



European Monitoring Centre
for Drugs and Drug Addiction

Best Practice and Standards

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European Monitoring Centre
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Search

Advanced search

[Drug situation](#) |
 [Responses to drug use](#) |
 [Drug policy and law](#) |
 [Publications](#) |
 [Themes](#) |
 [Press room](#) |
 [News](#) |
 [About EMCDDA](#)

EMCDDA > [Responses to drug use](#) > [Best practice portal](#)

Best practice portal

- [Evidence of efficacy](#)
- [Tools for evaluating practices](#)
- [Standards and guidelines](#)
- [Examples of evaluated practices: EDDRA](#)
- [Best practice glossary](#)

Best practice portal

Welcome to the EMCDDA's Best practice portal, a resource for professionals, policymakers and researchers in the areas of drug-related prevention, treatment, harm reduction and social reintegration. The portal concentrates on illicit drugs and polydrug use and has a clear European focus. Its main aim is to provide tools and standards to improve the quality of interventions and highlight examples of best practice across Europe.

The portal presents an overview of the latest evidence of different interventions, in terms of efficacy and effectiveness. It contains tools to improve interventions, whilst highlighting real-life examples of evaluated practices, which are implemented within EU Member States. Its development comes as a response to the [EU drugs action plan \(2005-08\)](#) which calls for 'the effective dissemination of evaluated best practices'. [More information >>](#)

Related links

- [Responses to drug use in the EU](#)
- [Glossary of best practice terms](#)

Other web sites

- [Cochrane Collaboration](#)
- [Campbell Collaboration](#)
- [European Network for Health Technology Assessment \(EUneHTA\)](#)
- [Drugs and Alcohol Findings](#)
- [Evidence-based Electronic Library for Drugs and Addiction \(EELDA\)](#)
- [Health-EU Portal](#)



Evidence of efficacy

This section contains reviews on the efficacy of different types of intervention.



Tools for evaluation

This area contains EMCDDA information on how to evaluate demand reduction activities.



Standards and guidelines

This section contains standards and guidelines for the implementation of practices.



Examples: EDDRA

The Exchange on Drug Demand Reduction Action (EDDRA) provides real-life examples of evaluated practices in the European Union.

EMCDDA | Start and introduction - Mozilla Firefox

http://www.emcdda.europa.eu/html.cfm/index9932EN.html

EMCDDA | Start and introduction

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Drug situation | Themes | Responses to drug use | Drug policy and law | Publications | Press room | News | About EMCDDA

EMCDDA - Responses to drug use - Prevention - Prevention and Evaluation Resources Kit - PERK - Start and introduction

Start and introduction

Step 1 - Needs assessment
Step 2a - Clarify goals and working hypothesis
Step 2b - Define contents
Step 3 - Select strategies and delivery
Step 4 - Feasibility check
Step 5 - Implementation & process evaluation
Step 6 - Outcome evaluation
Step 7 - Wrap up and conclusion

Further options
Site map
Contact us
Print

Start and introduction

Logic model | Definitions in prevention and scope of PERK | PERK details and background Overall structure

What is PERK?

This Prevention and Evaluation Resources Kit (PERK) compiles basic but evidence-based prevention principles, planning rules and evaluation tips. Additionally, it provides related documentation or references for download, it is hoped that this additional material will be particularly useful for readers who have difficulty accessing the scientific prevention literature. To illustrate the theoretical discussion, an intervention example, partly based on a real-life situation, gives a practical perspective.

PERK promotes the notion that prevention planning and evaluation are interlinked, i.e. that intervention and essential research on it should not be separated.

What does this mean?

For whom is it intended?

PERK provides support

- to prevention policy planners, for example by providing information on which strategies are effective (Evidence base) or on how to determine whether a project ~~is~~ seems sound and well designed.
- to prevention professionals and project developers through the provision of background literature, theories, references and evaluation tools.

Finally, an additional aim of the PERK exercise is to develop a first common draft of minimum prevention principles and standards for the European Union, similar to the NIDA's 'Red Book' (see <http://www.nida.nih.gov/Prevention/Prevention.html>).

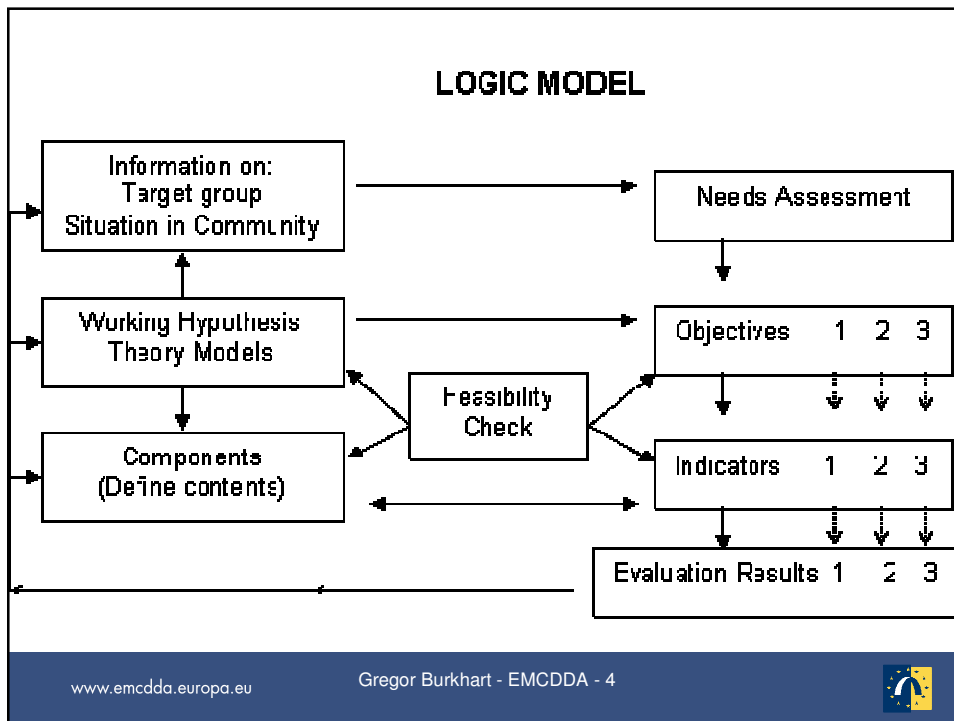
How is the site organised and what can you find?

Planning - PERK invites users to take a step-by-step guided tour through the development of an intervention and through the available knowledge base in prevention. On the way, they can gather - or revise - ideas and suggestions on how to plan and design an intervention and its evaluation, depending, of course, on their available resources and the setting.

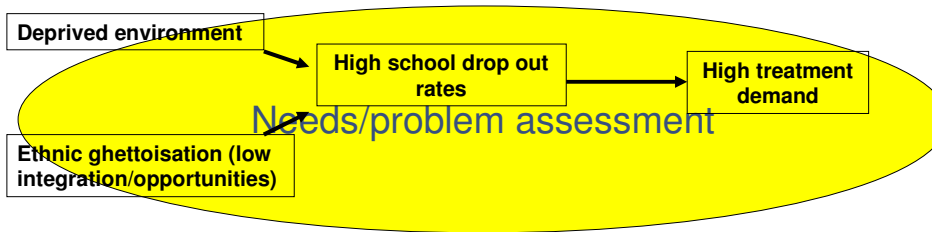
Science base - PERK has been created to dispel the notion that everything in the field of prevention is a matter of opinion and perspective: there is now sufficiently strong evidence and a sufficiently robust theory base for practitioners and stakeholders to know what should and shouldn't fall under the heading 'prevention'.

Soundness for effective projects - PERK guides project leaders to develop effective interventions according to a [logic model](#); by taking a step-by-step approach to the development of an 'evaluable' prevention intervention, all objectives, working hypotheses, content and indicators are logically built on each other, are interconnected and are relevant in addressing a problem situation. This logical interconnection is also the backbone of the [EVIDA](#) system.

Materials - Most of the units of this prevention and evaluation resources kit make use of the material already existing in Europe or, sometimes, North America, and which has been tested and used by many professionals in nearly all Member States.



Modus operandi according to Logic Model

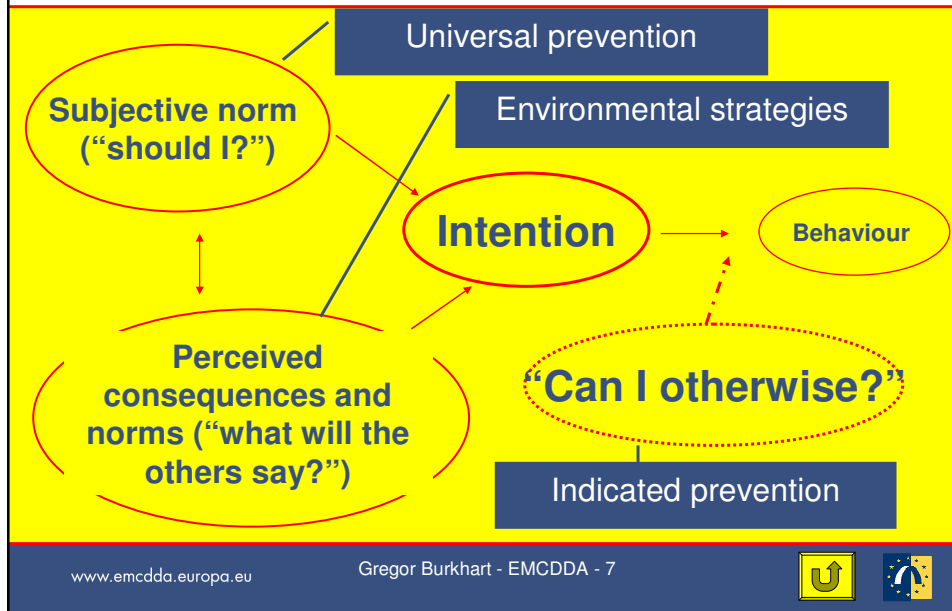


Social Development (Catalano & Hawkins)

- Focused on high risk environments
- low bonding to conventional institutions (family, school, peers),
- low psychosocial or academic competences
- low reinforcement for positive behaviour (by teachers or parents)
- Leads to integration into deviant groups and drug use.
- Not gender-specific, the sequence is questioned (Flay & Petraitis)



Reasoned action theory; Ajzen Fishbein



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Theories and working mechanisms

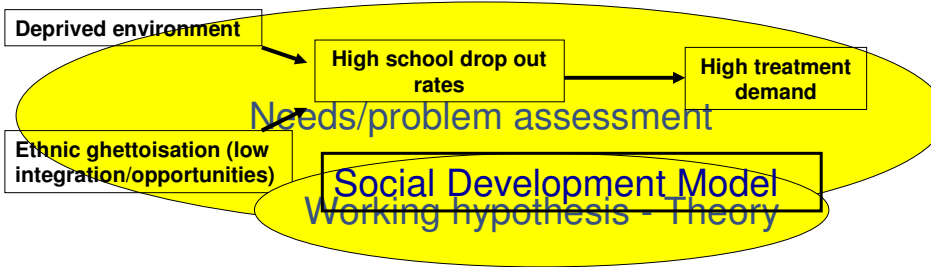
- Theories predict the effects of certain variables and their interaction.
- When proven theories are the basis for defining objectives and strategies, the intervention is 'theory led'.
- Assumptions are then based on published research evidence.
- Identify the causes of the problem, the risk factors and how the problem can be solved.
- Define Objectives: what you want to achieve and in/with whom regarding substance use and mediating variables.

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Modus operandi according to Logic Model



General Objective

Operationalise into..

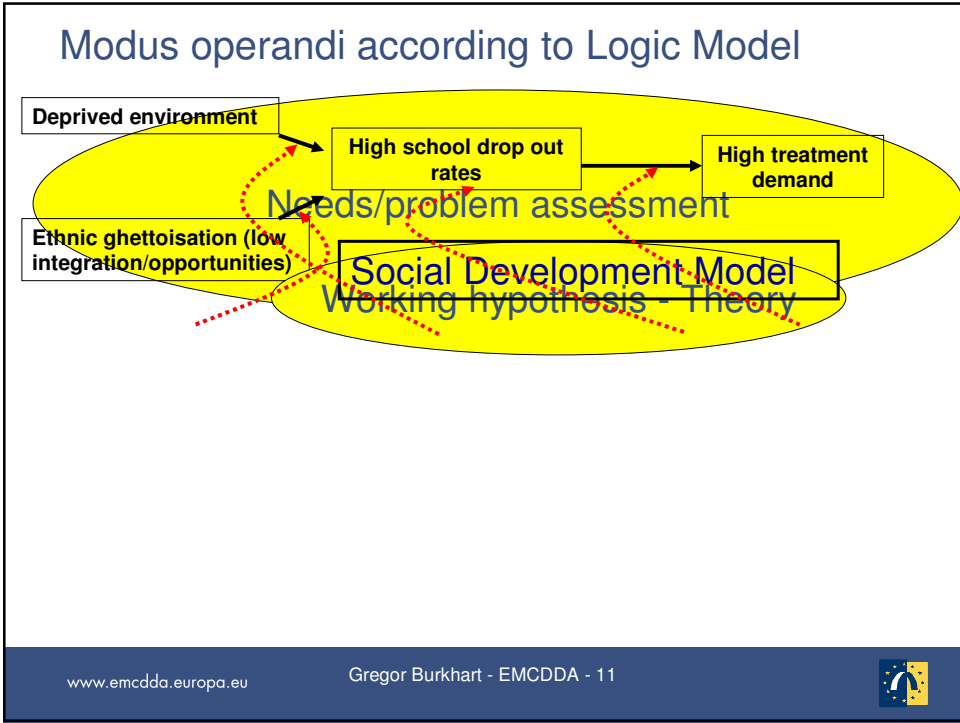
Specific objectives

1. Intermediate goals that contribute to the general objective
2. Ideally quantifiable or measurable
3. Realistic
4. Related to drug use or surrogates (School performance, social skills)
5. Changes in the target group

1. Which behaviour?
2. In whom?
3. When?

CAVE!!!! → Operational Objectives:
Means and outputs needed in order to achieve the specific objectives





EMCDDA | Best practice portal: Evidence of efficacy of selective prevention interventions - Introduction - Mozilla Firefox

File Edit View History Bookmarks Tools Help

http://www.emcdda.europa.eu/themes/best-practice/evidence/selective-prevention

EMCDDA | Best practice portal: Evidence...

EMCDDA > Responses to drug use > Best practice portal > Evidence of efficacy > Selective prevention

Evidence of efficacy selective prevention

Introduction Summary of findings Methodology

Selective prevention: introduction

Research has shown that particular groups of young people are more likely to try drugs and/or develop drug-related problems than the general population. Selective prevention targets these groups. We used the following literature as a source of information on the efficacy of selective prevention.

Tertiary level research

Reviews of reviews published since 2000:

- Buehler, A. and Kroeger C. (2006), 'Report on the prevention of substance abuse', Federal Centre for Health Education BZgA.
- McGrath, Y. et al. (2006), 'Drug use prevention among young people: a review of reviews', National Institute for Health and Clinical Excellence.
- Canning, U. et al. (2004), 'Drug use prevention among young people: a review of reviews', Health Development Agency.
- NICE (2007), 'Community-based interventions to reduce substance misuse among vulnerable and disadvantaged young people', Public Health Intervention Guidance no.4, Technical report, National Institute for Health and Clinical Excellence, London.
- Toumbourou, J. W. et al. (2007), 'Interventions to reduce harm associated with adolescent substance use', *Lancet* 369 (9670), 1391-1401.

Due to the scarcity of information on the efficacy of selective prevention, secondary and primary research studies published since 2003 were also taken into consideration.

Secondary level research

- Roe, E. and Becker, J. (2005), 'Drug prevention with vulnerable young people: a review', *Drugs: education, prevention and policy* 12 (2), pp. 85-99.
- Sussman, S. et al. (2004), 'The motivation, skills, and decision-making model of 'drug abuse' prevention', *Substance Use and Misuse*, 39 (3), pp. 191-2016.
- Klumppert K.L. et al. (2003), 'Family-based interventions for substance use and misuse prevention', *Substance Use and Misuse*, 38(11-13), pp. 1759-87.

Primary level research

Please note that the following studies did not investigate the efficacy of the intervention but studied whether they are effective in 'real-world' conditions or 'natural' settings.

- Cho, H. et al. (2005), 'Evaluation of a high school peer group intervention for at-risk youth', *Journal of Abnormal Child Psychology*, 33 (3), pp. 363-7.
- Springer J. F. et al. (2004), 'Characteristics of effective substance abuse prevention programs for high-risk

Related links

- References
- Prevention responses in the EU
- How to implement prevention programmes?
- Prevention Evaluation Resource Kit (PERK)
- Examples of evaluated practices (EODRA)

Done

start Microsoft Excel - T... Inbox for Maria.Fe... Firefox documentation 81... Microsoft PowerP... Visit of Dr Michel P... EN 14:17

The screenshot shows a web browser window displaying the EMCCDA website. The page title is "Evidence of efficacy: selective prevention". The main content area is titled "Selective prevention – summary of findings" and contains a paragraph of text followed by a list of bullet points under the heading "What works in selective prevention?". The sidebar on the left contains a navigation menu with categories like "Responses to drug use" and "Best practice portal". The sidebar on the right contains "Related links" and "Evidence from real life studies".

“Comprehensive effective programmes”: The Canon

- **Social skills** (assertiveness, communication, peer-pressure resistance), personal skills (decision making, coping, goal setting), **Attitudes** (especially normative beliefs) and **Information** (on drugs and consequences of use).
- Interactive delivery (peer group vs. frontal teaching) focussing on social skills
- Intensive (10 sessions, small groups)
- Implemented by specialised and motivated teachers, coached by prevention professionals
- Involve Family (and community)
- Supported by local and school norms on legal drugs

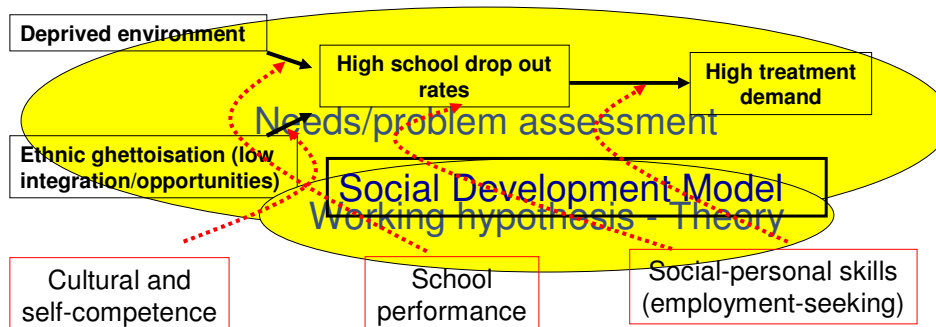


Normative beliefs

- Correct misperception about acceptance and prevalence of drug use in reference populations
- Unravel cognitive and value discrepancies (smoking ⇔ no-global)
- Correct selective perceptions about peer populations
- Argumentative reinforcement of negative attitudes to drug use
- Reveal influences of industries, also the “alternative” ones: Rebellion sells well, or: no drug use is rebellion nor alternative

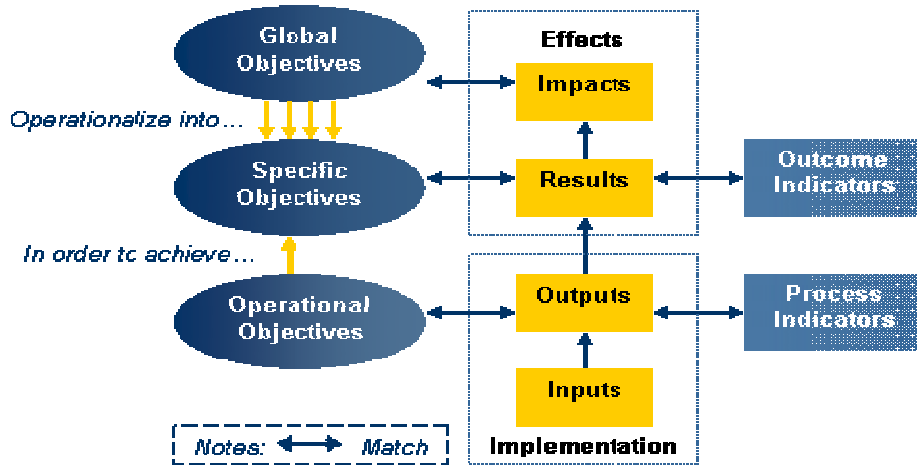


Modus operandi according to Logic Model

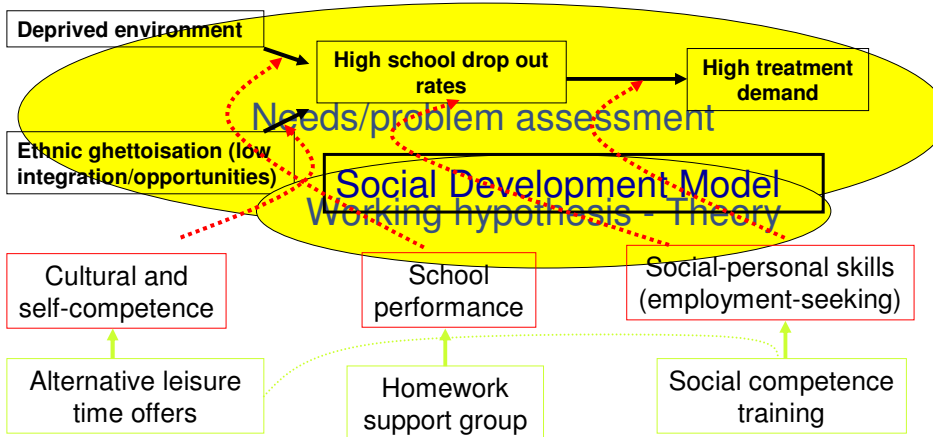


What is what in evaluation?

Indicators and Objectives



Modus operandi according to Logic Model



Intermediate indicators

- Problem behaviour
- Health behaviour
- Self-control
- Assertiveness
- Cognitive & social skills: decision-taking, coping, problem solving ...
- School performance / school grades
- Family & school attachment

Core items of constructs
in scales or questionnaires
already used in the field
or similar fields

Programme indicators – process evaluation

- Assess Implementation
- Achievement of operational objectives
- was the intervention implemented as intended? FIDELITY
- Were all the outputs produced?
- Was the intervention well accepted?
- ... suited to the target? FLEXIBILITY
- Internal coherence (EDDRA, logic models)
- Number of participants
- Participant involvement
- Intensity of participation
- Programme retention
- Participants opinion about the programme

Search | Download | Player | Explore | Rank: 176,365 | Help

Google Kalender | EMCDDA | Evaluation Instrument...

Evaluation Instruments Bank (EIB)

The Evaluation Instruments Bank (EIB) is an online archive of freely available instruments for evaluating drug-related interventions. Details regarding copyright and/or possible use restrictions are specified for each instrument. Instruments are generally classed according to the intervention field they are designed to be used in (treatment, prevention, or harm reduction), though some instruments may be usable in more than one field.

Treatment instruments >>

By aspect: Needs and planning | Mediating and risk factors | Process | Outcome | Satisfaction

By target population: Children | Adolescents | Adults | Special groups and settings

Prevention instruments >>

By aspect: Needs and planning | Mediating and risk factors | Process | Outcome

By target population: Children | Adolescents | Adults | Special groups and settings

Harm reduction instruments >>

View all instruments

Search by title

Enter keyword(s) to search within instrument titles.

Non-English languages

Most instruments are in English but some instruments are available in other languages.

Spanish | Czech | Danish | German | Greek | French | Italian | Lithuanian | Hungarian | Dutch | Polish | Portuguese | Romanian | Slovak | Slovene | Swedish | Norwegian | Russian

Specific topics

The keywords below show instruments which focused on a particular topic.

attitude | coping | HIV/AIDS | interview | motivation | satisfaction | substitution

What is an evaluation instrument?

An evaluation instrument is typically a questionnaire, an interview script, or a set of observation guidelines, used to evaluate one or more aspects of an intervention in the drugs field. Depending on what is being evaluated, an instrument may be used only once during the intervention, or several times. It may administered by or to a professional, by or two a parent/teacher, or directly to the target group.

Click here to learn more about evaluation and evaluation instruments >>

Related links

Examples of evaluated practices: EDDRA
Prevention and Evaluation Resource Kit: PERK
EMCDDA publications
Guidelines for the evaluation of treatment in the field of problem drug use
Guidelines for the evaluation of outreach work: a manual for practitioner
Evaluation: a key tool for improving drug prevention
Guidelines for the evaluation of drug prevention: a manual

EMCDDA | Evaluatio... | Adobe Reader | TMN: 'about that' | No Calendar | zotero

Search by Language

EMCDDA Intranet

Search

EMCDDA everyday | Agenda | Directorate | ICT info | COM | SCD | Financial helpdesk | Infragov | HR portal | Staff Committee and social activities | Living in Lisbon

Intranet > COM > Websites > Projects > EIB > EIB start page > EIB search results

Responses to drug use

Responses areas

- Prevention
- Treatment
- Harm reduction
- Drug treatment
- Drug use in prison

Best practice portal

- Evidence of efficacy
- Tools for evaluating
- Standards and guidelines
- Examples (EDDRA)

Searching in all evaluation instruments

Displaying instruments where Language is Swedish

Instrument	Areas of evaluation	Phases of evaluation	Target population	Language
Addiction Severity Index	Treatment	Needs assessment and planning	Adults, Special populations	English, Russian, Portuguese, Swedish, Polish, Dutch, Lithuanian
Addiction Severity Index - Feedback Form	Treatment	Process, Outcome, Needs assessment and planning	Adults	English, Swedish, Dutch
DUDIT	Treatment, Prevention	Needs assessment and planning	Adolescents, Adults, Special populations	English, Portuguese, Danish, Norwegian, Swedish, Dutch
European Addiction Severity Index (EuopASI)	Treatment	Outcome, Needs assessment and planning	Adults	English, Italian, Portuguese, Swedish, Polish, Lithuanian
Monitoring Area and Phase System - Unit	Treatment	Process, Needs assessment and planning	Adolescents, Adults	English, Swedish
Monitoring Area and Phase System - Intake	Treatment	Process, Needs assessment and planning	Adults	English, Swedish
DUDIT-E	Treatment, Prevention	Needs assessment and planning	Adolescents, Adults, Special populations	English, Norwegian, Swedish
Monitoring Area and Phase System - Out (discharge)	Treatment	Process	Adults	English, Swedish
Monitoring Area and Phase System - Up	Treatment	Outcome, Needs assessment and planning	Adults	English, Swedish
Tasix	Treatment, Harm reduction	Outcome, Needs assessment and planning	Adults	Portuguese, Swedish
EUDAP - Process	Prevention	Process	Adolescents	English, Italian, German, Spanish, Swedish, Dutch, Greek
EU-DAP-Outcome	Prevention	Outcome, Mediating and risk factors	Adolescents	Italian, Spanish, Swedish, Dutch, Greek

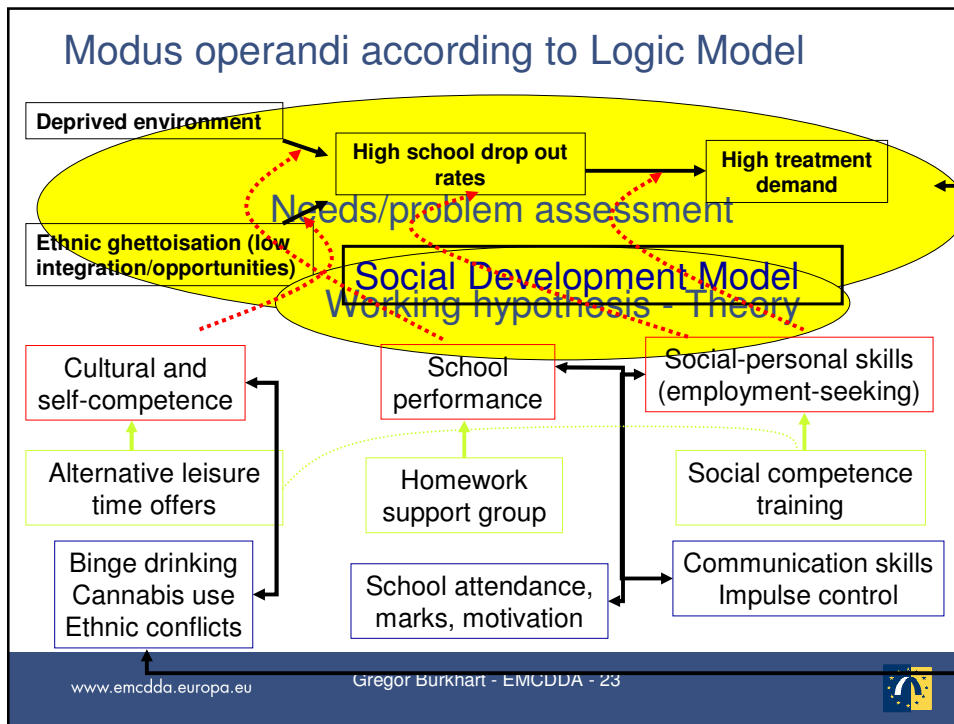
Related links

- Examples of evaluated practices: EDDRA
- Prevention and Evaluation Resource Kit: PERK
- Guidelines for the evaluation of drug prevention

External resources

- External website 1
- External website 2
- External website 3
- External website 4

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EMCDDA | Evaluated examples of best practice in Europe: EDDRA - Mozilla Firefox

European Monitoring Centre for Drugs and Drug Addiction

Drug situation | Themes | Responses to drug use | Drug policy and law | Publications | Press room | News | About EMCDDA

EMCDDA > Responses to drug use > Best practice portal > Examples

Responses to drug use

Best practice portal

- Evidence of efficacy
 - Universal prevention
 - Selective prevention
 - Pharmacological treatment
 - Psychological treatment
- References
- Tools for evaluation
- Standards and guidelines
- Examples: EDDRA

Responses areas

- Prevention
- Treatment
- Harm reduction
- Prevention of drug-related crime
- Drug supply reduction
- Data collection tools
- Evaluation instruments bank (EIB)

Examples of evaluated practices: EDDRA

Welcome to the Exchange on Drug Demand Reduction Action (EDDRA), which provides details on a wide range of evaluated prevention, treatment and harm reduction interventions, as well as interventions within the criminal justice system. [More about EDDRA...](#)

Find projects by characteristics

By type of intervention

- Prevention**
environmental strategy, universal, selective, indicated
- Treatment**
drug free treatment, pharmacologically assisted treatment, withdrawal treatment
- Social reintegration**
education, employment, housing
- Harm reduction**
reduction of overdoses, prevention of infectious diseases, drug consumption rooms
- Interventions in the criminal justice system**
assistance to drug users in prison, alternatives to prison

Other criteria

- By target group (universal)**
general population, children/young people, adults, family/parents
- By type of approaches**
offenders, ethnic, family/first childhood, gender, telephone help-line, mass media campaign, peer, community involvement, training for professionals, networking, self-help
- By type of evaluation**
process evaluation, outcome evaluation

Substance specific interventions

Some interventions are targeted at a specific substance (in contrast to the majority of projects which cover a range of substances). Click on a substance to see the associated projects.

alcohol, tobacco, cannabis, cocaine and derivatives, opiates, ecstasy

Search the database

Help with this

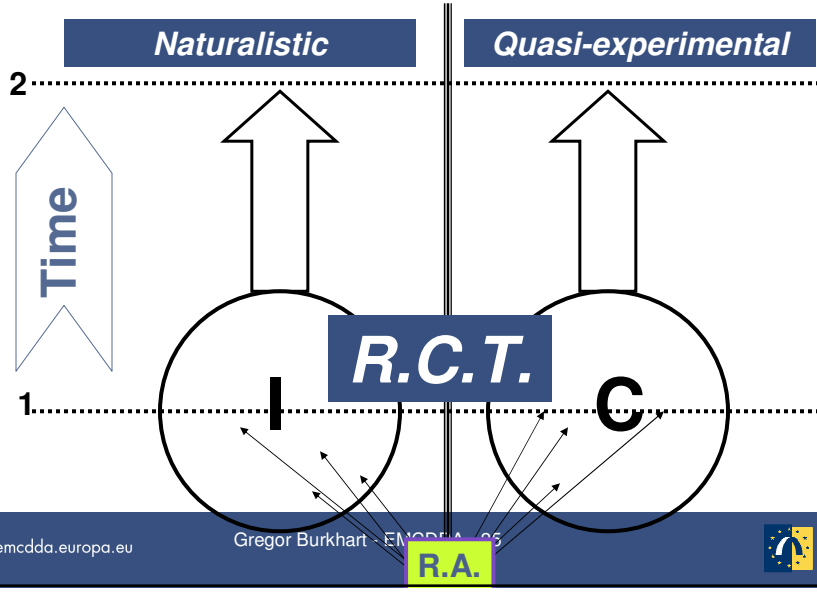
Find projects by country

- Belgium
- Bulgaria
- Czech Republic
- Denmark
- Germany
- Estonia
- Greece
- Spain
- France
- Ireland
- Italy
- Cyprus
- Latvia
- Lithuania
- Luxembourg
- Hungary
- Malta
- Netherlands
- Austria
- Poland
- Portugal
- Romania
- Slovenia
- Slovakia
- Finland
- Sweden
- United Kingdom
- Norway
- Turkey

Related links

- EDDRA quality levels
- EDDRA resources
- Evaluation Instruments Bank (EIB)
- A database that contains 170 evaluation instruments in the treatment field and 70 in the prevention field
- Glossary of best practice terms
- Contains definitions for the terms used within EDDRA

Evaluation Designs



EMCDDA | Prevention quality standards - Mozilla Firefox

http://www.emcdda.europa.eu/themes/best-practice/standards/prevention

EMCDDA | Prevention quality standa...

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Search [input] Advanced search

Drug situation | Themes | Responses to drug use | Drug policy and law | Publications | Press room | News | About EMCDDA

EMCDDA > Responses to drug use > Best practice portal > Standards and guidelines for practices > Prevention

Responses to drug use

Best practice portal

- Evidence of efficacy
 - Universal prevention
 - Selective prevention
 - Pharmacological treatment
 - Psychological treatment
- References
- Tools for evaluation
- Standards and guidelines
- Examples: EDDRA

Responses areas

- Prevention
- Treatment
- Harm reduction
- Prevention of drug-related crime
- Drug supply reduction
- Data collection tools
- Evaluation instruments bank (EIB)

Standards and guidelines for practices

Introduction | **Prevention**

Quality standards and guidelines in prevention

The following section provides examples of existing quality standards and guidelines in prevention aimed at improving the quality and effectiveness of drug prevention.

Followed by a brief description of the main characteristics of these quality standards (and guidelines - see Italy and UK), further descriptions and original documents outlining the standards are attached when they were available for public dissemination.

Further examples will be added as information becomes available.

- Czech Republic
- Finland
- Germany
- Spain - Galicia
- Italy (guidelines)
- Netherlands
- Poland
- Portugal
- Romania
- UK (guidelines)

Ongoing activities in the area of standards for drug prevention

European Commission (EC) Project: European standards in evidence for drug prevention

The EMCDDA is a collaborating partner in an EC project on European standards in evidence for drug prevention under the Programme of Community Action in the field of Public Health (2005-2008).

The main partner of the project is Liverpool John Moores University, UK with associate partners from Hungary, Italy, Poland, Romania and Spain.

The overall objective of this project is to compile, review and analyse drug prevention standards in EU Member States. The results of this work will be to define minimum standards for prevention programmes which will support professionals to deliver evidence-based practice in prevention. This will allow users to bridge the gaps between science, policy and practice, and allow them to demonstrate success in reaching specific objectives of National and EU Drugs Action Plans (in particular Objective 7: 'Improve coverage of, access to and effectiveness of drug demand reduction measures').

The project will start at the beginning of 2008 and will have a duration of 24 months.

Related links

- Prevention responses in the EU
- Prevention Evaluation Resource Kit (PERK)

Czech Republic

Done

start | Microsoft Excel... | Inbox for Marc... | AGREE II - The... | Firefox | documentation... | Microsoft Powe... | Met of Dr Mich... | EN | 14:52

