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MULTILATERAL EVALUATION MECHANISM (MEM)

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

The Federation of Saint Kitts and Nevis

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

2021



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THE FEDERATION OF SAINT KITTS AND NEVIS

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

EIGHTH EVALUATION ROUND

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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 COMMUNITY¹, 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.

The Federation of St. Kitts and Nevis has drug demand reduction policies that include programs in the areas of health promotion, prevention, early intervention, treatment, care, rehabilitation, social integration, recovery support and related support services, and other initiatives/measures to minimize adverse public health and social consequences. These policies and corresponding programs are guided by the Drug (Prevention and Abatement of the Misuse and Abuse of Drugs) Act.

Area	Programs / Policies
Health promotion	- Drugs Prevention & Abatement of the Misuse and Abuse of Drugs Act - Chap 9
Prevention	
Early intervention	
Treatment	
Care	
Rehabilitation	
Social integration	
Recovery support	
Other initiatives/measures to minimize adverse public health and social consequences	

The Drug Prevention and Treatment Services Inc., Adolescent treatment program, includes gender and age approaches. However, it does not include community or cultural context approaches.

¹ Community includes ethnicity, among others.

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.

The Federation of St. Kitts and Nevis develops, strengthens, and implements coordination mechanisms for the collection, analysis, and dissemination of and access to information on drug use prevention, treatment, rehabilitation, recovery, and social reintegration services through the Drug Information Network developed by National Council on Drug Abuse Prevention.

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

The Federation of St. Kitts and Nevis has monitoring instruments for drug demand reduction programs.

The country 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.

The Federation of St. Kitts and Nevis 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. These coordinating mechanisms are guided by the Drug (Prevention and Abatement of the Misuse and Abuse of Drugs) Act.

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).

The Federation of St. Kitts and Nevis promotes national prevention, treatment, care, recovery, rehabilitation, and social integration measures and programs, with a comprehensive and balanced drug demand reduction approach. However, the country does not 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,² 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.

The Federation of St. Kitts and Nevis implements the following prevention strategies or programs:

Population group	Estimated Coverage		Strategy / Program	Type of program
	Target population	Coverage rate		
School children and university students:				
• Elementary/primary	6 th graders	100%	- Magic	Universal
	4 th graders	15%	- Living Above the Influence	Selective
• Junior high & high school (secondary school)	General Population	100%	- Health and Family Life Education (HFLE)	Universal
	At Risk	10%	- TAPS	Selective
	High risk	5%	- CYT Series 1	Indicated

The Federation of St. Kitts and Nevis does not implement specific programs for the following population groups: pre-school; boys/girls, youths, and adults in street situations; family; women and men; LGBTIQ+; community; indigenous people; migrants and refugees; individuals in the workplace; or incarcerated individuals.

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.

The Federation of St. Kitts and Nevis 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.

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).

The Federation of St. Kitts and Nevis promotes the exchange of research findings, experiences, and 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.

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).

The Federation of St. Kitts and Nevis has comprehensive and inclusive care, treatment, rehabilitation, recovery, and social integration programs and services in the public health care and social protection network that are guided by the Drug (Prevention and Abatement of the Misuse and Abuse of Drugs) Act. However, these programs and services do not specifically cover early intervention (brief intervention, counseling), crisis intervention, diverse treatment modalities, dual pathology (co-morbidity), and social integration and services related to recovery support. These programs and services do not take into account the gender, human rights, or public health approaches.

The Federation of St. Kitts and Nevis’s programs and services do not take into account the “International Standards for the Treatment of Drug Use Disorders” of the WHO and UNODC.

The Federation of St. Kitts and Nevis 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.

The Federation of St. Kitts and Nevis does not implement mechanisms to continuously monitor or evaluate the results of care, treatment, rehabilitation, recovery, or social integration programs or comprehensive public and private facilities.

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

The Federation of St. Kitts and Nevis has mechanisms to protect the rights of persons in treatment programs and services.

These mechanisms do not have protocols to protect the confidentiality of the information provided by those receiving these services or include the process of providing adequate information about treatment and informed consent.

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.

The Federation of St. Kitts and Nevis 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.

The Federation of St. Kitts and Nevis, guided by the Drug Act, offers early intervention, care, treatment, rehabilitation, recovery, and social integration services for incarcerated individuals who use drugs. In this regard, these services include early intervention for this population through education and substance use programming at the Mental Health Clinic and the Counseling and Substance Misuse Programme at the New Horizons Rehabilitation Centre.

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.

The Federation of St. Kitts and Nevis implements the following 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:

Organizations	Programs
Government (Skills Training Empowerment Program (STEP), Parks and Beaches, Joseph N. France General Hospital, Agriculture Department & Advanced Vocation Education Centre (AVEC)	Employment
Private Sector (TDC, Rams Supermarket)	Employment

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.

The Federation of St. Kitts and Nevis promotes regional and international cooperation and shares 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 disorders. This work is guided by the Drugs Act and supported by the National Drug Council and through membership in international organizations.

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.

The Federation of St. Kitts and Nevis, guided by the Drugs Act, promotes measures to address the stigma and social marginalization associated with substance use disorders. In this regard, stigma is addressed through various radio programs, public service announcement (PSAs) and psychoeducation for special populations (e.g., school) or for general populations.

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.

The Federation of St. Kitts and Nevis does not implement ongoing competency-based training in the areas of prevention, treatment, or rehabilitation. However, the country offers some training events, which are mostly carried out by the National Council on Drug Abuse Prevention.

The Federation of St. Kitts and Nevis participates in the following prevention, treatment, and rehabilitation training programs offered by specialized international organizations:

International organizations	Training programs	Name of program	Approaches taken into account
CICAD-OAS	Treatment and rehabilitation	Universal Prevention Curriculum (UTC)	Gender; human rights; public health; co-occurring mental health issues; youth and adolescent issues
CICAD-OAS	Treatment	Cannabis Youth Treatment (CYT)	Youth and adolescent issues
COPOLAD	Prevention	OneStep@aTime	Public health

These programs take into account gender through interventions with women, considering what social and economic factors contribute to substance use, and factor that into the way that the intervention is planned for them.

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).

The Federation of St. Kitts and Nevis does not certify personnel that work 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.

The Federation of St. Kitts and Nevis 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.

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

The Federation of St. Kitts and Nevis does not develop specialized programs in response to training needs identified by situational assessments. However, trainings are developed based on the identified needs of prevention and treatment specialists, especially those working in the school settings.

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.**

The Federation of St. Kitts and Nevis does not have regulatory measures for accrediting prevention programs.

The Federation of St. Kitts and Nevis does not have an accreditation process for care or treatment services.

The Federation of St. Kitts and Nevis does not use CICAD's Indispensable Criteria for the opening and operating of drug use disorders treatment centers, as there are currently no specific drug use disorder treatment centers in the country.

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.

The Federation of St. Kitts and Nevis does not have supervisory mechanisms to ensure that the standards of international quality criteria of prevention services are met.

The Federation of St. Kitts and Nevis has supervisory mechanisms to ensure that the standards of international quality criteria of the public and private treatment and rehabilitation services are met. In this regard, the head of a specific institution has ministerial oversight.

Regarding actions taken with public and private treatment and rehabilitation services that do not comply with the standards of international quality criteria, compliance and actions are handled by the Ministry of Health Federal Office.

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

The Federation of St. Kitts and Nevis has not conducted an assessment at a 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 with satisfaction that, guided by their Drug Act, the Federation of St. Kitts and Nevis has drug demand reduction policies that include programs in the areas of health promotion, prevention, early intervention, treatment, care, rehabilitation, social integration, and recovery support and related support services. One of these programs includes gender and age approaches. However, none of its programs include community or cultural context approaches. CICAD also notes with satisfaction that the Federation of St. Kitts and Nevis develops, strengthens, and implements coordination mechanisms for the collection, analysis, and dissemination of and access to information on drug use prevention, treatment, rehabilitation, recovery, and social reintegration services. In addition, CICAD notes that the Federation of St. Kitts and Nevis has monitoring instruments for drug demand reduction programs but has not conducted impact, process, or outcome evaluations of its drug demand reduction programs. CICAD also notes with satisfaction that the St. Kitts and Nevis 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. Further, CICAD notes that the Federation of St. Kitts and Nevis promotes national prevention, treatment, care, recovery, rehabilitation, and social integration measures and programs, with a comprehensive and balanced drug demand reduction approach. However, the country does not promote nationally recognized standards by member states on drug use preventions and the “International Standards on Drug Use Prevention,” and 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 the Federation of St. Kitts and Nevis carries out drug use prevention programs in some population groups. However, CICAD observes that said programs do not specifically cover other important population groups. CICAD notes with concern that the Federation of St. Kitts and Nevis has not conducted situational assessments to identify the specific needs, risk, or protective factors for each of the target populations for drug use prevention programs. However, CICAD notes with satisfaction that the Federation of St. Kitts and Nevis promotes 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 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 that the Federation of St. Kitts and Nevis has comprehensive and inclusive care, treatment, rehabilitation, recovery, and social integration programs and services in the public health care and social protection network that are guided by the Drug (Prevention and Abatement of the Misuse and Abuse of Drugs) Act. However, these programs and services do not take into account the gender, human rights, or public health approaches. CICAD also observes that the country does not take into account the “International Standards for the Treatment of Drug Use Disorders” of the WHO and UNODC nor 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 observes with concern that Federation of St. Kitts and Nevis 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. Additionally, CICAD notes that St. Kitts and Nevis has mechanisms to protect the rights of persons in treatment programs and services, but views with concern that they do not have protocols to protect the confidentiality of the information provided by those receiving these services or include the process of providing adequate information about treatment and informed consent. CICAD notes that the Federation of St. Kitts and Nevis does not have alternatives of early intervention, care, treatment, rehabilitation, recovery, or social integration services for criminal offenders who use drugs. CICAD notes with satisfaction that the Federation of St. Kitts and Nevis offers early intervention, care, treatment, rehabilitation, recovery, and social integration services for incarcerated individuals who use drugs. In addition, CICAD observes with satisfaction that the country implements cooperation mechanisms with social and community actors that provide social and community support services that contribute to the social integration of people who use drugs. CICAD also notes with satisfaction that the Federation of St. Kitts and Nevis promotes regional and international cooperation and shares 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 disorders. Further, CICAD notes with satisfaction that the Federation of St. Kitts and Nevis promotes 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 satisfaction that, though the Federation of St. Kitts and Nevis does not implement ongoing competency-based training in the areas of prevention, treatment, or rehabilitation, they do participate in prevention, treatment, and rehabilitation programs offered by specialized international organizations. However, CICAD notes with concern that the Federation of St. Kitts and Nevis does not certify personnel that work in prevention, treatment, rehabilitation, or social integration services. CICAD notes with concern that the Federation of St. Kitts and Nevis 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. Further, CICAD notes that the Federation of St. Kitts and Nevis does not develop 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 the Federation of St. Kitts and Nevis does not have regulatory measures, including quality criteria, to accredit either prevention programs or care and treatment services. CICAD also notes that the Federation of St. Kitts and Nevis does not use CICAD's Indispensable Criteria for the opening and operating of drug use disorders. CICAD also notes with concern that, while supervisory mechanisms are in place to ensure international quality standards for public and private treatment and rehabilitation services, no such standards exist for prevention services. CICAD also notes with concern that the Federation of St. Kitts and Nevis 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.



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