

Improvement of Access to Treatment for People with Alcohol and Drug Related Problems IATPAD Project

European Commission
Public Health Executive Agency
And
Centre for Treatment of Drug Dependencies, Bratislava, Slovakia

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- EC and EAHC project
- Project started on 1 December 2006, duration 36 months
- Countries involved:
 - - main beneficiary: Slovakia
 - - associated beneficiaries: United Kingdom, Bulgaria, Greece, Italy, Poland, Slovenia, Spain
- 5 Work meetings

- The project was targeting the issue of access to treatment for people with alcohol- and drug related problems. Poor access and late entry to treatment for alcohol and drug using clients aggravate their health problems, suffering, decrease quality of life and increase costs for the society.

Project Objectives

- Detection of barriers hindering access to substance use treatment for people with substance use related problems through qualitative analysis of the treatment systems in partner countries.
- Measurement of health care personnel attitudes towards substance users by a survey in primary and specialized health care; and of access to treatment as perceived by substance using clients

Project Objectives

- Analysis of the impact of (a) health care personnel attitudes towards clients with substance use problems and (b) system barriers on treatment accessibility with the use of multivariate statistical methods and qualitative approaches.
- Collection and provision of examples of good practice on easier access to treatment.
- Development of recommendations of innovative approaches in facilitation of positive attitudes of health care personnel towards such clients and aspects of health care system that promote easy access to treatment.

Sampling and methods

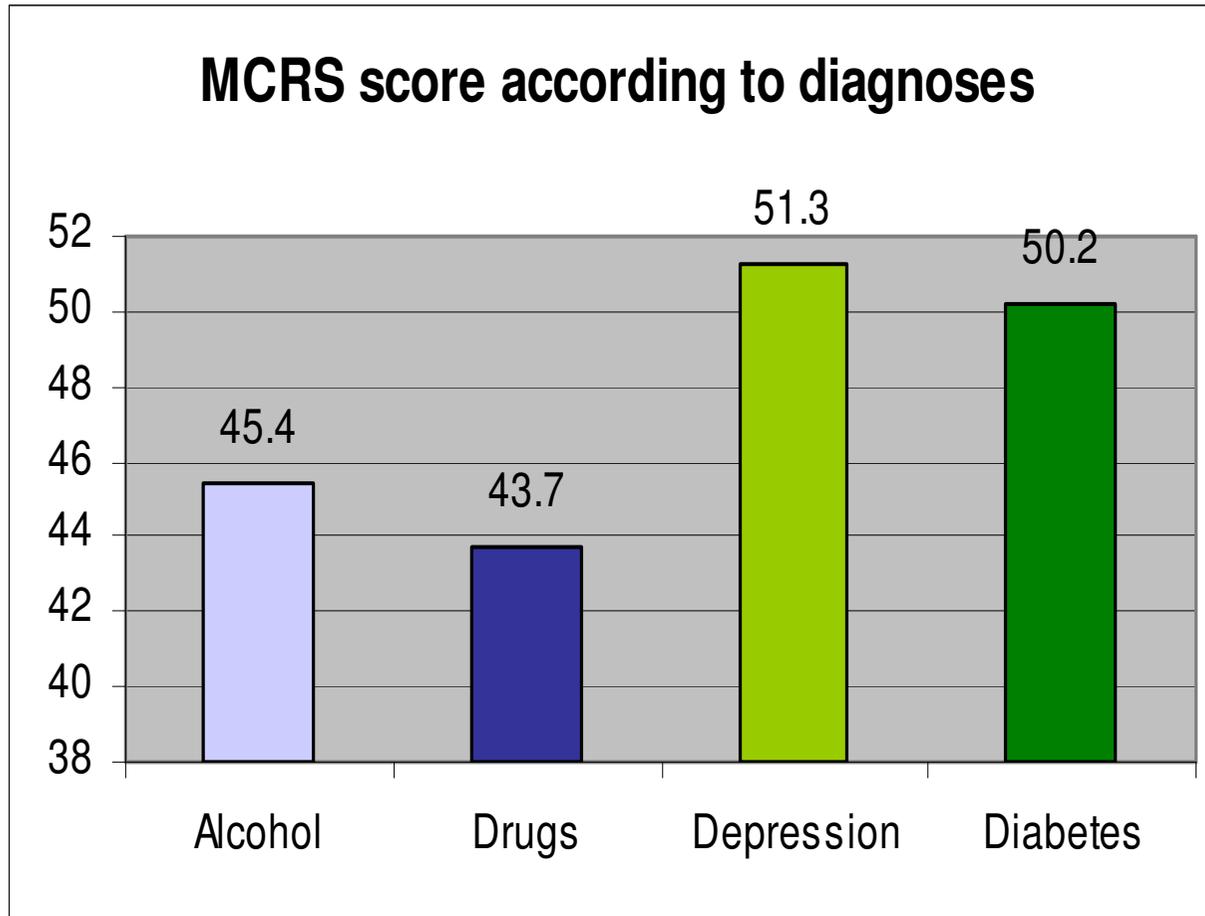
- 3 entry points to treatment
 1. Primary care (GPs) – 92
 2. General psychiatry – 80
 3. Specialist addiction treatment services – 81
- 866 staff members - 26,4% nurses,
25,9% GPs,
20,9% psychiatrists,
16,6% psychologists,
7,7% social workers

Medical Condition Regard Scale (MCRS)

- depression
- diabetes
- alcohol addiction
- drug addiction

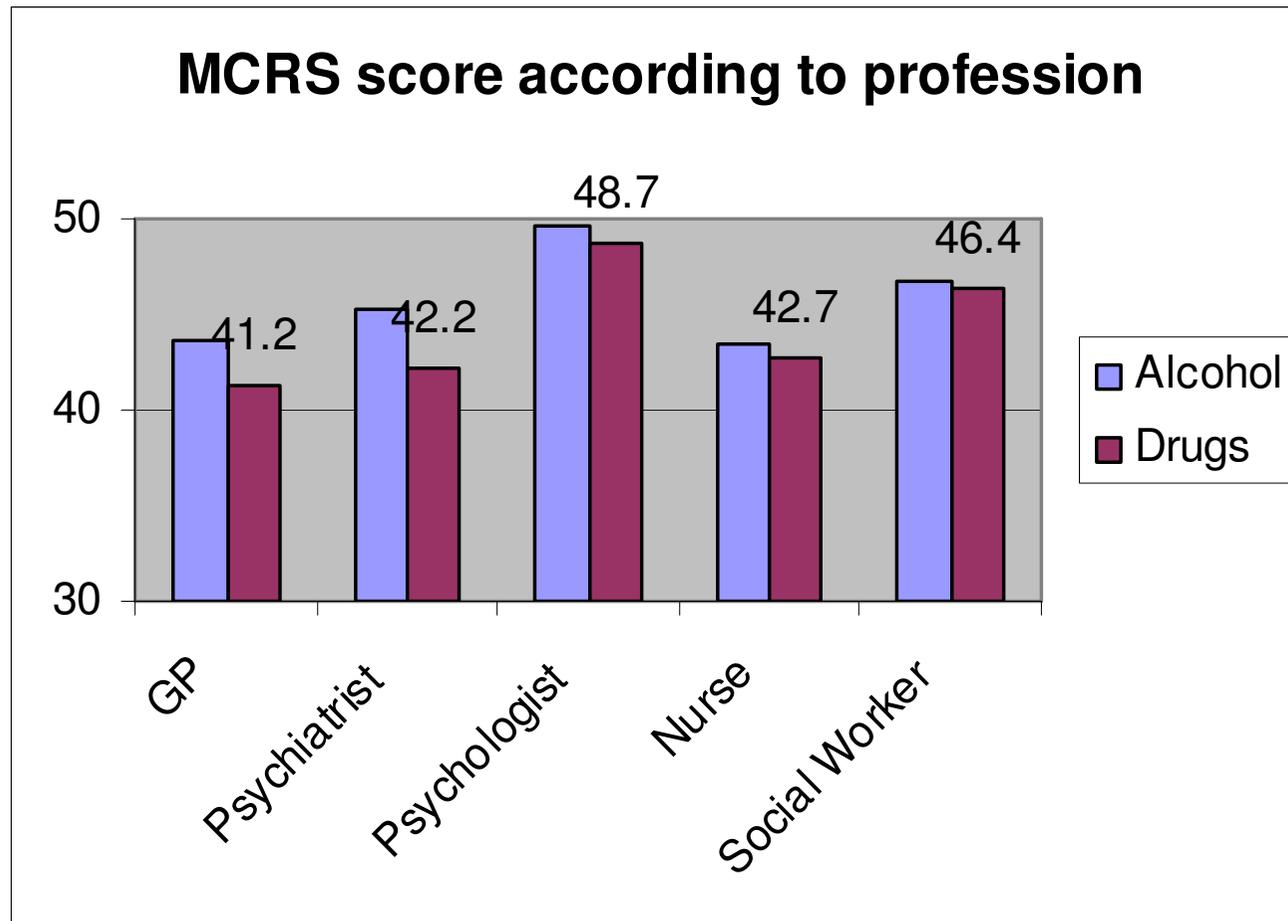
Results

Professionals reported significantly lower regard ($p < 0,01$) for alcohol and drug using patients in comparison to patients suffering from depression and diabetes.



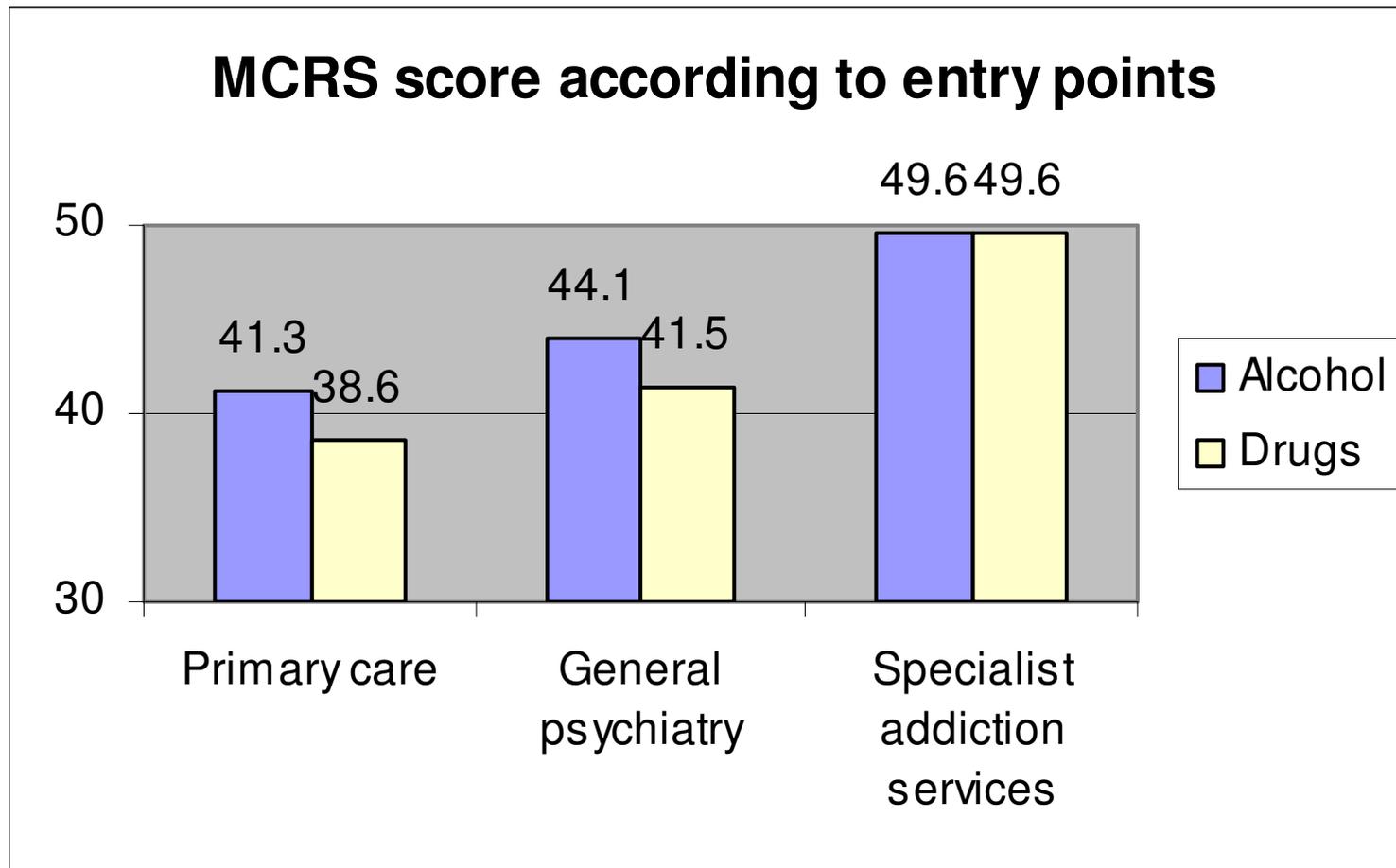
Results

Psychologists showed higher regard for patients with problems related to alcohol and drugs than physicians ($p < 0.001$), psychiatrists ($p = 0.001$) and nurses ($p < 0.001$).



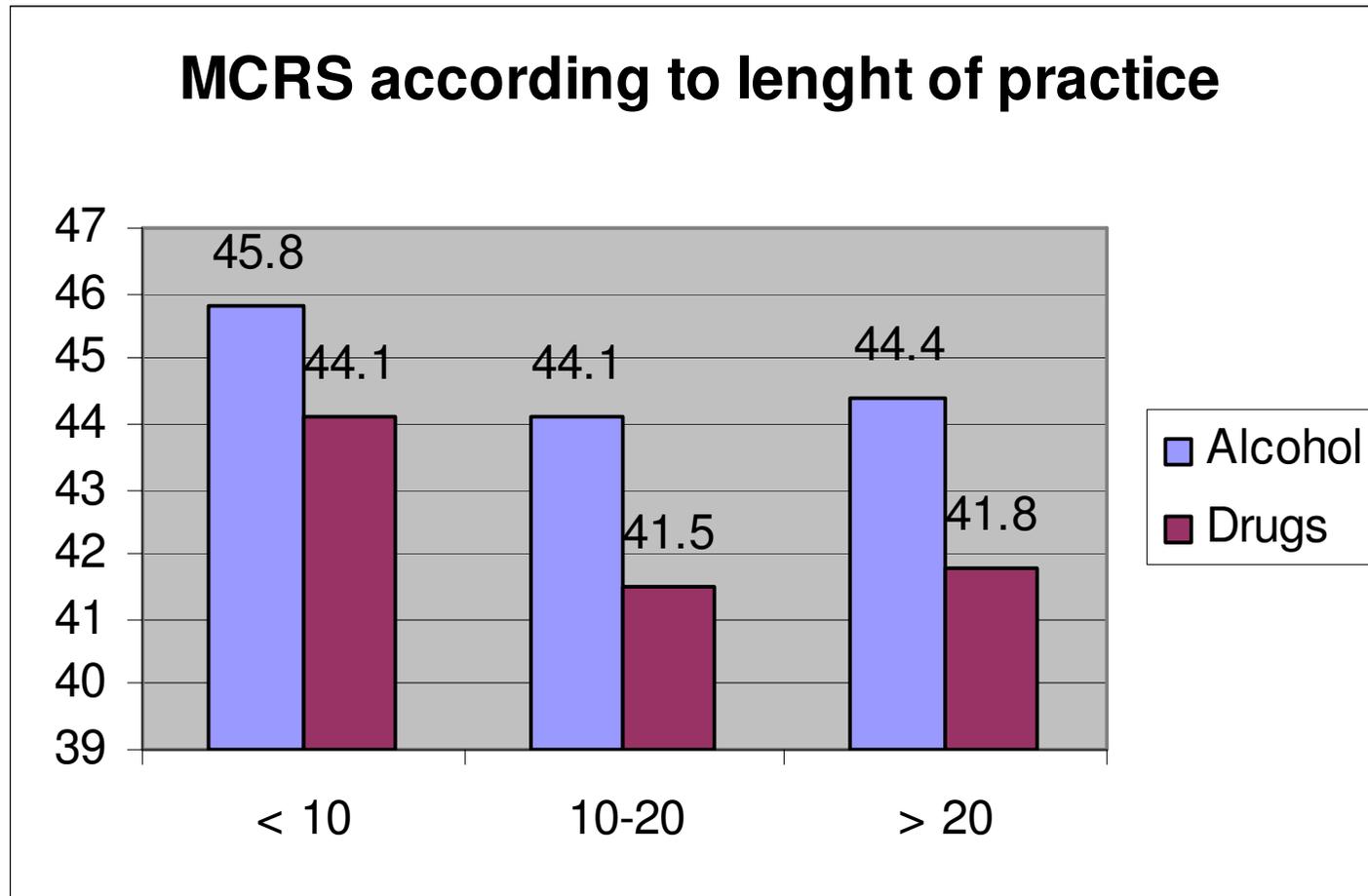
Results

Professionals recruited from Primary Care had less regard for patients with problems related to alcohol as well as drugs than professionals from General Psychiatry ($p < 0.001$) or Specialist Addiction Services ($p < 0.001$).



Results

Professionals with less than 10 years experience showed higher regard to working with patients with problems related to alcohol and drug use than those who had worked between 10 but less than 20 years in their profession (p=0.044).



Conclusion

- The results demonstrate that regard for working with patients with alcohol or drug problems is consistently significantly lower than regard for working with patients with depression or diabetes across Europe.
- Professionals from Specialist Addiction Services reported higher regard for patients with problems related to alcohol and drugs than professionals from General Psychiatry and Primary Care.
- Psychologists showed higher regard for patients with problems related to alcohol and drugs than physicians, psychiatrists and nurses.
- No differences in attitudes towards addicted patients were found according to gender and age of professionals

Discussion

- Judgemental attitudes of professionals can hinder patients access to treatment.
- Well trained and educated staff in addiction field with unjudgemnetal attitude towards patients is an important factor which is facilitating access to treatment.
- It is highly recommended to improve and extend education especially of the health personnel – non specialist in addiciton.
- General public should be better informed about the nature of alcohol and drug related problems and about sceintific evidence – based programmes for prevention, treatment and rehabilitation.

Discussion

Our findings indicate that also general health care system in each country can be a barrier in access to treatment

- Affordability (treatment should be free of charge)
- Accessibility (geographical coverage, networking)
- Availability (opening hours, waiting lists)

References

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- Strauss, A & Corbin J (1998) *Basics of Qualitative Research: Techniques and Procedures Developing Grounded Theory* (2nd edition) London : Sage

Thank you for your attention!

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