

dianova | 

learn | grow | achieve


**IL NOSTRO STILE
DI VITA PRODUCE
TROPPE COSE
USA E GETTA.**



Non lasciamo solo chi butta via se stesso.

Da più di trent'anni, siamo vicini a chi incontra problemi di tossicodipendenza. Con solidarietà, impegno, competenza medico-scientifica e un approccio sempre attento all'individuo e ai suoi diritti. Siamo accreditati presso il servizio sanitario nazionale e attivi in molti Paesi del mondo. In una società che spesso fa della dipendenza un modello, siamo una voce diversa. Ci chiamiamo Dianova: vogliamo che per tutti sia possibile sperare in una nuova opportunità. Aiutaci a dare aiuto, con il tuo 5 per mille (Cod. Fisc. 97033640158) o con un versamento sul c/c postale 13546239. E se vuoi approfondire: www.dianova.it

NUMERO VERDE 800-012729

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apprendere | crescere | realizzare

*DIANOVA
ITALY*

www.dianova.it - numero verde 800.012729

DIANOVA ONLUS – WHO WE ARE

Dianova in Italy was established in 1984 and later became an “Onlus”, which in Italian stands for “Non-profit Organization of Social Utility”. The organization is dedicated to providing support to those abusing substances, including drugs and alcohol, in residential drug treatment centers and outpatient facilities throughout the country.

More than 22,000 people
have attended the programs of Dianova

DIANOVA INTERNATIONAL

Dianova is an international NGO with consultative status to the Economic & Social Council of the United Nations (ECOSOC), official partner of the UNESCO and affiliated member of the Organization of American States.

The Dianova Network operates in 11 countries of Europe and the Americas, developing innovative initiatives in the fields of **Education, Youth, Addiction prevention & Treatment** and in the area of **social and community development**.

DIANOVA INTERNATIONAL

Dianova International's headquarters are located in Lausanne (Switzerland), while its operating unit is in Castelldefels (Spain). Dianova International is an umbrella organization comprising all members of the Dianova Network within the framework of a common **Mission, Vision and Values.**

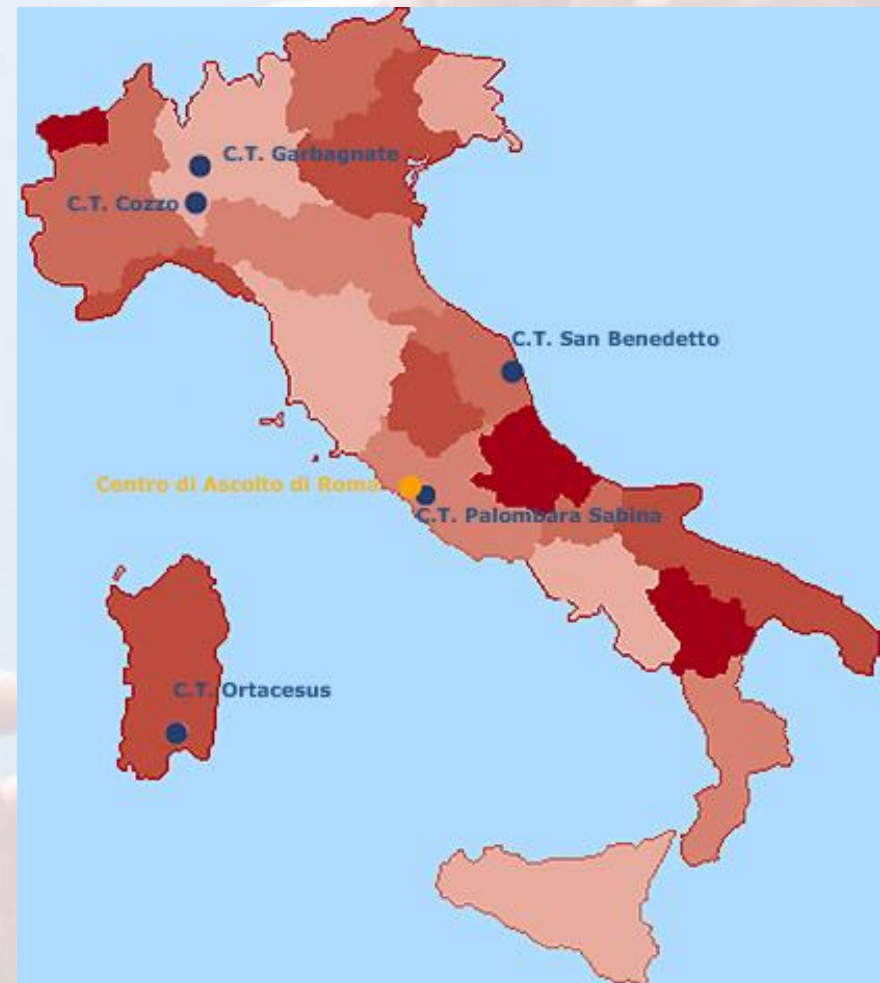
Our Vision – Dianova’s purpose is based on the conviction that, with appropriate support, each person will be able to find within him/herself the resources necessary to achieve success in his/her personal development and social integration

Our Mission – Developing initiatives and programs with the objective of promoting personal self-reliance and social progress

Our Values – Commitment, Solidarity, Tolerance and Internationality

DIANOVA FACILITIES

- N. 3 Counselling centers
- N. 5 Therapeutic communities (TCs)
- N. 1 Headquarters



Facilities:	5 accredited in-patient therapeutic communities (TCs) 3 counselling centers, of which 1 was accredited for outpatient services (in Rome)
Available beds:	69 in the therapeutic & educational treatment program 18 in alcohol addiction treatment program 19 in the early admission services 61 in the residential drug treatment program
Number of people attended in 2011:	362 in the therapeutic communities, for a total number of 476 including all residential services
Employees:	101
Budget year 2011:	3.946.589 € (expenses) 3.929.239 € (receipts)

COMMUNITY OF COZZO (PV)

TYPE:

MIXED GENDER TC FOR SUBSTANCE ABUSERS (alcohol/drugs), AND PATIENTS WITH MULTIPLE ADDICTIONS

PROGRAMS:

THERAPEUTIC & EDUCATIONAL RESIDENTIAL PROGRAM
ALCOHOLISM AND MULTIPLE ADDICTIONS
EARLY ADMISSION SERVICES

CAPACITY:

49 BEDS

AGREEMENT:

LOMBARDY REGION
MINISTRY OF JUSTICE
VOLUNTARY CIVIL SERVICE



COMMUNITY OF GARBAGNATE MILANESE (MI)

TYPE:	MIXED GENDER TC FOR SUBSTANCE ABUSERS (alcohol/drugs), AND PATIENTS WITH MULTIPLE ADDICTIONS
PROGRAMS:	THERAPEUTIC & EDUCATIONAL RESIDENTIAL PROGRAM EARLY RESIDENTIAL ADMISSION RESIDENTIAL PROGRAM FOR ALCOHOLISM AND MULTIPLE ADDICTIONS
CAPACITY:	38 BEDS
AGREEMENT:	LOMBARDY REGION MINISTRY OF JUSTICE VOLUNTARY CIVIL SERVICE

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COMMUNITY OF MONTEFIORE DELL'ASO (AP)

TYPE:	MIXED GENDER TC FOR SUBSTANCE ABUSERS (alcohol/drugs), AND PATIENTS WITH MULTIPLE ADDICTIONS
PROGRAMS:	RESIDENTIAL TREATMENT PROGRAM
CAPACITY:	23 BEDS
AGREEMENT:	MARCHE REGION MINISTRY OF JUSTICE VOLUNTARY CIVIL SERVICE



COMMUNITY OF PALOMBARA SABINA (RM)

TYPE:	MIXED GENDER TC FOR SUBSTANCE ABUSERS (alcohol/drugs), AND PATIENTS WITH MULTIPLE ADDICTIONS
PROGRAMS:	RESIDENTIAL TREATMENT PROGRAM
CAPACITY:	18 BEDS
AGREEMENT:	LAZIO REGION MINISTRY OF JUSTICE VOLUNTARY CIVIL SERVICE



COMMUNITY OF ORTACESUS (CA)

TYPE:	MIXED GENDER TC FOR SUBSTANCE ABUSERS
PROGRAMS:	THERAPEUTIC & EDUCATIONAL RESIDENTIAL PROGRAM THERAPEUTIC RESIDENTIAL PROGRAM EARLY ADMISSION, EVALUATION & REFERRAL
CAPACITY:	39 BEDS
AGREEMENT:	SARDINIA REGION





HISTORY

THERAPEUTIC COMMUNITIES IN ITALY

EIGHTIES: Drug abuse rose dramatically during the decade with limited therapeutic response. Dianova's first therapeutic community opened in 1984.

NINETIES: Levels of substance abuse lead to a social emergency. Whether it was due to the expansion of the phenomenon or the increase of addiction services, a legislative decree 309/90 "Unique bylaw as regards drugs", which regulates the relations between public and private sectors.

PRESENT TIME: The private sector has taken and still takes a major role in the addiction treatment system, placing Italy among the most advanced nations in this field.



**REPORT
ABUSE**

SUBSTANCE ABUSE IN ITALY

(report to the Parliament – August 2012)

Data collection May 15, 2012

Sample 18.000 people (31.6% adherence rate)

Estimate of the total number of consumers (both occasional and regular use) amounted to 2,327,335 (from 2,127,000 to 2,548,000) persons.

Consumption Data

- ◆ heroin 0.23% (0.29 in 2011);
- ◆ Cocaine 1.06% (1.17 in 2011);
- ◆ cannabis 12.94% (12.65 in 2011);
- ◆ hallucinogens 0.86% (1.02 in 2011).

Increase in the use of cannabis and stimulants (amphetamine-ecstasy)



THE DIANOVA TREATMENT MODEL

Dianova's intervention model is based on an holistic, biopsychosocial approach to addiction treatment, involving the person as a whole.

- Therapeutic communities
- Multidisciplinary teams
- Individualized educational & therapeutic programs

The Dianova model is based on the conviction that, with appropriate support, each person will be able to find within him/herself the resources necessary to achieve self-reliance



PEOPLE ADMITTED TO DIANOVA PROGRAMS

- Men & Women
- Seniors
- People with drugs and alcohol problems
- People with illnesses and health problems caused by substance abuse (HIV, HCV, etc.)
- People in trouble with the law (alternatives to imprisonment)



C

PROGRAMS

PROGRAM SPECIFICS

- Prior medical assessment/diagnosis
- Improved access and reduced waiting times
- Educational and therapeutic approach
- Involvement of family members
- Networking



THE PERSONNEL OF DIANOVA

101 Persons



Men 61

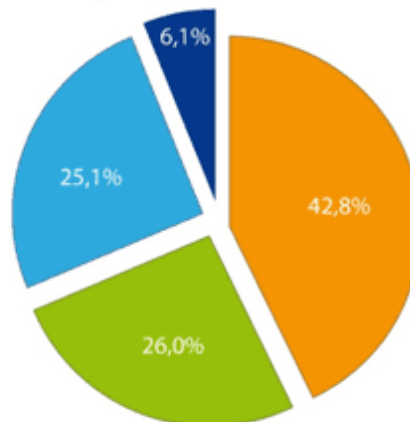


Women 40

- Educators,
- Psychotherapists,
- Psychiatrists,
- Nurses,
- Specialist in psychiatric rehabilitation
- Clinical educator
- Resident physicians
- TC workers
- TC leaders

2011 ADMISSION PROFILE

Heroin: 155
Cocaine: 94
Alcohol: 91
Other substances: 22



Over 70% of residents present mental health conditions

Characteristics of users by primary substance of use

		alcohol	cocaine	heroin	other substances
Total Number		91 (24.1% of total)	94 (26% of total)	155 (42.8% of total)	22 (6.1% of total)
Average age		43	38	37	33
Gender	F	14.3%	11.7%	7.7%	4.5%
	M	85.7	88.3%	92.3%	95.5%
Marital status (Most frequent)		48.4% single	58.5% single	69% single	72.7% single
Work situation (Most frequent)		76.9% unemployed	75.5% unemployed	74.2% unemployed	86.4% unemployed
Housing situation (Most frequent)		37.4% with parents	43.6% with parents	42.6% with parents	45.5% with parents
Judicial situation (Most frequent)		91.2% No record	68.1% No record	73.5% No record	72.7% No record
Prior medical condition (Most frequent)		51.6% None	38.3% None	47.1% HCV+	68.2% None
Education level (Most frequent)		41.8% Middle school	63.8% Middle school	61.9% Middle school	50% Middle school

SATISFACTION SURVEY

Once a year Dianova Italy performs a client satisfaction survey to measure and improve program quality.

USER SATISFACTION SURVEY (135 questionnaires)

Areas investigated	Very satisfied	Somewhat satisfied	Somewhat dissatisfied	No answer
Intake	39.3%	41.8%	11.1%	7.8%
Treatment	46%	35.6%	17.1%	1.3%
Facility	39.8%	37.4%	20.4%	2.4%

LEVEL OF IMPORTANCE ATTRIBUTED TO SPECIFIC ASPECTS OF SERVICE (135 questionnaires)

	Very satisfied	Somewhat satisfied	Somewhat dissatisfied	No answer
Quality of counselling services	74.8%	17.8%	3.7%	3.7%
Participation of family members in program	63.0%	18.5%	14.8%	3.7%
Facilities (building, furniture, spaces)	65.9%	28.1%	4.5%	1.5%
Quantity and quality of leisure activities	59.3%	30.4%	8.8%	1.5%
Shared decision-making on one's program	88.1%	6.7%	3.7%	1.5%
Quantity and quality of available activities	68.1%	25.2%	5.2%	1.5%

DATA COLLECTION ON THE PROVISION OF SERVICES BY DIANOVA IN 2011

Flows between programs & services - from Jan. 1 to Dec. 31, 2011

	Multi-addiction & Alcohol program	Early Admission	Educational rehab services	Therapeutic rehab services	Total
Number of users by admission type	23	122	124	93	362
Referral by multi-addiction and alcohol specialist	-	-	9	-	9
Referral by early admission services	6	9	53	6	74
Referral by educational rehabilitation services	10	6	8	3	27
Referral by therapeutic rehabilitation services	-	-	1	3	4
	39	137	195	105	476

Programs & Services

	Provision of services in 2011	%
Specialized program for multi-addictions and alcohol	39	8,2%
Early admission	137	28,8%
Educational rehab services	195	41,0%
Therapeutic rehabilitation services	105	22,0%
Total	476	100,0%

MOTIVES FOR DISMISSAL FROM DIANOVA SERVICES & PROGRAMS – 2011 DATA

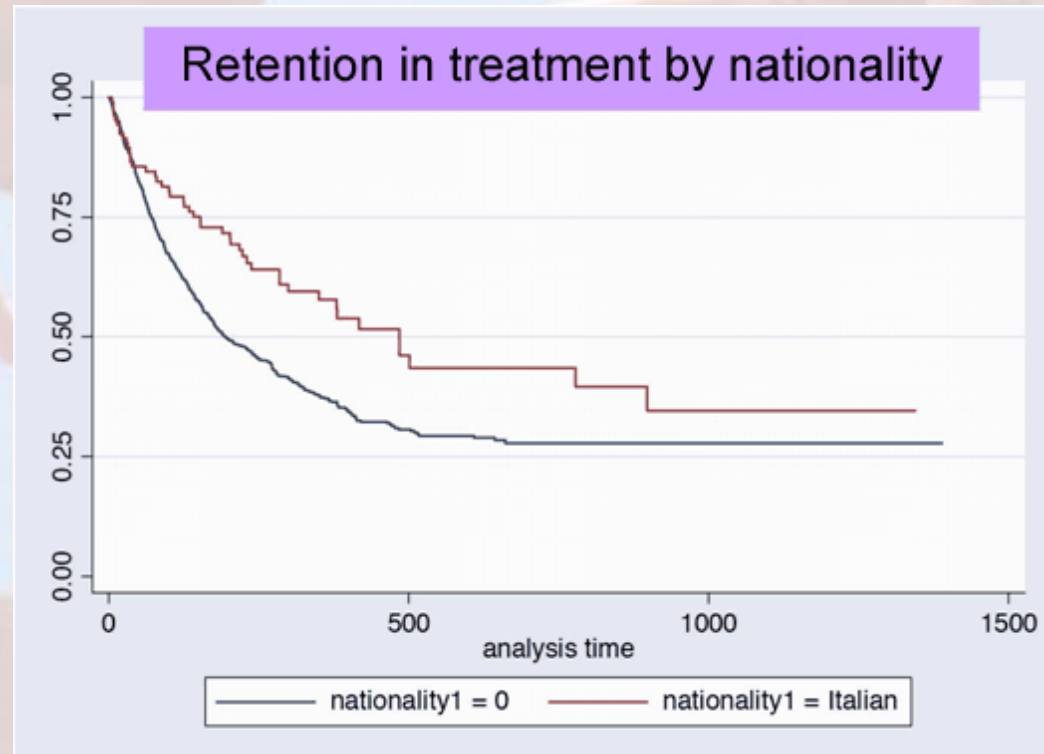
Reasons for discharge from Dianova TCs by service/program

Reasons for discharge	Program for multi addictions & alcohol (18 months)	Intake phase (duration 3 months)	Educational rehabilitation (from 18 to 36 months)	Therapeutic rehabilitation (duration 18 months)	Total
Completion of program	13 (33,4%)	68 (49,6%)	48 (24,6%)	18 (17,1%)	147 (30,9%)
Discharged to other facility/prog	1 (2,6%)	8 (5,8%) incl. 2 discharged to prison	14 (7,2%) incl. 1 discharged to prison	4 (3,8%) incl. 2 discharged to prison	27 (5,6%)
Dismissal from TC for serious violations of house rules	4 (10,2%)	1 (0,8%)	6 (3,1%)	-	11 (2,3%)
Program not completed	4 (10,2%)	34 (24,9%) incl. 3 in mutual agreement	58 (29,8%) incl. 7 in mutual agreement	28 (26,7%) incl. 1 in mutual agreement	124 (26,1%)
Program uncompleted end of 2011	17 (43,6%)	26 (18,9%)	69 (35,3%)	55 (52,4%)	167 (35,1%)
	39	137	195	105	476

Average duration of program/service

Reasons for discharge	Specialized program	Intake phase	Educational rehab.	Therapeutic rehab
Program completion	16,5	2,8	16,6	19,1
Volunteer dismissal or upon prior agreement	5,1	1,3	4,7	6,8
Still undergoing treatment by the end of 2011	7,7	2,4	14,2	9,3

TREATMENT RETENTION





PROGRAM COSTS

EDUCATIONAL PROGRAMS:

€100.00 PER DAY

SPECIALIZED PROGRAMS:

€150.00 PER DAY

COST/BENEFIT OF TREATMENT

French, M.T., Sacks, S., De Leon, G., Staines, G., and Mckendrick, K. Modified therapeutic community for mentally ill chemical abusers: Outcomes and costs. *Evaluation & the Health Professions* 22(1):60-85, 1999

- Incremental benefit of Modified TV Treatment: \$273,115
- Cost Per client of modified TC treatment: \$20,361 (annual)
- Total net benefit per client $\$273,115 - \$20,361 = \$252,114$
- Benefit Cost Ratio $\$252,114 / \$20,361 =$

\$5 benefit for every \$1 of cost

(13:1 data winsorized 5:1)

Thank you!

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