

# **Accessibility of drug users to the public health system. The perspective of health workers in Buenos Aires and Rosario, Argentina.**

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## **Harm Reduction 2008**

### **IHRA'S 19th International Conference**

**May 11-15 2008. Barcelona.**

#### **Accessibility of drug users to the public health system. The perspective of health workers in Buenos Aires and Rosario, Argentina.**

Topic. 8. Harm reduction in the context of social inclusion, access to and quality of health systems, and poverty alleviation.

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- Project: "Accessibility of drug users to public health services in the cities of Buenos Aires and Rosario. The perspective of health workers." Third Phase of the Regional Project on HIV/AIDS and Drug Use in the Countries of the Southern Cone: "Strengthen the municipal program on drug abuse and HIV/AIDS prevention in the countries of the Southern Cone." Project RLA/04/H78-RLA/H82. ONUDD.
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## **Research Abstract**

### **Objectives:**

To analyze the accessibility of drug users to public health services in the Argentinean cities of Buenos Aires and Rosario. Searching for the best understanding of the minimal relation of drug users with health care services, this study started with the analysis of the practices and social representations of drug use among health workers that assist this population.

### **Methods**

This study had a qualitative approach. An interview with open and closed questions was used with 129 health care workers in both cities pertaining to the services of the public health sector of the municipal environment. We reached a representative sample of workers directly connected to drug users. Fieldwork was carried out between the months of October and December of 2006. The international ethical principles of equality, voluntary participation, anonymity, and confidentiality were followed.

### **Study Results**

The most mentioned barriers to access were cultural, referred to as a type of "way of life" of drug users related not to a concern for their health or an oversight of scheduled appointments. In some attributed cases, the problem related to the effects of their drug consumption (35.7%) and not others (61%). They also mentioned problems with the

organization of health and treatment services (56.8%) such as: bureaucracy, inadequate schedules, long waiting periods, and problems in the patient-health worker relationship. They presented two types of contradictory proposals of political management of the programs directed to drug users: to create and/strengthen centers and professional specialities (36.7%) and interdisciplinary community interventions (37.5%).

### **Conclusions**

We observed a tendency of health workers to hierarchize the cultural barriers to health care access in the case of drug users.

The proposals of political management show the tension between policies centered around professional specialization and institutionalization and those that promote an interdisciplinary paradigm with community interventions.