

APPENDIX 15: GRADE EVIDENCE PROFILE TABLES

1.1 SERVICE DELIVERY MODELS

1.1.1 GRADE profile for RCTs comparing integrated service models with standard care

Quality assessment							Summary of findings				Quality	Importance
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect			
							INTEGRATED SERVICE MODELS	STANDARD CARE	Relative (95% CI)	Absolute		
Substance use: 1. Substance use rating (high=poor) - by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	SMD 0.14 higher (0.26 lower to 0.54 higher)	⊕⊕○○ LOW	CRITICAL
Substance use: 1. Substance use rating (high=poor) - by 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	SMD 0.18 higher (0.22 lower to 0.58 higher)	⊕⊕○○ LOW	CRITICAL
Substance use: 1. Substance use rating (high=poor) - by 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	SMD 0.15 lower (0.55 lower to 0.25 higher)	⊕⊕○○ LOW	CRITICAL
Substance use: 1. Substance use rating (high=poor) - by 24 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	SMD 0.05 higher (0.35 lower to 0.45 higher)	⊕⊕○○ LOW	CRITICAL
Substance use: 2. Days used substances - by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	SMD 0.08 higher (0.33 lower to 0.48 higher)	⊕⊕○○ LOW	CRITICAL

Substance use: 2. Days used substances - by 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	SMD 0.11 higher (0.3 lower to 0.51 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 2. Days used substances - by 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	SMD 0.09 higher (0.31 lower to 0.49 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 2. Days used substances - by 24 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	SMD 0.13 higher (0.28 lower to 0.53 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Service use: 1. Days in stable community residences (not in hospital) - by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	MD 3.17 higher (0.52 lower to 6.86 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Service use: 1. Days in stable community residences (not in hospital) - by 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	46	49	-	MD 2.84 higher (2.07 lower to 7.75 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Service use: 1. Days in stable community residences (not in hospital) - by 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	46	49	-	MD 6.46 higher (1.36 to 11.56 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL
Service use: 1. Days in stable community residences (not in hospital) - by 24 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	46	49	-	MD 5.7 higher (0.59 to 10.81 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL

¹ Optimal information size not met.

² CI includes both 1) no effect and 2) appreciable benefit or appreciable harm.

1.1.2 GRADE profile for RCTs comparing integrated assertive community treatment with integrated case management

Quality assessment							Summary of findings					Importance
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect		Quality	
							INTEGRATED ACT	CLINICAL CASE MANAGEMENT	Relative (95% CI)	Absolute		
Death - by 36 months												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	7/208 (3.4%)	6/213 (2.8%)	RR 1.18 (0.39 to 3.57)	5 more per 1000 (from 17 fewer to 72 more)	⊕⊕○○ LOW	CRITICAL
Substance use: 1. Not in remission - by 36 months - alcohol												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	43/75 (57.3%)	34/68 (50%)	RR 1.15 (0.84 to 1.56)	75 more per 1000 (from 80 fewer to 280 more)	⊕⊕○○ LOW	CRITICAL
Substance use: 1. Not in remission - by 36 months - drugs												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	26/45 (57.8%)	26/40 (65%)	RR 0.89 (0.63 to 1.25)	72 fewer per 1000 (from 240 fewer to 162 more)	⊕⊕○○ LOW	CRITICAL
Substance use: 2. Substance abuse (SATS, low=poor) [skewed data] - by 6 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	198	181	-	SMD 0.03 higher (0.17 lower to 0.23 higher)	⊕⊕⊕○ MODERATE	CRITICAL
Substance use: 2. Substance abuse (SATS, low=poor) [skewed data] - by 12 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	192	182	-	SMD 0.08 higher (0.23 lower to 0.39 higher)	⊕⊕⊕○ MODERATE	CRITICAL
Substance use: 2. Substance abuse (SATS, low=poor) [skewed data] - by 18 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	193	182	-	SMD 0.02 lower (0.22 lower to 0.19 higher)	⊕⊕⊕○ MODERATE	CRITICAL
Substance use: 2. Substance abuse (SATS, low=poor) [skewed data] - by 24 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	184	181	-	SMD 0.11 higher (0.14 lower to 0.37 higher)	⊕⊕⊕○ MODERATE	CRITICAL

										higher)		
Substance use: 2. Substance abuse (SATS, low=poor) [skewed data] - by 30 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	185	173	-	SMD 0.11 higher (0.1 lower to 0.31 higher)	⊕⊕⊕ MODERATE	CRITICAL
Substance use: 2. Substance abuse (SATS, low=poor) [skewed data] - by 36 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	183	177	-	SMD 0.05 higher (0.15 lower to 0.26 higher)	⊕⊕⊕ MODERATE	CRITICAL
Service use: 1. Days in stable community residences (not in hospital) - by 12 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	197	181	-	MD 10 lower (38.61 lower to 18.6 higher)	⊕⊕ LOW	CRITICAL
Service use: 1. Days in stable community residences (not in hospital) - by 24 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	194	183	-	MD 8.54 higher (4.46 lower to 21.55 higher)	⊕⊕ LOW	CRITICAL
Service use: 1. Days in stable community residences (not in hospital) - by 36 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	186	178	-	MD 5.17 higher (9.2 lower to 19.55 higher)	⊕⊕ LOW	CRITICAL
Functioning: 1. Average general score (GAS, low=poor) - by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	87	75	-	SMD 0.13 higher (0.18 lower to 0.43 higher)	⊕⊕ LOW	CRITICAL
Functioning: 1. Average general score (GAS, low=poor) - by 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	89	82	-	SMD 0.07 higher (0.23 lower to 0.38 higher)	⊕⊕ LOW	CRITICAL
Functioning: 1. Average general score (GAS, low=poor) - by 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	90	86	-	SMD 0.11 higher (0.18 lower to 0.41 higher)	⊕⊕ LOW	CRITICAL
Functioning: 1. Average general score (GAS, low=poor) - by 24 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	81	85	-	SMD 0.18 higher (0.13 lower to 0.48 higher)	⊕⊕ LOW	CRITICAL

Functioning: 1. Average general score (GAS, low=poor) - by 30 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	84	80	-	SMD 0.06 lower (0.37 lower to 0.24 higher)	⊕⊕OO LOW	CRITICAL
Functioning: 1. Average general score (GAS, low=poor) - by 36 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	85	85	-	SMD 0.04 higher (0.26 lower to 0.34 higher)	⊕⊕OO LOW	CRITICAL
Satisfaction: Average general score (QOLI, low=poor) - by 6 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	189	172	-	SMD 0.07 lower (0.28 lower to 0.14 higher)	⊕⊕OO LOW	CRITICAL
Satisfaction: Average general score (QOLI, low=poor) - by 12 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	193	179	-	SMD 0.01 higher (0.19 lower to 0.22 higher)	⊕⊕OO LOW	CRITICAL
Satisfaction: Average general score (QOLI, low=poor) - by 18 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	194	183	-	SMD 0.06 higher (0.17 lower to 0.29 higher)	⊕⊕OO LOW	CRITICAL
Satisfaction: Average general score (QOLI, low=poor) - by 24 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	186	184	-	SMD 0.01 higher (0.2 lower to 0.23 higher)	⊕⊕OO LOW	CRITICAL
Satisfaction: Average general score (QOLI, low=poor) - by 30 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	188	178	-	SMD 0.02 higher (0.19 lower to 0.22 higher)	⊕⊕OO LOW	CRITICAL
Satisfaction: Average general score (QOLI, low=poor) - by 36 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	190	183	-	SMD 0.07 higher (0.13 lower to 0.27 higher)	⊕⊕OO LOW	CRITICAL

¹ Optimal information size not met.

² CI includes both 1) no effect and 2) appreciable benefit or appreciable harm.

1.1.3 GRADE profile for RCTs comparing staffed accommodation with standard care

Quality assessment							Summary of findings				Quality	Importance
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect			
							STAFF ACCOMMODATION	STANDARD CARE	Relative (95% CI)	Absolute		
Substance use: 1. Days used alcohol (low=poor) - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	57	47	-	SMD 0.32 lower (0.71 lower to 0.07 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 1. Days used alcohol (low=poor) - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	49	48	-	SMD 0 higher (0.4 lower to 0.4 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 1. Days used alcohol (low=poor) - 9 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	45	37	-	SMD 0.05 lower (0.49 lower to 0.38 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 2. Level of alcohol use (low=poor) - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	57	47	-	SMD 0.21 lower (0.6 lower to 0.18 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 2. Level of alcohol use (low=poor) - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	49	48	-	SMD 0.06 lower (0.46 lower to 0.33 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 2. Level of alcohol use (low=poor) - 9 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	45	37	-	SMD 0.21 lower (0.65 lower to 0.23 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 3. Days used drugs (low=poor) - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	57	47	-	SMD 0.22 lower (0.61 lower to 0.17 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 3. Days used drugs (low=poor) - 6 months (Better indicated by lower values)												

1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	49	48	-	SMD 0.11 lower (0.51 lower to 0.28 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 3. Days used drugs (low=poor) - 9 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	45	37	-	SMD 0.04 lower (0.48 lower to 0.39 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 4. Severity of drug use (low=poor) - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	57	47	-	SMD 0.14 lower (0.52 lower to 0.25 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 4. Severity of drug use (low=poor) - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	49	48	-	SMD 0.18 lower (0.57 lower to 0.22 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 4. Severity of drug use (low=poor) - 9 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	45	37	-	SMD 0.16 lower (0.6 lower to 0.28 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Functioning: 1. % time on streets (low=poor) - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	57	47	-	SMD 0.04 higher (0.35 lower to 0.42 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Functioning: 1. % time on streets (low=poor) - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	49	48	-	SMD 0.06 lower (0.46 lower to 0.34 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Functioning: 1. % time on streets (low=poor) - 9 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	45	37	-	SMD 0.1 higher (0.34 lower to 0.54 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Functioning: 2. % time in independent housing (low=poor) - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	57	47	-	SMD 0.16 lower (0.55 lower to 0.23 higher)	⊕⊕⊕⊕ LOW	CRITICAL
Functioning: 2. % time in independent housing (low=poor) - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	49	48	-	SMD 0.22 lower	⊕⊕⊕⊕ LOW	CRITICAL

	trials	limitations	inconsistency	indirectness	serious ^{1,2}					(0.61 lower to 0.18 higher)	LOW	
Functioning: 2. % time in independent housing (low=poor) - 9 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	45	37	-	SMD 0.22 higher (0.22 lower to 0.66 higher)	⊕⊕⊕ LOW	CRITICAL

¹ Optimal information size not met.

² CI includes both 1) no effect and 2) appreciable benefit or appreciable harm.

1.2 PSYCHOLOGICAL/PSYCHOSOCIAL INTERVENTIONS

1.2.1 GRADE profile for RCTs comparing CBT with standard care

Quality assessment							Summary of findings					Importance
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect		Quality	
							CBT	standard care	Relative (95% CI)	Absolute		
Substance use: 1. Using substances - by 1 month - alcohol or drugs												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	9/31 (29%)	18/30 (60%)	RR 0.48 (0.26 to 0.9)	31 fewer per 100 (from 6 fewer to 44 fewer)	⊕⊕⊕O MODERATE	CRITICAL
Substance use: 2. Using substances - by 3 months - alcohol												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	7/25 (28%)	1/21 (4.8%)	RR 5.88 (0.79 to 44.03)	23 more per 100 (from 1 fewer to 205 more)	⊕⊕OO LOW	CRITICAL
Substance use: 2. Using substances - by 3 months - drugs												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	12/25 (48%)	5/21 (23.8%)	RR 2.02 (0.85 to 4.8)	24 more per 100 (from 4 fewer to 90 more)	⊕⊕OO LOW	CRITICAL
Substance use: 2. Using substances - by 3 months - alcohol or drugs												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	20/31 (64.5%)	26/30 (86.7%)	RR 0.74 (0.55 to 1)	23 fewer per 100 (from 39 fewer to 0 more)	⊕⊕OO LOW	CRITICAL
Substance use: 3. Any substance (skewed data) - average score (ASI) by 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,3}	none	31	31	-	MD 0.07 lower (0.16 lower to 0.02 higher)	⊕⊕OO LOW	CRITICAL
Substance use: 3. Any substance (skewed data) - average score (ASI) by 6-9 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,3}	none	31	31	-	MD 0.06 lower (0.16 lower to 0.04 higher)	⊕⊕OO LOW	CRITICAL
Substance use: 3. Any substance (skewed data) - days reporting any substance use (ASI) by 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2,3}	none	31	30	-	MD 2.1 lower (5.9 lower to 1.7 higher)	⊕⊕OO LOW	CRITICAL
Substance use: 3. Any substance (skewed data) - days reporting any substance use (ASI) by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2,3}	none	31	30	-	MD 2.7 lower (7.25 lower to 1.85 higher)	⊕⊕OO LOW	CRITICAL
Substance use: 4. Drugs use - by 3 months (skewed data) (Better indicated by lower values)												

2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,3}	none	54	49	-	MD 0.05 higher (1.55 lower to 1.66 higher)	⊕⊕⊕ LOW	CRITICAL
Substance use: 5. Drugs use - by 6 months (skewed data) - days reporting drug use (ASI) by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2,3}	none	29	28	-	MD 3.7 lower (7.99 lower to 0.59 higher)	⊕⊕⊕ LOW	CRITICAL
Substance use: 6. Alcohol use - by 3 months (skewed data) (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2,3}	none	54	49	-	MD 1.95 lower (4.48 lower to 0.58 higher)	⊕⊕⊕ LOW	CRITICAL
Substance use: 7. Alcohol use - by 6 months (skewed data) - days reporting alcohol use (ASI) by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2,3}	none	29	28	-	MD 0 higher (3.66 lower to 3.66 higher)	⊕⊕⊕ LOW	CRITICAL

¹ Optimal information size not met.

² CI includes both 1) no effect and 2) appreciable benefit or appreciable harm.

³ Skewed data.

1.2.2 GRADE profile for RCTs comparing MI with standard care

Quality assessment							Summary of findings				Quality	Importance
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect			
							Motivational interviewing	standard care	Relative (95% CI)	Absolute		
Substance use: 1. Not abstinent or not improved on all substances - by 12 months												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	5/13 (38.5%)	9/12 (75%)	RR 0.51 (0.24 to 1.1)	37 fewer per 100 (from 57 fewer to 8 more)	⊕⊕⊕ LOW	CRITICAL
Substance use: 2. Not abstaining from alcohol - by 3 months												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	6/15 (40%)	10/13 (76.9%)	RR 0.52 (0.26 to 1.03)	37 fewer per 100 (from 57 fewer to 2 more)	⊕⊕⊕ LOW	CRITICAL
Substance use: 2. Not abstaining from alcohol - by 6 months												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	5/15 (33.3%)	12/13 (92.3%)	RR 0.36 (0.17 to 0.75)	59 fewer per 100 (from 23 fewer to 77 fewer)	⊕⊕⊕ MODERATE	CRITICAL
Substance use: 3. Other measures of alcohol use (skewed data) (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	15	13	-	SMD 1.29 lower (2.12 to 0.46 lower)	⊕⊕⊕ MODERATE	CRITICAL
Substance use: 3. Other measures of alcohol use (skewed data) - drinking days - by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,3}	none	15	13	-	SMD 1.29 lower (2.12 to 0.46 lower)	⊕⊕⊕ LOW	CRITICAL

¹ Optimal information size not met.

² CI includes both 1) no effect and 2) appreciable benefit or appreciable harm.

³ Skewed data.

1.2.3 GRADE profile for RCTs comparing CBT plus MI with standard care

Quality assessment							Summary of findings				Quality	Importance
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect			
							CBT + motivational interviewing	standard care	Relative (95% CI)	Absolute		
Death - by about 1 year												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	4/83 (4.8%)	3/83 (3.6%)	RR 1.25 (0.22 to 7.28)	1 more per 100 (from 3 fewer to 23 more)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 1. Average number of different drugs used during the past month (OTI, high = poor) - by 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	58	61	-	MD 0.37 higher (0.01 lower to 0.75 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL
Substance use: 1. Average number of different drugs used during the past month (OTI, high = poor) - by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	58	61	-	MD 0.19 higher (0.22 lower to 0.6 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL
Substance use: 2. Average score - alcohol (skewed data) - alcohol - estimated daily consumption - past month - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	21	31	-	MD 1.57 higher (0.9 lower to 4.04 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL
Substance use: 2. Average score - alcohol (skewed data) - alcohol - estimated daily consumption - past month - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	21	31	-	MD 1.21 higher (1.07 lower to 3.49 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL
Substance use: 2. Average score - alcohol (skewed data) - alcohol - estimated daily consumption - past month - 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	18	28	-	MD 1.39 higher (1.1 lower to 3.88 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL
Substance use: 3. Average score - amphetamine (skewed data) - amphetamine- estimated daily consumption - past month - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	11	9	-	MD 0.09 higher (0.4 lower to 0.58 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL
Substance use: 3. Average score - amphetamine (skewed data) - amphetamine- estimated daily consumption - past month - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	11	9	-	MD 1.28 lower (2.79 lower to 0.23 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL
Substance use: 3. Average score - amphetamine (skewed data) - amphetamine- estimated daily consumption - past month - 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	9	8	-	MD 0.13 higher (0.11 lower to 0.37 higher)	⊕⊕⊕⊕ MODERATE	CRITICAL

Substance use: 4. Average score - cannabis (skewed data) - cannabis- estimated daily consumption - past month - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	39	34	-	MD 0.57 lower (4.27 lower to 3.13 higher)	⊕⊕⊕ LOW	CRITICAL
Substance use: 4. Average score - cannabis (skewed data) - cannabis- estimated daily consumption - past month - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	39	34	-	MD 0.7 higher (4 lower to 5.4 higher)	⊕⊕⊕ LOW	CRITICAL
Substance use: 4. Average score - cannabis (skewed data) - cannabis- estimated daily consumption - past month - 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	29	29	-	MD 4.41 higher (1.4 lower to 10.22 higher)	⊕⊕⊕ LOW	CRITICAL
Functioning: 1. Average global functioning score (GAF, low = poor) - 3 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	58	61	-	MD 2.7 lower (7.05 lower to 1.65 higher)	⊕⊕⊕ LOW	CRITICAL
Functioning: 1. Average global functioning score (GAF, low = poor) - 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	58	61	-	MD 0.09 lower (3.7 lower to 3.52 higher)	⊕⊕⊕ MODERATE	CRITICAL
Functioning: 1. Average global functioning score (GAF, low = poor) - 9 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	17	15	-	MD 8.44 higher (0.48 to 16.4 higher)	⊕⊕⊕ MODERATE	CRITICAL
Functioning: 1. Average global functioning score (GAF, low = poor) - 12 months (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	61	68	-	MD 4.89 higher (2.62 lower to 12.39 higher)	⊕⊕⊕ LOW	CRITICAL
Functioning: 1. Average global functioning score (GAF, low = poor) - 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	15	13	-	MD 6.68 higher (5.24 lower to 18.6 higher)	⊕⊕⊕ LOW	CRITICAL
Functioning: 2. Average social functioning score (SFS, low = poor) - by end of 9 month treatment (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	17	15	-	MD 5.01 higher (0.55 lower to 10.57 higher)	⊕⊕⊕ LOW	CRITICAL
Functioning: 2. Average social functioning score (SFS, low = poor) - by 12 months (3 months following treatment end) (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ²	none	17	15	-	MD 7.27 higher (0.86 to 13.68 higher)	⊕⊕⊕ MODERATE	CRITICAL

¹ CI includes both 1) no effect and 2) appreciable benefit or appreciable harm.

² Optimal information size not met.

1.2.4 GRADE profile for RCTs comparing social skills training/ psychoeducation with standard care

Quality assessment							Summary of findings				Quality	Importance
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect			
							Social skills training/psychoeducation	standard care	Relative (95% CI)	Absolute		
Substance use: 1. Average score - C-DIS-R Drugs (skewed data) - C-DIS-R DRUGS by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	21	25	-	MD 2.99 lower (5.51 to 0.47 lower)	⊕⊕⊕O MODERATE	CRITICAL
Substance use: 1. Average score - C-DIS-R Drugs (skewed data) - C-DIS-R DRUGS by 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	21	25	-	MD 2.47 lower (5.76 lower to 0.82 higher)	⊕⊕OO LOW	CRITICAL
Substance use: 1. Average score - C-DIS-R Drugs (skewed data) - C-DIS-R DRUGS by 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	7	18	-	MD 0.79 lower (3.35 lower to 1.77 higher)	⊕⊕⊕O MODERATE	CRITICAL
Substance use: 2. Average score - C-DIS-R Alcohol (skewed data) - C-DIS-R Alcohol by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	21	25	-	MD 1.81 lower (3.41 to 0.21 lower)	⊕⊕⊕O MODERATE	CRITICAL
Substance use: 2. Average score - C-DIS-R Alcohol (skewed data) - C-DIS-R Alcohol by 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	21	25	-	MD 0.71 lower (2.54 lower to 1.12 higher)	⊕⊕⊕O MODERATE	CRITICAL
Substance use: 2. Average score - C-DIS-R Alcohol (skewed data) - C-DIS-R Alcohol by 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	7	18	-	MD 0.04 higher (2.27 lower to 2.35 higher)	⊕⊕⊕O MODERATE	CRITICAL
Functioning: 1. Average role functioning score (RFS, high = better functioning) - by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	22	25	-	MD 0.61 higher (1.63 lower to 2.85 higher)	⊕⊕⊕O MODERATE	CRITICAL

Functioning: 1. Average role functioning score (RFS, high = better functioning) - by 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹	none	22	25	-	MD 1.07 higher (1.15 lower to 3.29 higher)	⊕⊕⊕O MODERATE	CRITICAL
Functioning: 1. Average role functioning score (RFS, high = better functioning) - by 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	7	18	-	MD 2.55 lower (6.24 lower to 1.14 higher)	⊕⊕OO LOW	CRITICAL
Functioning: 2. Average social adjustment score (SAS, high = better functioning) - by 6 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	22	25	-	MD 0.92 lower (6.58 lower to 4.74 higher)	⊕⊕OO LOW	CRITICAL
Functioning: 2. Average social adjustment score (SAS, high = better functioning) - by 12 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	22	25	-	MD 2.58 higher (3.39 lower to 8.55 higher)	⊕⊕OO LOW	CRITICAL
Functioning: 2. Average social adjustment score (SAS, high = better functioning) - by 18 months (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	7	18	-	MD 4.66 lower (15.29 lower to 5.97 higher)	⊕⊕OO LOW	CRITICAL
Service use: Days in hospital (skewed data) (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}	none	16	13	-	MD 1.8 higher (4.46 lower to 8.06 higher)	⊕⊕OO LOW	CRITICAL

¹ Optimal information size not met.

² CI includes both 1) no effect and 2) appreciable benefit or appreciable harm.

1.2.5 GRADE profile for RCTs comparing contingency management with standard care

Quality assessment							Summary of findings				Quality	Importance
No of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision	Other considerations	No of patients		Effect			
							Contingency management	standard care	Relative (95% CI)	Absolute		
Substance use: 1. No. of days/weeks of drug use (confirmation by urine drug screen) - Days of cocaine use (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	serious ¹	serious ²	none	15	15	-	SMD 1.04 lower (1.8 to 0.28 lower)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 2. No. of days/weeks of alcohol use (confirmation by breathalyzer) (Better indicated by lower values)												
2	randomised trials	no serious limitations	no serious inconsistency	serious ¹	serious ²	none	37	34	-	SMD 1.21 lower (1.68 to 0.73 lower)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 3. No. of days/weeks using both drugs and alcohol (confirmation by urine or breathalyzer) - weeks (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	serious ¹	serious ²	none	22	19	-	SMD 0.82 lower (1.47 to 0.17 lower)	⊕⊕⊕⊕ LOW	CRITICAL
Substance use: 4. Alcohol positive breathalyzer samples (Better indicated by lower values)												
1	randomised trials	no serious limitations	no serious inconsistency	serious ¹	serious ²	none	15	15	-	SMD 0.97 lower (3.03 to 0.91 lower)	⊕⊕⊕⊕ LOW	CRITICAL

¹ Research conducted in US; both intervention and control difficult to generalise to UK setting.

² Optimal information size not met.