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# MULTILATERAL EVALUATION MECHANISM (MEM)

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

## Dominica (Commonwealth of)

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

2021





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# DOMINICA

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**Evaluation Report on Drug Policies:  
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Recovery Support**

**EIGHTH EVALUATION ROUND**

**2021**

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## 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.

**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 AND COMMUNITY<sup>1</sup>, AND TAKE INTO ACCOUNT THE GUIDELINES AND/OR RECOMMENDATIONS OF SPECIALIZED INTERNATIONAL AND/OR REGIONAL ORGANIZATIONS.**

**Priority Action 1.1:** 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.

Dominica has drug demand reduction policies that include programs in the areas of health promotion, prevention, early intervention, and treatment. However, the country’s policies do not include programs in the areas of care, rehabilitation, recovery, or social integration.

Area	Policies / Programs
Health promotion	Strategic Plan for Alcohol and Other Drug Abuse Prevention 2015-2020
Prevention	
Early intervention	
Treatment	

This policy includes the community approach, but not the age, gender, or cultural context approaches.

**Priority Action 1.2:** 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.

Dominica develops, strengthens, and implements coordination mechanisms for the collection, analysis, and dissemination of and access to information on drug use prevention, however not on treatment, rehabilitation, recovery, or social reintegration services.

<sup>1</sup> Community includes ethnicity, among others.

**Priority Action 1.3: Carry out impact, process, and outcome evaluations of demand reduction programs.**

Dominica does not have monitoring instruments for drug demand reduction programs and has not carried out impact, process, or outcome evaluations of its drug demand reduction programs.

**Priority Action 1.4: 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.**

Dominica develops and implements coordination mechanisms to support the development and implementation of demand reduction programs, allowing for the participation of and coordination with civil society and other stakeholders.

**Priority Action 1.5: 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).**

Dominica does not promote national prevention, treatment, care, recovery, rehabilitation, or social integration measures and programs, with a comprehensive or balanced drug demand reduction approach, or promote nationally recognized standards by member states on drug use preventions, 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,<sup>2</sup> AS WELL AS ENVIRONMENTAL PREVENTION, THAT INCORPORATE A HUMAN RIGHTS, GENDER, AGE, AND MULTICULTURAL PERSPECTIVE.**

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

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

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

Dominica implements the following prevention strategies and programs:

Population group	Estimated Coverage		Strategy / Program	Type of program
	Target population	Coverage rate		
<b>School children and university students:</b>				
• Pre-school	1,332	50%	Pre School Education	Universal
• Elementary/primary	6,142	20.9%	Peer Helpers Programme	Universal
		100%	Health and Family Life Education (HFLE)	Universal
• Junior high & high school (secondary school)	4,709	100%	Health and Family Life Education (HFLE)	Universal
<b>LGBTIQ+</b>	227	70%	Behavioral Change Communication (BCC) and Information Education and Communication (IEC)	Selective
<b>Community</b>	73,370	14.3%	Health Centre Program	Universal
<b>Incarcerated individuals</b>	241	15%	Prison Reintegration Drug Program	Selective
<b>Others: Sex Workers</b>	227	299	Behavioral Change Communication (BCC) and Information Education and Communication (IEC)	Selective

The country does not develop indicated prevention strategies or programs, nor does it implement specific programs for the following population groups: university/tertiary education; boys/girls, youths and adults in street situations; family; gender (women/men); indigenous people; migrants and refugees; or individuals in the workplace.

<sup>2</sup> 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.

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

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

**Priority Action 2.3:** 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).

Dominica 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 the 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.**

**Priority Action 3.1: 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).**

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

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.

Dominica 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.

**Priority Action 3.2: 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.**

Dominica 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.**

Dominica does not have mechanisms to protect the rights of persons in treatment programs or services.

**Priority Action 3.4: 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.**

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

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

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

**Priority Action 3.6: 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.**

Dominica 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.

**Priority Action 3.7: 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.**

Dominica 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 or other medicines used in the treatment of substance use disorders.

**Priority Action 3.8: 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.**

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

**OBJECTIVE**
**4**
**FOSTER ONGOING TRAINING AND CERTIFICATION OF PREVENTION, TREATMENT, AND REHABILITATION SERVICE PROVIDERS.**
**Priority Action 4.1: Implement ongoing competency-based training mechanisms, in collaboration with academic institutions and other specialized organizations.**

Dominica does not implement ongoing competency-based training in the areas of prevention, treatment, or rehabilitation. However, Dominica is making progress in a training model that includes needs detection processes, training program designs that define learning objectives, methodologies, and evaluation instruments (reaction, learning, and transfer). This model also proposes training levels ranging from general training to specialized training.

The country participates in the following prevention training programs offered by specialized international organizations:

International organizations	Training programs	Name of program	Approaches taken into account
International Society of Substance Use Professionals (ISSUP)	Prevention	Impact of COVID 19 Pandemic on Substance use Disorder: Prevention & Management	Public Health
ISSUP	Prevention	The Rapidly Changing Composition of the World's Drug Supply and Its Effects on High-Risk for COVID-19	Public Health
ISSUP	Prevention	Family Skills for Prevention of Substance Use, Mental Health and Violence and for Development, including under COVID-19	Public Health
CICAD	Prevention	Introduction to Training Tools on Early Warning Systems	Public Health
CICAD	Prevention	Operation of a National Early Warning System	Public Health
COPOLAD	Prevention	Planning in Drug Demand Reduction: Scope and Use of the planning tool "OneStep@Atime"	Public Health
COPOLAD	Prevention	Use of Alcohol and other Drugs: Evidence-Based Prevention	Public Health
COPOLAD	Prevention	The Public Health Approach in Drug Policy	Public Health

These programs do not take gender into account.

Dominica does not participate in treatment or rehabilitation training programs offered by specialized international organizations.

**Priority Action 4.2:** 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).

Dominica does not certify personnel working on prevention, treatment, rehabilitation, or social integration services.

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

Dominica has not carried out situational assessments to identify the training needs of personnel working in prevention, early intervention, care, treatment, rehabilitation, recovery, or social integration programs.

**Priority Action 4.4:** Develop specialized programs in response to training needs identified by the situational assessment.

Dominica has not developed specialized programs in response to training needs identified by 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.**

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

Dominica does not have regulatory measures for accrediting prevention programs.

The country does not have an accreditation process for care or treatment services.

Dominica does not use CICAD's Indispensable Criteria for the opening and operating of drug use disorders treatment centers. In this regard, the country does not have a drug use disorder treatment center.

**Priority Action 5.2: 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.**

Dominica 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.

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

Dominica has not conducted an assessment at the national, regional or local levels to determine the needs and supply of primary care, treatment, or reintegration services during the evaluation period.

## 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 Dominica has drug demand reduction policies that include programs in the areas of health promotion, prevention, early intervention, and treatment. CICAD observes that these policies include programs that take into account the community approach, but do not include age, gender, or cultural context approaches. However, CICAD observes that the country's policies do not include programs in the areas of care, rehabilitation, recovery or social integration. CICAD also notes that Dominica develops, strengthens, and implements coordination mechanisms for collecting, analyzing, disseminating, and accessing information on prevention. However, CICAD observes that the country does not have such mechanisms with respect to treatment rehabilitation, recovery, or social reintegration services. In addition, CICAD notes with concern that Dominica does not have monitoring instruments for drug demand reduction programs nor has it conducted impact, process, or outcome evaluations of its drug demand reduction programs. CICAD recognizes with satisfaction that the country develops and implements 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. Nevertheless, CICAD observes that Dominica 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, 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 Dominica carries out drug use prevention programs in various populations. However, CICAD views with concern that the country does not develop indicated or specific programs for other important population groups. Additionally, CICAD observes that Dominica did not conduct situational assessments to identify the specific needs, risk, and protective factors of each target population for drug use prevention programs over the evaluation period. CICAD also 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 Dominica does not have a comprehensive or inclusive care, treatment, rehabilitation, recovery, or social integration programs and services in the public health and social protection network. CICAD also notes that the country does not take into account the "International Standards for the Treatment of Drug Use Disorders" of WHO and UNODC, nor 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. In addition, CICAD observes with concern that Dominica does not implement mechanisms to continuously monitor and evaluate the results of care, treatment, rehabilitation, recovery, and social integration programs, comprehensive public, and private facilities. Similarly, CICAD notes with concern that the country does not have mechanisms in place to protect the rights of persons in treatment programs and services. Furthermore, CICAD notes that Dominica 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 the country does not offer early intervention, care, treatment, rehabilitation, recovery, or social integration services for incarcerated individuals who use drugs. Likewise, CICAD observes that Dominica does not implement cooperation mechanisms with social and community actors that provide social and community support services that contribute to the social integration of drug users. Moreover, 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 Dominica 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 Dominica does not implement ongoing competency-based training in the areas of prevention, treatment, or rehabilitation. However, it does participate in prevention programs offered by specialized international organizations. CICAD observes that the country does not certify personnel working in the areas of prevention, treatment, and rehabilitation or social integration services. In addition, CICAD notes that Dominica 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 Dominica developed specialized programs in response to training needs

identified by 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 Dominica does not have regulatory measures in place to accredit prevention programs, nor does it have an accreditation process for care or treatment services. CICAD also notes that the country does not use CICAD's Indispensable Criteria for the opening and operating of drug use disorders as it has no drug use disorder treatment center. CICAD also observes that Dominica has neither supervisory mechanisms to ensure compliance with international quality standards in prevention programs, nor supervisory mechanisms to ensure international quality criteria of the public or private treatment or rehabilitation services. In addition, CICAD notes with concern that the country has not conducted an assessment at the national, regional or local level to determine the needs regarding primary care, treatment, or reintegration services during the evaluation period.





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