



Organizational-level predictors of adoption over time: Naltrexone in private substance use-disorders treatment centers

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Objective: Prominent on the nation's research agenda on substance-use disorders treatment is the dissemination of effective pharmacotherapies. Thus, the purpose of this article is to use a diffusion of innovations theoretical framework to examine the organizational-level predictors of the adoption of a pharmacotherapy, naltrexone (Revia), in private substance use-disorders treatment centers (N = 165). Method: Data for these analyses were derived from the National Treatment Center Study, which contains four waves of data collected between 1994 and 2003. An event history model examined the impact of culture, leadership characteristics, internal structure, and external characteristics on the likelihood of adopting naltrexone between 1994 and 2003. Results: The results suggest that organizations embracing a 12-step model and those employing more experienced administrators were significantly less likely to adopt naltrexone. Moreover, treatment centers that used prescription drugs, possessed an employee handbook, were accredited, and operated on a for-profit basis were significantly more likely to adopt naltrexone over time. Conclusions: Structural characteristics do affect the innovation adoption behaviors of private substance-use disorders treatment centers. Organizational-level research to practice implications to further the adoption of innovative evidence-based treatments are discussed.