

Good Practice #3:

Seek comprehensiveness

Research indicates that comprehensive programs (i.e., those involving multiple components and domains) are much more likely to be effective than single-focused activities. Because of the range of factors that can contribute to substance use problems, it is important that communities or programs identify and address relevant factors through a number of activities that are well coordinated. Families and schools are critically important domains in youth substance use problem prevention. There is still greater promise when their efforts are complemented by others at the community level, including the media, youth agencies, sports and arts groups, communities of faith and municipal governments.

Community coalitions or other planning bodies need to consider a range of complementary policies and services targeting youth. The coordination of different interventions can be accomplished in a number of settings or within a single organization or agency. For example, schools can combine classroom instruction, peer helper programs, parent education, school policies and mentoring for at-risk students. Municipalities can coordinate recreation programs, community policing and neighbourhood support programs. Joint planning in community coalitions will avoid duplication of services and increase the resources that can be brought to an initiative.

Comprehensiveness also means giving attention to organizational policies (e.g., school board or youth agency) to ensure they reinforce program aims.^{1 2} A recent review did not find evidence of added effect from policies intended to influence the environment (many of the studies reviewed did not attempt to separate out the contribution of the different elements, such as media, and parent training, to a positive effect).³ However, the current consensus of experts is that policies need to reinforce programming. At the broader level, legal and regulatory measures (e.g., price increases, server training programs that give attention to underage drinkers, enforcement of minimum purchase age laws) need to be considered as they have demonstrated reductions in youthful alcohol-related harm.⁴

Comprehensiveness challenges programmers to see their prevention initiatives as contributing to a series of interventions that present developmentally appropriate messages throughout childhood and adolescence. For example, school prevention efforts need to be ongoing from Kindergarten to Secondary School, allowing messages to be repeated and reinforced. Comprehensiveness in a community also means ensuring that the various parts of the youth population—from lower risk to higher risk—are being served.

Programs for higher risk youth may be situated in multi-service centers or other settings, such as emergency wards in hospitals, health clinics (e.g., for expectant adolescent women), in shopping malls and on the street. Police and the courts have an important opportunity to intervene and divert young people to prevention or treatment programs in the community. A comprehensive approach to programming for higher risk youth may call for the attention and collaboration of some who haven't traditionally played a role in preventing substance use problems, such as urban planners, housing authorities, shopping mall management and employment policy makers.⁵

Street youth indicate that they have important basic needs. Food and stable housing are basic requirements for getting off the street; job training, educational upgrading and personal counselling are also important.^{6 7} The needs of youth involved with injection drug use may be greater still.⁸ Young injection drug users are often involved in multiple

use may be greater still.⁸ Young injection drug users are often involved in multiple drug use, with their daily activities revolving around the acquisition and use of drugs. Involvement in illegal activities is often a means of meeting the financial demands of their drug use, often to the detriment of basic subsistence needs. These realities necessitate a comprehensive prevention and harm reduction approach that gives attention to the environment in which unsafe behaviour occurs, and to the provision of basic needs.

At a broader level, the protective and risk factors associated with substance use problems may also be factors with other problem behaviours. For example, in some communities, poverty, particularly if associated with a dysfunctional lifestyle, has been shown to be a risk factor for not only substance use problems, but also pregnancy and violence among young people. Similarly, difficulties in school are associated with a number of social problems among youth, including substance use problems.^{9 10} Prevention efforts that address broad risk factors have the opportunity to support and integrate with other strategies that aim to improve the lives of people and communities.¹¹ On this basis, a substance use problem prevention plan or strategy might be embedded within a larger crime prevention, safety or health promotion initiative.

Source:

G. Roberts, et al., (2001). Preventing Substance Use Problems: A Compendium of Best Practices. Health Canada.

¹ Allensworth, D The research base for innovative practices in school health education at the secondary level. Journal of school health Vol 64, No. 5, 1994.

² Room, R and Paglia, A Preventing substance-use problems among youth: A literature review and recommendations. Addiction Research Foundation, 1998.

³ Flay, B Approaches to substance use prevention utilizing school curriculum plus social environment change. Addictive behaviors. Vol 25. #6, 2000.

⁴ Room, R and Paglia, A Preventing substance-use problems among youth: A literature review and recommendations. Addiction Research Foundation, 1998.

⁵ Advisory Council on the Misuse of Drugs Drugs Misuse and the Environment, London: The Stationery Office, 1998.

⁶ Anderson, J. A Study of Out-of-the-Mainstream Youth in Halifax, Nova Scotia. Ottawa: Minister of Supply and Services, 1993.

⁷ Smart, R.G., Adlaf, E.M., Walsh, G.W. et al. Drifting and Doing: Changes in Drug Use Among Toronto Street Youth, 1990-1992. Toronto: Addiction Research Foundation., 1992.

⁸ Martinez, T., Gleghorn, A., Marx, R. et al. Psychosocial histories, social environment, and HIV risk behaviors of injection and non-injection drug using homeless youths. Journal of Psychoactive Drugs, 30, 1998.

⁹ Brounstein, P.; Zweig, J. Understanding substance abuse prevention: toward the 21st century: a primer on effective programs. Rockville, MD: U.S. Department of Health and Human Services, 1999.

¹⁰ Eggert, L.L. and Herting, J.R. Drug involvement among potential dropouts and "typical" youth, Journal of Drug Education, 23 (1), 31-55. , 1993.

¹¹ Seivewright, N., Combined risk factors for drug misuse must be recognized. In Comments on drug misuse and the environment: a recent British report, Addiction 94 (9), p. 1301, 1999.