Journal of Psychoactive Drugs, 28(1), 31-38.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Berntsen, K. (1981). Some reflections on the present situation of drug abuse among young people. Bulletin on Narcotics, 33(4), 15-22.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Beynon, C. M., Bellis, M. A., & McVeigh, J. (2006). Trends in drop out, drug free discharge and rates of re-presentation: a retrospective cohort study of drug treatment clients in the North West of England. BMC public health [electronic resource]. 6, 205%N -.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Bhattacharya, G. (2002). Drug abuse risks for acculturating immigrant adolescents: case study of Asian Indians in the United States. Health & social work, 27(3), 175-183.
Title/abstract: Excluded. Not a clinical study.

Bhui, K., Strathedee, G., & Sufraz, R. (1993). Asian inpatients in a district psychiatric unit: An examination of presenting features and routes into care. International Journal of Social Psychiatry, 39(3), 208-220.
Title/abstract: Excluded. Not a clinical study.

Bianchi, G., & Popper, M. (2000). Interaction of substance use and risks to sexual health in the Slovak army: General, sociocultural and individual behaviour patterns. AIDS Care - Psychological and Socio-Medical Aspects of AIDS/HIV, 12(6), 757-766.
Title/abstract: Excluded. Not a clinical study.

Bielovich, F. (2001). Bitter or better after benzos? Ethical Human Sciences and Services, 3(2), 131-136.
Full paper: Excluded. Not a clinical study

Billinger, K. (2005). A focus group investigation of care-provider perspectives in Swedish institutions for the coercive care of substance abusers. International Journal of Social Welfare, 14(1), 55-64.
Title/abstract: Excluded. Not a clinical study.

Bird, A. G., Gore, S. M., Hutchinson, S. J., Lewis, S. G., Cameron, S., & Burns, S. (1997). Harm reduction measures and injecting inside prison versus mandatory drugs testing: Results of a cross sectional anonymous questionnaire survey. British Medical Journal, 315(7099), 21-24.
Title/abstract: Excluded. Not a clinical study.

Bishburg, E., Sunderam, G., Reichman, L. B., & Kapila, R. (1986). Central nervous system tuberculosis with the acquired immunodeficiency syndrome and its related complex. Annals of Internal Medicine, 105(2), 210-213.
Title/abstract: Excluded. Wrong intervention/comparator

Blackwood, C. L. (2005). Sexual assault. Clinics in Family Practice, 7(1 SPEC. ISS.), 139-152.

Title/abstract: Excluded. Wrong intervention/comparator

Bloom, J. D., Bradford McD, J., & Kofoed, L. (1988). An overview of psychiatric treatment approaches to three offender groups. Hospital and Community Psychiatry, 39(2), 151-158.
Title/abstract: Excluded. Not a clinical study.

Bloomer, S. (1998). Mandatory name reporting of HIV infection. The Journal of the Association of Nurses in AIDS Care : JANAC, 9(6), 80-81.
Title/abstract: Excluded. Not a clinical study.

Bolla, K. I., Funderburk, F. R., & Cadet, J. L. (2000). Differential effects of cocaine and cocaine + alcohol on neurocognitive performance. Neurology, 54(12), 2285-2292.
Title/abstract: Excluded. Wrong intervention/comparator

Bollinger, L. (2002). Therapy instead of punishment for drug users - Germany as a model? European Addiction Research, 8(2), 54-60.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Bond, J., & Cherpitel, C. J. (2004). Measuring accuracy of self-reported vehicular offences and blood alcohol concentration levels among whites and Mexican Americans mandated to drinking driver programs. Addictive Behaviors, 29(6), 1163-1169.
Title/abstract: Excluded. Wrong intervention/comparator

Bonnie, R. J. (2006). Judicially mandated naltrexone use by criminal offenders: A legal analysis. Journal of Substance Abuse Treatment, 31(2), 121-127.
Title/abstract: Excluded. Not a clinical study.

Borsari, B., Tevyaw, T. O., Barnett, N. P., Kahler, C. W., & Monti, P. M. (2007). Stepped care for mandated college students: A pilot study. American Journal on Addictions, 16(2), 131-137.
Title/abstract: Excluded. Wrong intervention/comparator

Borzi, P. C., & Rosenbaum, S. (2001). Behavioral health benefits for public employees: effect of mental health parity legislation. Issue brief (George Washington University. Center for Health Services Research and Policy), -(13), 1-23.
Title/abstract: Excluded. Not a clinical study.

Bourgois, P., Martinez, A., Kral, A., Edlin, B. R., Schonberg, J., & Ciccarone, D. (2006). Reinterpreting ethnic patterns among white and African American men who inject heroin: A social science of medicine approach. PLoS Medicine, 3(10), 1805-1815.
Title/abstract: Excluded. Not a clinical study.

Bourne, P. G. (1973). Where the present drug scene is heading. Journal of Drug Issues. Vol., 3(1), 96-100.
Title/abstract: Excluded. Not a clinical study.

Bourne, P. G., Alford, J. A., & Bowcock, J. Z. (1966). Treatment of skid-row alcoholics with disulfiram. Quarterly Journal of Studies on Alcohol, 27(1), 42-48.
Title/abstract: Excluded. Wrong intervention/comparator

Bourquin-Tieche, D., Besson, J., Lambert, H., & Yersin, B. (2001). Involuntary treatment of alcohol-dependent patients: A study of 17 consecutive cases of civil commitment. European Addiction Research, 7(2), 48-55.
Title/abstract: Included
Full paper: Excluded. Non comparative studies

Bowman, R. L., & Bowman, V. E. (1995). Academic courses to train resident assistants. Journal of College Student Development, 36(1), 39-46.
Title/abstract: Excluded. Not a clinical study.

Box, S. (1977). Hyperactivity: The Scandalous Silence. New Society, vol, 42(791), 458-460.
Title/abstract: Excluded. Wrong intervention/comparator

Boyd, N., Millard, C. J., & Webster, C. D. (1985). Heroin "treatment" in British Columbia, 1976-1984: Thesis, antithesis, and synthesis? Canadian Journal of Criminology, 27(2), 195-208.
Title/abstract: Excluded. Not a clinical study.

Braback, L., Appelberg, J., Jansson, U., & Kalvesten, L. (2000). Changes in prevalence and severity of asthma among schoolchildren in a Swedish district between 1985 and 1995. Acta Paediatrica, International Journal of Paediatrics, 89(4), 465-470.
Title/abstract: Excluded. Wrong intervention/comparator

Braithwaite, R. A., Jarvie, D. R., Minty, P. S. B., Simpson, D., & Widdop, B. (1995). Screening for drugs of abuse. I: Opiates, amphetamines and cocaine. Annals of Clinical Biochemistry, 32(2), 123-153.
Title/abstract: Excluded. Not a clinical study

Bramblett, R., Wodarski, J. S., & Thyer, B. A. (1991). Social work practice with antisocial children: A review of current issues. Journal of Applied Social Sciences, 15(2), 169-182.
Title/abstract: Excluded. Wrong intervention/comparator

Bramness, J. G., Skurtveit, S., & Morland, J. (2004). Impairment due to intake of carisoprodol. Drug and Alcohol Dependence, 74(3), 311-318.
Full paper: Excluded. Not a clinical study

Brands, B., Blake, J., & Marsh, D. (2003). Impact of Methadone Program Philosophy Changes on Early Treatment Outcomes. Journal of Addictive Diseases, 22(3), 19-38.
Title/abstract: Excluded. Wrong intervention/comparator

Brannen, S. J., & Rubin, A. (1996). Comparing the effectiveness of gender-specific and couples groups in a court-mandated spouse abuse treatment program. Research on Social Work Practice, 6(4), 405-424.
Title/abstract: Excluded. Wrong intervention/comparator

Brasnu, E., Wechsler, B., Bron, A., Charlotte, F., Bliefeld, P., Lehoang, P., et al. (2005). Efficacy of interferon-(alpha) for the treatment of Kaposi's sarcoma herpesvirus-associated uveitis. American Journal of Ophthalmology, 140(4), 746-748.
Title/abstract: Excluded. Wrong intervention/comparator

Brecht, M. L., Anglin, M. D., & Wang, J. C. (1993). Treatment effectiveness for legally coerced versus voluntary methadone maintenance clients. American Journal of Drug and Alcohol Abuse, 19(1), 89-106.
Title/abstract: Excluded. Wrong indication/population.

Brecht, M.-L., Anglin, M. D., & Dylan, M. (2005). Coerced Treatment for Methamphetamine Abuse: Differential Patient Characteristics and Outcomes. American Journal of Drug and Alcohol Abuse, 31(2), 337-356.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Brems, C., Johnson, M. E., Warner, T. D., & Roberts, L. W. (2007). Exploring differences in caseloads of rural and urban healthcare providers in Alaska and New Mexico. Public Health, 121(1), 3-17.
Full paper: Excluded. Not a clinical study

Brenneis, M. J. (2002). Understandings, definitions, and experiences of clergy in residential psychiatric treatment. Counseling and Values, 46(2), 84-95.
Title/abstract: Excluded. Not a clinical study.

Bretherton, G. (1986). Irish inebriate reformatories, 1899-1920: A small experiment in coercion. Contemporary Drug Problems, 13(3), 473-502.
Title/abstract: Excluded. Not a clinical study.

Brewer, C. (1988). The management of opiate abuse: Learning from other addictions. Journal of Drug Issues, 18(4), 679-697.
Title/abstract: Excluded. Not a clinical study.

Brewster, M. P. (2001). An evaluation of the Chester County (PA) Drug Court Program. Journal of Drug Issues, 31(1), 177-206.
Title/abstract: Excluded. Wrong indication/population.

Brickner, P. W., Torres, R. A., Barnes, M., Newman, R. G., Des Jarlais, D. C., Whalen, D. P., et al. (1989). Recommendations for control and prevention of human immunodeficiency virus (HIV) infection in intravenous drug users. Annals of Internal Medicine, 110(10), 833-837.
Title/abstract: Excluded. Not a clinical study.

Bricout, V., & Wright, F. (2004). Update on nandrolone and norsteroids: How endogenous or xenobiotic are these substances? European Journal of Applied Physiology, 92(1-2), 1-12.
Title/abstract: Excluded. Wrong intervention/comparator

Brindis, C. D., Clayson, Z., & Berkowitz, G. (1997). Options for recovery: California's perinatal projects. Journal of Psychoactive Drugs, 29(1), 89-99.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Brizer, D. A., Maslansky, R., & Galanter, M. (1990). Treatment retention of patients referred by public assistance to an alcoholism clinic. American Journal of Drug and Alcohol Abuse, 16(3-4), 259-264.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Brody, J. L., & Waldron, H. B. (2000). Ethical issues in research on the treatment of adolescent substance abuse disorders. Addictive Behaviors, 25(2), 217-228.
Title/abstract: Excluded. Wrong intervention/comparator

Broner, N., Lattimore, P. K., Cowell, A. J., & Schlenger, W. E. (2004). Effects of diversion on adults with co-occurring mental illness and substance use: Outcomes from a national multi-site study. Behavioral Sciences and the Law, 22(4), 519-541.
Title/abstract: Excluded. Wrong intervention/comparator

Broner, N., Mayrl, D. W., & Landsberg, G. (2005). Outcomes of Mandated and Nonmandated New York City Jail Diversion for Offenders with Alcohol, Drug, and Mental Disorders. The Prison Journal, vol, 85(1), 18-49.
Title/abstract: Excluded. Wrong indication/population.

Brounstein, P. J., Emshoff, J. G., Hill, G. A., & Stoil, M. J. (1997). Assessment of Methodological Practices in the Evaluation of Alcohol and Other Drug (AOD) Abuse Prevention. Journal of Health & Social Policy, vol, 9(2), 1-19.
Title/abstract: Excluded. Not a clinical study.

Brown, B. S., & Flynn, P. M. (2002). The federal role in drug abuse technology transfer: A history and perspective. Journal of Substance Abuse Treatment, 22(4), 245-257.
Title/abstract: Excluded. Not a clinical study.

Brown, B. S., O'Grady, K. E., Battjes, R. J., Farrell, E. E., Smith, N. P., & Nurco, D. N. (2001). Effectiveness of a stand-alone aftercare program for drug-involved offenders. Journal of Substance Abuse Treatment, 21(4), 185-192.
Title/abstract: Excluded. Wrong intervention/comparator

Brown, C. (2004). A handbook on drug and alcohol abuse: The biomedical aspects. Primary Care Psychiatry, 9(4), 164.
Title/abstract: Excluded. Not a clinical study.

Brown, E. S., Jeffress, J., Liggin, J. D. M., Garza, M., & Beard, L. (2005). Switching outpatients with bipolar or schizoaffective disorders and substance abuse from their current antipsychotic to aripiprazole. Journal of Clinical Psychiatry, 66(6), 756-760.
Full paper: Excluded. Not a clinical study

Brown, P. M. (1986). A history of drug and alcohol block grant funding and its effects on Pennsylvania's prevention services system. Journal of Drug Education, 16(1), 13-25.
Title/abstract: Excluded. Not a clinical study.

Brudney, K., & Dobkin, J. (1992). Resurgent tuberculosis in New York city: Human immunodeficiency virus, homelessness, and the decline of tuberculosis control programs. Journal of Public Health Policy, 13(4), 435-450.
Title/abstract: Excluded. Wrong intervention/comparator

Brunner-Orne, M. (1956). The utilization of group psychotherapy in enforced treatment programs for alcoholics and addicts. International Journal of Group Psychotherapy, 6, 272-279.
Title/abstract: Excluded. Wrong intervention/comparator

Brust, P., Hesse, S., Muller, U., & Szabo, Z. (2006). Neuroimaging of the serotonin transporter: Possibilities and pitfalls. Current Psychiatry Reviews, 2(1), 111-149.
Full paper: Excluded. Not a clinical study

Buchanan, T. (2004). Coercion, harm, and complicity in research integrated with mandatory public health programs. The American journal of bioethics : AJOB, 4(1), 57-59.
Title/abstract: Excluded. Not a clinical study.

Bucknell, P. (1985). Some proposals for drugs legislation. British Journal of Addiction, 80(2), 149-152.
Title/abstract: Excluded. Not a clinical study.

Budney, A. J., Bickel, W. K., & Amass, L. (1998). Marijuana use and treatment outcome among opioid-dependent patients [Electronic Version]. Addiction (Abingdon, England), 493-503 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/289/CN-00153289/frame.html

Burdon, W. M., Farabee, D., Prendergast, M. L., Messina, N. P., & Cartier, J. (2002). Prison-Based Therapeutic Community Substance Abuse Programs--Implementation and Operational Issues. Federal Probation, 66(3), 3-8.
Title/abstract: Excluded. Wrong indication/population.

Burke, A. C., & Gregoire, T. K. (2007). Substance abuse treatment outcomes for coerced and noncoerced clients. Health and Social Work, 32(1), 7-15.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Burke, G., & Walshe, D. G. (1995). Addiction and temporary certification. A proposed change to legislation and it's possible implication for clinical practice. Irish medical journal, 88(6), 219-220.
Full paper: Excluded. Non-comparative studies

Burns, S. L., & Peyrot, M. (2003). Tough Love: Nurturing and Coercing Responsibility and Recovery in California Drug Courts. Social Problems, vol, 50(3), 416-438.
Title/abstract: Excluded. Not a clinical study.
Title/abstract: Excluded. Wrong intervention/comparator

Burton, L. C., Paglia, M. J., German, P. S., Shapiro, S., & Damiano, A. M. (1995). The effect among older persons of a general preventive visit on three health behaviors: smoking, excessive alcohol drinking, and sedentary lifestyle. The Medicare Preventive Services Research Team [Electronic

Version]. Preventive medicine, 492-497 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/954/CN-00120954/frame.html

Buxton, M. E., Smith, D. E., & Seymour, R. B. (1987). Spirituality and other points of resistance to the 12-Step recovery process. Journal of Psychoactive Drugs. Special Issue: Professional treatment and the 12-Step process, 19(3), 275-286.
Title/abstract: Excluded. Not a clinical study.

Byrne, D. G., & Mazanov, J. (1999). Sources of adolescent stress, smoking and the use of other drugs. Stress Medicine, 15(4), 215-227.
Title/abstract: Excluded. Wrong intervention/comparator

Cadillo-Chavez, R., Santiago-Delpin, E. A., Gonzalez-Caraballo, Z., Morales-Otero, L., Saade, M., Davis, J., et al. (2006). The Fate of Organs Refused Locally and Transplanted Elsewhere. Transplantation Proceedings, 38(3), 892-894.
Title/abstract: Excluded. Wrong intervention/comparator

Cahill, C. A. (1967). A Community Program for Control of Alcoholism. Community Mental Health Journal, 3(3), 273-275.
Title/abstract: Excluded. Wrong intervention/comparator

Callahan, S. (1989). The sorrow and the pity of drug-damaged babies. Health progress (Saint Louis, Mo.), 70(10), 20, 22.
Title/abstract: Excluded. Not a clinical study.

Campbell, N. D. (1999). Regulating "Maternal Instinct": Governing Mentalities of Late Twentieth-Century U.S. Illicit Drug Policy. Signs, vol, 24(4), 895-923.
Title/abstract: Excluded. Not a clinical study.

Cannon, P. N. (2006). When the walls come tumbling down: Part three. Northwest dentistry., 85(2), 39-40.
Title/abstract: Excluded. Wrong intervention/comparator

Canter, F. M. (1968). The requirement of abstinence as a problem in institutional treatment of alcoholics. Psychiatric Quarterly, 42(2), 217-231.
Title/abstract: Excluded. Wrong intervention/comparator

Cantwell, B., & McBride, A. J. (1998). Self detoxification by amphetamine dependent patients: A pilot study. Drug and Alcohol Dependence, 49(2), 157-163.
Title/abstract: Excluded. Not a clinical study.

Carey, M. P. (2005). Sexual risk reduction for patients with mental illness: Evidence of efficacy and reasons for hope. Current Infectious Disease Reports, 7(2), 85-86.
Title/abstract: Excluded. Wrong intervention/comparator

Cariski, A. T. (1995). Patient package inserts - The American regulatory and industry perspective. Drug Information Journal, 29(2), 603-607.
Title/abstract: Excluded. Not a clinical study.

Caroff, S. N., Walker, P., Campbell, E. C., Lorry, A., Petro, C., Lynch, K., et al. (2007). Treatment of tardive dyskinesia with galantamine: A randomized controlled crossover trial. Journal of Clinical Psychiatry, 68(3), 410-415.
Full paper: Excluded. Not a clinical study

Carpenter, M. D., Mulligan, J. C., Bader, I. A., & Meinzer, A. E. (1985). Multiple admissions to an urban psychiatric center: A comparative study. Hospital & Community Psychiatry, 36(12), 1305-1308.
Title/abstract: Excluded. Wrong intervention/comparator

Carreras, E. (2007). Risk assessment in haematopoietic stem cell transplantation: The liver as a risk factor. Best Practice and Research in Clinical Haematology, 20(2), 231-246.
Title/abstract: Excluded. Wrong intervention/comparator

Cassani, M., Giuliani, L., Amigoni, M., Buratta, A., & Marocchi, A. (2002). Experience with External Quality Assessment of drugs of abuse testing in the Lombardy Region in Italy. Clinical Chemistry and Laboratory Medicine, 40(2), 156-164.
Title/abstract: Excluded. Wrong intervention/comparator

Cavaiola, A. A. (1984). Resistance issues in the treatment of the DWI offender. Alcoholism Treatment Quarterly, 1(2), 87-100.
Title/abstract: Excluded. Not a clinical study.

Cavanagh Johnson, T. (1989). Female child perpetrators: Children who molest other children. Child Abuse and Neglect, 13(4), 571-585.
Title/abstract: Excluded. Wrong intervention/comparator

C'De Baca, J., Lapham, S. C., Liang, H. C., & Skipper, B. J. (2001). Victim impact panels: Do they impact drunk drivers? A follow-up of female and male, first-time and repeat offenders. Journal of Studies on Alcohol, 62(5), 615-620.
Title/abstract: Excluded. Wrong intervention/comparator

C'De Baca, J., Lapham, S. C., Paine, S., & Skipper, B. J. (2000). Victim impact panels: Who is sentenced to attend? Does attendance affect recidivism of first-time DWI offenders? Alcoholism: Clinical and Experimental Research, 24(9), 1420-1426.
Title/abstract: Excluded. Wrong intervention/comparator

Center for Substance Abuse Treatment (Ed.). (2006). *Detoxification and substance abuse treatment.* Rockville (MD): U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Chafetz, M. E. (1965). Is compulsory treatment of the alcoholic effective? Northwest medicine, 64(12), 932-937.
Title/abstract: Excluded. Not a clinical study.

Chalmers, D., Olenick, N. L., & Stein, W. (1993). Dispositional traits as risk in problem drinking. Journal of substance abuse, 5(4), 401-410.
Title/abstract: Excluded. Wrong intervention/comparator

Chang, I., Lapham, S. C., & Wanberg, K. W. (2001). Alcohol use inventory: Screening and assessment of first-time driving-while-impaired offenders. I. Reliability and profiles. Alcohol and Alcoholism, 36(2), 112-121.
Title/abstract: Excluded. Wrong intervention/comparator

Chao, T. C., Lo, D. S. T., Koh, J., Ting, T. C., Quek, L. M., Koh, T. H., et al. (1993). Glue sniffing deaths in Singapore - Volatile aromatic hydrocarbons in post-mortem blood by headspace gas chromatography. Medicine, Science and the Law, 33(3), 253-260.
Title/abstract: Excluded. Wrong intervention/comparator

Chappel, J. N. (1974). Methadone and chemotherapy in drug addiction: Genocidal or lifesaving? JAMA: Journal of the American Medical Association. Vol., 228(6), 725-728.
Title/abstract: Excluded. Wrong intervention/comparator

Chappell, A. T., & Maggard, S. R. (2007). Applying Black's theory of law to crack and cocaine dispositions. International Journal of Offender Therapy and Comparative Criminology, 51(3), 264-278.
Title/abstract: Excluded. Not a clinical study.

Chasnoff, I. J., Landress, H. J., & Barrett, M. E. (1990). The prevalence of illicit-drug or alcohol use during pregnancy and discrepancies in mandatory reporting in Pinellas County, Florida. New England Journal of Medicine, 322(17), 1202-1206.
Title/abstract: Excluded. Wrong intervention/comparator

Chavkin, W. (1991). Mandatory treatment for drug use during pregnancy. Journal of the American Medical Association, 266(11), 1556-1561.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Chen, X., Burgdorf, K., Dowell, K., Roberts, T., Porowski, A., & Herrell, J. M. (2004). Factors Associated with Retention of Drug Abusing Women in Long-Term Residential Treatment. Evaluation and Program Planning, 27(2), 205-212.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Chengzheng, Z., Zhimin, L., Dong, Z., Yanhong, L., Jianhui, L., Yilang, T., et al. (2004). Drug abuse in China. Annals of the New York Academy of Sciences, 1025(-), 439-445.
Title/abstract: Excluded. Not a clinical study.

Chick, J. (1998). Treatment of alcoholic violent offenders: Ethics and efficacy. Alcohol and Alcoholism, 33(1), 20-25.
Title/abstract: Excluded. Not a clinical study.

Chiodo, G. T., Moe, E. L., & Goldberg, L. (2004). Orbiting SATURN: countering politically-charged misinformation with facts. The American journal of bioethics : AJOB, 4(1), 43-48.
Title/abstract: Excluded. Not a clinical study.

Chng, C. L., & Fridinger, F. (1989). HIV antibody testing: who benefits and who loses? Journal of health & social policy, 1(1), 19-27.
Title/abstract: Excluded. Wrong intervention/comparator

Cicero, T. J., Inciardi, J. A., Adams, E. H., Geller, A., Senay, E. C., Woody, G. E., et al. (2005). Rates of abuse of tramadol remain unchanged with the introduction of new branded and generic products: Results of an abuse monitoring system, 1994-2004. Pharmacoepidemiology and Drug Safety, 14(12), 851-859.
Title/abstract: Excluded. Not a clinical study.

Ciraulo, D. A., Piechniczek-Buczek, J., & Iscan, E. N. (2003). Outcome predictors in substance use disorders. Psychiatric Clinics of North America, 26(2), 381-409.
Title/abstract: Excluded. Not a clinical study.

Citron, P. (1978). Group Work with Alcoholic Polydrug-Involved Adolescents with Deviant Behavior Syndrome. Social Work with Groups, vol, 1(1), 39-52.
Title/abstract: Excluded. Not a clinical study.

Cloutier, S., Skaer, T. L., & Newberry, R. C. (2006). Consumption of alcohol by sows in a choice test. Physiology & Behavior, 88(1-2), 101-107.
Title/abstract: Excluded. Wrong intervention/comparator

Cohan, D. L., Kim, A., Ruiz, J., Morrow, S., Reardon, J., Lynch, M., et al. (2005). Health indicators among low income women who report a history of sex work: The population based Northern California Young Women's Survey. Sexually Transmitted Infections, 81(5), 428-433.
Title/abstract: Excluded. Wrong intervention/comparator

Cohen, J. B., Dickow, A., Horner, K., Zweben, J. E., Balabis, J., Vandersloot, D., et al. (2003). Abuse and Violence History of Men and Women in Treatment for Methamphetamine Dependence. American Journal on Addictions, 12(5), 377-385.
Title/abstract: Excluded. Not a clinical study.

Cohen, P. (2000). No more kicks: there are treatments on the way that promise to destroy the allure of addictive drugs for good. Problem solved? New Scientist, 166(2242), 22-26.
Title/abstract: Excluded. Not a clinical study.

Colby, J. J., Raymond, G. A., & Colby, S. M. (2000). Evaluation of a college policy mandating treatment for students with substantiated drinking problems. Journal of College Student Development, 41(4), 395-404.
Title/abstract: Excluded. Not a clinical study.

Colker, A. C., & McKinley, A. (2003). Behavioral health issue brief: parity and other insurance mandates for the treatment of mental illness and substance abuse: year end report-2003. Issue brief (Health Policy Tracking Service), 1-36.
Title/abstract: Excluded. Not a clinical study.

College on Problems of Drug, D. (1997). Statement on National Drug Policy. Drug and Alcohol Dependence, vol, 47(1), 63-71.
Title/abstract: Excluded. Not a clinical study.

Collins, G. B., McAllister, M. S., & Ford, D. B. (2007). Patient-provider e-mail communication as an adjunctive tool in addiction medicine. Journal of addictive diseases : the official journal of the ASAM, American Society of Addiction Medicine, 26(2), 45-52.
Title/abstract: Excluded. Wrong intervention/comparator

Collins, J. J., & Allison, M. (1983). Legal coercion and retention in drug abuse treatment. Hospital and Community Psychiatry, 34(12), 1145-1149.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Compton, M. T., Craw, J., & Rudisch, B. E. (2006). Determinants of inpatient psychiatric length of stay in an urban county hospital. Psychiatric Quarterly, 77(2), 173-188.
Full paper: Excluded. Not a clinical study

Compton, S. N., Swanson, J. W., Wagner, H. R., Swartz, M. S., Burns, B. J., & Elbogen, E. B. (2003). Involuntary outpatient commitment and homelessness in persons with severe mental illness. Mental Health Services Research, 5(1), 27-38.
Full paper: Excluded. Wrong intervention/comparator

Cooper, A. J. (1988). A clinical study of violence in patients referred on a Form I to a general hospital psychiatric unit. Canadian Journal of Psychiatry, 33(8), 711-715.
Title/abstract: Excluded. Not a clinical study.

Cooperman, N. A., Falkin, G. P., & Cleland, C. (2005). Changes in women's sexual risk behaviors after therapeutic community treatment. AIDS Education and Prevention, 17(2), 157-169.
Title/abstract: Excluded. Wrong intervention/comparator

Copeland, J., & Maxwell, J. C. (2007). Cannabis treatment outcomes among legally coerced and non-coerced adults. BMC public health, 7, 111%N -.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Copemann, C. D., & Shaw, P. L. (1976). Effects of contingent management of addicts expecting commitment to a community based treatment program. British Journal of Addiction, 71(2), 187-191.
Title/abstract: Excluded. Wrong indication/population.

Corcoran, W. J., & Carlson, M. C. (1983). Criminal prosecution of drug traffickers under the continuing criminal enterprise statute in federal courts of the United States of America. Bulletin on Narcotics, 35(2), 77-94.
Title/abstract: Excluded. Not a clinical study.

Cordero, A. E. (2004). When Family Reunification Works: Data-Mining Foster Care Records. Families in Society, 85(4), 571-580.
Title/abstract: Excluded. Wrong intervention/comparator

Cornish, J. W., Metzger, D., Woody, G. E., Wilson, D., McLellan, A. T., Vandergrift, B., et al. (1997). Naltrexone pharmacotherapy for opioid dependent federal probationers [Electronic Version]. Journal of substance abuse treatment, 529-534 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/946/CN-00146946/frame.html

Corrigan, B., & Kazlauskas, R. (2003). Medication use in athletes selected for doping control at the Sydney Olympics (2000). Clinical Journal of Sport Medicine, 13(1), 33-40.
Title/abstract: Excluded. Wrong intervention/comparator

Cosden, M., Basch, J. E., Campos, E., Greenwell, A., Barazani, S., & Walker, S. (2006). Effects of Motivation and Problem Severity on Court-Based Drug Treatment. Crime & Delinquency, vol, 52(4), 599-618.
Title/abstract: Excluded. Wrong intervention/comparator

Coussins, J., & Winstanley, K. (2004). Commentary on the Alcohol Harm Reduction Strategy for England for Drugs: Education, prevention and policy. Drugs: Education, Prevention & Policy, 11(5), 355-357.
Title/abstract: Excluded. Not a clinical study.

Coverdale, J. H. (1996). HIV risk behavior in the chronically mentally ill. International Review of Psychiatry, 8(2-3), 149-156.
Title/abstract: Excluded. Wrong intervention/comparator

Cox, E. (2000). The implementation of the United Nations Convention on the Rights of the Child: global commitments and local realities. Papua and New Guinea medical journal, 43(1-2), 18-23.
Title/abstract: Excluded. Not a clinical study.

Crawford, M. J., Gibbon, R., Ellis, E., & Waters, H. (2004). In hospital, at home, or not at all. A cross-sectional survey of patient preferences for receipt of compulsory treatment. Psychiatric Bulletin, 28(10), 360-363.
Title/abstract: Excluded. Wrong intervention/comparator

Crnkovic, D., Buljan, M., Karlovic, D., Katinic, K., & Martinac, M. (2004). Serum Electrolyte Concentrations in Subjects Acutely Intoxicated with Alcohol. Alcoholism: Journal on Alcoholism and Related Addictions, 40(1), 17-27.
Title/abstract: Excluded. Wrong intervention/comparator

Crooks, G. M. (1987). Taking charge: How to make a difference. Shaping public policy. Public Health Reports, 102(4 SUPPL. JULY/AUG.), 85-90.
Title/abstract: Excluded. Not a clinical study.

Crossfield, J. R. (2005). Review of Integrated Treatment for Dual Disorders: A Guide to Effective Practice. Journal of Cognitive Psychotherapy, 19(4), 399-400.
Title/abstract: Excluded. Not a clinical study.

Crothers, M., & Warren, L. W. (1996). Parental antecedents of adult codependency. Journal of Clinical Psychology, 52(2), 231-239.
Title/abstract: Excluded. Wrong intervention/comparator

Cuilleret, J., & Guillemin, G. (1990). Surgical management of chronic pancreatitis on the continent of Europe. World journal of surgery, 14(1), 11-18.
Title/abstract: Excluded. Wrong intervention/comparator

Culshaw, M., Wootton, L., & Wylie, S. (2005). Alcohol dependence and driving: A survey of patients' knowledge of DVLA regulations and possible clinical implications. Psychiatric Bulletin, 29(3), 90-93.

Title/abstract: Excluded. Not a clinical study.

Curet, E., Langrod, J., Page, J., & Lowinson, J. H. (1985). Issues of transference in methadone maintenance treatment. International Journal of the Addictions, 20(3), 435-448.
Title/abstract: Excluded. Not a clinical study.

Curie, C. G. (2005). SAMHSA's Commitment to Eliminating the Use of Seclusion and Restraint. Psychiatric Services, 56(9), 1139-1140.
Title/abstract: Excluded. Not a clinical study.

Curran, G. M., Kirchner, J. E., Allee, E., & Booth, B. M. (2003). Datapoints: Detection of Substance Use Disorders in Veterans Affairs Primary Care Clinics. Psychiatric Services, 54(10), 1326.
Title/abstract: Excluded. Not a clinical study.

Curtis, R., Friedman, S. R., Neaigus, A., Jose, B., Goldstein, M., & Des Jarlais, D. C. (1994). Implications of directly observed therapy in tuberculosis control measures among IDUs. Public Health Reports, 109(3), 319-327.
Full paper: Excluded. Not a clinical study

Cutter, F. (1979). Addictive personality or instant sociopathy. Corrective & Social Psychiatry & Journal of Behavior Technology, Methods & Therapy, 25(1), 1-5.
Title/abstract: Excluded. Not a clinical study.

Dalrymple, A. J., O'Doherty, J. J., & Nietschei, K. M. (1995). Comparative analysis of native admissions and registrations to northwestern Ontario treatment facilities: Hospital and community sectors. Canadian Journal of Psychiatry, 40(8), 467-473.
Title/abstract: Excluded. Wrong intervention/comparator

Dalton, B. (2001). Batterer characteristics and treament completion. Journal of Interpersonal Violence, 16(12), 1223-1238.
Title/abstract: Excluded. Wrong intervention/comparator

Dana, A. H. (1963). Problem Drinking in Industry: a Study of Industry:S Implications of Alcoholism in Florida. Florida State University Research Reports in Social Science, vol, 6(1), 1-113.
Title/abstract: Excluded. Not a clinical study.

Danks, R. R., Wibbenmeyer, L. A., Faucher, L. D., Sihler, K. C., Kealey, G. P., Chang, P., et al. (2004). Methamphetamine-associated burn injuries: A retrospective analysis. Journal of Burn Care and Rehabilitation, 25(5), 425-429.
Title/abstract: Excluded. Wrong intervention/comparator

Darbro, N. (2005). Alternative Diversion Programs for Nurses with Impaired Practice: Completers and Non-Completers. Journal of Addictions Nursing, 16(4), 169-182.
Title/abstract: Excluded. Not a clinical study.

Davies, P., Iams, H., & Rupp, K. (2000). The effect of welfare reform on SSA's disability programs: design of policy evaluation and early evidence. Social security bulletin, 63(1), 3-11.
Title/abstract: Excluded. Not a clinical study.

Dazzan, P., & Bhugra, D. (2000). Use of the Mental Health Act criteria in the decision-making process for compulsory admissions: a study of psychiatrists in South London. Medicine, Science and the Law, 40(4), 336-344.
Title/abstract: Excluded. Wrong intervention/comparator

De Leon, G. (1989). Alcohol: The hidden drug among substance abusers. British Journal of Addiction, 84(8), 837-840.
Title/abstract: Excluded. Not a clinical study.

De Leon, G. (1988). Legal pressure in therapeutic communities. Journal of Drug Issues, 18(4), 625-640.

Title/abstract: Included
Full paper: Excluded. Not a clinical study

De Leon, G. (1988). Legal pressure in therapeutic communities. In C. G. Leukefeld & F. M. Tims (Eds.), Compulsory Treatment of Drug Abuse: Research and Clinical Practice (Vol. 86, pp. 160-177). Rockville, MD.
Title/abstract: Included
Full paper: Excluded. Not a clinical study.

De Miranda, S. (1989). The ethics of statutory coercion in the treatment of chemical substance abuse/dependence (addiction). Medicine and Law, 7(5), 427-432.
Title/abstract: Excluded. Not a clinical study.

De Rosa, C. J., Montgomery, S. B., Kipke, M. D., Iverson, E., Ma, J. L., & Unger, J. B. (1999). Service utilization among homeless and runaway youth in Los Angeles, California: rates and reasons. The Journal of adolescent health : official publication of the Society for Adolescent Medicine, 24(6), 449-458.
Title/abstract: Excluded. Not a clinical study.

De Ville, K. A., & Kopelman, L. M. (1999). Fetal protection in Wisconsin's revised child abuse law: right goal, wrong remedy. The Journal of law, medicine & ethics : a journal of the American Society of Law, Medicine & Ethics, 27(4), 332-342, 294.
Title/abstract: Excluded. Not a clinical study.

DeCew, J. W. (1994). Drug testing. Balancing privacy and public safety. The Hastings Center report, 24(2), 17-23.
Title/abstract: Excluded. Wrong intervention/comparator

Declercq, E., Stroobant, A., Kriz, B., Worm, A. M., Smith, E., Catchpole, M., et al. (1993). European community concerted action on HIV seroprevalence among sexually transmitted disease patients in 18 European sentinel networks. AIDS, 7(3), 393-400.
Title/abstract: Excluded. Wrong intervention/comparator

Delaney, T., & Crean, E. (2002). Behavioral health issue brief: minimum mandated benefits and mandated offerings for mental health and substance abuse: year end report-2002. Issue brief (Health Policy Tracking Service), 1-24.
Title/abstract: Excluded. Not a clinical study.

Dennis, M. L., & Stevens, S. J. (2003). Maltreatment issues and outcomes of adolescents enrolled in substance abuse treatment. Child maltreatment, 8(1), 3-6.
Title/abstract: Excluded. Wrong intervention/comparator

Densen-Gerber, J., Wiener, M., & Hochstedler, R. (1972). Sexual behavior, abortion, and birth control in heroin addicts: Legal and psychiatric considerations. Comtemporary Drug Problems. Vol., 1(4), 783-793.
Title/abstract: Excluded. Not a clinical study.

Dent, C. W., Sussman, S., & Stacy, A. W. (2001). Project Towards No Drug Abuse: generalizability to a general high school sample [Electronic Version]. Preventive medicine, 514-520 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/508/CN-00348508/frame.html

DePhilippis, D., Metzger, D. S., Woody, G. E., & Navaline, H. A. (1992). Attitudes toward mandatory human immunodeficiency virus testing and contact tracing: A survey of intravenous drug users in treatment. Journal of Substance Abuse Treatment, 9(1), 39-42.
Title/abstract: Excluded. Wrong intervention/comparator

Deraas, T. S., Hansen, V., Giaever, A., & Olstad, R. (2006). Acute psychiatric admissions from an out-of-hours Casualty Clinic; how do referring doctors and admitting specialists agree? BMC Health Services Research, 6(-).
Full paper: Excluded. Non-comparative studies

Derse, A. R. (2005). What part of "no" don't you understand? Patient refusal of recommended treatment in the emergency department. Mount Sinai Journal of Medicine, 72(4), 221-227.
Title/abstract: Excluded. Not a clinical study.

Desland, M. L., & Batey, R. G. (1992). A 12-month prospective comparison of court-diverted with self-referred heroin users. Drug Alcohol Rev, 11(2), 121-129.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Desmond, D. P., & Maddux, J. F. (1996). Compulsory supervision and methadone maintenance. Journal of Substance Abuse Treatment, 13(1), 79-83.
Title/abstract: Excluded. Wrong intervention/comparator
Full paper: Excluded. Wrong indication/population

DeVille, K. A., & Kopelman, L. M. (1998). Moral and social issues regarding pregnant women who use and abuse drugs. Obstetrics and Gynecology Clinics of North America, 25(1), 237-254.
Title/abstract: Excluded. Not a clinical study.

DeZolt, E. M. (1996). The Political Economy of Recovery. Social Insight, pp.
Title/abstract: Excluded. Not a clinical study.

Dhai, A., Szabo, C. P., & McQuoid-Mason, D. J. (2006). The impaired practitioner - Scope of the problem and ethical challenges. South African Medical Journal, 96(10), 1069-1072.
Title/abstract: Excluded. Wrong intervention/comparator

Diaz, A., Neal, W. P., Nucci, A. T., Ludmer, P., Bitterman, J., & Edwards, S. (2004). Legal and ethical issues facing adolescent health care professionals. Mount Sinai Journal of Medicine, 71(3), 181-185.
Title/abstract: Excluded. Not a clinical study.

Dickens, B. M. (1992). Ethics Committes, Organ Transplantation and Public Policy. Law, Medicine and Health Care, vol, 20(4), 300-306.
Title/abstract: Excluded. Wrong intervention/comparator

Dickman, S. (1988). Mandatory AIDS tests on basis 'of slight suspicion' in Bavaria. Nature, 333, 585%N 6174.
Title/abstract: Excluded. Wrong intervention/comparator

Dickman, S. (1987). Bavaria begins mandatory AIDS tests in the face of criticism. Nature, 327, 264%N 6120.
Title/abstract: Excluded. Wrong intervention/comparator

Dill, P. L., & Wells-Parker, E. (2006). Court-mandated treatment for convicted drinking drivers. Alcohol research & health : the journal of the National Institute on Alcohol Abuse and Alcoholism., 29(1), 41-48.
Title/abstract: Excluded. Wrong indication/population.

Dionisio, D., Cao, Y., Hongzhou, L., Kraisintu, K., & Messeri, D. (2006). Affordable antiretroviral drugs for the under-served markets: How to expand equitable access against the backdrop of challenging scenarios? Current HIV Research, 4(1), 3-20.
Title/abstract: Excluded. Not a clinical study.

Dohan, D., Schmidt, L., & Henderson, S. (2005). From enabling to bootstrapping: Welfare workers' views of substance abuse and welfare reform. Contemporary Drug Problems, 32(3), 429-455.
Title/abstract: Excluded. Not a clinical study.

Doi, S. C., & DiLorenzo, T. M. (1993). An evaluation of a tobacco use education-prevention program: a pilot study. Journal of substance abuse, 5(1), 73-78.
Title/abstract: Excluded. Not a clinical study.

Dolman, J. M., & Hawkes, N. D. (2005). Combining the AUDIT questionnaire and biochemical markers to assess alcohol use and risk of alcohol withdrawal in medical inpatients. Alcohol and Alcoholism, 40(6), 515-519.
Title/abstract: Excluded. Not a clinical study.

Donohoe, M. (2005). Urine trouble: Practical, legal, and ethical issues surrounding mandated drug testing of physicians. Journal of Clinical Ethics, 16(1), 85-96.
Title/abstract: Excluded. Wrong intervention/comparator

Dooley, D., & Prause, J. (1997). Effect of favorable employment change on alcohol abuse: one- and five-year follow-ups in the National Longitudinal Survey of Youth. American journal of community psychology, 25(6), 787-807.
Full paper: Excluded. Not a clinical study

Dorman, N. D., & Towle, L. H. (1991). Initiatives to curb alcohol abuse and alcoholism in the former Soviet Union. Alcohol Health & Research World, 15(4), 303-306.
Title/abstract: Excluded. Not a clinical study.

Dowd, L. S., Leisring, P. A., & Rosenbaum, A. (2005). Partner aggressive women: Characteristics and treatment attrition. Violence and Victims, 20(2), 219-233.
Title/abstract: Excluded. Wrong intervention/comparator

Drake, B., Jonson-Reid, M., & Sapokaite, L. (2006). Re-reporting of child maltreatment: does participation in other public sector services moderate the likelihood of a second maltreatment report? Child abuse & neglect, 30(11), 1201-1226.
Title/abstract: Excluded. Wrong intervention/comparator

Drapkin, M. L., McCrady, B. S., Swingle, J. M., & Epstein, E. E. (2005). Exploring bidirectional couple violence in a clinical sample of female alcoholics. Journal of Studies on Alcohol, 66(2), 213-219.
Title/abstract: Excluded. Wrong intervention/comparator

Dundee, J. W. (1991). After thiopentone: A review of recent history. Bailliere's Clinical Anaesthesiology, 5(2), 267-281.
Full paper: Excluded. Not a clinical study

Dunn, J., & Fahy, T. A. (1990). Police admissions to a psychiatric hospital. Demographic and clinical differences between ethnic groups. British Journal of Psychiatry, 156(MAR.), 373-378.
Title/abstract: Excluded. Wrong intervention/comparator

DuRant, R. H., Ashworth, C. S., Newman, C., & Rickert, V. I. (1994). Stability of the relationships between anabolic steroid use and multiple substance use among adolescents. Journal of Adolescent Health, 15(2), 111-116.
Title/abstract: Excluded. Wrong intervention/comparator

Duryea, E. J. (1983). Utilizing tenets of inoculation theory to develop and evaluate a preventive alcohol education intervention. The Journal of school health, 53(4), 250-256.
Title/abstract: Excluded. Not a clinical study.

DuVal, G., & Salmon, C. (2004). Ethics of Drug Treatment Research With Court-Supervised Subjects. Journal of Drug Issues, 34(4), 991-1006.
Title/abstract: Excluded. Not a clinical study.

DuVal, G., & Salmon, C. (2004). Research note: Ethics of drug treatment research with court-supervised subjects. Journal of Drug Issues, 34(4), 991-1005.
Title/abstract: Excluded. Not a clinical study.

Easton, C., Swan, S., & Sinha, R. (2000). Motivation to change substance use among offenders of domestic violence. Journal of Substance Abuse Treatment, 19(1), 1-5.

Title/abstract: Excluded. Wrong intervention/comparator

Eastwood, M., Sweeney, D., & Piercy, F. (1987). The "no-problem problem": A family therapy approach for certain first-time adolescent substance abusers. Family Relations, 36(2), 125-128.
Title/abstract: Excluded. Not a clinical study.

Edwards, G., Kyle, E., & Nicholls, P. (1974). Alcoholics admitted to four hospitals in England: I. Social class and the interaction of alcoholics with the treatment system. Quarterly Journal of Studies on Alcohol. Vol., 35(2), 499-522.
Title/abstract: Excluded. Not a clinical study.

Einstein, S. (1982). Treating drug use and the drug user: Factors and issues to be considered in the development of a national treatment program. International Journal of the Addictions, 17(8), 1401-1417.
Title/abstract: Excluded. Not a clinical study.

Eiser, C., Eiser, J. R., Claxton-Oldfield, S., & Pritchard, M. (1988). Attitudes, attributions, and persuasion: how young people's ideas about drugs relate to their preferences for different strategies of prevention. Journal of substance abuse, 1(1), 35-44.
Title/abstract: Excluded. Wrong intervention/comparator

Ekendahl, M. (2007). Will and skill - An exploratory study of substance abusers' attitudes towards lifestyle change. European Addiction Research, 13(3), 148-155.
Title/abstract: Excluded. Not a clinical study.

El-Bassel, N., Gilbert, L., & Rajah, V. (2003). The relationship between drug abuse and sexual performance among women on methadone: Heightening the risk of sexual intimate violence and HIV. Addictive Behaviors, 28(8), 1385-1403.
Title/abstract: Excluded. Not a clinical study.

Elbogen, E. B., Soriano, C., Van Dorn, R., Swartz, M. S., & Swanson, J. W. (2005). Consumer views of representative payee use of disability funds to leverage treatment adherence. Psychiatric Services, 56(1), 45-49.
Title/abstract: Excluded. Wrong intervention/comparator

Eldridge, G. D., St. Lawrence, J. S., Little, C. E., Shelby, M. C., Brasfield, T. L., Service, J. W., et al. (1997). Evaluation of an HIV risk reduction intervention for women entering inpatient substance abuse treatment. AIDS Education and Prevention, 9(1 SUPPL.), 62-76.
Title/abstract: Excluded. Wrong intervention/comparator

Elekes, Z. (1987). Legislative Arrangements Relevant to Alcohol Treatment in Hungary. Contemporary Drug Problems, vol, 14(1), 113-123.
Title/abstract: Excluded. Not a clinical study.

Ellis, A., & Schoenfeld, E. (1990). Divine intervention and the treatment of chemical dependency. Journal of Substance Abuse, 2(4), 459-468.
Title/abstract: Excluded. Not a clinical study.

Emshoff, J., Blakely, C., Gray, D., Jakes, S., Brounstein, P., Coulter, J., et al. (2003). An ESID case study at the federal level. American journal of community psychology, 32(3-4), 345-357.
Title/abstract: Excluded. Not a clinical study.

Erim, Y., Bottcher, M., Dahmen, U., Beck, O., Broelsch, C. E., & Helander, A. (2007). Urinary ethyl glucuronide testing detects alcohol consumption in alcoholic liver disease patients awaiting liver transplantation. Liver Transplantation, 13(5), 757-761.
Title/abstract: Excluded. Wrong intervention/comparator

Estroff, T. W., & Gold, M. S. (1985). Chronic medical complications of drug abuse. Psychiatric medicine, 3(3), 267-286.
Title/abstract: Excluded. Not a clinical study.

Ettner, S. L. (1997). Measuring the human cost of a weak economy: Does unemployment lead to alcohol abuse? Social Science and Medicine, 44(2), 251-260.
Full paper: Excluded. Not a clinical study

Evans-Whipp, T., Beyers, J. M., Lloyd, S., Lafazia, A. N., Toumbourou, J. W., Arthur, M. W., et al. (2004). A review of school drug policies and their impact on youth substance use. Health Promotion International, 19(2), 227-234.
Title/abstract: Excluded. Wrong intervention/comparator

Ewick, P. (2000). The Subject Is Alcohol. Economy and Society, vol, 29(2), 308-315.
Title/abstract: Excluded. Not a clinical study.

Fakhoury, W. K. H., & Priebe, S. (2006). An unholy alliance: Substance abuse and social exclusion among assertive outreach patients. Acta Psychiatrica Scandinavica, 114(2), 124-131.
Title/abstract: Excluded. Wrong intervention/comparator

Falkin, G. P., & Strauss, S. M. (2003). Social supporters and drug use enablers: A dilemma for women in recovery. Addictive Behaviors, 28(1), 141-155.
Title/abstract: Excluded. Not a clinical study.

Fals-Stewart, W., & Lucente, S. (1994). The effect of cognitive rehabilitation on the neuropsychological status of patients in drug abuse treatment who display neurocognitive impairment. Rehabilitation Psychology, 39(2), 75-94.
Title/abstract: Excluded. Wrong intervention/comparator

Farabee, D. (2006). Naltrexone as negative reinforcement. Comments on "A behavioral analysis of coerced treatment for addicted offenders". Journal of Substance Abuse Treatment, 31(2), 141-142.
Title/abstract: Excluded. Wrong intervention/comparator

Farabee, D., Prendergast, M., & Anglin, M. D. (1998). The effectiveness of coerced treatment for drug-abusing offenders. Federal Probation, 62(1), 3-10.
Title/abstract: Excluded. Wrong intervention/comparator
Farabee, D., Shen, H., & Sanchez, S. (2004). Program-level predictors of antipsychotic medication adherence among parolees. International Journal of Offender Therapy and Comparative Criminology, 48(5), 561-571.
Title/abstract: Excluded. Wrong intervention/comparator

Farabee, D., Simpson, D. D., Dansereau, D., & Knight, K. (1995). Cognitive inductions into treatment among drug users on probation. Journal of Drug Issues, 25(4), 669-682.
Full paper: Excluded. Wrong indication/population

Farley, P. C., Hoadley, S., Giri, J., & Gregory, G. G. (1983). The clinical correlates of alcoholism in the young male. Military Medicine, 148(6), 521-523.
Title/abstract: Excluded. Wrong intervention/comparator

Fassino, S., Scarso, G., Barbero, L., Taylor, J., Pezzini, F., & Furlan, P. M. (1992). The image of self and of the environment in drug abusers: A comparative study using the TAT. Drug and Alcohol Dependence, 30(3), 253-261.
Title/abstract: Excluded. Wrong intervention/comparator

Fayne, M., & Silvan, M. (1999). Treatment issues in the group psychotherapy of addicted physicians. Psychiatric Quarterly, 70(2), 123-135.
Title/abstract: Excluded. Not a clinical study.

Feix, J., & Wolber, G. (2007). Intoxication and settled insanity: A finding of not guilty by reason of insanity. Journal of the American Academy of Psychiatry and the Law, 35(2), 172-182.
Full paper: Excluded. Not a clinical study

Feroni, I., Peretti-Watel, P., Masut, A., Coudert, C., Paraponaris, A., & Obadia, Y. (2005). French general practitioners' prescribing high-dosage buprenorphine maintenance treatment: Is the existing training (good) enough? Addictive Behaviors, 30(1), 187-191.
Title/abstract: Excluded. Wrong intervention/comparator

Ferracuti, S., & Marasco, M. (1994). The criminal responsibility of drug and alcohol abusers. Journal of Drug Issues, 24(4), 679-686.
Full paper: Excluded. Not a clinical study

Ferrell, R. B., Price, T. R., Gert, B., & Bergen, B. J. (1984). Volitional disability and physician attitudes toward noncompliance. Journal of Medicine and Philosophy, 9(4), 333-351.
Full paper: Excluded. Not a clinical study

Ferri, M., Amato, L., & Davoli, M. (2006). Alcoholics Anonymous and other 12-step programmes for alcohol dependence. Cochrane database of systematic reviews (Online), 3(-), CD005032.
Title/abstract: Excluded. Wrong intervention/comparator

Festinger, D. S., Marlowe, D. B., Croft, J. R., Dugosh, K. L., Mastro, N. K., Lee, P. A., et al. (2005). Do research payments precipitate drug use or coerce participation? Drug and Alcohol Dependence, 78(3), 275-281.
Title/abstract: Excluded. Wrong intervention/comparator

Field, M. A. (1989). Controlling the woman to protect the fetus. Law, medicine & health care : a publication of the American Society of Law & Medicine, 17(2), 114-129.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Field, M. G., & Powell, D. E. (1981). Alcohol Abuse in the Soviet Union. The Hastings Center Report, vol, 11(5), 40-44.
Title/abstract: Excluded. Not a clinical study.

Field, M. G., & Powell, D. E. (1981). Voluntary health risks and public policy. 3. Alcohol abuse in the Soviet Union. The Hastings Center report, 11(5), 40-44.
Title/abstract: Excluded. Wrong intervention/comparator

Fielder, O., & Altice, F. L. (2005). Attitudes toward and beliefs about prenatal HIV testing policies and mandatory HIV testing of newborns among drug users. AIDS and Public Policy Journal, 20(3-4), 74-91.
Title/abstract: Excluded. Wrong intervention/comparator

Fillmore, K. M., & Kelso, D. (1987). Coercion into alcoholism treatment: Meanings for the disease concept of alcoholism. Journal of Drug Issues. Special Issue: Social constructions and ideologies of substance abuse, 17(3), 301-319.
Title/abstract: Excluded. Wrong intervention/comparator

Finch, E., Brotchie, J., Williams, K., Ruben, S., Felix, L., & Strang, J. (2003). Sentenced to treatment: Early experience of drug treatment and testing orders in England. European Addiction Research, 9(3), 131-137.
Title/abstract: Excluded. Wrong intervention/comparator

Finfgeld, D. L. (2001). Emergent drug abuse resolution models and their implications for childbearing and childrearing women. Health Care for Women International, 22(8), 723-733.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Fioritti, A., Melega, V., Ferriani, E., Rucci, P., Scaramelli, A. R., Venco, C., et al. (2001). Crime and mental illness: An investigation of three Italian forensic hospitals. Journal of Forensic Psychiatry, 12(1), 36-51.
Title/abstract: Excluded. Wrong intervention/comparator

Fischer, B., Rehm, J., Uchtenhagen, A., & Kirst, M. (2002). Compulsory treatment - What do we know and where should we go? European Addiction Research, 8(2), 52-53.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Fischer, B., Roberts, J. V., & Kirst, M. (2002). Compulsory drug treatment in Canada: Historical origins and recent developments. European Addiction Research, 8(2), 61-68.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Flaherty, L. T., Weist, M. D., & Warner, B. S. (1996). School-based mental health services in the United States: History, current models and needs. Community Mental Health Journal, 32(4), 341-352.
Title/abstract: Excluded. Not a clinical study.

Flannery, M. T. (1991). Court-Ordered Prenatal Intervention: A Final Means to the End of Gestational Substance Abuse. Journal of Family Law, vol, 30(3), 519-604.
Title/abstract: Excluded. Not a clinical study.

Fleischman, A. R., Post, L. F., & Dubler, N. N. (1994). Mandatory newborn screening for human immunodeficiency virus. Bulletin of the New York Academy of Medicine: Journal of Urban Health, 71(1), 4-17.
Title/abstract: Excluded. Wrong intervention/comparator

Fleming, P. M., Meyroyan, A., & Klimova, I. (1994). Alcohol treatment services in Russia: A worsening crisis. Alcohol and Alcoholism, 29(4), 357-362.
Title/abstract: Excluded. Wrong intervention/comparator

Fletcher, C. E., & Ronis, D. L. (2005). Satisfaction of impaired health care professionals with mandatory treatment and monitoring. Journal of Addictive Diseases, 24(3), 61-75.
Title/abstract: Excluded. Wrong intervention/comparator

Floren, A. E. (1994). Urine drug screening and the family physician. American Family Physician, 49(6), 1441-1447.
Title/abstract: Excluded. Not a clinical study.

Flores, P. J. (1982). The efficacy of the use of coercion in getting DWI offenders into treatment. Journal of Alcohol and Drug Education, 28(1), 18-27.
Title/abstract: Excluded. Wrong intervention/comparator

Flynn, C. A., & Brown, W. E. (1991). The effects of a mandatory alcohol education program on college student problem drinkers. Journal of Alcohol and Drug Education, 37(1), 15-24.
Title/abstract: Excluded. Wrong intervention/comparator

Flynn, S. (2005). The Red Hook Community Justice Center: An evaluation of a community court. Journal of Psychiatry and Law, 33(1), 43-101.
Title/abstract: Excluded. Not a clinical study.

Forsyth, A. J. M., & Barnard, M. (1999). Contrasting levels of adolescent drug use between adjacent urban and rural communities in Scotland. Addiction, 94(11), 1707-1718.
Title/abstract: Excluded. Wrong intervention/comparator

Fortunati, F. G., Jr., & Zonana, H. V. (2003). Cultural considerations in child and adolescent psychiatric emergencies and crises. Child and Adolescent Psychiatric Clinics of North America, 12(4), 745-761.
Title/abstract: Excluded. Not a clinical study.

Fortunati Jr, F. G., & Zonana, H. V. (2003). Legal considerations in the child psychiatric emergency department. Child and Adolescent Psychiatric Clinics of North America, 12(4), 745-761.
Title/abstract: Excluded. Not a clinical study.

Frank, J. B., & Rodowski, M. F. (1999). Review of psychological issues in victims of domestic violence seen in emergency settings. Emergency Medicine Clinics of North America, 17(3), 657-677.
Title/abstract: Excluded. Not a clinical study.

Fraser, A. D., & Zamecnik, J. (2003). Impact of Lowering the Screening and Confirmation Cutoff Values for Urine Drug Testing Based on Dilution Indicators. Therapeutic Drug Monitoring, 25(6), 723-727.
Title/abstract: Excluded. Wrong intervention/comparator

Fraser Jr, J. J., & McAbee, G. N. (2004). Dealing with the parent whose judgment is impaired by alcohol or drugs: legal and ethical considerations. Pediatrics, 114(3), 869-873.
Title/abstract: Excluded. Not a clinical study.

Frawley, P. J. (1987). Neurobehavioral model of addiction. Journal of Drug Issues, 17(1-2), 29-46.
Full paper: Excluded. Not a clinical study

Freckelton, I. (2005). Applications for release by Australians in Victoria found not guilty of offences of violence by reason of mental impairment. International Journal of Law and Psychiatry, 28(4), 375-404.
Full paper: Excluded. Wrong indication/population

Freckelton, I. (2005). Distractors and distressors in involuntary status decision-making. Psychiatry, Psychology and Law, 12(1), 88-102.
Full paper: Excluded. Not a clinical study

Frederick, V., Coltrane, F. P., & Griffith, L. (1976). Developing a partnership between a court and community agencies to reduce involuntary commitments. Hospital and Community Psychiatry, 27(10), 689, 692.
Full paper: Excluded. Not a clinical study

Freedberg, E. J., & Johnston, W. E. (1978). Effects of various sources of coercion on outcome of treatment of alcoholism. Psychological reports, 43(3 Pt 2), 1271-1278.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Frenzer, A., Schubarth, P., Soucek, M., & Krahenbuhl, S. (1995). Disappearance of a large mediastinal pseudocyst in a patient with chronic alcoholic pancreatitis after total parenteral nutrition. European Journal of Gastroenterology and Hepatology, 7(4), 369-371.
Title/abstract: Excluded. Wrong intervention/comparator

Friedman, A. S., Terras, A., & Glassman, K. (2003). The Role of Participant Motivation in the Outcome of a Prevention/ Early Intervention Program for Adolescent Substance Use Problems and Illegal Behavior. Journal of Child & Adolescent Substance Abuse, 13(2), 1-28.
Title/abstract: Excluded. Wrong intervention/comparator

Friedmann, P. D., Lemon, S. C., Stein, M. D., & D'Aunno, T. A. (2003). Community referral sources and entry of treatment-naive clients into outpatient addiction treatment. American Journal of Drug and Alcohol Abuse, 29(1), 105-115.
Title/abstract: Excluded. Wrong intervention/comparator

Fromme, K., & Corbin, W. (2004). Prevention of heavy drinking and associated negative consequences among mandated and voluntary college students. Journal of Consulting and Clinical Psychology, 72(6), 1038-1049.
Title/abstract: Excluded. Wrong intervention/comparator

Fugelstad, A., Agren, G., & Romelsjo, A. (1998). Changes in mortality, arrests, and hospitalizations in nonvoluntarily treated heroin addicts in relation to methadone treatment. Substance Use and Misuse, 33(14), 2803-2817.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Fuller, D. E., Hornfeldt, C. S., Kelloway, J. S., Stahl, P. J., & Anderson, T. F. (2004). The Xyrem (registered trademark) Risk Management Program. Drug Safety, 27(5), 293-306.
Title/abstract: Excluded. Wrong intervention/comparator

Fulwiler, C., & Ruthazer, R. (1999). Premorbid risk factors for violence in adult mental illness. Comprehensive Psychiatry, 40(2), 96-100.
Full paper: Excluded. Not a clinical study

Funderburk, F. R., & Allen, R. P. (1977). Alcoholics' disposition to drink: Effects of abstinence and heavy drinking. Journal of Studies on Alcohol, 38(3), 410-425.
Title/abstract: Excluded. Wrong intervention/comparator

Gallant, D. M., & et al. (1973). The revolving-door alcoholic: An impasse in the treatment of the chronic alcoholic. Archives of General Psychiatry, 28(5), 633-635.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Gallant, D. M., & et al. (1968). A comparative evaluation of compulsory (group therapy and/or antabuse) and voluntary treatment of the chronic alcoholic municipal court offender. Psychosomatics: Journal of Consultation Liaison Psychiatry, 9(6), 306-310.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Gallart, D. M., & et al. (1968). Enforced Clinic Treatment of Paroled Criminal Alcoholics: a Pilot Evaluation. Quarterly Journal of Studies on Alcohol, 29(1-A), 77-83.
Title/abstract: Excluded. Wrong intervention/comparator

Galon, P. A., & Liebelt, R. A. (1997). Involuntary treatment of substance abuse disorders. New directions for mental health services, -(75), 35-45.
Title/abstract: Excluded. Not a clinical study.

Gann, H., Feige, B., Cloot, O., Van Wasen, H., Zinzgraf, D., Hohagen, F., et al. (2004). Polysomnography during withdrawal with clomethiazole or placebo in alcohol dependent patients--a double-blind and randomized study [Electronic Version]. Pharmacopsychiatry, 228-235 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/306/CN-00491306/frame.html

Garlow, S. J., D'Orio, B., & Purselle, D. C. (2002). The relationship of restrictions on state hospitalization and suicides among emergency psychiatric patients. Psychiatric Services, 53(10), 1297-1300.
Title/abstract: Excluded. Wrong intervention/comparator

Garrett, C. (1995). HIV serosurveillance of newborns: A clinician's perspective on legislative, political, and ethical issues. Journal of Substance Abuse Treatment, 12(1), 29-33.
Title/abstract: Excluded. Wrong intervention/comparator

Garrett, J., Landau-Stanton, J., Stanton, M. D., Stellato-Kabat, J., & Stellato-Kabat, D. (1997). ARISE: A method for engaging reluctant alcohol- and drug-dependent individuals in treatment. Journal of Substance Abuse Treatment, 14(3), 235-248.
Title/abstract: Excluded. Not a clinical study.

Gasner, M. R., Maw, K. L., Feldman, G. E., Fujiwara, P. I., & Frieden, T. R. (1999). The use of legal action in New York City to ensure treatment of tuberculosis. New England Journal of Medicine, 340(5), 359-366.
Title/abstract: Excluded. Wrong intervention/comparator

Gaspari, J., Swift, R., & Kleber, H. (1985). Prevalence of movement disorder in a methadone-maintained population. Journal of Nervous and Mental Disease, 173(6), 373-376.
Full paper: Excluded. Not a clinical study

Gerdner, A., & Berglund, M. (1997). Mortality of treated alcoholics after eight years in relation to short-term outcome. Alcohol and Alcoholism, 32(5), 573-579.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Gerdner, A., & Holmberg, A. (2000). Factors affecting motivation to treatment in severely dependent alcoholics. Journal of Studies on Alcohol, 61(4), 548-560.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Gerson, B., & Hahn, R. (1990). Mandatory drug testing in the United States: Opportunities and challenges for the medical review officer. Clinics in Laboratory Medicine, 10(3), 517-529.
Title/abstract: Excluded. Not a clinical study.

Giannini, A. J., & Giannini, J. N. (2000). Historical, ethical, and legal issues in mandatory drug testing. JONA'S healthcare law, ethics and regulation, 2(4), 105-107, 111.
Title/abstract: Excluded. Not a clinical study.

Gilbert, L., El-Bassel, N., Rajah, V., Foleno, A., Fontdevila, J., Frye, V., et al. (2000). The converging epidemics of mood-altering-drug use, HIV, HCV, and partner violence: A conundrum for methadone maintenance treatment. Mount Sinai Journal of Medicine, 67(5-6), 452-464.
Title/abstract: Excluded. Wrong intervention/comparator

Gilbertson, A. D. (1984). Perceptual differentiation among drug addicts: Correlations with intelligence and MMPI scores. Journal of Clinical Psychology, 40(1), 334-339.
Title/abstract: Excluded. Wrong intervention/comparator

Gillespie, E. E., ten Berk de Boer, F. J., Stuart, R. L., Buist, M. D., & Wilson, J. M. (2007). A sustained reduction in the transmission of methicillin resistant Staphylococcus aureus in an intensive care unit. Critical care and resuscitation : journal of the Australasian Academy of Critical Care Medicine, 9(2), 161-165.
Title/abstract: Excluded. Wrong intervention/comparator

Glick, I. D., & Horsfall, J. L. (2001). Psychiatric conditions in sports: Diagnosis, treatment, and quality of life. Physician and Sportsmedicine, 29(8), 45-55.
Title/abstract: Excluded. Wrong intervention/comparator

Gliksman, L., Douglas, R. R., Thomson, M., Moffatt, K., Smythe, C., & Caverson, R. (1990). Promoting Municipal Alcohol Policies: An Evaluation of a Campaign. Contemporary Drug Problems, vol, 17(3), 391-420.
Title/abstract: Excluded. Wrong intervention/comparator

Godemann, F., Uhlemann, H., & Hauth, I. (2006). Psychiatric emergency services - Inpatient admissions during the night. German Journal of Psychiatry, 9(4), 128-132.
Title/abstract: Excluded. Wrong intervention/comparator

Gogtay, N. J., Bhatt, H. A., Dalvi, S. S., & Kshirsagar, N. A. (2002). The use and safety of non-allopathic Indian medicines. Drug Safety, 25(14), 1005-1019.
Title/abstract: Excluded. Not a clinical study.

Goldberg, M. E., Lex, B. W., Mello, N. K., Mendelson, J. H., & Bower, T. A. (1996). Impact of maternal alcoholism on separation of children from their mothers: Findings from a sample of incarcerated women. American Journal of Orthopsychiatry, 66(2), 228-238.
Title/abstract: Excluded. Wrong intervention/comparator

Goldsmith, R. J., & Garlapati, V. (2004). Behavioral interventions for dual-diagnosis patients. Psychiatric Clinics of North America, 27(4), 709-725.
Title/abstract: Excluded. Not a clinical study.

Goldsmith, R. J., Hurt, R. D., & Slade, J. (1991). Development of smoke-free chemical dependency units. Journal of Addictive Diseases, 11(2), 67-77.
Full paper: Excluded. Not a clinical study

Goldsmith, R. J., & Latessa, E. (2001). Coerced treatment of addictions in the criminal justice system. Psychiatric Annals. Special Issue: Contemporary issues in addiction psychiatry, 31(11), 657-663.
Title/abstract: Excluded. Wrong indication/population.

Gomart, E. (2002). Towards Generous Constraint: Freedom and Coercion in a French Addiction Treatment. Sociology of Health and Illness, vol, 24(5), 517-549.
Title/abstract: Excluded. Not a clinical study.

Gomberg, E. S. (2003). Treatment for alcohol-related problems: special populations: research opportunities. Recent developments in alcoholism : an official publication of the American Medical Society on Alcoholism, the Research Society on Alcoholism, and the National Council on Alcoholism, 16(-), 313-333.
Title/abstract: Excluded. Wrong intervention/comparator

Gondolf, E. W. (1999). Characteristics of Court-Mandated Batterers in Four Cities: Diversity and Dichotomies. Violence Against Women, vol, 5(11), 1277-1293.
Title/abstract: Excluded. Wrong intervention/comparator

Goodman, M. J., & Goodman, L. E. (1987). Medicalization and its discontents. Social science & medicine (1982), 25(6), 733-740.
Title/abstract: Excluded. Wrong intervention/comparator

Gore, S. M., & Bird, A. G. (1996). Cost implications of random mandatory drugs tests in prisons. Lancet, 348(9035), 1124-1127.
Title/abstract: Excluded. Wrong intervention/comparator

Gore, S. M., Bird, A. G., & Cassidy, J. (1999). Prisoners' views about the drugs problem in prisons, and the new Prison Service drug strategy. Communicable disease and public health / PHLS, 2(3), 196-197.
Title/abstract: Excluded. Not a clinical study.

Gore, S. M., Bird, A. G., & Strang, J. S. (1999). Random mandatory drugs testing of prisoners: a biassed means of gathering information. Journal of epidemiology and biostatistics, 4(1), 3-9.
Title/abstract: Excluded. Wrong intervention/comparator

Gore, S. M., Graham Bird, A., & Ross, A. J. (1996). Prison rights: Mandatory drugs tests and performance indicators for prisons. British Medical Journal, 312(7043), 1411-1413.
Title/abstract: Excluded. Wrong intervention/comparator

Gore-Felton, C., & Koopman, C. (2002). Traumatic experiences: Harbinger of risk behavior among HIV-positive adults. Journal of Trauma and Dissociation, 3(4), 121-135.
Title/abstract: Excluded. Wrong intervention/comparator

Gorske, T. T., Daley, D. C., Yenerall, E., & Morrow, L. A. (2006). Neuropsychological function and employment status in a welfare-to-work sample. Applied Neuropsychology, 13(3), 141-150.
Title/abstract: Excluded. Wrong intervention/comparator

Gorske, T. T., Larkby, C., Daley, D. C., Yenerall, E., & Morrow, L. A. (2006). Childhood abuse and psychiatric impairment in a sample of welfare to work women. Children and Youth Services Review, 28(12), 1528-1541.
Title/abstract: Excluded. Wrong intervention/comparator

Gostin, L., & Curran, W. J. (1986). The limits of compulsion in controlling AIDS. The Hastings Center report, 16(6), suppl 24-29.
Title/abstract: Excluded. Wrong intervention/comparator

Gostin, L. O. (1991). Compulsory treatment for drug-dependent persons: justifications for a public health approach to drug dependency. The Milbank quarterly, 69(4), 561-593.
Title/abstract: Excluded. Not a clinical study.

Gow, K. M. (2006). Review of Hypnotherapeutic Techniques (2nd ed.). Australian Journal of Clinical & Experimental Hypnosis, 34(1), 110-112.
Title/abstract: Excluded. Not a clinical study.

Green, R. E., French, J. F., Haberman, P. W., & Holland, P. W. (1991). The effects of combining sanctions and rehabilitation for driving under the influence: an evaluation of the New Jersey Alcohol Countermeasures Program. Accident Analysis and Prevention, 23(6), 543-555.
Title/abstract: Excluded. Wrong intervention/comparator

Greenberg, W. M., Moore-Duncan, L., & Herron, R. (1996). Patients' attitudes toward having been forcibly medicated. Bulletin of the American Academy of Psychiatry and the Law, 24(4), 513-524.
Title/abstract: Excluded. Not a clinical study.

Greenlaw, J. L. (1990). Treatment refusal, noncompliance, and substance abuse in pregnancy: legal and ethical issues. Birth (Berkeley, Calif.), 17(3), 152-156.
Title/abstract: Excluded. Not a clinical study.

Greenwood, K. L., DeWeese, P., & Inscoe, P. S. (2005). Demonstrating the Value of EAP Services: A Focus on Clinical Outcomes. Journal of Workplace Behavioral Health, 21(1), 1-10.
Title/abstract: Excluded. Wrong intervention/comparator

Greenwood, M. J. (2000). Exposure to HIV: Medical management and legal implications. Journal of Emergency Medicine, 19(3), 231-239.
Full paper: Excluded. Not a clinical study

Greeson, L. E. (1994). Some Observations on Education and Human Development in Norway: A Model for Social and Personal Well-Being. Humanity & Society, vol, 18(3), 99-106.
Title/abstract: Excluded. Not a clinical study.

Gregoire, T. K., & Burke, A. C. (2004). The relationship of legal coercion to readiness to change among adults with alcohol and other drug problems. Journal of Substance Abuse Treatment, 26(1), 337-343.
Title/abstract: Excluded. Wrong intervention/comparator

Grella, C. E., Anglin, M. D., Wugalter, S. E., Rawson, R., & Hasson, A. (1994). Reasons for discharge from methadone maintenance for addicts at high risk of HIV infection or transmission. Journal of Psychoactive Drugs, 26(2), 223-232.
Title/abstract: Excluded. Wrong intervention/comparator

Grella, C. E., & Greenwell, L. (2007). Treatment Needs and Completion of Community-Based Aftercare Among Substance-Abusing Women Offenders. Women's Health Issues, 17(4), 244-255.
Title/abstract: Excluded. Wrong intervention/comparator

Grichting, E., Uchtenhagen, A., & Rehm, J. (2002). Modes and impact of coercive inpatient treatment for drug-related conditions in Switzerland. European Addiction Research, 8(2), 78-83.
Title/abstract: Excluded. Wrong indication/population.

Grohman, K., Fals-Stewart, W., & Bates, M. E. (2002). Cognitive rehabilitation for neuropsychologically impaired substance-abusing patients: posttreatment outcomes [Electronic Version]. Drug and Alcohol Dependence, 70 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/066/CN-00417066/frame.html

Guinot, M., Duclos, M., Idres, N., Souberbielle, J. C., Megret, A., & Le Bouc, Y. (2007). Value of basal serum cortisol to detect corticosteroid-induced adrenal insufficiency in elite cyclists. European Journal of Applied Physiology, 99(3), 205-216.
Title/abstract: Excluded. Wrong intervention/comparator

Gurnack, A. M. (1984). Use of the NCA-modified assessment with a population of intoxicated drivers. Perceptual and motor skills, 59(1), 287-298.
Title/abstract: Excluded. Wrong intervention/comparator

Gurnack, A. M., & Kramer, C. (1989). Implementation of the NCA modified assessment instrument with a population of intoxicated drivers in two Wisconsin counties 1982-1985. Perceptual and Motor Skills, 69(1), 83-90.
Title/abstract: Excluded. Wrong intervention/comparator

Gustafson, R. A., Levine, B., Stout, P. R., Klette, K. L., George, M. P., Moolchan, E. T., et al. (2003). Urinary cannabinoid detection times after controlled oral administration of (Delta)9-tetrahydrocannabinol to humans. Clinical Chemistry, 49(7), 1114-1124.
Title/abstract: Excluded. Wrong intervention/comparator

Hagen, R. E., Williams, R. L., & McConnell, E. J. (1979). The traffic safety impact of alcohol abuse treatment as an alternative to mandated licensing controls. Accident Analysis & Prevention, 11(4), 275-291.
Title/abstract: Excluded. Wrong intervention/comparator

Haines, D. (1978). Alcoholism in prisons. International Journal of Offender Therapy and Comparative Criminology, 22(2), 127-132.
Title/abstract: Excluded. Not a clinical study.

Hall, J. M. (1994). Lesbians recovering from alcohol problems: an ethnographic study of health care experiences. Nursing research, 43(4), 238-244.
Title/abstract: Excluded. Not a clinical study.

Hall, W. (2006). Review of Ethical eye: Drug addiction. Addiction, 101(3), 460-461.
Title/abstract: Excluded. Not a clinical study.

Hall, W., & Carter, L. (2004). Ethical issues in using a cocaine vaccine to treat and prevent cocaine abuse and dependence. Journal of Medical Ethics, 30(4), 337-340.
Title/abstract: Excluded. Not a clinical study.

Hall, W., Carter, L., & Morley, K. I. (2004). Neuroscience research on the addictions: A prospectus for future ethical and policy analysis. Addictive Behaviors, 29(7), 1481-1495.
Title/abstract: Excluded. Not a clinical study.

Hallock-Bannigan, S. (1994). Intervention with the chemical dependent individual. Journal of Reality Therapy, 13(2), 14-19.
Title/abstract: Excluded. Not a clinical study.

Halpern, L. M., & Robinson, J. (1985). Prescribing practices for pain in drug dependence: A lesson in ignorance. Advances in Alcohol and Substance Abuse, 5(1-2), 135-162.
Title/abstract: Excluded. Not a clinical study.

Hamberger, L. K., & Potente, T. (1994). Counseling heterosexual women arrested for domestic violence: Implications for theory and practice. Violence and Victims, 9(2), 125-137.
Title/abstract: Excluded. Not a clinical study.

Han, W., Ide, S., Sora, I., Yamamoto, H., & Ikeda, K. (2004). A possible genetic mechanism underlying individual and interstrain differences in opioid actions: Focus on the mu opioid receptor gene. Annals of the New York Academy of Sciences, 1025(-), 370-375.
Title/abstract: Excluded. Not a clinical study.

Handelsman, D. J. (2004). Designer androgens in sport: when too much is never enough. Science's STKE [electronic resource] : signal transduction knowledge environment, 2004(244), pe41.
Title/abstract: Excluded. Not a clinical study.

Hansen, H., Alegria, M., Caban, C. A., Pena, M., Lai, S., & Shrout, P. (2004). Drug treatment, health, and social service utilization by substance abusing women from a community-based sample. Medical Care, 42(11), 1117-1124.
Title/abstract: Excluded. Wrong intervention/comparator

Hardy, D. W., Patel, M., & Paull, D. (2000). Basic law for addiction psychiatry. Psychiatric Annals, 30(9), 574-580.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Hardy, M., Teruya, C., Longshore, D., & Hser, Y.-I. (2005). Initial implementation of California's Substance Abuse and Crime Prevention Act: Findings from focus groups in ten counties. Evaluation and Program Planning, 28(2), 221-232.
Title/abstract: Excluded. Wrong intervention/comparator

Harms, B. A., Heise, C. P., Gould, J. C., Starling, J. R., Ellison, E. C., Jeekel, J. H., et al. (2005). A 25-year single institution analysis of health, practice, and fate of general surgeons. Annals of Surgery, 242(4), 520-529.
Full paper: Excluded. Not a clinical study

Haro, J. M., Novick, D., Belger, M., & Jones, P. B. (2006). Antipsychotic type and correlates of antipsychotic treatment discontinuation in the outpatient treatment of schizophrenia. European Psychiatry, 21(1), 41-47.
Title/abstract: Excluded. Wrong intervention/comparator

Harper, J. T. (1982). Arkansas statute mandates equal insurance coverage for outpatient psychiatric centers. International Journal of Partial Hospitalization, 1(3), 241-244.
Title/abstract: Excluded. Wrong intervention/comparator

Harrington, N. G., Brigham, N. L., & Clayton, R. R. (1999). Alcohol risk reduction for fraternity and sorority members. Journal of Studies on Alcohol, 60(4), 521-527.
Title/abstract: Excluded. Wrong intervention/comparator

Harris, R. S., Jr., Aldea, M. A., & Kirkley, D. E. (2006). A Motivational Interviewing and Common Factors Approach to Change in Working With Alcohol Use and Abuse in College Students. Professional Psychology: Research and Practice, 37(6), 614-621.
Title/abstract: Excluded. Not a clinical study.

Harrison, M. (1991). Drug addiction in pregnancy: The interface of science, emotion, and social policy. Journal of Substance Abuse Treatment, 8(4), 261-268.
Full paper: Excluded. Not a clinical study

Harrison, S. R., Toriello, P., Pavluck, A., Ellis, R., Pedersen, E., Gaiennie, R., et al. (2007). The impact of a brief induction on short-term continuation in a therapeutic community. American Journal of Drug and Alcohol Abuse, 33(1), 147-153.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Hartjen, C. A., Mitchell, S. M., & Washburne, N. F. (1981). Sentencing to Therapy: Some Legal, Ethical, and Practical Issues. Journal of Offender Counseling, Services and Rehabilitation, vol, 6, 1-2.
Title/abstract: Excluded. Not a clinical study.

Harwood, H. J., Hubbard, R. L., Collins, J. J., & Rachal, J. V. (1988). The costs of crime and the benefits of drug abuse treatment: a cost-benefit analysis using TOPS data. In C. G. Leukefeld & F. M. Tims (Eds.), Compulsory Treatment of Drug Abuse: Research and Clinical Practice (Vol. 86, pp. 209-235). Rockville, MD.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Haugaard, J. J. (1998). Mandated Interventions with Drug-Dependent, Pregnant Women. Journal of Child and Family Studies, vol, 7(3), 377-392.
Title/abstract: Excluded. Not a clinical study.

Hayes, R., Nielssen, O., Sullivan, D., Large, M., & Bayliff, K. (2007). Evidence-based mental health law: The case for legislative change to allow earlier intervention in psychotic illness. Psychiatry, Psychology and Law, 14(1), 35-44.
Title/abstract: Excluded. Wrong intervention/comparator

Hazra, A., & Kumar Tripathi, S. (2001). Folic acid revisited. Indian Journal of Pharmacology, 33(5), 322-342.
Title/abstract: Excluded. Not a clinical study.

Heale, J. A. D., Abernathy, T. J., & Kittle, D. (2000). Using healthy life years (HeaLYs) to assess programming needs in a public health unit. Canadian Journal of Public Health, 91(2), 148-152.
Title/abstract: Excluded. Not a clinical study.

Heath, D. B. (1992). Prohibition or liberalization of alcohol and drugs? A sociocultural perspective. Recent developments in alcoholism : an official publication of the American Medical Society on Alcoholism, the Research Society on Alcoholism, and the National Council on Alcoholism, 10(-), 129-145.
Title/abstract: Excluded. Not a clinical study.

Hemmingsson, T., & Kriebel, D. (2003). Smoking at age 18-20 and suicide during 26 years of follow-up - How can the association be explained? International Journal of Epidemiology, 32(6), 1000-1005.
Title/abstract: Excluded. Wrong intervention/comparator

Hemmingsson, T., & Lundberg, I. (2001). Development of alcoholism: Interaction between heavy adolescent drinking and later low sense of control over work. Alcohol and Alcoholism, 36(3), 207-212.
Title/abstract: Excluded. Wrong intervention/comparator

Hemmingsson, T., & Lundberg, I. (1998). Work control, work demands, and work social support in relation to alcoholism among young men. Alcoholism: Clinical and Experimental Research, 22(4), 921-927.
Title/abstract: Excluded. Wrong intervention/comparator

Hemmingsson, T., Lundberg, I., & Diderichsen, F. (1999). The roles of social class of origin, achieved social class and intergenerational social mobility in explaining social-class inequalities in alcoholism among young men. Social Science and Medicine, 49(8), 1051-1059.
Title/abstract: Excluded. Wrong intervention/comparator

Hemmingsson, T., Lundberg, I., Diderichsen, F., & Allebeck, P. (1998). Explanations of social class differences in alcoholism among young men. Social Science and Medicine, 47(10), 1399-1405.
Title/abstract: Excluded. Wrong intervention/comparator

Henning, K., & Renauer, B. (2005). Prosecution of women arrested for intimate partner abuse. Violence and Victims, 20(3), 361-376.
Title/abstract: Excluded. Wrong intervention/comparator

Heyman, M. M. (1976). Referral to alcoholism programs in industry: Coercion, confrontation and choice. Journal of Studies on Alcohol, 37(7), 900-907.
Title/abstract: Excluded. Wrong intervention/comparator

Heyman, R. B., Adger H, Jr., Anglin, T. M., Fuller P.G, Jr., Jacobs, E. A., Shah, R. Z., et al. (1996). Testing for drugs of abuse in children and adolescents. Pediatrics, 98(2), 305-307.
Full paper: Excluded. Not a clinical study

Hibbeln, J. R., Makino, K. K., Martin, C. E., Dickerson, F., Boronow, J., & Fenton, W. S. (2003). Smoking, gender, and dietary influences on erythrocyte essential fatty acid composition among patients with schizophrenia or schizoaffective disorder. Biological Psychiatry, 53(5), 431-441.
Full paper: Excluded. Not a clinical study

Hiday, V. A., Swartz, M. S., Swanson, J., & Wagner, H. R. (1997). Patient perceptions of coercion in mental hospital admission. International Journal of Law and Psychiatry, 20(2), 227-241.
Title/abstract: Excluded. Wrong intervention/comparator

Higuchi, S., Matsushita, S., & Osaki, Y. (2006). Drinking practices, alcohol policy and prevention programmes in Japan. International Journal of Drug Policy, 17(4), 358-366.
Title/abstract: Excluded. Not a clinical study.

Hiller, M. L., Broome, K. M., Knight, K., & Simpson, D. D. (2000). Measuring self-efficacy among drug-involved probationers. Psychological reports, 86(2), 529-538.
Title/abstract: Excluded. Wrong intervention/comparator

Hiller, M. L., Knight, K., Broome, K. M., & Simpson, D. D. (1996). Compulsory Community-Based Substance Abuse Treatment and the Mentally Ill Criminal Offender. Prison Journal, vol, 76(2), 180-191.
Title/abstract: Excluded. Wrong intervention/comparator

Hiller, M. L., Knight, K., Devereux, J., & Hathcoat, M. (1996). Posttreatment outcomes for substance-abusing probationers mandated to residential treatment. Journal of Psychoactive Drugs, 28(3), 291-296.
Title/abstract: Excluded. Not a clinical study.

Hiller, M. L., Knight, K., Leukefeld, C., & Simpson, D. D. (2002). Motivation as a predictor of therapeutic engagement in mandated residential substance abuse treatment. Criminal Justice and Behavior. Special Issue: Making people change: The effectiveness of coerced psychological treatment, 29(1), 56-75.
Title/abstract: Excluded. Wrong intervention/comparator

Hiller, M. L., Knight, K., & Simpson, D. D. (2006). Recidivism Following Mandated Residential Substance Abuse Treatment for Felony Probationers. Prison Journal, 86(2), 230-241.
Title/abstract: Excluded. Wrong indication/population.

Hiller, M. L., Knight, K., & Simpson, D. D. (1996). An assessment of comorbid psychological problems in a residential criminal justice drug treatment program. Psychology of Addictive Behaviors, 10(3), 181-189.
Title/abstract: Excluded. Wrong intervention/comparator

Hinchliffe, R. J., Yung, M., & Hopkinson, B. R. (2002). Endovascular exclusion of a ruptured pseudoaneurysm of the infrarenal abdominal aorta secondary to pancreatitis. Journal of Endovascular Therapy, 9(5), 590-592.
Title/abstract: Excluded. Wrong intervention/comparator

Hiner, J. (1996). Mandatory drug testing in the workplace. The Kansas nurse, 71(1), 2-3.
Title/abstract: Excluded. Not a clinical study.

Hiraga, Y. (1990). A case of bezold mastoiditis. Otolaryngology - Head and Neck Surgery (Tokyo), 62(2), 141-144.
Title/abstract: Excluded. Wrong intervention/comparator

Hochstedler, E. (1986). Criminal prosecution of the mentally disordered. Law & Society Review, 20(2), 279-292.
Title/abstract: Excluded. Wrong intervention/comparator

Hodgins, S., Hiscoke, U. L., & Freese, R. (2003). The antecedents of aggressive behavior among men with schizophrenia: A prospective investigation of patients in community treatment. Behavioral Sciences and the Law, 21(4), 523-546.
Title/abstract: Excluded. Wrong intervention/comparator

Hodgins, S., Tiihonen, J., & Ross, D. (2005). The consequences of Conduct Disorder for males who develop schizophrenia: Associations with criminality, aggressive behavior, substance use, and psychiatric services. Schizophrenia Research, 78(2-3), 323-335.
Title/abstract: Excluded. Wrong intervention/comparator

Hoge, S. K., Lidz, C. W., Eisenberg, M., Gardner, W., & et al. (1997). Perceptions of coercion in the admission of voluntary and involuntary psychiatric patients. International Journal of Law and Psychiatry, 20(2), 167-181.
Title/abstract: Excluded. Wrong intervention/comparator

Hohman, M. M., Shillington, A. M., & Baxter, H. G. (2003). A comparison of pregnant women presenting for alcohol and other drug treatment by CPS status. Child Abuse and Neglect, 27(3), 303-317.
Title/abstract: Excluded. Wrong intervention/comparator

Holdener, F. (1993). Alcohol and civil aviation. Addiction, 88(7), 953-958.
Title/abstract: Excluded. Not a clinical study.

Holland, C. S. (2003). Drug testing in the law enforcement community. Clinics in Occupational and Environmental Medicine, 3(3), 625-639.
Title/abstract: Excluded. Not a clinical study.

Hollister, L. E., Shelton, J., & Krieger, G. (1969). A controlled comparison of lysergic acid diethylamide (LSD) and dextroamphetamine in alcoholics. American Journal of Psychiatry, 125(10), 1352-1357.
Title/abstract: Excluded. Wrong intervention/comparator

Hong, Y., Li, X., Fang, X., & Zhao, R. (2007). Correlates of suicidal ideation and attempt among female sex workers in China. Health Care for Women International, 28(5), 490-505.
Title/abstract: Excluded. Wrong intervention/comparator

Horowitz, B. Z. (1986). Carboxyhemoglobinemia caused by inhalation of methylene chloride. American Journal of Emergency Medicine, 4(1), 48-51.
Title/abstract: Excluded. Not a clinical study.

Hough, L. B., Nalwalk, J. W., Stadel, R., Timmerman, H., Leurs, R., Paria, B. C., et al. (2002). Inhibition of improgan antinociception by the cannabinoid (CB)1, antagonist N-(piperidin-1-yl)-5-(4-chlorophenyl)-1-(2,4-dichlorophenyl) -4-methyl-1H-pyrazole-3-carboxamide (SR141716A): Lack of obligatory role for endocannabinoids acting at CB1 receptors. Journal of Pharmacology and Experimental Therapeutics, 303(1), 314-322.
Title/abstract: Excluded. Wrong intervention/comparator
Full paper: Excluded. Wrong intervention/comparator

Hough, M. (2002). Drug user treatment within a criminal justice context. Substance Use and Misuse, 37(8-10), 985-996.
Title/abstract: Excluded. Wrong indication/population.

Howell, E. F., & Niven, R. G. (1989). The argument for HIV-antibody testing in chemical dependence treatment programs. Journal of Psychoactive Drugs, 21(4), 415-417.
Full paper: Excluded. Not a clinical study

Hser, Y. I., Hoffman, V., Grella, C. E., & Anglin, M. D. (2001). A 33-year follow-up of narcotics addicts. Archives of General Psychiatry, 58(5), 503-508.
Title/abstract: Excluded. Wrong intervention/comparator

Hser, Y. I., Maglione, M., Polinsky, M. L., & Anglin, M. D. (1998). Predicting drug treatment entry among treatment-seeking individuals. Journal of Substance Abuse Treatment, 15(3), 213-220.
Title/abstract: Excluded. Wrong intervention/comparator

Hser, Y.-I., Hoffman, V., Grella, C. E., & Anglin, M. D. (2001). A 33-year follow-up of narcotics addicts. Archives of General Psychiatry, 58(5), 503-508.
Title/abstract: Excluded. Wrong intervention/comparator

Hudlow, R. (2005). What are the odds? Random drug testing of students: a practice perspective. The Journal of school nursing : the official publication of the National Association of School Nurses, 21(3), 179-181.
Title/abstract: Excluded. Wrong intervention/comparator

Huestis, M. A., Mitchell, J. M., & Cone, E. J. (1995). Detection times of marijuana metabolites in urine by immunoassay and GC- MS. Journal of Analytical Toxicology, 19(6), 443-449.
Title/abstract: Excluded. Wrong intervention/comparator

Huestis, M. A., & Smith, M. L. (2006). Modern analytical technologies for the detection of drug abuse and doping. Drug Discovery Today: Technologies, 3(1), 49-57.
Title/abstract: Excluded. Wrong intervention/comparator

Hunt, S. R., & Baumohl, J. (2003). Now invited to testify: Former beneficiaries appraise the SSI drug addiction and alcoholism program. Contemporary Drug Problems, 30(1-2), 455-499.
Title/abstract: Excluded. Not a clinical study.

Hunt, W. A., & Witt, E. D. (1993). Behavioral effects of alcohol ingestion: Implications for drug testing. Toxic Substances Journal, 13(1), 41-49.
Title/abstract: Excluded. Wrong intervention/comparator

Huntington, N., Jahn Moses, D., & Veysey, B. M. (2005). Developing and Implementing a Comprehensive Approach to Serving Women With Co-Occurring Disorders and Histories of Trauma. Journal of Community Psychology. Special Issue: Serving the Needs of Women With Co-Occurring Disorders and a History of Trauma, 33(4), 395-410.
Title/abstract: Excluded. Wrong intervention/comparator

Hyams, K. C., Riddle, J., Rubertone, M., Trump, D., Alter, M. J., Cruess, D. F., et al. (2001). Prevalence and incidence of hepatitis C virus infection in the US military: A seroepidemiologic survey of 21,000 troops. American Journal of Epidemiology, 153(8), 764-770.
Title/abstract: Excluded. Wrong intervention/comparator

Ikeda, K., Ide, S., Han, W., Hayashida, M., Uhl, G. R., & Sora, I. (2005). How individual sensitivity to opiates can be predicted by gene analyses. Trends in Pharmacological Sciences, 26(6), 311-317.
Title/abstract: Excluded. Wrong intervention/comparator

Ikemoto, S., & Panksepp, J. (1999). The role of nucleus accumbens dopamine in motivated behavior: A unifying interpretation with special reference to reward-seeking. Brain Research Reviews, 31(1), 6-41.
Title/abstract: Excluded. Wrong intervention/comparator

Inciardi, J. A. (1996). HIV risk reduction and service delivery strategies in criminal justice settings. Journal of Substance Abuse Treatment, 13(5), 421-428.
Title/abstract: Excluded. Wrong intervention/comparator

Inciardi, J. A. (1988). Compulsory treatment in New York: A brief narrative history of misjudgment, mismanagement, and misrepresentation. Journal of Drug Issues, 18(4), 547-560.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Inciardi, J. A. (1988). Some considerations on the clinical efficacy of compulsory treatment: reviewing the New York experience. NIDA research monograph, 86(-), 126-138.

Title/abstract: Included
Full paper: Excluded. Not a clinical study

Inoue, T. (1996). Many-sided study on re-offending of 946 mentally disordered offenders in Japan: An eleven-year follow-up. Acta Criminologiae et Medicinae Legalis Japonica, 62(6), 161-184.
Title/abstract: Excluded. Wrong intervention/comparator

Jacobi, F., Wittchen, H. U., Holting, C., Hofler, M., Pfister, H., Muller, N., et al. (2004). Prevalence, co-morbidity and correlates of mental disorders in the general population: Results from the German Health Interview and Examination Survey (GHS). Psychological Medicine, 34(4), 597-611.
Title/abstract: Excluded. Wrong intervention/comparator

Jacobs, F., Little, P. M. D., & Almeida, C. (1993). Supporting family life: A survey of homeless shelters. Journal of Social Distress & the Homeless, 2(4), 269-288.
Title/abstract: Excluded. Wrong intervention/comparator

Jacobsen, E. (1950). Biochemical methods in the treatment of alcoholism, with special reference to antabuse. Proceedings of the Royal Society of Medicine, 43, 519-526.
Title/abstract: Excluded. Wrong intervention/comparator

Jacobson, J. O. (2004). Place and Attrition From Substance Abuse Treatment. Journal of Drug Issues, 34(1), 23-49.
Full paper: Excluded. Not a clinical study

Jaffe, J. (1970). Whatever turns you off. Psychology Today. Vol., 3(12), 42-44.
Title/abstract: Excluded. Not a clinical study.

Jain, R., Thomasma, D. C., & Ragas, R. (1999). Ethical challenges in the treatment of infants of drug-abusing mothers. Cambridge quarterly of healthcare ethics : CQ : the international journal of healthcare ethics committees, 8(2), 179-188.
Title/abstract: Excluded. Not a clinical study.
Full paper: Excluded. Not a clinical study.

Jainchill, N., Hawke, J., De Leon, G., & Yagelka, J. (2000). Adolescents in therapeutic communities: One-year posttreatment outcomes. Journal of Psychoactive Drugs, 32(1), 81-94.
Title/abstract: Excluded. Not a clinical study.

Janssen, B., Gaebel, W., Haerter, M., Komaharadi, F., Lindel, B., & Weinmann, S. (2006). Evaluation of factors influencing medication compliance in inpatient treatment of psychotic disorders. Psychopharmacology, 187(2), 229-236.
Full paper: Excluded. Not a clinical study

Janssens, M. J. P. A., Van Rooij, M. F. A. M., ten Have, H. A. M. J., Kortmann, F. A. M., & Van Wijmen, F. C. B. (2004). Pressure and coercion in the care for the addicted: Ethical perspectives. Journal of Medical Ethics, 30(5), 453-458.
Title/abstract: Excluded. Not a clinical study.

Jensen, R., & Bendtsen, L. (2004). Is chronic daily headache a useful diagnosis? Journal of Headache and Pain, 5(2), 87-93.
Title/abstract: Excluded. Not a clinical study.

Johansen, K., & Helton, W. S. (1992). Portal hypertension and bleeding esophageal varices. Annals of Vascular Surgery, 6(6), 553-561.
Title/abstract: Excluded. Wrong intervention/comparator

Johnson, G. (1976). Conversion as a cure: The therapeutic community and the professional ex-addict. Contemporary Drug Problems, 5(2), 187-205.
Title/abstract: Excluded. Not a clinical study.

Johnson, G. M., & Knight, R. A. (2000). Developmental antecedents of sexual coercion in juvenile sexual offenders. Sexual abuse : a journal of research and treatment, 12(3), 165-178.
Title/abstract: Excluded. Wrong intervention/comparator

Johnson, J. M. (2001). Reproductive ability for sale, do I hear $200?: private cash-for-contraception agreements as an alternative to maternal substance abuse. Arizona law review, 43(1), 205-243.
Title/abstract: Excluded. Wrong intervention/comparator

Johnson, M. E., & Prentice, D. G. (1990). Effects of counselor gender and drinking status on the perceptions of the counselor. Journal of Alcohol and Drug Education, 35(3), 38-44.
Title/abstract: Excluded. Wrong intervention/comparator

Johnson, T. C. (1989). Female Child Perpetrators: Children Who Molest Other Children. Child Abuse and Neglect, vol, 13(4), 571-585.
Title/abstract: Excluded. Wrong intervention/comparator

Johnson, T. C. (1988). Child perpetrators - Children who molest other children: Preliminary findings. Child Abuse and Neglect, 12(2), 219-229.
Title/abstract: Excluded. Wrong intervention/comparator

Jones, S. (2004). Paying the Price: The Psychiatric Cost of War. Archives of Psychiatric Nursing, 18(4), 119-120.
Title/abstract: Excluded. Wrong intervention/comparator

Jos, P. H., Marshall, M. F., & Perlmutter, M. (1995). The Charleston policy on cocaine use during pregnancy: a cautionary tale. The Journal of law, medicine & ethics : a journal of the American Society of Law, Medicine & Ethics, 23(2), 120-128.
Title/abstract: Excluded. Wrong intervention/comparator

Joseph, A. M., Nichol, K. L., & Anderson, H. (1993). Effect of treatment for nicotine dependence on alcohol and drug treatment outcomes. Addictive Behaviors, 18(6), 635-644.
Title/abstract: Excluded. Wrong intervention/comparator

Joy, E. A., Paisley, T. S., Price Jr, R., Rassner, L., & Thiese, S. M. (2004). Optimizing the collegiate preparticipation physical evaluation. Clinical Journal of Sport Medicine, 14(3), 183-187.
Title/abstract: Excluded. Wrong intervention/comparator

Kahler, C. W., Strong, D. R., Stuart, G. L., Moore, T. M., & Ramsey, S. E. (2003). Item functioning of the alcohol dependence scale in a high-risk sample. Drug and Alcohol Dependence, 72(2), 183-192.
Title/abstract: Excluded. Wrong intervention/comparator

Kalichman, S. C., Benotsch, E., Rompa, D., Gore-Felton, C., Austin, J., Luke, W., et al. (2001). Unwanted sexual experiences and sexual risks in gay and bisexual men: Associations among revictimization, substance use, and psychiatric symptoms. Journal of Sex Research, 38(1), 1-9.
Title/abstract: Excluded. Wrong intervention/comparator

Kaltiala-Heino, R. (2004). Increase in involuntary psychiatric admissions of minors - A register study. Social Psychiatry and Psychiatric Epidemiology, 39(1), 53-59.
Title/abstract: Excluded. Wrong intervention/comparator

Kaltiala-Heino, R., & Valimaki, M. (2001). Involuntary commitment in health care: An analysis of the status and rights of involuntarily treated psychiatric patients in comparison with patients treated involuntarily under other acts. European Journal of Health Law, 8(4), 299-316.
Title/abstract: Excluded. Not a clinical study.

Kaltiala-Heino, R., Valimaki, M., Korkeila, J., Tuohimaki, C., & Lehtinen, V. (2003). Involuntary medication in psychiatric inpatient treatment. European Psychiatry, 18(6), 290-295.
Full paper: Excluded. Not a clinical study

Kan, C. K., Ho, T. P., Dong, J. Y. S., & Dunn, E. L. W. (2007). Risk factors for suicide in the immediate post-discharge period. Social Psychiatry and Psychiatric Epidemiology, 42(3), 208-214.
Title/abstract: Excluded. Wrong intervention/comparator

Kantak, K. M. (2003). Vaccines against drugs of abuse: A viable treatment option? Drugs, 63(4), 341-352.
Title/abstract: Excluded. Not a clinical study.

Kaplan, G., Pannullo, D., Brodzinsky, D., & Hitt, J. C. (1994). Noncompliance with family court mandated evaluations in a juvenile justice clinic. Bulletin of the American Academy of Psychiatry and the Law, 22(1), 31-38.
Title/abstract: Excluded. Wrong intervention/comparator

Karlovic, D., Crnkovic, D., Martinac, M., Gale, R., Zoricic, Z., & Marusic, S. (2003). The Police Most Often Brings the Persons Intoxicated with Alcohol to the Urgent Psychiatric Examination. Alcoholism, 39(2), 93-104.
Title/abstract: Excluded. Wrong intervention/comparator

Kashner, T. M., Rosenheck, R., Campinell, A. B., Suris, A., Crandall, R., Garfield, N. J., et al. (2002). Impact of work therapy on health status among homeless, substance-dependent veterans: A randomized controlled trial. Archives of General Psychiatry, 59(10), 938-944.
Title/abstract: Excluded. Wrong intervention/comparator

Katz, A. M., & Sutherland, R. (1992). Mandatory drug testing: Boon for public safety or launch of a witch-hunt? [7]. Canadian Medical Association Journal, 147(6), 844-845.
Title/abstract: Excluded. Wrong intervention/comparator

Katz, B. P., Fortenberry, J. D., Zimet, G. D., Blythe, M. J., & Orr, D. P. (2000). Partner-specific relationship characteristics and condom use among young people with sexually transmitted diseases. Journal of Sex Research, 37(1), 69-75.
Title/abstract: Excluded. Wrong intervention/comparator

Katz, C. J. (1952). A pragmatic approach to the control of "chronic alcoholism." Journal of Nervous and Mental Disease, 115, 22-34.
Title/abstract: Excluded. Wrong intervention/comparator

Katz, H. A. (1971). California Rehabilitation Center: A critical look. International Journal of the Addictions. Vol., 6(3), 543-551.
Title/abstract: Excluded. Not a clinical study.

Katz, J. L. (1990). Eating disorders: A primer for the substance abuse specialist: I. Clinical features. Journal of Substance Abuse Treatment, 7(3), 143-149.
Title/abstract: Excluded. Wrong intervention/comparator

Kawarabuki, K., Sakakibara, T., Hirai, M., Yoshioka, Y., Yamamoto, Y., & Yamaki, T. (2003). Marchiafava-Bignami disease: Magnetic resonance imaging findings in corpus callosum and subcortical white matter. European Journal of Radiology, 48(2), 175-177.
Full paper: Excluded. Not a clinical study

Kelly, B. D., Clarke, M., Browne, S., McTigue, O., Kamali, M., Gervin, M., et al. (2004). Clinical predictors of admission status in first episode schizophrenia. European Psychiatry, 19(2), 67-71.
Full paper: Excluded. Not a clinical study

Kelly, J. A., & Kalichman, S. C. (1995). Increased attention to human sexuality can improve HIV-AIDS prevention efforts: Key research issues and directions. Journal of Consulting and Clinical Psychology, 63(6), 907-918.
Title/abstract: Excluded. Wrong intervention/comparator

Kelly, J. A., St. Lawrence, J. S., Betts, R., Brasfield, T. L., & Hood, H. V. (1990). A skills-training group intervention model to assist persons in reducing risk behaviors for HIV infection. AIDS Education and Prevention, 2(1), 24-35.
Title/abstract: Excluded. Wrong intervention/comparator

Kelly, J. F., Finney, J. W., & Moos, R. (2005). Substance use disorder patients who are mandated to treatment: Characteristics, treatment process, and 1- and 5-year outcomes. Journal of Substance Abuse Treatment, 28(3), 213-223.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Ker, M., Leischow, S., Markowitz, I. B., & Merikle, E. (1996). Involuntary smoking cessation: A treatment option in chemical dependency programs for women and children. Journal of Psychoactive Drugs, 28(1), 47-60.
Full paper: Excluded. Not a clinical study

Kermani, E. J., & Castaneda, R. (1996). Psychoactive substance use in forensic psychiatry. American Journal of Drug and Alcohol Abuse, 22(1), 1-27.
Title/abstract: Excluded. Wrong intervention/comparator

Kerr, T. (2002). Drug treatment court opens in British Columbia. Canadian HIV/AIDS policy & law review / Canadian HIV/AIDS Legal Network, 6(3), 36-37.
Title/abstract: Excluded. Not a clinical study.

Khant, U. (1985). Measures to prevent and reduce drug abuse among young people in Burma. Bulletin on Narcotics, 37(2-3), 81-89.
Title/abstract: Excluded. Not a clinical study.

Khantzian, E. J., & Kates, W. W. (1978). Group treatment of unwilling addicted patients: Programmatic and clinical aspects. International Journal of Group Psychotherapy, 28(1), 81-94.
Title/abstract: Excluded. Wrong intervention/comparator

Kidorf, M., Hollander, J. R., King, V. L., & Brooner, R. K. (1998). Increasing employment of opioid dependent outpatients: An intensive behavioral intervention. Drug and Alcohol Dependence, 50(1), 73-80.
Title/abstract: Excluded. Wrong intervention/comparator

Kilbourne, A. M., Bauer, M. S., Pincus, H., Williford, W. O., Kirk, G. F., Beresford, T., et al. (2005). Clinical, psychosocial, and treatment differences in minority patients with bipolar disorder. Bipolar Disorders, 7(1), 89-97.
Full paper: Excluded. Not a clinical study

Kim, I., Barnes, A. J., Schepers, R., Moolchan, E. T., Wilson, L., Cooper, G., et al. (2003). Sensitivity and specificity of the Cozart microplate EIA cocaine oral fluid at proposed screening and confirmation cutoffs. Clinical Chemistry, 49(9), 1498-1503.
Title/abstract: Excluded. Wrong intervention/comparator

Kim, M. H., Myung, S. J., Kim, Y. S., Kim, H. J., Seo, D. W., Nam, S. W., et al. (1998). Routine biliary sphincterotomy may not be indispensable for endoscopic pancreatic sphincterotomy [Electronic Version]. Endoscopy, 697-701 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/294/CN-00158294/frame.html

King, B. L. (1986). Decision making in the intervention process. Alcoholism Treatment Quarterly, 3(3), 5-22.
Title/abstract: Excluded. Not a clinical study.

King, G., Altpeter, M., & Spada, M. (1986). Alcoholism and the elderly: A training model. Alcoholism Treatment Quarterly, 3(3), 81-94.
Title/abstract: Excluded. Not a clinical study.

King, P. A. (1991). Helping women helping children: drug policy and future generations. The Milbank quarterly, 69(4), 595-621.
Title/abstract: Excluded. Not a clinical study.

Kirn, W. (2001). What do you tell the kids? How a recovering alcoholic plans to urge his daughter to abstain. Time, 157, 49%N 24.
Title/abstract: Excluded. Not a clinical study.

Kisely, S., Preston, N., & Rooney, M. (2000). Pathways and outcomes of psychiatric care: Does it depend on who you are, or what you've got? Australian and New Zealand Journal of Psychiatry, 34(6), 1009-1014.
Full paper: Excluded. Not a clinical study

Klag, S., Creed, P., & O'Callaghan, F. (2006). Development and initial validation of an instrument to measure perceived coercion to enter treatment for substance abuse. Psychology of Addictive Behaviors, 20(4), 463-470.
Title/abstract: Excluded. Wrong intervention/comparator

Klag, S., O'Callaghan, F., & Creed, P. (2005). The use of legal coercion in the treatment of substance abusers: An overview and critical analysis of thirty years of research. Substance Use and Misuse, 40(12), 1777-1795.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Kleber, H. D., Weismann, M. M., & Rounsaville, B. J. (1983). Imipramine as treatment for depression in addicts. Archives of General Psychiatry, 40(6), 649-653.
Title/abstract: Excluded. Wrong intervention/comparator

Klein, D., Miller, R. E., Noble, A., & Speiglman, R. (2004). Incorporating a public health approach in drug law: Lessons from local expansion of treatment capacity and access under California's proposition 36. Milbank Quarterly, 82(4), 723-757.
Title/abstract: Excluded. Not a clinical study.

Kletter, E. (2003). Counseling as an intervention for the cocaine-abusing methadone maintenance patient. Journal of Psychoactive Drugs, 35(2), 271-277.
Title/abstract: Excluded. Wrong intervention/comparator

Knight, J. R., Palacios, J., & Shannon, M. (1999). Prevalence of alcohol problems among pediatric residents. Archives of Pediatrics and Adolescent Medicine, 153(11), 1181-1183.
Title/abstract: Excluded. Wrong intervention/comparator

Knight, K., Hiller, M. L., Broome, K. M., & Simpson, D. D. (2000). Legal Pressure, Treatment Readiness, and Engagement in Long-Term Residential Programs. Journal of Offender Rehabilitation, 31(1-2), 101-115.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Knysz, B., Setta, M., Inglot, M., Gasiorowski, J., Sokolska, V., & Gladysz, A. (2001). 32-Year old man with disseminated tuberculosis - A case report. Problemy HIV i AIDS, 7(1-2), 73-75.
Title/abstract: Excluded. Wrong intervention/comparator

Koch, D. S., & Rubin, S. E. (1997). Challenges faced by rehabilitation counselors working with alcohol and other drug abuse in a "one size fits all" treatment tradition. Journal of Applied Rehabilitation Counseling, 28(1), 31-35.
Title/abstract: Excluded. Not a clinical study.

Kofoed, L., & Keys, A. (1988). Using group therapy to persuade dual-diagnosis patients to seek substance abuse treatment. Hospital and Community Psychiatry, 39(11), 1209-1211.
Title/abstract: Excluded. Wrong intervention/comparator

Koop, C. E. (1986). Surgeon General's report on acquired immune deficiency syndrome. JAMA : the journal of the American Medical Association, 256(20), 2783-2789.
Title/abstract: Excluded. Wrong intervention/comparator

Korkeila, J. A., Tuohimaki, C., Kaltiala-Heino, R., Lehtinen, V., & Joukamaa, M. (2002). Predicting use of coercive measures in Finland. Nordic Journal of Psychiatry, 56(5), 339-345.
Title/abstract: Excluded. Wrong intervention/comparator

Kosanke, N., Magura, S., Staines, G., Foote, J., & DeLuca, A. (2002). Feasibility of matching alcohol patients to ASAM levels of care. American Journal on Addictions, 11(2), 124-134.
Title/abstract: Excluded. Wrong intervention/comparator

Kosten, T. R. (2002). Commentary: Commitment for substance abuse--Current judicial interventions. Journal of the American Academy of Psychiatry and the Law, 30(1), 46-48.
Title/abstract: Excluded. Not a clinical study.

Kovco, I., & Mraovic, I. C. (2000). Intoxication by alcohol at the time of perpetration of homicide. Alcoholism, 36(1), 3-15.
Title/abstract: Excluded. Wrong intervention/comparator

Kownacki, R. J., & Shadish, W. R. (1999). Does alcoholics anonymous work? The results from a meta-analysis of controlled experiments. Substance Use and Misuse, 34(13), 1897-1916.
Title/abstract: Excluded. Wrong intervention/comparator

Kratcoski, P. C. (1973). Some alternatives to criminal prosecution for the victimless crimes of drunkenness offenders. Journal of Alcohol and Drug Education. Vol., 18(3), 1-8.
Title/abstract: Excluded. Not a clinical study.
Title/abstract: Excluded. Wrong intervention/comparator

Krefft, K. M., & Brittain Jr, T. H. (1983). A prisoner assessment survey: Screenings of a municipal prison population. International Journal of Law and Psychiatry, 6(1), 113-124.
Title/abstract: Excluded. Wrong intervention/comparator

Krupitsky, E. M., Zvartau, E. E., Masalov, D. V., Tsoy, M. V., Burakov, A. M., Egorova, V. Y., et al. (2006). Naltrexone with or without fluoxetine for preventing relapse to heroin addiction in St. Petersburg, Russia [Electronic Version]. Journal of substance abuse treatment, 319-328 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/424/CN-00573424/frame.html

Kruzich, D. J., Silsby, H. D., Gold, J. D., & Hawkins, M. R. (1986). An evaluation and education program for driving while intoxicated offenders. Journal of Substance Abuse Treatment, 3(4), 263-270.
Title/abstract: Excluded. Wrong intervention/comparator

Ksir, C. (1992). Review of The facts about drinking. Psychology of Addictive Behaviors, 6(1), 56-57.
Title/abstract: Excluded. Not a clinical study.

Kypri, K., Langley, J. D., Saunders, J. B., & Cashell-Smith, M. L. (2007). Assessment may conceal therapeutic benefit: findings from a randomized controlled trial for hazardous drinking [Electronic Version]. Addiction (Abingdon, England), 62-70 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/577/CN-00577577/frame.html

Lagitch, K. E. (1998). Mandatory HIV testing: an Orwellian proposition. St. John's law review., 72(1), 103-139.
Title/abstract: Excluded. Wrong intervention/comparator

Lal, S. (1988). Apomorphine in the evaluation of dopaminergic function in man. Progress in Neuro-Psychopharmacology and Biological Psychiatry, 12(2-3), 117-164.
Full paper: Excluded. Not a clinical study

Lane, C. J., Bronskill, S. E., Sykora, K., Dhalla, I. A., Anderson, G. M., Mamdani, M. M., et al. (2004). Potentially inappropriate prescribing in Ontario community-dwelling older adults and nursing home residents. Journal of the American Geriatrics Society, 52(6), 861-866.
Title/abstract: Excluded. Wrong intervention/comparator

Lapham, S. C., C'De Baca, J., Chang, I., Hunt, W. C., & Berger, L. R. (2002). Are drunk-driving offenders referred for screening accurately reporting their drug use? Drug and Alcohol Dependence, 66(3), 243-253.
Title/abstract: Excluded. Wrong intervention/comparator

Lapham, S. C., Skipper, B. J., & Simpson, G. L. (1997). A prospective study of the utility of standardized instruments in predicting recidivism among first DWI offenders. Journal of Studies on Alcohol, 58(5), 524-530.
Title/abstract: Excluded. Wrong intervention/comparator

LaPointe Rudow, D., Russo, M. W., Hafliger, S., Emond, J. C., & Brown Jr, R. S. (2003). Clinical and ethnic differences in candidates listed for liver transplantation with and without potential living donors. Liver Transplantation, 9(3), 254-259.
Title/abstract: Excluded. Wrong intervention/comparator

Larke, J. (1985). Compulsory treatment: Some practical methods of treating the mandated client. Psychotherapy, 22(2), 262-268.
Title/abstract: Excluded. Not a clinical study.

Latarjet, J., & Choinere, M. (1995). Pain in burn patients. Burns, 21(5), 344-348.
Title/abstract: Excluded. Not a clinical study.

Latessa, E. J., Travis, L. F., & Cullen, F. T. (1988). Public support for mandatory drug-alcohol testing in the workplace. Crime & Delinquency, 34(4), 379-391.
Title/abstract: Excluded. Wrong intervention/comparator

Latt, N. C., Jurd, S., Houseman, J., & Wutzke, S. E. (2002). Naltrexone in alcohol dependence: a randomised controlled trial of effectiveness in a standard clinical setting [Electronic Version]. The Medical journal of Australia, 530-534 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/596/CN-00389596/frame.html

Lattimore, P. K., Broner, N., Sherman, R., Frisman, L., & Shafer, M. S. (2003). A Comparison of Prebooking and Postbooking Diversion Programs for Mentally Ill Substance-Using Individuals With Justice Involvement. Journal of Contemporary Criminal Justice, 19(1), 30-64.
Title/abstract: Excluded. Wrong indication/population.

Lauber, C., Lay, B., & R√∂ssler, W. (2006). Homeless people at disadvantage in mental health services. European Archives of Psychiatry and Clinical Neuroscience, 256(3), 138-145.
Title/abstract: Excluded. Wrong intervention/comparator

Lauber, C., Lay, B., & Rossler, W. (2005). Homelessness among people with severe mental illness in Switzerland. Swiss Medical Weekly, 135(3-4), 50-56.
Title/abstract: Excluded. Wrong intervention/comparator

Laufenburg, H. F., & Barton, B. A. (1997). Attitudes of family practice residency program directors toward mandatory preemployment drug testing. Family Medicine, 29(9), 625-628.
Title/abstract: Excluded. Wrong intervention/comparator

Lawental, E., McLellan, A. T., Grissom, G. R., Brill, P., & O'Brien, C. (1996). Coerced treatment for substance abuse problems detected through workplace urine surveillance: Is it effective? Journal of Substance Abuse, 8(1), 115-128.
Title/abstract: Excluded. Wrong intervention/comparator

Lee, H. H., Galli, C., Burczak, J. D., Biffoni, F., De Stasio, G., De Virgiliis, S., et al. (1994). A multicentric seroepidemiological survey of HTLV-I/II in Italy. Clinical and Diagnostic Virology, 2(3), 139-147.
Title/abstract: Excluded. Wrong intervention/comparator

Lee, M. A., Ganzini, L., & Heintz, R. (1993). The PSDA and treatment refusal by a depressed older patient committed to the state mental hospital. HEC forum : an interdisciplinary journal on hospitals" ethical and legal issues, 5(5), 289-301.
Full paper: Excluded. Not a clinical study

Lehto, J. (1994). Involuntary treatment of people with substance related problems in the Nordic countries. NAD Publication, -(27), 7-32.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Leiblum, S. R., & Williams, E. (1993). Screening in or out of the new reproductive options: who decides and why. Journal of psychosomatic obstetrics and gynaecology, 14 Suppl(-), 37-44.
Title/abstract: Excluded. Not a clinical study.

Lelliott, P., & Audini, B. (2003). Trends in the use of Part II of the Mental Health Act 1983 in seven English local authority areas. British Journal of Psychiatry, 182(JAN.), 68-70.
Title/abstract: Excluded. Not a clinical study.

Lemon, S. J., Sienko, D. G., & Alguire, P. C. (1992). Physicians' attitudes toward mandatory workplace urine drug testing. Archives of Internal Medicine, 152(11), 2238-2242.
Title/abstract: Excluded. Not a clinical study

Lennox, R., Dennis, M. L., Ives, M., & White, M. K. (2006). The construct and predictive validity of different approaches to combining urine and self-reported drug use measures among older adolescents after substance abuse treatment. American Journal on Addictions, 15(SUPPL. 1), 92-101.
Title/abstract: Excluded. Wrong intervention/comparator

Lerner, A. G., Gelkopf, M., Sigal, M., & Oyffe, I. (1997). Indicators of good prognosis in naltrexone treatment: A five-year prospective study. Addiction Research, 4(4), 385-391.
Title/abstract: Excluded. Wrong intervention/comparator

Lesch, O. M., Walter, H., Mader, R., Musalek, M., & Zeiler, K. (1988). Chronic alcoholism in relation to attempted or effected suicide. A long-term study. Psychiatrie et Psychobiologie, 3(3), 181-188.
Title/abstract: Excluded. Wrong intervention/comparator

Lessenger, J. E., & Roper, G. F. (2002). Drug courts: a primer for the family physician. The Journal of the American Board of Family Practice / American Board of Family Practice, 15(4), 298-303.
Title/abstract: Excluded. Not a clinical study.

Lessey, R. A., & Reading, A. (1975). Evaluating suicidal risk. Primary Care - Clinics in Office Practice, 2(1), 57-63.
Title/abstract: Excluded. Not a clinical study.

Leukefeld, C. G., & Tims, F. M. (1990). Compulsory treatment for drug abuse. International Journal of the Addictions, 25(6), 621-640.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Leukefeld, C. G., & Tims, F. M. (1988). Compulsory treatment: a review of findings. In C. G. Leukefeld & F. M. Tims (Eds.), Compulsory Treatment of Drug Abuse: Research and Clinical Practice (Vol. 86, pp. 236-251). Rockville, MD
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Leukefeld, C. G., & Tims, F. M. (1988). An introduction to compulsory treatment for drug abuse: clinical practice and research. In C. G. Leukefeld & F. M. Tims (Eds.), Compulsory Treatment of Drug Abuse: Research and Clinical Practice (Vol. 86, pp. 1-7). Rockville, MD.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Levin, F. R., Evans, S. M., Coornaraswammy, S., Collins, E. D., Regent, N., & Kleber, H. D. (1998). Flupenthixol treatment for cocaine abusers with schizophrenia: A pilot study. American Journal of Drug and Alcohol Abuse, 24(3), 343-360.
Full paper: Excluded. Not a clinical study

Levine, C., & Stein, G. L. (1991). What's in a name? The policy implications of the CDC definition of AIDS. Law, medicine & health care : a publication of the American Society of Law & Medicine, 19(3-4), 278-290.
Title/abstract: Excluded. Not a clinical study.

Levine, E. A., Alverdy, J. C., & Agrawal, A. (1991). Hepatitis prevalence in trauma patients. American Surgeon, 57(6), 385-387.
Title/abstract: Excluded. Wrong intervention/comparator

Levy, D. T., & Friend, K. (2002). A simulation model of policies directed at treating tobacco use and dependence. Medical Decision Making, 22(1), 6-17.
Title/abstract: Excluded. Wrong intervention/comparator

Lex, B., Teoh, S., Lagomasino, I., & Mendelson, J. (1988). Characteristics of women receiving mandated alcoholism or polydrug treatment in Massachusetts. NIDA Research Monograph Series, -, 53%N 90.
Title/abstract: Excluded. Wrong intervention/comparator

Lex, B. W., Teoh, S. K., Lagomasino, I., Mello, N. K., & et al. (1990). Characteristics of women receiving mandated treatment for alcohol or polysubstance dependence in Massachusetts. Drug and Alcohol Dependence, 25(1), 13-20.
Title/abstract: Excluded. Wrong intervention/comparator

Li, M., Chen, K., & Mo, Z. (2002). Use of qigong therapy in the detoxification of heroin addicts. Alternative Therapies in Health and Medicine, 8(1), 50-59.
Title/abstract: Excluded. Wrong intervention/comparator

Li, X., Zhou, Y., & Stanton, B. (2002). Illicit drug initiation among institutionalized drug users in China. Addiction, 97(5), 575-582.
Title/abstract: Excluded. Wrong intervention/comparator

Lidz, C. W., Mulvey, E. P., Hoge, S. K., Kirsch, B. L., Monahan, J., Bennett, N. S., et al. (1997). The validity of mental patients' accounts of coercion-related behaviors in the hospital admission process. Law and Human Behavior, 21(4), 361-376.
Title/abstract: Excluded. Wrong intervention/comparator

Lightsey, M. L., & Sweeney, M. E. (1985). Life problems experienced from drinking: Factors associated with level of problem drinking among youthful DWI offenders. Journal of Alcohol and Drug Education, 30(3), 65-82.
Title/abstract: Excluded. Wrong intervention/comparator

Lim, S., Katz, K., Krajden, S., Fuksa, M., Keystone, J. S., & Kain, K. C. (2004). Complicated and fatal Strongyloides infection in Canadians: Risk factors, diagnosis and management. Canadian Medical Association Journal, 171(5), 479-484.
Title/abstract: Excluded. Wrong intervention/comparator

Lincourt, P., Kuettel, T. J., & Bombardier, C. H. (2002). Motivational interviewing in a group setting with mandated clients. A pilot study. Addictive Behaviors, 27(3), 381-391.
Title/abstract: Excluded. Not a clinical study.

Lindblad, R. (1988). Civil commitment under the Federal Narcotic Addict Rehabilitation Act. Journal of Drug Issues, 18(4), 595-624.
Title/abstract: Excluded. Not a clinical study.

Lindseth, P. D., & Lindseth, G. (1995). Attitudes toward urinalysis drug testing within a civilian pilot training program. Aviation Space and Environmental Medicine, 66(9), 837-840.
Title/abstract: Excluded. Wrong intervention/comparator

Lindseth, P. D., Vacek, J. J., & Lindseth, G. N. (2001). Urinalysis drug testing within a civilian pilot training program: Did attitudes change during the 1990's? Aviation Space and Environmental Medicine, 72(7), 647-651.
Title/abstract: Excluded. Wrong intervention/comparator

Linhorst, D. M., Hamilton, G., Young, E., & Eckert, A. (2002). Opportunities and barriers to empowering people with severe mental illness through participation in treatment planning. Social Work, 47(4), 425-434.
Title/abstract: Excluded. Wrong intervention/comparator

Linn, L. S., Yager, J., & Leake, B. (1990). Physicians' Attitudes toward Substance Abuse and Drug Testing. The International Journal of the Addictions, vol, 25(4), 427-444.
Title/abstract: Excluded. Not a clinical study.

Lintzeris, N., Lenne, M., & Ritter, A. (1999). Methadone injecting in Australia: A tale of two cities. Addiction, 94(8), 1175-1178.
Title/abstract: Excluded. Wrong intervention/comparator

Lipsky, S., Holt, V. L., Easterling, T. R., & Critchlow, C. W. (2004). Police-reported intimate partner violence during pregnancy and the risk of antenatal hospitalization. Maternal and child health journal, 8(2), 55-63.
Title/abstract: Excluded. Wrong intervention/comparator

Lobo, S., & Vaughan, M. M. (2003). Substance dependency among homeless American Indians. Journal of Psychoactive Drugs, 35(1), 63-70.
Full paper: Excluded. Not a clinical study

Logan, D. G. (1983). Getting alcoholics to treatment by social network intervention. Hospital & Community Psychiatry, 34(4), 360-361.
Title/abstract: Excluded. Wrong intervention/comparator

London, M., Canitrot, J., Dzialdowski, A., Bates, R., & Gwynn, A. (2003). Contact with treatment services among arrested drug users. Psychiatric Bulletin, 27(6), 214-216.
Title/abstract: Excluded. Wrong intervention/comparator

Loneck, B., Garrett, J. A., & Banks, S. M. (1996). A comparison of the Johnson Intervention with four other methods of referral to outpatient treatment. American Journal of Drug and Alcohol Abuse, 22(2), 233-246.
Title/abstract: Excluded. Wrong intervention/comparator

Loneck, B., Garrett, J. A., & Banks, S. M. (1996). The Johnson Intervention and relapse during outpatient treatment. American Journal of Drug and Alcohol Abuse, 22(3), 363-375.
Title/abstract: Excluded. Wrong intervention/comparator

Long, D. M. (1983). Stimulation of the peripheral nervous system for pain control. Clinical neurosurgery, 31(-), 323-343.
Title/abstract: Excluded. Wrong intervention/comparator

Longo, M. C., Henry-Edwards, S. M., Humeniuk, R. E., Christie, P., & Ali, R. L. (2004). Impact of the heroin 'drought' on patterns of drug use and drug-related harms. Drug and Alcohol Review, 23(2), 143-150.

Title/abstract: Excluded. Not a clinical study.

Longshore, D., & Teruya, C. (2006). Treatment motivation in drug users: A theory-based analysis. Drug and Alcohol Dependence, 81(2), 179-188.
Title/abstract: Excluded. Wrong intervention/comparator

Look, S., & Rapaport, R. J. (1991). Evaluation of an alcohol education discipline program for college students. Journal of Alcohol and Drug Education, 36(2), 88-95.
Title/abstract: Excluded. Wrong intervention/comparator

Loots, H., & Wiseman, R. (2006). Agents for sedation in ophthalmic surgery: A review of the pharmacodynamics and clinical applications. Current Anaesthesia and Critical Care, 17(3-4), 179-190.
Full paper: Excluded. Not a clinical study

Love, C. C., & Morrison, E. (2003). American Academy of Nursing Expert Panel on Violence policy recommendations on workplace violence (adopted 2002). Issues in Mental Health Nursing, 24(6-7), 599-604.
Title/abstract: Excluded. Not a clinical study.

Lowenstein, L. F. (1985). Drug misuse: A new solution. Contemporary Review, 247(1435), 86-91.
Title/abstract: Excluded. Not a clinical study

Lucken, K. (1997). Privatizing Discretion: "Rehabilitating" Treatment in Community Corrections. Crime and Delinquency, vol, 43(3), 243-259.
Title/abstract: Excluded. Wrong intervention/comparator

Luger, M. (1986). Coercion and treatment. Journal of Drug Issues, 16(2), 307-311.
Title/abstract: Excluded. Not a clinical study.

Luke, L. C., Dewar, C., Bailey, M., McGreevy, D., Morris, H., & Burdett-Smith, P. (2002). A little nightclub medicine: The healthcare implications of clubbing. Emergency Medicine Journal, 19(6), 542-545.
Title/abstract: Excluded. Wrong intervention/comparator

Luks, A. (1982). Alcoholism: do threats and therapy mix? The Hastings Center report, 12(6), 7-11.
Title/abstract: Excluded. Wrong intervention/comparator

Lulich, K. M., Goldie, R. G., Ryan, G., & Paterson, J. W. (1986). Adverse reactions to (beta)2-agonist bronchodilators. Medical Toxicology and Adverse Drug Experience, 1(4), 286-299.
Title/abstract: Excluded. Wrong intervention/comparator

Luna, E. (2004). "What is legal is not necessarily ethical": the limits of law and drug-testing programs. The American journal of bioethics : AJOB, 4(1), 41-43.
Title/abstract: Excluded. Wrong intervention/comparator

Lund, C., & Forsman, A. (2005). Intended effects and actual outcome of the Forensic Mental Care Act of 1992: A study of 367 cases of forensic psychiatric investigation in Sweden. Nordic Journal of Psychiatry, 59(5), 381-387.
Title/abstract: Excluded. Wrong intervention/comparator

Lundgren, K., Gerdner, A., & Lundqvist, L.-O. (2002). Childhood abuse and neglect in severely dependent female addicts: Homogeneity and reliability of a Swedish version of the Childhood Trauma Questionnaire. International Journal of Social Welfare, 11(3), 219-227.
Title/abstract: Excluded. Wrong intervention/comparator

Lynoe, N., Sandlund, M., & Jacobsson, L. (2001). Informed consent in two Swedish prisons: A study of quality of information and reasons for participating in a clinical trial. Medicine and Law, 20(4), 515-523.
Title/abstract: Excluded. Wrong intervention/comparator

Ma, J. J., & Truswell, A. S. (1995). Wernicke-Korsakoff syndrome in Sydney hospitals: before and after thiamine enrichment of flour. Medical Journal of Australia, 163(10), 531-534.
Title/abstract: Excluded. Wrong intervention/comparator

Macdonald, S., Bois, C., Brands, B., Dempsey, D., Erickson, P., Marsh, D., et al. (2001). Drug testing and mandatory treatment for welfare recipients. International Journal of Drug Policy, 12(3), 249-257.
Title/abstract: Excluded. Not a clinical study.

MacDonell, J. E., & Wrenn, K. (1991). Hypothermia in the summer. Southern Medical Journal, 84(6), 804-805.
Title/abstract: Excluded. Wrong intervention/comparator

MacGregor, S. (1990). Could Britain inherit the American nightmare? British Journal of Addiction, 85(7), 863-872.
Title/abstract: Excluded. Not a clinical study.

Maddux, J. F. (1988). Clinical experience with civil commitment. Journal of Drug Issues, 18(4), 575-594.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Maddux, J. F., & Desmond, D. P. (1997). Outcomes of methadone maintenance 1 year after admission. Journal of Drug Issues, 27(2), 225-238.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Maddux, J. F., Desmond, D. P., & Vogtsberger, K. N. (1995). Patient-regulated methadone dose and optional counseling in methadone maintenance. American Journal on Addictions, 4(1), 18-32.
Title/abstract: Excluded. Wrong intervention/comparator

Madianos, M. G., & Economou, M. (1999). The impact of a community mental health center on psychiatric hospitalizations in two Athens areas. Community Mental Health Journal, 35(4), 313-323.
Title/abstract: Excluded. Not a clinical study

Maeve, M. K. (1997). Nursing practice with incarcerated women: caring within mandated (sic) alienation. Issues in mental health nursing, 18(5), 495-510.
Title/abstract: Excluded. Not a clinical study.

Maglione, M., Chao, B., & Anglin, D. (2000). Residential Treatment of Methamphetamine Users: Correlates of Drop-Out from the California Alcohol and Drug Data System (CADDS), 1994-1997. Addiction Research, vol, 8(1), 65-79.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Maglione, M., Chao, B., & Anglin, M. D. (2000). Correlates of outpatient drug treatment drop-out among methamphetamine users. Journal of Psychoactive Drugs, 32(3), 221-228.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Magnavita, N. (2006). Management of impaired physicians in Europe. Medicina del Lavoro, 97(6), 762-773.
Title/abstract: Excluded. Not a clinical study.

Maher, L., Coupland, H., & Musson, R. (2007). Scaling up HIV treatment, care and support for injecting drug users in Vietnam. International Journal of Drug Policy, 18(4), 296-305.
Title/abstract: Excluded. Wrong intervention/comparator

Maletzky, B. M. (1977). Phenelzine as a stimulant drug antagonist: a preliminary report. International Journal of the Addictions, 12(5), 651-655.

Title/abstract: Excluded. Wrong intervention/comparator

Malmquist, C. P. (1972). Juvenile Detention: Right and Adequacy of Treatment Issues. Law and Society Review, vol, 7(2), 159-193.
Title/abstract: Excluded. Not a clinical study.

Malow, R. M., Devieux, J. G., Jennings, T., Lucenko, B. A., & Kalichman, S. C. (2001). Substance-abusing adolescents at varying levels of HIV risk: psychosocial characteristics, drug use, and sexual behavior. Journal of substance abuse, 13(1-2), 103-117.
Title/abstract: Excluded. Wrong intervention/comparator

Manfredi, R. (2004). HIV infection and advanced age: Emerging epidemiological, clinical, and management issues. Ageing Research Reviews, 3(1), 31-54.
Title/abstract: Excluded. Not a clinical study.

Manfrin-Ledet, L., & Porche, D. J. (2003). The state of science: Violence and HIV infection in women. Journal of the Association of Nurses in AIDS Care, 14(6), 56-68.
Title/abstract: Excluded. Wrong intervention/comparator

Manji, H. K. (1992). G proteins: Implications for psychiatry. American Journal of Psychiatry, 149(6), 746-760.
Title/abstract: Excluded. Wrong intervention/comparator

Mann, D. W. (1989). Inpatient treatment of the mentally ill substance abuser: Some medicolegal concerns. Journal of Substance Abuse Treatment, 6(1), 19-21.
Full paper: Excluded. Not a clinical study

Mann, N. R., Charuvastra, V. C., & Murthy, V. K. (1984). A diagnostic tool with important implications for treatment of addiction: Identification of factors underlying relapse and remission time distributions. International Journal of the Addictions, 19(1), 25-44.
Title/abstract: Excluded. Wrong intervention/comparator

Marcellus, L. (2004). Feminist Ethics Must Inform Practice: Interventions with Perinatal Substance Users. Health Care for Women International, vol, 25(8), 730-742.
Title/abstract: Excluded. Not a clinical study.

Marco, C. H., & Marco, J. M. (1980). Antabuse: medication in exchange for a limited freedom--is it legal? American Journal of Law and Medicine, 5(4), 295-330.
Title/abstract: Excluded. Not a clinical study.

Margulies, A. G., & Akin, H. E. (1997). Marsupialization of the pancreas for infected pancreatic necrosis. American Surgeon, 63(3), 261-265.
Title/abstract: Excluded. Wrong intervention/comparator

Mark, F. O. (1988). Does coercion work? The role of referral source in motivating alcoholics in treatment. Alcoholism Treatment Quarterly, 5(3-4), 5-22.
Title/abstract: Excluded. Wrong intervention/comparator

Mark, I. (1983). The newborn addict, ante- and postnatal care. Scandinavian Journal of Social Medicine, 11(1), 11-16.
Title/abstract: Excluded. Wrong intervention/comparator

Marlowe, D. B. (2006). Depot naltrexone in lieu of incarceration: A behavioral analysis of coerced treatment for addicted offenders. Journal of Substance Abuse Treatment, 31(2), 131-139.
Title/abstract: Excluded. Wrong intervention/comparator

Marlowe, D. B. (2001). Coercive treatment of substance abusing criminal offenders. Journal of Forensic Psychology Practice, 1(1), 65-73.
Title/abstract: Excluded. Wrong indication/population.

Marlowe, D. B., Kirby, K. C., Bonieskie, L. M., & Glass, D. J. (1996). Assessment of coercive and noncoercive pressures to enter drug abuse treatment. Drug and Alcohol Dependence, 42(2), 77-84.
Title/abstract: Excluded. Wrong intervention/comparator

Marshall, G. N., & Hser, Y.-I. (2002). Characteristics of criminal justice and noncriminal justice clients receiving treatment for substance abuse. Addictive Behaviors, 27(2), 179-192.
Title/abstract: Excluded. Wrong indication/population.

Marshall, M. F. (1999). Commentary: mal-intentioned illiteracy, willful ignorance, and fetal protection laws: is there a lexicologist in the house? The Journal of law, medicine & ethics : a journal of the American Society of Law, Medicine & Ethics, 27(4), 343-346, 294.
Title/abstract: Excluded. Not a clinical study.

Marshall, M. F., Menikoff, J., & Paltrow, L. M. (2003). Perinatal substance abuse and human subjects research: Are privacy protections adequate? Mental Retardation and Developmental Disabilities Research Reviews, 9(1), 54-59.
Title/abstract: Excluded. Not a clinical study.

Martin, B., Clapp, L., Bialkowski, D., Bridgeford, D., Amponsah, A., Lyons, L., et al. (2003). Compliance to supervised disulfiram therapy: A comparison of voluntary and court-ordered patients. American Journal on Addictions, 12(2), 137-143.
Title/abstract: Excluded. Wrong intervention/comparator

Martin, B., Mangum, L., & Beresford, T. P. (2005). Use of court-ordered supervised disulfiram therapy at DVA medical centers in the United States. American Journal on Addictions, 14(3), 208-212.
Title/abstract: Excluded. Wrong intervention/comparator

Martin, B. K., Clapp, L., Alfers, J., & Beresford, T. P. (2004). Adherence to court-ordered disulfiram at fifteen months: a naturalistic study [Electronic Version]. Journal of substance abuse treatment, 233-236 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/853/CN-00467853/frame.html
Title/abstract: Excluded. Wrong intervention/comparator

Martin, M. K., Giannandrea, P., Rogers, B., & Johnson, J. (1996). Beginning Steps to Recovery: A Challenge to the "Come Back when You're Ready" Approach. Alcoholism Treatment Quarterly, vol, 14(2), 45-57.
Title/abstract: Excluded. Wrong intervention/comparator

Martin, M. L., & Lennox, P. H. (2003). Sedation and analgesia in the interventional radiology department. Journal of Vascular and Interventional Radiology, 14(9 I), 1119-1128.
Full paper: Excluded. Not a clinical study

Martin, S. L., Beaumont, J. L., & Kupper, L. L. (2003). Substance use before and during pregnancy: Links to intimate partner violence. American Journal of Drug and Alcohol Abuse, 29(3), 599-617.
Title/abstract: Excluded. Not a clinical study.

Martinez Tomas, R., Menendez Villanueva, R., Reyes Calzada, S., Santos Durantez, M., Valles Tarazona, J. M., Modesto Alapont, M., et al. (2007). Pulmonary nocardiosis: Risk factors and outcomes. Respirology, 12(3), 394-400.
Title/abstract: Excluded. Wrong intervention/comparator

Marttunen, M., Henriksson, M., Pelkonen, S., Schroderus, M., & Lonnqvist, J. (1997). Suicide among military conscripts in Finland: A psychological autopsy study. Military Medicine, 162(1), 14-18.
Title/abstract: Excluded. Wrong intervention/comparator

Marx, B. P., Gross, A. M., & Adams, H. E. (1999). The effect of alcohol on the responses of sexually coercive and noncoercive men to an experimental rape analogue. Sexual abuse : a journal of research and treatment, 11(2), 131-145.
Title/abstract: Excluded. Wrong intervention/comparator

Mayer, G. S., & Scott, K. J. (1988). An exploration of heterogeneity in an inpatient male alcoholic population. Journal of Personality Disorders, 2(3), 243-255.
Title/abstract: Excluded. Wrong intervention/comparator

Maynard, C., Cox, G. B., Krupski, A., & Stark, K. (2000). Utilization of Services by Persons Discharged from Involuntary Chemical Dependency Treatment. Journal of Addictive Diseases, vol, 19(2), 83-93.
Title/abstract: Excluded. Wrong intervention/comparator

McCarty, D., & Argeriou, M. (1988). Rearrest following residential treatment for repeat offender drunken drivers. Journal of Studies on Alcohol, 49(1), 1-6.
Title/abstract: Excluded. Wrong indication/population

McCrady, B. S., & Bux Jr, D. A. (1999). Ethical issues in informed consent with substance abusers. Journal of Consulting and Clinical Psychology, 67(2), 186-193.
Title/abstract: Excluded. Wrong intervention/comparator

McCrady, B. S., & Smith, D. E. (1986). Implications of cognitive impairment for the treatment of alcoholism. Alcoholism: Clinical and Experimental Research, 10(2), 145-149.
Title/abstract: Excluded. Wrong intervention/comparator

McCrystal, P., Percy, A., & Higgins, K. (2007). Substance use behaviors of young people with a moderate learning disability: A longitudinal analysis. American Journal of Drug and Alcohol Abuse, 33(1), 155-161.
Title/abstract: Excluded. Wrong intervention/comparator

McDermott, F. T. (1986). Alcohol on wheels. Australian and New Zealand Journal of Surgery, 56(1), 19-24.
Title/abstract: Excluded. Not a clinical study.

McDermott, F. T. (1977). Alcohol, road crash casualties, and countermeasures. Australian and New Zealand Journal of Surgery, 47(2), 156-161.
Title/abstract: Excluded. Not a clinical study.

McFarland, B. H., Brunette, M., Steketee, K., Faulkner, L. R., & Bloom, J. D. (1993). Long-term follow-up of rural involuntary clients. Journal of Mental Health Administration, 20(1), 46-57.
Full paper: Excluded. Wrong intervention/comparator

McGrath, J., O'Brien, J., & Liftik, J. (1977). Coercive treatment for alcoholic "driving under the influence of liquor" offenders. British Journal of Addiction, 72(3), 223-229.
Title/abstract: Excluded. Wrong intervention/comparator

McGuire, W. J. (1995). Transferring research findings on persuasion to improve drug abuse prevention programs. NIDA research monograph, 155(-), 225-245.
Title/abstract: Excluded. Not a clinical study

McIntosh, J., & McKeganey, N. (2001). Identity and recovery from dependent drug use: The addict's perspective. Drugs: Education, Prevention & Policy, 8(1), 47-59.
Title/abstract: Excluded. Wrong intervention/comparator

McKusick, D. R., Mark, T. L., King, E. C., Coffey, R. M., & Genuardi, J. (2002). Trends in mental health insurance benefits and out-of-pocket spending. Journal of Mental Health Policy and Economics, 5(2), 71-78.
Title/abstract: Excluded. Wrong intervention/comparator

McLatchie, B. H., & Lomp, K. G. (1988). An experimental investigation of the influence of aftercare on alcoholic relapse. British Journal of Addiction, 83(9), 1045-1054.
Title/abstract: Excluded. Wrong intervention/comparator

Meadway, C., George, S., & Braithwaite, R. (1998). Opiate concentrations following the ingestion of poppy seed products - Evidence for 'the poppy seed defence'. Forensic Science International, 96(1), 29-38.
Title/abstract: Excluded. Wrong intervention/comparator

Medhus, A. (1976). Female alcoholics: Correlation between sociomedical variables. British Journal of Addiction, 71(2), 109-113.
Title/abstract: Excluded. Wrong intervention/comparator

Medhus, A. (1975). Venereal diseases among female alcoholics. Scandinavian journal of social medicine, 3(1), 28-33.
Title/abstract: Excluded. Wrong intervention/comparator

Medrano, M. A. (1996). Does a discrete fetal solvent syndrome exist? Alcoholism Treatment Quarterly, 14(3), 59-76.
Full paper: Excluded. Not a clinical study

Mehta, S. R., Prabhu, H. R. A., Swamy, A. J., Dhaliwal, H., & Prasad, D. (2004). Delirium tremens. Medical Journal Armed Forces India, 60(1), 25-27.
Title/abstract: Excluded. Wrong intervention/comparator

Meinitzer, A., Zink, M., Marz, W., Baumgartner, A., & Halwachs-Baumann, G. (2005). Midazolam and its metabolites in brain death diagnosis. International Journal of Clinical Pharmacology and Therapeutics, 43(11), 517-526.
Title/abstract: Excluded. Wrong intervention/comparator

Melnick, G., Hawke, J., & Wexler, H. K. (2004). Client perceptions of prison-based therapeutic community drug treatment programs. Prison Journal, 84(1), 121-138.
Title/abstract: Excluded. Wrong intervention/comparator

Mercadante, S., & Arcuri, E. (2004). Opioids and Renal Function. Journal of Pain, 5(1), 2-19.
Title/abstract: Excluded. Wrong intervention/comparator

Meyers, K., McDermott, P. A., Webb, A., & Hagan, T. A. (2006). Mapping the Clinical Complexities of Adolescents with Substance Use Disorders: A Typological Study. Journal of Child & Adolescent Substance Abuse, vol, 16(1), 5-24.
Title/abstract: Excluded. Wrong intervention/comparator

Middleton Fillmore, K., & Kelso, D. (1987). Coercion into alcoholism treatment: meanings for the disease concept of alcoholism. Journal of Drug Issues, 17(3), 301-319.
Title/abstract: Excluded. Not a clinical study

Mihai, A., Damsa, C., Allen, M., Baleydier, B., Lazignac, C., & Heinz, A. (2007). Viewing videotape of themselves while experiencing delirium tremens could reduce the relapse rate in alcohol-dependent patients [Electronic Version]. Addiction (Abingdon, England), 226-231 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/697/CN-00577697/frame.html

Milgram, D., & Rubin, J. S. (1992). Resisting resistance: Involuntary substance abuse group therapy. Social Work with Groups, 15(1), 95-110.
Title/abstract: Excluded. Not a clinical study.

Miller, B. A., Pokorny, A. D., & Hanson, P. G. (1968). A Study of Dropouts in an in-Patient Alcoholism Treatment Program. Diseases of the Nervous System, 29(2), 91-99.
Title/abstract: Excluded. Wrong intervention/comparator

Miller, J. H., & Moyers, T. (2002). Motivational interviewing in substance abuse: applications for occupational medicine. Occupational medicine (Philadelphia, Pa.), 17(1), 51-65, iv.
Title/abstract: Excluded. Not a clinical study

Miller Jr, W. H., Bloom, J. D., & Resnick, M. P. (1992). Prenatal care for pregnant chronic mentally ill patients. Hospital and Community Psychiatry, 43(9), 942-943.
Full paper: Excluded. Not a clinical study

Miller, N. S., & Flaherty, J. A. (2000). Effectiveness of coerced addiction treatment (alternative consequences): A review of the clinical research. Journal of Substance Abuse Treatment, 18(1), 9-16.
Title/abstract: Excluded. Wrong indication/population

Miller, N. S., Giannini, A. J., Gold, M. S., & Philomena, J. A. (1990). Drug testing: Medical, legal, and ethical issues. Journal of Substance Abuse Treatment, 7(4), 239-244.
Title/abstract: Excluded. Wrong intervention/comparator

Miller, N. S., & Sheppard, L. M. (2000). Addiction treatment and continuing care in forensic populations. Psychiatric Annals, 30(9), 589-596.
Title/abstract: Excluded. Not a clinical study.

Miller, N. S., Stout, A. W., & Sheppard, L. M. (2000). Underage drinking among college students. Psychiatric Annals, 30(9), 597-601.
Title/abstract: Excluded. Not a clinical study.

Miller, T. R., Zaloshnja, E., & Spicer, R. S. (2007). Effectiveness and benefit-cost of peer-based workplace substance abuse prevention coupled with random testing. Accident Analysis & Prevention, 39(3), 565-573.
Title/abstract: Excluded. Wrong intervention/comparator

Miller, W. H., Resnick, M. P., Williams, M. H., & Bloom, J. D. (1990). The pregnant psychiatric inpatient: A missed opportunity. General Hospital Psychiatry, 12(6), 373-378.
Full paper: Excluded. Not a clinical study

Millman, R. B. (1988). Evaluation and clinical management of cocaine abusers. Journal of Clinical Psychiatry, 49(SUPPL. FEB), 27-33.
Title/abstract: Excluded. Not a clinical study.

Minkoff, K. (1991). Program components of a comprehensive integrated care system for serious mentally ill patients with substance disorders. New Directions for Mental Health Services. No, 50, 13-27.
Title/abstract: Excluded. Not a clinical study.

Minster, J., & Knowles, A. (2006). Exclusion or concern: Lawyers' and community members' perceptions of legal coercion, dangerousness and mental illness. Psychiatry, Psychology and Law, 13(2), 166-173.
Title/abstract: Excluded. Wrong intervention/comparator

Mio, J. S., Nanjundappa, G., Verleur, D. E., & De Rios, M. D. (1986). Drug abuse and the adolescent sex offender: A preliminary analysis. Journal of Psychoactive Drugs, 18(1), 65-72.
Title/abstract: Excluded. Wrong intervention/comparator

Mitchell, A. J., & Dennis, M. (2006). Self harm and attempted suicide in adults: 10 practical questions and answers for emergency department staff. Emergency Medicine Journal, 23(4), 251-255.
Title/abstract: Excluded. Not a clinical study.

Mitchell, D., & Hirschman, R. (2006). Within treatment drinking and surreptitious drinking during brief substance abuse treatment. Journal of Addictive Diseases, 25(3), 35-43.
Title/abstract: Excluded. Wrong intervention/comparator

Mitka, M. (2005). Meth lab fires put heat on burn centers. Journal of the American Medical Association, 294(16), 2009-2010.
Title/abstract: Excluded. Not a clinical study

Moberg, D. P., Krause, W. K., & Klein, P. E. (1982). Posttreatment drinking behavior among inpatients from an industrial alcoholism program. International Journal of the Addictions, 17(3), 549-567.
Title/abstract: Excluded. Wrong intervention/comparator

Moffett, L. A. (1984). Assessing the social system of a therapeutic community: Interpersonal orientations, social climate and norms. International Journal of Therapeutic Communities, 5(2), 110-119.
Title/abstract: Excluded. Not a clinical study.

Molitor, F., Ruiz, J. D., Klausner, J. D., & McFarland, W. (2000). History of Forced Sex in Association with Drug Use and Sexual HIV Risk Behaviors, Infection with STDs, and Diagnostic Medical Care: Results from the Young Women Survey. Journal of Interpersonal Violence, vol, 15(3), 262-278.
Title/abstract: Excluded. Wrong intervention/comparator

Moosajee, M. (2003). Violence - A noxious cocktail of genes and the environment. Journal of the Royal Society of Medicine, 96(5), 211-214.
Title/abstract: Excluded. Not a clinical study

Moraes, C. L., & Reichenheim, M. E. (2002). Domestic violence during pregnancy in Rio de Janeiro, Brazil. International Journal of Gynecology and Obstetrics, 79(3), 269-277.
Title/abstract: Excluded. Wrong intervention/comparator

Morehouse, E. R. (1978). Treating the Alcoholic on Public Assistance. Social Casework, vol, 59(1), 36-41.
Title/abstract: Excluded. Wrong intervention/comparator

Morgan, C. (2007). In this issue. Psychological Medicine, 37(1), 1-2.

Morgan, M. (2004). The payment of drug addicts to increase their sterilisation rate is morally unjustified and not simply 'A Fine Balance'. Journal of Obstetrics and Gynaecology, 24(2), 119-123.
Title/abstract: Excluded. Not a clinical study.

Morin, M., Obadia, Y., Moatti, J. P., & Souville, M. (1995). Commitment, value conflicts and role strains among French GPs in care for HIV positive patients. AIDS Care - Psychological and Socio-Medical Aspects of AIDS/HIV, 7(SUPPL. 1), S79-S84.
Title/abstract: Excluded. Wrong intervention/comparator

Morris, J. (1986). Interdisciplinary treatment of alcoholism. Alcoholism Treatment Quarterly, 3(4), 125-131.
Title/abstract: Excluded. Wrong intervention/comparator

Morris, J., Gawinski, B. A., & Joanning, H. (1991). Five strategies for enlisting family involvement in adolescent substance abuse treatment. Journal of Family Psychotherapy, 2(4), 41-52.
Title/abstract: Excluded. Wrong intervention/comparator

Morrisey, M. A., & Jensen, G. A. (1988). Employer-sponsored insurance coverage for alcoholism and drug-abuse treatments. Journal of Studies on Alcohol, 49(5), 456-461.
Title/abstract: Excluded. Wrong intervention/comparator

Morrison, C. (1992). The HIV epidemic. Ethical issues for the next decade. Critical care nursing clinics of North America, 4(3), 421-428.
Title/abstract: Excluded. Wrong intervention/comparator

Morrone, M., & Rathbun, A. (2003). Health education and food safety behavior in the university setting. Journal of Environmental Health, 65(7), 9-15.
Title/abstract: Excluded. Not a clinical study.

Morse, S. J. (2004). Medicine and Morals, Craving and Compulsion. Substance Use & Misuse, 39(3), 437-460.
Title/abstract: Excluded. Not a clinical study.

Moskalewicz, J., & Swiatkiewicz, G. (1989). Deviants in a Deviant Institution: A Case Study of a Polish Alcohol Treatment Hospital. Contemporary Drug Problems, vol, 16(2), 157-176.
Title/abstract: Excluded. Wrong intervention/comparator

Mottern, R. (2002). Choice Theory in coerced treatment: Using Choice Theory in coerced treatment for substance abuse. International Journal of Reality Therapy, 22(1), 20-23.
Title/abstract: Excluded. Not a clinical study.

Mueser, K. T. (2004). Clinical interventions for severe mental illness and co-occurring substance use disorder. Acta Neuropsychiatrica, 16(1), 26-35.
Title/abstract: Excluded. Not a clinical study.

Mulder, C. L., Koopmans, G. T., & Hengeveld, M. W. (2005). Lack of motivation for treatment in emergency psychiatry patients. Social Psychiatry and Psychiatric Epidemiology, 40(6), 484-488.
Full paper: Excluded. Wrong intervention/comparator

Muller-Lissner, S. (2007). The difficult patient with constipation. Best Practice and Research in Clinical Gastroenterology, 21(3), 473-484.
Title/abstract: Excluded. Not a clinical study.

Mullins, S. M., Suarez, M., Ondersma, S. J., & Page, M. C. (2004). The impact of motivational interviewing on substance abuse treatment retention: A randomized control trial of women involved with child welfare. Journal of Substance Abuse Treatment, 27(1), 51-58.
Title/abstract: Excluded. Wrong intervention/comparator

Multimaki, P., Parkkola, K., Sourander, A., Haavisto, A., Nikolakaros, G., & Helenius, H. (2005). Military fitness class of Finnish 18-year-old men. Prediction of military fitness class at call-up with the YASR and sociodemographic factors. Social Psychiatry and Psychiatric Epidemiology, 40(1), 57-63.
Title/abstract: Excluded. Wrong intervention/comparator

Munoz, R. F., Mrazek, P. J., & Haggerty, R. J. (1996). Institute of Medicine report on prevention of mental disorders: Summary and commentary. American Psychologist, 51(11), 1116-1122.
Title/abstract: Excluded. Not a clinical study.

Murgaff, V., Abraham, C., & McDermott, M. (2007). Reducing friday alcohol comsumption among moderate, women drinkers: Evaluation of a brief evidence-based intervention. Alcohol and Alcoholism, 42(1), 37-41.
Title/abstract: Excluded. Wrong intervention/comparator

Murphy, C. M., & O'Farrell, T. J. (1994). Factors associated with marital aggression in male alcoholics. Journal of Family Psychology, 8(3), 321-335.
Title/abstract: Excluded. Wrong intervention/comparator

Murphy, T. (2001). Compulsory treatment for offenders in Western Australia. Addiction, 96, 526%N 523.
Title/abstract: Excluded. Wrong indication/population

Myton, T., & Fletcher, K. (2003). Descriptive study of the effects of altering formulation of prescribed methadone from injectable to oral. Psychiatric Bulletin, 27(1), 3-6.
Title/abstract: Excluded. Wrong intervention/comparator

Nace, E. P., Birkmayer, F., Sullivan, M. A., Galanter, M., Fromson, J. A., Frances, R. J., et al. (2007). Socially Sanctioned Coercion Mechanisms for Addiction Treatment. The American Journal on Addictions, 16(1), 15-23.
Title/abstract: Included

Full paper: Excluded. Not a clinical study

Nanda, S., & Konnur, N. (2006). Adolescent drug & alcohol use in the 21st century. Pediatric Annals, 35(3), 193-199.
Title/abstract: Excluded. Wrong intervention/comparator

Nastasic, P. (1996). Family therapy model at the Department for Treatment of Alchoholics. Psihijatrija Danas, 28(4), 423-434.
Title/abstract: Excluded. Wrong intervention/comparator

National Collaborating Centre for Mental Health. (2007). Drug misuse, opioid detoxification: National Clinical Practice Guideline Number 52: National Institute for Health and Clinical Excellence.
Title/Abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Neale, J. (1999). Drug users' views of substitute prescribing conditions. International Journal of Drug Policy, 10(3), 247-258.
Title/abstract: Excluded. Not a clinical study.

Neale, M. S., & Rosenheck, R. A. (2000). Therapeutic limit setting in an assertive community treatment program. Psychiatric Services, 51(4), 499-505.
Title/abstract: Excluded. Wrong intervention/comparator

Neumann, C. P., & Tamerin, J. S. (1971). The treatment of adult alcoholics and teen-age drug addicts in one hospital: A comparison and critical appraisal of factors related to outcome. Quarterly Journal of Studies on Alcohol. Vol., 32(1-A), 82-93.
Title/abstract: Excluded. Wrong intervention/comparator

Newbern, D., Dansereau, D. F., & Pitre, U. (1999). Positive effects on life skills motivation and self-efficacy: Node-link maps in a modified therapeutic community. American Journal of Drug and Alcohol Abuse, 25(3), 407-423.
Title/abstract: Excluded. Wrong intervention/comparator

Newman, L., Henry, P. B., DiRenzo, P., & Stecher, T. (1988). Intervention and student assistance: The Pennsylvania model. Journal of Chemical Dependency Treatment. Special Issue: Practical approaches in treating adolescent chemical dependency: A guide to clinical assessment and intervention, 2(1), 145-162.
Title/abstract: Excluded. Not a clinical study.

Newman, R. G. (1972). Special problems of government-controlled methadone maintenance programs. Contemporary Drug Problems. Vol., 1(2), 183-190.
Title/abstract: Excluded. Not a clinical study.

Niemela, S. M., Sourander, A., Poikolainen, K., Elonheimo, H., Helenius, H., Sillanmaki, L., et al. (2006). Adaptive functioning, psychopathology and service use among 18-year old boys with drunkenness-related alcohol use. Alcohol and Alcoholism, 41(2), 143-150.
Title/abstract: Excluded. Wrong intervention/comparator

Nilssen, E. (2005). Coercion and Justice: A Critical Analysis of Compulsory Intervention towards Adult Substance Abusers in Scandinavian Social Law. International Journal of Social Welfare, vol, 14(2), 134-144.
Title/abstract: Excluded. Not a clinical study.

Nilssen, E., & Lien, R. S. (1999). Individual Rights and Collective Obligation. Compulsory Intervention towards Substance Abusers in Norwegian Social Law. International Journal of Social Welfare, vol, 8(3), 181-192.
Title/abstract: Excluded. Not a clinical study.

Nirenberg, M. J., & Frucht, S. J. (2005). Myoclonus. Current Treatment Options in Neurology, 7(3), 221-230.
Full paper: Excluded. Not a clinical study

Nishimoto, R. H., & Roberts, A. C. (2001). Coercion and drug treatment for postpartum women. American Journal of Drug and Alcohol Abuse, 27(1), 161-181.
Title/abstract: Excluded. Wrong intervention/comparator

Nordenfelt, L. (1993). On the nature and ethics of health promotion. An attempt at a systematic analysis. Health care analysis : HCA : journal of health philosophy and policy, 1(2), 121-130.
Title/abstract: Excluded. Not a clinical study.

Nordentoft, M., Knudsen, H. C., Jessen-Petersen, B., Krasnik, A., Saelan, H., Brodersen, A. M., et al. (1997). Copenhagen Community Psychiatric Project (CCPP): Characteristics and treatment of homeless patients in the psychiatric services after introduction of community mental health centres. Social Psychiatry and Psychiatric Epidemiology, 32(7), 369-378.
Title/abstract: Excluded. Not a clinical study.

Null, G., & Feldman, M. (2005). The benefits of going beyond conventional therapies for ADHD. Journal of Orthomolecular Medicine, 20(2), 75-88.
Full paper: Excluded. Not a clinical study

Nuttbrock, L. A., Rosenblum, A., Magura, S., Villano, C., & Wallace, J. (2004). Linking female sex workers with substance abuse treatment. Journal of Substance Abuse Treatment, 27(3), 233-239.
Title/abstract: Excluded. Wrong intervention/comparator

Oberlaender, F. A., Platz, W. E., & Mengering, F. (1995). German mental health legislation and alcoholism treatment: Results of a retrospective long-term study in a Berlin state mental health hospital. Drug and Alcohol Dependence, 40(2), 165-171.
Full paper: Excluded. Wrong outcomes

O'Brien, C., & Cornish, J. W. (2006). Naltrexone for probationers and parolees. Journal of Substance Abuse Treatment, 31(2), 107-111.
Title/abstract: Excluded. Not a clinical study.

O'Callaghan, J. (1990). Alcohol, driving and public policy: The effectiveness of mandated A.A. attendance for DWI offenders. Alcoholism Treatment Quarterly, 7(4), 87-99.
Title/abstract: Excluded. Not a clinical study.

O'Connell, D. F., & Beck, T. (1984). An involuntary therapeutic group for alcohol abusers. Journal of College Student Personnel, 25(6), 547-549.
Title/abstract: Excluded. Wrong intervention/comparator

O'Connor, C. A., Patsdaughter, C. A., Grindel, C. G., Taveira, P. F., & Steinberg, J. L. (1998). A mobile HIV education and testing program: Bringing services to hard- to-reach populations. AIDS Patient Care and STDs, 12(12), 931-937.
Title/abstract: Excluded. Wrong intervention/comparator

Ogborne, A. C. (1997). Justice System Clients of a Toronto Youth Addiction Treatment Program. The American Journal of Drug and Alcohol Abuse, 23(2), 335-341.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Olfson, M., Mechanic, D., Boyer, C. A., Hansell, S., Walkup, J., & Weiden, P. J. (1999). Assessing clinical predictions of early rehospitalization in schizophrenia. Journal of Nervous and Mental Disease, 187(12), 721-729.
Full paper: Excluded. Not a clinical study

O'Loughlin, F., & Webb, M. (1996). Controlled assessment of alcoholics admitted involuntarily to a general psychiatric hospital. Irish Journal of Psychological Medicine, 13(4), 140-143.

Title/abstract: Excluded. Wrong intervention/comparator

O'Malley, T. A., Everitt, D. E., O'Malley, H. C., & Campion, E. W. (1983). Identifying and preventing family-mediated abuse and neglect of elderly persons. Annals of Internal Medicine, 98(6), 998-1005.
Title/abstract: Excluded. Wrong intervention/comparator

O'Reilly, R. L., Komer, W., & Dunbar, S. (1999). Why are patients discharged by review boards? Canadian Journal of Psychiatry, 44(3), 259-263.
Full paper: Excluded. Not a clinical study

Orford, J., & Keddie, A. (1986). Abstinence or controlled drinking in clinical practice: A test of the dependence and persuasion hypotheses. British Journal of Addiction, 81(4), 495-504.
Title/abstract: Excluded. Wrong intervention/comparator

Ouimette, P. C., Finney, J. W., & Moos, R. H. (1997). Twelve-step and cognitive-behavioral treatment for substance abuse: A comparison of treatment effectiveness. Journal of Consulting and Clinical Psychology, 65(2), 230-240.
Title/abstract: Excluded. Wrong intervention/comparator

Owen, C., Tarantello, C., Jones, M., & Tennant, C. (1998). Violence and aggression in psychiatric units. Psychiatric Services, 49(11), 1452-1457.
Title/abstract: Excluded. Wrong intervention/comparator

Pace, J., Brown, G. R., Rundell, J. R., Paolucci, S., Drexler, K., & McManis, S. (1990). Prevalence of psychiatric disorders in a mandatory screening program for infection with human immunodeficiency virus: A pilot study. Military Medicine, 155(2), 76-80.
Title/abstract: Excluded. Wrong intervention/comparator

Padmanabhan, R. (2006). Etiology, pathogenesis and prevention of neural tube defects. Congenital Anomalies, 46(2), 55-67.
Title/abstract: Excluded. Wrong intervention/comparator

Pae, C. U., Lim, H. K., Han, C., Neena, A., Lee, C., & Patkar, A. A. (2007). Selegiline transdermal system: Current awareness and promise. Progress in Neuro-Psychopharmacology and Biological Psychiatry, 31(6), 1153-1163.
Title/abstract: Excluded. Wrong intervention/comparator

Pages, K. P., Russo, J. E., Roy-Byrne, P. P., Ries, R. K., & Cowley, D. S. (1997). Determinants of suicidal ideation: The role of substance use disorders. Journal of Clinical Psychiatry, 58(11), 510-515.
Full paper: Excluded. Not a clinical study

Pallone, N. J., & Hennessy, J. J. (2003). To Punish or to Treat: Substance Abuse within the Context of Oscillating Attitudes toward Correctional Rehabilitation. Journal of Offender Rehabilitation, vol, 37, 3-4.
Title/abstract: Excluded. Not a clinical study.

Palm, J., & Stenius, K. (2002). Sweden: Integrated compulsory treatment. European Addiction Research, 8(2), 69-77.
Title/abstract: Excluded. Not a clinical study.

Palmstierna, T., & Olsson, D. (2007). Violence from young women involuntarily admitted for severe drug abuse. Acta Psychiatrica Scandinavica, 115(1), 66-72.
Full paper: Excluded. Non-comparative studies

Pani, P. P., Pirastu, R., Ricci, A., & Gessa, G. L. (1996). Prohibition of take-home dosages: Negative consequences on methadone maintenance treatment. Drug and Alcohol Dependence, 41(1), 81-84.
Title/abstract: Excluded. Wrong intervention/comparator

Parran Jr, T. V., Weber, E., Tasse, J., Anderson, B., & Adelman, C. (1995). Mandatory toxicology testing and chemical dependence consultation follow- up in a level-one trauma center. Journal of Trauma - Injury, Infection and Critical Care, 38(2), 278-280.
Title/abstract: Excluded. Wrong intervention/comparator

Patel, F. (2001). Death on the needle syndrome. Journal of Clinical Forensic Medicine, 8(3), 166-168.
Title/abstract: Excluded. Wrong intervention/comparator

Patel, V., & Andrew, G. (2001). Gender, sexual abuse and risk behaviours in adolescents: A cross-sectional survey in schools in Goa. National Medical Journal of India, 14(5), 263-267.
Title/abstract: Excluded. Wrong intervention/comparator

Patten, C. A., Martin, J. E., & Owen, N. (1996). Can psychiatric and chemical dependency treatment units be smoke free? Journal of Substance Abuse Treatment, 13(2), 107-118.
Full paper: Excluded. Not a clinical study

Payne, S., Addyman, I., Brown, R., & West, D. (2001). The provision of addiction services in probation hostels: A new approach. Journal of Substance Use, 6(3), 183-188.
Title/abstract: Excluded. Not a clinical study.

Pea, F., Viale, P., & Furlanut, M. (2005). Antimicrobial therapy in critically ill patients: A review of pathophysiological conditions responsible for altered disposition and pharmacokinetic variability. Clinical Pharmacokinetics, 44(10), 1009-1034.
Title/abstract: Excluded. Wrong intervention/comparator

Peacock, C. (1992). International policies on alcohol-impaired driving: A review. International Journal of the Addictions, 27(2), 187-208.
Title/abstract: Excluded. Not a clinical study.

Peele, S. (1990). What works in addiction treatment and what doesn't: Is the best therapy no therapy? International Journal of the Addictions, 25(12 A), 1409-1419.
Title/abstract: Excluded. Not a clinical study.

Peele, S. (1988). Can alcoholism and other drug addiction problems be treated away or is the current treatment binge doing more harm than good? Journal of Psychoactive Drugs, 20(4), 375-383.
Title/abstract: Excluded. Not a clinical study.

Pelham, T. L., & DeJong, A. R. (1992). Nationwide practices for screening and reporting prenatal cocaine abuse: A survey of teaching programs. Child Abuse and Neglect, 16(5), 763-770.
Full paper: Excluded. Not a clinical study

Peltzer, K., Ramlagan, S., & Gliksman, L. (2006). Responsible alcoholic beverages sales and services training intervention in Cape Town: A pilot study. Journal of Psychology in Africa, 16(1), 45-52.
Title/abstract: Excluded. Wrong intervention/comparator

Pennock, M., & Poudrier, L. M. (1978). Overcoming Denial: Changing the Self-Concepts of Drunken Drivers. Journal of Studies on Alcohol, vol, 39(5), 918-925.
Title/abstract: Excluded. Wrong intervention/comparator

Penny, J. T. (1986). Spotlight on support for impaired nurses. American Journal of Nursing, 86(6), 689-691.
Title/abstract: Excluded. Wrong intervention/comparator

Pentz, M. A., Sussman, S., & Newman, T. (1997). The conflict between least harm and no-use tobacco policy for youth: Ethical and policy implications. Addiction, 92(9), 1165-1173.
Title/abstract: Excluded. Not a clinical study.

Perez-Rodriguez, M. M., Baca-Garcia, E., Quintero-Gutierrez, J., Burguillo, F., Saiz, D., Lozano, M. D. C., et al. (2005). Psychiatric care and immigration. Preliminary findings in a hospital in Madrid, Spain. European Journal of Psychiatry, 19(2), 107-111.

Title/abstract: Excluded. Wrong intervention/comparator

Perkins, M. E., & Bloch, H. I. (1971). A study of some failures in methadone treatment. American Journal of Psychiatry. Vol., 128(1), 47-51.
Title/abstract: Excluded. Wrong intervention/comparator

Perry, M., & Chew-Graham, C. (2003). Finding a vein or obtaining consent: A qualitative study of hepatitis C testing in GP methadone clinics. Family Practice, 20(5), 538-544.
Title/abstract: Excluded. Wrong intervention/comparator

Pescosolido, B. A., Monahan, J., Link, B. G., Stueve, A., & Kikuzawa, S. (1999). The public's view of the competence, dangerousness, and need for legal coercion of persons with mental health problems. American Journal of Public Health, 89(9), 1339-1345.
Title/abstract: Excluded. Wrong intervention/comparator

Peters, R. H., & Kearns, W. D. (1992). Drug abuse history and treatment needs of jail inmates. American Journal of Drug and Alcohol Abuse, 18(3), 355-366.
Title/abstract: Excluded. Wrong intervention/comparator

Petersen, T., & Stone, S. (2001). Prison injecting, methadone maintenance and the potential impact of changes in the crime (sentences) act. Journal of Substance Use, 5(4), 312-319.
Title/abstract: Excluded. Wrong intervention/comparator

Peterson, K. A., Swindle, R. W., Phibbs, C. S., Recine, B., & Moos, R. H. (1994). Determinants of readmission following inpatient substance abuse treatment: a national study of VA programs. Medical care, 32(6), 535-550.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Petrakis, I. L., O'Malley, S., Rounsaville, B., Poling, J., McHugh-Strong, C., Krystal, J. H., et al. (2004). Naltrexone augmentation of neuroleptic treatment in alcohol abusing patients with schizophrenia. Psychopharmacology, 172(3), 291-297.
Full paper: Excluded. Not a clinical study

Petrila, J. (2004). Emerging issues in forensic mental health. Psychiatric Quarterly, 75(1), 3-19.
Title/abstract: Excluded. Not a clinical study.

Petrila, J. (1995). Who will pay for involuntary civil commitment under capitated managed care? An emerging dilemma. Psychiatric Services, 46(10), 1045-1048.
Title/abstract: Excluded. Not a clinical study.

Petty, D. (2005). When should medicine-taking be compulsory? Pharmacy in Practice, 15(9), 337-339.
Title/abstract: Excluded. Not a clinical study.

Pharmakakis, N. M., Katsimpris, J. M., Melachrinou, M. P., & Koliopoulos, J. X. (2002). Corneal complications following abuse of topical anesthetics. European Journal of Ophthalmology, 12(5), 373-378.
Title/abstract: Excluded. Wrong intervention/comparator

Pincus, H. A., Page, A. E. K., Druss, B., Appelbaum, P. S., Gottlieb, G., & England, M. J. (2007). Can psychiatry cross the quality chasm? Improving the quality of health care for mental and substance use conditions. American Journal of Psychiatry, 164(5), 712-719.
Title/abstract: Excluded. Not a clinical study.

Pitre, U., Dees, S. M., Dansereau, D. F., & Simpson, D. D. (1997). Mapping techniques to improve substance abuse treatment in criminal justice settings. Journal of Drug Issues, 27(2), 431-444.
Title/abstract: Excluded. Wrong intervention/comparator

Platt, J. J., Buhringer, G., Kaplan, C. D., Brown, B. S., & Taube, D. O. (1988). The prospects and limitations of compulsory treatment for drug addiction. Journal of Drug Issues, 18(4), 505-525.
Title/abstract: Excluded. Not a clinical study.

Platt, L., Wall, M., Rhodes, T., Judd, A., Hickman, M., Johnston, L. G., et al. (2006). Methods to recruit hard-to-reach groups: Comparing two chain referral sampling methods of recruiting injecting drug users across nine studies in Russia and Estonia. Journal of Urban Health, 83(1 SUPPL.), i39-i53.
Title/abstract: Excluded. Wrong intervention/comparator

Platz, W. E., & Antonopoulou, C. (1993). The significance of the alcohol abuse in patients with antisocial personality disorder. Psychiatria Danubina, 5(1-2), 143-148.
Title/abstract: Excluded. Wrong intervention/comparator

Plaut, T. F. A., & Arons, B. S. (1994). President Clinton's proposal for health care reform: Key provisions and issues. Hospital and Community Psychiatry, 45(9), 871-876.
Title/abstract: Excluded. Wrong intervention/comparator

Podichetty, V. K., Mazanec, D. J., & Biscup, R. S. (2003). Chronic non-malignant musculoskeletal pain in older adults: Clinical issues and opioid intervention. Postgraduate Medical Journal, 79(937), 627-633.
Title/abstract: Excluded. Wrong intervention/comparator

Poikolainen, K. (1988). Alcohol-related knowledge, beliefs and attitudes among health and clerical personnel. Social Science and Medicine, 27(12), 1429-1432.
Title/abstract: Excluded. Wrong intervention/comparator

Poikolainen, K., & Saila, S. L. (1986). Drunkenness arrests: Predictors of recurrence and effect of detoxication treatment. Journal of Studies on Alcohol, 47(5), 409-412.
Title/abstract: Excluded. Wrong intervention/comparator

Polcin, D. L. (2001). Drug and alcohol offenders coerced into treatment: A review of modalities and suggestions for research on social model programs. Substance Use and Misuse, 36(5), 589-608.
Title/abstract: Excluded. Wrong intervention/comparator

Polcin, D. L., Galloway, G. P., & Greenfield, T. K. (2006). Measuring Confrontation during Recovery from Addiction. Substance Use & Misuse, vol, 41(3), 369-392.
Title/abstract: Excluded. Wrong intervention/comparator

Polcin, D. L., & Greenfield, T. K. (2003). Factors associated with probation officers' use of criminal justice coercion to mandate alcohol treatment. American Journal of Drug and Alcohol Abuse, 29(3), 647-670.
Title/abstract: Excluded. Wrong intervention/comparator

Polcin, D. L., & Weisner, C. (1999). Factors associated with coercion in entering treatment for alcohol problems. Drug and Alcohol Dependence, 54(1), 63-68.
Title/abstract: Excluded. Wrong intervention/comparator

Polonsky, S., Kerr, S., Harris, B., Gaiter, J., Fichtner, R. R., & Kennedy, M. G. (1994). HIV prevention in prisons and jails: Obstacles and opportunities. Public Health Reports, 109(5), 615-625.
Title/abstract: Excluded. Not a clinical study.

Pomerleau, O., Pertschuk, M., & Stinnett, J. (1976). A critical examination of some current assumptions in the treatment of alcoholism. Journal of Studies on Alcohol, 37(7), 849-867.
Title/abstract: Excluded. Wrong intervention/comparator

Porter, L., Curran, W. J., & Arif, A. (1986). Comparative review of reporting and registration legislation for treatment of drug and alcohol dependent persons. International Journal of Law and Psychiatry, 8(2), 217-227.
Title/abstract: Excluded. Not a clinical study.

Pound, P., Britten, N., Morgan, M., Yardley, L., Pope, C., Daker-White, G., et al. (2005). Resisting medicines: A synthesis of qualitative studies of medicine taking. Social Science and Medicine, 61(1), 133-155.
Title/abstract: Excluded. Wrong intervention/comparator

Powell Jr, H. H. (1992). Fund raising for chemical-dependency treatment programs. Fund raising management, 23(4), 32-34, 36.
Title/abstract: Excluded. Wrong intervention/comparator

Presenza, L. J. (2006). Naltrexone as a "mandate" or as a choice. Comments on "Judicially mandated naltrexone use by criminal offenders: A legal analysis". Journal of Substance Abuse Treatment, 31(2), 129-130.
Title/abstract: Excluded. Wrong intervention/comparator

Priebe, S., Fakhoury, W., Watts, J., Bebbington, P., Burns, T., Johnson, S., et al. (2003). Assertive outreach teams in London: Patient characteristics and outcomes - Pan-London Assertive Outreach Study, Part 3. British Journal of Psychiatry, 183(AUG.), 148-154.
Title/abstract: Excluded. Wrong intervention/comparator

Putkonen, H., & Vollm, B. (2007). Compulsory psychiatric detention and treatment in Finland. Psychiatric Bulletin, 31(3), 101-103.
Title/abstract: Excluded. Wrong intervention/comparator

Pyett, P. M., & Warr, D. J. (1997). Vulnerability on the streets: Female sex workers and HIV risk. AIDS Care - Psychological and Socio-Medical Aspects of AIDS/HIV, 9(5), 539-547.
Title/abstract: Excluded. Wrong intervention/comparator

Quach, L., Mayer, K., McGarvey, S. T., Lurie, M. N., & Do, P. (2005). Knowledge, attitudes, and practices among physicians on HIV/AIDS in Quang Ninh, Vietnam. AIDS Patient Care and STDs, 19(5), 335-346.
Title/abstract: Excluded. Wrong intervention/comparator

Quanbeck, C. D., Stone, D. C., McDermott, B. E., Boone, K., Scott, C. L., & Frye, M. A. (2005). Relationship between criminal arrest and community treatment history among patients with bipolar disorder. Psychiatric Services, 56(7), 847-852.
Full paper: Excluded. Not a clinical study

Quirk, A., & Lelliott, P. (2001). What do we know about life on acute psychiatric wards in the UK? A review of the research evidence. Social Science and Medicine, 53(12), 1565-1574.
Title/abstract: Excluded. Wrong intervention/comparator

Quirk, A., Rhodes, T., & Stimson, G. V. (1998). 'Unsafe protected sex': Qualitative insights on measures of sexual risk. AIDS Care - Psychological and Socio-Medical Aspects of AIDS/HIV, 10(1), 105-114.
Title/abstract: Excluded. Not a clinical study.

Qureshi, N. A., Al Amri, A. H., Abdelgadir, M. H., & El-Haraka, E. A. (1997). Trihexyphenidyl (artane) dependence: A controlled investigation between users and abusers. Annals of Saudi Medicine, 17(2), 185-190.
Full paper: Excluded. Not a clinical study

Rabinowitz, J., Mark, M., Popper, M., & Slyuzberg, M. (1996). Reported comorbidity of mental disorders with substance abuse among psychiatric inpatients in Israel. Journal of Mental Health Administration, 23(4), 471-478.
Title/abstract: Excluded. Wrong intervention/comparator

Rabinowitz, J., Slyuzberg, M., Salamon, I., Dupler, S., Kennedy, R. S., & Steinmuller, R. (1995). A method for understanding admission decision making in a psychiatric emergency room. Psychiatric Services, 46(10), 1055-1060.
Full paper: Excluded. Not a clinical study

Rabinowitz, J., Slyuzberg, M., Salamon, I., & Dupler, S. E. (1995). Differential use of admission status in a psychiatric emergency room. Bulletin of the American Academy of Psychiatry and the Law, 23(4), 595-606.
Full paper: Excluded. Wrong outcomes

Raja, M., & Azzoni, A. (2006). Tardive Priapism Associated with Clozapine: A Case Report. Pharmacopsychiatry, 39(5), 199-200.
Title/abstract: Excluded. Not a clinical study.

Rapp, L. A., Dulmus, C. N., Wodarski, J. S., & Feit, M. D. (1999). Screening of substance abuse in public welfare and child protective service clients: A comparative study of rapid assessment instruments vs. The SASSI. Journal of Addictive Diseases, 18(2), 83-88.
Title/abstract: Excluded. Wrong intervention/comparator

Rapp, R. C., Li, L., Siegal, H. A., & DeLiberty, R. N. (2003). Demographic and clinical correlates of client motivation among substance abusers. Health & social work, 28(2), 107-115.
Title/abstract: Excluded. Wrong intervention/comparator

Raskin, V. D. (1992). Maternal bereavement in the perinatal substance abuser. Journal of Substance Abuse Treatment, 9(2), 149-152.
Full paper: Excluded. Not a clinical study

Raw, S. D. (2000). Professional and legislative issues. the Behavior Therapist, 23(1), 16-17.
Title/abstract: Excluded. Not a clinical study.

Rawson, R. A., Mann, A. J., Tennant Jr, F. S., & Clabough, D. (1983). Efficacy of psychotherapeutic counselling during 21-day ambulatory heroin detoxification. NIDA research monograph, 43(-), 310-314.
Title/abstract: Excluded. Wrong intervention/comparator

Read, D. A., Thomas, C. S., & Mellsop, G. W. (1993). Suicide among psychiatric in-patients in the Wellington region. Australian and New Zealand Journal of Psychiatry, 27(3), 392-398.
Title/abstract: Excluded. Wrong intervention/comparator

Redding, R., Goldstein, N., & Arrigo, B. A. (2003). Some thoughts on JFPP: What we have accomplished and where we need to go. Journal of Forensic Psychology Practice, 3(1), 1-4.
Title/abstract: Excluded. Not a clinical study

Reid, W. H. (2001). Recognizing and dealing with impaired clinicians: Part II - Treatment options. Journal of Medical Practice Management, 17(3), 145-148.
Full paper: Excluded. Not a clinical study

Remafedi, G. (1998). The University of Minnesota Youth and AIDS Projects' Adolescent Early Intervention Program: A model to link HIV-seropositive youth with care. Journal of Adolescent Health, 23(2 SUPPL.), 115-121.
Title/abstract: Excluded. Wrong intervention/comparator

Ricciardi, S., Van Wanzeele, F., & Troisi, R. (2007). Infections and immunosuppression as specific problems in a HIV + Patient transplanted for end-stage alcoholic cirrhosis. Acta Chirurgica Belgica, 107(2), 215-218.
Title/abstract: Excluded. Wrong intervention/comparator

Ricciardi, S., Vogelaers, D., Van Wanzeele, F., Colle, I., Van Vlierberghe, H., De Hemptinne, B., et al. (2005). Specific problems in a HIV positive patient with end-stage alcoholic liver disease after liver transplantation: Infections and immunosuppression. Transplantationsmedizin: Organ der Deutschen Transplantationsgesellschaft, 17(2), 42-49.
Title/abstract: Excluded. Wrong intervention/comparator

Richardson, M. E. (1996). Rooming-in: An alternative to involuntary detention. Australian and New Zealand Journal of Psychiatry, 30(2), 263-269.
Title/abstract: Excluded. Wrong intervention/comparator

Richman, A., & Harris, P. (1985). General hospital psychiatry: Are its roles and functions adjunctive or pivotal? General Hospital Psychiatry, 7(3), 258-266.
Full paper: Excluded. Not a clinical study

Riehman, K. S., Bluthenthal, R., Juvonen, J., & Morral, A. (2003). Adolescent social relationships and the treatment process: Findings from quantitative and qualitative analyses. Journal of Drug Issues, 33(4), 865-896.
Title/abstract: Excluded. Wrong intervention/comparator

Ries, R. K., Russo, J., Wingerson, D., Snowden, M., Comtois, K. A., Srebnik, D., et al. (2000). Shorter hospital stays and more rapid improvement among patients with schizophrenia and substance disorders. Psychiatric Services, 51(2), 210-215.
Full paper: Excluded. Wrong intervention/comparator

Riley, S. (1987). The advantages of art therapy in an outpatient clinic. American Journal of Art Therapy, 26(1), 21-29.
Title/abstract: Excluded. Wrong intervention/comparator

Ristkari, T., Sourander, A., Ronning, J., & Helenius, H. (2006). Self-reported psychopathology, adaptive functioning and sense of coherence, and psychiatric diagnosis among young men: A population-based study. Social Psychiatry and Psychiatric Epidemiology, 41(7), 523-531.
Title/abstract: Excluded. Wrong intervention/comparator

Ritter, A. (2004). The 15th International Conference on the Reduction of Drug Related Harm, Melbourne, Australia, 20-24th April 2004. International Journal of Drug Policy, 15(4), 311-314.
Title/abstract: Excluded. Not a clinical study

Rittmannsberger, H. (2002). The use of drug monotherapy in psychiatric inpatient treatment. Progress in Neuro-Psychopharmacology and Biological Psychiatry, 26(3), 547-551.
Title/abstract: Excluded. Wrong intervention/comparator

Rittner, B., & Dozier, C. D. (2000). Effects of court-ordered substance abuse treatment in child protective services cases. Social work, 45(2), 131-140.
Title/abstract: Excluded. Wrong intervention/comparator

Ritvo, R. A. (1987). Coordinating in-patient and out-patient services: The need for action. Social Work in Health Care, 13(1), 39-50.
Title/abstract: Excluded. Wrong intervention/comparator

Roach, C. A. (2005). What are the odds? Random drug testing of students: a legal perspective. The Journal of school nursing : the official publication of the National Association of School Nurses, 21(3), 176-179.
Title/abstract: Excluded. Not a clinical study.

Robbins, A. (2004). Introduction to men's mental health. Journal of Men's Health and Gender, 1(4), 359-364.
Title/abstract: Excluded. Not a clinical study.

Roberts, A. R. (1987). Psychosocial characteristics of batterers: A study of 234 men charged with domestic violence offenders. Journal of Family Violence, 2(1), 81-93.
Title/abstract: Excluded. Wrong intervention/comparator

Robertson, J. A., & Schulman, J. D. (1987). Pregnancy and prenatal harm to offspring: the case of mothers with PKU. The Hastings Center report, 17(4), 23-33.
Title/abstract: Excluded. Wrong intervention/comparator

Robinson, A. E. (1989). Drug use testing: The Canadian scene. Journal of Forensic Sciences, 34(6), 1422-1432.
Title/abstract: Excluded. Not a clinical study.

Rock, M. (2001). Emerging issues with mentally ill offenders: Causes and social consequences. Administration and Policy in Mental Health, 28(3), 165-180.
Full paper: Excluded. Not a clinical study

Roehrs, T., Bonahoom, A., Pedrosi, B., Rosenthal, L., & Roth, T. (2001). Treatment regimen and hypnotic self-administration. Psychopharmacology, 155(1), 11-17.
Title/abstract: Excluded. Wrong intervention/comparator

Roman, P. M., & Trice, H. M. (1968). The Sick Role Labelling Theory, and the Deviant Drinker. INTERNATIONAL JOURNAL OF SOCIAL PSYCHIATRY, vol, 14(4), 245-251.
Title/abstract: Excluded. Not a clinical study.

Room, R. (1999). Preventing problems from psychoactive substance use. Proceedings of the Association of American Physicians, 111(2), 141-147.
Title/abstract: Excluded. Not a clinical study.

Room, R. (1989). Drugs, consciousness and self-control: Popular and medical conceptions. International Review of Psychiatry. Special Issue: Psychiatry and the addictions, 1(1-2), 63-70.
Title/abstract: Excluded. Not a clinical study.

Rootman, D. B., Mann, R. E., Ferris, L. E., Chalin, C., Adlaf, E., & Shuggi, R. (2005). Predictors of completion status in a remedial program for male convicted drinking drivers. Journal of Studies on Alcohol, 66(3), 423-427.
Title/abstract: Excluded. Wrong indication/population.

Roper, M. E. (1992). Reaching the babies through the mothers: The effects of prosecution on pregnant substance abusers. Law & Psychology Review, 16, 171-188.
Title/abstract: Excluded. Not a clinical study.

Rosen, M. I., Rosenheck, R. A., Shaner, A. L., Eckman, T. A., Gamache, G. R., & Krebs, C. W. (2002). Substance abuse and the need for money management assistance among psychiatric inpatients. Drug and Alcohol Dependence, 67(3), 331-334.
Full paper: Excluded. Not a clinical study

Rosenbaum, M. (2000). 'Just say know' to teenagers and marijuana. Journal of HIV/AIDS Prevention and Education for Adolescents and Children, 3(4), 93-105.
Title/abstract: Excluded. Not a clinical study.

Rosenbaum, S., Teitelbaum, J., Kirby, C., Priebe, L., & Klement, T. (1998). An overview of Medicaid managed care litigation. Issue brief (George Washington University. Center for Health Services Research and Policy), -(2), 1-11.
Title/abstract: Excluded. Not a clinical study.

Rosenberg, C. M., & Liftik, J. (1976). Use of coercion in the outpatient treatment of alcoholism. Journal of Studies on Alcohol, 37(1), 58-65.
Title/abstract: Excluded. Wrong intervention/comparator

Rosenberg, I. H. (1976). Absorption and malabsorption of folates. Clinics in haematology, 5(3), 589-618.
Title/abstract: Excluded. Wrong intervention/comparator

Rosenheck, R. (1995). Substance abuse and the chronically mentally ill: Therapeutic alliance and therapeutic limit-setting. Community Mental Health Journal, 31(3), 283-285.
Title/abstract: Excluded. Wrong intervention/comparator

Rosenqvist, P., & Takala, J.-P. (1987). Two Experiences with Lay Boards: The Emergence of Compulsory Treatment of Alcoholics in Sweden and Finland. Contemporary Drug Problems, vol, 14(1), 15-38.
Title/abstract: Excluded. Not a clinical study.

Rosenthal, M. P. (1988). The constitutionality of involuntary civil commitment of opiate addicts. Journal of Drug Issues, 18(4), 641-661.
Title/abstract: Excluded. Not a clinical study.

Ross-Degnan, D., Simoni-Wastila, L., Brown, J. S., Gao, X., Mah, C., Cosler, L. E., et al. (2004). A controlled study of the effects of state surveillance on indicators of problematic and non-problematic benzodiazepine use in a Medicaid population. International Journal of Psychiatry in Medicine, 34(2), 103-123.
Title/abstract: Excluded. Wrong intervention/comparator

Rotgers, F. (1992). Coercion in addictions treatment. Annual Review of Addictions Research and Treatment, 2(-), 403-416.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Rothbard, A. B., & Kuno, E. (2006). Comparison of alcohol treatment and costs after implementation of Medicaid managed care. American Journal of Managed Care, 12(5), 285-296.
Title/abstract: Excluded. Wrong intervention/comparator

Rothman, E. F., Hemenway, D., Miller, M., & Azrael, D. (2005). Batterers' use of guns to threaten intimate partners. Journal of the American Medical Women's Association (1972), 60(1), 62-68.
Title/abstract: Excluded. Wrong intervention/comparator

Rotily, M., Vernay-Vaisse, C., Bourliere, M., Galinier-Pujol, A., Rousseau, S., & Obadia, Y. (1997). HBV and HIV screening, and hepatitis B immunization programme in the prison of Marseille, France. International Journal of STD and AIDS, 8(12), 753-759.
Title/abstract: Excluded. Wrong intervention/comparator

Rotily, M., Vernay-Vaisse, C., Rousseau, S., Bourliere, M., Gallian, P., & Galinier-Pujol, A. (1999). Prevalence of HCV and HIV antibodies and related risk factors among entrants to the main southeastern French prison. Clinical Microbiology and Infection, 5(12), 733-739.
Title/abstract: Excluded. Wrong intervention/comparator

Rudoy, N. M. (1997). Tuberculosis and alcoholism. Seminars in Respiratory and Critical Care Medicine, 18(5), 503-508.
Title/abstract: Excluded. Wrong intervention/comparator

Rumrill P.D, Jr., Szirony, G. M., & Hickin, A. M. (1998). Correlates of work interference scores on the MMPI-2 among participants in residential substance abuse treatment. Work, 10(3), 235-241.
Title/abstract: Excluded. Wrong intervention/comparator

Rund, D. A. (1984). Attitudes of the emergency physician toward and diagnostic evaluation of suicide attempters. Death Education. Special Issue: Suicide--practical, developmental, and speculative issues, 8(Suppl), 1-16.
Title/abstract: Excluded. Wrong intervention/comparator

Rush, B. R., & Wild, T. C. (2003). Substance abuse treatment and pressures from the criminal justice system: Data from a provincial client monitoring system. Addiction, 98(8), 1119-1128.
Title/abstract: Excluded. Wrong intervention/comparator

Rybakowski, J. K., Volpicelli, J. R., & Ziolkowski, M. (1999). Drinking relapse in male alcoholics during treatment with naltrexone, lithium or carbamazepine [Electronic Version]. 152nd Annual Meeting of the American Psychiatric Association. Washington DC, USA. 15-20th May, 1999. from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/207/CN-00284207/frame.html

Sachs, D. P. L. (1986). Cigarette smoking. Health effects and cessation strategies. Clinics in Geriatric Medicine, 2(2), 337-362.
Title/abstract: Excluded. Not a clinical study.

Sallmen, B., Berglund, M., & Bokander, B. (1998). Perceived coercion related to psychiatric comorbidity and locus of control in institutionalized alcoholics. Medicine and Law, 17(3), 381-391.
Title/abstract: Excluded. Wrong intervention/comparator

Sallmen, B., Nilsson, L., & Berglund, M. (1997). Psychiatric comorbidity in alcoholics treated at an institution with both coerced and voluntary admission. European Psychiatry, 12(7), 329-334.
Title/abstract: Excluded. Not a clinical study.

Salmon, R. W., & Salmon, R. J. (1983). The role of coercion in rehabilitation of drug abusers. International Journal of the Addictions, 18(1), 9-21.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Samsioe, G., & Abreg, A. (1996). Ethical issues in obstetrics. International Journal of Fertility and Menopausal Studies, 41(3), 284-287.
Title/abstract: Excluded. Not a clinical study.

Sanguineti, V. R., & Brooks, M. O. (1992). Factors related to emergency commitment of chronic mentally ill patients who are substance abusers. Hospital and Community Psychiatry, 43(3), 237-241.
Full paper: Excluded. Not a clinical study

Sanguineti, V. R., Samuel, S. E., Schwartz, S. L., & Robeson, M. R. (1996). Gender differences among civilly committed schizophrenia subjects. Schizophrenia Bulletin, 22(4), 653-658.
Full paper: Excluded. Not a clinical study

Sanguineti, V. R., Samuel, S. E., Schwartz, S. L., & Robeson, M. R. (1996). Retrospective study of 2,200 involuntary psychiatric admissions and readmissions. American Journal of Psychiatry, 153(3), 392-396.
Full paper: Excluded. Not a clinical study

Santelli, J., Ott, M. A., Lyon, M., Rogers, J., Summers, D., & Schleifer, R. (2006). The Authors Reply. Journal of Adolescent Health, 39(2), 152-154.
Title/abstract: Excluded. Not a clinical study

Sarchielli, P., Pedini, M., Alberti, A., Rossi, C., Baldi, A., Corbelli, I., et al. (2005). Application of ICHD 2nd edition criteria for primary headaches with the aid of a computerised, structured medical record for the specialist. Journal of Headache and Pain, 6(4), 205-210.
Title/abstract: Excluded. Wrong intervention/comparator

Saxon, A. J., Calsyn, D. A., Kivlahan, D. R., & Roszell, D. K. (1993). Outcome of contingency contracting for illicit drug use in a methadone maintenance program. Drug and Alcohol Dependence, 31(3), 205-214.
Title/abstract: Excluded. Wrong intervention/comparator

Sayre, J. (2000). The patient's diagnosis: Explanatory models of mental illness. Qualitative Health Research, 10(1), 71-83.
Title/abstract: Excluded. Wrong intervention/comparator

Schedler, G. (1992). Forcing Pregnant Drug Addicts to Abort: Rights-Based and Utilitarian Justifications. Social Theory and Practice, vol, 18(3), 347-358.
Title/abstract: Excluded. Not a clinical study.

Scheller-Gilkey, G., Woolwine, B. J., Cooper, I., Gay, O., Moynes, K. A., & Miller, A. H. (2003). Relationship of clinical symptoms and substance use in schizophrenia patients on conventional versus atypical antipsychotics. American Journal of Drug and Alcohol Abuse, 29(3), 553-566.
Full paper: Excluded. Not a clinical study

Schenck, C. H., Hurwitz, T. D., Bundlie, S. R., & Mahowald, M. W. (1991). Sleep-related eating disorders: Polysomnographic correlates of a heterogeneous syndrome distinct from daytime eating disorders. Sleep, 14(5), 419-431.
Full paper: Excluded. Not a clinical study

Schichor, A., Beck, A., Bernstein, B., & Crabtree, B. (1990). Seat belt use and stress in adolescents. Adolescence, 25(100), 773-779.
Title/abstract: Excluded. Wrong intervention/comparator

Schiller, M. J., Shumway, M., & Batki, S. L. (2000). Utility of routine drug screening in a psychiatric emergency setting. Psychiatric Services, 51(4), 474-478.
Title/abstract: Excluded. Wrong intervention/comparator

Schmidt, L., & Weisner, C. (1993). Developments in alcoholism treatment. Recent developments in alcoholism : an official publication of the American Medical Society on Alcoholism, the Research Society on Alcoholism, and the National Council on Alcoholism, 11(-), 369-396.
Title/abstract: Excluded. Not a clinical study.

Schonberg, S. K., Beach, R. K., Brookman, R. R., Felice, M. E., Greene, J. W., McAnarney, E., et al. (1989). Screening for drugs of abuse in children and adolescents. Pediatrics, 84(2), 396-398.
Full paper: Excluded. Not a clinical study

Schottenfeld, R. S. (1989). Involuntary treatment of substance abuse disorders - Impediments to success. Psychiatry, 52(2), 164-176.
Title/abstract: Excluded. Not a clinical study.

Schramm, C. J., & DeFillippi, R. J. (1975). Characteristics of successful alcoholism treatment programs for American workers. British Journal of Addiction, 70(3), 271-275.
Title/abstract: Excluded. Not a clinical study.

Schuepbach, D., Goetz, I., Boeker, H., & Hell, D. (2006). Voluntary vs. involuntary hospital admission in acute mania of bipolar disorder: Results from the Swiss sample of the EMBLEM study. Journal of Affective Disorders, 90(1), 57-61.
Full paper: Excluded. Not a clinical study

Schumacher, J. A., Feldbau-Kohn, S., Smith Slep, A. M., & Heyman, R. E. (2001). Risk factors for male-to-female partner physical abuse. Aggression and Violent Behavior, 6(2-3), 281-352.
Title/abstract: Excluded. Wrong intervention/comparator

Schwartz, I. M. (1989). Hospitalization of adolescents for psychiatric and substance abuse treatment. Legal and ethical issues. Journal of Adolescent Health Care, 10(6), 473-478.
Full paper: Excluded. Not a clinical study

Schwartz, R. H., Hoffmann, N. G., & Jones, R. (1987). Behavioral, psychosocial, and academic correlates of marijuana usage in adolescence: A study of a cohort under treatment. Clinical Pediatrics. Special Issue: Developmental and behavioral disorders, 26(5), 264-270.
Title/abstract: Excluded. Wrong intervention/comparator

Scott, C. L., & Resnick, P. J. (2006). Violence risk assessment in persons with mental illness. Aggression and Violent Behavior, 11(6), 598-611.
Full paper: Excluded. Not a clinical study

Scott, D. M., & Friedli, D. (2002). Attendance problems and disciplinary procedures in Nebraska schools. Journal of Drug Education, 32(2), 149-165.
Title/abstract: Excluded. Wrong intervention/comparator

Seal, D. W., Kelly, J. A., Bloom, F. R., Stevenson, L. Y., Coley, B. I., & Broyles, L. A. (2000). HIV prevention with young men who have sex with men: What young men themselves say is needed. AIDS Care - Psychological and Socio-Medical Aspects of AIDS/HIV, 12(1), 5-26.

Title/abstract: Excluded. Wrong intervention/comparator

Sebba, L., & Ehrenfeld, R. (1982). Compulsory treatment for drug offenders under Israeli law. A research note. Medicine and Law, 1(1), 109-111.
Title/abstract: Excluded. Not a clinical study.

Seblova, J., Polanecky, V., Sejda, J., & Studnickova, B. (2005). Trends in substance abuse by teenagers in the Czech Republic. Journal of Emergency Medicine, 28(1), 95-100.
Title/abstract: Excluded. Not a clinical study.

Segal, B. M. (1975). Drinking and alcoholism in Russia. Psychiatric Opinion, 12(9), 21-29.
Title/abstract: Excluded. Not a clinical study.

Segraeus, V., Broekaert, E., Oberg, D., Sallmen, B., Soyez, V., Haack, M. J., et al. (2004). Implementing ASI and other instruments to professionalize treatment across national borders: Experience from the IPTRP project. Journal of Substance Use, 9(3-4), 132-140.
Title/abstract: Excluded. Not a clinical study.

Semlitz, L., & Gold, M. S. (1986). Adolescent drug abuse. Diagnosis, treatment, and prevention. Psychiatric Clinics of North America, 9(3), 455-473.
Title/abstract: Excluded. Not a clinical study.

Sener, A. I., Ceylan, M. E., & Koyuncuoglu, H. (1986). Comparison of the suppressive effects of L-aspartic acid and chlorpromazine + diazepam treatments on opiate abstinence syndrome signs in men. Arzneimittel-Forschung/Drug Research, 36(11), 1684-1686.
Title/abstract: Excluded. Wrong intervention/comparator

Sengupta, D. K., & Herkowitz, H. N. (2003). Lumbar spinal stenosis: Treatment strategies and indications for surgery. Orthopedic Clinics of North America, 34(2), 281-295.
Title/abstract: Excluded. Wrong intervention/comparator

Sensky, T., Hughes, T., & Hirsch, S. (1991). Compulsory psychiatric treatment in the community. II. A controlled study of patients whom psychiatrists would recommended for compulsory treatment in the community. British Journal of Psychiatry, 158(JUNE), 799-804.
Title/abstract: Excluded. Wrong intervention/comparator

Sereny, G., Charma, V., Holt, J., & Gordis, E. (1986). Mandatory supervised antabuse therapy in an outpatient alcoholism program: A pilot study. Alcoholism: Clinical and Experimental Research, 10(3), 290-292.
Title/abstract: Excluded. Wrong intervention/comparator

Serper, M. R., Goldberg, B. R., Herman, K. G., Richarme, D., Chou, J., Dill, C. A., et al. (2005). Predictors of aggression on the psychiatric inpatient service. Comprehensive Psychiatry, 46(2), 121-127.
Full paper: Excluded. Not a clinical study

Shamoo, A. E., & Moreno, J. D. (2004). Ethics of research involving mandatory drug testing of high school athletes in Oregon. The American journal of bioethics : AJOB, 4(1), 25-31.
Title/abstract: Excluded. Wrong intervention/comparator

Shapshak, P., Duncan, R., Nath, A., Turchan, J., Kangueane, P., Rodriguez, H., et al. (2006). Gene chromosomal organization and expression in cultured human neurons exposed to cocaine and HIV-1 proteins gp120 and tat: Drug abuse and NeuroAIDS. Frontiers in Bioscience, 11(2 P.1591-2006), 1774-1793.
Title/abstract: Excluded. Wrong intervention/comparator

Shearer, R. A. (2000). Coerced Substance Abuse Counseling Revisited. Journal of Offender Rehabilitation, vol, 30, 3-4.
Title/abstract: Excluded. Wrong intervention/comparator

Shearer, R. A., & Ogan, G. D. (2002). Voluntary participation and treatment resistance in substance abuse treatment programs. Journal of Offender Rehabilitation, 34(3), 31-45.
Title/abstract: Excluded. Wrong indication/population.

Shillington, A. M., & Clapp, J. D. (2003). Adolescents in Public Substance Abuse Treatment Programs: The Impacts of Sex and Race on Referrals and Outcomes. Journal of Child & Adolescent Substance Abuse, 12(4), 69-91.
Title/abstract: Excluded. Wrong intervention/comparator

Shillington, A. M., Hohman, M., & Jones, L. (2001). Women in substance use treatment: Are those also involved in the child welfare system different? Journal of Social Work Practice in the Addictions, 1(4), 25-46.
Title/abstract: Excluded. Wrong intervention/comparator

Shimamura, A. P., & Squire, L. R. (1986). Memory and metamemory: a study of the feeling-of-knowing phenomenon in amnesic patients. Journal of experimental psychology. Learning, memory, and cognition, 12(3), 452-460.
Title/abstract: Excluded. Wrong intervention/comparator

Shimomura, T., Mori, E., Hirono, N., Imamura, T., & Yamashita, H. (1998). Development of Wernicke-Korsakoff syndrome after long intervals following gastrectomy. Archives of Neurology, 55(9), 1242-1245.
Title/abstract: Excluded. Wrong intervention/comparator

Sia, T. L., Dansereau, D. F., & Czuchry, M. L. (2000). Treatment readiness training and probationers' evaluation of substance abuse treatment in a criminal justice setting. Journal of Substance Abuse Treatment, 19(4), 459-467.
Title/abstract: Excluded. Wrong intervention/comparator

Siddall, J. W., & Conway, G. L. (1988). Interactional variables associated with retention and success in residential drug treatment. International Journal of the Addictions, 23(12), 1241-1254.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Silber, T. J. (1989). Justified paternalism in adolescent health care. Cases of anorexia nervosa and substance abuse. Journal of Adolescent Health Care, 10(6), 449-453.
Title/abstract: Excluded. Not a clinical study.

Sillanaukee, P., Kaariainen, J., Sillanaukee, P., Poutanen, P., & Seppa, K. (2002). Substance use-related outpatient consultations in specialized health care: An underestimated entity. *Alcoholism: Clinical and Experimental Research, 26*(9), 1359-1364.
Title/abstract: Excluded. Wrong intervention/comparator

Simo, R., & French, G. (2006). The use of prophylactic antibiotics in head and neck oncological surgery. Current Opinion in Otolaryngology and Head and Neck Surgery, 14(2), 55-61.
Title/abstract: Excluded. Wrong intervention/comparator

Simons-Morton, B. G., Donohew, L., & Crump, A. D. (1997). Health communication in the prevention of alcohol, tobacco, and drug use. Health education & behavior : the official publication of the Society for Public Health Education, 24(5), 544-554.
Title/abstract: Excluded. Not a clinical study.

Sloan, E. P., McGill, B. A., Zalenski, R., Tsui, P., Chen, E. H., Duda, J., et al. (1995). Human immunodeficiency virus and hepatitis B virus seroprevalence in an urban trauma population. Journal of Trauma - Injury, Infection and Critical Care, 38(5), 736-741.
Title/abstract: Excluded. Wrong intervention/comparator

Sloan, P. A., Montgomery, C., & Musick, D. (1998). Medical student knowledge of morphine for the management of cancer pain. Journal of Pain and Symptom Management, 15(6), 359-364.
Title/abstract: Excluded. Wrong intervention/comparator

Smart, R. G. (1974). Employed alcoholics treated voluntarily and under constructive coercion. A follow-up study. Quarterly journal of studies on alcohol, 35(1), 196-209.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Smith, E. (2003). HIV/AIDS surveillance in Denmark: The challenges ahead. Journal of Acquired Immune Deficiency Syndromes, 32(SUPPL. 1), S33-S38.
Title/abstract: Excluded. Wrong intervention/comparator

Smith, M. Y., & Woody, G. (2005). Nonmedical use and abuse of scheduled medications prescribed for pain, pain-related symptoms, and pssychiatric disorders: Patterns, user characteristics, and management options. Current Psychiatry Reports, 7(5), 337-343.
Title/abstract: Excluded. Wrong intervention/comparator

Smith, S. R. (1994). The legal liabilities of mental health institutions. Administration and Policy in Mental Health, 21(5), 379-394.
Full paper: Excluded. Not a clinical study

Smith, W. G., Collings, A., & Degraaf, A. (2004). Young people admitted on a Form 1 to a general hospital: A worrisome trend. Paediatrics and Child Health, 9(4), 228-234.
Full paper: Excluded. Wrong outcomes

Snow, D. L., Sullivan, T. P., Swan, S. C., Tate, D. C., & Klein, I. (2006). The role of coping and problem drinking in men's abuse of female partners: Test of a path model. Violence and Victims, 21(3), 267-285.
Title/abstract: Excluded. Wrong intervention/comparator

Sobell, L. C., & Sobell, M. B. (1978). Validity of self-reports in three populations of alcoholics. Journal of Consulting and Clinical Psychology, 46(5), 901-907.
Title/abstract: Excluded. Wrong intervention/comparator

Sobell, M. B., Sobell, L. C., & VanderSpek, R. (1979). Relationship between clinical judgment, self-report, and breath-analysis measures of intoxication in alcoholics. Journal of Consulting and Clinical Psychology, 47(1), 204-206.
Title/abstract: Excluded. Wrong intervention/comparator

Soden, E. W. (1975). The probation officer and the alcoholic client. Journal of Drug Issues, 5(3), 242-247.
Title/abstract: Excluded. Wrong intervention/comparator

Soderlund, C. (1986). Denver peritoneovenous shunting for malignant or cirrhotic ascites. A prospective consecutive series. Scandinavian Journal of Gastroenterology, 21(10), 1161-1172.
Title/abstract: Excluded. Wrong intervention/comparator

Soderlund, C. (1985). Endoscopic sclerotherapy of oesophageal varices. A clinical study. Acta Chirurgica Scandinavica, 151(SUPPL. 524), 7-86.
Title/abstract: Excluded. Wrong intervention/comparator

Soliman, A. E. D., & Reza, H. (2001). Risk factors and correlates of violence among acutely ill adult psychiatric inpatients. Psychiatric Services, 52(1), 75-80.
Title/abstract: Excluded. Wrong intervention/comparator

Solursh, L. P., & Solursh, D. S. (1996). Sentencing diversion programs for A and D-improving their imperiled future. Medicine and Law, 15(2), 325-328.
Title/abstract: Excluded. Not a clinical study.

Soothill, K., Kupituksa, P., Badiani, D., & Macmillan, F. (1990). Compulsory Admissions to Mental Hospitals: A Replication Study. International Journal of Law and Psychiatry, vol, 13(3), 179-190.
Title/abstract: Excluded. Wrong intervention/comparator

Sottas, P. E., Robinson, N., Giraud, S., Taroni, F., Kamber, M., Mangin, P., et al. (2006). Statistical classification of abnormal blood profiles in athletes. International Journal of Biostatistics, 2(1).
Title/abstract: Excluded. Wrong intervention/comparator

Sowards, K. A., O'Boyle, K., & Weissman, M. (2006). Inspiring Hope, Envisioning Alternatives: The Importance of Peer Role Models in a Mandated Treatment Program for Women. Journal of Social Work Practice in the Addictions, vol, 6(4), 55-70.
Title/abstract: Excluded. Wrong intervention/comparator

Sowers, W. E., & Daley, D. C. (1993). Compulsory treatment of substance use disorders. Criminal Behaviour and Mental Health, 3(4), 403-415.
Title/abstract: Excluded. Not a clinical study.

Spada, E., Mele, A., Ciccozzi, M., Tosti, M. E., Bianco, E., Szklo, A., et al. (2001). Changing epidemiology of parenterally transmitted viral hepatitis: Results from the hepatitis surveillance system in Italy. Digestive and Liver Disease, 33(9), 778-784.
Title/abstract: Excluded. Wrong intervention/comparator

Spanbauer, A. C., Casseday, S., Davoudzadeh, D., Preston, K. L., & Huestis, M. A. (2001). Detection of opiate use in a methadone maintenance treatment population with the CEDIA(registered trademark) 6-acetylmorphine and CEDIA DAU opiate assays. Journal of Analytical Toxicology, 25(7), 515-519.
Title/abstract: Excluded. Wrong intervention/comparator

Speckart, G., & Anglin, M. D. (1986). Narcotics Use and Crime: An Overview of Recent Research Advances. Contemporary Drug Problems, vol, 13(4), 741-769.
Title/abstract: Excluded. Wrong intervention/comparator

Speiglman, R. (1994). Mandated AA Attendance for Recidivist Drinking Drivers: Ideology, Organization, and California Criminal Justice Practices. Addiction, vol, 89(7), 859-868.
Title/abstract: Excluded. Wrong intervention/comparator

Speiglman, R., Klein, D., Miller, R., & Noble, A. (2003). Early implementation of Proposition 36: Criminal justice and treatment system issues in eight counties. Journal of Psychoactive Drugs, 35(Suppl 1), 133-141.
Title/abstract: Excluded. Not a clinical study.

Spence, J. C., & Gauvin, L. (1996). Drug and Alcohol Use by Canadian University Athletes: A National Survey. Journal of Drug Education, vol, 26(3), 275-287.
Title/abstract: Excluded. Wrong intervention/comparator

Spies, C. D., Emadi, A., Neumann, T., Hannemann, L., Rieger, A., Schaffartzik, W., et al. (1995). Relevance of carbohydrate-deficient transferrin as a predictor of alcoholism in intensive care patients following trauma. Journal of Trauma - Injury, Infection and Critical Care, 39(4), 742-748.
Title/abstract: Excluded. Wrong intervention/comparator

Spittle, B. (1991). The effect of financial management on alcohol-related hospitalization. American Journal of Psychiatry, 148(2), 221-223.
Full paper: Excluded. Wrong intervention/comparator

Squirrel, G. (2007). Seeking desistance in the community: Drug user's experience of the criminal justice system. Therapeutic Communities: the International Journal for Therapeutic and Supportive Organizations, 28(1), 59-73.
Title/abstract: Excluded. Not a clinical study.

St. Lawrence, J. S., Jefferson, K. W., Banks, P. G., Cline, T. R., Alleyne, E., & Brasfield, T. L. (1994). Cognitive-behavioral group intervention to assist substance-dependent adolescents in lowering HIV infection risk. AIDS Education and Prevention, 6(5), 425-435.
Title/abstract: Excluded. Wrong intervention/comparator

Stalans, L. J., & Seng, M. (2007). Identifying subgroups at high risk of dropping out of domestic batterer treatment: The buffering effects of a high school education. International Journal of Offender Therapy and Comparative Criminology, 51(2), 151-169.
Title/abstract: Excluded. Wrong intervention/comparator

Stark, M. J., & Campbell, B. K. (1988). Personality, drug use, and early attrition from substance abuse treatment. American Journal of Drug and Alcohol Abuse, 14(4), 475-485.
Title/abstract: Excluded. Wrong intervention/comparator

Stefansson, C. G., & Cullberg, J. (1986). Introducing community mental health services. The effects on a suburban patient population. Acta Psychiatrica Scandinavica, 74(4), 368-378.
Title/abstract: Excluded. Wrong intervention/comparator

Stein, M. D., Flanigan, T. P., Carpenter, C. C. J., Jesdale, W., Bettencourt, F., Fiore, R. N. P. T., et al. (1993). The changing presentation of HIV disease in women in Rhode Island. Journal of Women's Health, 2(4), 367-371.
Title/abstract: Excluded. Wrong intervention/comparator

Steiner, C., Lezotte, D., & Gabow, P. (1995). Court-ordered alcohol treatment for patients with medical problems. American journal on addictions, 4(2), 127-132.
Title/abstract: Included
Full paper: Excluded. Non-comparative studies

Stephenson, M. T. (2003). Mass Media Strategies Targeting High Sensation Seekers: What Works and Why. American Journal of Health Behavior, 27(SUPPL. 3), S233-S238.
Title/abstract: Excluded. Wrong intervention/comparator

Stevens, A., Berto, D., Frick, U., Hunt, N., Kerschl, V., McSweeney, T., et al. (2006). The relationship between legal status, perceived pressure and motivation in treatment for drug dependence: Results from a European study of Quasi-Compulsory treatment. European Addiction Research, 12(4), 197-209.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Stevens, A., Berto, D., Heckmann, W., Kerschl, V., Oeuvray, K., van Ooyen, M., et al. (2005). Quasi-Compulsory Treatment of Drug Dependent Offenders: An International Literature Review. Substance Use & Misuse, 40(3), 269-283.
Title/abstract: Excluded. Wrong indication/population.
Full paper: Excluded. Not a clinical study.

Stevens, A., McSweeney, T., Van Ooyen, M., & Uchtenhagen, A. (2005). On coercion. International Journal of Drug Policy, 16(4), 207-209.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Stivers, C. (1994). Grassroots efforts pursue alcohol policy reform: Refocusing upstream in New Mexico. American Journal of Health Promotion, 9(2), 125-136.
Title/abstract: Excluded. Not a clinical study.

Strain, J. J., Taintor, Z., Gise, L. H., & Spikes, J. (1985). Informed consent: Mandating the consultation. General Hospital Psychiatry, 7(3), 228-233.
Title/abstract: Excluded. Wrong intervention/comparator

Strauss, S. M., & Falkin, G. P. (2001). The first week after drug treatment: The influence of treatment on drug use among women offenders. American Journal of Drug and Alcohol Abuse, 27(2), 241-264.
Title/abstract: Excluded. Wrong intervention/comparator

Strauss, S. M., & Falkin, G. P. (2001). Social support systems of women offenders who use drugs: A focus on the mother-daughter relationship. American Journal of Drug and Alcohol Abuse, 27(1), 65-89.
Title/abstract: Excluded. Wrong intervention/comparator

Striegel, H., Vollkommer, G., Horstmann, T., & Niess, A. M. (2005). Contaminated nutritional supplements - Legal protection for elite athletes who tested positive: A case report from Germany. Journal of Sports Sciences, 23(7), 723-726.
Title/abstract: Excluded. Not a clinical study.

Strike, C., Myers, T., Calzavara, L., & Haubrich, D. (2001). Sexual coercion among young street-involved adults: Perpetrators' and victims' perspectives. Violence and Victims, 16(5), 537-551.
Title/abstract: Excluded. Wrong intervention/comparator

Stroffolini, T., Mele, A., Tosti, M. E., Gallo, G., Balocchini, E., Ragni, P., et al. (2000). The impact of the hepatitis B mass immunisation campaign on the incidence and risk factors of acute hepatitis B in Italy. Journal of Hepatology, 33(6), 980-985.
Title/abstract: Excluded. Wrong intervention/comparator

Stuart, B., & Fahlman, C. (1999). Outcomes of prospective drug-use review of beta-agonist inhaler use in an elderly Medicaid population. Clinical Therapeutics, 21(12), 2094-2112.
Title/abstract: Excluded. Wrong intervention/comparator

Stuart, G. L., Moore, T. M., Kahler, C. W., & Ramsey, S. E. (2003). Substance abuse and relationship violence among men court-referred to batterers' intervention programs. Substance Abuse, 24(2), 107-122.
Title/abstract: Excluded. Wrong intervention/comparator

Stuart, G. L., Moore, T. M., Kahler, C. W., Ramsey, S. E., & Strong, D. (2005). Cigarette Smoking, Alcohol Use and Psychiatric Functioning among Women Arrested for Domestic Violence. The American Journal on Addictions, 14(2), 188-190.
Title/abstract: Excluded. Wrong intervention/comparator

Stuart, G. L., Moore, T. M., Kahler, C. W., Ramsey, S. E., & Strong, D. (2004). Cigarette Smoking and Substance Use among Men Court-Referred to Domestic Violence Treatment Programs. The American Journal on Addictions, 13(3), 319-320.
Title/abstract: Excluded. Wrong intervention/comparator

Suchinsky, R. T. (2002). Reply: Responsibility and addiction. Psychiatric Services, 53(10), 1328.
Title/abstract: Excluded. Not a clinical study.

Sudnow, D. (1968). Dead on Arrival. New Society, vol, 11(280), 187-189.
Title/abstract: Excluded. Not a clinical study.

Sullivan, A. P., & Guglielmo, R. (1986). The practice of prevention in the New York city public schools. International Journal of the Addictions, 21(11), 1145-1155.
Title/abstract: Excluded. Wrong intervention/comparator

Sung, H. E., Belenko, S., Feng, L., & Tabachnick, C. (2004). Predicting treatment noncompliance among criminal justice-mandated clients: A theoretical and empirical exploration. Journal of Substance Abuse Treatment, 26(1), 315-328.
Title/abstract: Excluded. Wrong intervention/comparator

Sung, H.-E., Belenko, S., & Feng, L. (2001). Treatment Compliance in the Trajectory of Treatment Progress among Offenders. Journal of Substance Abuse Treatment, vol, 20(2), 153-162.
Title/abstract: Excluded. Wrong intervention/comparator

Sutherland, R. (1992). Mandatory drug testing: Boon for public safety or launch of a witch-hunt? Canadian Medical Association Journal, 146(7), 1215-1220.
Title/abstract: Excluded. Wrong intervention/comparator

Sutker, P. B. (1974). Personality characteristics of heroin addicts: A response to Gendreau and Gendreau. Journal of Abnormal Psychology, 83(4), 463-464.
Title/abstract: Excluded. Not a clinical study.

Sutker, P. B., & Allain, A. N. (1981). Comments on voluntarism: Reply to Penk and Robinowitz. Journal of Abnormal Psychology, 90(2), 175-176.
Title/abstract: Excluded. Not a clinical study.

Sutker, P. B., Archer, R. P., & Allain, A. N. (1979). Voluntarism and self-reported psychopathology among opiate addicts. Journal of Abnormal Psychology, 88(1), 59-67.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Swanson, J., Borum, R., Swartz, M., & Hiday, V. (1999). Violent behavior preceding hospitalization among persons with severe mental illness. Law and Human Behavior, 23(2), 185-204.
Full paper: Excluded. Wrong intervention/comparator

Swanson, J. W., Swartz, M. S., Borum, R., Hiday, V. A., Wagner, H. R., & Burns, B. J. (2000). Involuntary out-patient commitment and reduction of violent behaviour in persons with severe mental illness. British Journal of Psychiatry, 176(APR.), 324-331.
Full paper: Excluded. Wrong intervention/comparator

Swanson, J. W., Van Dorn, R. A., Monahan, J., & Swartz, M. S. (2006). Violence and leveraged community treatment for persons with mental disorders. American Journal of Psychiatry, 163(8), 1404-1411.
Full paper: Excluded. Wrong intervention/comparator

Swartz, J. A., Campbell, K., Baumohl, J., & Tonkin, P. (2003). Drug treatment participation and retention rates among former recipients of Supplemental Security Income for drug addiction and alcoholism. Contemporary Drug Problems, 30(1-2), 335-364.
Title/abstract: Excluded. Wrong intervention/comparator

Swartz, M. S. (2007). Can mandated outpatient treatment prevent tragedies? *Psychiatric Services, 58*(6), 739.
Title/abstract: Excluded. Wrong intervention/comparator

Swartz, M. S., Swanson, J. W., Hiday, V. A., Borum, R., Wagner, R., & Burns, B. J. (1998). Taking the wrong drugs: The role of substance abuse and medication noncompliance in violence among severely mentally ill individuals. Social Psychiatry and Psychiatric Epidemiology, 33(SUPPL. 1), S75-S80.
Full paper: Excluded. Wrong intervention/comparator

Swartz, M. S., Swanson, J. W., Hiday, V. A., Wagner, H. R., Burns, B. J., & Borum, R. (2001). A randomized controlled trial of outpatient commitment in north carolina. Psychiatric Services, 52(3), 325-329.
Full paper: Excluded. Wrong intervention/comparator

Swartz, M. S., Swanson, J. W., Kim, M., & Petrila, J. (2006). Use of outpatient commitment or related civil court treatment orders in five U.S. communities. Psychiatric Services, 57(3), 343-349.
Title/abstract: Excluded. Wrong intervention/comparator

Swartz, M. S., Wagner, H. R., Swanson, J. W., Hiday, V. A., & Burns, B. J. (2002). The perceived coerciveness of involuntary outpatient commitment: Findings from an experimental study. Journal of the American Academy of Psychiatry and the Law, 30(2), 207-217.
Title/abstract: Excluded. Wrong intervention/comparator

Swenson, P. R., Struckman-Johnson, D. L., Ellingstad, V. S., Clay, T. R., & Nichols, J. L. (1981). Results of a longitudinal evaluation of court-mandated DWI treatment programs in Phoenix, Arizona

[Electronic Version]. Journal of Studies on Alcohol, 642-653 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/682/CN-00508682/frame.html

Swihart, J. J., Borek, T., & Schumm, W. R. (1983). Psychosocial factors associated with the adjustment of basic trainees in the U.S. army. Psychological Reports, 52(3), 757-758.
Full paper: Excluded. Not a clinical study

Takala, J.-P. (1986). Ideas and Organizations: Notes on the Finnish Alcoholics Act of 1936. Contemporary Drug Problems, vol, 13(3), 527-554.
Title/abstract: Excluded. Not a clinical study.

Tamborini-Martin, S., Vachon, D. O., & Hanley, K. V. (1988). Substance abuse in the workplace: creating a responsible policy. Health progress (Saint Louis, Mo.), 69(9), 30-35.
Title/abstract: Excluded. Not a clinical study.

Tammaro, G. F., Garrone, S., Pelliccia, S., & Budini, M. (1986). Epidemic of AIDS related virus (HTLV-III/LAV) infection among drug abusers. A study in an Italian prison. European Review for Medical and Pharmacological Sciences, 8(4), 361-364.
Title/abstract: Excluded. Wrong intervention/comparator

Tang, C., Liu, J., Chang, C., & Chang, W. (2007). Willingness to pay for drug abuse treatment: Results from a contingent valuation study in Taiwan. *Health Policy, 82*(2), 251-262.

Tang, Y., Wiste, A., Mao, P., & Hou, Y. (2005). Attitudes, knowledge, and perceptions of Chinese doctors toward drug abuse. *Journal of Substance Abuse Treatment, 29*(3), 215-220.

Taslitz, A. E. (2002). A feminist Fourth Amendment?: Consent, care, privacy, and social meaning in Ferguson v. City of Charleston. Duke journal of gender law & policy, 9(-), 1-79.
Title/abstract: Excluded. Wrong intervention/comparator

Teaster, P. B., Lawrence, S. A., & Cecil, K. A. (2007). Elder abuse and neglect. Aging Health, 3(1), 115-128.
Title/abstract: Excluded. Wrong intervention/comparator

Teck-Hong, O. (1989). A group approach to aftercare service for drug supervisees. International Social Work, 32(2), 139-143.
Title/abstract: Excluded. Wrong intervention/comparator

Teich, J. L., & Ireys, H. T. (2007). A national survey of state licensing, regulating, and monitoring of residential facilities for children with mental illness. Psychiatric Services, 58(7), 991-998.
Title/abstract: Excluded. Wrong intervention/comparator

Tennant, F. S. (1986). The clinical syndrome of marijuana dependence. Psychiatric Annals, 16(4), 225-234.
Title/abstract: Excluded. Wrong intervention/comparator

Tenney, L. J. (2000). It has to be about choice. Journal of Clinical Psychology, 56(11), 1433-1445.
Full paper: Excluded. Not a clinical study

Teret, S. P., Webster, D. W., Vernick, J. S., Smith, T. W., Leff, D., Wintemute, G. J., et al. (1998). Support for new policies to regulate firearms - Results of two national surveys. New England Journal of Medicine, 339(12), 813-818.
Title/abstract: Excluded. Wrong intervention/comparator

Terk, J. V., Martens, M. G., & Williamson, M. A. (1993). Pregnancy outcomes of incarcerated women. Journal of Maternal-Fetal Investigation, 2(5), 246-250.
Title/abstract: Excluded. Wrong intervention/comparator

Tevyaw, T. O. L., Borsari, B., Colby, S. M., & Monti, P. M. (2007). Peer Enhancement of a Brief Motivational Intervention With Mandated College Students. Psychology of Addictive Behaviors, 21(1), 114-119.
Title/abstract: Excluded. Wrong intervention/comparator

Thakral, B., Marwaha, N., Chawla, Y. K., Saluja, K., Sharma, A., Sharma, R. R., et al. (2006). Prevalence & significance of hepatitis C virus (HCV) seropositivity in blood donors. Indian Journal of Medical Research, 124(OCT.), 431-438.
Title/abstract: Excluded. Wrong intervention/comparator

Tidmarsh, D. (1997). Risk assessment among prisoners: A view from a Parole Board member. International Review of Psychiatry, 9(2-3), 273-281.
Title/abstract: Excluded. Wrong intervention/comparator

Tiet, Q. Q., Byrnes, H. F., Barnett, P., & Finney, J. W. (2006). A practical system for monitoring the outcomes of substance use disorder patients. Journal of Substance Abuse Treatment, 30(4), 337-347.
Title/abstract: Excluded. Not a clinical study.

Tobias, C. R., Lippmann, S., Pary, R., Oropilla, T., & Embry, C. K. (1989). Alcoholism in the elderly. How to spot and treat a problem the patient wants to hide. Postgraduate Medicine, 86(4), 67-79.
Title/abstract: Excluded. Not a clinical study.

Tobias, C. R., Turns, D. M., Lippmann, S., Pary, R., & Oropilla, T. B. (1988). Evaluation and management of self-mutilation. Southern Medical Journal, 81(10), 1261-1263.
Title/abstract: Excluded. Not a clinical study.

Tobolska-Rydz, H. (1986). Problems of drug abuse and preventive measures in Poland. Bulletin on narcotics, 38(1-2), 99-104.
Title/abstract: Excluded. Not a clinical study.

Tomei, G., Brambilla, G. L., Delfini, R., Servadei, F., Ambrosio, A., Acampora, S., et al. (1996). Guidelines for minor head injured patients' management in adult age. Journal of Neurosurgical Sciences, 40(1), 11-15.
Title/abstract: Excluded. Wrong intervention/comparator

Toomey, T. L., & Wagenaar, A. C. (1999). Policy Options for Prevention: The Case of Alcohol. Journal of Public Health Policy, vol, 20(2), 192-213.
Title/abstract: Excluded. Not a clinical study.

Toraker, P., & Rydberg, U. S. (1989). New mandatory course in alcohol and drug dependence for medical students at the Karolinska Institute. Advances in Alcohol & Substance Abuse, 8(1), 55-66.
Title/abstract: Excluded. Not a clinical study.

Toro, C., Benito, R., Aguilera, A., Bassani, S., Rodriguez, C., Calderon, E., et al. (2005). Infection with human T lymphotropic virus type I in organ transplant donors and recipients in Spain. Journal of Medical Virology, 76(2), 268-270.
Title/abstract: Excluded. Wrong intervention/comparator

Trauer, T., & Callaly, T. (2002). Concordance between patients and their case managers using the Health of the Nation Outcome Scales (HoNOS). Australasian Psychiatry, 10(1), 24-28.
Full paper: Excluded. Not a clinical study

Tremblay, R. E., Nagin, D. S., Seguin, J. R., Zoccolillo, M., Zelazo, P. D., Boivin, M., et al. (2004). Physical aggression during early childhood: trajectories and predictors. Pediatrics, 114(1), e43-50.
Title/abstract: Excluded. Wrong intervention/comparator

Tschumper, A., Narring, F., Meier, C., & Michaud, P. A. (1998). Sexual victimization in adolescent girls (age 15-20 years) enrolled in post-mandatory schools or professional training programmes in Switzerland. Acta Paediatrica, International Journal of Paediatrics, 87(2), 212-217.

Title/abstract: Excluded. Wrong intervention/comparator

Tsongalis, G. J., Wu, A. H. B., Silver, H., & Ricci A, Jr. (1999). Applications of forensic identity testing in the clinical laboratory. American Journal of Clinical Pathology, 112(1 SUPPL. 1), S93-S103.
Title/abstract: Excluded. Not a clinical study.

Tubman, J. G., Langer, L. M., & Calderon, D. M. (2001). Coerced Sexual Experiences among Adolescent Substance Abusers: A Potential Pathway to Increased Vulnerability to HIV Exposure. Child & Adolescent Social Work Journal, vol, 18(4), 281-303.
Title/abstract: Excluded. Wrong intervention/comparator

Turner, M., Smith-Hamel, C., & Mulder, R. (2006). Pathways to care in a New Zealand first-episode of psychosis cohort. Australian and New Zealand Journal of Psychiatry, 40(5), 421-428.
Title/abstract: Excluded. Wrong intervention/comparator

Twomey, J. E., Soave, R., Gil, L., & Lester, B. M. (2005). Permanency planning and social service systems: A comparison of two families with prenatally substance exposed infants. Infant Mental Health Journal, 26(3), 250-267.
Title/abstract: Excluded. Wrong intervention/comparator

Uri, J. V., & Parks, D. B. (1983). Disulfiram-like reaction to certain cephalosporins. Therapeutic Drug Monitoring, 5(2), 219-224.
Title/abstract: Excluded. Wrong intervention/comparator

Vaillant, G. E. (1988). What can long-term follow-up teach us about relapse and prevention of relapse in addiction? British Journal of Addiction, 83(10), 1147-1157.
Title/abstract: Excluded. Wrong intervention/comparator

Vaillant, G. E. (1974). Outcome research in narcotic addiction: Problems and perspectives. American Journal of Drug and Alcohol Abuse, 1(1), 25-36.
Title/abstract: Excluded. Not a clinical study.

Valderrama, J. C., Tortajada, S., Alapont, L., Vidal, A., Perez, M. J., Castellano, M., et al. (2006). Rapid assessment of drug abuse prevention needs for youth in small Spanish municipalities: Coping with resource limitations. Journal of Drug Issues, 36(1), 29-52.
Title/abstract: Excluded. Wrong intervention/comparator

Valentine-Thon, E. (2001). Borderline and/or discordant Cobas Amplicor(trademark) HCV Test Version 2.0 results: Clinical significance. Journal of Clinical Virology, 20(1-2), 77-80.
Title/abstract: Excluded. Wrong intervention/comparator

Van Bilsen, H. P., & Van Emst, A. J. (1986). Heroin addiction and motivational milieu therapy. International Journal of the Addictions, 21(6), 707-713.
Title/abstract: Excluded. Wrong intervention/comparator

van Bommel, E. F. H. (2002). Retroperitoneal fibrosis. Netherlands Journal of Medicine, 60(6), 231-242.
Title/abstract: Excluded. Wrong intervention/comparator

van de Putte, P., & Martens, P. R. (1995). Atraumatic cardiac arrest in apparently healthy young women. European journal of emergency medicine : official journal of the European Society for Emergency Medicine, 2(4), 179-183.
Title/abstract: Excluded. Wrong intervention/comparator

Van De Wijngaart, G. F. (1990). The Dutch approach: Normalization of drug problems. Journal of Drug Issues, 20(4), 667-678.
Title/abstract: Excluded. Not a clinical study.

Van der Merwe, P. L., Allan, A., & Allan, M. M. (1999). Inappropriate involuntary admissions to psychiatric hospitals. South African Medical Journal, 89(12), 1303-1307.
Full paper: Excluded. Wrong intervention/comparator

Van Kuppevelt, R. P. A. (2000). A comparison of the policies and methodologies adhered to by drug treatment centres in Christchurch. The University of Canterbury, Christchurch, New Zealand.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Van Sweden, B., & De Bruecker, G. (1986). Patterns of EEG dysfunction in general hospital psychiatry. Neuropsychobiology, 16(2-3), 131-134.
Title/abstract: Excluded. Not a clinical study.

Vaughan, D. A. (1990). Frontiers in pharmacologic treatment of alcohol, cocaine, and nicotine dependence. Psychiatric Annals, 20(12), 695-710.
Title/abstract: Excluded. Wrong intervention/comparator

Vaughn, M. S., Deng, F., & Lee, L.-J. (2003). Evaluating a Prison-Based Drug Treatment Program in Taiwan. Journal of Drug Issues, vol, 33(2), 357-384.
Title/abstract: Excluded. Wrong intervention/comparator

Verdejo-Garcia, A., Benbrook, A., Funderburk, F., David, P., Cadet, J.-L., & Bolla, K. I. (2007). The differential relationship between cocaine use and marijuana use on decision-making performance over repeat testing with the Iowa Gambling Task. Drug and Alcohol Dependence, 90(1), 2-11.
Title/abstract: Excluded. Wrong intervention/comparator

Verma, S., Giles, T. E., & Tsai, H. H. (1999). Vasculitic small bowel perforation masquerading as spontaneous bacterial peritonitis in a patient with decompensated liver disease. European Journal of Gastroenterology and Hepatology, 11(4), 459-461.
Title/abstract: Excluded. Wrong intervention/comparator

Vernon, R. G. (1987). Employee testing raises workplace privacy issues. Trustee : the journal for hospital governing boards, 40(6), 19-21.
Title/abstract: Excluded. Wrong intervention/comparator

Vigilant, L. G. (2005). "I don't have another run left with it": Ontological security in illness narratives of recovering on methadone maintenance. Deviant Behavior, 26(5), 399-416.
Title/abstract: Excluded. Wrong intervention/comparator

Vilardaga, R., Hayes, S. C., & Schelin, L. (2007). Philosophical, theoretical and empirical foundations of Acceptance and Commitment Therapy. Anuario de Psicologia, 38(1), 117-128.
Full paper: Excluded. Not a clinical study

Villier, C., Mallaret, M. P., & Da Camara, C. C. (2002). Nefopam abuse. Annals of Pharmacotherapy, 36(10), 1564-1566.
Full paper: Excluded. Not a clinical study

Voegtlin, W. L., & Lemere, F. (1942). The treatment of alcohol addiction: a review of the literature. Quarterly Journal of Studies on Alcohol, 2, 717-803.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Vogler, R. E., Compton, J. V., & Weissbach, T. A. (1976). The referral problem in the field of alcohol abuse. Journal of community psychology, 4(4), 357-361.
Title/abstract: Excluded. Wrong intervention/comparator

Vreugdenhil, C., Doreleijers, T. A. H., Vermeiren, R., Wouters, L. F. J. M., & Van Den Brink, W. (2004). Psychiatric disorders in a representative sample of incarcerated boys in The Netherlands. Journal of the American Academy of Child and Adolescent Psychiatry, 43(1), 97-104.
Title/abstract: Excluded. Wrong intervention/comparator

Vukadin, I. K., Vlaisavljevic, Z., & Brlic, S. (2004). Substance abuse treatment in a maximum security prison: Inmates' perception. Alcoholism, 40(2), 87-102.
Full paper: Excluded. Wrong indication/population

Waal, H. (2007). Merits and problems in high-threshold methadone maintenance treatment: Evaluation of medication-assisted rehabilitation in Norway 1998-2004. European Addiction Research, 13(2), 66-73.
Full paper: Excluded. Not a clinical study

Wadsby, M., Goran Svedin, C., & Sydsjo, G. (2007). Children of mothers at psychosocial risk growing up: A follow up at the age of 16. Journal of Adolescence, 30(1), 147-164.
Title/abstract: Excluded. Not a clinical study.

Wagner, J. C. (1987). Substance abuse policies and guidelines in amateur and professional athletics. American Journal of Hospital Pharmacy, 44(2), 305-310.
Title/abstract: Excluded. Wrong intervention/comparator

Wald, I., & Moskalewicz, J. (1987). From Compulsory Treatment to the Obligation to Undertake Treatment: Conceptual Evolution in Poland. Contemporary Drug Problems, vol, 14(1), 39-50.
Title/abstract: Excluded. Not a clinical study.

Wallace, S. K., & Staiger, P. K. (1998). Informing consent: Should 'providers' inform 'purchasers' about the risks of drug education? Health Promotion International, 13(2), 167-170,171.
Title/abstract: Excluded. Not a clinical study.

Wallander, L., & Blomqvist, J. (2005). Who "Needs" Compulsory Care? Nordisk alkohol & narkotikatidskrift, vol, 22, 63-85.
Title/abstract: Excluded. Not a clinical study.

Walle, A. (2004). Native people and the DSM IV-TR: Expanding diagnostic criteria to reflect minority trauma. Journal of Ethnicity in Substance Abuse, 3(3), 49-65.
Title/abstract: Excluded. Not a clinical study.

Walsh, D. C., Hingson, R. W., Merrigan, D. M., & Levenson, S. M. (1992). Treating the employed alcoholic: Which interventions work? Alcohol Health & Research World. Special Focus: Alcohol and the workplace, 16(2), 140-148.
Title/abstract: Excluded. Wrong intervention/comparator

Walsh, D. C., Hingson, R. W., Merrigan, D. M., Levenson, S. M., Cupples, L. A., Heeren, T., et al. (1991). A randomized trial of treatment options for alcohol-abusing workers. New England Journal of Medicine, 325(11), 775-782.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Walsh, R. A., Bowman, J. A., Tzelepis, F., & Lecathelinais, C. (2005). Regulation of environmental tobacco smoke by Australian drug treatment agencies. Australian and New Zealand Journal of Public Health, 29(3), 276-278.
Title/abstract: Excluded. Wrong intervention/comparator

Walters, G. D. (1996). The natural history of substance misuse in an incarcetared criminal population. Journal of Drug Issues, 26(4), 943-959.
Title/abstract: Excluded. Wrong intervention/comparator

Wang, W. (1999). Illegal Drug Abuse and the Community Camp Strategy in China. Journal of Drug Education, vol, 29(2), 97-114.
Title/abstract: Excluded. Wrong intervention/comparator

Ward, M., & Baldwin, S. (1990). Alcohol education courses (AECs) as a court disposal: A preliminary examination of effectiveness. Alcoholism Treatment Quarterly, 7(4), 123-133.

Title/abstract: Excluded. Wrong intervention/comparator

Washburn, A. M., Fullilove, R. E., Fullilove, M. T., Keenan, P. A., McGee, B., Morris, K. A., et al. (1993). Acupuncture heroin detoxification: a single-blind clinical trial [Electronic Version]. Journal of substance abuse treatment, 345-351 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/313/CN-00096313/frame.html

Waters, J., Roberts, A. R., & Morgen, K. (1997). High risk pregnancies: Teenagers, poverty, and drug abuse. Journal of Drug Issues, 27(3), 541-562.
Title/abstract: Excluded. Wrong intervention/comparator

Watkins, K. E., & Podus, D. (2000). The impact of terminating disability benefits for substance abusers on substance use and treatment participation. Psychiatric Services, 51(11), 1371-1372, 1381.
Title/abstract: Excluded. Wrong intervention/comparator

Watson, C. G., Brown, K., Tilleskjor, C., Jacobs, L., & Pucel, J. (1988). The comparative recidivism rates of voluntary- and coerced-admission male alcoholics. Journal of Clinical Psychology, 44(4), 573-592.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Watson, T. L., Bowers, W. A., & Andersen, A. E. (2000). Involuntary treatment of eating disorders. American Journal of Psychiatry, 157(11), 1806-1810.
Full paper: Excluded. Not a clinical study

Wear, D. A., & Pasewark, R. A. (1984). Defendants previous history and mock sentencing. Journal of clinical psychology, 40(3), 867-874.
Title/abstract: Excluded. Wrong intervention/comparator

Webb, M. B. (2003). Compulsory alcoholism treatment in New South Wales. Medicine and Law, 22(2), 311-327.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Webb, M. B. (2001). Addiction and the law : a case-study of the Alcoholism and Drug Addiction Act. The University of Canterbury, Christchurch, New Zealand.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Webster, C. D. (1986). Compulsory treatment of narcotic addiction. International Journal of Law and Psychiatry, 8(2), 133-159.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Weil, W. (2006). Working with Involuntary, Substance Abusing Clients in the Criminal Justice System: An Interview with Wendy Weil. Journal of Social Work Practice in the Addictions, vol, 6(4), 131-135.
Title/abstract: Excluded. Not a clinical study.

Weinstein, B. A., & Raber, M. J. (1998). An Ethical Assessment of Structured Intervention with Chemically Dependent Clients. Employee Assistance Quarterly, vol, 13(3), 19-31.
Title/abstract: Excluded. Not a clinical study.

Weisner, C. (1987). The social ecology of alcohol treatment in the United States. Recent developments in alcoholism : an official publication of the American Medical Society on Alcoholism, the Research Society on Alcoholism, and the National Council on Alcoholism, 5(-), 203-243.
Title/abstract: Excluded. Not a clinical study.

Wells, B. G., Marken, P. A., Rickman, L. A., Brown, C. S., Hamann, G., & Grimmig, J. (1989). Characterizing anticholinergic abuse in community mental health. Journal of Clinical Psychopharmacology, 9(6), 431-435.
Full paper: Excluded. Not a clinical study

Wells-Parker, E. (1995). Mandated treatment: Lessons from research with drinking and driving offenders. Alcohol Health & Research World, 18(4), 302-306.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Wells-Parker, E., & Williams, M. (2002). Enhancing the effectiveness of traditional interventions with drinking drivers by adding brief individual intervention components. Journal of Studies on Alcohol, 63(6), 655-664.
Title/abstract: Excluded. Wrong intervention/comparator

Wenger, P. (1944). History of a drinking habit in 400 inmates of a penal institution; with special consideration of personality and prognosis. New York State Journal of Medicine, 44, 1898-1904.
Title/abstract: Excluded. Wrong intervention/comparator

Westermeyer, J. (1989). Nontreatment factors affecting treatment outcome in substance abuse. American Journal of Drug and Alcohol Abuse, 15(1), 13-29.
Title/abstract: Excluded. Not a clinical study.

White, H. R., Morgan, T. J., Pugh, L. A., Celinska, K., Labouvie, E. W., & Pandina, R. J. (2006). Evaluating two brief substance-use interventions for mandated college students. Journal of Studies on Alcohol, 67(2), 309-317.
Title/abstract: Excluded. Wrong intervention/comparator

Wick Jr, R. L., Brawley, W. L., & Berger, B. T. (1992). A survey of pre-placement urinalysis drug findings. Aviation Space and Environmental Medicine, 63(1), 56-59.
Title/abstract: Excluded. Wrong intervention/comparator

Wilbourne, P. L., & Miller, W. R. (2002). Treatment for alcoholism: Older and wiser? Alcoholism Treatment Quarterly, 20(3-4), 41-59.
Title/abstract: Excluded. Not a clinical study.

Wild, T. C. (2006). Social control and coercion in addiction treatment: Towards evidence-based policy and practice. Addiction, 101(1), 40-49.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Wild, T. C. (1999). Compulsory substance-user treatment and harm reduction: A critical analysis. Substance Use and Misuse, 34(1), 83-102.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Wild, T. C., Cunningham, J., & Hobdon, K. (1998). When do people believe that alcohol treatment is effective? The importance of perceived client and therapist motivation. Psychology of Addictive Behaviors, 12(2), 93-100.
Title/abstract: Excluded. Not a clinical study.

Wild, T. C., Cunningham, J. A., & Ryan, R. M. (2006). Social pressure, coercion, and client engagement at treatment entry: A self-determination theory perspective. Addictive Behaviors, 31(10), 1858-1872.
Title/abstract: Included
Full paper: Excluded. Wrong intervention/comparator

Wild, T. C., Newton-Taylor, B., & Alletto, R. (1998). Perceived coercion among clients entering substance abuse treatment: Structural and psychological determinants. Addictive Behaviors, 23(1), 81-95.

Title/abstract: Excluded. Wrong intervention/comparator

Wild, T. C., Newton-Taylor, B., Ogborne, A. C., Mann, R., Erickson, P., & Macdonald, S. (2001). Attitudes toward compulsory substance abuse treatment: A comparison of the public, counselors, probationers and judges' views. Drugs: Education, Prevention & Policy, 8(1), 33-45.
Title/abstract: Excluded. Wrong intervention/comparator

Wile, C., & Hood, B. M. (2003). Compulsory treatment: The voices of young heroin dependent offenders. Australian Journal of Primary Health, 9(1), 94-104.
Title/abstract: Excluded. Wrong intervention/comparator

Wiley, D., Beattie, M., Nguyen, H., Puckett, K., Banerjee, K., & Poon, W. (2004). When you assume...the reality of implementing a legally mandated substance abuse treatment program. Journal of psychoactive drugs, Suppl 2(-), 175-180.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Wilkinson, S., Soteriou, T., Gray, S., Orme, J., & Myles, J. (2004). Artefact or reality? Increases in persons notified to the Regional Drug Misuse Database in the South West of England, 1996-2001. Journal of Public Health, 26(1), 3-5.
Title/abstract: Excluded. Not a clinical study.

Williams, B., & Betley, C. (1995). Inappropriate use of nonpsychotropic medications in nursing homes. Journal of the American Geriatrics Society, 43(5), 513-519.
Title/abstract: Excluded. Wrong intervention/comparator

Williams, J. G., Hall, J. E., & O'Hara, M. B. (1991). Treatment effects of separate commitment laws for mental illness and chemical dependency. Hospital and Community Psychiatry, 42(4), 420-422.
Title/abstract: Included
Full paper: Excluded. Not a clinical study

Wilson-Cohn, C., Strauss, S. M., & Falkin, G. P. (2002). The Relationship between Partner Abuse and Substance Use among Women Mandated to Drug Treatment. Journal of Family Violence, vol, 17(1), 91-105.
Title/abstract: Excluded. Wrong intervention/comparator

Wing, D. M. (1991). Involuntary chemical addiction treatment. EAP implications for occupational health nurses. AAOHN Journal, 39(10), 466-473.
Full paper: Excluded. Not a clinical study

Winnik, H. Z. (1972). Drug addiction and law. Israel Annals of Psychiatry & Related Disciplines, 10(4), 366-372.
Title/abstract: Excluded. Not a clinical study.

Wish, E. D., Gray, T., Sushinsky, J., Yacoubian, G. S., Jr., & Fitzgerald, N. (2000). An experiment to enhance the reporting of drug use by arrestees [Electronic Version]. Journal of Drug Issues, 55-76 from http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/723/CN-00423723/frame.html

Wittchen, H. U., Becker, E., Lieb, R., & Krause, P. (2002). Prevalence, incidence and stability of premenstrual dysphoric disorder in the community. Psychological Medicine, 32(1), 119-132.
Title/abstract: Excluded. Wrong intervention/comparator

Wolfe, D. (2007). Paradoxes in antiretroviral treatment for injecting drug users: Access, adherence and structural barriers in Asia and the former Soviet Union. International Journal of Drug Policy, 18(4), 246-254.
Title/abstract: Excluded. Wrong intervention/comparator

Wood, P. L. (2005). The NMDA receptor complex: A long and winding road to therapeutics. IDrugs, 8(3), 229-235.

Title/abstract: Excluded. Wrong intervention/comparator

Wooldredge, J., & Thistlethwaite, A. (2005). Court Dispositions and Rearrest for Intimate Assault. Crime & Delinquency, 51(1), 75-102.
Title/abstract: Excluded. Wrong intervention/comparator

Wright, N. M. J., Tompkins, C. N. E., & Jones, L. (2005). Exploring risk perception and behaviour of homeless injecting drug users diagnosed with hepatitis C. Health and Social Care in the Community, 13(1), 75-83.
Title/abstract: Excluded. Wrong intervention/comparator

Yates, R., McIvor, G., Eley, S., Malloch, M., & Barnsdale, L. (2005). Coercion in drug treatment: The impact on motivation, aspiration and outcome. NAD Publication, -(47), 159-169.
Full paper: Excluded. Wrong population/intervention.

Yew, W. W., & Leung, C. C. (2006). Antituberculosis drugs and hepatotoxicity. Respirology, 11(6), 699-707.
Title/abstract: Excluded. Wrong intervention/comparator

Young, A. M. W., Perez, L. M., Northridge, M. E., Vaughn, R. L., Braithwaite, K., & Treadwell, H. M. (2007). Bringing to light the health needs of African-American men: the Overtown Men's Health Study. Journal of Men's Health and Gender, 4(2), 140-148.
Title/abstract: Excluded. Wrong intervention/comparator

Young, D., & Belenko, S. (2002). Program retention and perceived coercion in three models of mandatory drug treatment. Journal of Drug Issues, 32(1), 297-328.
Title/abstract: Included
Full paper: Excluded. Wrong indication/population

Yu, M. M., & Watkins, T. (1996). Group counseling with DUI offenders: A model using client anger to enhance group cohesion and movement. Alcoholism Treatment Quarterly, 14(3), 47-57.
Full paper: Excluded. Not a clinical study

Zaretsky, A., Rector, N. A., Seeman, M. V., & Fornazzari, X. (1993). Current cannabis use and tardive dyskinesia. Schizophrenia Research, 11(1), 3-8.
Full paper: Excluded. Not a clinical study

Zavan, V., Brambilla, C., & Cibin, M. (1997). Talking about partners so that we can talk about substances. Is codependence the other face of addiction? First part: The state of the art. Alcologia, 9(3), 191-194.
Title/abstract: Excluded. Wrong intervention/comparator

Zavela, K. J. (2002). Developing effective school-based drug abuse prevention programs. American journal of health behavior, 26(4), 252-265.
Title/abstract: Excluded. Wrong intervention/comparator

Zawacki, T., Morris, J., George, W. H., Abbey, A., Martell, J., Stoner, S. A., et al. (2005). Explicating alcohol's role in acquaintance sexual assault: Complementary perspectives and convergent findings. Alcoholism: Clinical and Experimental Research, 29(2), 263-269.
Title/abstract: Excluded. Not a clinical study.

Zawacki, T., Norris, J., George, W. H., Abbey, A., Martell, J., Stoner, S. A., et al. (2005). Explicating Alcohol's Role in Acquaintance Sexual Assault: Complementary Perspectives and Convergent Findings. Alcoholism: Clinical and Experimental Research, 29(2), 263-269.
Title/abstract: Excluded. Not a clinical study.

Zenz, M., Zenz, T., Tryba, M., & Strumpf, M. (1995). Severe undertreatment of cancer pain: A 3-year survey of the German situation. Journal of Pain and Symptom Management, 10(3), 187-191.
Title/abstract: Excluded. Wrong intervention/comparator

Zeppegno, P., Airoldi, P., Manzetti, E., Panella, M., Renna, M., & Torre, E. (2005). Involuntary psychiatric admissions: A retrospective study of 460 cases. European Journal of Psychiatry, 19(3), 133-143.
Full paper: Excluded. Wrong outcomes

Ziedonis, D. M., Kosten, T. R., Glazer, W. M., & Frances, R. J. (1994). Nicotine dependence and schizophrenia. Hospital and Community Psychiatry, 45(3), 204-206.
Full paper: Excluded. Not a clinical study

Zitek, B., Lewis, R., O'Donnell, J., & Dubin, W. R. (2005). Assessment and management of patients who make threats against the president in the psychiatric emergency service. Psychiatric Services, 56(8), 1017-1020.
Full paper: Excluded. Not a clinical study

Appendix D: Quality checklists for appraising interventions

Method of treatment assignment

- Correct, blinded randomisation method described OR randomised, double-blind method stated AND group similarity documented
- Blinding and randomisation stated but method not described OR suspect technique (e.g. allocation by drawing from an envelope)
- Randomisation claimed but not described and investigator not blinded.
- Randomisation not mentioned

Control of selection bias after treatment assignment

- Intention to treat analysis AND full follow-up
- Intention to treat analysis AND <15% loss to follow-up
- Analysis by treatment received only OR no mention of withdrawals
- Analysis by treatment received AND not mention of withdrawals OR more than 15% withdrawals/loss to follow-up/post-randomisation exclusions

Blinding

- Blinding of outcome assessor AND patient and care giver
- Blinding of outcome assessor OR patient and care giver
- Blinding not done

Outcome assessment (if blinding was not possible)

- All patients had standardised assessment
- No standardised assessment OR not mentioned

Source: NHMRC (1999). *How to review the evidence: systematic identification and review of the scientific literature.* Canberra: NHMRC. Modified from I Chalmers, Cochrane Handbook, available on the Cochrane Library CD-ROM

Appendix E: Data extraction tables

Table 13 Data extraction table: NICE (2007)

Citation	National Institute for Health and Clinical Excellence. (2007). *Drug misuse, psychosocial interventions: National Clinical Practice Guideline Number 51*: National Collaborating Centre for Mental Health.
Level of evidence *	I / III-3
Objective	This was a national (UK) guideline on drug misuse. It aimed to evaluate the role of specific psychosocial interventions in the treatment of alcohol and drug misuse, to integrate this to provide best-practice advice and to develop recommendations tailored to the National Health Service in England and Wales. The sub-topic of most relevance to the current review related to residential, prison and inpatient care, and specifically the section on legally coerced treatment interventions. Only studies that considered the clinical effectiveness of legally mandated treatment (in comparison with voluntary treatment) (Section 9.4, p. 208-210) are reported here.
Search strategy	Considered MEDLINE, EMBASE, CINAHL, HMIC, PsycINFO, Cochrane Library searched from inception to May 2006, and table of content December 2005-November 2006.
Type of included studies	RCTs, Observational studies, systematic reviews were eligible for inclusion. One systematic review was included.
Types of participants	People who misuse alcohol/drugs.
Type of intervention	Legally mandated (also known as compulsory) alcohol/drug treatment. The legal mandate is defined as a process by order of a court or by diversion from the judicial system.
Outcomes	Abstinence, alcohol/drug misuse
Data analyses & statistics	Narrative synthesis.
List of included studies	Wild et al. (2002)
Description of included studies	Wild et al. (2002) – a systematic review
Review quality † See below for "A-G" quality criteria questions	A. Adequate. Clear clinical question defined using PICO criteria. B. Adequate. Comprehensive search strategy. C. Adequate. Selection criteria appropriate and clearly applied. D. Adequate. Detailed description of quality assessment processes, including use of SIGN checklists. E. Partial. Little information on the included studies' characteristics or results, mainly report conclusions and two studies included in the Wild et al. (2002) review. F. Adequate. Not applicable, as only one study (review) reported so no data pooling. G. Adequate. Not applicable, as only one study (review) reported so no heterogeneity.
Results (relevant to scope of current review)	Wild et al. (2002). Most research in area conducted in USA. Concluded that mandated treatment generally demonstrated better outcomes in terms of treatment process (uptake of treatment following referral and retention in treatment), however was not superior to voluntary treatment in terms of reductions in criminal behaviour or substance misuse. Cited results of two studies within Wild et al.'s review which were both excluded from this review (due to ineligible population as relating to court diversion participants, and to ineligible intervention).
Authors' conclusions	Limited research on the topic. Research suggests that "the more negative outcomes found for legally mandated treatments may be explained by the nature of the difficulties of those entering mandated treatment when compared with those in voluntary treatment, rather than its compulsory nature." (p. 210). The clinical practice recommendation is that access to and choice of treatment should be the same whether alcohol/drug misusers participate in treatment voluntarily or are legally required to do so.

Table 13 Data extraction table: NICE (2007) *continued*

Reviewers notes	Note that this Guideline is extremely comprehensive and considers other questions of interest to the client, including effectiveness of residential treatment *per se*. The Wild et al. (2002) review is included in the current review.
Relevance to study question	Not entirely clear whether review was only concerned with offender populations. Most of the evidence considered in the Wild et al. (2002) reviews considered studies in the USA. However little detail on scope of that review.

* Systematic reviews that contained both RCTs and lower levels of evidence were annotated level I/III-3 (the latter reflecting the same level as the non-RCT papers that were included within the review.

† The quality of systematic reviews was assessed using the following questions:

(A) Was a clinical question clearly defined?

(B) Was an adequate search strategy used?

(C) Were the inclusion criteria appropriate and applied in an unbiased way?

(D) Was a quality assessment of included studies undertaken?

(E) Were the characteristics and results of the individual studies appropriately summarised?

(F) Were the methods for pooling the data appropriate?

(G) Were sources of heterogeneity explored?

Table 14 Data extraction table: Pritchard et al. (2007)

Citation	Pritchard, E., Mugavin, J., & Swan, A. (2007). Compulsory treatment in Australia: a discussion paper on the compulsory treatment of individuals dependent on alcohol and/or other drugs. Canberra: Australian National Council on Drugs.
Level of evidence *	I / III-3 [review of recent reviews]
Objective	This discussion paper covered a range of issues relating to compulsory treatment with respect to research evidence, ethical considerations, and international practice. With respect to its systematic review, it considered what is the research evidence on compulsory treatment of offending and non-offending individuals for AOD dependence.
Search strategy	Searched Pubmed and internet. Search terms included: compulsory treatment, coercion, effectiveness, drug diversion, drug courts, civil commitment, ethics, civil liberties.
Type of included studies	Published systematic and narrative reviews (erroneously described as meta-analyses) were considered.
Types of participants	People who are chronically addicted to alcohol or other drugs. Offenders and non offenders.
Type of intervention	Various forms of compulsory treatment, including coercion, for offenders, and for non-offenders.
Outcomes	Outcomes mentioned: alcohol/drug use, crime, motivation to change (drug use) behaviour.
Data analyses & statistics	Narrative synthesis
List of included studies	Klag et al. (2005) Stevens et al. (2005) Wild (2006)
Description of included studies	Klag et al. (2005). A review, but no description or critique of review method given. Stevens et al. (2005). This review summarised publications in English, German, French, Italian and Dutch. Wild (2006). A review of "key studies and trends"
Review quality **† See below for "A-G" quality criteria questions**	A. Inadequate. The discussion paper itself addressed four key questions but these were not clinically defined and no questions were mentioned for the literature review. B. Partial. Only searched PubMed and the internet. Dates of search not given. Search terms given. C. Partial. Did not describe clear eligibility criteria. Considered "recent empirical research on compulsory AOD treatment of offending and non-offending individuals" and "reviews of international research and related commentaries". D. Inadequate. No description of quality assessment and minimal critical comment on how research considered was undertaken. E. Partial. Included reviews were narratively discussed in terms of findings, not methods. F. Adequate. Narratively critiqued and synthesised. G. Adequate. Heterogeneity between the studies narratively discussed.

Table 14 Data extraction table: Pritchard et al. (2007) *continued*

Results (relevant to scope of current review)	Klag et al. (2005). Summarises methodological and conceptual problems that have impeded research. Major points mentioned include: That the vast majority of research is non-empirical, and research that is empirical rarely considers RCTs. "Most studies assume coercion from the referal source, which ignores the complexity of the coercion construct and has significanty impeded the accurate measurement of the effects of coercion" (Klag et al. 2005, pg 1783). There is no consistent operational definition of 'coercion'. Many studies assume legally mandated and non-mandated clients are similar at baseline, however there is evidence that this is not justified. Coercion is assumed to be a dichotomous rather than continuous variable. Most reviewed studies had follow-up of less than 6 months. Most research over the last 30 years has so many weaknesses that the results were inconclusive, and could only say that compulsory treatment can sometimes be effective in reducing alcohol/drug use and crime in some people. Stevens et al. (2005) This review considered quasi-compulsory treatment (QCT) which refers to offenders only (and is therefore not with the current HSAC review's scope). Key findings identified by Pritchard et al. (2007) include: Non-English research reported on a wider range of findings and tended to present less positive findings than English research. Recommended future research look at role and interplay of client motivation, perceived coercion, client characteristics and treatment characteristics. Length of treatment is a consistent predictor of positive treatment but recommended periods vary from 3 to 12 months in the literature reviewed. Report findings that suggest coercion can increase motivation, and one study found that legally coerced offenders were at least motivated as voluntary ones. Others have argued that legal coercion can undermine motivation. Wild (2006) performed a conceptual analysis to identify eight implicit assumptions underlying policy, which are barriers to research, including: Coercion is almost invariably equated with referral source. Dearth of literature on level of coercion experienced by individuals and its relationship with motivation to change. Despite findings that informal coercion form family members may be more "compelling" than formal legal mechanisms for coercion, research has focused on the latter.
Authors' conclusions	Most evaluative work has examined diversion programmes (legal coercion) and produced results that are largely weak and inconclusive. Indicators have generally been chosen opportunistically. Civil commitment legislation has not been evaluated in terms of its effectiveness in achieving long-term behaviour change. There is some (mainly anecdotal) evidence that civil commitment for short periods can be an effective harm minimisation mechanism (protecting the user in life threatening situations), and the authors argue that there is substantial support in Australia for a model of short-term involuntary care to reduce serious self-harm. Compulsory treatment can sometimes be effective in reducing alcohol/drug use (and crime) for some people. "While the evidence is weak and cannot be said to strongly support the continuation of compulsory treatment programs, neither does it suggest that they are ineffective and should be discontinued. Strong evidence in either direction simply does not exist" (p. 104).

Table 14 Data extraction table: Pritchard et al. (2007) *continued*

Reviewers notes	Note that this literature review was part of discussion document that included review of Australian legislation, key informant interviews, and reference group consultation. It was not intended as a systematic review but is recommended reading for the Working Group as a comprehensive and recent discussion of relevant legislation, and because an attempt to search databases was undertaken. Note that Klag et al. (2005) was excluded from current review as considering offenders only, Wild (2006) was not a systematic review, and Stevens et al. (2005) was excluded in the current review as relating to offenders.
Relevance to study question	Most of the evidence considered in these reviews, and all in Stevens et al. (2005) relates to offenders and/or criminal justice system referrals.

* Systematic reviews that contained both RCTs and lower levels of evidence were annotated level I/III-3 (the latter reflecting the same level as the non-RCT papers that were included within the review.
† The quality of systematic reviews was assessed using the following questions:
(A) Was a clinical question clearly defined?
(B) Was an adequate search strategy used?
(C) Were the inclusion criteria appropriate and applied in an unbiased way?
(D) Was a quality assessment of included studies undertaken?
(E) Were the characteristics and results of the individual studies appropriately summarised?
(F) Were the methods for pooling the data appropriate?
(G) Were sources of heterogeneity explored?

Table 15 Data extraction table: Swan and Alberti (2004)

Citation	Swan, A., & Alberti, S. (2004). *The Alcoholics and Drug-dependent persons Act (ADDPA) 1968: A Review*. Melbourne: Turning Point Alcohol and Drug Centre, Department of Human Services, State of Victoria.
Level of evidence *	IV (in relation to review of civil commitment of non-offenders)
Objective	To review the literature pertaining to compulsory treatment outcomes of people (non-offenders) with severe alcohol and drug (A&D) issues.
Search strategy	Considered CINCH, AOIS, DRUG, NCJRS, checked reference lists of retrieved papers, English language only. Search terms available (personal communication, Amy Swan, November 2007).
Type of included studies	Case series
Types of participants	People with severe alcohol and drug issues.
Type of intervention	Originally the search was to consider civil commitment legislation and practices but due to the lack of material the search was expanded to consider voluntary, involuntary, and mandated A&D treatment.
Outcomes	Abstinence, alcohol/drug misuse.
Data analyses & statistics	Narrative synthesis.
List of included studies	Bourquin-Tieche et al. (2001). Steiner et al. (1995).
Description of included studies	Bourquin-Tieche et al. (2001). Reported on 17 consecutive cases (15 individuals) of civil commitment (i.e. non-offenders) to a Swiss alcohol Unit. Steiner et al. (1995). Reported on non-offenders court ordered to treatment for serious alcohol related illnesses in Colorado.
Review quality **† See below for "A-G" quality criteria questions**	A. Partial. The broad scope was specified but selection criteria not elaborated. B. Partial. Search strategy was described as "comprehensive" but did not refer to major databases. Databases that were searched, and search terms, were obtained through contact with the author. C. Partial. Selection criteria not explicitly mentioned and so difficult to ascertain rigour of study selection. D. Inadequate. No apparent use of quality assessment processes, or checklists. E. Partial. Some information on the included studies' characteristics and results, though not tabulated or presented comprehensively. F. Adequate. Not applicable, as only two studies reported. G. Adequate. Not applicable, only two studies reported.
Results (relevant to scope of current review)	Bourquin-Tieche et al. (2001). Follow-up data on 10 clients, 18 months post-commitment, with 8 clients reporting being abstinent at follow-up and most considering civil commitment to be justifiable intervention. Steiner et al. (1995). Sixty percent were drinking alcohol six months post intervention.
Authors' conclusions	Little can be concluded from the limited research available specifically pertaining to the effectiveness of civil commitment." (p. 14)
Reviewers notes	This review was not presented as a systematic review but was included given the paucity of data available, and because an attempt to search bibliographic databases was undertaken. Bourquin-Tieche et al. (2001) is excluded in the current review as it was a case series with no comparator at follow-up. Steiner et al. (1995) also excluded as case series.

Table 15 Data extraction table: Swan and Alberti (2004) *continued*

Relevance to study question	The project also included a review of the *Alcoholics and Drug-dependent Persons Act (ADDPA) 1968* and consulted stakeholders of the ADDPA to provide feedback on the practical application of the Act (which is also likely to be of interest to the client though is not strictly relevant to the current review questions). The review also considered evidence relating to studies of compulsory treatment (where offenders and non-offenders are included), which included reference to Wild et al.'s (2002) review.

* Systematic reviews that contained both RCTs and lower levels of evidence were annotated level I/III-3 (the latter reflecting the same level as the non-RCT papers that were included within the review.

† The quality of systematic reviews was assessed using the following questions:

(A) Was a clinical question clearly defined?

(B) Was an adequate search strategy used?

(C) Were the inclusion criteria appropriate and applied in an unbiased way?

(D) Was a quality assessment of included studies undertaken?

(E) Were the characteristics and results of the individual studies appropriately summarised?

(F) Were the methods for pooling the data appropriate?

(G) Were sources of heterogeneity explored?

Table 16 Data extraction table: Wild et al. (2002)

Citation	Wild, T. C., Roberts, A. B., & Cooper, E. L. (2002). Compulsory substance abuse treatment: An overview of recent findings and issues. *European Addiction Research, 8*(2), 84-93.
Level of evidence *	I / III-3
Objective	To provide an overview of research trends and issues in the area of compulsory substance abuse treatment. Specifically included the following: substantive review papers on mandated and coerced substance abuse treatment, papers presenting quantitative or qualitative empirical data on characteristics of mandated treatment clients, papers comparing the efficacy of treatment among mandated clients, or papers providing quantitative comparative data on mandated versus voluntary substance abuse treatment outcomes.
Search strategy	Considered Medline, PubMed, Embase, and PsycINFO, limited to human studies and English language and papers published 1988 or later. Checked reference lists of four recent review papers, Search strategy described in detail.
Type of included studies	Empirical and non-empirical papers, including cross-sectional and longitudinal (case-control, RCT, non equivalent comparison group).
Types of participants	People receiving compulsory treatment for substance abuse.
Type of intervention	Compulsory substance abuse treatment.
Outcomes	Did not specify but did consider systematically collected qualitative and quantitative outcomes. Explicitly excluded outcomes relating to anecdotal data, and economic cost estimates of benefits of treatment compared with crime related costs.
Data analyses & statistics	Narrative synthesis including tables of study characteristics and results.
List of included studies	Identified 170 included articles, 84 of which are empirical, including 18 comparative longitudinal studies investigating the effectiveness of compulsory substance abuse treatment: Batel, Pessione, Bouvier, & Rueff (1995) Bavon (2001) Berkowitz, Brindis, Clayson, & Peterson (1996) Brizer, Maslansky, & Galanter (1990) Desland (1999) Desmond & Maddux (1996) Fugelstad, Agren, & Romelsjo (1998) Heale (2001) Kofoed & Keys (1988) Lawental, McLellan, Grissom, Brill, & O'Brien (1996) Liepman, Nirenberg, & Begin (1995) Loneck, Garrett, & Banks (1996a) Loneck, Garrett, & Banks (1996b) Nelson, Matthews, Girard, & Bloom (1999) O'Loughlin & Webb (1996) Vito (1998) Walsh et al. (1991) Watson (1995)

Table 16 Data extraction table: Wild et al. (2002) *continued*

Description of included studies	Desland (1994) – non-equivalent comparison study of post-diversion programme Desmond and Maddux (1996) – non-equivalent comparison study of compulsory supervision Fugelsatd et al. (1998) – non-equivalent comparison study of court-ordered treatment Heale (2001) – non-equivalent comparison study of post conviction diversion programme Bavon (2001) – non-equivalent comparison study of drug court Berkowitz et al. (1996) – non-equivalent comparison study of court and child protective services O'Loughlin (1996) – case-control study of brief "temporary certificate" commitment Vito (1998) - non-equivalent comparison study of drug court Batel et al. (1995) – RCT of letter sent by physician suggesting treatment Walsh et al. (1991) - RCT of employer coercion Brizer et al. (1990) - non-equivalent comparison study of welfare system coercion Lawental et al. (1996) - non-equivalent comparison study of employer coercion Nelson et al. (1996) - non-equivalent comparison study of employer diversion Kofoed (1989) - non-equivalent comparison study of persuasive group coercion Loneck et al. (1996) - non-equivalent comparison study of family/friends coercion Liepman et al. (1989) - non-equivalent comparison study of employer/family coercion Watson (1989) - non-equivalent comparison study of legal and family coercion
Review quality **† See below for "A-G" quality criteria questions**	A. Adequate. Clinical question was clearly defined, though broad, with very specific selection criteria. B. Adequate. The search strategy was broad, used several key databases, and was described in detail, including number of papers identified at each stage of study selection. Their strategy missed 9 articles that were subsequently identified from reference lists of recent reviews, which the authors considered a limitation of their search. They also commented that "some of the articles were not available to us" but this is not explained. C. Adequate. Selection criteria appropriate and coded using a standard protocol. D. Adequate. Explicit criteria were used to select a subsample of 18 effectiveness studies which were then independently coded twice using explicit criteria, with discrepancies resolved through consensus. E. Partial. Tabulated information on the included studies' characteristics and results, however results were only discussed in terms of direction of findings rather than quantitatively. F. Adequate. Not applicable, as data not pooled due to heterogeneity. However note that the authors summarised results in terms of number of papers finding positive or negative effects regardless of differences in population, intervention, or study design. G. Inadequate. Heterogeneity of studies described as study characteristics but not discussed in terms of variation in results.
Results (relevant to scope of current review)	Four of five studies examining referral patterns reported higher entry rates for compulsory treatment relative to non-compulsory treatment. Six of 11 treatment retention studies participation rates (lower drop-out) for compulsory treatment relative to non-compulsory treatment. Only two of eight studies investigating alcohol and drug use reported better outcomes for compulsory treatment with 75% reporting no difference compared with non-compulsory treatment.
Authors' conclusions	With respect to the results the authors conclude that in general the majority of treatment-oriented measures showed benefits of compulsory treatment relative to non-compulsory treatment. However they note the methodological limitations (that most empirical research employed non-equivalent comparison groups) of the evidence base, and their own review. The authors observe, "Given that compulsory treatment samples exhibit substantial variability in perceptions of coercion, readiness to change their behaviour and perceived justificability of social control tactics, it is perhaps not surprising that studies simply comparing referral sources do not provide strong and persuasive evidence with regard to outcomes." (p. 91)

Table 16 Data extraction table: Wild et al. (2002) *continued*

Reviewers notes	None of the 18 included studies on effectiveness were included in the current review.
Relevance to study question	The review considered evidence relating to studies of compulsory treatment and therefore reported on a range of mandates including those involving offenders and coercion from family, welfare system and employers. The review observes that most research on compulsory treatment has occurred in the United States (82%) and considered legal mandates (court orders, diversion programs, drug courts).

* Systematic reviews that contained both RCTs and lower levels of evidence were annotated level I/III-3 (the latter reflecting the same level as the non-RCT papers that were included within the review.

† The quality of systematic reviews was assessed using the following questions:

(A) Was a clinical question clearly defined?

(B) Was an adequate search strategy used?

(C) Were the inclusion criteria appropriate and applied in an unbiased way?

(D) Was a quality assessment of included studies undertaken?

(E) Were the characteristics and results of the individual studies appropriately summarised?

(F) Were the methods for pooling the data appropriate?

(G) Were sources of heterogeneity explored?