



17th St. & Constitution Avenue N.W.
Washington, D.C. 20006
United States of America

Organization of American States

P. 202.458.3000
www.oas.org

**INTER-AMERICAN DRUG ABUSE
CONTROL COMMISSION
CICAD**

Secretariat for Multidimensional Security

**FIFTY-SECOND REGULAR SESSION
November 28 - 30, 2012
San José, Costa Rica**

**OEA/Ser.L/XIV.2.52
CICAD/doc.1990/12
28 November 2012
Original: Español**

**A PROPOSAL ARTICULATING HEALTHCARE SERVICES TO TREAT DISORDERS DUE TO
THE USE OF PSYCHOACTIVE SUBSTANCES IN COSTA RICA
DR PATRICIA OROZCO CARBALLO
DIRECTOR GENERAL OF IAFA**

A Proposal Articulating Healthcare Services to Treat Disorders Due to the Use of Psychoactive Substances in Costa Rica

**Dr Patricia Orozco Carballo
Director General of IAFA**

Content

i. Background

- IAFA and its services
- Fundamentals for Restructuring
- National Policies

ii. Description of the Model

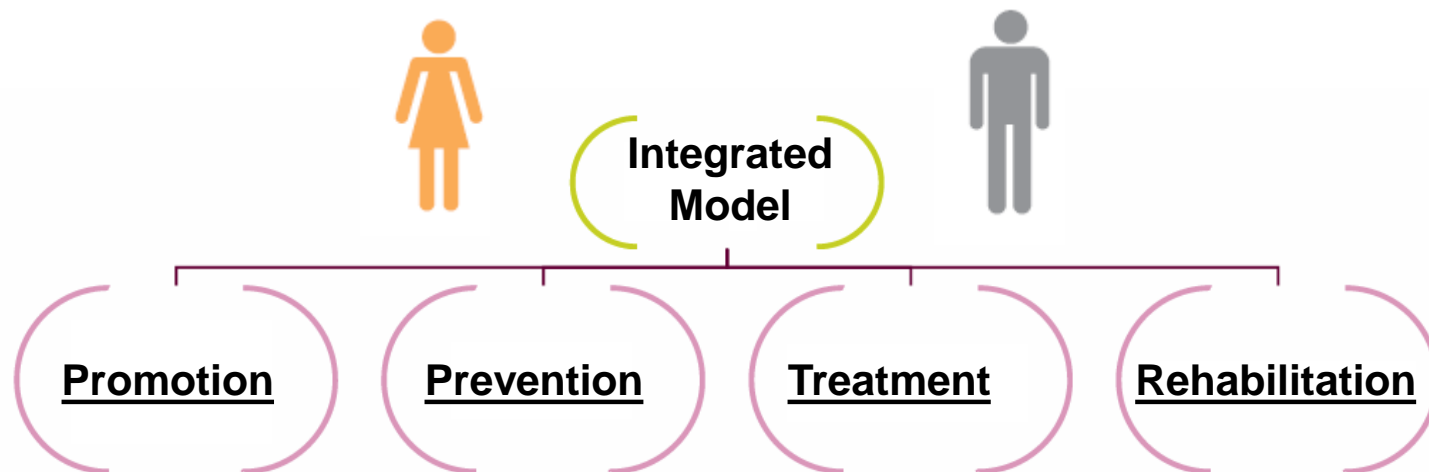
- Principles of the Model of Care
- Characteristics of the Model of Care
- Definition of the Model of Care
- Objectives of the Model of Care

Instituto sobre Alcoholismo y Farmacodependencia (National Institute for Substance Abuse)

MISSION: To contribute, within the framework of its oversight and implementation responsibilities with respect to drugs, to the improvement of the living conditions of society in general through different interventions for the promotion of mental health and preventive-healthcare actions to modify habits, customs and attitudes in order to discourage drug use and minimize its consequences.

VISION: To become the technical-scientific point of reference, both at the national and international level, for the design and implementation of comprehensive models of care and the production and transfer of knowledge on drug addiction as a public health issue.





- Advocacy
- Social marketing
- Social participation

- Universal
- Selective
- Indicated

Domains:

Education

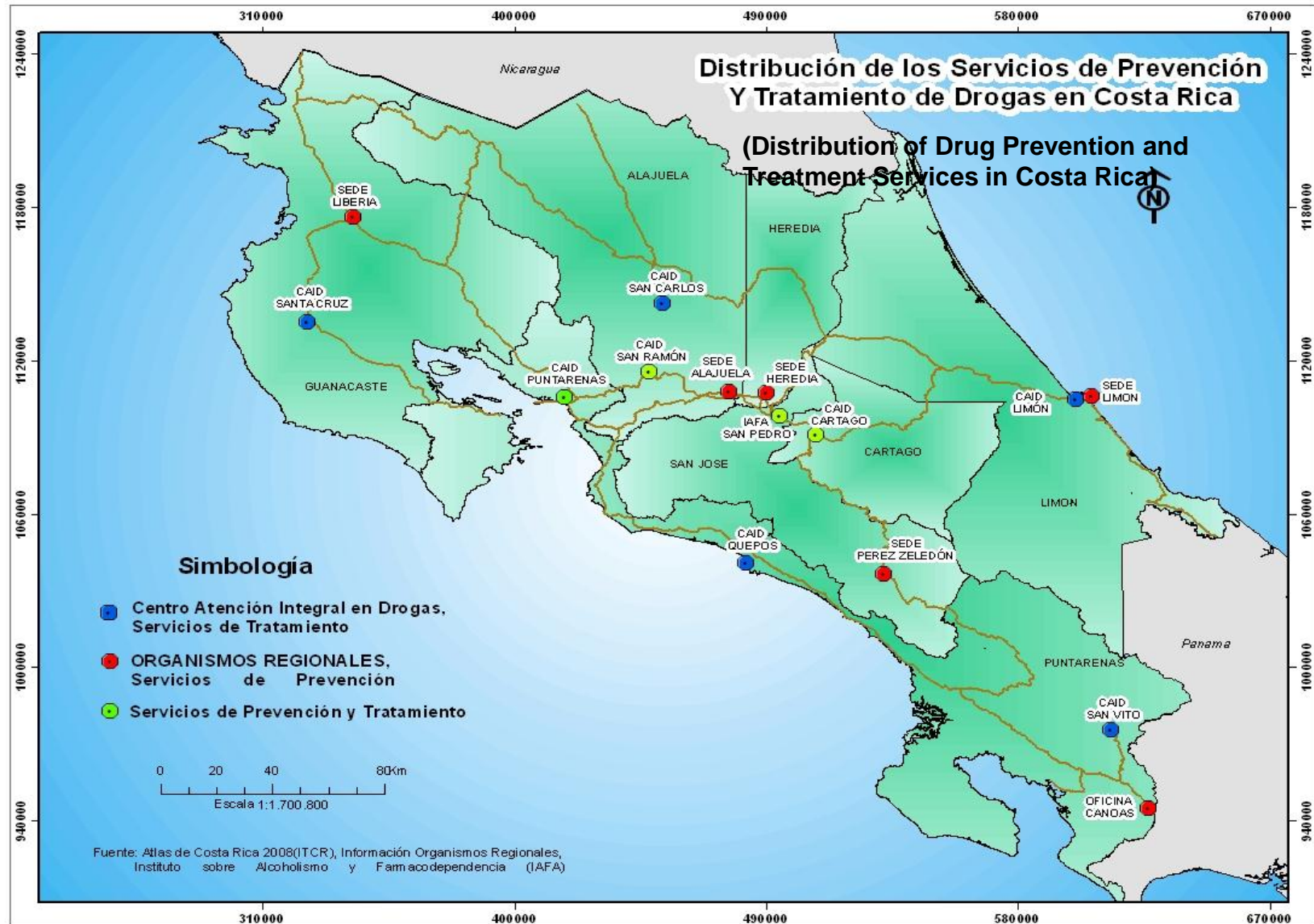
Community

Workplace

- Early detection
- Brief intervention
- Timely referral
- Reduction of adverse consequences

- Continuous treatment
- Outpatient
- Residential
- Reinsertion

Instituto sobre Alcoholismo y Farmacodependencia (National Institute for Substance Abuse)



A starting point...

- ⊕ The State must formulate public policies that guarantee the healthy development of its inhabitants.
- ⊕ Health and wellbeing are human rights.
- ⊕ Suitable conditions must be created to guarantee timely access to effective, quality care for all the inhabitants.
- ⊕ Disorders due to drug use are a public health issue.
- ⊕ Investing in treatment is a good decision, both from a humane point of view and an economic perspective, since it is a cost-effective investment.

Fundamentals for Restructuring

Diagnostic:

- ◆ Fragmentation of healthcare services.
- ◆ Difficult access to treatment and rehabilitation.
- ◆ Reduced service offering to priority population groups (minors and women).
- ◆ Centralized service offering (Metropolitan area).
- ◆ Limitations to program financing.
- ◆ Does not incorporate the population's expectations and demands.
- ◆ Does not contemplate the exercise of their rights.

Fundamentals for Restructuring

Opportunities:

- ◆ Development and implementation of national policies.
- ◆ Improvement in service access, opportunity and quality.
- ◆ Improvement in early diagnosis, detection and intervention.
- ◆ Improvement in (service) quality care.

National Policies

Health Sector Policies

Access by all the population to comprehensive care regarding the use of alcohol, tobacco and other drugs, especially for those people who are more vulnerable and/or in a situation of social exclusion.

National Drug Plan

Specialized, universal and comprehensive systemic priority care for people with problems due to drug use.

Executive Decree No. 37110-S, making the Health Sector Policy official regarding the treatment of people with problems derived from the use of Alcohol, Tobacco and Other Drugs in Costa Rica (2012).

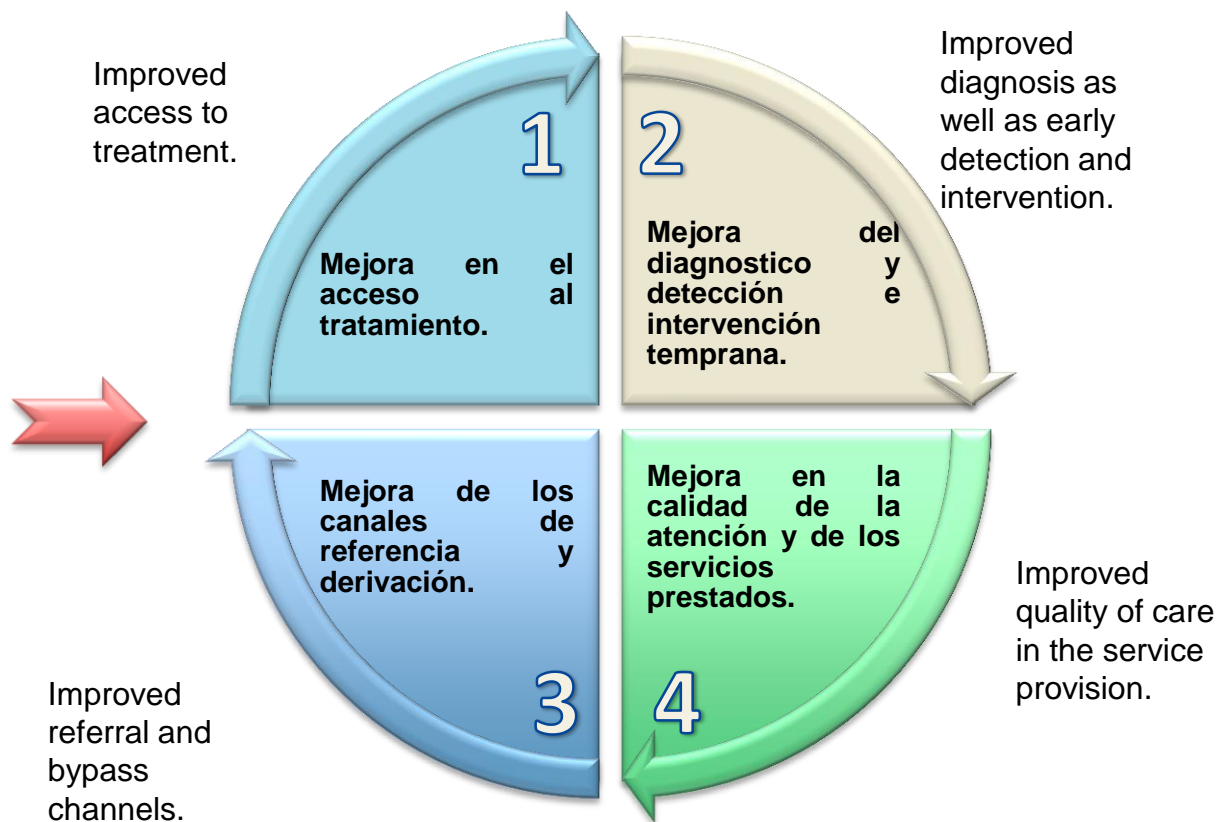
Executive Decree No. 34784-MSP-S, declaring drug use a public health issue (2008)

The restructuring of the model intends to:

Increase the coverage of treatment and rehabilitation programs; *regulate and improve care services*, both public and private; *strengthen and consolidate social or community networks* for care and reinsertion; and *diversify the existing service offering* to fine-tune it to the needs of the people affected and the complexity of the issue of drug addition.

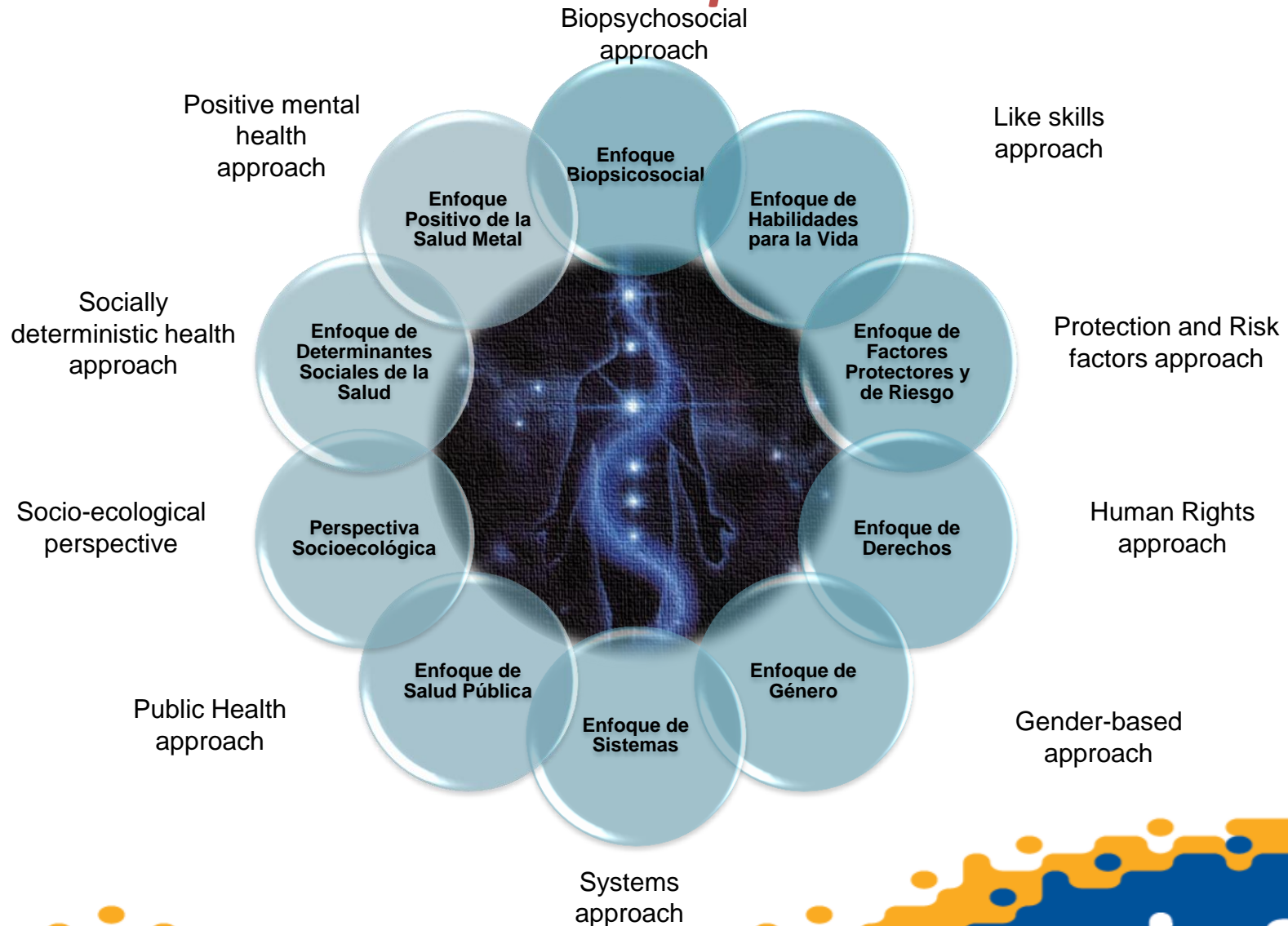
Treatment Policy

National Drug Treatment System



Description of the Model

Related Perspectives



Description of the Model: Characteristics

- ❖ Centered on the individual (as a whole) and his/her environment.
- ❖ Recognizes the individual as the subject of rights (and duties).
- ❖ Stresses promotional and preventative aspects.
- ❖ Emphasis on outpatient solutions for health issues.
- ❖ Promotion of early intervention.
- ❖ Enable continuity of care (in the network).

Description of the Model: Characteristics

- ❖ Promotion of participation spaces.
- ❖ Development of strategic alliances and Network-based activities.
- ❖ Development of intersectoriality.
- ❖ Development of information-handling capabilities.
- ❖ Human resource development.
- ❖ Incorporation of suitable information and communication technologies.

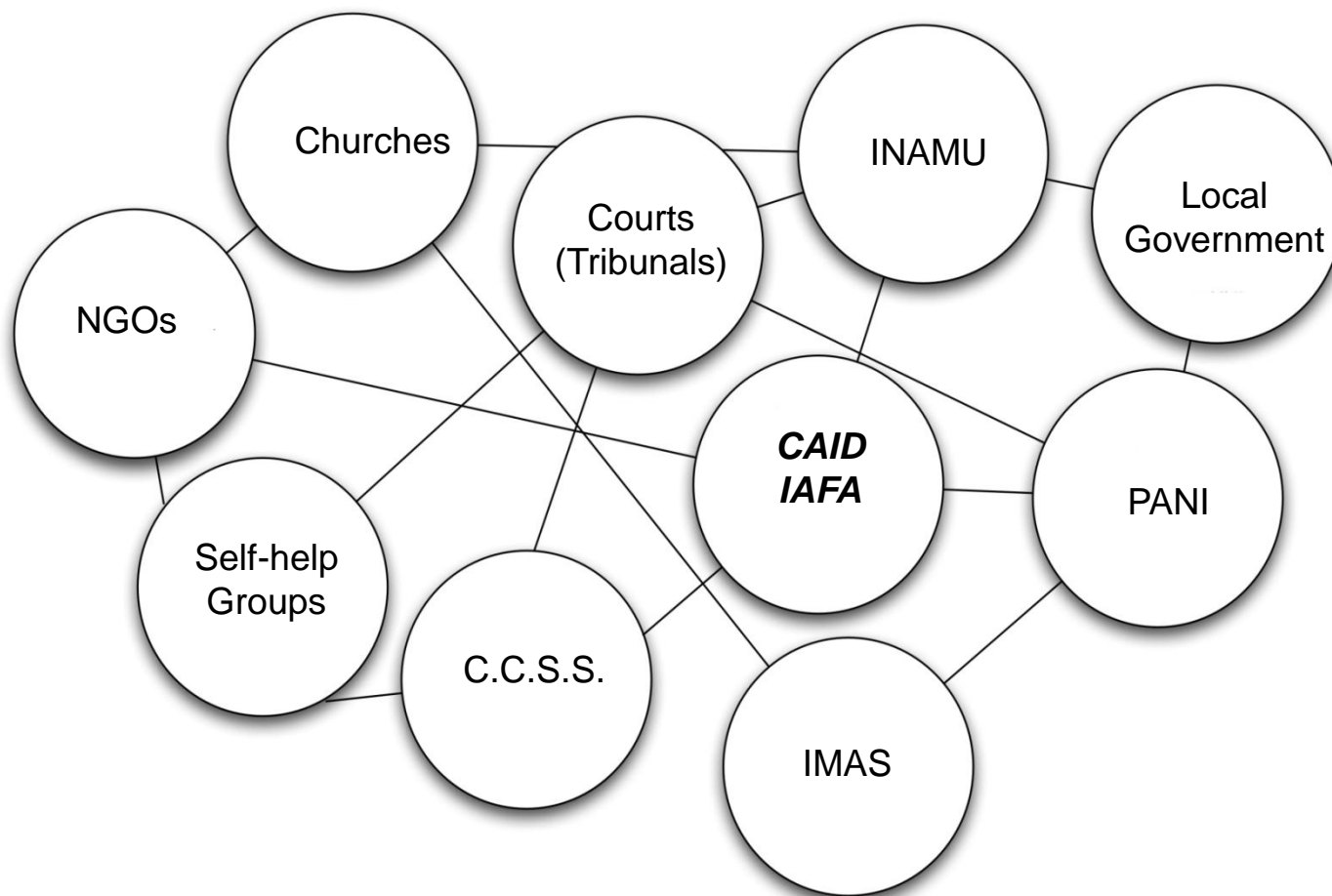
Description of the Model: Principles

- Universal access
- Equality
- Integrality
- Integration
- Quality
- Active Citizenship
- Co-responsibility

Description of the Model: Definition

Describes the mechanisms that make possible the **network organization** of healthcare establishments, at different levels of complexity and roles, which jointly **actions for health promotion, disease prevention, early detection and intervention, reduction of adverse consequences, and the treatment, rehabilitation and reinsertion** regarding the use of psychoactive substances to make possible **universal access and comprehensive, effective, timely, continuous quality care** for all individuals, as well as satisfying the requirements of the population and improving the health and quality of life of individuals, families and communities, within a framework of **social participation, the protection of rights and equal opportunities**.

Establishment: A fluid, decisive Support Network.



Description of the Model: Objectives

- ✿ Provide the general population, without exclusion, a set of individual and collective opportunities that allow overcoming the problems generated by the use of psychoactive substances, for their own benefit and that of the society to which they belong.
- ✿ Improve access and comprehensive care for people with problems generated by the use of psychoactive substances and for their families, through the strengthening of the National Treatment System.

How can the Model be Started?

- ▣ Adjustments to the legal and regulatory frameworks.
- ▣ Redesign of processes and institutional organization.
- ▣ Development of technical and operating instruments.
- ▣ Incorporation of Information Technologies.
- ▣ Human resource development.
- ▣ Design of an information system.

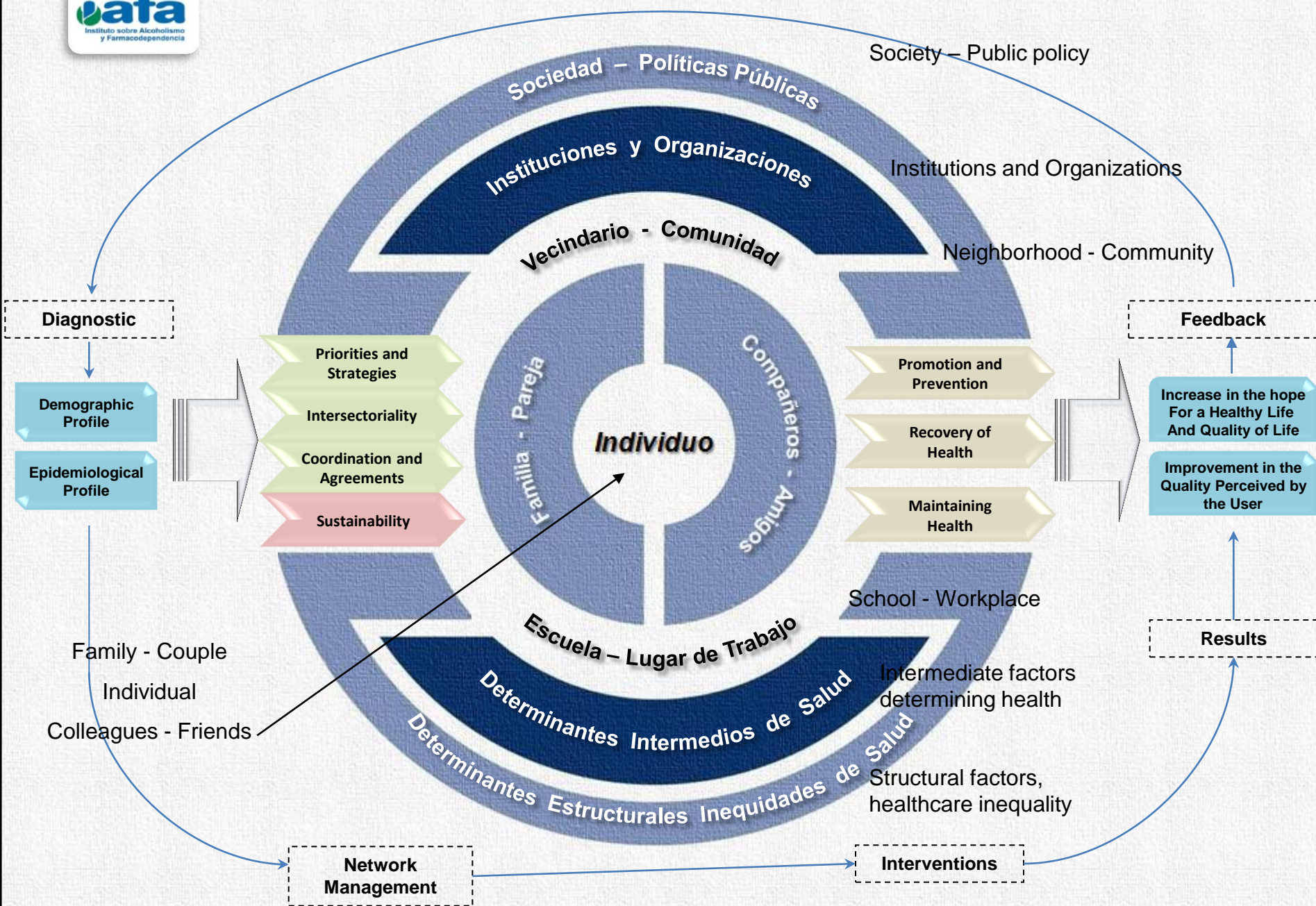
Management Model Associated to the Integrated Model

This is how resources are organized and combined with the aim of achieving the policies, objectives and regulations related to the Integrated Model.

Its purpose is to attain the sustainability of the Integrated Model, generating political, financial, technical and social support through specific commitments and complementary contributions from the components of the Service Network. The following is required:

- Updates to the regulatory framework.
- Work base don consensus protocols.
- HR training and updating.
- A Reference and Cross-reference system.
- A single information system.
- An evaluation system.

IAFA Integrated Model



Thank You

