

APPENDIX 2

Glossary of Terms

Please note that the definitions provided below have been sourced from documents from variety of organizations.

The sources of the definitions can be identified by the following symbols:

- Taken from EUDA (*Implementing quality standards for drug services and systems: a six-step guide to support quality assurance*; www.Emcdda.europa.eu).
- ❖ Taken from ISQua (*Guidelines and Principles for the Development of Health and Social Care Standards 5th Edition*) (ISQua is the International Society for Quality in Health Care).
- ✓ Taken from the UNODC/WHO QA Toolkits on System and Service Standards for the Treatment of Drug Use Disorders.

➤ **Accreditation**

Accreditation is the process by which an institution delivering a service is independently assessed for quality against pre-defined criteria and standards, which are set by the accrediting body.

➤ **Audit**

An audit is a systematic examination of an activity, process, data, records or environment.

➤ **Certification**

Certification is the formal attestation or confirmation of certain characteristics of an object, person, or organization. This confirmation is often, but not always, provided by some form of external review, education, assessment, or audit.

✓ **Competency**

The knowledge, skills, abilities, behaviors, experiences and expertise to be able to effectively perform a particular task and activity.

✓ **Conflict of Interest**

Jurisdictions define conflict of interest differently, but the following elements are usually present.

Public Official: Covered individuals qualify as public officials under the domestic law of the country.

Official Action: The covered individual takes an action in his or her official capacity including making decisions or otherwise participating substantially in the official process of deliberation, action or recommendation to act, where the public official plays a role.

Private Interest: The covered official, or other persons—including legal entities—linked to the official has a private interest, usually of pecuniary nature, that may be affected by the official action.

Optional elements of the definition sometimes include public duty, public trust or the requirement for specific norms in the legislation to be violated as a result of the conflict of interest. Conflicts of interest may arise in all environments and sometimes irrespectively of the will of the public official. Every person has private interests; civil servants, however, have a duty to serve the public interest and to make decisions using objective criteria, in an impartial manner, [Preventing and Managing Conflicts of Interest in the Public Sector : Good Practices Guide](#) (2020, World Bank, OECD and UNODC).

Other source: [OECD Guidelines for Managing Conflict of Interest in the Public Service](#)

❖ **Contract**

Formal agreement that stipulates the terms and conditions for services that are obtained from, or provided to, another organization.

✓ **Corruption**

UNCAC (United Nations Convention Against Corruption, United Nations, New York, 2004) does not define corruption as such. It rather defines specific acts of corruption and urges States to criminalize these acts in their jurisdictions. This decision is in part the outcome of the difficulty of defining corruption. It also derives from the fact that corruption ranges from a single instance of bribery of a low-ranking customs official to the transformation of a democracy into a kleptocracy (i.e., government by corrupt leaders who exploit people and natural resources in order to extend their personal wealth and political power).

This has parallels with other international instruments that address global crimes, such as organized crime and terrorism, where the international community did not agree on a definition of the overarching concept but approached this matter by defining specific acts.

The illegal actions defined by UNCAC as corruption offences include:

- Bribery in the public and private sectors (articles 15, 16 and 21)
- Embezzlement in the public and private sectors (articles 17 and 22)
- Trading in influence (article 18)
- Abuse of functions (article 19)
- Illicit enrichment (article 20)
- Money-laundering (article 23)
- Concealment (article 24) and obstruction of justice (article 25) related to the offenses listed above.

For example, UNCAC article 15 defines bribery as “the promise, offering or giving, to a public official, directly or indirectly, of an undue advantage, for the official himself or herself or another person or entity, in order that the official act or refrain from acting in the exercise of his or her official duties”.

As it pertains specifically to Drug Treatment, in [Corruption Drug treatment fact sheet](#), UNODC identified the following transparency violations are most common in drug treatment:

- **Patient enticement.** Patients are given unethical incentives to enter, stay, or switch addiction treatment facilities.
- **Listing hijacks.** Unaffiliated individuals alter the contact details of treatment facilities on Google Business or Google Maps to redirect phone calls to an unauthorized treatment facility or phone centers.
- **Misleading language or misrepresentation of services.** Treatment facilities deny affiliation with other facilities or organizations. Provided services, accreditation status, clinical staff credentials, and insurances accepted are inaccurately represented or facilities, locations, and amenities are misdescribed.
- **Patient privacy violations.** Patients' personal data are used as part of a sales or marketing campaign without consent. This is a violation of the protection of sensitive personal health information.
- **Insurance overbilling and fraud.** Insurance companies receive disproportionate billing or are billed for treatments that never took place. Urine drug screenings are common examples. ["Buyer beware" when it comes to addiction treatment - Harvard Health.](#)
- **Bribery.** Individuals accepting bribes to either not report drug use or provide access to treatment and services.
- **Sexual favors/Rape.** Health personnel abusing their power and asking for sexual favors. The patient is put under emotional pressure to get access to treatment and services." [Anti-Corruption Module 1](#) (UNODC).

✓ ***Drug Use Disorders Treatment System (for this work, the term Substance Use Disorder was chosen in accordance with DSM-5)***

A drug use disorders treatment system is a planned, coordinated and resourced group of services that work together to provide specialized drug use disorders treatment and other interventions to promote recovery, health and wellbeing in people with drug use disorders and meet agreed outcomes.

The system may consist of levels or tiers of treatment modalities and interventions including:

- Non-specialized or mainstream health, social care and criminal justice services: providing screening, brief intervention and referral to drug treatment; mainstream health and social care for people who use drugs and their families.
- Specialized community and in-patient drug use disorders treatment and residential rehabilitation services.
- Mainstream and community interventions to enable patient recovery and reintegration through training, employment and housing, community initiatives and mutual aid.

➤ ***Evaluation of a Program***

Evaluation is a process that critically examines a program. It involves collecting and analyzing information about a program's activities, characteristics, and outcomes. Its purpose is to make

judgments about a program, to improve its effectiveness, and/or to inform programming decisions (Patton, 1987).

➤ **Evidence-Based Intervention**

This is a concept imported from the medical field, defined as 'the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients' (Sackett, 1996). When applied to drug demand reduction, this refers to the use of scientific results to inform interventions decisions.

For more information and guidance, see WHO's [Guide for Evidence Informed Decision-Making](#).

In addition, the Institute of Medicine (IOM) defines clinical practice guidelines as "statements that include recommendations, intended to optimize patient care, that are informed by a systematic review of evidence and an assessment of the benefits and harms of alternative care options" [1].

✓ **Human Rights**

Human rights are rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion, or any other status. Human rights include the right to life and liberty, freedom from slavery and torture, freedom of opinion and expression, the right to work and education, and many more. Everyone is entitled to these rights, without discrimination. ([Human Rights | United Nations](#))

✓ **Patient**

'Patient' is the UNODC preferred terminology for the recipients of treatment for drug use disorders. We recognize that some countries prefer terms such as 'service users' and 'clients', particularly for those in receipt of low threshold interventions and services.

❖ **Policy**

A written operational statement that formalizes the approach to tasks that is consistent with the organizational objectives.

❖ **Procedure**

A written set of instructions conveying the approved and recommended steps for a particular act or series of acts.

❖ **Process**

A series of actions or steps taken in order to achieve a particular end.

➤ **Quality Assurance**

Quality assurance is a process which involves continuous monitoring and striving to improve quality and outcomes. The concept includes the assessment or evaluation of the quality of care; identification of problems or shortcomings in the delivery of care; design of activities to overcome these deficiencies; and follow-up monitoring to ensure effectiveness of corrective steps. Quality standards are one of the tools used in the quality assurance process. Based on the WHO definition, quality assurance systems in drug demand reduction focus on the extent to which drug-related interventions, services or systems improve outcomes.

➤ **Quality Standards**

Quality standards are principles and sets of rules often set by recognized national or international bodies, that may be used to implement interventions. A quality standard may be described as ‘a statement of expected requirements’. They can refer to content issues, processes, or to structural aspects. Typically, the standards proposed in the health field are evidence based, and provide clear and aspirational, yet measurable, statements related to content, processes, or structural aspects of quality assurance, such as environment and staffing composition.

❖ **Values**

Principles, beliefs or statements of philosophy that guide behavior, which may include social or ethical issues.