

## **Abstract**

### Background

A number of studies across countries have proven that the methadone maintenance program, if efficiently started and implemented, is really effective tool both for treatment of opioid dependence and harm reduction. The expansion of methadone substitution programmes in Kazakhstan may have a positive influence upon the health and social climate inside the country. The main target of this research is to survey the attitudes of medical doctors regarding opioid substitution treatment in Kazakhstan.

### Methods

The study was composed of two surveys. Questionnaires were distributed (administered by electronic mail) to 17 centres for drug addiction treatment all over Kazakhstan. 19 medical doctors not yet providing opioid substitution treatment and 6 medical doctors enrolled in opioid substitution treatment responded to the questionnaire. Two therapists also participated this research and their responses are mentioned as well. Quantitative data were supplemented and enhanced by use of qualitative data obtained by analysis of original documents and by interviews with two key informants. Attitudes were measured using both multiple and single choice question types and a 5 point Likert scale.

### Findings

Individual viewpoints of the first group of participants varied, but not largely. The fraction of the second group (doctors providing opioid substitution treatment) and therapists were with a positive attitude towards substitution treatment. Obtained results indicate some factors affecting implementation of opioid substitution treatment. Results identified significant lack of relevant and trusted resources in Russian and Kazakh languages.

### Conclusions

In order to ensure transparency and accountability, it is appropriate to use resources that are aligned with principles of evidence-based practice. The problem cannot be dealt with by looking at it through one aspect only – it is important to disseminate information in a proper way, without selection that could be misleading. Authors should clearly reference all sources used in their work. It is appropriate to encourage medical doctors by providing resources that are aligned with principles of evidence-based practice. Other opportunities for improvement were identified, including making import of methadone less complicated as well as entry requirements for clients. Improvements can be achieved also by asking experienced professionals to support new and existing methadone substitution programmes and by adding appropriate courses at universities. Obtained results indicate considering organizing training options and a variety of educational programmes.

