

Comprehensive review identifies three key concepts for recovery from substance use disorders

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Certain concepts have a demonstrated basis for aiding recovery from dangerous alcohol or substance use, according to an analysis of scientific

literature since 1990. Self-efficacy (a belief in one's ability to achieve a goal), social support, and managing cravings are among the treatment elements best supported by evidence.

Effective treatment for [alcohol use disorder](#) (AUD) and other [substance use disorders](#) (SUDs) depends on understanding how human behaviors change and incorporating that knowledge into [clinical practice](#). An ongoing research effort continues to investigate varying treatment approaches and how they relate to recovery outcomes, but those findings have not been well synthesized into a useful format.

For the new review [published](#) in *Alcohol: Clinical & Experimental Research*, researchers from around the U.S. reviewed published studies, identified the treatment elements best supported by data, and evaluated their potential as key factors in behavior change. The researchers drew on existing study design criteria for validating conclusions about treatment elements.

The researchers explored reviews of studies published between 2008 and 2023 involving AUD and SUD treatments and the effects on [substance use](#) and related outcomes in adults. Three constructs involved in treatment were the most well-supported by data from 11 studies: self-efficacy, social support, and craving (coping skills, also well-supported, did not suit the current review process).

They then reviewed 48 studies published between 1990 and 2023 that focused on one or more of these three concepts in adults' recovery, and that met rigorous methodology standards. The 48 studies used varied research designs, participant samples, and contexts.

The analyzed studies provided support for self-efficacy, social support, and craving as factors that likely influence people's behaviors in treatment or recovery. The researchers called for these three constructs

to be incorporated into AUD and SUD treatment and clinical training.

Such an approach could improve recovery interventions, inform new treatments and [clinical training](#), help clinicians align patients with approaches likely to work for them, and hone community-based recovery programs.

The researchers called for additional research on how these three concepts drive [behavior change](#) and for mining existing science to identify other evidence-based approaches. They recommended several directions for future research. These included expanding the examined outcomes to other manifestations of mental and physical health and experimenting with key elements of treatment to generate direct evidence of associations between those constructs and outcomes.

Investigating the roles of context (such as policies, incentives, [social norms](#), and settings) and combinations of influences could improve outcomes across varied real-world situations. Specifying how behavioral change occurs—such as the relevant neurological and biological pathways—is a critical gap that needs to be addressed.

More information: Stephen A. Maisto et al, From alcohol and other drug treatment mediator to mechanism to implementation: A systematic review and the cases of self-efficacy, social support, and craving, *Alcohol, Clinical and Experimental Research* (2024). [DOI: 10.1111/acer.15411](#)

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