

Key to successful prevention strategies

Charli Eriksson

Professor in Public Health, Director National
Center for Child Health Promotion, Örebro
University

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Nationellt centrum för främjande
av god hälsa hos barn och ungdom

Swedish National Centre for child health promotion



Overall objective

- NCCF shall support and stimulate schools in their work with daily physical activity, healthy eating habits and other health promotion activities.



Knowledge for prevention

- Good intentions is not enough
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- Evidence-based interventions is needed
- Knowledge from controlled trials under optimal conditions
- Knowledge is possible from different kinds of practice-based evaluations
- Reflection over practical experiences

Bridging the Research-Practice-Policy Gaps

- We need:
- Knowledge about effective methods and tools
- Time and skilled personell
- Leadership and administrative support
- Shared language concerning concepts and tools

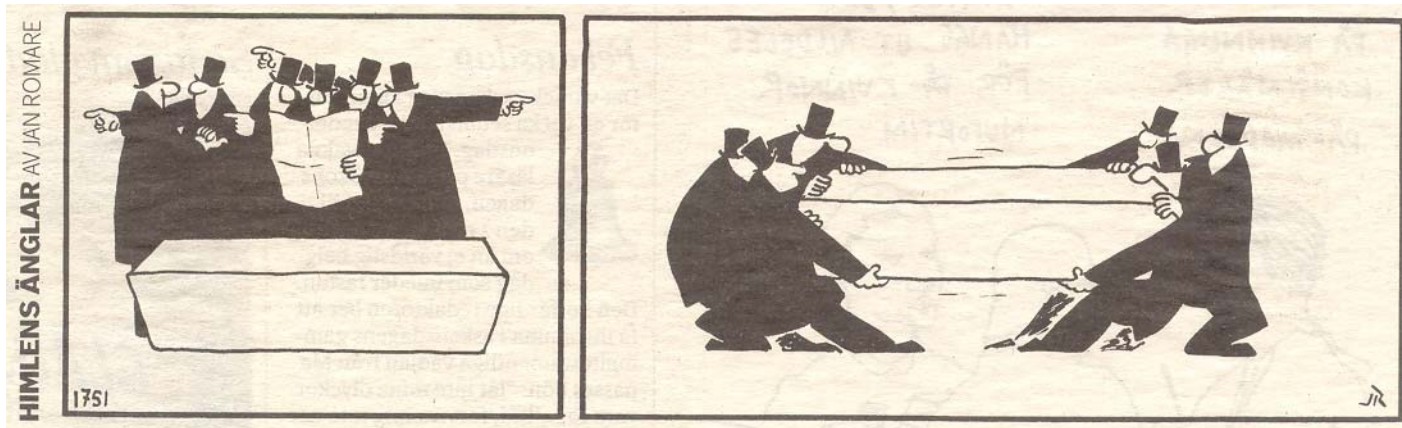


Challenged by the complexity of our dynamic reality

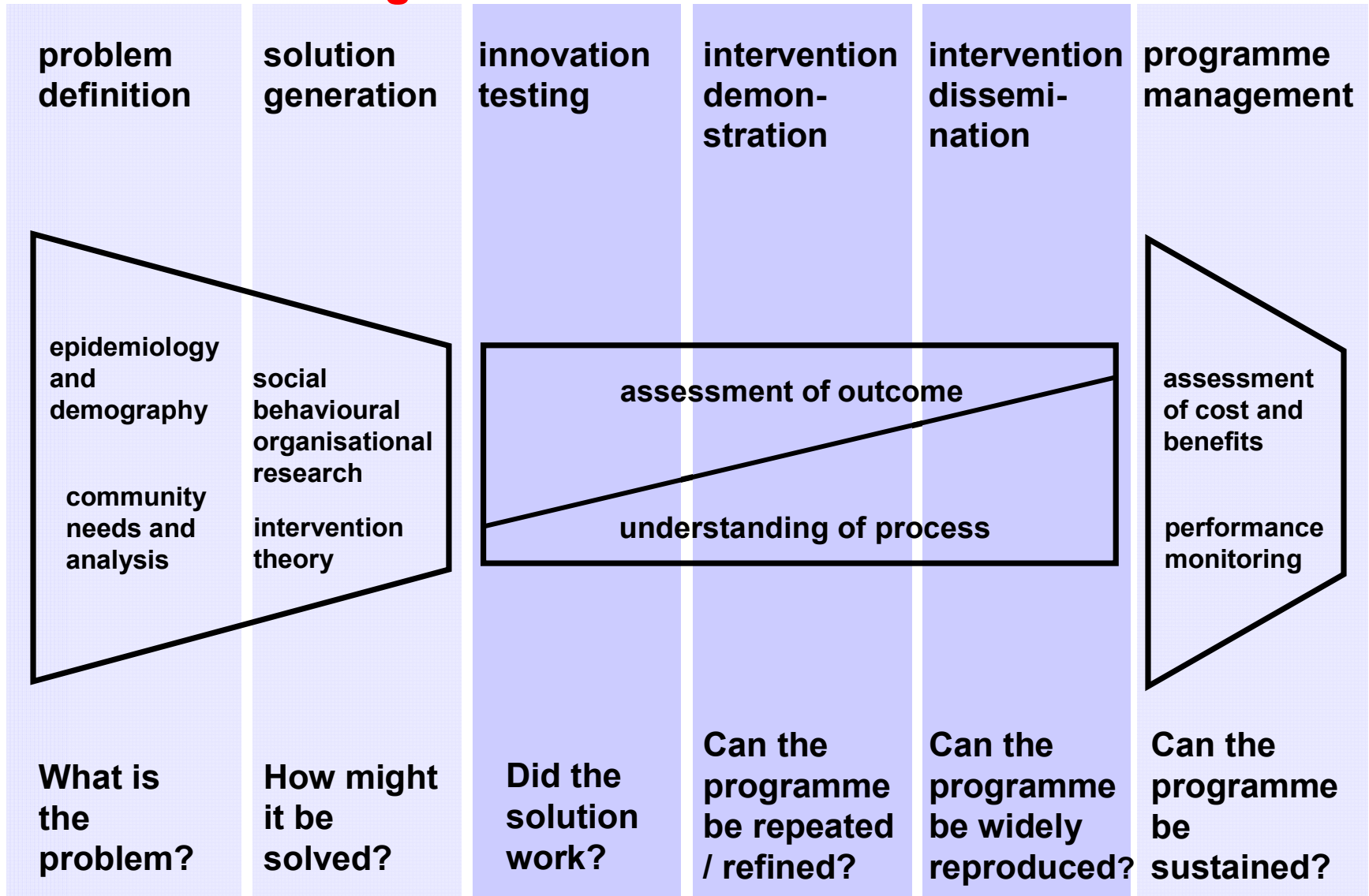
Actions to reduce drug-related harm

- Infrastructures, services:
- Legal system, administration, organizations, networks:
- Groups, communities, population
- Individuals
- Developing services
- Advocacy, Networking organization
- Social mobilization
- Development of individual skills

We need to make priorities



Stages of research and evaluation

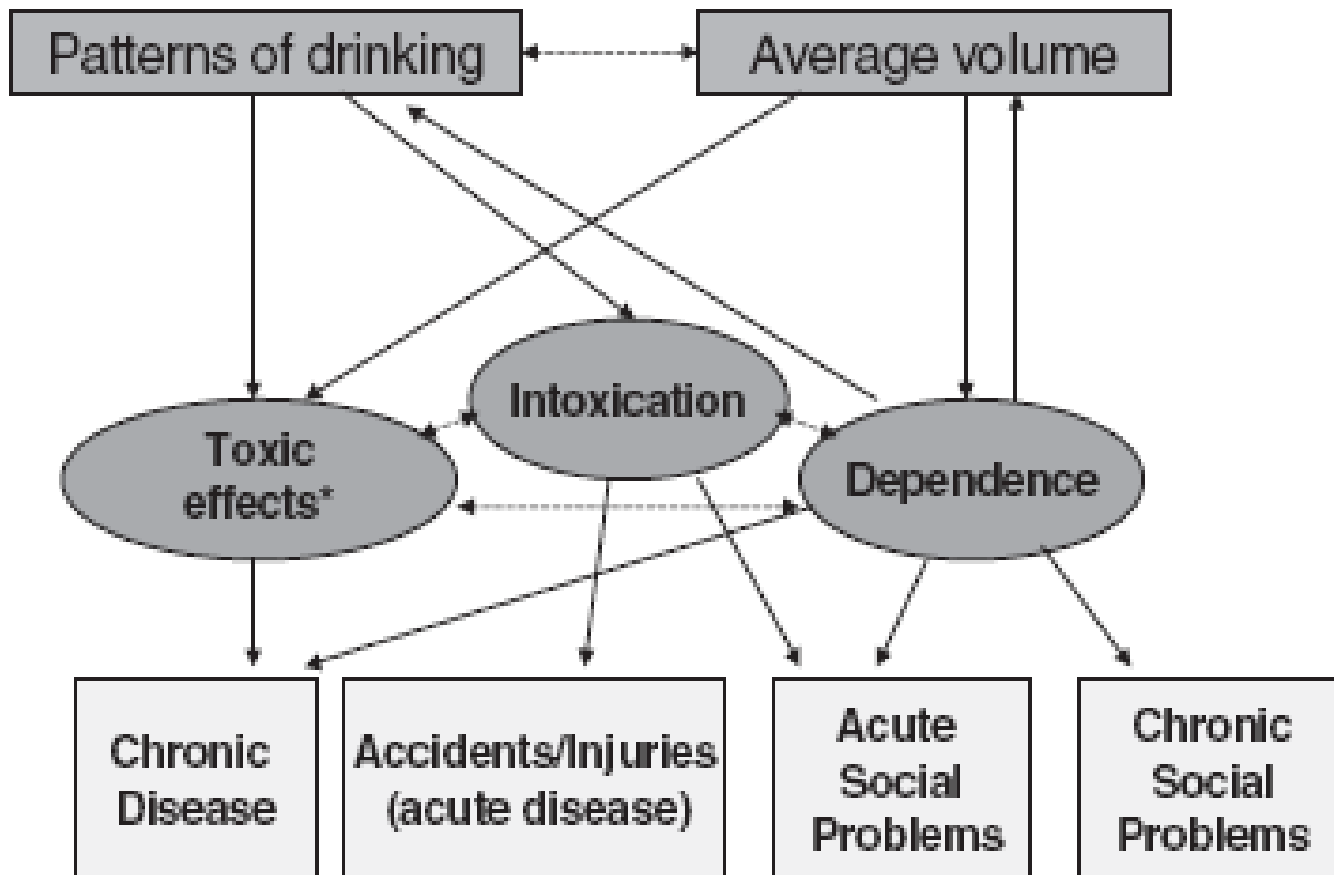


Key research questions

What is the Problem

- **Alcohol and Drug use and abuse**
- **Risk factors**
- **Alcohol is not an ordinary commodity**
- **Protective factors**
- **Drug-related Problems**

Alcohol is not an ordinary commodity



Risk and Protective Factors

Risk Factors

Early Aggressive behavior

Lack of Parental Supervision

Substance Abuse

Drug Availability

Poverty

Domain

Individual

Family

Peer

School

Community

Protective Factors

Impulse Control

Parental Monitoring

Academic Competence

Antidrug Use Policies

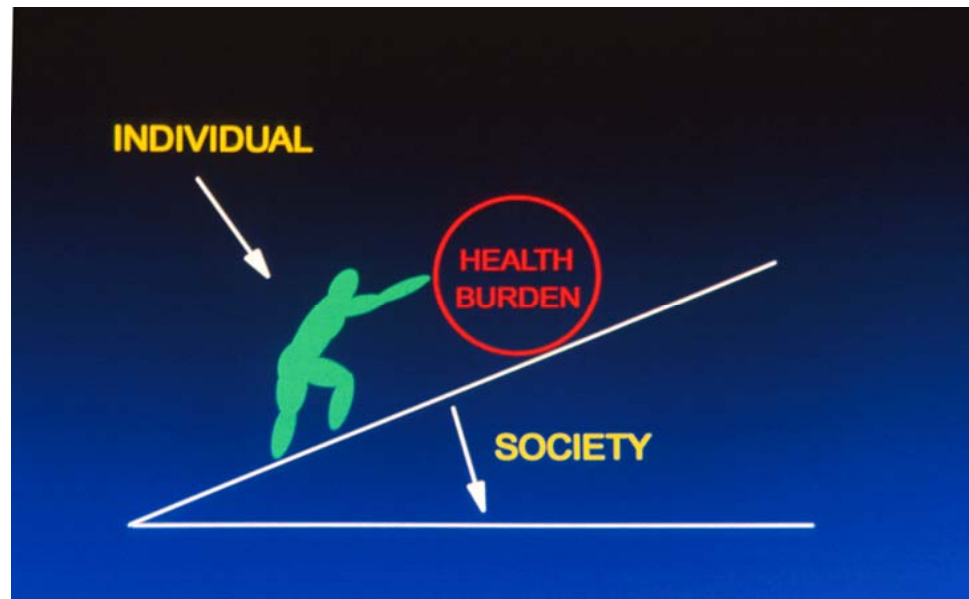
Strong Neighborhood Attachment

How might the problem be solved?

- Prevention planning
 - Family programs
 - School programs
 - Community programs
- Prevention program delivery

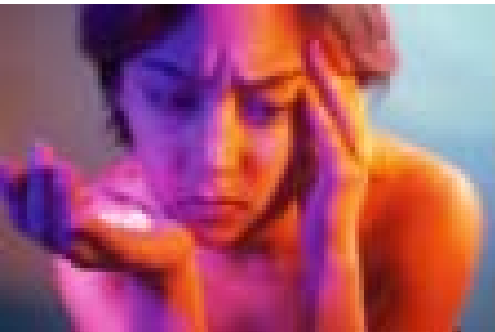
Prevention Principle 1

Prevention programs should **enhance protective factors** and reverse or **reduce risk factors**

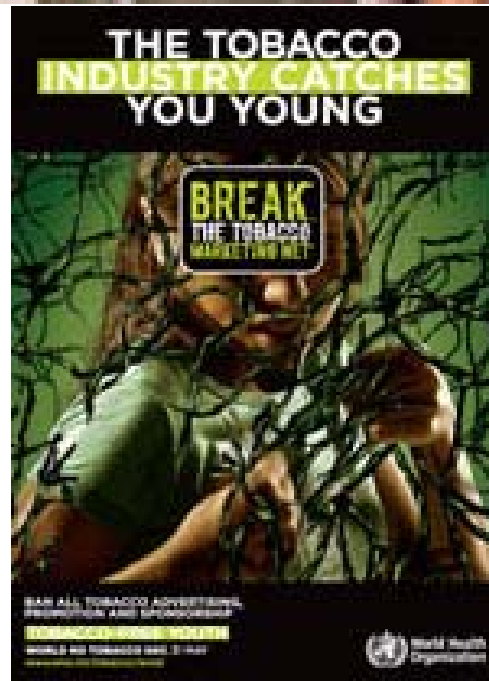


Prevention Principle 2

Prevention programs should address **all forms of drug use**, alone or in combination, including the underage use of legal drugs, and the inappropriate use of legally obtained medications, or over-the-counter drugs



Addiction



Legislation

Prevention Principle 3

Prevention programs should address the type of drug abuse problem in the **local community**, target modifiable risk factors and strengthen identified protective factors

Prevention Principle 4

Prevention programs should be to address risk factors **specific to population or audience characteristics**, such as age, gender, or ethnicity, to improve program effectiveness

Связь между установками родителей, привычками предлагать алкоголь и потреблением алкоголя среди молодежи

Процент тех кто пьет алкоголь	<u>Разрешают</u> пить алкоголь	<u>Не знают,</u> разрешено ли им пить	<u>Не разрешают</u> пить алкоголь	Всего
Не предлагали	53 % (19)	27 % (22)	5 % (393)	8 % (434)
Попробовал из чужого стакана	48 % (25)	43 % (14)	23 % (43)	34 % (82)
Давали пробовать	85 % (34)	44 % (18)	24 % (21)	58 % (73)
Всего	65 % (78)	37 % (54)	8 % (457)	18 % (589)

Prevention Principle 5

Family-based prevention programs should enhance

family bonding and **relationships**

including parenting skills; practices in developing, discussing, and enforcing family policies on substance abuse; and training in drug education and information.

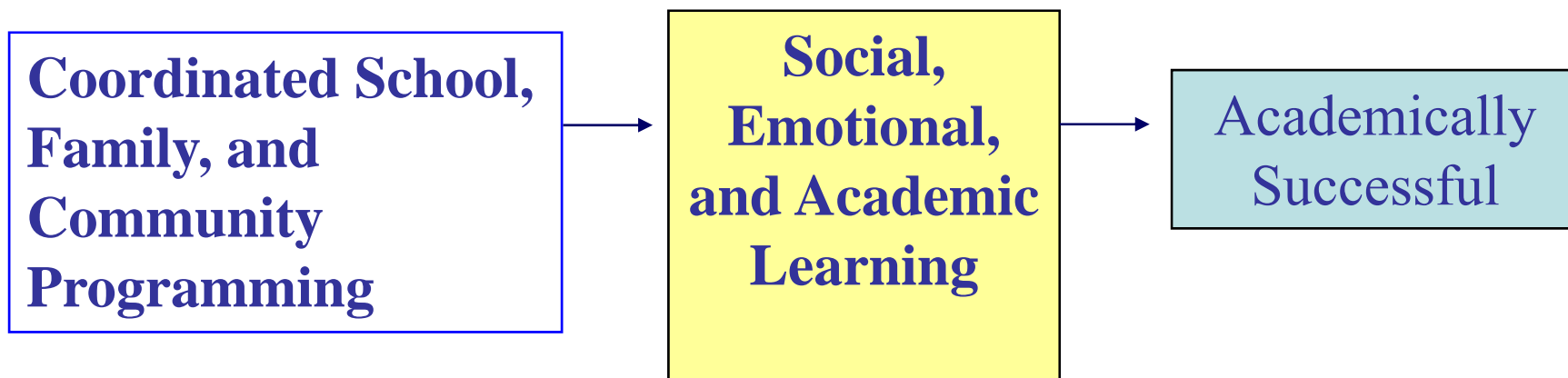
Prevention Principle 6

Prevention programs can be designed to intervene as early as **preschool** to address risk factors for drug abuse, such as aggressive behavior, poor social skills, and academic difficulties

Prevention Principle 7

Prevention programs for **elementary school** children should target improving academic and social learning to address risk factors for drug abuse, such as aggression, academic failure, and school dropout.

SEL Conceptual Framework for Academic Performance

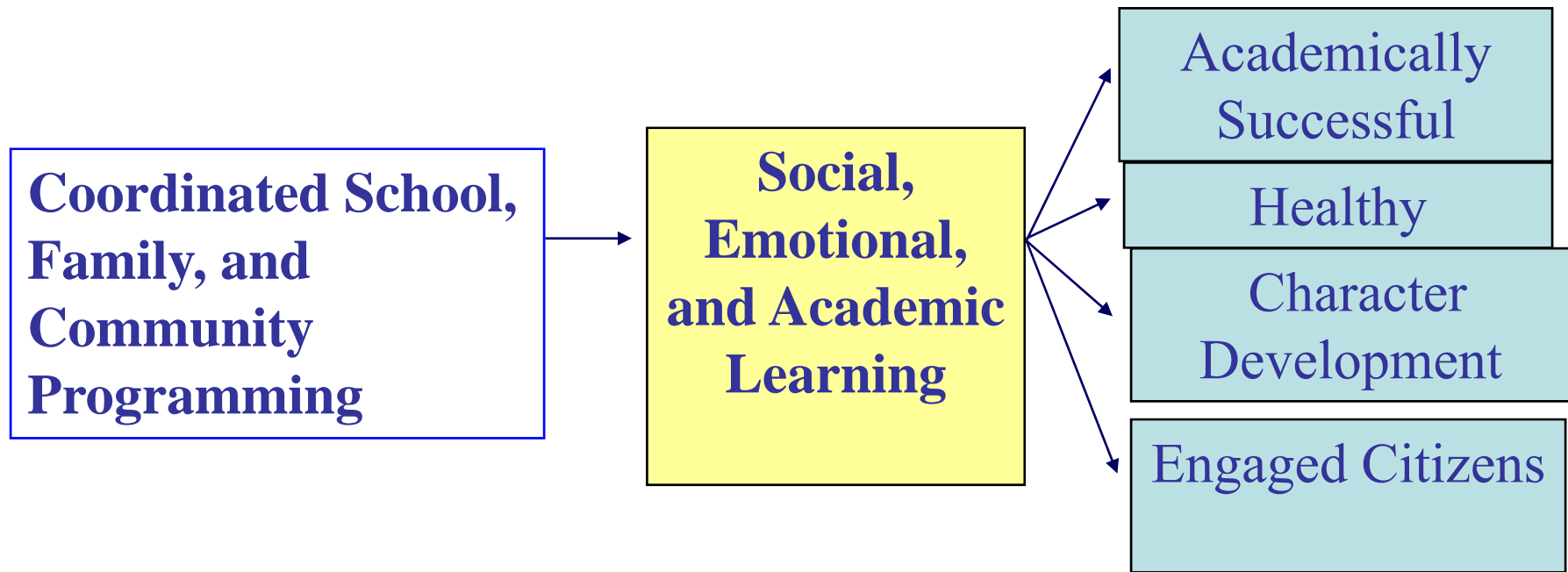


Prevention Principle 8

Prevention programs for **high school students** should increase academic competence and social competence with following skills

- Study habits and academic support; communication, peer relationships, self-efficacy and assertiveness; drug resistance skills, reinforcement of antidrug attitudes; strengthening of personal commitment against drug abuse

Framework for Positive Youth Development



Prevention Principle 9

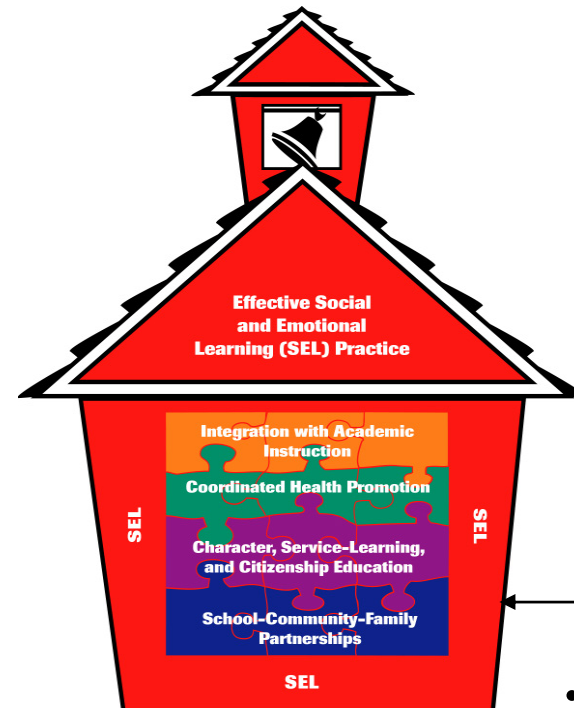
Prevention programs aimed at general populations at **key transition points**, such as the transition to middle school, can produce beneficial effects even among high-risk families and children.

Prevention Principle 10

Community prevention programs that **combine** two or more effective programs, such as family-based and school-based programs, can be more effective than a single program alone.

From Fragmentation to Coherence

Getting from here...



...to here

Prevention Principle 11

Community prevention programs in **multiple settings**

– for example, schools, clubs, faith-based organizations and media –

are most effective when they present

consistent, community-wide messages

in each setting.

Prevention Principle 12

- When communities adapt programs to **match** their needs, community norms, or differing cultural requirements, they should retain core elements of the original research-based intervention
 - Structure (how the program is organized and constructed)
 - Content (the information, skills, and strategies of the program)
 - Delivery (how the program is adapted, implemented and evaluated)

Prevention Principle 13

Prevention programs should be **long-term** with repeated interventions (i.e. booster sessions) to reinforce the original prevention goals.

Prevention Principle 14

Prevention programs should include **teacher training** on good classroom management practice, such as rewarding appropriate student behavior.

- Such techniques help foster students' positive behavior, achievement, academic motivation, and school bonding.

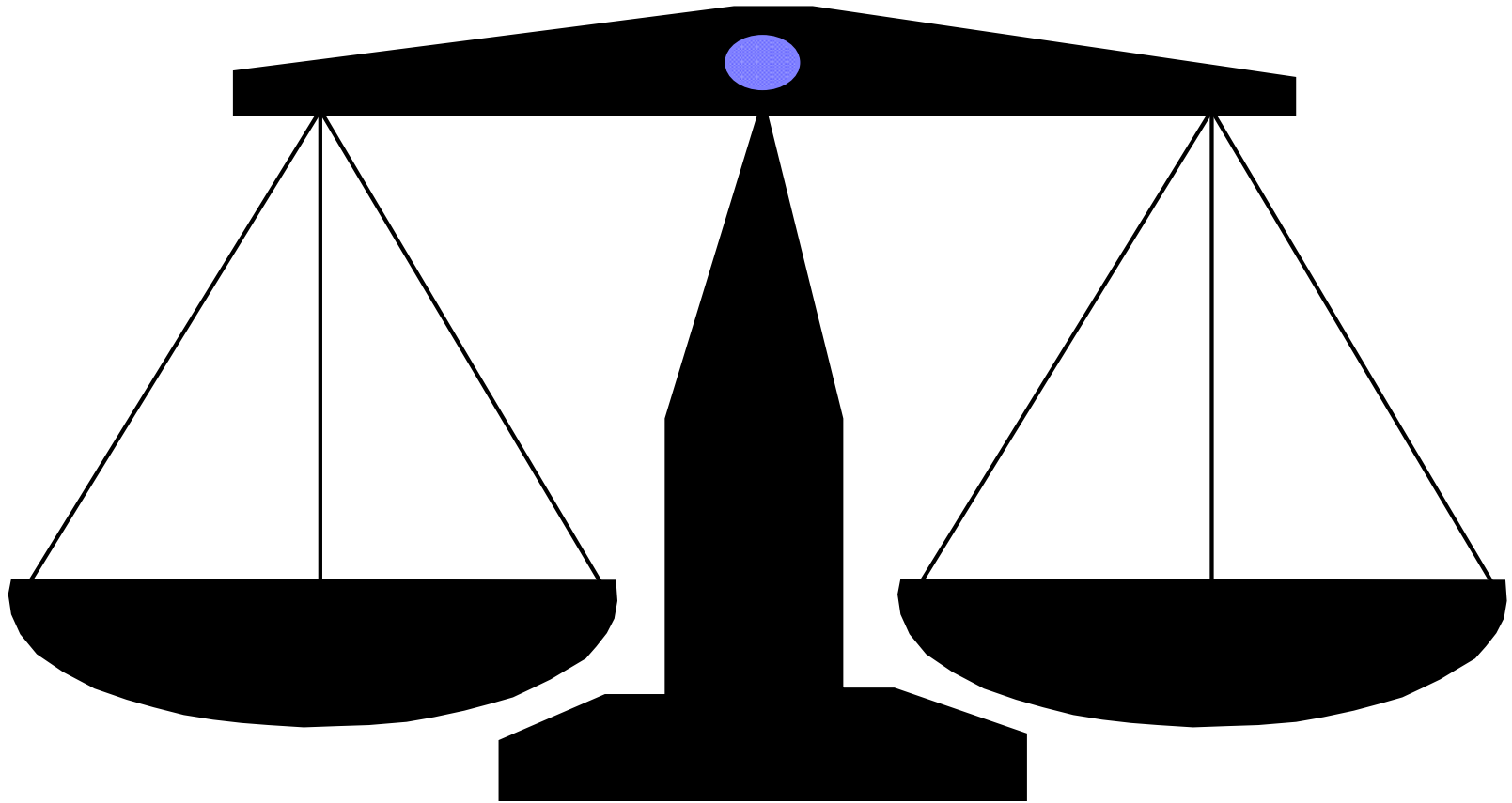
Prevention Principle 15

Prevention programs are most effective when they employ **interactive techniques**, such as peer discussion groups and parent role-playing, that allow for active involvement in learning about drug abuse and reinforcing skills.

Prevention Principle 16

- Research-based prevention programs can be **cost-effective**.
- Savings ten times the investment cost

Evaluation



In summary –key to success

- Enhance protective factors and reduce risk factors
- All form of drugs
- Local communities, specific to target groups
- Family, preschool, school, teacher, key transitions
- Combine, multiple settings with community-wide messages, long-term, interactive techniques
- Cost-effective investment for health

Long-term prevention is possible



Thank you for your attention