



Integrated services for people who use drugs in vertical health care systems: challenges and solutions

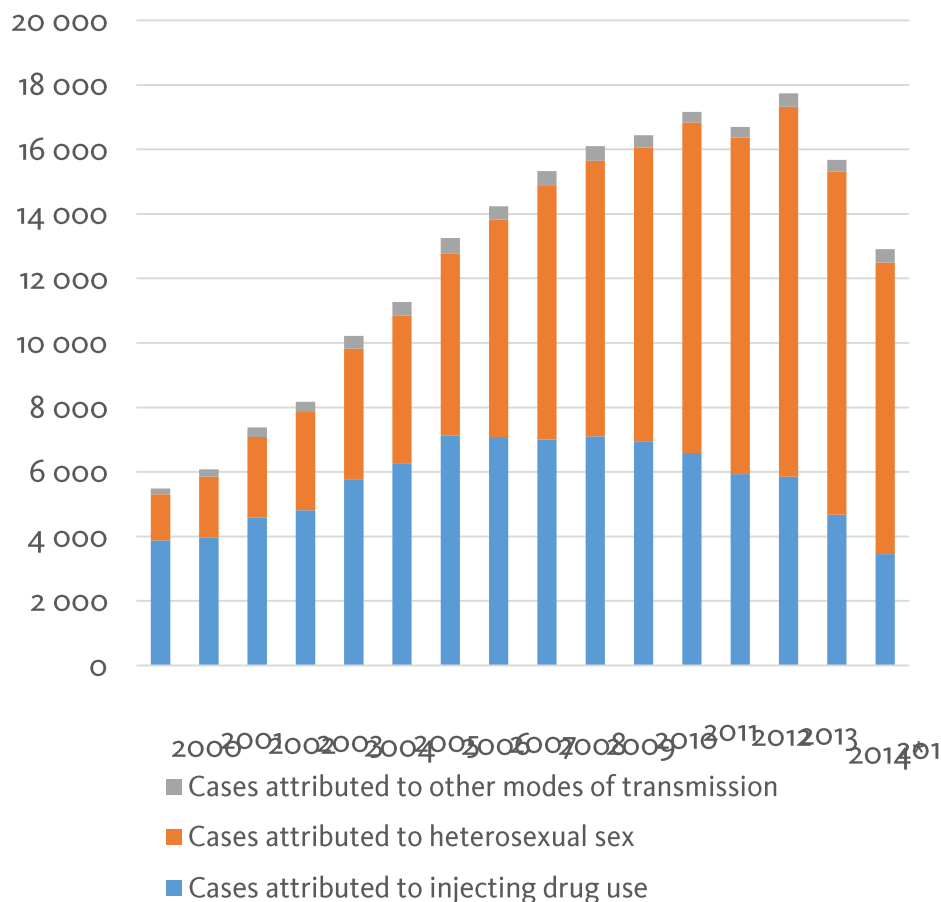
Kostyantyn Dumchev, MD, MPH

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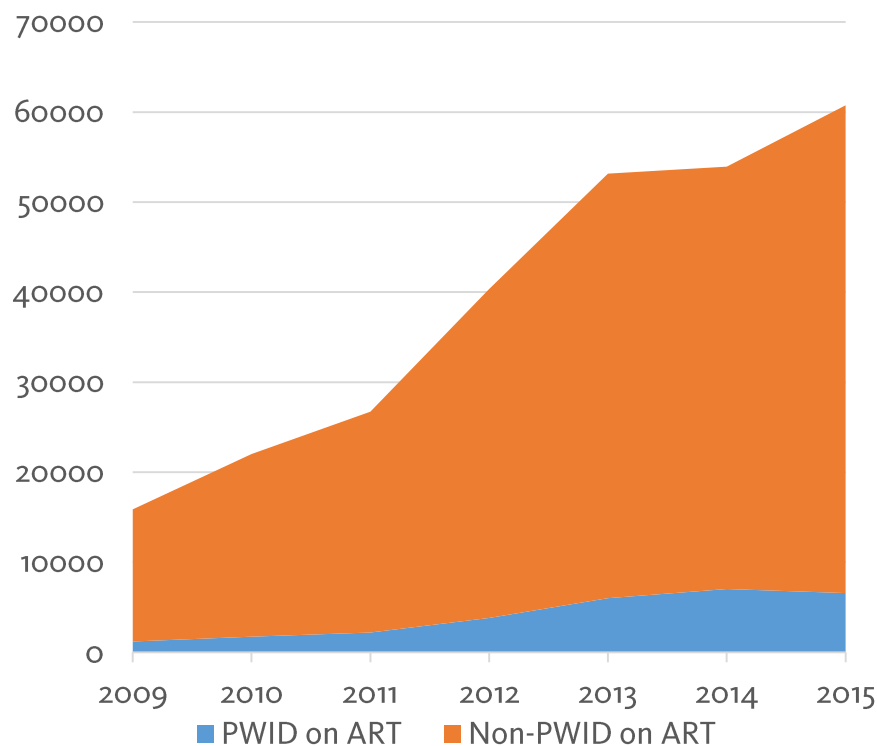
21st International AIDS Conference, Durban, South Africa

Disproportionate access of PWID to ART

Newly registered cases by mode of transmission

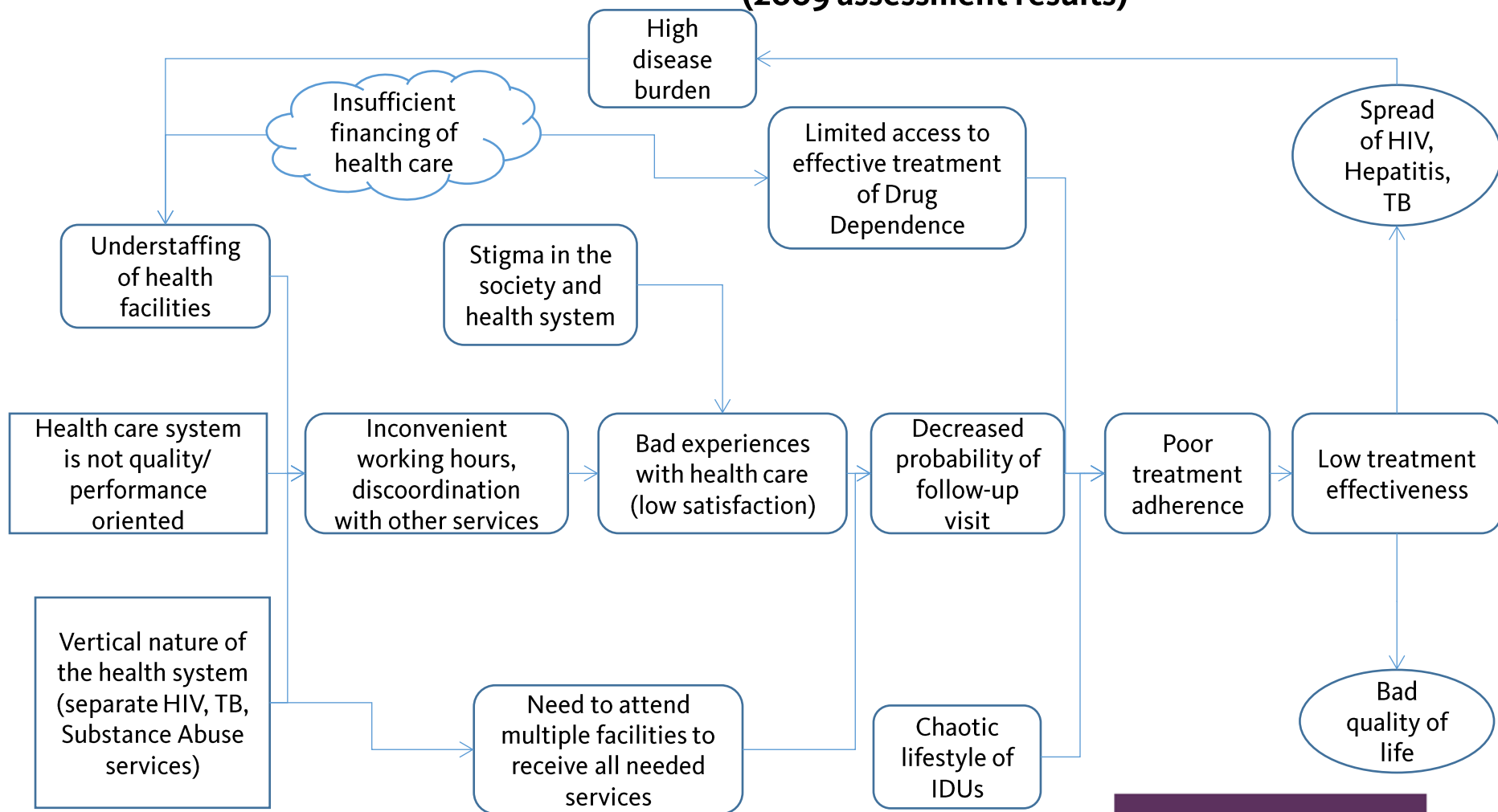


Patients on ART by drug use status



Barriers to service utilization for PWID in Ukraine

(2009 assessment results)



Barriers to service provision (continued)

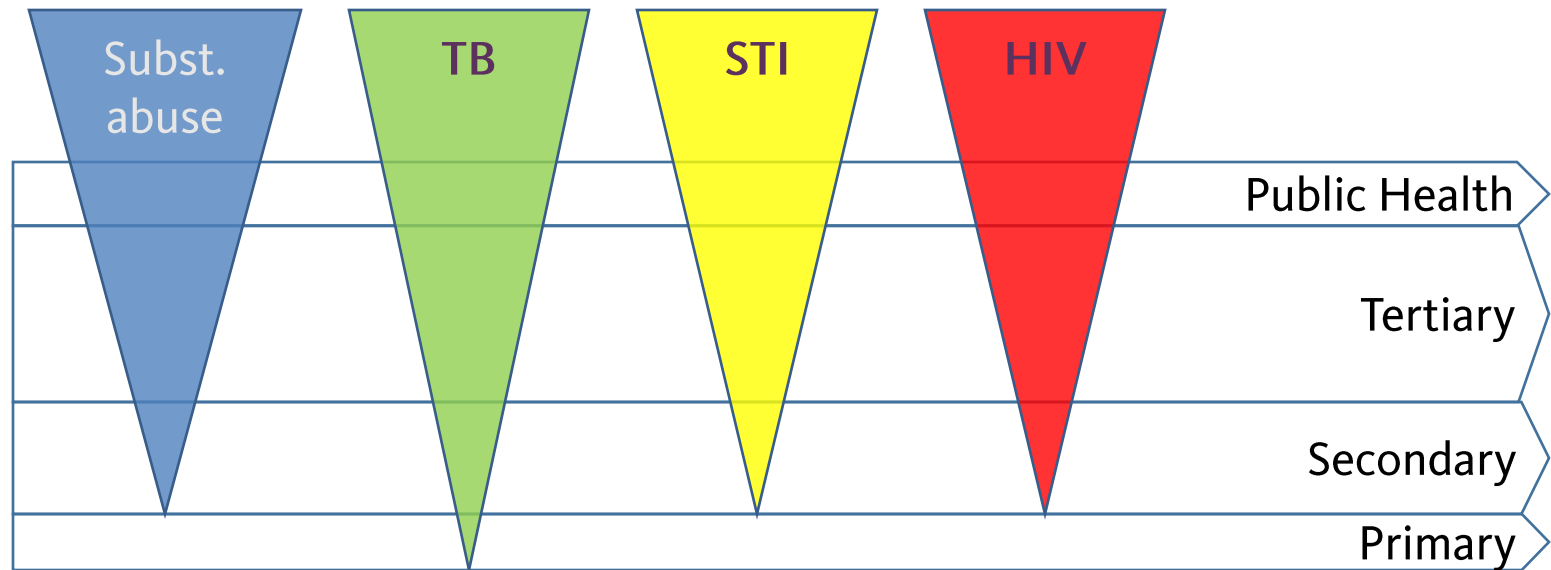
2014-15 assessment results

- Inconvenient location, need to travel long ways to obtain services in multiple facilities
- Inefficient patient flow through facilities
- Lack of cross-discipline training in providers
- Low health awareness among PWID

Conclusion:

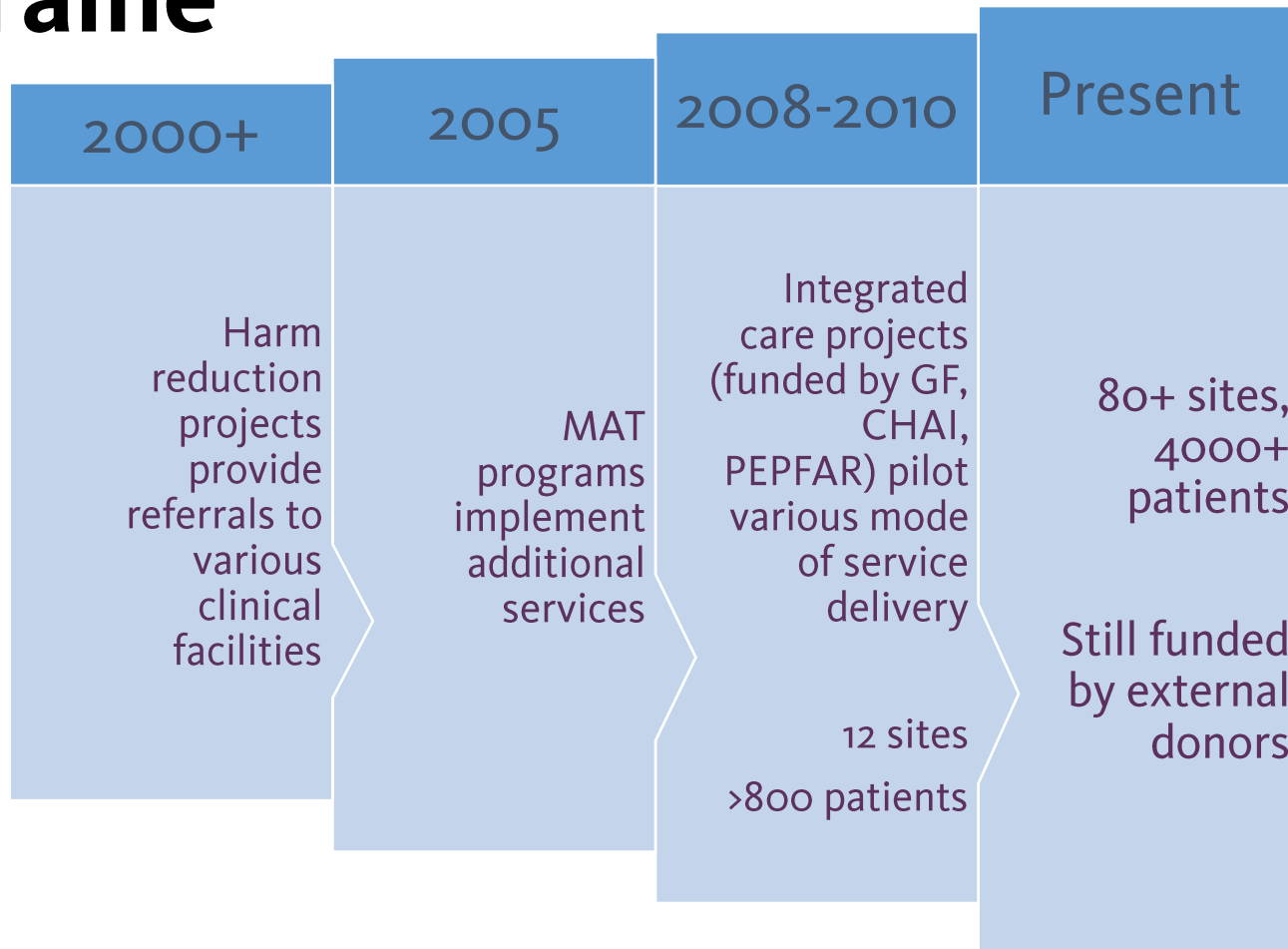
Majority of the barriers are caused by the vertical structure of health care system, typical for post-Soviet countries

‘Vertical’ healthcare system



+ also, in Ukraine patients are bound to facilities serving their registered place of residence

Response 1: Evolution of integrated care for PWID in Ukraine



Integrated care projects in Ukraine ●



- Piloting “integrated care” for drug users by posting multidisciplinary teams at different vertical service facilities

Photo: Theo Smart

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Aims of integrated care



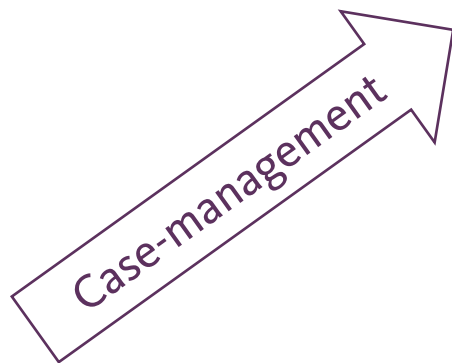
- Increased effectiveness of specific interventions through improved access and coverage
- Increased adherence to treatment
- Increased treatment effectiveness and cost-effectiveness

Principles of integrated care

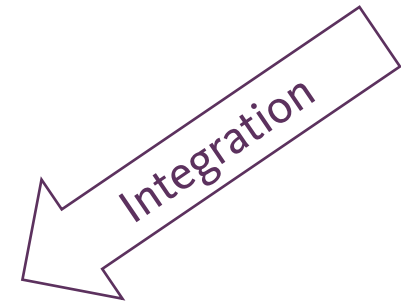
1. Appropriate location for the site and main services
2. A basic package of essential services
3. A multidisciplinary team model linked through individual patient case management
4. Efforts to build trust with patients, and a collaborative approach to their healthcare
5. Inclusion of harm reduction principles* across care
6. Cooperation between governmental and nongovernmental sectors

Source: “Implementation of integrated services for persons with substance dependence in health care facilities” - 2011

Case-management – an intervention reducing barriers mostly from the client side



Both are working to make a service closer to the client

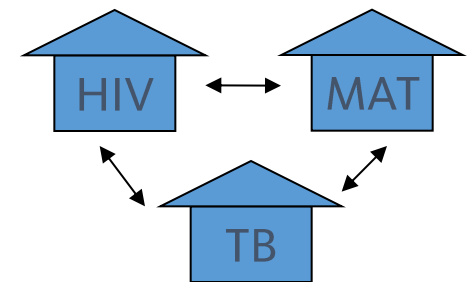
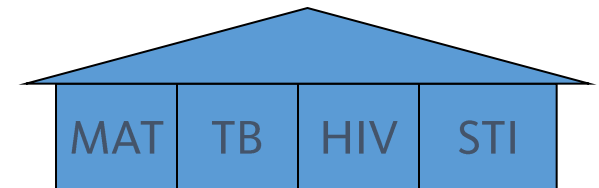


Integration – a process reducing barriers from the provider side

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Integrated care models

- Multidisciplinary patient management:
Patient is managed by a multidisciplinary team, or cross-disciplinary provider
- Co-location:
Provision of related services in one location
- Referral:
Structured referral to the services that are not available on-site
(formal agreement with facilities, appointment confirmation, accompanying, result tracking)



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Components of IC package

- Diagnostics and treatment of mental disorders, of **DRUG DEPENDENCE** in the first place, including MAT
- Diagnostics, treatment, and prevention of **HIV/AIDS**
- Diagnostics, treatment, and prevention of **VIRAL HEPATITIS B and C**
- Diagnostics, treatment, and prevention of **TB**
- Diagnostics, treatment, and prevention of **STIs**
- **Reproductive health** services
- Diagnostics and treatment of **OTHER** commonly occurring diseases
- IDU **HARM REDUCTION**
- Socio-psychological **SUPPORT**, including psychological and legal counseling, assistance in employment, and social reintegration

Further challenges in vertical healthcare

(2009 assessment results)

Existing legislature and health care structure limit the possibilities for integration of health and social services, but, at the same time, the existing and feasible mechanisms are not widely known and utilized. [...]

Response 2: integrated care manual

- “Implementation of integrated services for persons with substance dependence in health care facilities”
- Goal:
 - Systematize all possible approaches and options to service implementation within the existing health care system and legislature
 - Answering the “HOW?” question
 - Describe stepped algorithms for service implementation:

Service

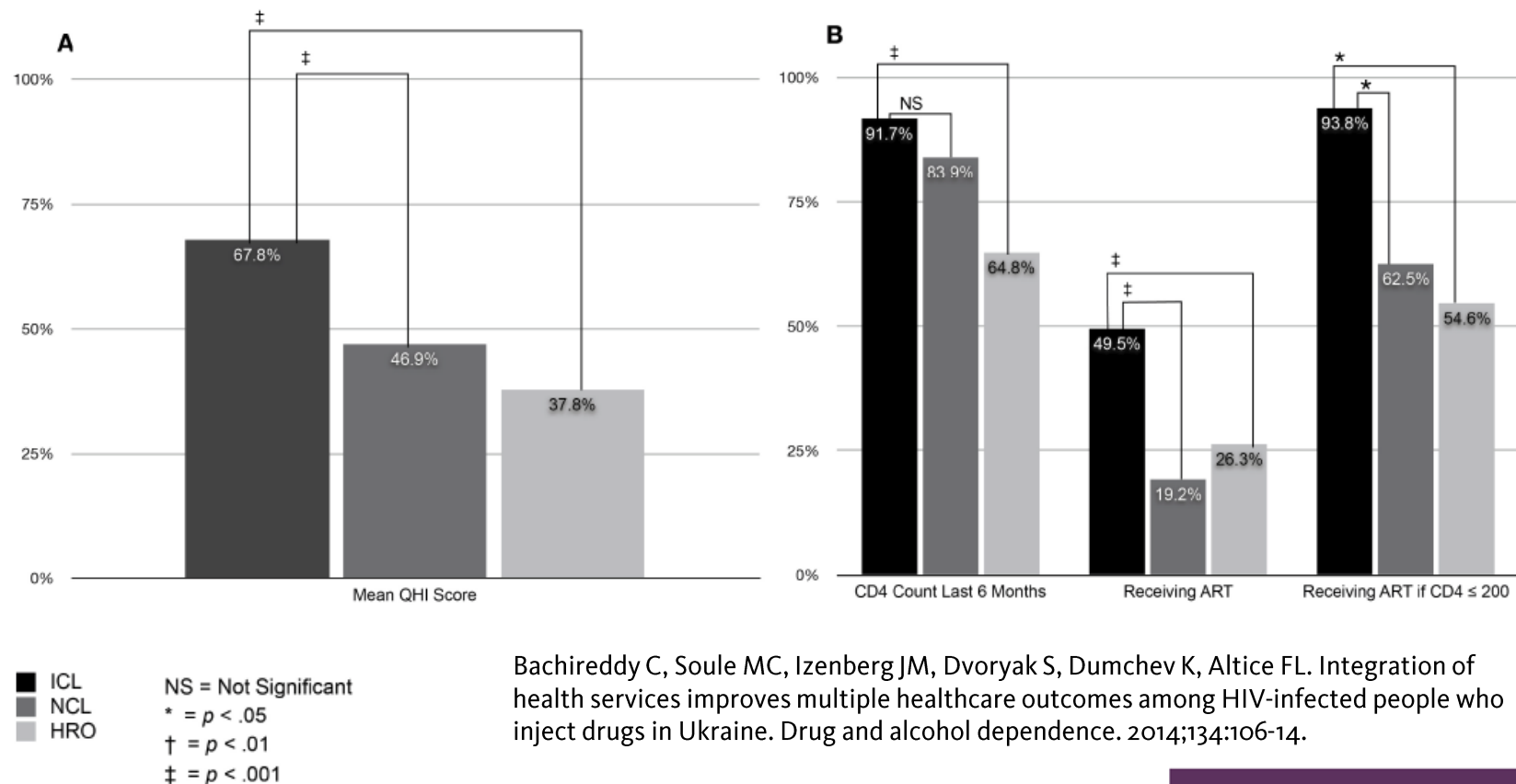
Components (e.g. for ART: 1.physician 2.drugs 3.lab...)
(options)

Steps

(options)

Effectiveness: results of a cross-sectional study

Figure 2: Quality Healthcare Indicators Based on Site of Service Delivery



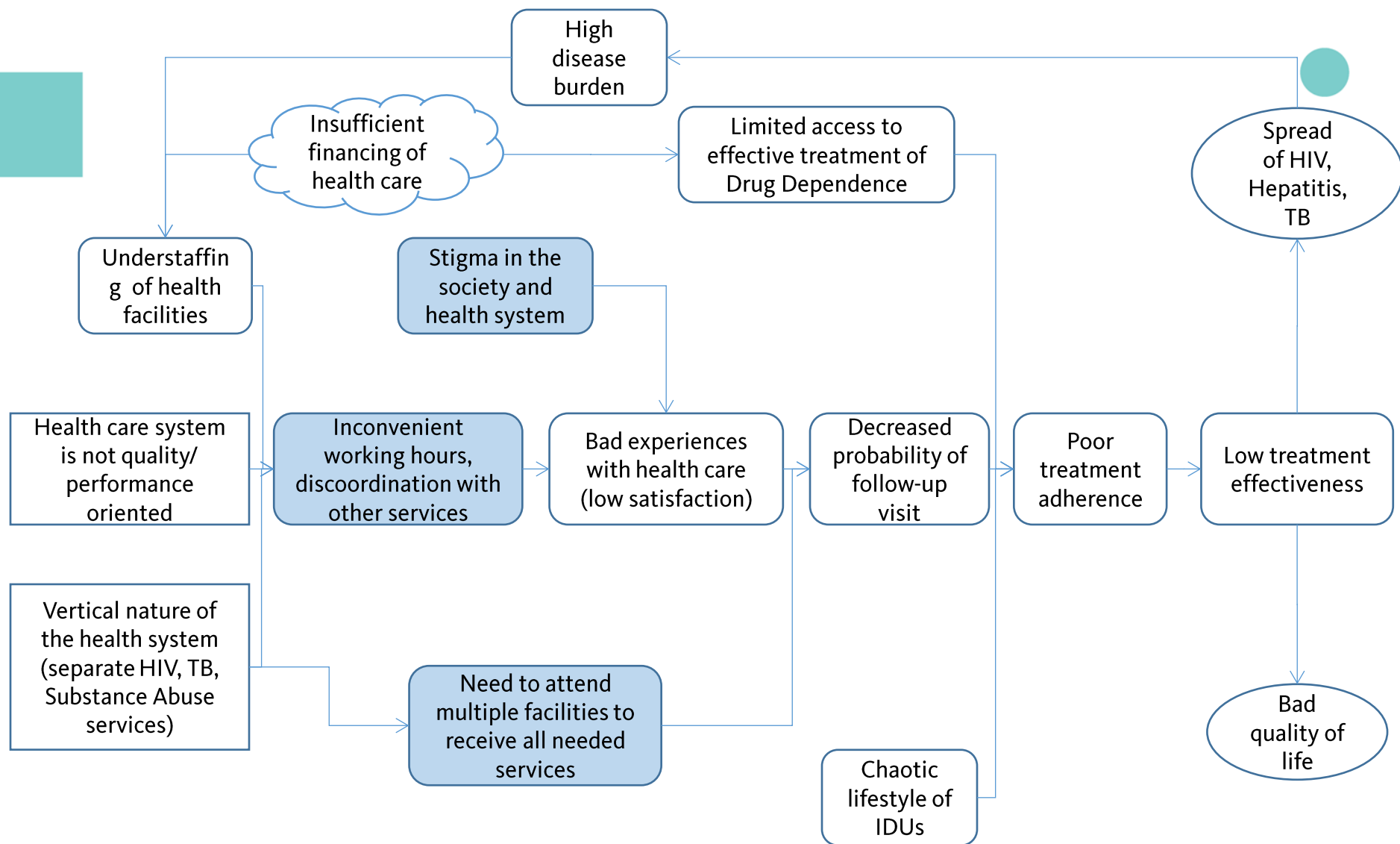
Bachiredy C, Soule MC, Izenberg JM, Dvoryak S, Dumchev K, Altice FL. Integration of health services improves multiple healthcare outcomes among HIV-infected people who inject drugs in Ukraine. Drug and alcohol dependence. 2014;134:106-14.

Further challenges in vertical healthcare

(2009 assessment results)

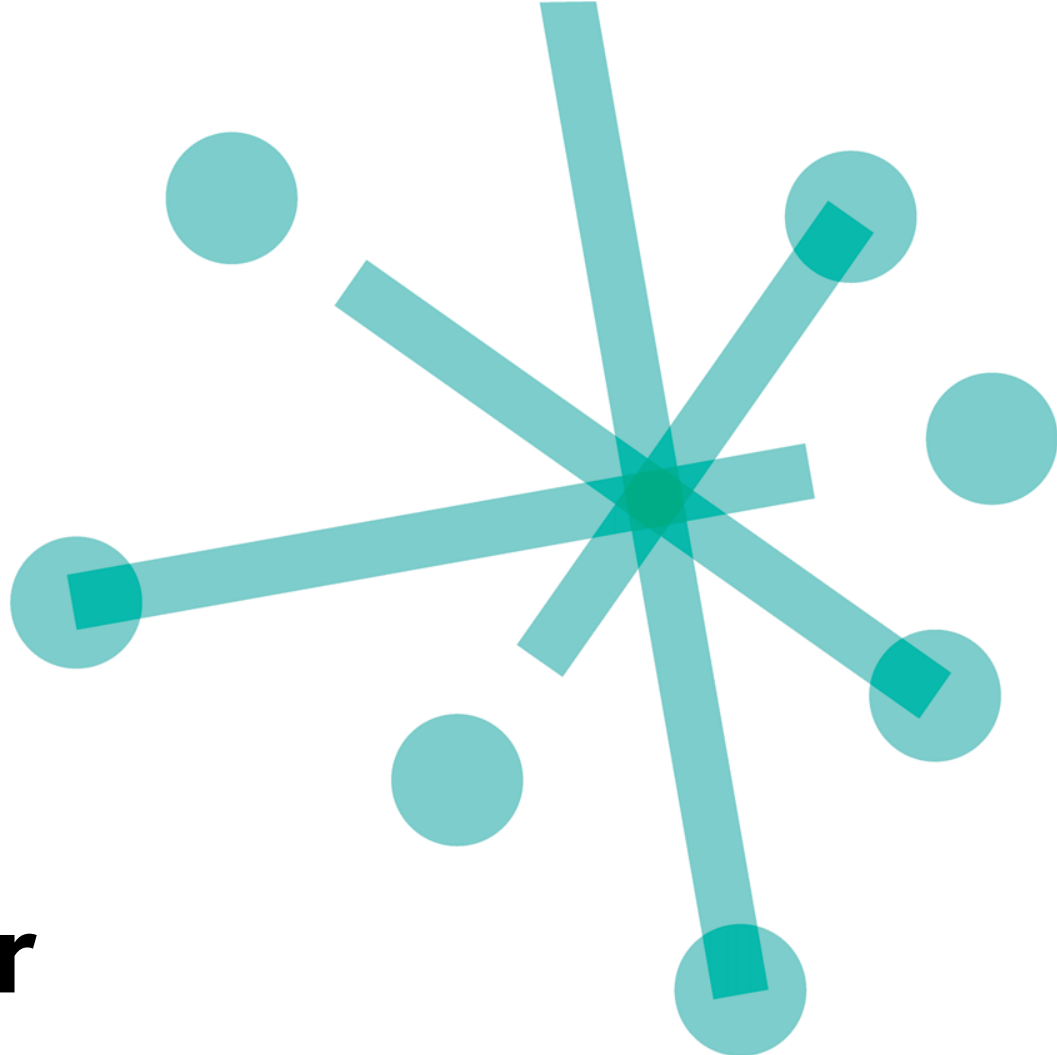
Existing legislature and health care structure limit the possibilities for integration of health and social services, but, at the same time, the existing and feasible mechanisms are not widely known and utilized.

But even more serious barrier is the lack of motivation in health administrators and personnel, mostly caused by non-result-based financing in healthcare.



**If the fundamental barriers are not addressed
BY HEALTHCARE REFORM, the progress in IC
scale-up will remain limited**

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**Thank you for
attention!**