

An Updated Version of the Treatment Effectiveness Assessment (TEA) [Letter]

This article was published in the following Dove Press journal:
Substance Abuse and Rehabilitation

Walter Ling ¹
David Farabee ^{2,3}
Vijay R Nadipelli ⁴
Brian Perrochet³

On behalf of the TEA
Development Group

¹Department of Family Medicine, Center for Behavioral and Addiction Medicine, David Geffen School of Medicine, UCLA, Los Angeles, CA, USA; ²Department of Population Health, New York University School of Medicine, New York, NY, USA; ³Department of Psychiatry and Biobehavioral Sciences Semel Institute, David Geffen School of Medicine, UCLA, Los Angeles, CA, USA; ⁴Global Health Economics and Outcome Research, Indivior Inc., Richmond, VA, USA

Dear editor

The authors are pleased to provide this updated version of the TEA to the community of clinicians and researchers using the TEA. Previous to its original publication in 2012,¹ the TEA had been used for five years by clinicians in office-based and hospital-based treatment settings, as well as by researchers in pilot projects. The TEA's utility and psychometrics were recently studied in a large clinical trial of extended-release buprenorphine for opioid use disorder, demonstrating moderate to strong reliability and validity.³ The TEA has been widely adopted by researchers and clinicians in the United States and around the world. It has been translated into Spanish, Chinese, Lithuanian, and Arabic, and is being used in Europe, Asia, the Americas, and the Middle-East.

Shortly after the 2012 publication we received many queries about the TEA, some of which were addressed in a Letter to the Editor published in 2013.² One frequent question has to do with its use at "baseline" and its subsequent use as a status report. To address that issue more definitively, we are presenting this updated TEA (see [Supplementary Materials](#)), which has been slightly rephrased to make it more suitable for use at baseline while remaining wholly suitable for subsequent use to measure the patient's progress during treatment and recovery.

We encourage all users of the TEA to stay in touch with us by requesting permission for its use to lwalter@ucla.edu so that we can continue to update you on the future development of the TEA.

Note to Users of the TEA (Clinicians and Researchers)

Because the TEA appears so simple and straightforward, it is tempting to simply hand it to patients to be self-administered. We want to emphasize the importance of spending a few minutes to explain to patients that the TEA, although brief, is a comprehensive assessment of their life status, obtained from their perspectives. The apparent simplicity is a function of the instrument's recognition of the patient's powerful capacity to quickly assess the state of his/her life situations as they are meaningful to the patient relative to the domains of the TEA. We also want to emphasize the importance of encouraging patients to provide remarks that elucidate their specific life experiences that led them to provide the scores they marked.

Correspondence: Walter Ling
Tel +1 310 993 8111
Email lwalter@ucla.edu

Disclosure

Dr Walter Ling reports personal fees from Indivior Pharmaceuticals, outside the submitted work. The authors report no other conflicts of interest in this communication.

References

1. Ling W, Farabee D, Liepa D, Wu LT. The Treatment Effectiveness Assessment (TEA): an efficient, patient-centered instrument for evaluating progress in recovery from addiction. *Subst Abuse Rehabil.* 2012;3:129–136. doi:10.2147/SAR.S38902
2. Ling W, Farabee D, Liepa D, Wu LT. Letter to the editor: the Treatment Effectiveness Assessment (TEA). *Subst Abuse Rehabil.* 2013;4:73–74. doi:10.2147/SAR.S48737
3. Ling W, Nadipelli V, Solem C, et al. Measuring recovery in opioid use disorder: clinical utility and psychometric properties of the Treatment Effectiveness Assessment. *Subst Abuse Rehabil.* 2019;10:13–21. doi:10.2147/SAR.S198361

Dove Medical Press encourages responsible, free and frank academic debate. The content of the Substance Abuse and Rehabilitation 'letters to the editor' section does not necessarily represent the views of Dove Medical Press, its officers, agents, employees, related entities or the Substance Abuse and Rehabilitation editors. While all reasonable steps have been taken to confirm the content of each letter, Dove Medical Press accepts no liability in respect of the content of any letter, nor is it responsible for the content and accuracy of any letter to the editor.

Substance Abuse and Rehabilitation

Dovepress

Publish your work in this journal

Substance Abuse and Rehabilitation is an international, peer-reviewed, open access journal publishing original research, case reports, editorials, reviews and commentaries on all areas of addiction and substance abuse and options for treatment and rehabilitation. The

manuscript management system is completely online and includes a very quick and fair peer-review system. Visit <http://www.dovepress.com/testimonials.php> to read real quotes from published authors.

Submit your manuscript here: <http://www.dovepress.com/substance-abuse-and-rehabilitation-journal>