

Session 5

Positive Futures

Positive Futures is an example of an outreach program for vulnerable young people aged 10-19 widely replicated in the United Kingdom.

The programme uses sport and other leisure activities to engage with marginalized young people, develop their self esteem and offer them informal education around drug issues.

Organizers of the programme emphasize the need for a flexible approach within a non-hierarchical organizational structure. The importance of the ability of project staff to develop relationships with the participants through their strong knowledge of local culture has also been emphasized. Finally, it

has been important to provide a broad range of choice of activities to offer to the young people and work seriously on their aspirations for the future.

There is evidence that participating young people improve their social skills, their performance at school and their ability to secure work.

Source:

Website of the United Kingdom Home Office,
<http://www.drugs.gov.uk/young-people/positive-futures/>

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Nurse Home

Visitation Program

The Nurse Home Visitation Program in the United States aimed to promote the well-being of first time low-income mothers and their children.

Specifically, the program aimed to:

(a) help the mother improve her own health by reducing smoking, and alcohol and drug use, (b) improve the child's health and development by teaching parents how to provide better care, and (c) improve families' economic self-sufficiency by helping parents plan for future pregnancies, further their education, and secure employment.

Program components are provided through to the child's second birthday and include home visits by trained nurses, which begin during pregnancy; referrals to community resources; and helping the mother develop her own family resources for the care of her child.

A study followed up children of these mothers and found they were less likely to be arrested or charged with crimes, less likely to smoke, drink alcohol or use other drugs.

Source:

UNODC (in print), Preventing Amphetamine Type Stimulant (ATS) Use Among Young People - A Good Practices Guide for Practitioners

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Clubs Against Drugs

Clubs Against drugs was initiated to reduce the recreational drug use at bars/ nightclubs/ restaurants in Stockholm, Sweden.

The project focused on a group of very trendy and popular venues. An action group representing the Licensing Board, the Police Authority, the National Institute of Health, the County Administration, the Organization of Restaurant Owners, the Trade Union and leading venues has been mobilized and meet regularly.

The intervention strategy was to decrease the availability of drugs and opportunities to use drugs via changes in the physical

environment, introduction of drug policies and training of staff. In particular:

1. A two day drug training program for security staff focusing on how to recognize drug impaired guests, how to intervene appropriately and to motivate staff to be more active against recreational drug use. The training program was developed together with the Police Authority and the Police Academy.
2. Written policy documents were developed, displayed and implemented at the high-risk premises.
3. An evaluation of the physical environment and the in house policy work were initiated at all the nightclubs. A specific checklist was used and the

result was discussed in order to focus on possible improvements.

4. A PR campaign was conducted in Spring 2003. Selected role models such as owners and staff were ambassadors for "Clubs Against Drugs". A website was also launched.

Source:

Website of the project "Stockholm Prevents Alcohol and Drug Problems (STAD)", <http://www.stad.org/projektet/eng/index.html>

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Drug Abuse

Prevention Coalition

DAPC is a coalition of 25 local organisations established more than 15 years ago in a very poor suburb of a big town in Southeast Asia. In the country, the most common illegal drug is methamphetamine, called 'shabu', but many children also sniff glue, called 'rugby'. For many years now, DAPC has been involved in preventing drug abuse among its youth. DAPC has:

1. Launched a campaign to raise awareness and funds, including marches through the communities, running competitions, concerts, printing of posters, T-shirts and leaflets, handing out of poster and leaflets

- house-to-house with an informal 5 minute talk to explain about the danger of drugs;
2. Trained some 30 youth to become leaders in 7 areas: by now, DAPC has a youth federation including 14 youth clubs, organising recreation activities, both outdoor (basketball, volleyball, badminton) and indoor (chess, scrabble, table tennis).
 3. Organised a 'back to school' programme: youth leaders and teachers from the day centres talk to parents and organise tutorials in math, science and language to help the children;
 4. Organised activities to provide young people and/or their families with the opportunity to earn a living and also tapped the Social Welfare Fund of the central government to provide young

- people with the possibility to attend vocational schools;
5. Worked with families on drug abuse prevention: training on parenting skills, family therapy and counselling sessions and family based activities (such as sports competitions).
 6. Worked with local authorities to make it illegal to sell glue to children; youth talk to the owners of the stores to convince them about abiding to the ban.

Source:

This example is fictitious but based on real life experiences.

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Back to school!

"Back to school!" is a short (10 sessions of 1 hour each over a school year) curriculum administered by teachers to 13-14 year old youth to delay the initiation of tobacco, alcohol and drug abuse. Teaching is interactive and based on the development of personal and social skills.

Topics covered:

1. What influences people to use substances?
2. Information about tobacco, alcohol, drugs.
3. Critical thinking and beliefs about prevalence of substance use among youth.
4. Being in a group and asserting yourself.
5. Expressing and presenting yourself and giving positive feedback.

6. Coping, making decisions, solving problems, setting goals.

The curriculum was developed by a consortium of researchers and based on best practice (only rigorously evaluated programmes were taken into consideration).

"Back to school!" has been implemented in 8 different locations and in each has undergone a rigorous evaluation.

Prior to the implementation, schools were selected randomly to be surveyed through an anonymous self-administered questionnaire. The questionnaire used various evaluation instruments that were already validated and was tested. The same questionnaire was used after implementation and one year after. Moreover, teachers were required to carefully record attendance to the sessions

and how they went. Sometimes, a representative from the organisers would also monitor the sessions. The data from the first post-assessment have been just analysed and they are showing promising results.

Source

This example is fictitious, but based on real life experiences.