

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

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Profiles of Drug Treatment Services in the Caribbean Region



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### **Objectives**

- To provide a comprehensive overview of Drug Treatment Provision in the Caribbean Region generally and more specifically, The Bahamas
- To highlight existing strengths across service areas
- To identify gaps is availability, accessibility and quality of care
- To bring awareness to the need for capacity building and scaling up of quality of care across the region

### **Drug Situation in Region/Country**



- Conveniently located between producer nations in the south and consumer nations in the north
- Drugs commonly used marijuana, alcohol, cocaine
- Focus has been on interdiction and law enforcement efforts
- Resulting in a disproportionate allocation of resources toward supply reduction

#### The Public Health Dimension

 Post-UNGASS - The Public Health Dimension has gained momentum as nations strive for a more integrated and a balanced approach to addressing the world drug problem

 Hence a review of treatment provision in the region is warranted Caribbean Drug Prevention, Treatment, Rehabilitation, and Gang and Youth Violence Focused Institutions Report



- OAS/CICAD Training and Certification Program (PROCCER-Caribbean)
- Institutional and Human Resources Training Needs Assessment
- Survey conducted in 2012

#### **Participating Countries**



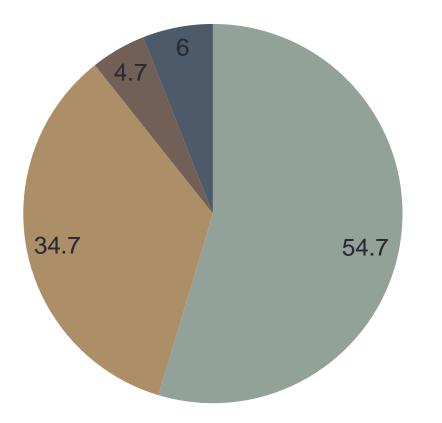
Antigua and Barbuda Bahamas **Barbados** Belize Dominica Grenada Guyana Jamaica St. Kitts and Nevis St. Lucia Vincent and the Grenadines Suriname Trinidad and Tobago

#### **Distribution of Services across Countries**

- 150 organizations spread across 13 countries
- Majority of organizations represented
  - Bahamas 13.3%
  - Jamaica 12.75%
  - St. Lucia 11.35%
  - Trinidad and Tobago 10.0%
  - Suriname 9.3%
  - Antigua and Barbuda 9.3%

#### **Distribution of Service Providers**

#### **Proportion (%)**



Gov. organizations

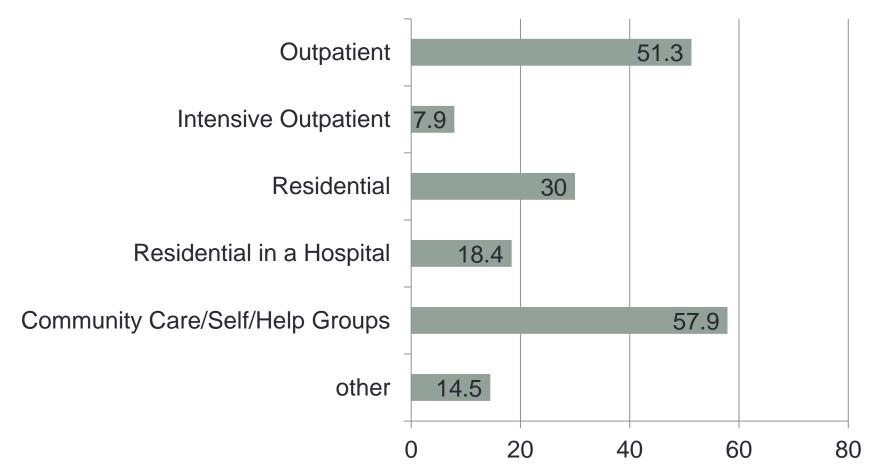
- NGO
- Quasi Gov.
- Other

#### Level of coverage

- National Level 70%
- Regional level 19.35
- •Hemispheric level 4%

### **Types of Drug Treatment Services**

#### Percentage (%)



#### **Treatment Approaches**

76 (48%) organizations reportedly engaged in some form of drug treatment activity using approaches such as:

- Psycho-therapy
- 12-Step Program
- Faith Based

### **Target Populations**

- Majority of organizations targeted adolescent, males & females; adult males & females
- Children under 12 were only targeted by 23.3% for males and females respectively

#### **Profile of Interventions**

Counseling	92.1%
Relapse Prevention	69.7%
Clinical Evaluation	60.0
<ul> <li>Social-Re-integration</li> </ul>	55.3%
<ul> <li>Prevention and early detection of illnesses (HIV/TB/Hepatitis)</li> </ul>	47.4%
Pharmaco-therapy	31.6%
Physical rehabilitation	19.7%
<ul> <li>Substitution therapies (methadone/buprenorphine</li> </ul>	1.3%

### Workforce Strengths

- Knowledge of Addiction
- Assessments
- Counseling skills
- Coordinating services and case management

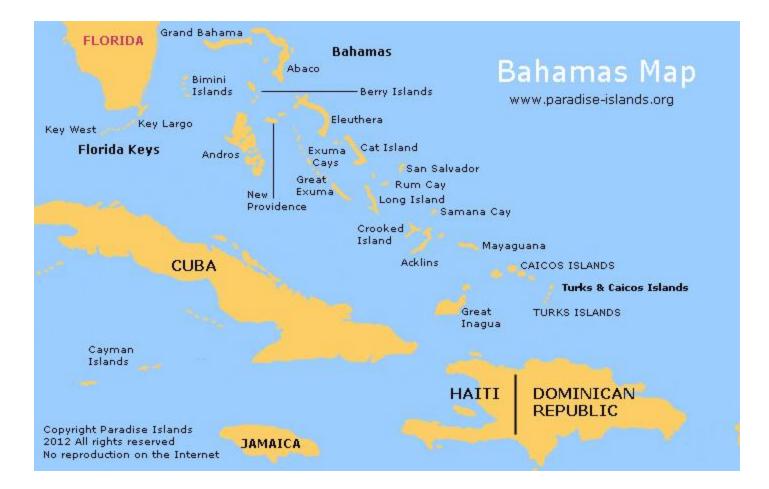
### Knowledge Gaps

- Institutional Administration/ Management
- Family Systems in the context of substance use/abuse
- Social Re-integration

### **Training Needs**

- Managing treatment resistance and behavior change
- Conflict resolution
- Family systems
- Relapse Prevention\*\*
- Data Collection and electronic data entry
- Ethical/professional responsibilities
- Individualized treatment planning

#### **The Bahamas Situation**



#### **Government-operated Facilities**

- Public Health Clinics MhGap
- General Hospitals WD management & stabilization
- Psychiatric Hospital Acute Adult Units ; Child & Adolescent Services
- Grand Bahama outpatient treatment
- Community Mental Health Clinic outpatient and Intensive Outpatient Treatment
- Department of Corrections treatment for select medium security inmates

Government-Operated Inpatient Substance-Use Disorders, Treatment Services

- Detoxification & withdrawal management
- Partial Hospitalization Program
- Treatment for special populations
- Medium-term, Medically monitored, Residential treatment in a modified therapeutic community setting
- Follow-up and Aftercare services

#### NGO Service Providers

- 4 Adult, Male Residential Facilities
  - 3 faith-based
  - 1 Transition Home
  - 1 Housing Facility
- 1 Outpatient program for offender population (adolescent/adult males)

## Using Guiding Principles for Standards of Care (UNODC/WHO, 2016)

- 1. Availability, Accessibility, Attractiveness and appropriateness
- For 90% population Services are readily available and accessible.
- For the remaining 10% there are challenges due to geographic layout of country making access inconvenient and cost prohibitive
- Access to inpatient treatment is further hindered by the need for medical clearance via the A&E department of the General Hospital
- A range of treatment settings and options are available through the government run facility
- Services are available irrespective of the physical or psychiatric condition of the patient (including HIV).; ability to pay; age or gender -Though only the government run facility provide services for women.

## 2. Ensuring Ethical Standards – protection of human rights etc.

Greater awareness raising and education is needed to sensitize persons to the issues related to human rights and respect and dignity for all. 3. Promoting treatment of Drug Use Disorders through effective coordination between Criminal Justice System and Health and Social Services

- Draft legislation has been proposed for the implementation of Drug Treatment courts
- For years, however, judges have been using their discretion to offer drug treatment as an alternative to incarceration for a variety of drug related offenses, particularly young, first-time offenders
- This process is facilitated through collaboration with the mental health system and Social Services

#### 4. Use of Evidence-Based Drug Approaches

- Multi-disciplinary Team Approach
- Screening
- Comprehensive Assessment
- Individualized Treatment Planning
- Referral
- Follow-up
- Social Re-integration

#### & Interventions

- Individual, Group and Family Therapy
- Psycho-education
- Motivational interviewing and enhancement therapy
- Cognitive-behavior therapy
- Occupational therapy
- Recreational Therapy

## 5. Responding to needs of Special Subgroups and Conditions

- The Psychiatric Hospital-based facility able to accommodate persons with co-occurring disorders, complications of medical and/or psychiatric disorders, cognitive impairment and older adults with special needs
- More is needed however to build capacity within families and communities to assist with social integration.

## 6. Ensuring good Clinical Governance of treatment services and programs

- Gov. Similarly, the governance structure supports the ongoing system wide improvements to service- particularly since 2010 with the drafting of a strategic plan, that led to remodeling of services to better align with regional and international standards;
- NGOs Have particular funding challenges and rely heavily on experts by experience;

# 7. Monitoring and Evaluation of integrated treatment policies, services, procedures, approaches and linkages

- Monitoring & Evaluation are inadequate to non-existence across the broad.
- Plans in motion for improvements through the introduction and phased roll-out of:
  - Integrated Health Information Management Systems across the Government services (iHIMS)
  - Universal Health care that promises comprehensive, modern and affordable healthcare for all.

#### Overview of Treatment Facilities Jamaica

- Addiction Treatment Services Unit
  - 21 day program, Adults and Adolescents
- Richmond Fellowship, Patricia House
  - 8 wks Residential, Adults
- Teen Challenge
  - 1 yr Residential, Adult Men and Women
- RISE Life Management
  - 8-10 sessions, Adolescent focus
- Drug Court
  - Act passed 1999, based on Canadian Model

#### Profiles of Drug Treatment Facilities: Target Populations, Capacity & Service Utilization

Facility	Туре	Target pop		Personnel		# of Beds	Treatment Duration	Annual Capacity	Tot Clients Treated		
		Gender	Age Group	Clinical	Non- Clinical	1	(in days)		2014	2015	2016
A Gov.	Inpatient Detox	Males Females	Adult	16	5	27	30	328	185	199	219
B Gov.	Residential	Males Females	Adult	14	2	18	112	59	74	73	59
C Gov.	Inpatient	Males Females	Adolescents	17	6	12	56	78	56	46	37
D Gov.	Intensive Outpatient	Males Females	Adults	8	1		180	204		185	628/ 42
E NGO Faith- based	Residential	Males	Adults	3	3	24	180	48		144	
F NGO	Residential	Males	Adults	3	3	32	180	64 +5	98	98	



#### References