

**FIFTH MEETING OF THE
GROUP OF EXPERTS IN DEMAND REDUCTION
October 22-24, 2003
Buenos Aires, Argentina**

**OAS/Ser.L/XIV.4.5
CICAD/DREX/doc.17/03
12 November 2003
Original: Spanish**

**FINAL REPORT
OF THE
GROUP OF EXPERTS IN DEMAND REDUCTION
AND
PLAN OF ACTION 2004-2005**

FINAL REPORT

1. BACKGROUND

The establishment of a Group of Experts on Demand Reduction was approved at the twentieth regular session of CICAD. During its twenty-first regular session, the Commission convened the first meeting of the CICAD Group of Experts, to be held in conjunction with the Argentine Secretariat of Programming for the Prevention of Drug Addiction and to Combat Drug Trafficking (SEDRONAR) and under the chairmanship of Argentina, in Buenos Aires, Argentina, on July 29 - August 1, 1997.

The twenty-first regular session of CICAD established the following mandate for the Group of Experts on Demand Reduction:

“The purpose of the Group of Experts on Demand Reduction would be to provide technical expertise, facilitate cooperation among countries, and submit recommendations to the Commission on implementing the lines of action that derive from the ***Anti-drug Strategy in the Hemisphere***.

The Group will be made up of national experts in different aspects of demand reduction, and hence the experts may vary with the subject considered.

The priority subjects of demand reduction are:

- a) Performance of a diagnosis of drug use, epidemiological studies, systems of information (such as SIDUC) and of surveillance and monitoring, and bio-medical, clinical, psychosocial, epidemiological, ethnographic and anthropological research.
- b) Prevention and education models and programs involving community participation, designed both for the population at large and for specific groups at special risk of becoming users.
- c) Models and programs of intervention to address the adverse health and social consequences of drug abuse.
- d) Measures for the treatment and rehabilitation of persons addicted and their reintegration-into the community.”

The second meeting of the Group of Experts was held in Mexico on March 3-6, 1998. One of the experts' most important recommendations was the need to establish minimum standards of care in drug treatment centers, in order to improve the quality of care and respect for the human rights of addicts receiving treatment.

The third meeting of the Group of Experts was held in Santiago, Chile on October 3-5, 2000, under the chairmanship of Chile. The main area of priority identified by the Group of Experts was the need to expand programs to address the rising use and abuse of synthetic drugs.

The fourth meeting of the Group of Experts was held in Montego Bay, Jamaica, on August 8-10, 2001, under the chairmanship of Jamaica. The main area of priority identified by the Group of Experts was effective treatment for substance abusers.

II. PROCEEDINGS

A. PARTICIPANTS

Delegates from Argentina, Barbados, Belize, Brazil, Canada, Chile, Costa Rica, Commonwealth of Dominica, El Salvador, Haiti, Jamaica, Mexico, Panama, Paraguay, Peru, the United States, Uruguay, and Venezuela took part in the Fifth Meeting of the Group of Experts on Demand Reduction. In addition, observers were present from the Cayman Islands, Japan, the European Commission (EC), the United Nations Office on Drugs and Crime (UNODC), the World Health Organization (WHO), and the Ibero-American Network of NGOs working in Drug Addiction (RIOD). (See List of Participants, Annex I)

B. SESSIONS AND ORGANIZATION OF THE MEETING

The inaugural session took place at 9:30 a.m. on October 22, 2003 at the National Library in Buenos Aires, Argentina. Dr. Wilbur Grimson, Secretary of Programming and Coordination for Drug Abuse Prevention and the Combat of Narcotics Trafficking (SEDRONAR) of Argentina, inaugurated the meeting, in the presence of the following dignitaries: Dr. Juan Carlos Romero, Attorney General; Dr. Mariano Ciafardini, Sub-Secretary for Criminal Policy, representing the Minister of Justice, Security, and Human Rights; Dr. Juan Manuel Sotelo, of the Pan-American Health Organization (PAHO/WHO); Ambassador Domingo Cullen, Director of International Organizations, representing Vice-Chancellor Dr. Jorge Taiana; Dr. Pedro David, Judge, National Court of Penal Cassation; Dr. Atilio Alvarez, Juvenile Public Defender for the National Capital; Dr. Gabriela Hamilton, Executive Coordinator of the National Program to Combat HIV/AIDS and STDs, representing the Minister of Health; Carlos Mauro, Advisor to the Secretary of National Security; Dr. Alicia Lopez, President of the Financial Intelligence Unit; Major Commissioner Daniel Carusso, Second in Command of the Argentinean National Police; Advisor Daniel Berazay, International Narcotics Affairs of the Chancellery; Major Commissioner Juan Carlos Bottallo, Superintendent for the Department on Dangerous Drugs, Argentinean National Police; Major Commander Héctor Schenone, Department on Dangerous Drugs, National Gendarmerie; Head Prefect Albino Gatti, Department on Dangerous Drugs for the Argentinean Naval Prefecture; Vice-Commodore Roberto Gentile, representing the Director of the National Aeronautical Police; Dr. Daniel Pazos, Customs; Dr. Néstor Marchant, Director of the Braulio Moyano Hospital and President of the Argentinean Association of Psychiatrists; Juana Ricci, President of the Argentinean Federation of Drug Abuse Treatment and Prevention NGOs (FONGA); Colonel of Division Christian Barbot, Police Attaché of the Embassy of France; and Dr. Peter Tinsley, Chief Secretary for Criminal Affairs of the Embassy of the United States of America.

Maria Eugenia Perez, Demand Reduction Representative from the Inter-American Drug Abuse Control Commission (CICAD/OAS), welcomed all those present on behalf of the Secretariat, and proceeded to give an overview of topics on the agenda for the meeting, and looked forward to successful completion of the work entrusted to the Group of Experts, which is charged with discussing the issues at hand in order to generate a set of recommendations for CICAD and its member states that will then serve as a framework for plans and policies for most effectively reducing drug demand. Dr. Grimson offered reflections on the drug problem and a consideration of causes and consequences, emphasizing aspects of the situation in Argentina and the deterioration of drug use problems in that country in recent years.

1. WORKING SESSIONS

Dr. Wilbur Grimson, in his capacity as Chair of the Group of Experts, opened the session with an invitation to all delegates to introduce themselves and their work. Ms. Perez then followed with a *Report from the CICAD Executive Secretariat on Activities since the Fourth Meeting of the Experts in Jamaica* (CICAD/DREX/doc.15/03), providing an update on CICAD achievements in demand reduction during the past year, as well as stating the aims of this fifth meeting of the CICAD Group of Experts. The Schedule of Activities was adopted without modification (CICAD/DREX/doc.02/03, Annex II).

Dr. Luis Alfonzo presented to the group a document elaborated by a small group of treatment specialists, ***A Practical guide to the organization of a comprehensive drug treatment system: a***

proposal (CICAD/DREX/doc.03/03), after which discussion between participants centered around the following topics:

- The document was very well received by the delegates, who commented that it serves to fill a critical gap in terms of organizing the provision of treatment services, and clearly indicates both the technical and political steps that need to be taken;
- The need to identify the demand for treatment, by type of drug most commonly used as well as the appropriate form of treatment required, in order to determine what treatment services need to be developed in each country;
- The importance of providing gender-appropriate treatment services;
- The goals of substance abuse treatment are:
 - to stop drug use
 - to prolong abstinence
 - to restore the individual's ability to function
 - to assist the individual's social reintegration into family, studies, work, etc.;
- The enactment of supporting legislation for a National Treatment System, which should assign responsibility to each institution involved in treatment;
- The accreditation of service providers through systematic training;
- Before a country moves to implement a National Treatment System, it is necessary to consider:
 - What is the severity of the problem nationally that merits financing a Treatment System?
 - How much will it cost to implement such a system?
 - How many substance users do we have, and is this number substantial?
 - What are the political and social advantages of implementing or not implementing such a system?
- It is necessary that the health care system **recognize addiction as a disease**, that is, as a medical condition that merits treatment, especially in cases of severe intoxication or when it is detected in emergency rooms, so that the system can ensure proper diagnosis and appropriate referral.

In the afternoon, all delegates and participants were received in the **Casa Rosada** (the Presidential Palace) in a meeting granted by the Office of the President of Argentina at the request of Dr. Grimson. The group met with the **Minister of the Interior, Dr. Alberto Fernandez**, and the **Secretary General of the Presidency, Dr. Oscar Isidro José Parrilli**. Participants introduced themselves, and Dr. Grimson and Ms. Pérez provided a brief explanation of the objectives of this Group of Experts meeting. The two Ministers responded by confirming the necessity of supporting governmental measures to address drug use and demand reduction, as well as the objectives of this Fifth Meeting of the Group of Experts.

During the second, third and fourth sessions, a series of presentations was delivered on current practices in drug abuse treatment and prevention. The second session began with **Linda Montanari of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA)**, describing the **Treatment Demand Indicator: the work of the EMCDDA** (CICAD/DREX/doc.14/03). She presented:

- The difficulty of collecting treatment data in Latin America, since the health care system is often not the entity keeping track of such information;
- The European Monitoring Centre takes fingerprints to prevent against counting the same patient twice;
- A case is considered “new” when the drug user is accessing services for the first time, or if he or she has not sought services within the past year;
- The EMCDDA does not measure the “demand for treatment” per se; rather it creates a client profile, the drug of choice, the age of first-use, and whether they are male or female, and also does an inventory of existing treatment centers in order to determine treatment needs, or the demand for treatment services in a specific country;

- The WHO representative commented that the judicial system is generating an artificial demand, because when it detains an offender who is using, they send him or her to treatment regardless of whether this person has a medically diagnosed dependency;
- Measuring the demand for treatment is a complicated task. For example, populations at high risk for substance use, such street children or adults who are homeless or living in the streets, are not reflected in the numbers of substance users counted through household or other surveys, precisely because they are on the street.

This was followed by the “Panel on substance abuse prevention: promising methodologies.” First at hand was the topic of school-based prevention, with a presentation from **Dr. Giselle Amador, Technical Area Coordinator for the Costa Rican Institute on Alcoholism and the Addictions (IAFA)**. She described IAFA’s school-based prevention program *Learning to Value Myself* (CICAD/DREX/doc.13/03), and presented results of the evaluations of school-based prevention programs during the 1999-2000 and 2001-2002. The findings indicated the following:

- The evaluation process should be continued in order to truly be able to understand the program’s preventive impact on students;
- It is necessary to have a control group in order to carry out the evaluation process;
- Students who abstain from use tend to demonstrate more advanced life skills, while active users tend to score lower in these skill areas;
- Male and female students acquire skills differently, indicating that preventive programs should take into consideration gender-appropriate approaches;
- It is necessary to establish both qualitative and quantitative evaluations in order to better measure the impact of school-based preventive programs.

This was followed by a three-part presentation on the CICAD project to include **substance abuse prevention in 14 nursing schools in Latin America** (CICAD/DREX/doc.09/03). Dr. Gloria Wright of CICAD opened by outlining *Challenges and Perspectives* within the overall project. Then **Dr. Margarita Abdala de Tomas**, Vice-Director of the Nursing School at the National University of Cordoba, and **Dr. Teresa Micozzi**, Director of the University of Rosario Medical School Nursing School, each described their experiences in integrating substance abuse content within their own schools, as well as the results of outreach activities and research studies. During these presentations, participants received copies of the five books published about the project, as well as the final technical report from the University of Cordoba Nursing School, whose program is no longer financed by CICAD, but continues to receive technical support.

Dr. Guillermo Castaño, Coordinator of the Online Masters in Drug Addiction Studies for the Luis Amigo University Foundation (FUNLAM) in Medellin, Colombia, delivered a presentation on the *Practical aspects of implementing policies and programs for the prevention of the use of alcohol and other psychoactive substances in the workplace* (CICAD/DREX/doc.12/03).

- He emphasized the need to sensitize the business community as well as the labor unions as to why they should step in and offer substance abuse prevention programs for their workers. What are the benefits for the company?
- The importance of carrying out more research to measure or characterize substance use problems in the workplace;
- Work particularly with the most vulnerable corporations where public safety is at stake, (airlines, ground transport, railroad, assembly-line factories such as *maquiladores*, and others);
- Acknowledgement of the work that has been done by the International Labour Organization (ILO) in the field of workplace prevention.

The final panelist for this session, **Mike Buscemi, Senior Youth Advisor for the Lions Club International Foundation**, introduced *Skills for Adolescence: a substance abuse prevention*

program (CICAD/DREX/doc.10/03), which Lions has developed and implemented in countries around the world.

He described the Lions Club International Foundation and what it is doing in the area of substance abuse prevention for adolescents. The program's emphasis lies in five components:

- Introducing drug-related information into the curriculum;
- Training teachers;
- Involving parents in the prevention process;
- Bringing in the community as an active player in prevention.

The presentation was very well received by the group, who accepted Mr. Buscemi's offer to form a strategic alliance between the Lions Club International Foundation and CICAD in order to develop school- and community-based prevention programs, especially with youth in targeted communities.

The third session opened with a demonstration by **Mr. Alfonso Abarca, of the Salvadoran Anti-drug Foundation (FUNDASALVA)**, of the Foundation's ***Software to monitor the progression of patients through drug treatment programs***.

- Many participants commented on the utility of a program such as this, and asked about the possibility of sharing this software with other countries in the region;
- The experts emphasized the importance of having intake and registration forms which are compatible between institutions, for example, the SIDUC survey with FUNDASALVA's computerized patient tracking program. This will require that suitable computer programs be developed that permit simplified and compatible data collection during the patient intake process.

Following this, **Ornel Brooks, Executive Director of the Belize National Drug Abuse Control Council (NDACC)**, gave an overview of ***Alternatives to custodial sentencing: the experience in Belize*** (CICAD/DREX/doc.11/03), after which the Group agreed upon the importance of considering alternative sentencing, such as community service and parole, when combined with treatment in cases of addiction, as an alternative to incarceration for minor drug-related infractions. Such methods could also serve to relieve prison overcrowding in the region, where many prisons are full of drug users.

Dr. David Deitch, Head of the Addiction Treatment Center of the University of California at San Diego, made a presentation on ***In-custody Treatment: Rationale, Outcomes, and Directions*** (CICAD/DREX/doc.04/03). Participants reacted very favorably to the presentation and to the methodology used, and recognized the importance of being able to provide treatment or other rehabilitative assistance to drug-dependent inmates. The meeting recommended the creation of Treatment Centers or Therapeutic Communities within the prison but apart from the general inmate population, thus enabling individual treatment for these drug-dependent individuals.

To close the session, **Dr. Juana Tomas-Rosello, Treatment Advisor to the United Nations Office on Drugs and Crime (UNODC)**, introduced participants to recently released UNODC documents dealing with the need for policies to finance drug abuse treatment, as well as treatment planning in ***Drug Abuse Treatment and Rehabilitation: a Practical Planning and Implementation Guide***.

- Dr. Tomas-Rosello commented that the American hemisphere is the only one with a group of experts for Demand Reduction that is discussing issues at this level of detail. She offered CICAD and the Group of Experts use of the three UNODC documents listed below, with hopes that they could complement CICAD's own treatment document:
 - Drug Abuse Treatment and Rehabilitation: A Practical Planning and Implementation Guide
 - Investing in Drug Abuse Treatment: A Discussion Paper for Policy Makers
 - Contemporary Drug Abuse Treatment: A Review of the Evidence Base
- She also let the group know that UNODC is ready and willing to work collaboratively with CICAD and this Group of Experts.

The final presentation was given by **Dr. Héctor Shalom, National Coordinator of the Youth Action Centers in Argentina**, a project of the Ministry of Education, Science, and Technology. He spoke on the ***Creation of National Community Prevention Programs*** (CICAD/DREX/doc.16/03), describing this community-based prevention model and how it functions:

- The program takes in-school adolescents and uses them as agents to organize life skills development activities. The program is run by the young people themselves, and is open to other youth from the community, thus incorporating out-of-school children.
- Evaluations of the more than two hundred youth centers have shown that the program has:
 - Reduced the school drop-out rate by 12%
 - Incorporated youth that had been expelled from the school system, allowing them to enter school again
 - Lowered the suicide rate among adolescents.

At the end of each of these presentations, there was a period of open discussion, during which the experts could offer their conclusions and recommendations, which were then elaborated on the conference screens in both English and Spanish, thus compiling the set of recommendations which are presented below (see Section III).

The closing session was held at 3:30 p.m. on Friday, October 24, 2003. Maria Eugenia Perez addressed the delegates on behalf of the Executive Secretariat of CICAD, congratulating them on their productive efforts. Dr. Grimson, in his capacity as Chair of the Group of Experts, made a few words recognizing the commitment displayed by each of the participants, and after highlighting the excellent technical execution of the meeting, marked its official conclusion.

III. RECOMMENDATIONS OF THE GROUP OF EXPERTS ON DEMAND REDUCTION

The Fifth Meeting of the Group of Experts on Demand Reduction agreed to submit the following recommendations to the Commission and to the member states for consideration and possible adoption:

General recommendations:

Proposes

1. To recognize and understand the complexity of problems arising from drug use, which requires an approach rooted in a broad participation and commitment on the part of many sectors, both governmental and non-governmental, trade unions, industry, civil society and multilateral cooperation agencies, so that, in coordination, they are able to plan and execute effective and timely measures to overcome the difficulties identified.¹
2. To establish a balance between national policies on Supply Control and Demand Reduction, thus enabling member states to invest the necessary resources and efforts towards reducing the significant economic and social costs resulting from problems relating to drug use.²

I. ORGANIZATION OF A NATIONAL SUBSTANCE ABUSE TREATMENT SYSTEM³

Recommendations to the member states

1. **To establish a National Treatment System** for drug use disorders and to identify the **national agency** that will be responsible for coordinating the system.⁴

¹ Relating to MEM Indicators 1, 2, 3 and 4.

² Relating to MEM Indicator 1.

³ Relating to MEM Indicators 13, 14, and 15).

2. **To ensure that national drug treatment programs and centers are integrated into a continuum of care**, with adequate patient matching and referrals, and to make specific plans to fill gaps detected in treatment services and modalities.
3. To use as reference the **Practical Guides** for the organization of a comprehensive national drug treatment system developed by **CICAD** and by the **United Nations Office on Drugs and Crime (UNODC)**.
4. **To allocate the necessary resources for implementation of a National Treatment Plan**, so that existing treatment services will meet **standards for quality, efficiency, cost-benefit and evidence-based impact evaluations**.⁵
5. The **National Treatment System** developed by the member states should take into account the following **key aspects**:
 - a. A **commitment on the part of the health sector** to a comprehensive approach to problems arising out of drug use, integrated within the current health system, and including the active participation of the primary care system and the overall health network.⁶
 - b. To include, as a priority, **timely care for vulnerable population groups**, especially those in particularly difficult circumstances, such as **children and teenagers, women, indigenous populations, workers, people living with HIV/AIDS, prison populations and intravenous drug users, among others**.⁷
 - c. To create the conditions in which all individuals requiring treatment services can have **access to treatment**.⁸
 - d. To develop a **national registry and accreditation system for treatment programs**, based on continuous evaluation and on maintaining minimum operational standards, providing the national observatories on drugs with the information compiled.⁹
6. If they have not yet done so, member states will establish “**Minimum Standards of Care in Drug Treatment**.”
7. To strengthen mechanisms for gathering up-to-date data on the **national capacity to provide treatment services**, including information on the number of existing institutions, service accessibility, type of interventions available, as well as the characteristics of the population seeking said services, such as socio-demographic traits and drug use profiles.¹⁰
8. To include, within the **social security system, HMOs (health insurance)** and related systems, **coverage for problems arising from drug use, avoiding any exclusion or discrimination which may adversely affect people’s inalienable right to healthcare**.¹¹

Recommendations to CICAD, the United Nations Office on Drugs and Crime, PAHO and other international donor agencies

⁴ MEM Indicators 1 and 3.

⁵ MEM Indicators 1, 2, 12 and 15.

⁶ MEM Indicators 1 and 3.

⁷ MEM Indicators 8 and 14.

⁸ MEM Indicators 12 and 14.

⁹ MEM Indicators 12 and 13.

¹⁰ MEM Indicators 12, 13, 14, 16, 17, 18, 19, 20, 21 and 22.

¹¹ MEM Indicators 1 and 2.

1. Provide technical and financial assistance for the development of comprehensive national drug treatment systems to those countries who so request.

II. COMPUTERIZED SYSTEMS FOR PATIENT TRACKING¹²

Recommendation to member states

That they continue to pursue and enhance data collection on the admission and treatment of patients in both public and private institutions and NGOs within their respective countries.

Recommendation to CICAD's Executive Secretariat

That it provide support to encourage mutually compatible registration methods, for example, the Inter-American Drug Use Data System (SIDUC) with patient tracking software presented by FUNDASALVA. This will require the development of appropriate information systems that can serve to simplify and harmonize patient registration.

III. DRUG ABUSE PREVENTION FOR SPECIFIC POPULATIONS¹³

A. SCHOOL-BASED

Recommendations to member states

1. That they adopt the first recommendation of the 2002 MEM hemispheric report and seek to introduce **comprehensive health promotion, healthy lifestyles, and substance abuse prevention programs into the educational setting**, utilizing age-appropriate materials and training for teachers, school counselors, and other agents of prevention.
2. That they adopt, among other programs of proven effectiveness, a **life skills** strategy as an effective, proven approach for school-based substance abuse prevention.

B. WORKPLACE

Recommendations to member states

1. That research be conducted in order to measure or characterize the extent of drug use in the workplace.
2. To foment **collaboration between Ministries of Labor and trade unions** to create employee assistance programs to prevent drug use in the workplace.
3. To **reach out to private companies and business leaders in vulnerable sectors where public safety is at stake** (for example, transportation, automobile manufacturing plants and other line-production industries such as textile factories and *maquiladoras*) so they are alerted to the need to **invest resources in prevention programs**.

Recommendation to CICAD's Executive Secretariat

1. The **Inter-American Observatory on Drugs** should develop, within the SIDUC system,

¹² MEM Indicators 13, 14, 15, 18, 20 and 27.

¹³ MEM Indicator 8.

methodologies to gather **information on drug use in the workplace**.

2. That it promote **cooperation with the International Labour Organization (ILO)** in order to disseminate prevention strategies developed by the ILO for drug use in the workplace.

C. PENAL DETENTION CENTERS¹⁴

Recommendations to member states

1. In order to reduce the large number of **drug users in prison**, to develop, in the case of minor offenses, mechanisms offering **alternatives to custodial sentencing, such as community service work and probation, offered in conjunction with treatment or counseling in cases of addiction**.
2. For drug users in prison, implement treatment programs, such as **therapeutic communities, inside the prisons**, keeping addicts apart from other inmates so that they can receive treatment tailored to their particular needs.

D. YOUTH-BASED COMMUNITY AND SCHOOL PREVENTION

Recommendations to member states

1. To promote **youth participation** through the organization of activities and the creation of centers seeking to give youth an active and leading role in making their own interests and preferred ways of working known. The value of these projects should be emphasized in furthering outreach to **marginalized populations which -- often left out of the formal education system -- might thus be reintegrated**.
2. It should be noted that the sustainability of these projects requires both they they be carried out and that they be evaluated both qualitatively as well as quantitatively, that there be follow-up with the specific populations, and that information about the projects be disseminated through published materials.

IV. TRAINING OF HUMAN RESOURCES¹⁵

Recommendations to member states

1. To **incorporate the training of specialized professionals within existing human resource development programs for the health and social development sectors**, using strategies and resources already allocated for such purposes, as well as developing new alternatives.
2. Appreciating the impact of the **International Online M.A. in Addictions Studies** in preparing specialized professionals in this field, to promote the program nationally, and to seek fellowships and educational loans for students (EDUCREDITS).
3. To seek to include representatives of the nursing profession in their respective national drug commissions or councils.
4. Consider that the nursing school model can be advantageously applied to **include content about substance abuse in similar training in other disciplinary areas**.

¹⁴ MEM Indicator 22.

¹⁵ MEM Indicator 9.

5. To establish a system for the **accreditation of drug treatment counselors** and other treatment workers at centers offering programs at a variety of levels.

Recommendation to CICAD's Executive Secretariat

1. To develop, with the assistance of nursing schools currently participating in the project, a core or "model" curriculum for health promotion and substance abuse that additional nursing schools may adopt.
2. To utilize online distance education methodology, thus incorporating new technologies to Demand Reduction projects with the goals of broadening coverage, making access to substance abuse prevention and treatment knowledge more democratic, and giving CICAD training activities a greater impact.

FINAL CONSIDERATIONS

1. It is recommended to the thirty-fourth regular session of CICAD that the **Chairmanship of the Expert Group on Demand Reduction be extended from one to two years**, given the complexity of the topics being dealt with.
2. It is recommended that the Expert Group on Demand Reduction continue to be associated as a group, that it assist in the implementation of these recommendations, and that it **meet again in October 2004**.
3. The Expert Group requests that the **CICAD Executive Secretariat prepare an action plan**, based on the recommendations of this group, to arrange tasks and allocate responsibilities and necessary resources for their implementation, and finally to submit said plan to the Commission at its thirty-fourth regular session.

ACTION PLAN 2004-2005

I. ORGANIZATION OF A NATIONAL SUBSTANCE ABUSE TREATMENT SYSTEM¹

1. MINISTERIAL-LEVEL MEETING

The CICAD Executive Secretariat, UNODC and PAHO will organize, in 2004, a **high-level meeting with the participation of the Ministries of Health, the National Drug Commissions, congressional and parliamentary representatives, and non-governmental treatment providers** to promote and increase awareness as to the necessity of organizing comprehensive substance abuse treatment systems.

2. FINANCIAL AND TECHNICAL ASSISTANCE

The CICAD Executive Secretariat, UNODC, and PAHO will provide **technical and financial assistance** to those countries who so request it in order to establish **Minimum Standards of Care in Substance Abuse Treatment**. Countries who have already established Minimum Standards of Care will cooperate in this effort, sending their own experts to assist other countries. To these ends, the CICAD Executive Secretariat will establish a fund to facilitate such horizontal cooperation.

II. INFORMATION EXCHANGE

1. Recognizing that in demand reduction, it is essential that there be broad exchange of information on effective and evaluated experiences, research about the bio-psychosocial roots of addiction, and so on, the CICAD Executive Secretariat, in collaboration with UNODC and PAHO, will establish an online community so that the members of the Group of Experts and other interested colleagues can share information and materials and remain in contact with each other.

III. COMPUTERIZED REGISTRATION SYSTEMS FOR PATIENT TRACKING

1. The Executive Secretariat, in the first quarter of 2004, will facilitate the adaptation of FUNDASALVA's patient tracking software, so that patient intake forms include the information asked for in the SIDUC surveys, as well as that required by the MEM, in order that it may be useful to member countries for the registration and tracking of substance abuse treatment patients. Once these changes have been made, the Secretariat will be able to offer the software to interested countries, along with the financial and technical assistance needed to secure implementation.

IV. PREVENTION TAILORED TO SPECIFIC POPULATION GROUPS²

A. SCHOOL-BASED PREVENTION

1. **Guidelines for a Regional Plan for School-based Prevention:** Experts from the Demand Reduction Expert Group will be responsible for developing, during the half of 2004, a Regional Plan for School-Based Prevention, utilizing a combination of strategies of proven effectiveness: health promotion, healthy lifestyles, developing life skills, and substance abuse prevention.
2. These guidelines will be oriented towards identifying content that should be included in a school-based program, outlining how to train teachers, defining which primary school ages should be covered, how to evaluate the program's impact, how to cooperate with the Ministry of Education,

¹ MEM Indicators 13, 14 and 15.

² MEM Indicator 8.

etc. The ultimate objective of school-based prevention should fundamentally be to expand coverage nationwide.

3. A working group, composed of members of the Group of Experts in Demand Reduction, will develop these guidelines at a meeting to be held in the first half of 2004.
4. CICAD's Executive Secretariat, PAHO, and UNODC will seek to provide technical and financial assistance to member states to implement these guidelines, in addition to promoting horizontal cooperation among countries that have made greater advances in the realm of school-based prevention.

B. YOUTH-BASED COMMUNITY AND SCHOOL PREVENTION

1. The CICAD Executive Secretariat will request that the Government of Argentina circulate the document and share its experience with the Creation of Youth Action Centers, which propel the integration of marginalized youth through prevention activities -- run out of the schools -- as a base for targeting youth in the community, thus providing a way to re-direct dropouts back into the education system. This exchange of experiences will pave the way for implementation of pilot versions of the Youth Action Center program in at least one or two member states that so request.

V. PENAL DETENTION CENTERS AND ALTERNATIVES TO CUSTODIAL SENTENCING

1. Noting that **Guatemala, Peru, and St. Vincent and the Grenadines** are carrying out projects to provide drug treatment in prisons under the MEM assistance scheme, the CICAD Executive Secretariat will promote horizontal cooperation and interchange. It will also do follow-up and evaluation during the implementation period, in order to be able to expand this experience to other interested member states. **The Executive Secretariat will finance these horizontal cooperation activities during 2004 and 2005.**
2. For prison treatment projects, the offer made by the University of California to share its Therapeutic Community model for prison intervention is gratefully accepted.
3. Regarding **alternatives to custodial sentencing**, Belize will circulate documentation of its experiences to expert group members, and a **Caribbean meeting will be held in the first semester of 2004 with the support of the CICAD Executive Secretariat.** Based on results of the meeting, CARICOM will be asked to present the topic to the most appropriate body for action and implementation in Caribbean states.

VI. SPECIALIZED HUMAN RESOURCES TRAINING IN THE ADDICTIONS³

1. Creation of an International EDUCREDIT Fund, designed to enable human resources to receive specialized training through scholarships or long-term low-interest loans. Initially these will be directed towards students in the International Online M.A. in Addictions Studies, and will later be broadened to include other training programs run by CICAD.
2. The Executive Secretariat, in conjunction with other donor agencies, commits to contribute resources into the fund during its first three years of existence, after which time the Fund will become self-financing, generating its own resources.

A. INTERNATIONAL ONLINE M.A. DEGREE IN ADDICTIONS STUDIES

³ MEM Indicator 9.

1. The graduation ceremony for the first class of the Online M.A. will take place September 24, 2004, at the OAS Headquarters in Washington, in the Hall of the Americas, in the presence of the eight Rectors, coordinators, and those students, professors, and tutors who are able to attend.
2. In March 2004, the Rectors of the eight universities that make up the University Network UNIREDDROGAS will meet to evaluate the progress of the Online M.A. in its second year of execution, to approve the academic and administrative regulations, and to work on the agreement between the universities for future promotion and operation of the program.
3. To request the National Drug Commissions of the member countries to consider serving as Internship Sites for the On-Line M.A. students who are interested in drug policy formulation and planning.
4. The representative from the Ibero-American Network of NGOs working in Drug Addiction (RIOD) confirmed the commitment made at the recent RIOD meeting in Guatemala regarding the incorporation of pertinent RIOD institutions as Internship Sites for students of the Online M.A. This brings with it strengthened ties between governmental and non-governmental organizations performing substance abuse work in the region.

B. SCHOOLS OF NURSING

1. The Executive Secretariat as well as the members of the Group of Experts commit to promoting and circulating the nursing school model so that other disciplines linked to drug use issues are inspired to **include drug-related content in their own courses of study**.
2. The Executive Secretariat, in cooperation with the nursing schools currently participating in the project, will develop a core or "model" curriculum about health promotion and substance abuse prevention, so that other nursing schools can adopt it.
3. In the second half of 2004, the Executive Secretariat, in conjunction with the National Distance Education University of Spain (UNED) and the University of Sao Paulo-Riberao Preto, will begin the process of putting the Drug Research Methodology Course onto the internet, so that it will be available as an online training tool for nursing students and other health professionals.

C. INTERNATIONAL ONLINE M.A. DEGREE IN PEACE STUDIES AND CONFLICT RESOLUTION

1. In February 2004, the CICAD Executive Secretariat, in conjunction with the National Distance Education University of Spain (UNED) and the Metropolitan University of Caracas-Venezuela (FUNDAMET), will meet with universities that have a speciality in the area of peace studies and conflict resolution, in order to propose the need for an M.A. to train professionals specialized in peace studies and conflict resolution, given the strong overlap between narcotics and drug production and problems of governability, corruption, and democracy in countries in the region.

VII. IMPACT EVALUATION OF DEMAND REDUCTION PROGRAMS⁴

1. The Government of Uruguay has offered to serve as host to carry out a workshop for **Training in Evaluation Methods appropriate to measuring the impact of prevention and treatment programs on their target populations, in order to help member states to more fully comply with MEM indicators numbers 11 and 16**. Training is to be carried out in the first semester of 2005.

⁴ MEM Indicators 10 and 15.

VIII. IBERO-AMERICAN NETWORK OF NGOs WORKING IN DRUG ADDICTION (RIOD)

1. CICAD reconfirms its commitment to continue to support activities and actions taken by RIOD.

ANNEX I: LIST OF PARTICIPANTS

FIFTH MEETING OF THE
GROUP OF EXPERTS IN DEMAND REDUCTION
October 22-24, 2003
Buenos Aires, Argentina

OAS/Ser.L/XIV.4.5
CICAD/DREX/doc.08/03
October 24, 2003

**QUINTA REUNION DEL GRUPO DE EXPERTOS EN
REDUCCIÓN DE LA DEMANDA
22-24 Octubre, 2003, Buenos Aires, Argentina**

LISTA DE PARTICIPANTES

ARGENTINA

Dr. Wilbur R. Grimson
Secretario de Programación y Coordinación para la
Prevención de la Drogadicción y la Lucha contra el Narcotráfico (SEDRONAR)
Buenos Aires, Argentina
Telf: (5411) 4320-1290
Fax: (5411) 4320-1182
Correo Electrónico: rgrimson@sedronar.gov.ar

Dr. Camilo Verruno
Director Nacional de Asistencia, Secretaría de Programación y Coordinación para la
Prevención de la Drogadicción y la Lucha contra el Narcotráfico (SEDRONAR)
Telf: (5411) 4320-1290
Fax: (5411) 4320-1182
Correo Electrónico: cverruno@sedronar.gov.ar

Lic. María Marta Herz
Directora de Prevención, Secretaría de Programación y Coordinación para la
Prevención de la Drogadicción y la Lucha contra el Narcotráfico (SEDRONAR)
Buenos Aires, Argentina
Telf: (5411) 4320-1290
Fax: (5411) 4320-1182
Correo Electrónico: prevencion@sedronar.gov.ar

Lic. Manuel Díaz
Jefe de Auditorías, Secretaría de Programación y Coordinación para la
Prevención de la Drogadicción y la Lucha contra el Narcotráfico (SEDRONAR)
Buenos Aires, Argentina
Telf: (5411) 4320-1290
Fax: (5411) 4320-1182

Dr. Ernesto Eduardo González
Asesor de Relaciones Institucionales, Secretaría de Programación y Coordinación para la
Prevención de la Drogadicción y la Lucha contra el Narcotráfico (SEDRONAR)
Buenos Aires, Argentina
Tel: (5411) 4320-1290
Fax: (5411) 4320-1182
Correo Electrónico: info@trabajosindrogas.com.ar

BARBADOS

Mr. Ishmael Morris
Deputy Manager
National Council on Substance Abuse
Bridgetown, St. Michael
Barbados
Tel: (246) 429-6272 Cell: (246) 427-8962
Fax: (246) 427-8966
E-mail: imorris@ncsa.org.bb

BELIZE

Mr. Ornel Brooks
Executive Director
National Drug Abuse Control Council
Ministry of Health
Belize City, Belize, C.A.
Tel: (501) 223-1106
Fax: (501) 223-1121
E-mail: ndacc@btl.net

BRAZIL

Dra. Luciana Gonçalves
Coordenadora Geral de Tratamento
Secretaria Nacional Antidrogas - SENAD
Palacio do Planalto Anexo II
Brasilia, Distrito Federal, Brazil
Tel: (55-61) 411-2097 / 411-2902
Fax: (55-61) 411-2110
E-mail: lucianag@planalto.gov.br

CANADA

Ms. Halina Cyr
Acting Director
Office of Demand Reduction, Drug Strategy and
Controlled Substances Programme
Health Canada
Ottawa, Ontario, Canada
Tel: (613) 957-8337
Fax: (613) 957-1565
E-mail: halina_cyr@hc-sc.gc.ca

CHILE

Sra. Selva Careaga Nuñez
Encargada del Area de Capacitación y Proyectos
Consejo Nacional para el Control de Estupeficientes (CONACE)
Telf: (562) 510-0816
Fax: (562) 699-4462
Correo Electrónico: scareagan@CONACE.gov.cl

COSTA RICA

Dra. Eugenia Mata Chavarría
Instituto Costarricense sobre Drogas
Apartado 7311-100
San José, Costa Rica
Telf: (506-2) 411-850
Fax: (506-2) 411-911
Correo Electrónico: mataeugenia@costarricense.cr

EL SALVADOR

Dra. Margarita Chávez Escobar
Directora Ejecutiva
Comisión Salvadoreña Antidrogas (COSA)
San Salvador, El Salvador
Telf: (503) 2-211-721
Fax: (503) 2-211-721
Correo Electrónico: margarita.chavez@gobnacion.gob.sv

COMMONWEALTH OF DOMINICA

Mr. Mervin Paul
Acting Director
National Drug Prevention Unit
Government Headquarters
Roseau, Commonwealth of Dominica, W.I.
Tel: (767) 448-2401 Ext. 3343/3446
Fax: (767) 448-6086
E-mail: merv_paul@hotmail.com

HAITI

Dr. Marie Ghislaine Adrien
Director
Commission Nationale de Lutte contre la Drogue (CONALD)
National Psychiatric Center in Haiti
Port-au-Prince
Telf: (509) 413-3644
E-mail: ghislaineadrien@yahoo.com

JAMAICA

Professor Frederick Hickling
Chairman, National Council on Drug Abuse
Kingston 5, Jamaica
Tel: (876) 927-2492 / Mobile: (876) 399-1809
Fax: (876) 927-2116
E-mail: frederick.hickling@uwimona.edu.jm

MEXICO

Lic. José Manuel Castrejón Vacío
Secretario Técnico
Consejo Nacional contra las Adicciones (CONADIC)
Secretaría de Salud
Av. Paseo de la Reforma 450 Piso 9
CP 06600 México, DF
Telf: (525) 5207-9382
Fax: (525) 5207-9333
Correo Electrónico: mcastrejon@salud.gob.mx

PANAMA

Sra. Soraya Cano
Ministro Consejero de la Embajada de Panamá en Argentina
Ave. Santa Fé 11461 Piso 1
Buenos Aires, Argentina
Telf: (5411) 4811-1254 / 4814-3655
Fax: (5411) 4814-0450
Correo Electrónico: consejeropanama@fibertel.com.ar

Sr. Juan Pablo Mora
Agregado de la Embajada de Panamá en Argentina
Telf: (5411) 4811-1254 / 4814-3655

PARAGUAY

Dra. Lis Kreitmayr de Mallwitz
Cooperación Internacional
Secretaría Nacional Anti-Drogas (SENAD)
Telf: (595-21) 942-563 Particular Cel. (595-981) 445-950
Tel/Fax: (595-21) 214-731
Correo Electrónico: lis_kreitmayr@hotmail.com

Cnel. DEM Angel Benitez Cáceres
Agregado Militar
Embajada de Paraguay en Argentina
Telf: (5411) 4804-4192
Fax: (5411) 4802-0981
Correo Electrónico: abenitez@hotmail.com; agregaduriamilitar@hotmail.com

PERU

Sr. José Luis Peña Vega
Coordinador de Tratamiento y Rehabilitación de la Gerencia de
Prevención y Rehabilitación del Consumo de Drogas
Comisión Nacional para el Desarrollo y Vida sin Drogas (DEVIDA)
Lima, Perú
Telef/Fax: (511) 449-0007 / 449-0057 / 449-0528
Correo Electrónico: jpena@devida.gob.pe

UNITED STATES

Ms. Rachel Romsaas
Program Assistant
Bureau of International Law Enforcement and Narcotics Matters (INL)
U.S. Department of State
Washington, D.C.
Tel: (202) 647-7843
Fax: (202) 647-5603
E-mail: Romsaasr@state.gov

URUGUAY

Dra. María Lorenzo y Losada
Asesora Técnica de la Secretaría Nacional de Drogas
Montevideo, Uruguay
Telf: (598-2) 622-6022 Int. 1241
Fax: (598-2) 150-3952
Correo Electrónico: Mlorenzo@presidencia.gub.uy

VENEZUELA

Lic. Luis Alfonzo
Médico Psiquiatra
Comisión Nacional contra el Uso Ilícito de Drogas (CONACUID)
Caracas, Venezuela
Tel/Fax: (58-212) 753-1538 / (58-414) 252-2723
Correo Electrónico: alfomeza@telcel.net.ve; alfonzo4457@hotmail.com

INVITADOS ESPECIALES / PRESENTADORES

Lic. Alfonso Abarca
Fundación Antidrogas de El Salvador (FUNDASALVA)
San Salvador, El Salvador
Telf: (582) 793-4016
Tel/Fax: (582) 753-1538
Correo Electrónico: Aabarca@fundasalva.org.sv

Dra. Margarita Abdala de Tomás
Vice-Directora
Escuela de Enfermería
Universidad Nacional de Córdoba
Córdoba, Argentina
Telf: (54-351) 433-4028
Fax: (54-351) 433-4043
Correo Electrónico: margaritaabdala@hotmail.com; enfermeria@fcm.unc.edu

INVITADOS ESPECIALES / PRESENTADORES

Lic. Giselle Amador
Coordinadora del Área Técnica
Área de Rehabilitación
Instituto sobre Alcoholismo y Farmacodependencia (IAFA)
San José, Costa Rica
Telf: (506-2) 24-40-96
Fax: (506-2) 24-67-62
Correo Electrónico: giselleamador@costarricense.cr

Mr. Michael Buscemi
Senior Youth Advisor to the Lions Clubs International Foundation
1984-B Coffman Rd., Newark OH 43055, U.S.A.
Tel: (740) 522-6404
Fax: (740) 522-6580
E-mail: mikeb4kids@yahoo.com

Dr. Guillermo Castaño
Coordinador Maestría On-Line en Drogodependencias
Fundación Universitaria Luis Amigó (FUNLAM)
Medellín, Colombia
Telf: (574) 260-6666 Ext. 122
Fax: (574) 260-8074 Cel: (574) 420-8590
Correo Electrónico: gcastano@sembrador.amigomed.edu.co; azapata@funlam.edu.co

Dra. Alejandra Chervo
Vice-Directora, Escuela de Enfermería
Universidad de Rosario
Ovidio Lagos 480
Rosario, Argentina 2000
Telf: (54-3461) 436-963
Fax: (54-341) 480-4579
Correo Electrónico: mchervo@fmedic.unr.edu.ar; machervo@hotmail.com

Dr. Catherine Chestnut
Chief Executive Officer
National Drug Council of the Cayman Islands
P.O. Box 10007APO
Grand Cayman, Cayman Islands, BWI
Tel: (345) 949-9000
Fax: (345) 949-6264
E-mail: cathvndc@candw.ky

Dr. David A. Deitch, PhD
University of California, San Diego
Department of Psychiatry
La Jolla, CA 92037-5051, U.S.A.
Tel: (858) 551-2957
Fax: (858) 534-3877
E-mail: rvignati@ucsd.edu (assistant)
Website: www.atc.ucsd.edu

INVITADOS ESPECIALES / PRESENTADORES

Dra. Derma Fassi de Grenat
Directora, Escuela de Enfermería
Universidad Nacional de Córdoba
Córdoba, Argentina
Telf: (54-351) 423-4043 (Escuela)
Telf/Fax: (54-351) 433-4028
Correo Electrónico: enfermeria@fcm.unc.edu.ar

Dr. Yasuyo Kajimoto
First Secretary, Japanese Embassy in Argentina
Tel: (54-11) 4318-8200
Fax: (54-11) 4318-8210
E-mail: yasuyo.kajimoto@mofa.go.jp

Dra. Teresa Micozzi
Directora Escuela de Enfermería
Universidad Nacional de Rosario
Ovidio Lagos 480
Rosario, Argentina 2000
Telf: (54-341) 439-2655
Fax: (54-341) 411-1457
Correo Electrónico: teresamicozzi@hotmail.com; tmcozzi@fmedic.unr.edu.ar

Lic. Héctor Shalom
Responsable Nacional de los Centros de Actividades Juveniles
del Ministerio de Educación, Ciencia y Tecnología
Buenos Aires, Argentina
Telf: (5411) 4129-1000 ext. 7443
Correo Electrónico: hshalom@me.gov.ar

**ORGANIZACIONES INTERNACIONALES/
INTERNATIONAL ORGANIZATIONS****OFICINA DE LAS NACIONES UNIDAS CONTRA LA DROGA Y EL DELITO/
UNITED NATIONS OFFICE ON DRUGS AND CRIME (UNODC)**

Dr. Juana M. Tomás-Rossello
Drug Abuse Treatment Adviser
United Nations Office on Drugs and Crime (UNODC)
Vienna International Centre
P.O. Box 500
A 1400 Vienna, Austria
Tel: (43-1) 26060-5284
Fax: (43-1) 26060-5928
E-mail: juana.tomas@unodc.org

**ORGANIZACIONES INTERNACIONALES/
INTERNATIONAL ORGANIZATIONS**

**ORGANIZACION MUNDIAL DE LA SALUD (OMS)/
WORLD HEALTH ORGANIZATION (WHO)**

Dra. Maristela G. Monteiro
Coordinator
Management of Substance Dependence
World Health Organization
20 Avenue Appia
1211 Geneva, Switzerland
Tel: (41-22) 791-4791
Fax: (41-22) 791-4851
E-mail: monteirom@who.int

**UNION EUROPEA-COMISIÓN EUROPEA/
EUROPEAN UNION-EUROPEAN COMMISSION**

Ms. Linda Montanari
European Monitoring Centre on Drugs and Drug Addiction (EMCDDA)
Rua Cruz de Santa Apolonia 23-25
P - 1149-045 Lisbon, Portugal
Tel: (9351-21) 811-3081
Fax: (351-21) 813-7943
E-mail: Linda.Montanari@emcdda.eu.int

Dr. Marcos Langbehn
Asesor Político
Comisión Europea
Delegación en Argentina
Ayacucho 1537
Buenos Aires, Argentina
Telf: (011-5411) 4805-3759
Fax: (011-5411) 4801-1594
Correo Electrónico: marcos.longbehn@cec.eu.int

**ORGANISMOS NO GUBERNAMENTALES/
NON-GOVERNMENTAL ORGANIZATIONS**

Lic. Roberto Gallinal
Red Iberoamericana de ONG que Trabajan en Drogodependencias (RIOD)
Gregorio Suarez 2818 Ap. 101
Montevideo, Uruguay
Tel: (5982) 708-1845
Fax: (5982) 708-1845
Correo Electrónico: encare@adinet.com.uy

Lic. María de Lourdes Valdés Abascal
Asesora
Fundación Montefénix
México, DF
Telf: (525) 56116-0402
Fax: (525) 5406-5308
Correo Electrónico: kyva_abascal@yahoo.com

**COMISION INTERAMERICANA PARA EL CONTROL DEL
ABUSO DE DROGAS (CICAD)/
INTER-AMERICAN DRUG ABUSE CONTROL COMMISSION (CICAD)**

Dr. Anna McG. Chisman
Chief, Demand Reduction Program
Tel: (202) 458-6221
Fax: (202) 458-3658
E-mail: Achisman@oas.org

Lic. María Eugenia Pérez-Madrigal
Specialist
Demand Reduction Program
Tel: (202) 458-6920
Fax: (202) 458-3658
E-mail: Mperez@oas.org

Dr. Gloria Wright
Specialist
Demand Reduction Program
Tel: (202) 458-3788
Fax: (202) 458-3658
E-mail: Gwright@oas.org

Mrs. Amparo Hernández
Demand Reduction Program Assistant
and Travel Coordinator
Tel: (202) 458-6321
Fax: (202) 458-3658
E-mail: Ahernandez@oas.org

Ms. Emily Holman
Program Assistant
Demand Reduction Program
Tel: (202) 458-6104
Fax: (202) 458-3658
E-mail: Eholman@oas.org

ANNEX II: SCHEDULE OF ACTIVITIES

V MEETING OF THE GROUP OF EXPERTS
IN DEMAND REDUCTION
October 22-24, 2003
Buenos Aires, Argentina

OEA/Ser. L.XIV.4.5
CICAD/DREX/doc.02/03rev.3
21 October 2003
Original: English

DRAFT SCHEDULE OF ACTIVITIES

Date and Time			Place
Tuesday, October 21, 2003			
5:00 –7:00 pm	Participant Registration		Hotel Las Naciones
Wednesday, October 22, 2003			
9:15 am	Transfer by bus to the National Library:		
10:00 am	Inaugural Session	National Library	
	Remarks by:		
	Mrs. María Eugenia Perez, Executive Secretariat, Inter-American Drug Abuse Control Commission (CICAD)		
	Dr. Wilbur R. Grimson, Secretary of Programming and Coordination for the Prevention of Drug Dependence and the Control of Drug Trafficking (SEDRONAR) of Argentina		
	Followed by:		
	Musical interlude by Cuarteto Tango		
12 noon	Return to Hotel Las Naciones		
12:30 pm	Lunch hosted by SEDRONAR		Hotel Las Naciones
1:45 pm	First Plenary Session		Hotel Las Naciones
	1. Update from the Executive Secretariat on activities since the fourth meeting of the Expert Group		
	2. Practical guide to the organization of a comprehensive drug treatment system: a proposal (CICAD/DREX/doc.03/03) Introduction by Dr. Luis Alfonzo, M.D.		
4:00-4:15 pm	Coffee break		
4:15-6:30 pm	Organization of a comprehensive national drug treatment system: a proposal (<u>contd.</u>)		

DISCUSSION AND RECOMMENDATIONS

6:30 p.m. Adjournment

7:30 pm Reception hosted by the Executive Secretariat of CICAD Hotel Las Naciones

Thursday, October 23, 2003

Second Plenary Session

9:00 a.m.

Demand for treatment indicator: the work of the European Monitoring Centre on Drugs and Drug Addiction (EMCDDA).
Presentation by Ms. Linda Montanari, EMCDDA

Panel on substance abuse prevention: promising approaches

1. School-based drug abuse prevention:
Presentation on Costa Rica's school-based prevention program "Learning to Value Myself", by Dr. Giselle Amador, Technical Area Coordinator, Costa Rican Institute on Alcoholism and the Addictions
2. CICAD's project to introduce substance abuse prevention into the curriculum of 15 nursing schools in Central and South America: Presentation by Dr. Gloria Wright, Executive Secretariat of CICAD, and by Dr. Derma Fassi de Grenat, and Dr. Margarita Abdala de Tómas, Director, and Deputy Director respectively of the nursing school of the University of Córdoba, Argentina

11:00-11:15 am **Coffee break**

4. Practical aspects of implementing policies and programs for the prevention of the use of alcohol and other psychoactive substances in the workplace.
Presentation by Prof. Guillermo Castaño, Luis Amigó University, Medellín, Colombia
5. Skills for adolescence – a substance abuse prevention program.
Presentation by Mr. Mike Buscemi, Senior Youth Advisor to the Lions Clubs International Foundation, Ohio, United States

DISCUSSION AND RECOMMENDATIONS

1:00 pm **Lunch**

Third Plenary Session

- 2:00 p.m. 1. Software to monitor progression of patients in drug treatment programs: a demonstration by Mr. Alfonso Abarca of FUNDASALVA, El Salvador
Discussion of the utility of the software, possible adaptation to other countries, and recommendation

2. Alternatives to sentencing for minor offenses: the experience in Belize. Presentation by Mr. Ornel Brooks, Executive Director, National Drug Abuse Control Council of Belize
Discussion of potential expansion to other countries

3:30-3:45 pm **Coffee break**

3. Treatment programs for drug abusing prisoners: current practices and recommended approaches

In-Custody Treatment: Rationale, Outcomes and Directions.
Presentation by Dr. David Deitch, University of California, San Diego
(CICAD/DREX/doc.04/03)

4. Drug abuse treatment and rehabilitation: A practical planning and implementation guide.
Presentation by Dr. Juana Tomás-Rossello, Drug Abuse Treatment Adviser, United Nations Office on Drugs and Crime (UNODC)

DISCUSSION AND RECOMMENDATIONS

5:30 pm Adjournment

Friday, October 24, 2003

9:00 am **Fourth Plenary Session**

1. Socialization and Change: A Journey through Crime, Drugs, and Recovery. Presentation by Dr. David Deitch, University of California, San Diego (CICAD/DREX/doc.05/03)
2. Creation of national social prevention programs
Presentation by Mr. Héctor Shalom, Youth Action Centers, Argentina
3. Recommendations to CICAD and to the OAS General Assembly on the agenda topics (working groups)
4. Work plan for the Expert Group on Demand Reduction for 2004-2005

4:00 pm **Closing Session**