TRAINING AND CERTIFICATION PROGRAM FOR DRUG AND VIOLENCE PREVENTION, TREATMENT AND REHABILITATION

MRS. ESTHER BEST
NATIONA DRUG COUNCIL, MINISTRY OF NATIONAL SECURITY
TRINIDAD AND TOBAGO
CICAD
Inter-American Drug Abuse Control Commission

MISSION
Enhance the human and institutional capacities of its Member States to reduce the production, trafficking and use of illegal drugs, and to address the health, social and criminal consequences of the drug trade in the Americas.

HEMISPHERIC DRUG STRATEGY
Demand reduction requires, in accordance with the situation and magnitude of the drug problem in each country, the implementation of a variety of evidence-based prevention programs, aimed at distinct target populations, which together constitute a comprehensive system. From a methodological and design standpoint, these programs should be systematic, with specific measurable objectives.
HEMISPHERIC DRUG STRATEGY

Drug dependence is a chronic, relapsing disease that is caused by many factors, including biological, psychological or social, which must be addressed and treated as a public health matter, consistent with the treatment of other chronic diseases.
PREVENTION AND ADDICTION TREATMENT IS ONLY AS GOOD AS THE WORKFORCE THAT DELIVERS IT
PROGRAM OBJECTIVE

Contribute to optimizing the quality of care in prevention, treatment and rehabilitation of drug abuse and dependence and drug-related violence.

TARGET POPULATION

- Governmental and Non-Governmental front line organizations that provide drug abuse and violence prevention, treatment and rehabilitation services:
  - High risk population
  - People suffering from drug abuse/dependence and their families
Training and certification levels, design competency-based curriculum and develop materials. Legal assessments, regulations, certifications, protocols and mechanisms. Certification and re-certification of human resources. Information systems and virtual community. Monitoring and evaluation.
RELEVANCE TO THE CARIBBEAN

Through the MEM the following was revealed:
- Up to the 4th Round 11 of the 14 Caribbean member states received a recommendation on the development of Standards of Care
- 5th Round revealed
  - 11 Recommendations for standards of care
  - 3 Recommendations for licensing of TREATMENT CENTERS
  - 2 Recommendations for a register on number of cases treated
  - 1 Recommendation for a register of treatment centers
  - 1 Recommendation to provide specialized treatment services.

THE REGIONAL RESPONSE

- The CARICOM Secretariat placed this issue on the Work Plan of the 9th EDF Program
- In 2009 collaborated with CICAD to have a workshop on development of Standards of Care
  - Participants included Gov’t, Civil Society and other professionals
- Drafted by the Consultant
- Finalized and published 2010
PROCCER – CARIBBEAN

- Prevention and Treatment Components
- Regionalization of PROCCER in:
  - Mapping, Assessments, Curricula, and Certification Mechanism
- Collaboration with Regional Organizations:
  - CARICOM, CANTA, TVET
- Collaboration with Regional Institutions:
  - The University of the West Indies, St. George's College

DEVELOPMENTS IN THE CARIBBEAN

- May, 2011 – Present
  - Presentation of PROCCER Program to 15 OAS/CARICOM Member States and Bermuda
  - Declaration of Commitment
  - PROCCER—Caribbean Advisory Committee
  - PROCCER—Caribbean Task Force
UPCOMING ACTIVITIES

- Regional Mapping
- Regional Assessments
- Development of Regional Standards and Competencies
  - Development of Prevention Curriculum
  - Adaptation of existing CICAD Treatment Curriculum
- Development of Regional Standards and Competencies

WHAT IS UNIQUE ABOUT PROCCER IN THE CARIBBEAN

- The inclusion of a Prevention component with development of standards, competencies and curriculum has been first introduced in the Caribbean
- PROCCER-Caribbean is using a regional approach for program components to foster harmonization of human resources throughout the region

Experience may serve as an example for replication in further regionalization
THANKS