DRAFT REPORT ON THE SEVENTH MEETING OF THE GROUP OF EXPERTS ON DEMAND REDUCTION
DRAFT REPORT OF THE SEVENTH MEETING OF THE GROUP OF EXPERTS ON DEMAND REDUCTION
I. Background

The Anti-Drug Strategy in the Hemisphere (1996) calls for the drug problem to be addressed from an integral perspective, in which demand reduction is a "key component". Member states also indicated the importance of creating lines of action for developing and evaluating programs.

To this end, the Group of Experts on Demand Reduction has been meeting periodically to share experience, to advance the definition of concepts, to create guidelines for action, and to provide specialized input to the activities of the Secretariat. In this way, the experts' contribution is essential for guiding annual activities in the area of demand reduction, and the group serves as a forum for formulating ideas and sharing actual experiences in the different countries of the Hemisphere.

On this occasion, and in response to recommendations from the sixth meeting of the Group of Experts held in Buenos Aires, Argentina, in December 2004, the group turned to preparation of a Logic Model for evaluating prevention programs, in order to complete the chain begun at the earlier meeting with preparation of the Hemispheric Guidelines on School-based Prevention.

And its 36th regular meeting, CICAD elected Canada to chair the Group of Experts for the period 2005-2006. Thus, between September 13 and 15, 2005, delegations of the following countries met in Ottawa: Antigua and Barbuda, Argentina, The Bahamas, Barbados, Belice, Bolivia, Canada, Chile, Colombia, El Salvador, Grenada, Guatemala, Haiti, Jamaica, Mexico, Paraguay, Trinidad and Tobago, United States and Uruguay. The Cayman Islands, CARICOM, the Centros de Integración Juvenil/Centers for Youth Integration (CIJ), the Pan American Health Organization (PAHO) and the United Nations Office on Drugs and Crime (UNODC) were represented by observers.

The following experts participated as special guests: Hugo Miguez, Research Advisor with CONICET (Argentina); Angela Maria Parra Bastías, Drug Addiction Specialist with Fundación Universitaria Luis Amigó (Colombia); Maribel Tejeira, life-skills program specialist (Colombia); Gustavo Acacíbar, Advisor (Peru); Zili Sloboda, Project Director with the Institute for Health and Social Policy of the University of Akron, Ohio (USA); and Luz Beatriz Sayago, Director General of the NGO Prevención Alternativa (Venezuela). (See document CICAD/DREX/doc.2/05).

Following three days of presentations, deliberations and group work, participants prepared a draft "logic model" and "performance indicators" to be applied and further developed in the course of drug abuse prevention programs.

II. Proceedings of the meeting

1. Opening session

Remarks by Beth Pieterson, Director General of the Drug Strategy and Controlled Substances Program of Health Canada, and Chair of the Group of Experts
The Chair of the Group of Experts on Demand Reduction opened the meeting by welcoming participants on behalf of the Government of Canada and thanking them for their attendance. She paid tribute to the hard work done by the previous chair of the group and by the Government of Argentina, which culminated in the preparation and publication of the CICAD Hemispheric Guidelines on School-based Prevention.

She described the work that Canada has been doing in the area of prevention, under the current Federal Antidrug Strategy. On the topic to be addressed by this meeting, she noted the benefits of evaluating prevention programs as a way of determining what works and what does not, and why, and how best to invest available funds in the development of such programs. Finally, she indicated that, according to the Second Round of the Multilateral Evaluation Mechanism (MEM), 22 of the 34 countries of the Western Hemisphere are encountering problems in evaluating implementation of their prevention programs, a fact that underlines the importance of the work to be done over the next two years. This work, in which Canada will have the lead, will focus on developing and implementing essential tools for supporting and guiding member states in their evaluations.

She made particular note of two of those tools: the logic model and the performance indicators. These constitute the first steps towards establishing general guidelines and recommending a process for evaluating prevention programs for implementation in our Hemisphere.

Dr. Anna McG. Chisman, Chief, Demand Reduction Program, CICAD

Anna Chisman began her remarks by welcoming all participants on behalf of CICAD, and thanked Canada for hosting the session and for its financial contribution to CICAD projects. She offered a brief description of the programs, activities and players through which the Demand Reduction Program of CICAD is pursuing projects throughout the Hemisphere.

She went on to note that few prevention programs have been evaluated, because many institutions have the idea that evaluation is difficult and costly, and they often prefer to reserve their scarce resources for pursuing their programs. Nevertheless, she felt that this context has changed for three essential reasons: the evaluations by the Multilateral Evaluation Mechanism, the responsibility of governments to demonstrate to their parliaments and to public opinion that they are spending their funds effectively, and the importance of the drug consumption issue in the public health system.

She invited participants to provide guidance to the Secretariat on the best way of proceeding in the evaluation area. She added that the Secretariat's main hopes for the meeting are to begin to develop a hemispheric consensus on the need to evaluate prevention programs and to identify progress by measuring the impact of those programs.

Ms. Diane MacLaren, Assistant Deputy Minister, Public Safety and Emergency Preparedness Canada (PSEPC)

After welcoming participants to the meeting, Ms. McLaren announced that she was recently appointed by the Government of Canada as Commissioner to CICAD. She stressed the importance that Canada attaches to demand reduction efforts, and especially to prevention initiatives aimed at youth. With respect to the evaluation of prevention programs, she noted the importance and necessity of measuring the impact of programs as a way of identifying which
ones are most effective. She also noted the importance of working with multidisciplinary partners on what is a multidisciplinary problem.

At the end of the opening session, the schedule of activities was approved (see document CICAD/DREX/doc.3/05 rev.1)

### 2. Presentations and commentaries from the first day of the meeting

**CICAD HEMISPHERIC GUIDELINES ON SCHOOL-BASED PREVENTION: DISSEMINATION STRATEGIES**

Strategies and Objectives for Dissemination of the CICAD Hemispheric Guidelines on School-based Prevention, Ms. Halina Cyr, Director, Office of Demand Reduction, Health Canada, and Mr. Doug McCall, Executive Director, Joint Consortium on School Health

The presentation focused on identifying the steps the Government of Canada is taking to achieve better outcomes in the dissemination and subsequently in the evaluation and implementation of the guidelines for school-based prevention. These nine steps are: understand the context; select strategy and outcomes; recognize capacity and systems; define and understand audiences; analyze proposed innovation; determine messages; engage messengers/agents of change; plan stages/activities/budget; evaluate and evolve (see document CICAD/DREX/doc.12/05).

Dissemination of the CICAD Guidelines in Paraguay and plans for school-based programs. Ms. Graciela Barreto de Ruiz, National Anti-Drug Secretariat (SENAD), Paraguay

During her presentation, the Paraguayan delegate described the efforts that her government is making to disseminate the hemispheric guidelines, as well as the obstacles that it has encountered. As the principal resource for dissemination, she noted the visit of CICAD, led by the Assistant Executive Secretary Mr. Abraham Stein, during which he met with various national authorities. The main obstacles she identified were the lack of economic resources, the absence of a historical tradition of prevention, and the scarcity of training.

She listed the four phases involved in dissemination. The first, information to key population sectors; second, training through the exchange of experience with other countries; third, implementation of pilot programs, specifically "life skills" in 30 urban and rural schools of Asuncion; fourth, evaluation and systematization of experience, and follow-up.

**Plenary discussion and recommendations**

Representatives of the United States, Mexico, Canada, Guatemala, Chile, the Bahamas, Argentina, Colombia and the Cayman Islands took part in the discussion, as did the experts Maribel Tejeira and Gustavo Ascacibar. The discussion and recommendations revolved primarily around the responsibility for implementing prevention programs, evaluating and sharing practices for discussion at future meetings; the importance of creating strategic alliances between the Ministry of Education and the Ministry of Health; the need to bear in mind the non-school population and to explore the application of radio, TV and Internet programs for reaching greater numbers of people while respecting their values and culture; analysis of the responsibilities of stakeholders, including the powers and the regulatory and financial
responsibilities of the public sector through formulation of a national public policy; and finally, the need to continue updating the document.

INTRODUCTION TO THE EVALUATION OF SUBSTANCE USE AND ABUSE PREVENTION

Fundamental components of substance use and abuse prevention evaluation: The role of the Logic Model and Performance Indicators. Ms. Colleen Ryan, Health Canada

In her presentation, Colleen Ryan focused on answering the following questions: why evaluate? why is it usual not to evaluate? and how can the Group of Experts help ensure that our hemisphere will support the efforts that member states are making in evaluation? (See document CICAD/DREX/10/05).

Evaluation of youth prevention programs in OAS member states: Common perils and pitfalls. Mr. Pernell Clarke, Specialist, Inter-American Observatory on Drugs, CICAD/OAS

Mr. Clarke, a specialist with CICAD, gave a presentation on the fundamental aspects to be borne in mind before, during and after conducting an evaluation. He noted that any evaluation must be preceded by a planning stage and program development; during the evaluation attention must be paid to methodological aspects, resources and expertise; and subsequently, there must be a focus on practical aspects and feedback (See document CICAD/DREX/11/05).

Measuring Outcomes: the Role of Attitudes in Predicting Alcohol and Other Drug Use Behaviors. Dr. Elizabeth B. Robertson, Chief, Prevention Research Branch, Division of Epidemiology, Services and Prevention Research, National Institute on Drug Abuse, US Department of Health and Human Services

Dr. Robertson gave a presentation on the role that attitudes play in predicting drug consumption and related behavior. She discussed recent studies on measuring attitudes and how these relate to changes in behavior. She offered a new hypothesis, in which she identified the role of "intentions" in predicting future behavior. (See document CICAD/DREX/16/05).

WHAT WE KNOW ABOUT EVALUATING SUBSTANCE ABUSE PREVENTION PROGRAMS: CHALLENGES AND BEST PRACTICES IN THE AMERICAS

Evaluation in the context of Life Skills programs. Ms. Maribel Tejera, Chief Trainer, Lions Educating Program, Colombia

Maribel Tejera, an expert and trainer with the "Lions Educating Program" in Colombia, gave her presentation on that program, its mission, the conceptual model, the social stakeholders (family, community and school) as well as risk factors, program stages, and how, when and what to evaluate. She also shared results from the evaluation of the program in Colombia, indicating its strengths and weaknesses (see document CICAD/DREX/doc.17/05).

PANEL DISCUSSION: STRATEGIES FOR CONDUCTING PREVENTION EVALUATIONS OF YOUTH PROGRAMS IN THE AMERICAS

"Evaluation Challenges in Chile". Moderator: Teresa Izquierdo, Director of Prevention, National Substance Control Council (CONACE), Chile
Ms. Izquierdo approached the problem of evaluation from the “evaluative process”, which includes anticipating, strengthening, managing, personal process and context. This process responds to the questions: why is it so difficult to evaluate? What do we need to strengthen in order to achieve a long-term impact? At what point in an individual’s life should prevention began? What are the contexts to bear in mind in conducting evaluation? Her presentation was based on actual data from studies conducted in Chile, identifying the variables of interest for school-based prevention programs. One of the challenges she described was that of using the evaluations to improve the scientific basis for prevention, for redesigning programs on the basis of performance, and for improving intervention processes (see document CICAD/DREX/doc.14/05).

Mr. Gustavo Ascacibar, Independent Consultant, Peru

This panelist described several challenges in evaluating prevention programs. These included the need to accept that prevention is a long-term commitment that represents a break with the pattern of ad hoc interventions and includes all the elements that influence the psychosocial development of children and adolescents. He also pointed out that prevention must take into account the new political and administrative configurations of states, for example the decentralization that is now underway in various countries of our hemisphere. Other elements noted were: making full use of information, international cooperation, participation by civil society, budgeting, social configurations, and the objectives of the evaluation itself.

Prof. Angela Maria Parra, Luis Amigó University Foundation (FUNLAM), Colombia

Professor Parra noted the challenges in evaluating prevention programs, on the basis of social experiments in her country, Colombia. She identified as the basic ingredients of prevention programs: experimental or quasi-experimental program design; prevention approaches and objectives; ad hoc interventions, the timing of programs, preventive action policies, and identification of the target population (see document CICAD/DREX/doc.15/05).

Plenary discussion and recommendations

Various representatives and experts from member states, invited guests, and representatives of international organizations spoke during the discussion. The main recommendations focused on identifying the most common challenges that emerge in conducting an evaluating prevention program, including: the need to develop prevention programs focused on the local realities of citizens; the lack of political and institutional support for programs of this type; the shortage of funding allocated to prevention activities; and the problems in measuring program effectiveness. The experts also offered some proposals for overcoming these challenges over the long term: 1) strengthening strategic partnerships and international cooperation; 2) designing or adapting prevention programs to take account of local initiatives and realities; and 3) addressing the issue of prevention and demand reduction as a matter of government policy.

PANEL DISCUSSION: TECHNICAL CONSIDERATIONS AND CHALLENGES IN PREVENTION EVALUATION

Moderator: Zili Sloboda, Project Director with the Institute for Health and Social Policy of the University of Akron, Ohio, and Member, CICAD Scientific Advisory Committee
In her presentation, "The Clash between Science and the Real World: the Experiences of the Adolescent Substance Abuse Prevention Study", Dr. Sloboda gave a full presentation on progress, curriculum design, research elements, challenges and lessons learned from the DARE program, which is now being implemented in approximately 80% of schools in the United States. She also offered some thoughts about how established programs should be adapted in response to new realities. (See document CICAD/DREX/doc.24/05).

Dr. Hugo A. Míguez, National Scientific Research Council, Argentina

In his presentation Dr. Miguez discussed efforts to combine drug research with program execution in order to improve the efficiency of prevention. He described examples of evaluations of three types of prevention: universal, selective, and indicated. He stressed the importance of taking a local approach to this work and conducting field evaluations of beliefs and attitudes (see document CICAD/DREX/doc.13/05).

Ms. Giovanna Campello, United Nations Office on Drugs and Crime, Vienna

Ms. Campello described two kinds of work that the United Nations Office on Drugs and Crime has carried out in monitoring and evaluating drug abuse prevention: the one involves assessing the progress of member states, and the other identifying and disseminating good practices in the prevention area. She offered the comment that progress reports on monitoring and evaluation in member states have shown that efforts in the Americas are falling short of the world average (see document CICAD/DREX/doc.25/05).

Plenary discussion and recommendations

The discussion and the presentations served to identify the questionnaires, forms, information, measures, target groups for interviewing and other technical instruments that must be taken into account before attempting evaluation. Participants also discussed the need to differentiate between qualitative and quantitative evaluation outcomes. Finally, the Chair of the Group of Experts wrapped up the first day's session by summarizing the work achieved and describing the objectives for the second day of the meeting.

3. Presentations and commentaries from the second day of the meeting

DEVELOPING A LOGIC MODEL FOR THE EVALUATION OF YOUTH SUBSTANCE ABUSE PREVENTION PROGRAMS

Description of the draft Logic Model for evaluating youth substance abuse prevention programs. Wanda Jamieson, consultant

Consultant Wanda Jamieson presented a draft of the logic model prepared to serve as a benchmark for the work and discussion of the Group of Experts. She reviewed the activities, outputs, reach, and immediate and long-term outcomes for each type of prevention program (universal, selective and indicated) and research and evaluation (see document CICAD/DREX/doc.19/05).

Following this introduction, the group proceeded to examine three case studies of prevention programs.
Case Study No.1 -- Universal Prevention: School-based life skills education. Ms. Maribel Tejera, Colombia (CICAD/DREX/doc.28/05)

Case Study No.2 -- Selective Prevention: Community-based prevention in Chile. Dr. Teresa Izquierdo, CONACE, Chile (CICAD/DREX/doc.18/05)

Case Study No.3 -- Indicated Prevention: Prevention Network for Street Youth in Venezuela. Ms. Luz Beatriz Sayago, Alternative Prevention, Venezuela (CICAD/DREX/doc.20/05).

After consideration in the plenary session of the general characteristics of the three case studies, three working groups were formed, each of which took an example of a prevention program and attempted to develop a draft logic model for it.

Each group was able to identify and to locate within the logic model the activities, outputs, reach, and immediate and long-term outcomes for each of the programs. This exercise was useful for sharing experiences, achieving consensus, and proposing changes to round out the draft model.

Working group 1 (Universal Prevention) proposed changing the word outputs (productos) to outcomes (resultados). It noted that population coverage poses a limitation to the strategy. It highlighted the importance of identifying key activities, learning to manage social aspects, guaranteeing sustainability by incorporating the program into school projects, and also noted that political will is key to carrying out programs (see presentation).

Working group 2 (Selective Prevention) recommended that the relatives of individuals should be included as part of the target population. It suggested that the referral of cases to other agencies is perhaps an activity that falls outside the selective prevention model, since the success of referred cases is generally beyond the control of the implementing agency (see presentation).

Working group 3 (Indicated Prevention) suggested the need for greater specificity and precision in defining the target population and the concept of universal, selective and indicated prevention, so as to allow for greater differentiation between activities and outputs of those programs (see presentation).

Plenary discussion

Delegations offered their comments on the logic model, together with recommendations for making the model more effective in all countries of our hemisphere. Suggestions focused on the need to revise the language in the logic model: for example, to exchange the words "immediate outcomes" for “outputs”. Update the hemisphere guidelines for school-based prevention with respect to the definitions of selective and indicated prevention, given the narrow distinction between these two definitions, and also because they are in many cases interrelated. They discussed the need for prior steps, such as the development of a “tree” of problems, objectives and players. They also reiterated the urgency of reaching the non-student population and street people.

4. Presentations and comments from the third day of the meeting

THE IDENTIFICATION OF PERFORMANCE INDICATORS FOR YOUTH SUBSTANCE ABUSE PREVENTION PROGRAMS AND THEIR RELATIONSHIP TO THE LOGIC MODEL
Introduction to performance indicators, their link to the components of the logic model, and their function in measuring program processes and impacts. Wanda Jamieson, consultant

In her presentation, Wanda Jamieson summarized the definition and identification of performance indicators, noting that they can help to determine whether a program is achieving the anticipated outcomes. She then presented a performance indicators table that includes the measurement of outputs, immediate outcomes and intermediate outcomes. The components included in this table are: performance indicators measuring outcomes, prevention activity, data sources and methods, comments and considerations, and discussion points (see document CICAD/DREX/doc.23/05).

This presentation was followed by comments from the CICAD Secretariat, invited guests, and member state delegations. The discussion focused on the duration of programs, information sources, and the measurement of outcomes and of user satisfaction as tools for improving the quality of evaluation outcomes.

Considerations of data availability and generation for the identification of viable performance indicators in OAS member states. Pernell Clarke, CICAD/OAS

Mr. Clarke gave a presentation on the importance and characterization of indicators and measurement of process and outcomes for program evaluation, and the distinction between different types of data collection (focus groups, etc.) and data requirements. He then introduced the Inter-American Uniform Drug Use Data System (better known as SIDUC), its objectives, types of protocols, secondary school survey objectives, methodology, and the relationship between SIDUC and the evaluation of prevention programs, as a tool that member states can use to measure the impacts of prevention programs (see document CICAD/DREX/doc.22/05).

Following these two presentations the working groups resumed, and each developed a table of performance indicators for its program. The working groups then presented their results in plenary.

Plenary discussion and recommendations

The plenary session produced the following recommendations: the importance of performing simple evaluations using simple indicators; the urgency of taking a long-term view of prevention, which would include outcomes relating to social development, quality-of-life, reduction and prevention of substance abuse among working-age groups; and the need to have the activities of international agencies coordinated and focused on addressing the problems for which they were created.


The director of the Demand Reduction Unit of CICAD/OAS summarized the conclusions of the meeting and proposed an action plan on the evaluation of prevention programs, suggesting the following activities and challenges for the year 2006:

1. Creation of a working subgroup of the Group of Experts to prepare a Prevention Program Evaluation Strategy, including the logic model and the performance indicators developed during the meeting.
2. Subregional workshops, with the cooperation of Health Canada, to train key personnel of the Commissions in the main steps for evaluating drug prevention programs and for using the pertinent instruments.

3. Creation of an online expert group to exchange information and to move forward with construction and updating of prevention concepts in the context of the Hemispheric Guidelines on School-based Prevention.

4. Continuing follow-up and support for the Intergovernmental Working Group of the Multilateral Evaluation Mechanism (MEM).

5. Preparation of evaluation indicators for the Life Skills and the Culture of Lawfulness programs.

6. Joint work with SIDUC on developing new indicators for prevention programs.

7. Next meeting of the Group of Experts, during the second semester of 2006.

The Chair of the Group of Experts, Beth Pieterson, concluded the session and closed the meeting. (For the list of meeting documents, see CICAD/DREX/doc.1/05).