TOWARDS A COMPREHENSIVE, INTEGRATED SYSTEM OF CARE FOR PEOPLE IN SITUATIONS ASSOCIATED TO THE USE OF PSYCHOACTIVE SUBSTANCES (SPA) “INTEGRA SPA”

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Towards A Comprehensive, Integrated System Of Care For People In Situations Associated to the Use of SPA “INTEGRA SPA”
“The world drug problem, including its political, economic, social and environmental costs, constitutes a complex, dynamic and multi-causal phenomenon that presents a challenge to the States and their governments.

Far from being a local or regional issue, this problem demands a comprehensive, balanced and multidisciplinary approach that requires common and shared responsibility among all States.”

CICAD 2010
The Ministry of Health and Social Protection is designing an integration strategy of services, programs and institutional and community resources to provide comprehensive response and care to people with problems associated to the use of psychoactive substances.

-Adaptable to different scenarios.
-Strategy integrated into the Healthcare System within the framework of Basic Healthcare.
- The purpose is to acknowledge that the use of psychoactive substances is a multi-causal problem associated to determining factors of socio-cultural, economic, community, family and individual aspects, and respond with comprehensive care.

- It is part of a vision of comprehensive care that is not only limited to health or mental health care services, but which is articulated to networking aspects, psychosocial care, wellbeing and social and workplace inclusion.
Political and Regulatory Context

- Law 1566 of 2012
- Law 1438 of 2011 (APS – RISS)
- CRES Agreement 029 of 2011
- Resolution 1315 of 2006
Advancing towards...

- The consolidation of delivery routes and comprehensive care protocols.
- Articulated, networked activities with the confluence of different strategic sectors and players: Health, wellbeing, social protection, security, justice, education, work, community, among others.
- Promote a quality approach base don the promotion of human rights and the respect for differences.
- Social/Workplace inclusion: The design of an inclusive economic development model for people with problems due to the use of psychoactive substances.
Characteristics of Integra SPA

- Populations and territories defined based on knowledge about their needs.
- Diversified network with quality services.
- Ongoing care.
- Different points of entry.
- Coordination mechanisms.
- Care focused on the individual, family, and community.
- Social participation.
- Technical, operating, and financial processes and procedures are defined.
- Control, oversight, and inspection.
The Key Components of Integra SPA

- Universality and accessibility.
- Resource allocation based on needs.
- Multi-disciplinary Psychosocial Care (PSC) teams.
- Ongoing training and research.
- Intra- and inter-sectoral coordination in the Network.
- Sufficient economic and technical resources as well as human talent.
- Commitment from all sectors.
- Follow-up and evaluation of program and/or service quality.
Level I care

Mitigation areas

Level II care

Health

Diet

Level III care

Education

Work

Culture

Housing

Justice
School Focus Areas

Listening Posts
Highly vulnerable neighborhoods/communities

University Focus Areas

Brief intervention Screening, Self-help strategies

Health System
PSC

Level of high complexity

Drug Addiction Treatment Centers - Services of Care for SPA Users

Level of medium complexity

Level of low complexity

Wellbeing and Social Protection

Rights and citizen’s participation

Work related

Culture

Sports and Recreation

Education

Intersectoriality

Channeling Assistance Follow-up
Starting point: Development of PNRCSPA

OPERATING AXES

PREVENTING
Reduce vulnerability to use
Reducir vulnerabilidad al consumo

Reduce vulnerability to risk and continued, increasing harm
Reducir vulnerabilidad al riesgo y al daño continuo y escalado

MITIGATING
Reduce vulnerability to relapses in terms of use
Reducir vulnerabilidad a la Reincidencia en el consumo

OVERCOMING

COMPONENTS

SOCIAL INCLUSION
Promotion of Health
Promoción de la Salud
Inclusión Social

Support and Assistance
Atención y Asistencia
Inclusión Social

Social Inclusion
Links and supports prevention, treatment and rehabilitation processes from and with the communities.

**Community devices:**
These are low-threshold welcoming spaces that can serve different functions: listening, organizing, mediating, channeling, assisting and training.

**They seek:** To prevent the risk of exclusion and the social stigma against psychoactive substance users and/or those who have problems associated to substance use. It is based on the construction of social networks, in which community agents actively participate to respond to the priority needs they have determined.
Context: school, university, high-vulnerability neighborhood/community, workplace, prison.

• School Focus Areas (Education sector)
• University Focus Areas (Higher education sector)
• Listening Posts (Neighborhoods)

Training in PSC tools: Brief intervention, early detection (screening), motivational interviews, Mutual Support Groups, systematization instruments.

Advances towards the articulation of SGSS as low-threshold services from PSC.
Regulation and quality improvement of specialized service offerings

- Services to provide care for SPA Use included in the Mandatory System to Guarantee the Quality of Healthcare.

- Definition of enabling criteria and promotion of registration into the special service provider registry of Drug Addition Treatment Centers (CAD) and Pharmacodependency Services. (Resolution 1315/2006).

- AGREEMENT 029 OF 2011 – CRES: Inclusion of procedures and interventions that guarantee comprehensive care of substance dependency at the SGSSS
Training Processes

• PSC Tools in User-Friendly Services for Teenagers and Young Adults.
• TREATNET
• CRIC
• Prevention Module in the hands of young people.
• Apprenticeship/Internship School: Community devices and integrated services.
• Approaching the phenomenon of SPA Use from a Public Health perspective.
Thank You

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