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MULTILATERAL EVALUATION MECHANISM (MEM)

*Measures of Prevention, Treatment, and
Recovery Support*

Hemispheric Brief

Inter-American Drug Abuse Control Commission (CICAD)
Secretariat for Multidimensional Security (SMS)

2022

Based on the results
of the 2022 national
evaluations reports



**Executive Secretariat of the Inter-American
Drug Abuse Control Commission (CICAD)
MULTILATERAL EVALUATION MECHANISM (MEM)
HEMISPHERIC BRIEF:**

MEASURES OF PREVENTION, TREATMENT, AND RECOVERY SUPPORT (2021)

During 2021, participating member states¹ of the Organization of American States (OAS) were evaluated by the Governmental Experts Group (GEG) of the Multilateral Evaluation Mechanism (MEM) on compliance with the drug demand reduction priority actions of the CICAD Hemispheric Plan of Action on Drugs 2021-2025². The results of the evaluation, which focused on the Plan of Action thematic area entitled “Measures of Prevention, Treatment, and Recovery Support”, indicate that significant efforts have been made at the hemispheric level. In this regard, some priority actions have achieved more than 60% implementation, such as the creation of coordination mechanisms for the development and execution of drug demand reduction programs that allow the participation of the different social actors; the implementation of ongoing competency-based training programs for providers of prevention, treatment, and rehabilitation services; and, promoting treatment and care services to low-level criminal offenders who use drugs, as an alternative to imprisonment.

However, the national evaluation thematic reports³ also indicate the need for progress to be made on other relevant activities, for example, in the following areas:

- **Reducing stigma** is one of the priority actions of the current Plan of Action. The formulation and implementation of drug demand reduction policies depend, to a large extent, on the problem not being perceived as a matter of social marginalization or crime. Stigmatization runs counter to an approach based on public health and human rights, limiting people's access to existing prevention and treatment services, as well as the implementation of new programs and resources.

In this regard, the evaluation indicates that 61% of the countries do not comply with Priority Action 3.8, aimed at addressing stigma and social marginalization. That excessively high percentage means that stigmatization needs to be conceptualized as a priority area for improvement, and member states should be encouraged to address the issue.

- Priority Action 4.3 refers to the need for a **situational assessment to identify the training needs** of service providers. Fifty-five percent of the countries were evaluated as not having complied with this action. Consequently, Priority Action 4.4, which proposes developing specialized programs in response to the training needs identified by the situational assessment, shows the highest degree of non-compliance (76%) by member states.

¹ Member states participating in the evaluation: Antigua and Barbuda, Argentina, Barbados, Belize, Bolivia, Brazil, Canada, Chile, Colombia, Costa Rica, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Mexico, Nicaragua, Panama, Paraguay, Peru, Saint Kitts and Nevis (The Federation of), Saint Lucia, Saint Vincent and the Grenadines, Suriname, The Bahamas (Commonwealth of), Trinidad and Tobago, United States of America, and Uruguay.

² [Http://cicad.oas.org/main/AboutCICAD/BasicDocuments/Hemispheric_Plan_of_Action_on_Drugs_2021-2025_ENG.pdf](http://cicad.oas.org/main/AboutCICAD/BasicDocuments/Hemispheric_Plan_of_Action_on_Drugs_2021-2025_ENG.pdf)

³ [Http://www.cicad.oas.org/Main/Template.asp?File=/mem/reports/8/ronda_8_eval_eng.asp](http://www.cicad.oas.org/Main/Template.asp?File=/mem/reports/8/ronda_8_eval_eng.asp)

Building prevention and treatment systems requires a workforce, in both informal and professionalized services, that possesses adequate knowledge and skills to perform its functions. Without adequately trained human resources, demand reduction services are unlikely to achieve the desired results.

Thus, the evaluation highlights, as a priority, the need to focus on more extensive training of service providers.

- In addition to efforts to reduce stigma and increase the training of service providers, member states should be encouraged to conduct an **assessment of the need for, and current supply of**, care, treatment, and reintegration **services**, prior to establishing action plans and programs.

In this regard, Priority Action 5.3, which addresses this issue, still shows very little progress; 67% of the countries do not comply with it.

- As mentioned in Priority Action 5.1, member states need to establish and implement **regulatory measures that include quality criteria** for the accreditation of prevention programs and care and treatment services. The evaluation found that only 9% of the countries fully comply with this priority action, while another 45% were partially compliant.

Only by complying with this action is it possible to offer services of proven scientific value. At the same time, it is important that countries have adequate regulatory and supervisory systems for their treatment centers, thus minimizing human rights violations.

- It is also necessary for countries to **monitor and evaluate** the results of public and private programs and facilities for care, treatment, rehabilitation, recovery, and social integration, from a gender, age, and cultural perspective, as appropriate. Fifty-five percent of member states were not compliant with Priority Action 3.2.
- Finally, it is necessary to highlight the importance of moving ahead with the development and strengthening of situational diagnostic assessments to determine the **particular needs, as well as the risk and protection factors**, of the populations targeted by drug use prevention programs, in addition to the promotion of experiences and best practices based on international standards. Fifty-two percent of countries do not comply with the corresponding Priority Action 2.2. The "International Standards for Drug Use Prevention", developed jointly by the World Health Organization (WHO) and the United Nations Office on Drugs and Crime (UNODC), is a valuable tool for achieving greater compliance with this action.

In conclusion, the information above illustrates the need, at a hemispheric level, to continue efforts in key aspects of drug demand reduction. All progress made to date reflects the dedication and commitment of member states in their drug demand reduction programming.



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