Reviewer's report

Title: Attitudes towards 12-step groups and referral practices in a treatment culture unfamiliar to 12-step ideology; a survey study

Version: 3 Date: 9 May 2009

Reviewer: John JFK Kelly

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This paper is a clear, well-written, and very nicely detailed account of a study of addiction treatment professionals' attitudes and referral practices pertaining to 12-step groups (TSGs), such as AA or NA. Strengths of the study include a large sample of addiction treatment staff (N=365) from all 30 substance use disorder treatment facilities in southern Norway and a high survey completion rate (79.7%). The methods are well documented and appear appropriate for the research questions posed. The collected data are summarized and analyzed appropriately and documented with sufficient detail. The conclusions and implications of the findings are kept within the limitations of the data and study design.

The study found that while attitudes were generally favorable toward TSGs among the clinical staff in this region of Norway, they were lower than in the USA. Also, referrals to TSGs were very low even though staff perceived a much higher proportion of patients to be both eligible and suitable for referral. Staff that referred more patients to TSGs were those with greater knowledge about, and more positive attitudes toward, TSGs, those with greater confidence in their ability to make such referrals, and those staff that incorporated 12-step principles into their counseling work.

The study's findings are at odds with the Norwegian government policy goal to increase self-help group utilization and the authors make some compelling recommendations to increase referrals to TSGs by treatment staff.

Major/Minor Essential Revisions

None

Discretionary Revisions

I only have a couple of suggestions:

1. Although there is some mention in the discussion section about ways to increase referrals to TSGs, there might be more explicit mention of qualitative data collection that would facilitate understanding of the exact nature of attitudinal or knowledge-based barriers to referral to TSGs (e.g., common potential concerns about spirituality, medications, a complete abstinence orientation).

2. Other potential avenues for obtaining buy-in from clinical
supervisors/administrators and clinical staff beyond the potential for improved clinical outcomes might be to emphasize the potential health-care cost offset from patients’ participation in organizations such as AA/NA that has been found by Humphreys & Moos (2001, 2007) for example.

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests.