Supplementary material to article by W-L. Chang et al. "Economic evaluation of a bio-psycho-social intervention for comorbid disorders in a traumatized population in post-war Kosovo"

Appendix S1

Throughout each phase, costs were classified into 3 categories:

1. Direct costs were the intervention costs involved in treatment delivery including the cost of health professionals, the expenditure on treatment devices (i.e. biofeedback software), the rent for treatment spaces and the cost of multivitamins for daily intake for 6 months. The cost of health professionals was estimated on the basis of their hourly income multiplied by the time spent on therapy provision, supervision and quality control. The treatment sessions included bio-feedback supported individual psychotherapy sessions provided by 2 psychologists and 1 psychiatrist and group physiotherapy sessions provided by 3 physiotherapists. In order to check the treatment integrity, we established a quality assurance team; the cost of this included the payment of weekly long-distance supervision provided by 2 DIGNITY clinical supervisors via Skype, as well as costs of recording of treatment sessions and treatment integrity assessment by an independent expert.

As recommended by the WHO-CHOICE (Choosing Interventions that are Cost Effective) guide (30), the direct costs additionally included those associated with activities other than treatment delivery, such as costs of planning, training, administration and overheads. During the establishment phase all costs of planning and training were taken into account including time spent on training by DIGNITY experts from Denmark, travelling costs, accommodation, living allowance, interpreters and training manual costs. Some costs, such as rent and administration, were shared with other programmes in the 2 institutes and were allocated to the Kosovo programme based on the number of hours spent on the intervention programme. As a result of this cost allocation, the financial data analysed in this evaluation reflected the actual resources invested in the intervention.

Furthermore, the travel allowance for participants and their accompanying family members when they attended a treatment session was included. The travel allowance between €35 and €50 per month was calculated according to the participant's area of residence.

- 2. Indirect costs were those resulting from productivity loss due to participation in the programme calculated using the "human capital" method. Productivity loss was measured for both the participant and the family member accompanying the participant and was calculated by recording the time spent on weekly treatment sessions multiplied by the mean daily gross income: €14.7/day in Kosovo in 2012–2013 (31).
- Research costs comprised all costs related to assessing participants' health outcome after intervention, such as the cost of health professionals in Kosovo and the costs of 2 DIGNITY experts from Denmark.