INTRODUCTION

Among the sustainable development goals listed from the World Health Organization, the consideration of substance abuse as a target for improved prevention and treatment strategies is evident.

According to data from 2013, the number of reported individuals as problem users has held steady at 27 million since 2008; further, illicit drug use increased 10% between 2006 and 2013 to 246 million individuals. In comparison to the global rate, in Mexico the increase was 57%2. With this in mind, we propose that considering methods for substance abuse reduction that target drug use disorders could have an amplifying effect on reducing substance abuse rates. Our study will survey participants’ perceived and experienced barriers to treatment, motivations for seeking treatment, and treatment progress. By focusing on the population along the U.S.-Mexico border, we will target a population more at risk for substance abuse as a result of socioeconomic and cultural factors related to location3, 4.

Considering the pillars of public health of prevention, treatment, harm reduction and public safety makes substance abuse a valid concern for public health officials.

METHODS

Consenting participants will be selected from existing private treatment centers, called anexos, and government-funded centers in Tijuana and Chihuahua, Mexico and El Paso, Texas, Chula Vista, California, and San Diego, California.

We anticipate developing figures that illustrate the role of predictive factors in designing treatment programs, particularly along the U.S.-Mexico border, and intend to use this information to inform regulation policies and public education initiatives in Mexico.

Transtheoretical Model5. The transtheoretical model, also known as the stages of change, can help curate a targeted intervention for Mexico’s substance abuse patients.

SURVEY

Instructions (abbreviated)

The purpose of this survey is to understand cultural factors in seeking substance abuse treatment in order to measure how effectively treatment centers are providing services. We will use this information to improve regulation of the treatment centers and the information provided to the public.

The questions will focus on your motivations for change and effectiveness of the services you experienced.

These instructions and questions will be available to the consenting participants in Spanish and English and provided according to their language preferences.

Sample Survey Questions

1. How many times have you sought treatment in a center?
2. What type of treatment center did you enter each time? (i.e. private, anexo, government-funded, hospital-based)
3. Did you make the decision(s), personally, to enter treatment?
4. What methods or services have you most benefited from at this center?
5. Have you ever left treatment early? If so, why?

Theoretical framework with physical and social structure contribute to the risk environment6.

Normalization and Cross-Border Access

Consideration for risk and protective factors on both sides of the border.

INTERNATIONAL RESEARCH AND CONSENT

WSU IRB requires international research to provide potential participants with study materials and consent information in a language familiar to the participant.

Further, the research team should have at least two individuals fluent in English and Spanish to follow regulations. WSU IRB requires the consent form to be signed by several individuals when the participant(s) is a/are non-English speaker(s): the potential participant, the translator, and a witness fluent in both languages who is not the translator.

Below is a sample of the approved short form in Spanish.

REFERENCES

1. World Health Organization (WHO). Health in 2015: From MDGs to SDGs, Mental Health and Substance Abuse. Published 2014 Jul 30.