

Statement by the Participants at the WFTC Genoa Institute, October 18, 2010

This Institute has brought together 200 people from the 52 countries represented in the WFTC who are involved with and committed to the work of therapeutic communities as they contribute a response to the global substance misuse and related problems. Therapeutic communities work to teach people, coming together in a community, to learn to use the community to help themselves attain the highest possible levels of physical, mental and social health, to achieve well-being, regain their sense of meaning and of values transcending self / spirituality, and to discover a new way of living.

Therapeutic communities have worked to assist people with substance problems for over 50 years. In that time much has changed:

- The number of organisations involved has increased substantially, as has the range of services and interventions offered.**
- In this context, through a lack of understanding, therapeutic communities in some countries have been used as last resort for those who have not been able to use effectively the other available services rather than an appropriate intervention based on the evidence of effectiveness.**
- The legislative and regulatory framework has changed providing new opportunities for services but also imposing requirements which**

may weaken or undermine the effectiveness of the therapeutic community.

- We have learnt much more about the complexity of the problems experienced by those who seek our help, including, for instance, childhood sexual abuse, mental health problems and serious health and social problems in addition to their drug problem and have developed our capacity to respond.
- The multiple problems experienced by those who come to us have required multi-modality interventions which can address these complex needs, but the funding system has not reflected this.
- The context in which we operate has also changed, with new forms of dependence, a wider range of substances being used alone or in combinations, the normalisation of substance use and the weakening of concepts and behaviours which support social and community solidarity in favour of individualism.
- The accumulated weight of evidence gathered over the years has shown the effectiveness of the therapeutic community in terms of both individual and social outcomes and in terms of its cost effectiveness.

The changes which have occurred provide challenges which need to be addressed by therapeutic communities but also by those who commission and pay for the provision of treatment services. Amongst these challenges we draw attention to the following:

- **We need to continue and to strengthen our networking and to develop new ways of networking, formally and informally, to improve the quality and effectiveness of our interventions.**
- **Those who fund, provide and use our services need to understand that amongst the responses, acute interventions are only part of the path to achieving physical, mental and social health. Funding systems need to reflect this. Services should be encouraged and supported to provide the necessary range of early intervention, treatment, education, training and support.**
- **In the development of legislative and regulatory frameworks, representatives of those who provide services must be involved so that these frameworks support and strengthen rather than undermine effectiveness based on our knowledge of what works.**
- **Those who provide services need to understand and use the evidence base for therapeutic communities and to communicate this evidence to those who commission or pay for services so that treatment interventions reflect the evidence and respond to the desired outcomes of reducing individual and social harm and improving individual and social health in its broadest context.**
- **To support this, therapeutic communities need to strengthen both their formal systems of training, working with universities and training institutes and their less formal training based on the development and exchange of knowledge on best practice so that**

both their professional competence and their actual practice can be constantly updated.

In their work with people who have substance and associated problems therapeutic communities have proved themselves to be effective and to give added value, for example by restoring families and protecting children, as well as through the direct benefits of reduced crime, improved health and restoration of individuals to social and personal responsibility. They have given community and hope to the most marginalised in many parts of the world. They have the capacity to extend their services to reach other people in need of support and assistance to recover or discover a holistic and healthy way of living. However, they need the assistance and leadership of the WFTC, regional and national federations, to support their work with the evidence and knowledge base and with advocacy for the effectiveness of the approach. And they need those with responsibility for policy and for funding the provision of services to recognise the therapeutic community model as an essential and effective component of a comprehensive prevention, treatment and social integration system, which needs to be supported and financed appropriately.

We restate our commitment to work to restore the wholeness of the person and through this, to improve the social well-being and wholeness of the society in which we operate. We call upon public authorities, civil society and spiritual organisations to support and join us in this commitment.