

## Gesundheit Osterreich \$\mathbb{H}\$ GmhH



## International Case Study: Austria's health-led approach

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#### First Addiction Clinic in Austria

**1956** Non-Profit Foundation: "Special Clinic for Alcoholics" 65 patients – primarily male





- Founded and directed by established psychiatrists
- The board consists of federal ministries, federal state administrations health insurance, labour union, catholic social foundation, etc.
- Research obligation Boltzmann Institute for Addiction Research
- Totally covered by the government regulated health insurance system

# Inpatient drug treatment, start of a women department more inpatient clinics

- 1974 Department for female alcoholics in Kalksburg1976 first similar institution evolved in other state
- ... more and more addiction clinics
- ... more and more addiction counselling centres

- Strictly inpatient and abstinence-oriented (alcohol 6 8 weeks)
- Inpatient beds created as needed
- Outpatient treatment primarily for admission management and follow-up care
- Regional counselling centres evolved regionally (publicly funded)

### Drug treatment started

**1972** Foundation of longterm **inpatient drug clinic** (1 year treatment)

- Different staff than alcohol units social workers with different attitude
- also strictly inpatient and abstinence-oriented (drugs 1 year)
- Inpatient beds created as needed
- specific outpatient treatment primarily for admission management and follow-up care
- specific regional counselling centres evolved (publicly funded)

#### Slogan "Treatment instead of punishment"

**1971** new narcotics act says "Treatment instead of punishment"

- Problem: Persons not needing treatment are being pseudo-treated.
- Absurdly low quantities of drugs interpreted as "crimes against public health"
- "Treatment instead of punishment" even for crimes to finance drug use
- Changes: Stepwise from very restricted towards almost depenalisation of use.

#### **Opioid Substitution**

**1987** first time legal substitution after a court case was won resp. lost

- Shortly before 2/3 of addiction treatment staff were against substitution
- Shortly after 2/3 of addiction treatment staff in favour of substitution
- 1992 5-years evaluation of substitution approach
- Stepwise from very restricted to include everybody
- Initially open end but abstinence offer if realistic
- Problem: old GPs and psychiatrists not being replaced
- Problem: old substituted patients (private and in retirement homes)

# Delphi-Study as basis for addiction prevention strategy (2013)





#### **Delphi-Studie**

zur Vorbereitung einer "nationalen Suchtpräventionsstrategie mit besonderem Augenmerk auf die Gefährdung von Kindern und Jugendlichen"





The idea is to get almost everybody into the boat → consensus of experts

#### Harm Reduction became mainstream

- Aim: As few problems as possible for addicts and environment
- Street work, drop-in centres, acceptance-oriented treatment, syringe exchange, etc. became state of the art
- Important to cooperate with police on local level

# Trend towards Integrated addiction treatment

- An addiction co-ordinator per state with funding power
- A federal drug commission including all addiction co-ordinators, courts (ministry of justice) and police (home office)
- One central institution for screening and treatment allocation per state (problem in rural areas)
- Liaison services connecting all parties
- Divergent approaches considering needs and capabilities of clients
- More outpatient treatment funded by insurance
- Stepped care
- Integrating social work: housing first, finding (parttime) jobs, etc.