

Treatment and Rehabilitation of Addiction in Georgia, Existing Programs, Perspectives, Challenges



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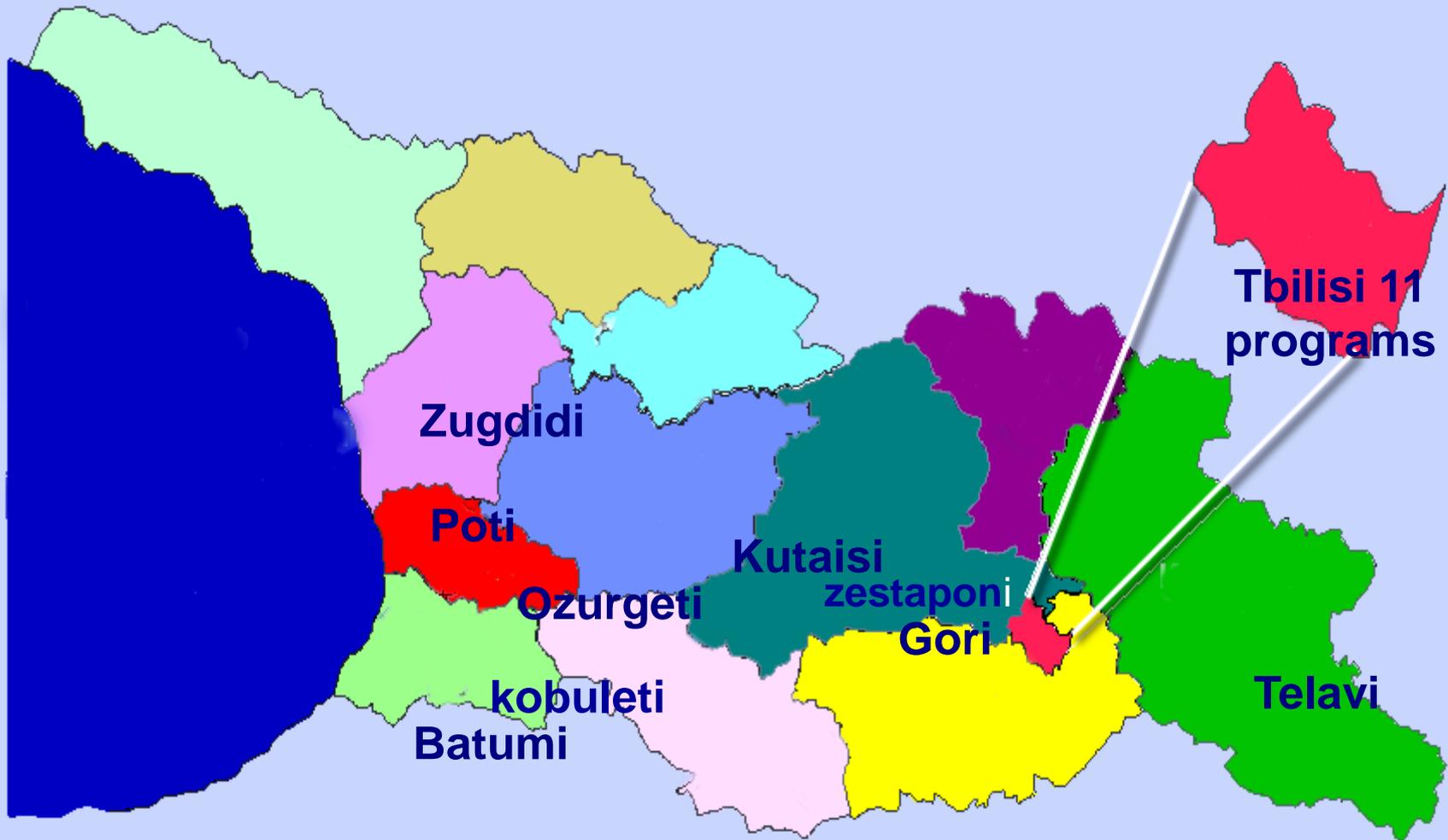


- Founded in 2012 after merging of Research Institute of Psychiatry and Research Institute of Addiction
- Leading institution in the field of mental health and addiction in Georgia with long traditions and expertise

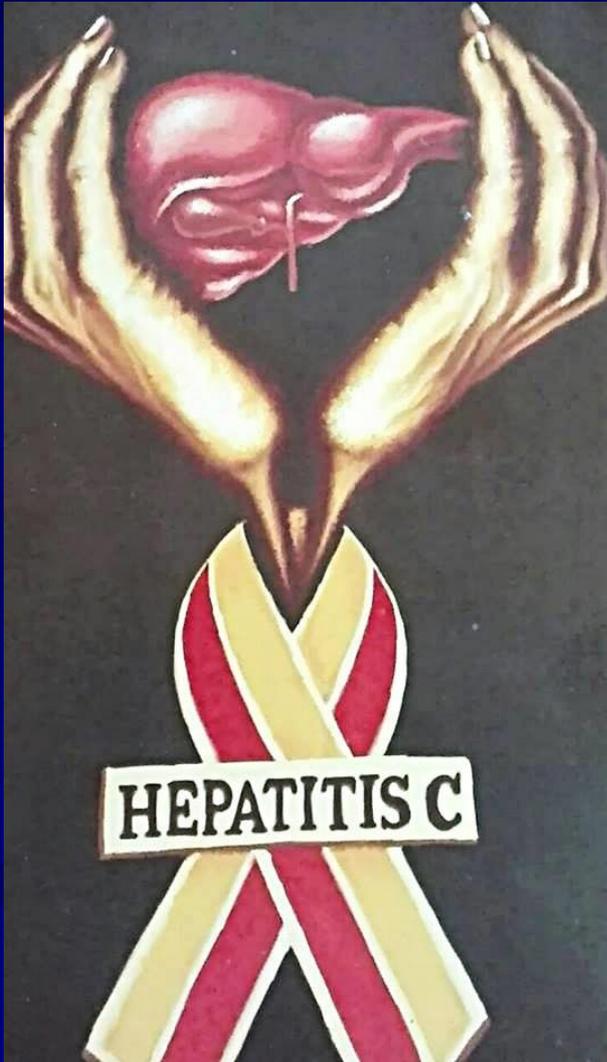
Service provided by CMHPA in addiction field

- Provider of diverse treatment and harm reduction services
 - Detoxification of alcohol and drug addicts – inpatients and outpatients
 - Treatment of psychotic disorders due to alcohol and drug use
 - Providing of Simultaneous –psychiatric and addiction treatment services in case of dual diagnosis (psychiatric inpatient department on 80 beds; outpatient department)
- Voluntary counseling and testing (VCT) (The service received up to 800 patients per year)
- Check up on narcotic and alcohol use and dependence
- Opioid substitution therapy

Geographical distribution of OST programs – 20 OST programs in civil sector (18 are operating by CMHPA)



service development



- “One Window” system to provide OST, Hep C treatment with new generation medications, rehabilitation, treatment of dual diagnosis

Service provided by CMHPA in addiction field

- Long-term psycho-social rehabilitation in average 6 months for OST patients (funded by GFATM)
- Primary (short-term) medico-psychological rehabilitation (state funded)



Prevention

- The general population oriented (universal)
- Activities oriented to the target groups:
 - Peer education on HIV, Hep C,B;
 - Information leaflets



Education; Training; Research

- Medical and Training Base of the Departments of Addiction and Psychiatry, and Postgraduate Education at the State Medical University/ Continuing Professional Development Institute
- Active participation in the development of the national guidelines and treatment standards (protocols)
- Research potential- Science Council, studies
- Regular seminars, trainings for staff



Resources

■ Human resources

- medical doctors-73, Psychologists-14, Social workers -13, nurses- 65, Other – accountant, lab. assistants, procurement managers, pharmacists etc .- 37, Multilateral administrative resources including procurement managers, lawyer, PR

■ Financial and material resources

- Self-funding (out of pocket)
- State funding stream
- GFATM funding stream
- Municipal funds etc.
- Center owns 8400 m2 building in Tbilisi that serves two main directions: Psychiatry and Narology.

Needs and challenges

- Primary prevention services are limited and insufficient
- There is limited number of well trained staff for selective and indicated prevention services
- There is not sufficient expertise and confidence to implement internet-based treatment interventions and counseling.
- There is not sufficient technical resources for implementation of internet-based treatment interventions and counseling (there is not computerized programs, guidelines etc).

Our weaknesses

- Financial sources are limited and insufficient to increase effectiveness of services to meet needs of patients and provide all modern client-centered interventions.
- Non-existence of long-term residential rehabilitation services
- Limited programs for social support, employment and vocational training of addicted patients.



Antidrug strategy and funding

- Interagency anti-drug council – MoJ, MoLSHA, MoSE, MoC, MoIA, MoYS, CMHPA, experts, NGOs, International donors etc
- Antidrug strategy
 - Supply reduction
 - Prevention
 - Treatment, rehabilitation and harm reduction
 - Monitoring, research, data collection

Number of PDUs by years (BBSS and PDUs Size estimation studies)

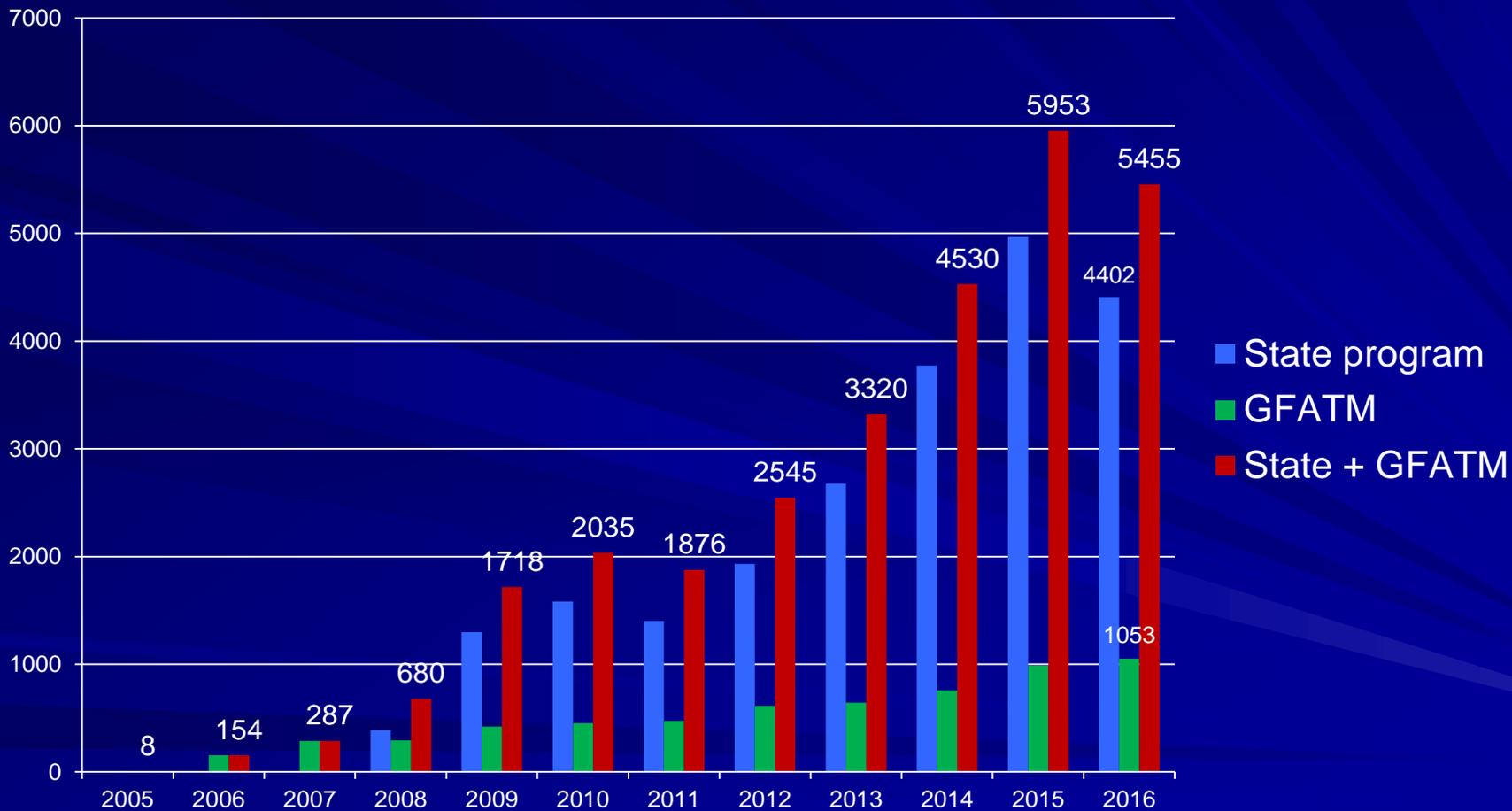
- ❑ 40 000 – 2009
- ❑ 45 000 – 2012
- ❑ 49 700 – 2015 (among them opioid users- 20 000)

- ❑ Drug market –eclectic, dynamic, changeable
- ❑ Basic trends:
 - Opioids
 - Homemade stimulants
 - Poly-drug abuse
 - New Psychoactive Substances
 - Pharmaceutical drug abuse

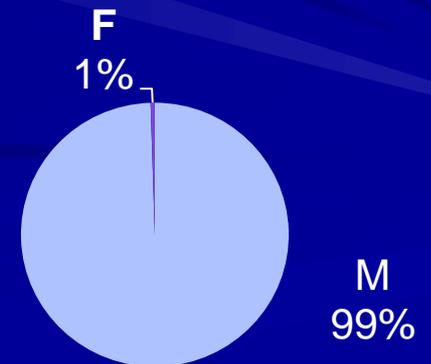
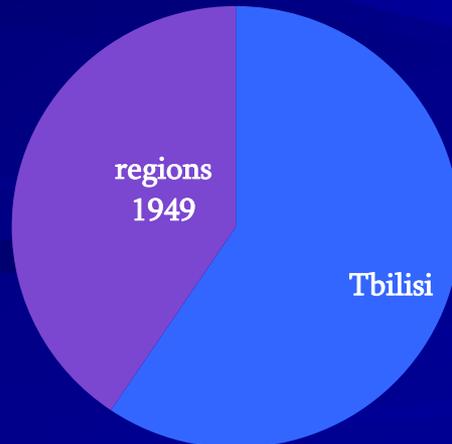
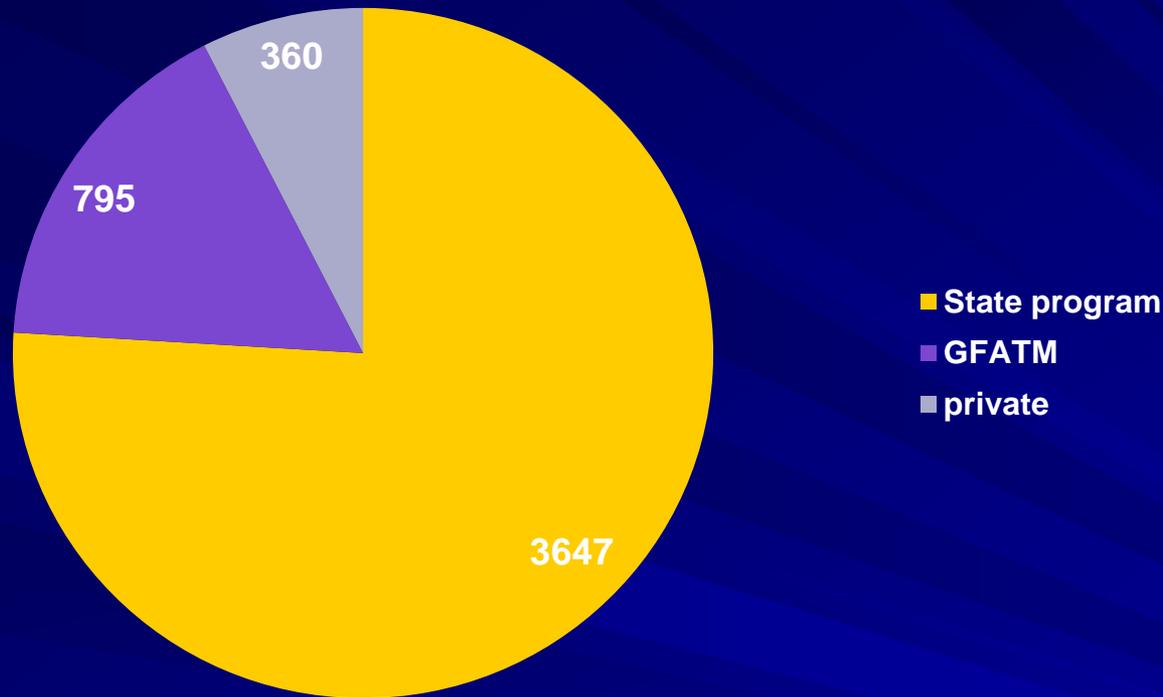
State funding – state program for treatment of disorders related to drug and alcohol use

- **2775000** GEL - 2011
- **3526000** GEL - 2012
- **4025000** GEL - 2013
- **4388500** GEL - 2014
- **4353400 (4203500)** GEL - 2015
- **5000000 (4700000)** GEL – 2016
- **7000000 (6700000)** GEL– 2017, including
4720000 GEL for OSTGE

Number of OST patients by years and programs

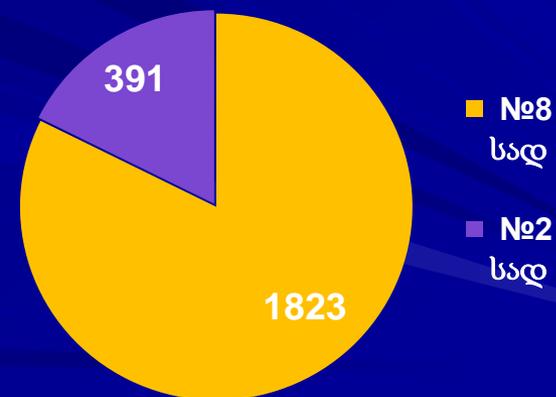


Quantity of OST patients in treatment (the same time capability) - 4800-5000



Methadone treatment in penitentiary system

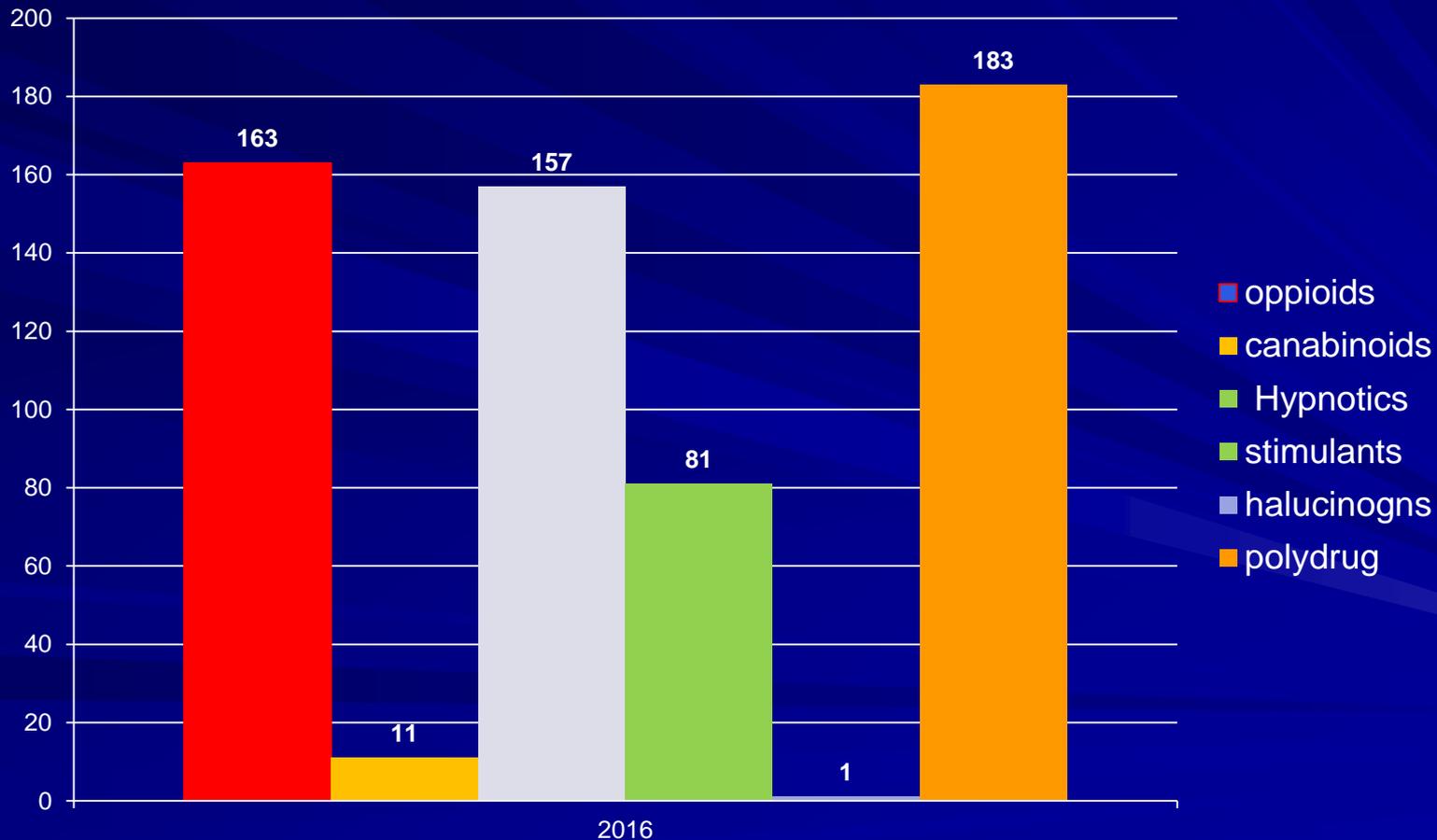
- Long-term methadone detoxification up to 6 month in 2 prisons
- Service is operating by CMHPA
- **2214** inmate beneficiaries since 2008



Abstinence-oriented treatment

- **7 (6) addiction clinics**
- **80-100 beds**
- **State funding for one case – 2000 GEL**
- **Self-funding 2500-3000 GEL**

Distribution of hospitalized patients by used substances (609 cases) – state funding

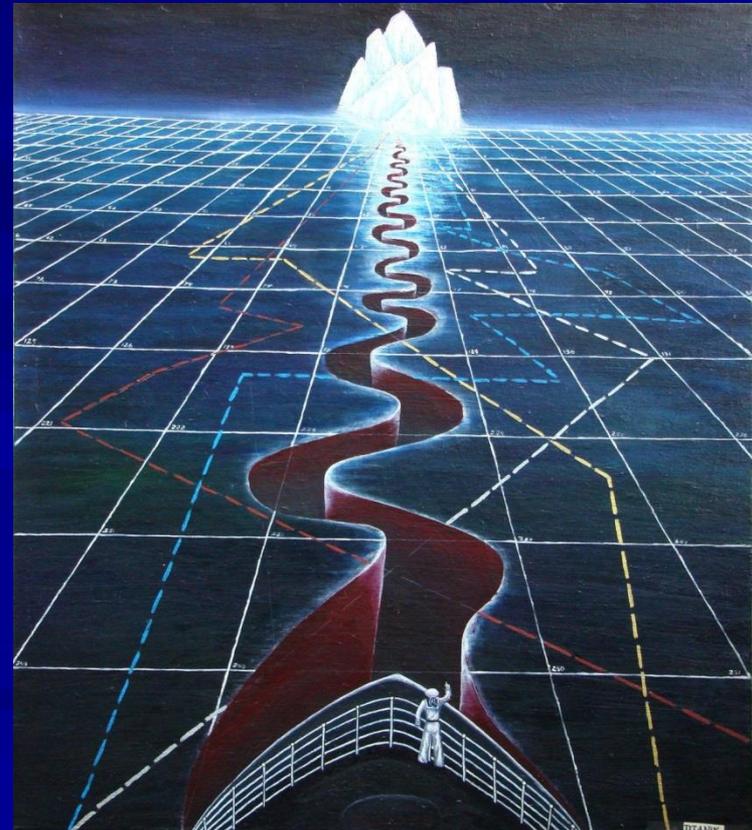


Rehabilitation



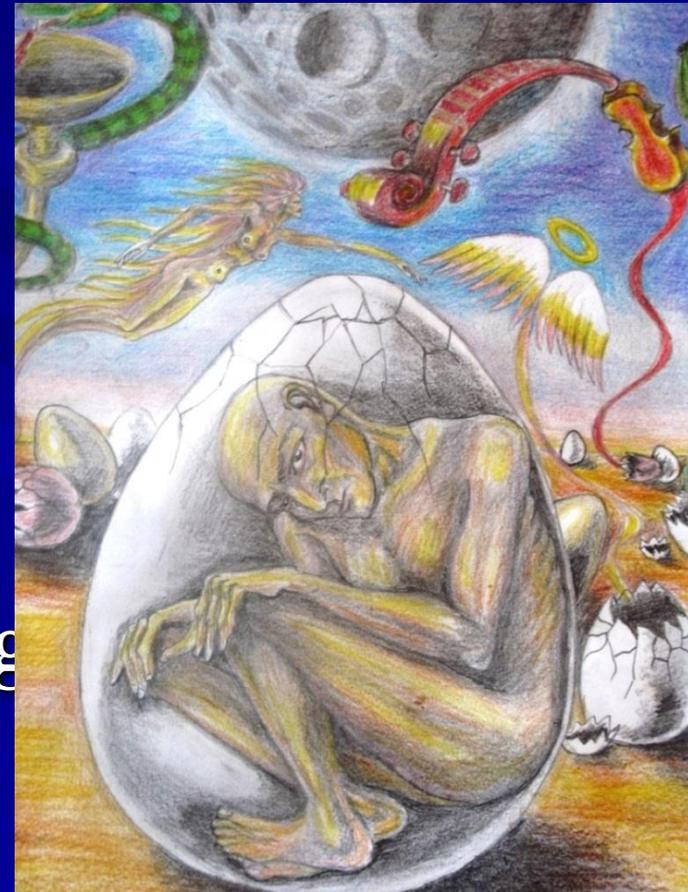
Rehabilitation

- 3 outpatient rehabilitation day centers
- 2 week medico-psychological care in State programs after hospital
- Short, sporadic programs, mainly with international funding



Rehabilitation - CMHPA

- Group psychotherapy
- Individual psychotherapy
- Family psychotherapy
- Aerotherapy
- Bibliotherapy
- Sport activities
- Tsi-gun
- Telephone-based counselling
- VCT and peer education



Threats (rehabilitation)

- Non-existence of the residential rehabilitation centers in the country
- Non-existence of employment programs and vocational trainings for persons with addiction problems
- Non-friendly legislation diminishes early detection and care of persons with drug problems including.
- Non-friendly attitudes in the society lead to stigmatization of drug users and hampers development of sufficient services.

What was achieved

- Increase of funding of addiction by state – 7 000 000 Gel in 2017
- Some regional centers are transferred to CMHPA
- Free of charge OST for all patients from July 2017
- New drug policy is elaborating at the Parliament of Georgia

The field of potential collaboration

- To increase the prevention activities, awareness and professionalism of staff through the assistance of foreign colleagues;
- To implement the Internet-based counseling and treatment by means and support of colleagues from Poland;
- To create prevention guideline and other materials (paper-based and internet-based versions)
- To increase interests from the side of municipalities and private sector to be involved in prevention activities



**Thank You for
Attention!**

