

Structured Questionnaire 26

SELECTIVE PREVENTION - Version 1/2013



1. - Methodological information

1.1. - Introduction

Justification

Prevention is a priority in most Member States' drug strategies and most member states have an interest in improving their own monitoring and assessment of prevention policies. Selective prevention is for the future a promising and the most developing area of prevention. Its different features, growing availability and developments must be closely and flexibly monitored.

In the new EMCDDA regulation was introduced that "...the Centre shall be guided by the drugs Strategies and Action Plans adopted by the European Union." Under the EU Action Plan 2009-2012 Objective 6 "Prevent high risk behaviour of drug users - including injecting drug users - through targeted prevention", the action to be evaluated is Action 11 "To further develop early detection and intervention techniques and implement effective, evaluated selective prevention for vulnerable groups at high risk of developing drug problems, including injecting drug use".

The EMCDDA is requested in the Action Plan to provide information on availability of outcome-evaluated, targeted prevention programmes in member states. It has been operationalised as "availability of prevention programmes for specific targets and specific settings", including workplace. This includes selective family-based prevention.

Selective prevention serves specific sub-populations whose risk of a disorder is significantly higher than average, either imminently or over a lifetime. This responds to the growing importance of identifiable risk factors for understanding the initiation and progression of substance abuse, particularly among young people. A primary advantage of focusing on vulnerable populations is that they already exist and are clearly identifiable. In European prevention practice, more attention has been paid to those complementary prevention interventions that focus more selectively on special groups or also settings, for instance deprived neighbourhoods or recreational settings.

Beyond the Action Plan now in force, the Monitoring Centre and its partners have to dispose of a stable data set to respond to future and changing demands from the EU bodies and Member States, which most likely will always be about availability of interventions.

Objectives

to assess the national framework conditions for the implementation of selective prevention programmes and its underlying principles

to have a comparable yet qualitative insight on the availability of selective prevention programmes across Europe

to achieve an overview on policy importance of different types of interventions and general quality requirements

Definitions

Selective drug prevention: interventions that target subsets of the total population that are deemed to be at risk for substance misuse by virtue of their membership in a particular population segment, for example young offenders, school drop-outs, or students who are failing academically. Vulnerable groups may be identified on the basis of biological, psychological, social, or environmental risk factors known to be associated with substance abuse, and targeted subgroups may be defined by age, gender, family history, place of residence such as high drug-use or deprived neighbourhoods. Selective prevention targets the entire subgroup regardless of the degree of risk of any individual within the group and because the subgroup as a whole is at higher risk for substance abuse than the general population.

Interventions are herein identified activities which are person-to-person directed, i.e. not mass media campaigns, internet services, brochures and awareness-raising events.

Important notice for "expert ratings" questions:

Please be aware that you should be able to provide contacts of existing interventions if you provide "full and/or extensive" provision ratings. Moreover, it would be highly appreciated if you could name in the appropriate comment boxes an example of the most representative example of such intervention currently implemented in your country.

Contact person

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1.2. - Internal identification**1.2.1 - EMCDDA data collection year: *****1.3. - Report identification****1.3.1 - Country: *****1.3.2 - Year of data: *****1.3.3 - Name of the person submitting this structured questionnaire: *****1.3.4 - Institutional affiliation:****1.3.5 - E-mail address:****1.3.6 - Other experts involved in providing information for this structured questionnaire:**

2. - Community-based interventions: prevention for vulnerable groups**2.1. - Definitions**

Policy importance relates to the content of the written national drug strategy and/or action plan.

Provision refers to the general and geographical dispersion of interventions, a proxy for "availability".

Important notice for "expert ratings" questions:

Please be aware that you should be able to provide contacts of existing interventions if you provide "full and/or extensive" provision ratings. Moreover, it would be highly appreciated if you could name in the appropriate comment boxes an example of the most representative example of such intervention currently implemented in your country.

2.2. - Early school leavers**2.2.1 - Please, assess the importance of interventions for this target in the written drug policy of your country ***

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.2.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)

- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.2.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.2.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.2.5 - Comments

2.3. - Pupils with social, academic problems

2.3.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.3.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.3.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.3.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.3.5 - Comments

2.4. - Immigrants

2.4.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies

- Not explicitly mentioned in drug policies
- Not known

2.4.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.4.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.4.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.4.5 - Comments

2.5. - Ethnic groups**2.5.1 - Please, assess the importance of interventions for this target in the written drug policy of your country ***

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.5.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.5.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.5.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.5.5 - Comments

2.6. - Homeless youth

2.6.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.6.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.6.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.6.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.6.5 - Comments

"Von der Straße ins Leben" - Aufsuchende Hilfen für erwachsene Alkoholabhängige im öffentlichen Raum, Leipzig, Saxony

2.7. - Young offenders

2.7.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.7.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.7.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.7.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.7.5 - Comments

"In addition to continually improving programmes and services - especially in relation to new forms of addiction or new psychotropic substances - it is also necessary to create new, specialised forms of aid and programmes.

2.8. - Youth in care institutions (not prison)

2.8.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.8.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.8.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.8.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.8.5 - Comments

2.9. - Youth in socially disadvantaged neighbourhoods

2.9.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.9.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.9.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.9.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.9.5 - Comments

2.10. - Party / festival goers**2.10.1 - Please, assess the importance of interventions for this target in the written drug policy of your country ***

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.10.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.10.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

2.10.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.10.5 - Comments

2.11. - Other

2.11.1 - Who, please specify:

2.11.2 - Please, assess the importance of interventions for this target in the written drug policy of your country

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

2.11.3 - Please, assess the provision of interventions for this target in your country:

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

2.11.4 - Is this target mentioned in social policies?

- No Information
- Yes
- No

2.11.5 - Where is this target predominantly addressed?

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

2.11.6 - Comments

3. - Family-based interventions: prevention for vulnerable families

3.1. - Definitions and notes

Family-based prevention is identified as interventions related to drug-policies with the family unit or parents being the primary target of the response (i.e. not general social interventions targeting families without any drug prevention perspective).

Policy importance relates to the content of the written national drug strategy and/or action plan.

Provision refers to the general and geographical dispersion of interventions, a proxy for "availability".

Since already covered in other SQs (eg. SQ25, SQ27P1), please exclude here

- a) School-based prevention with family involvement
- b) Kindergarten-based prevention with family involvement
- c) Systemic treatment interventions with drug users' families if the predominant goals is treating the parents
- d) All universal prevention interventions i.e. interventions targeting families in general and not families at risk

Important notice for "expert ratings" questions:

Please be aware that you should be able to provide contacts of existing interventions if you provide "**full and/or extensive**" provision ratings. Moreover, it would be highly appreciated if you could name in the appropriate comment boxes an example of the most representative example of such intervention currently implemented in your country.

3.1.1 - In general, where do interventions with at-risk families (not only the first contact) take place? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

3.1.2 - Comments

3.2. - Substance abuse (including alcohol) in family (including siblings)

3.2.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

3.2.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

3.2.3 - Comments

3.3. - Socially disadvantaged parents (e.g. unemployed)

3.3.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

3.3.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

3.3.3 - Comments

"For every addictive substance or behaviour, the groups at greatest risk must be identified and addressed directly. (...) In order to ensure that children and adolescents have the necessary resources at their disposal, and are able to say no to tobacco, alcohol and drugs, measures to prevent addiction and promote health must

3.4. - Family conflict and neglect

3.4.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

3.4.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations

- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

3.4.3 - Comments

"High-risk groups include people who have had negative experiences, such as sexual abuse, neglect and violence during their childhoods, or with the addiction of one of their parents, which considerably increases the risk of later dependency. (...) Within the context of the work of the Nationales Zentrum Frühe Hilfen (National Centre for Early Assistance), which was established, in

3.5. - Criminal justice problems in family

3.5.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

3.5.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

3.5.3 - Comments

3.6. - Families with mental health problems

3.6.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

3.6.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

3.6.3 - Comments

3.7. - Ethnic families in marginalisation

3.7.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies

- Not explicitly mentioned in drug policies
- Not known

3.7.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

3.7.3 - Comments

3.8. - Other

3.8.1 - Who, please specify:

3.8.2 - Please, assess the importance of interventions for this target in the written drug policy of your country

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

3.8.3 - Please, assess the provision of interventions for this target in your country:

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

3.8.4 - Comments

4. - Geographical approaches

4.1. - Definitions

Some member states carry out **strategic risk assessment of certain neighbourhoods**, considering variables like drug use and availability, delinquency, housing, socio-economic and demographic situation. Areas regarded at risk receive accordingly additional funding and services.

Please assess provision, importance and methods used for geographical approaches.

Policy importance relates to the content of the written national drug strategy and/or action plan.

Provision refers to the general and geographical dispersion of interventions, a proxy for "availability".

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Please be aware that you should be able to provide contacts of existing interventions if you provide **"full and/or extensive"** provision ratings. Moreover, it would be highly appreciated if you could name in the appropriate comment boxes an example of the most representative example of such intervention currently implemented in your country.

4.1.1 - Please, assess the importance of interventions for this target in the written drug policy of your country *

- Priority in written drug policies
- Mentioned in written drug policies
- Not explicitly mentioned in drug policies
- Not known

4.1.2 - Please, assess the provision of interventions for this target in your country: *

- Full provision: exists in nearly all relevant locations
- Extensive provision: exists in a majority of relevant location (but not in nearly all of them)
- Limited provision: exists in more than a few relevant locations (but not in a majority of them)
- Rare provision: exists in just a few relevant locations
- No provision: doesn't exist
- No information available

4.1.3 - Is this target mentioned in social policies? *

- No Information
- Yes
- No

4.1.4 - Where is this target predominantly addressed? *

- At home or in the street (at family visits, e.g. by community nurses or social workers) "go-structures"
- At services or statutory bodies (when the target groups visit them) "come-structures"
- No information available

4.1.5 - Are risk factor models used to define priorities and areas for interventions (in order to attribute funds and services to geographical areas, e.g. neighbourhoods)? *

- No Information
- Yes
- No

4.1.6 - Which are the variables and the instruments to carry out these analyses? E.g. is poor housing, crime rates or high population density addressed? *

4.1.7 - Comments

5. - Prevention research

5.1. - Research

5.1.1 - Do specific research programmes or funds exist, which facilitate and promote selective prevention and evaluation research in your country? Please list references in order to assess the level of concrete financial support for evidence-based prevention and for evaluation studies.

5.2. - Institutions

5.2.1 - Which are the main centres for selective prevention and evaluation research (e.g.

universities, institutes, etc.)? Please list contact details etc.

IFT
Parzivalstraße 25
80804 Munich

6. - Final remarks and comments

6.1. - Additional information

6.1.1 - Should you want to add relevant information please use the following free text field:

Thank you for providing this information!