



Evaluation Report on Drug Policies:
Measures of Prevention, Treatment, and
Recovery Support





MULTILATERAL EVALUATION MECHANISM (MEM)

ANTIGUA AND BARBUDA

Evaluation Report on Drug Policies: Measures of Prevention, Treatment, and Recovery Support

EIGHTH EVALUATION ROUND

2021

OEA/Ser.L/XIV.2.70 CICAD/doc.2600/21

ISBN 978-0-8270-7381-4



PREFACE

The Multilateral Evaluation Mechanism (MEM), established by a mandate from the Second Summit of the Americas (Santiago, Chile - 1998), is a unique multilateral evaluation tool designed to measure the progress made and challenges faced by the member states of the Organization of American States (OAS) in implementing the Hemispheric Plan of Action on Drugs of the OAS Hemispheric Drug Strategy, currently in force.

The Inter-American Drug Abuse Control Commission (CICAD) of the Secretariat for Multidimensional Security (SMS) is the OAS specialized agency in charge of implementing this Mechanism.

The current MEM round is based on the objectives of the Hemispheric Plan of Action on Drugs 2021-2025 of the Hemispheric Drug Strategy 2020 and their respective priority actions. These documents take into account the recommendations of the outcome document of the United Nations General Assembly Special Session on the World Drug Problem (UNGASS 2016) and the United Nations 2030 Agenda on Sustainable Development, as well as cross-cutting issues, such as the gender perspective and human rights, cultural context, and social inclusion approaches, among others.

Seven evaluation rounds have been completed from 1998 to 2019 and, during 2020, the MEM Intergovernmental Working Group (IWG), composed of member state delegates, agreed on a new methodology for the eighth round, consisting of annual thematic evaluations with the support of independent technical consultants, as follows: 2021 – Measures for Prevention, Treatment, and Recovery Support; 2022 – Measures to Control and Counter the Illicit Cultivation, Production, Trafficking, and Distribution of Drugs, and to Address their Causes and Consequences; 2023 – Institutional Strengthening; Research, Information, Monitoring, and Evaluation; International Cooperation; and 2024 – Comprehensive Evaluation based on updated information from all thematic areas.

MEM evaluations are carried out based on information provided by the member states' National Coordinating Entities (NCEs), which is analyzed by the MEM Governmental Expert Group (GEG), composed of experts designated by the countries, who do not participate in their own country's evaluation, thus ensuring the transparency and impartiality of the process. The GEG is always supported by the group of independent technical consultants and the MEM Unit. The eighth round represents a more rigorous evaluation process, in which countries are requested to provide valid means of verification to support the information submitted and ensure compliance of each priority action.

Specifically, the GEG's work for the thematic assessment for the area of "Measures for Prevention, Treatment, and Recovery Support" was conducted during 2021, and covers the 2019 to 2021 period (unless otherwise specified). This work was adapted to the COVID-19 pandemic with the use of technology and virtual tools, as well as taking it into consideration in the evaluation assessments.



Finally, it should be noted that one of the main purposes of MEM evaluation reports is to serve as a useful diagnostic tool to identify opportunities for improvement in drug policies and strategies, both at the national and regional levels.



ESTABLISH COMPREHENSIVE AND INTEGRATED DRUG DEMAND REDUCTION POLICIES WITH A PUBLIC HEALTH FOCUS, THAT ARE EVIDENCE-BASED, MULTIDISCIPLINARY, MULTISECTORAL, RESPECTFUL OF HUMAN RIGHTS, THAT CONSIDER THE GENDER PERSPECTIVE AND COMMUNITY¹, AND TAKE INTO ACCOUNT THE GUIDELINES AND/OR RECOMMENDATIONS OF SPECIALIZED INTERNATIONAL AND/OR REGIONAL ORGANIZATIONS.

<u>Priority Action 1.1</u>: Establish and/or update evidence-based programs in the areas of health promotion, prevention, early intervention, treatment, care, rehabilitation, social integration, and recovery and related support services, as well as initiatives and measures aimed at minimizing the adverse public health and social consequences of drug abuse, taking into account gender, age, community, and cultural context, and establish budgetary mechanisms for such programs.

Antigua and Barbuda has drug demand reduction policies that include programs in the area of health promotion, prevention, early intervention, treatment, care, rehabilitation, social reintegration and recovery support.

| Area | Policies/Programs | | |
|--------------------|--|--|--|
| Health promotion | - The National Anti-Drug Strategy Plan 2019-2023 | | |
| Prevention | - Moulding Young Minds | | |
| Early intervention | -The National Anti-Drug Strategy Plan 2019-2023 | | |
| Treatment | Residential Program Description updated with Commission on Accreditation of Rehabilitation Facilities (CARF) Admission Criteria; Admitting Policy The National Anti-Drug Strategy Plan 2019-2023 | | |
| Care | | | |
| Rehabilitation | - The National Anti-Drug Strategy Plan 2019-2023 | | |
| Social integration | | | |
| Recovery support | - Continuing Care Coordination - Continuing Care Monitoring - The National Anti-Drug Strategy Plan 2019-2023 | | |

These programs include gender, age, community, and cultural context approaches.

<u>Priority Action 1.2</u>: Develop, strengthen, and/or implement, as appropriate, coordination mechanisms for collecting, analyzing, and disseminating information on drug use prevention, treatment, rehabilitation, recovery, and social reintegration service availability, utilization, and outcomes, for the general public and different target populations, with support, as needed, from civil society, academic and research institutions, as appropriate.

¹ Community includes ethnicity, among others.



Antigua and Barbuda does not develop, strengthen, or implement coordinated mechanisms for the collection, analysis, and dissemination of and access to information on prevention, drug treatment, rehabilitation, recovery or social integration services.

<u>Priority Action 1.3</u>: Carry out impact, process, and outcome evaluations of demand reduction programs.

Antigua and Barbuda has monitoring instruments for drug demand reduction programs.

The country has carried out the following evaluation of its drug demand reduction program:

| Program evaluated | Title of evaluation performed | Type of evaluation performed | Year of program evaluation |
|---------------------|---|------------------------------|----------------------------|
| Molding Young Minds | Program Evaluation: Moulding Young Minds | Process | 2019 |

Antigua and Barbuda has not conducted impact evaluations or any other related or current studies on drug consumption prevention programs.

<u>Priority Action 1.4</u>: Develop and/or implement, as appropriate, coordination mechanisms with civil society, academic and research institutions, and other stakeholders to support the development and implementation of demand reduction programs.

Antigua and Barbuda does not develop or implement coordination mechanisms to support the development or implementation of demand reduction programs, allowing for the participation of and coordination with civil society and other stakeholders.

<u>Priority Action 1.5</u>: Promote national prevention, treatment, care, recovery, rehabilitation, and social integration measures and programs, with a comprehensive and balanced drug demand reduction approach and, in that regard, promote nationally recognized standards by member states on drug use preventions and/or the "International Standards on Drug Use Prevention," and the "International Standards for the Treatment of Drug Use Disorders," both developed jointly by the World Health Organization (WHO) and United Nations Office on Drugs and Crime (UNODC).

Antigua and Barbuda does not promote national prevention, treatment, care, recovery, rehabilitation, or social integration measures and programs, with a comprehensive and balanced drug demand reduction approach, or promote nationally recognized standards by member states on drug use preventions or the "International Standards on Drug Use Prevention," or the "International Standards for the Treatment of Drug Use Disorders," both developed jointly by WHO and UNODC.



ESTABLISH OR STRENGTHEN AN INTEGRATED SYSTEM OF EVIDENCE-BASED UNIVERSAL, SELECTIVE, AND INDICATED DRUG USE PREVENTION PROGRAMS THAT PRIORITIZE AT-RISK POPULATIONS,² AS WELL AS ENVIRONMENTAL PREVENTION, THAT INCORPORATE A HUMAN RIGHTS, GENDER, AGE, AND MULTICULTURAL PERSPECTIVE.

<u>Priority Action 2.1</u>: Develop and implement evidence-based drug use prevention strategies and/or programs in the school, family, work, and community settings.

<u>Priority Action 2.4:</u> Implement selective prevention programs aimed at at-risk populations, in particular at children, adolescents, youth, and women.

<u>Priority Action 2.5:</u> Develop and strengthen indicated prevention programs aimed at individuals at increased risk of developing substance use disorders.

Antigua and Barbuda implements the following prevention program:

| | Estimated Coverage | | | Type of | |
|--|--------------------|--------------------------|---------------------|-----------|--|
| Population group | Target population | Coverage rate | Program | program | |
| School children and university students: | | | | | |
| Elementary/primary | Teens | 20% (200 students) | Molding Young Minds | Universal | |

Antigua and Barbuda does not develop selective or indicated prevention strategies and/or programs, nor does it implement specific programs for the following population groups: preschool; junior high and high school; university/tertiary education; boys/girls, youths and adults in street situations; family; male/female gender; LGBTIQ+ population; community; indigenous people; migrants and refugees; individuals in the workplace; or incarcerated individuals.

<u>Priority Action 2.2</u>: Develop and strengthen situational assessments to identify specific needs, risk, and protective factors of each target population of drug use prevention programs.

Antigua and Barbuda has not carried out or strengthened situational assessments to identify the specific needs, risk, or protective factors of each target population for drug use prevention programs.

² At-risk populations may include: women, children, adolescents, LGBTIQ+ persons, people who use drugs, prison population, indigenous groups, migrants, homeless individuals, and other socially disadvantaged groups.



<u>Priority Action 2.3:</u> Promote the exchange of research findings, experiences, and best practices to improve the effectiveness of prevention programs, taking into consideration the "International Standards on Drug Use Prevention," developed jointly by the World Health Organization (WHO) and United Nations Office on Drugs and Crime (UNODC).

Antigua and Barbuda does not promote the exchange of research findings, experiences, or best practices to improve the effectiveness of prevention programs, that take into consideration the "International Standards on Drug Use Prevention," jointly developed by WHO and UNODC.



ESTABLISH AND STRENGTHEN, AS APPROPRIATE, NATIONAL CARE, TREATMENT, REHABILITATION, RECOVERY, AND SOCIAL INTEGRATION SYSTEMS FOR PEOPLE WHO USE DRUGS, THAT ARE INTEGRATED WITH HEALTH SYSTEMS, AND THAT RESPECT HUMAN RIGHTS, AND OFFER GENDER-SPECIFIC SERVICES, AND THAT, TO THE EXTENT POSSIBLE, ARE DESIGNED AND ADMINISTERED IN ACCORDANCE WITH INTERNATIONALLY ACCEPTED QUALITY STANDARDS.

<u>Priority Action 3.1</u>: Implement and strengthen comprehensive and inclusive care, treatment, rehabilitation, recovery, and social integration programs and services in the public health care network, and/or social protection, taking into account the "International Standards on Treatment of Drug Use Disorders" and the Technical Guide for countries to set targets for universal access to HIV prevention, treatment, and care for injecting drug users, issued by the World Health Organization (WHO), the United Nations Office on Drugs and Crime (UNODC), and the Joint United Nations Program on HIV/AIDS (UNAIDS).

Antigua and Barbuda does not have a comprehensive or inclusive care, treatment, rehabilitation, recovery, or social integration programs or services in the public health care network, or social protection.

The country does not have programs or services that take into account the "International Standards for the Treatment of Drug Use Disorders" of the WHO and UNODC.

Antigua and Barbuda does not take into account the use of the "Technical Guide for countries to set targets for universal access to HIV prevention, treatment, and care for injecting drug users," issued by WHO, UNODC, and UNAIDS.

<u>Priority Action 3.2</u>: Monitor and evaluate the results of care, treatment, rehabilitation, recovery, and social integration programs and comprehensive public and private facilities, taking into account the gender perspective, age, and cultural context, as appropriate.

Antigua and Barbuda does not implement mechanisms to continuously monitor or evaluate the results of care, treatment, rehabilitation, recovery, or social integration programs or comprehensive public or private facilities.

Priority Action 3.3: Promote measures to protect the rights of persons in treatment.

Antigua and Barbuda does not have mechanisms to protect the rights of persons in treatment programs or services. There are no mechanisms that have protocols to protect the confidentiality of the information provided by those receiving these services, and none that include the process of providing adequate information about treatment and informed consent.



<u>Priority Action 3.4</u>: Promote and offer alternative means for providing early intervention, care, treatment, rehabilitation, recovery, and social integration services for criminal offenders who use drugs, as an alternative to criminal prosecution and/or imprisonment.

Antigua and Barbuda does not have alternatives of early intervention, care, treatment, rehabilitation, recovery, or social integration services for criminal offenders who use drugs.

<u>Priority Action 3.5</u>: Establish early intervention, care, treatment, rehabilitation, recovery, and social integration programs for incarcerated individuals.

Antigua and Barbuda does not offer early intervention, care, treatment, rehabilitation, recovery, or social integration services for incarcerated individuals who use drugs.

<u>Priority Action 3.6</u>: Design and implement cooperation mechanisms with social and community actors that provide social and community support services in order to contribute to social integration of people who use drugs, particularly at-risk populations, in an ongoing, sustainable, and recovery-oriented manner.

Antigua and Barbuda does not implement cooperation mechanisms with social or community actors that provide social and community support services, which contribute to the social integration of people who use drugs.

<u>Priority Action 3.7</u>: Promote regional and international cooperation and share best practices in increasing access to and availability of evidence-based treatment and recovery services, including access to naloxone and other medicines used in the treatment of substance use disorder.

Antigua and Barbuda does not promote regional or international cooperation or share best practices in increasing access to and availability of evidence-based treatment or recovery services, including access to naloxone and other medicines used in the treatment of substance use disorders.

<u>Priority Action 3.8</u>: Promote measures to address the stigma and social marginalization associated with substance use disorders, which may deter individuals from seeking, accessing, and/or completing demand reduction services.

The country does not promote measures to address the stigma or social marginalization associated with substance use disorders.



FOSTER ONGOING TRAINING AND CERTIFICATION OF PREVENTION, TREATMENT, AND REHABILITATION SERVICE PROVIDERS.

<u>Priority Action 4.1:</u> Implement ongoing competency-based training mechanisms, in collaboration with academic institutions and other specialized organizations.

Antigua and Barbuda does not implement ongoing competency-based training in the areas of prevention, treatment, or rehabilitation.

The country does not participate in prevention, treatment, or rehabilitation training programs offered by specialized international organizations.

<u>Priority Action 4.2:</u> Develop and utilize criteria for certification of drug use prevention, treatment, rehabilitation, and social integration service providers that recognize tiered (e.g. basic, intermediate, and advanced) levels and/or specialized competencies (e.g. Co-occurring substance use and mental health disorder credentials).

Antigua and Barbuda certifies personnel working in prevention, treatment, and rehabilitation services, as follows:

| Services | Level of certification | Organization/institution responsible for certification | |
|----------------|------------------------|---|--|
| Prevention | Intermediate | OAS/CICAD/University of the West Indies (UWI) | |
| Treatment | Intermediate | OAS/CICAD/UWI | |
| Rehabilitation | Intermediate | OAS/CICAD/UWI | |

<u>Priority Action 4.3</u>: Conduct a situational assessment to identify training needs of prevention, early intervention, care, treatment, rehabilitation, recovery, and social integration service providers.

Antigua and Barbuda does not carry out situational assessments to identify the training needs of personnel working in prevention, early intervention, care, treatment, rehabilitation, recovery, or social integration programs.

<u>Priority Action 4.4</u>: Develop specialized programs in response to training needs identified by the situational assessment.

Antigua and Barbuda does not develop specialized programs in response to training needs identified by situational assessments.



ESTABLISH AND/OR STRENGTHEN GOVERNMENT INSTITUTIONAL CAPACITIES TO REGULATE, ENABLE, ACCREDIT, AND SUPERVISE PREVENTION PROGRAMS AND CARE, TREATMENT, REHABILITATION, AND REINTEGRATION SERVICES.

<u>Priority Action 5.1</u>: Establish and implement regulatory measures that include quality criteria for the accreditation of prevention programs and care and treatment services.

Antigua and Barbuda does not have regulatory measures for accrediting prevention programs. The country does not have an accreditation process for care or treatment services.

Antigua and Barbuda does not use CICAD's Indispensable Criteria for the opening and operating of drug use disorders treatment centers. The country has no public facility/center for treatment or rehabilitation. However, Crossroads Centre Antigua, which is privately owned, partners with local governmental agencies to facilitate referrals to its programs.

<u>Priority Action 5.2</u>: Establish supervisory mechanisms to ensure that prevention programs and public and private treatment services meet the standards of international quality criteria recognized by the member states.

Antigua and Barbuda does not have supervisory mechanisms to ensure that the standards of international quality criteria of prevention services are met.

The country does not have supervisory mechanisms to ensure that the standards of international quality criteria of the public or private treatment or rehabilitation services are met.

<u>Priority Action 5.3</u>: Assessment, at the national, regional, and local levels, of the needs and supply of primary care, treatment, and reintegration services.

Antigua and Barbuda has not conducted an assessment at the national, regional, or local levels to determine the needs regarding primary care, treatment, or reintegration services.



EVALUATIVE SUMMARY

Objective 1

Establish comprehensive and integrated drug demand reduction policies with a public health focus, that are evidence-based, multidisciplinary, multisectoral, respectful of human rights, that consider the gender perspective, community and take into account the guidelines and/or recommendations of specialized international and/or regional organizations.

CICAD notes that Antigua and Barbuda has drug demand reduction policies that include programs in the areas of health promotion, prevention, early intervention, treatment, care, rehabilitation, and social integration. These programs include the gender, age, community, and cultural context approaches. However, CICAD also notes that Antigua and Barbuda does not develop, strengthen, or implement coordination mechanisms for collecting, analyzing, disseminating, and accessing information with respect to prevention, treatment, rehabilitation, recovery, or social reintegration services. In addition, CICAD observes that Antigua and Barbuda has monitoring instruments for drug demand reduction programs and has conducted an evaluation of a drug demand reduction program. On the other hand, CICAD notes with concern that Antigua and Barbuda does not develop or implement coordination mechanisms to support the development and implementation of drug demand reduction programs with the participation of and coordination with civil society and other stakeholders. Similarly, CICAD notes with concern that Antigua and Barbuda does not promote national prevention, treatment, care, recovery, rehabilitation, or social integration measures and programs, with a comprehensive and balanced drug demand reduction approach, or promote nationally recognized standards by member states on drug use preventions or the "International Standards on Drug Use Prevention," or the "International Standards for the Treatment of Drug Use Disorders," both developed jointly by WHO and UNODC.

Objective 2

Establish or strengthen an integrated system of evidence-based universal, selective, and indicated drug use prevention programs that prioritize at-risk populations, as well as environmental prevention, that incorporate a human rights, gender, age, and multicultural perspective.

CICAD notes that Antigua and Barbuda carries out a drug use prevention program in the elementary/primary school population. However, CICAD views with concern that the country's program do not specifically cover any other important population groups. Additionally, CICAD observes that Antigua and Barbuda did not conduct situational assessments to identify the specific needs, risk, or protective factors of each target population for drug use prevention programs. In addition, CICAD notes that the country does not promote the exchange of research findings, experiences, or best practices to improve the effectiveness of prevention programs, taking into consideration the "International Standards on Drug Use Prevention," developed jointly by WHO and UNODC.



Objective 3

Establish and strengthen, as appropriate, national care, treatment, rehabilitation, recovery, and social integration systems for people who use drugs, that are integrated with health systems, and that respect human rights, and offer gender-specific services, and that, to the extent possible, are designed and administered in accordance with internationally accepted quality standards.

CICAD notes with concern that Antigua and Barbuda does not have a comprehensive and inclusive care, treatment, rehabilitation, recovery, or social integration programs and services in the public health or social protection network. CICAD also notes that Antigua and Barbuda does not take into account the "International Standards for the Treatment of Drug Use Disorders" of WHO and UNODC, nor uses the "Technical Guide for countries to set targets for universal access to HIV prevention, treatment and care for injecting drug users," issued by WHO, UNODC, and UNAIDS. CICAD further observes with concern that Antigua and Barbuda does not implement mechanisms to continuously monitor and evaluate the results of care, treatment, rehabilitation, recovery, or social integration programs, comprehensive public, or private facilities. Similarly, CICAD notes with concern that Antigua and Barbuda does not have mechanisms in place to protect the rights of persons in treatment programs or services. In addition, CICAD notes that Antigua and Barbuda does not have alternatives of early intervention, care, treatment, rehabilitation, recovery, or social integration services for criminal offenders who use drugs. Moreover, CICAD notes with concern that Antigua and Barbuda does not offer early intervention, care, treatment, rehabilitation, recovery, or social integration services for incarcerated individuals who use drugs. In addition, CICAD observes that Antigua and Barbuda does not implement cooperation mechanisms with social or community actors that provide social and community support services that contribute to the social integration of drug users. Furthermore, CICAD views with concern that the country does not promote regional or international cooperation or share best practices to increase access and availability of evidence-based treatment and recovery services, including access to naloxone and other medications used in the treatment of substance use disorders. Additionally, CICAD views with concern that Antigua and Barbuda does not promote measures to address the stigma and social marginalization associated with substance use disorders.

Objective 4

Foster ongoing training and certification of prevention, treatment, and rehabilitation service providers.

CICAD notes with concern that Antigua and Barbuda does not implement ongoing competency-based training in the areas of prevention, treatment, or rehabilitation. CICAD observes that the country does not participate in prevention, treatment, or rehabilitation training programs offered by specialized international organizations. On the other hand, CICAD notes that Antigua and Barbuda certifies personnel working in the areas of prevention, treatment, and rehabilitation at the intermediate level of certification but does not certify personnel in the area of social integration. In addition, CICAD notes that Antigua and Barbuda has not conducted situational



assessments to identify training needs for personnel working in prevention, early intervention, care, treatment, rehabilitation, recovery, or social integration programs, nor has Antigua and Barbuda developed specialized programs in response to training needs identified by a situational assessments.

Objective 5

Establish and/or strengthen government institutional capacities to regulate, enable, accredit, and supervise prevention programs and care, treatment, rehabilitation, and reintegration services.

CICAD notes with concern that Antigua and Barbuda does not have regulatory measures for accrediting prevention programs, nor does it have an accreditation process for care or treatment services. CICAD observes that Antigua and Barbuda has no public facility/center for treatment and rehabilitation but has one privately owned treatment center that partners with government agencies. CICAD also observes that the country has neither supervisory mechanisms to ensure compliance with international quality standards in prevention programs nor international quality criteria of the public or private treatment or rehabilitation services. In addition, CICAD notes with concern that Antigua and Barbuda has not conducted an assessment at the national, regional, or local levels to determine the needs regarding primary care, treatment, or reintegration services.



ORGANIZATION OF AMERICAN STATES (OAS) INTER-AMERICAN DRUG ABUSE CONTROL COMMISSION (CICAD)

1889 F Street NW Washington, D.C. 20006 www.cicad.oas.org