



## **REGIONAL SEMINAR ON DRUG TREATMENT AND DRUG INFORMATION NETWORKS IN THE CARIBBEAN**

September 20-22, 2017  
Port of Spain, Trinidad and Tobago

### **Meeting Report**

#### **INTRODUCTION**

The Inter-American Drug Abuse Control Commission (CICAD) through its Inter-American Observatory on Drugs (OID) has been working to build the capacity of its member states to:

- I. Gather drug supply and demand indicators within their Drug Information Networks (DINs) and
- II. Guide the collection and analysis of data from drug and alcohol treatment facilities.

This type of data is instrumental in the development of drug policies and to guide the development of standards of care as it relates to treatment for dependent drug users. To achieve these goals, the OID has been collaborating with regional partners to develop a guide on Standardized Indicators for Drug Information Networks in the Caribbean and a standardized treatment intake protocol to capture data on persons seeking treatment for drug and alcohol misuse.

This seminar was organized in collaboration with the CARICOM Secretariat and the Government of Trinidad and Tobago and brought together professionals from the following countries: Antigua and Barbuda, Bermuda, the Bahamas, Barbados, Belize, Dominican Republic, Grenada, Guyana, Haiti, Jamaica, St. Lucia, Trinidad and Tobago and Suriname.

#### **OBJECTIVES**

The main objectives of the workshop were:

- To present the manual and data collection instruments based on the “Standardized Indicators for National Drug Information Networks in the Caribbean” to DIN representatives from all Caribbean member states
- To develop a work plan for the implementation of new DIN data collection tools
- To present data from the treatment data project for 2015-2016
- To facilitate a capacity building session on data collection and analysis for drug and alcohol treatment data for both treatment professionals and country coordinators
- To discuss the development of standards of Care for drug and alcohol treatment across the Caribbean and the implications of the regional treatment data
- To discuss the COPOLAD’s and CARICOM’s work plan and its relationship to CICAD’s work in the region.



## Summary of Meeting Activities

### ➤ Opening Ceremony

The opening ceremony was organized by the National Drug Council (NDC) of Trinidad and Tobago and chaired by Mr. Abshalom Yisrael. Remarks were made by Ms. Monica Paul-McLean, Project Manager, External Relations, Delegation of the European Union to Trinidad and Tobago, Mr. John McIntyre, Chargé d'affaires, US Embassy, Trinidad and Tobago, Ms. Beverly Reynolds, Coordinator, Health and Human Development, CARICOM Secretariat, Ambassador Adam Namm, Executive Secretary of CICAD, and the Feature Address was made by Ms. Lydia Jacobs, Permanent Secretary, Ministry of National Security.

During the Opening Ceremony, CICAD launched the manual “Standardized Indicators for Drug Information Networks in the Caribbean.” As stated by Ambassador Namm during his opening remarks “...We believe that the benefits will go beyond the mere standardization of statistics on drugs. One of our aims is to help you to be able to continually monitor what is happening in your country with respect to drugs so that you can direct scarce resources and focus efforts on the most challenging problems, while putting the most appropriate responses in place...”

Speaking to the importance of evidence-based policy and program development and the relevance of the aforementioned manual, Ms. Reynolds emphasized the importance of inter-agency and inter-sectoral cooperation and sharing of information as a way to “...fix the systems where they are broken, build capacity and encourage the practice of collecting, analysing and using data to inform policy and programmatic interventions...this is especially important at a time when the region faces the challenge of a paucity of systems to facilitate data collection and limited skills to adequately manage and retrieve data in a timely and efficient manner.”

Gratitude was also expressed to the European Union for supporting this venture under its 10<sup>th</sup> EDF funding and to the US Government for its support via funding from its Bureau of International Narcotics and Law Enforcement Affairs (INL).



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Opening Ceremony: Speakers Ambassador Adam Namm, CICAD; Ms. Lydia Jacobs, Permanent Secretary, Ministry of National Security; Ms. Monica Paul-McLean; European Union; Mr. McIntyre, Charge de Affaires, Embassy of the United States of America, Port of Spain; Ms. Beverly Reynolds, Manager, CARICOM Secretariat





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Group picture: Delegates at the Regional Seminar on Drug Treatment and Drug Information Networks in the Caribbean

### Day 1 Sessions

The day's session continued with presentations from the CICAD-OID team. Mr. Pernell Clarke presented on: Introduction to Drug Information Networks (DINs) and the standardized indicators for drug supply and demand. Some of the main focus of the presentation was:

- ❖ The definition and functions of a National Drug Observatory (NDO) and a Drug Information Network (DIN) and the difference between the two.
- ❖ The components of a DIN



Mr. Pernell Clarke, CICAD presenting on the Manual "Standardized Indicators for Drug Information Networks in the Caribbean."



- ❖ Key indicators for DINs as outlined in the manual “Standardized Indicators for Drug Information Networks in the Caribbean.”
  - Divided into supply side indicators and demand side indicators
  - CICAD has developed 55 indicators divided into 18 indicator groups (11 on the supply side and 7 on the demand side), laid out by level of difficulty for data collection
  - The guide also includes: data collection instruments, identifies the agencies responsible for its collection, other sources of data collection and frequency of data collection

Day 1 continued with a group-work session on the implementation of the standardized indicators. During this session, countries were divided into groups based on the operational level of their DIN:

- ❖ Group 1: consisted of the following countries: Barbados, Guyana, Grenada and Bermuda. All countries in this group agreed that the infrastructure existed for the management of the DIN however the challenges that they faced were:
  - Constant staff turn over
  - Lack of training
  - Some agencies are overburdened and find it challenging to submit data in a timely manner
  - Without memoranda of understanding, it is challenging to get all agencies to commit and stay committed to the DIN
  - Gaps exist for data on driving under the influence and drug related mortality
- ❖ Group 2: consisted of: Dominican Republic, Haiti and Trinidad and Tobago. These countries indicated that while they have the infrastructure necessary to manage a DIN, they may not be collecting all standard data and the manual will provide them with additional guidance to improve data collection.
- ❖ Group 3: consisted of: Suriname, Belize, Bahamas and Jamaica. These countries emphasized that due to a number of factors, it has been challenging to sustain their DINs and acknowledged the manual’s guide on engaging DIN members will assist in addressing this shortfall. Some other challenges included: human resource constraints, lack of systematic approach to data collection, lack of relationship building among network members and confusion about coordinating entities.



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The day's event was rounded off with presentations on: COPOLAD's assessment of Annual Reports in the Caribbean and COPOLAD's annual reporting format and its relationship with DIN Indicators. These presentations were made by Mr. Courtney Samuels and Mr. Jonathan Yearwood and Mr. Clement Henry respectively. 9 countries responded to this questionnaire and found that:

- ❖ 5 countries prepared annual reports in the Caribbean
- ❖ In addition to annual DIN reports, some countries also produced: household survey reports (3); secondary school survey reports (5); cost studies, policy documents and treatment data (1 each)
- ❖ Some of the main obstacles in preparing an annual report were lack of resources, poor data collection and training, also lack of compliance with deadlines by agencies
- ❖ 4 out of 9 countries indicated that they did not have a communications strategy to disseminate the information once produced.
- ❖ Expected results from the COPOLAD project: improve data collection and presentation of data, ability to produce accurate and detailed reports, training and capacity building of staff, greater understanding of NDO, and creation of NDO and the production of methodologically sound annual reports.

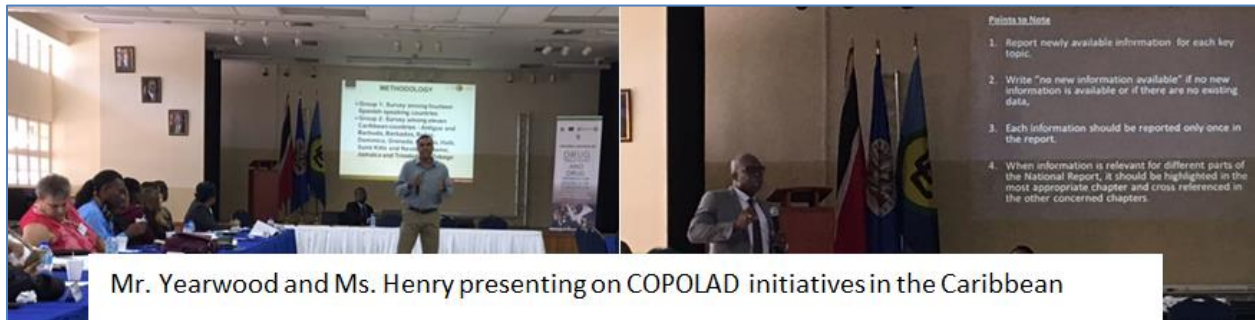
The presentation on the development of Annual DIN reports focused on the structure and content of the report. Further, it presented an outline of the report that covers both the demand side issues of the drug problem and supply side issues.

Discussions on these topics focused on the challenges of data collection in each country as well as the challenges in developing a comprehensive annual report. Some participants noted that where annual reports are already being produced, it may not be practical to adopt the proposed outline by COPOLAD as it may not be reflective of the situation of those countries.





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## Day 2 Sessions

Day 2 focused on drug treatment and began with an overview of the CICAD/OID treatment protocol. This instrument is used to capture data on persons seeking treatment for problematic substance use. It captures:

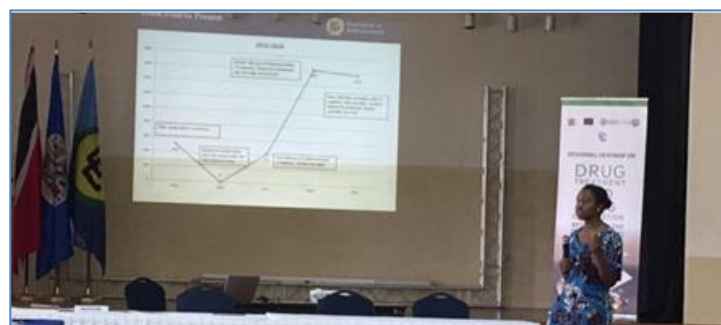
- ❖ Demographic data on the client
- ❖ Treatment history
- ❖ Drugs prompting the demand for treatment
- ❖ Drug use within the last 30 day
- ❖ Judicial information
- ❖ History of treatment for psychiatric conditions and
- ❖ Placement after assessment

Implementation of this protocol requires inter-agency collaboration with the drug council or its equivalent in each country serving in a coordinating capacity. The drug council has to secure buy-in from treatment centers within the country, maintain constant follow up with its representatives to collect and verify the data received per year.

The presentation by Ms. Tiffany Barry focused on analytical results of 2015-2016 data from all 11 participating countries, these are:

Antigua and Barbuda, Bahamas, Barbados, Belize, Grenada, Guyana, Haiti, Jamaica, St. Lucia, Suriname and Trinidad and Tobago. Some main findings are:

- ❖ 1619 cases in 2015 compared to 1526 cases in 2016
- ❖ Overall 90% of clients are males



Ms. Tiffany Barry presenting on Characteristics of Persons seeking Treatment for Problematic Substance Use in the Caribbean



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- ❖ Persons seeking treatment are between ages 20-39 years
- ❖ The main substances impacting treatment across the region are Marijuana, crack and alcohol
- ❖ A very small portion of the population seek treatment for cocaine and heroin
- ❖ About 45% of persons in treatment have been in treatment multiple times
- ❖ More than 50% of persons seeking treatment are placed into residential treatment
- ❖ Less than 30% of persons in treatment have has any interaction with the criminal justice system

Following the presentation, there was a discussion about what constitutes treatment and the continuum of care model. This discussion was vital as some centers offer services that may fall within the continuum of care but are not specifically providing services to treat the addiction directly. Consensus on the 1998 World Health Organization (HWO) committee on drug dependence was reached which states that "...treatment is used to define the process that begins when psychoactive substance users come into contact with a health provider or other community service, and may continue through a succession of specific interventions until the highest attainable level of health and well-being is reached."

This session was followed by country presentations about their treatment program, and their experiences using the standardized treatment intake form. St. Lucia noted for example that since using the standardized form and reviewing the results of the analysis, they were able to identify that their treatment population consisted of a youthful population (31% under the age of 20); as a result, they have begun to tailor their program to respond to the needs of this population.





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Country Presentations by delegates

Some other comments about the processes included:

- ❖ Challenges in timely data collection as some centers face a challenge of frequent staff turnover.
- ❖ Some national agencies face a challenge of securing partnerships with all treatment centers in the country and as a result, the data being submitted to CICAD does not always reflect the full picture of treatment in the country.
- ❖ Some countries indicated that with the establishment of a DIN, treatment data can be more widely circulated

Comments about the form included:

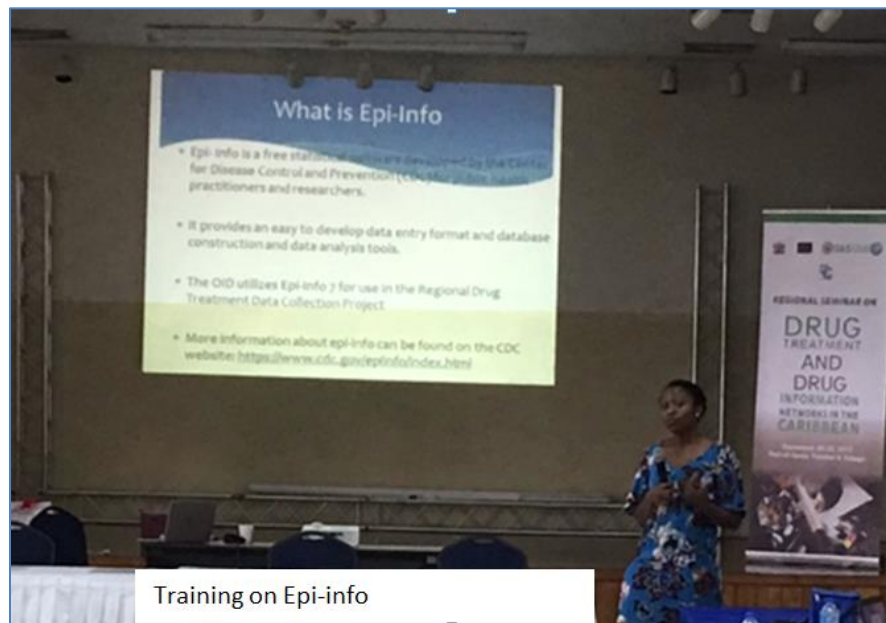
- ❖ Question 16: Most recent type of treatment received for drug abuse.
  - The concern was that respondents were answering this question based on the treatment they were currently enrolled for. After confirming that this question sought to find out what type of treatment they were enrolled in before this current



enrollment, the question will be altered to ask “Most recent type of treatment previously received for drug abuse.”

- ❖ Question 22: if ever diagnosed with a psychiatric disorder, please indicate the condition(s). Persons indicated that there was a need for an “other” field to capture any other diagnoses not listed above. It was also recommended to review the list and adjust it based on the International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10) Version for 2010.
- ❖ Participants noted the challenge in accurately capturing data on persons with a dual diagnosis and requested that the form be amended in some way to reflect this.

During the following session, training was provided on the use of Epi-info for both data entry and data analysis. During this session, participants from both the treatment facilities and the national drug observatory were trained on how to utilize the Epi-info software for data entry. This was instrumental as we hope to move away from the paper based forms where possible and have all participants entering their data directly into the Epi-info database and email it to CICAD.



Presentations on Drug Treatment Courts (DTC): Treatment Programs and Data Requirements rounded out the sessions for day 2. During this session, representatives from treatment facilities in Barbados, Jamaica, Trinidad and Tobago and Bermuda described the role of treatment providers in the Drug Treatment Courts, the data requirements and information needs of the DTC.



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### Day 3

The final day of the seminar began with a session on Standards of Care for Drug and Alcohol Treatment in

which presentations were made by Jamaica, Bahamas, Bermuda, CARICOM,

CICAD and PAHO. This

session was very interactive and illustrated the long road to the development of Standards of Care for drug and



Minimum Standard of Care Panelist: Ms. Beverly Reynolds, CARICOM; Ms. Rochelle Basden, Bahamas; Ms. Patrice Whitehorne-Smith, Jamaica; Mr. David Parker, Bermuda; Mr. Jose Luis Vazquez, CICAD. Session chaired by Mr. Clement Henry

alcohol treatment from a regional perspective. CARICOM, PAHO, CICAD and individual countries presented their efforts to address this gap. Bermuda presented their experience in developing and implementing their standards of care policy which is underpinned by two Parliamentary acts:

- Registration for Addiction Counselors: Professions Supplementary to Medicine Act (2000)
- Registration and Licensing of Facilities: National Drug Control Act (2013)

Countries such as Jamaica and the Bahamas are currently in the process of having their standards policies finalized and are preparing for implementation.

CARICOM as a regional body took the lead in developing a document on standards of care in 2011 that was designed to be a guide for its member states looking to implement such standards. The document aims to present:

- A minimum set of standards for high quality effective treatment which each country/organization should strive to achieve







sessions, it was noted that through PROCEER, 541 persons received certification for completing either the prevention or treatment tracks in 12 Caribbean countries. Moreover, the University of West Indies – Mona Campus is currently developing an online certification course for professionals in both PROCEER prevention and treatment tracks. This proposal will be submitted to the university's undergraduate board for review in the coming months.

The final presentation of the seminar was on the Cannabis Surveillance System (CANWATCH) program in Jamaica presented by Mrs. Uki Atkinson. This presentation centered on the system put in place to monitor impact of the decriminalization of marijuana under the amendment to Jamaica's Dangerous Drug Act (2015). It is a collaborative project between the Violence Prevention Alliance (VPA), the National Council on Drug Abuse (NDCA) and the Ministry of Health and focuses primarily on the impact on risk perception, access and prevalence of use particularly among adolescents in Jamaica.

## Conclusions

This seminar was effective at achieving its objectives:

- ✚ The manual on “Standardized Indicators for Drug Information Networks in the Caribbean” was presented and launched.
- ✚ Caribbean member states were very receptive to the indicators as outlined in the manual and were able to develop a timeline for the piloting and full implementation of these indicators, and for activities to be reflected in their DIN and annual reports
- ✚ The workshop was effective at propelling a dialogue with regional treatment providers about the necessity for standards of care to be adopted and implemented
- ✚ Participants were presented with in-depth information on the development process of standards of care across the region for country specific models to efforts at regional standards via PAHO, CICAD and CARICOM
- ✚ A greater understanding of how treatment facilities are delivering treatment for drug and alcohol abuse was achieved with many participants recognizing areas in which they need to improve





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- + Participants received a refresher training on how to use the Epi info software for data collection and had an opportunity to address all issues they were previously experiencing with the application as well as training on how to use Epi info for data analysis
- + Participants were also exposed to a range of training and certification options for drug prevention and treatment professionals as well as health care professionals
- + Member states were able to get a broader understanding about the work of various international organizations within the region directed at the drug problem mainly the work of CARICOM, CICAD and COPOLAD. More importantly they were able to understand how the agencies are working together to ensure that the Caribbean region receives the best possible assistance in addressing the drug problem.
  - o Member states were provided with a platform to discuss best practices, identify gaps and to voice concerns where the work did not properly align or accurately reflect the status of their country.
- + Most importantly, a regional network of professionals in both drug treatment and prevention is being developed where information can be shared with ease and greater frequency.





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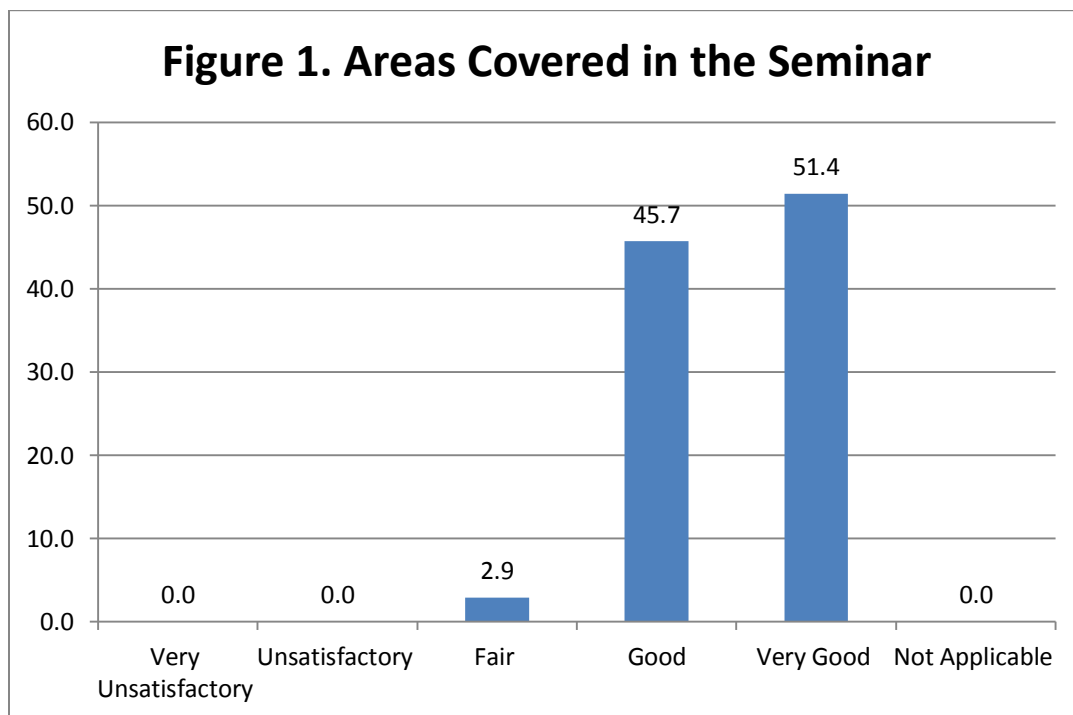


## APPENDIX 1- Evaluation of Workshop

### Evaluation of the workshop

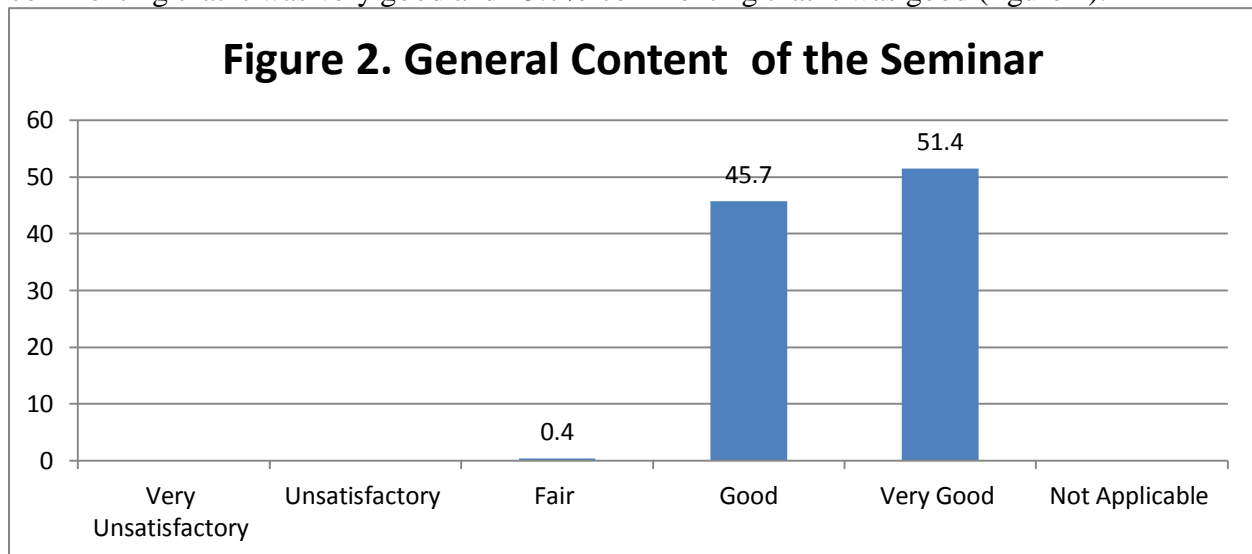
To ensure that workshops, studies and technical meetings are efficient and valuable CICAD regularly distributes evaluations tailored to each event.

Reflected in figure1, participants were generally satisfied with the areas covered in the seminar as 51.4% believed that it was Very Good and 54.7% believed that it was good (figure1).

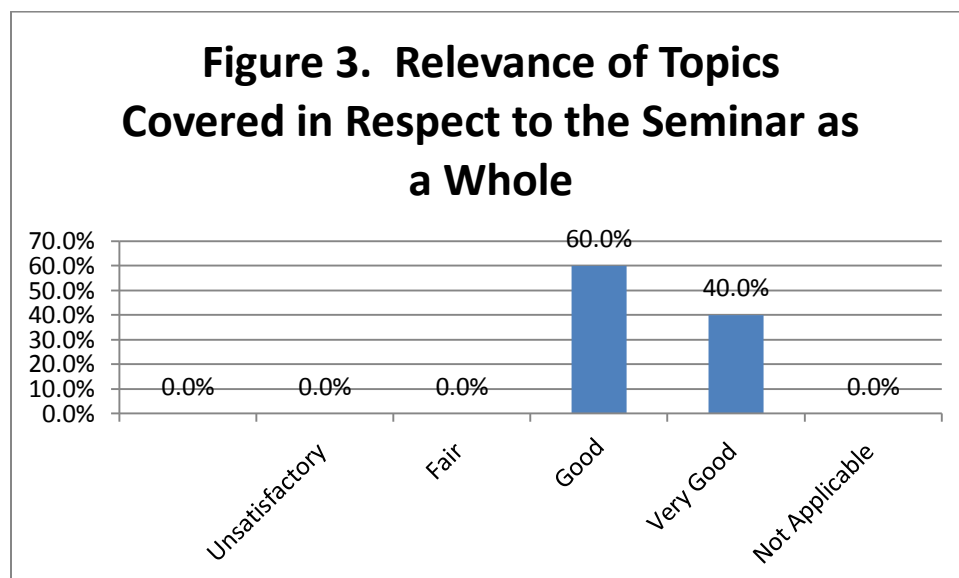




Likewise, participants were satisfied with the general content of the seminar with 51.4% commenting that it was very good and 45.7% commenting that it was good (figure 2).



In assessing the overall relevance of topics covered in the seminar, the consensus was that they were generally good by 60% of the participants and 40% considering it to be very good (figure 3).



When asked about the extent of new learning that took place as a result of attending the seminar, 48.6% of participants indicated that they left the seminar more knowledgeable about the topics covered, while 2.9% regarded the learning experience as unsatisfactory (figure 4).

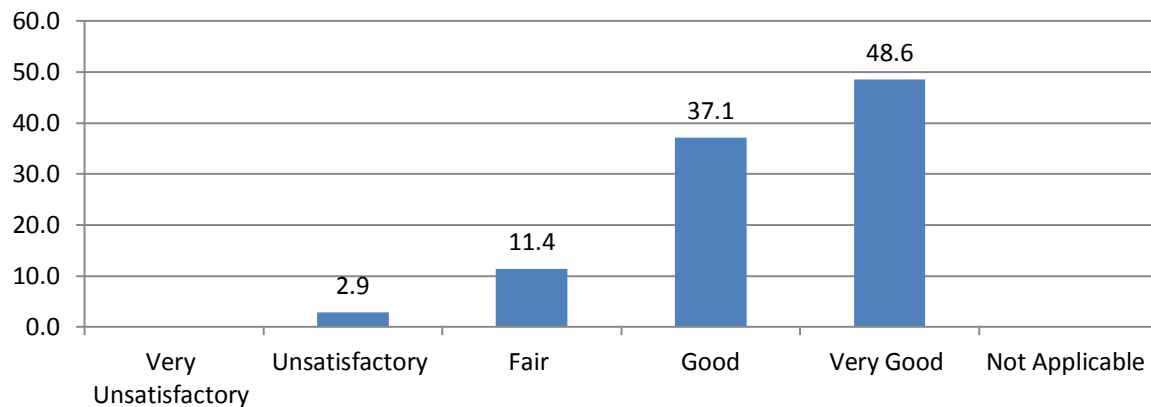


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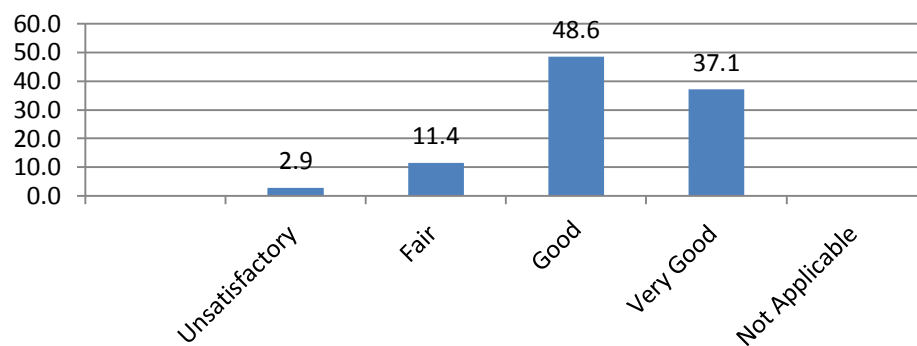


**Figure 4. New Learning that Took Place as a Result of Attending the Seminar**



Looking at the participants' satisfaction with the organization and thoroughness of the presentations, 48.6% of participants believed that it was well organized (figure 5).

**Figure 5. Organization and Thoroughness of the Presentation of the Material by the Resource Person**



48.6% of participants believed that the presenters were well informed about the topics that they presented on, while 8.6% were of the opinion that they were fairly knowledgeable about their subject areas (figure 6).



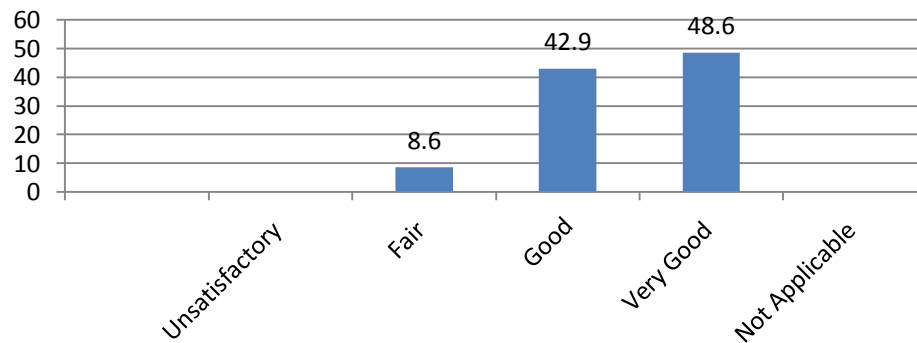


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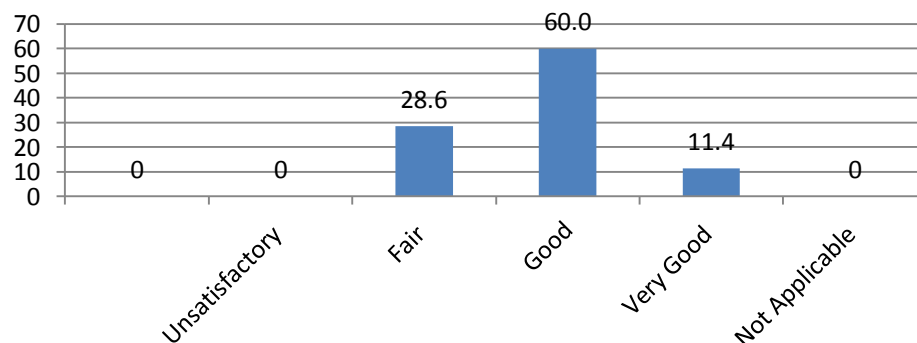


**Figure 6. The Extent to Which Presenters Appeared to be Up-to-Date in His/Her Subject**



60% of participants believed that there was sufficient time allocated for the seminar to allow for discussions and all presentations, while 28.6% believed that it was fair. Due to the nature of the discussions, sessions generally tend to go over time even though the presenters strived to allot sufficient time for presentations and discussions (figure 7).

**Figure 7. The Amount of Time That was Alloted by this Semir for Rapport and Discussion**



Overall participants were pleased with the presenter's ability to challenge and stimulate interest in the topics with 51% indicating that their abilities were good and 25.7% stating it was very good (figure 8).

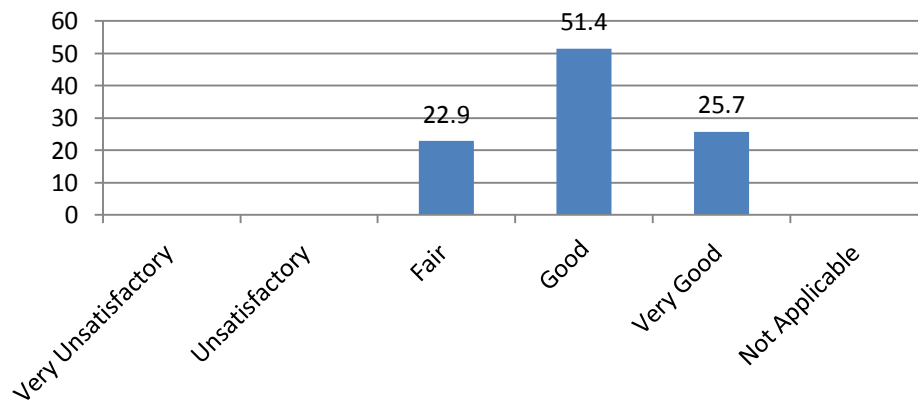


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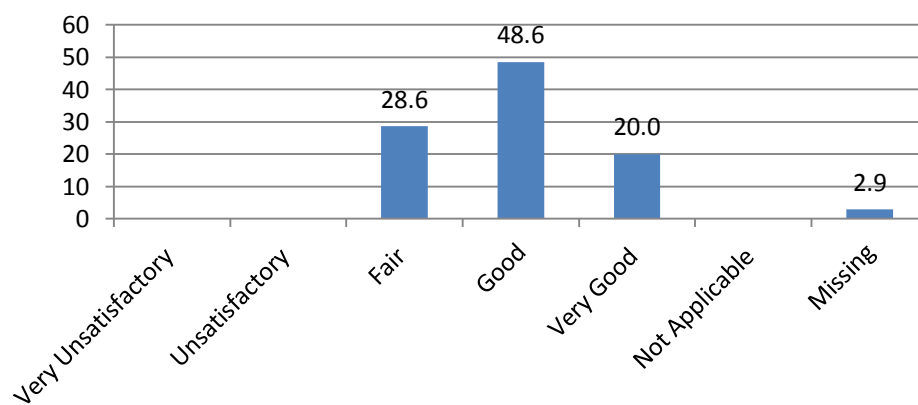


**Figure 8. Presenters' Ability to Challenge and Stimulate Your Interest**



The participants were satisfied with the appropriateness of the presentations and visual aids with 48.6% stating it was good (figure 9).

**Figure 9. Appropriateness of Presentations and Visual Aids**



Participants who traveled from other countries to be a part of the seminar were of the opinion that the logistics for the seminar was well organized with 37.1% saying that it was very good and 28.6% stating it was good. For 20% of participants it was not applicable (figure 10).

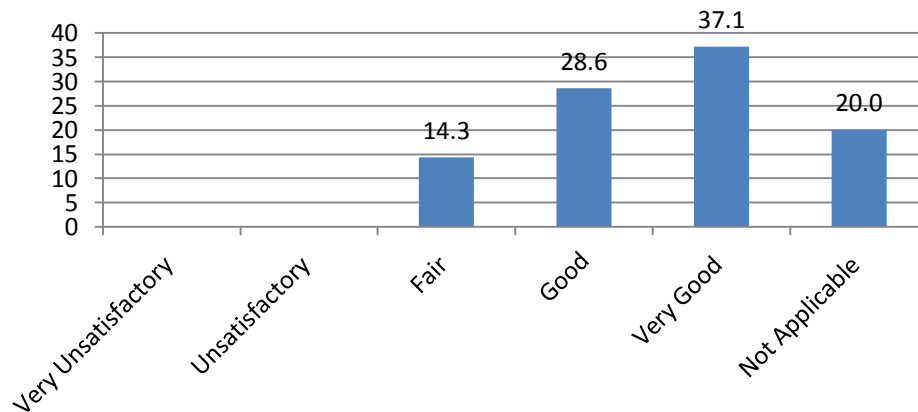


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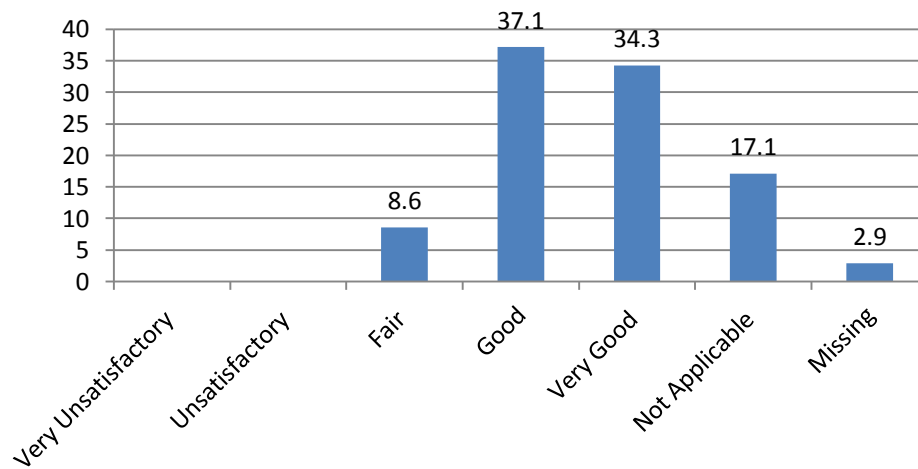


**Figure 10. Logistical Administration of the Seminar (Travel, Accommodation)**



34.3% participants were very satisfied with the accommodation at the Kapok Hotel (figure 11).

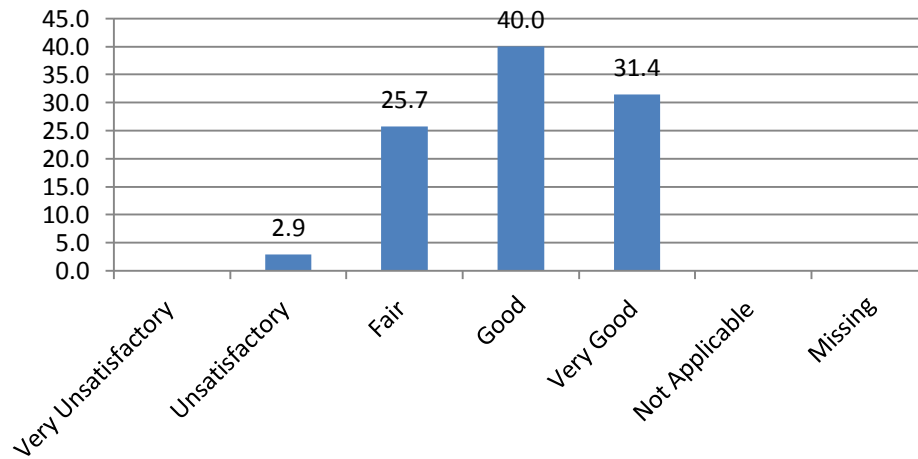
**Figure 11. Accommodation**



Participants were mostly satisfied with the conference facility at the Police Academy Training School with 40% stating that it was good, 31% indicated that it was very good. However, 25% of participants indicated that the facilities was far, the number 1 comment about the facility was that the air conditioner system kept the facility too cold (figure 12).

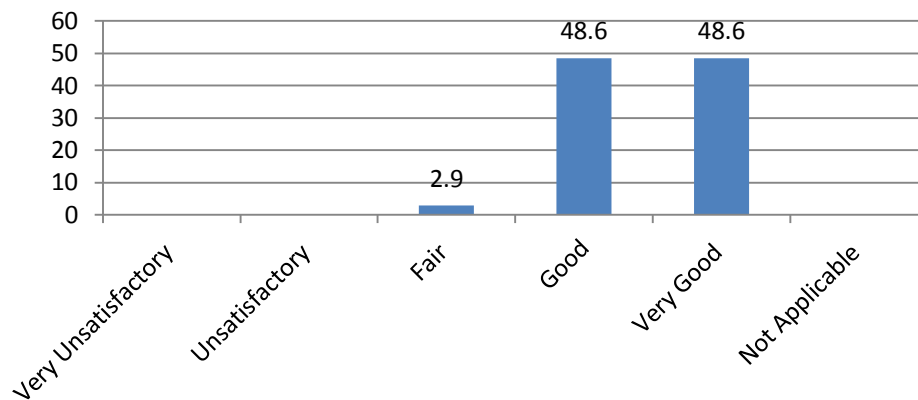


**Figure 12. Conference Facilities**



The workshop was rated highly by all participants with 48% stating that it was very good and (figure 13).

**Figure 13. What is Your Overall Rating of the Seminar**







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## APPENDIX 2- Meeting Agenda

### REGIONAL SEMINAR ON DRUG TREATMENT AND DRUG INFORMATION NETWORKS IN THE CARIBBEAN

September 20-22, 2017

Police Academy, Port of Spain  
Trinidad and Tobago

#### AGENDA

##### Day 1 – September 20

- |               |   |  |                                      |
|---------------|---|--|--------------------------------------|
| 08:15 - 09:00 | - | <b>Registration</b>  |                                      |
| 09:00 - 9:30  | - | <b>Opening Ceremony</b>  | <b>OAS, CARICOM, EU, US, T&amp;T</b> |
| 09:30 - 09:45 | - | <b>Seminar Objectives and Introductions</b>                                | -                                    |
|               |   | <b>Pernell Clarke</b>  |                                      |
| 9:45 - 10:15  | - | <b>Coffee break, Group picture, Administrative matters</b>                 |                                      |
| 10:15 - 10:40 | - | <b>Presentation 1: Introduction to Drug Information Networks</b>           | -                                    |
|               |   | <b>Pernell Clarke</b>  |                                      |
| 10:40- 11:00  | - | <b>Presentation of Standardized Indicators (part 1)</b>                    |                                      |
| 11:00 - 11:15 | - | <b>Q &amp; A</b>   |                                      |
| 11:15- 12:15  | - | <b>Presentation of Standardized Indictors (part 2)</b>                     |                                      |
| 12:15- 12:30  | - | <b>Q&amp; A</b>  |                                      |
| 12:30 - 13:30 | - | <b>LUNCH</b>   |                                      |
| 13:30 -14:30  | - | <b>Implementation of Indicators (Group work and brainstorming Session)</b> |                                      |

**Group work:** [Group 1: Barbados, Grenada, Guyana; Group 2: Haiti, Trinidad; Group 3: Antigua & Barbuda, The Bahamas, Belize, Dominica, Jamaica, St. Lucia, Suriname] each group will brainstorm and prepare a presentation based on the questions below.



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**Questions:** *What is your Assessment of the DIN Manual? How can these indicators help your DIN? Do you have the infrastructure necessary to manage a DIN? What are the barriers and challenges currently faced by you in the implementation or advancement of your DIN? What are your needs? Describe your implementation plan for the standard indicators (Step by step activities with timelines).*

### Group presentations:

14:30 - 14:40	-	<b>Group 1</b>
14:40 - 14:50	-	<b>Group 2</b>
14:50 - 15:00	-	<b>Group 3</b>

### Session Chair: Kyla Raynor

15:00 - 15:45	-	<b>Presentation 2:</b> COPOLAD Assessment of Annual Reports in the Caribbean – <b>Courtney Samuels and Jonathan Yearwood.</b>
	-	<b>Presentation 3:</b> COPOLAD's Annual Reporting Format and DIN Indicators - <b>Clement Henry</b>
15:45 – 16:00	-	<b>COFFEE BREAK</b>
16:00 – 16:30	-	<b>Discussion and agreements</b>

### End of day 1

### Day 2 – September 21

### Session Chair: Rochelle Basden

09:00 - 09:15	-	Welcome and recap	
09:15 - 09:30	-	<b>Presentation 3:</b> Overview of Treatment Protocol	-
		<b>Pernell Clarke</b>	
09:30- 10:00	-	2015-2016 Analysis of Treatment data	-
		<b>Tiffany Barry</b>	
10:00- 10:30	-	Discussion	
10:30 - 10:45	-	<b>COFFEE BREAK</b>	



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**Session Chair: Patrice Whitehorne-Smith**

- 10:45 - 12:25 - **Panel:** Country Presentations [Antigua & Barbuda, Belize, Guyana, Suriname Trinidad and Tobago, Haiti, St. Lucia, Barbados, Grenada, Jamaica.]

Each country will be asked to present their views from the perspective of treatment center representatives as well as representatives from the drug observatory for a maximum of 10 minutes on the following questions.

**Questions:** *[How is in-country coordination progressing? What is your experience using the intake form? What is your experience using the Epi-Info data entry software? What are the barriers or challenges you face if any? What are your needs? How is the information from this system disseminated within the country? How do you currently use the information that you are getting from this system? Do you plan to incorporate this data into your annual DIN report?]*

- 12:25 - 12:30 - Q&A
- 12:30 -13:30 - **LUNCH**

**Session Chair: Clement Henry**

- 13:30 - 14:30 - **Training Session 1:** Utilizing Epi-Info for Data Entry and Analysis

Next Steps- using other CAPI software

**Tiffany Barry**

- 14:30- 15:00 - Q & A

- 15:00 – 15:15 - **Coffee Break**

**Session Chair: Pernell Clarke**

- 15:15- 16:15 - **Panel 2:** Drug Treatment Courts: Treatment Programs and Data Requirements [Treatment centers providing DTC services in Barbados, Jamaica, Trinidad & Tobago, and Bermuda]

**Questions:** *[Delegates from each of the countries participating in this panel should prepare a 10 minute presentation that: Describes the role of the treatment provider the provision of treatment services for the DTC; Describes the data requirements and information needs of the DTC; Explains how treatment outcomes are measured and recorded; Indicates whether the standard CICAD treatment system questionnaire is applied to DTC clients]. Each country is free determine who will participate in the presentation.*

- 16:15 - 16:30 - Discussion and Q&A and Wrap Up



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## End of day 2

### Day 3 – September 22

#### Session Chair: Clement Henry

- 09:00 - 09:15 - Welcome and recap
- 09:15 - 10:45 - **Panel 3:** Standards of Care for Drug and Alcohol Treatment  
[Jamaica (Patrice Whitehorne-Smith), Bahamas (Rochelle Basden), Bermuda (David Parker) PAHO (Dr. Luis Alfonzo), CARICOM (Beverly Reynolds), CICAD (Jose Luis Vasquez)]

- 10:45 - 11:00 - **COFFEE BREAK**

#### Session Chair: Rochelle Basden

- 11:00 - 11:45 - **Presentation 4:** Training resources for drug treatment service providers (Patrice Whitehorne-Smith (PROCCER), Esther Best – (Treatment for Juveniles)
- Presentation 5:** Training for Public Health Facilities in the Assessment Intervention and Referral Process for Drug Treatment (Jose Luis Vasquez)

Q & A

- 11:45- 12:00 - **Presentation 6:** Cannabis Surveillance System (*CANWATCH*)  
*Program in Jamaica* (Uki Atkinson)
- 12:00- 12:30 - **Discussion:** Drug Use in the Americas Report (Tiffany Barry)
- 12:30 -13:30 - **LUNCH**

#### Session Chair: Tiffany Barry, Pernell Clarke

- 13:30 - 14:15 - **Wrap up and open discussion:**  
Summary of Agreements and upcoming events,  
Suggestions for future research studies  
Training needs





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Alerts (New substances, consumption methods, effects, any other alerts)

14:15- 14:30

-

Closing remarks

**CLOSE**

### APPENDIX 3: Participants

No	Home Country	Participant
1	Antigua and Barbuda	John Swift
2		Norma Jeffrey-Dorsett
3		Jean-Machelle Benn-Dubois
4	Barbados	Jonathan Yearwood
5		Laura Lee Foster
6		Natalia Corbin
7		Mavis Greenidge-Watson
8	Belize	Errol Longsworth
9		AvaJean Budna
10		Patricia Consoli
11	Grenada	Dave Alexander
12		Elizabeth Japal
13	Guyana	Courtney Samuels
14		Sarita Nanku
15		Joylyn Williams
16		Indhira Harry
17	Haiti	David John Garcon
18	Jamaica	Uki Atkinson
19		Shedine Bent
20		Mark Coote
21	St. Lucia	Charmaine Hippolyte-Thomas
22		Caleb Paul
23		Malika Williams
24	Suriname	Marie Bunwaree
25		Elize Samon-Soerowirjo



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26	<b>Dominican Republic</b>	Joselyn Herrera
27		Nilo Mercedes
28	<b>Guyana</b>	Clement Henry
29	<b>CICAD</b>	Pernell Clarke
30	<b>CICAD</b>	Tiffany Barry
31	<b>CICAD</b>	Jose Luis Vazquez
32	<b>Jamaica</b>	Patrice Whitehorne-Smith
33	<b>Bahamas</b>	Rochelle Basden
34	<b>Bermuda</b>	Kyla Raynor
35		David Parker
36	<b>CARICOM</b>	Beverly Reynolds
37		Khematti Williams
38	<b>CICAD</b>	Ambassador Adam Namm
39	<b>CARICOM</b>	Raphael Forde
40	<b>Trinidad and Tobago</b>	Lyra Thompson-Hollingsworth
41	<b>Trinidad and Tobago</b>	Joella Taylor
42	<b>Trinidad and Tobago</b>	Asha Edmund
43	<b>Trinidad and Tobago</b>	Sarah Seerattan
44	<b>Trinidad and Tobago</b>	Simone Bascombe
45	<b>Trinidad and Tobago</b>	Shimmel Danclaire
46	<b>Trinidad and Tobago</b>	Rachel Andrews
47	<b>Trinidad and Tobago</b>	Jimmy Peters
48	<b>Trinidad and Tobago</b>	Gabriel Gammon
49	<b>Trinidad and Tobago</b>	Esther Best