



QUESTIONNAIRE ON VIENNA DECLARATION IMPLEMENTATION

IV. REDUCING DRUG ABUSE AND DEPENDENCE THROUGH A COMPREHENSIVE APPROACH

Paris Pact partner:

Country / Organization:

Name / Position / Agency:

Email:

Overview of existing interventions and policies to prevent drug use

Introduction

This questionnaire seeks information about preventive interventions, policies and supportive infrastructures that exist in your country. It has been developed specifically for the Paris Pact Initiative, building on the International Standards on Drug Use Prevention.

Each section of the document deals with specific elements discussed at the October 2012 Paris Pact Expert Working Group on Afghan Opiate Abuse Prevention held in Vienna, Austria. The questionnaire represents a simplified version of questions disseminated to experts in preparation of the 2012 expert meeting.

By completing the document, stakeholders will be contributing to the formation of baseline information on the implementation of the Vienna Declaration as part of the Paris Pact partnership's principle of shared responsibility. Furthermore, the responses will create an overview of the national prevention system in respective countries, focusing on the availability, coverage and evaluation of interventions and policies to prevent drug use.

This is not an assessment questionnaire, there are no right or wrong answers. Instead it is meant as a data collection tool allowing UNODC through the Paris Pact Coordination Unit to start building a more accurate picture of prevention of drug use and substance abuse in priority regions covered by the Paris Pact.

The document deals with the many interventions and policies that have been found to be effective according to scientific evidence and that are reported in the International Standards on Drug Use Prevention. It is not the intention to convey the message that all countries should implement all these interventions and policies. Most countries would implement only some of them, as warranted. Moreover, some countries may support drug prevention strategies other than those covered in the questionnaire. If this is the case, the document provides the opportunity to present and describe them.

The document refers specifically to activities carried out between **January 2013 and December 2014** and is intended to complement UNODC's Annual Report Questionnaire (ARQ).

In order to obtain an accurate national picture, we ask that you distribute the questionnaire to all relevant national agencies, and compile a single consolidated response based on their replies.

Please complete and submit the questionnaire by **31 July 2015**.

Should you have any questions, please do not hesitate to contact the **Paris Pact Coordination Unit**, paris-pact@unodc.org.

I. Factors of vulnerability and resilience to drug use and substance abuse in your country

1) Number (and/or percentage) of families or children and/or adolescents living under the poverty line as defined by your country.

[Broadly speaking, the term 'children' is used to refer to children between 0 and 10 years of age; the term 'adolescents' is used to refer to youth between 11 and 18 years of age.]

Age group	Number	Percentage (%)
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2) Number (and/or percentage) of expectant mothers who have access to pre-natal care.

Number	Percentage (%)
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3) Number (and/or percentage) of children and/or adolescents that have a parent suffering from substance use disorders.

Age group	Number	Percentage (%)
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4) Number (and/or percentage) of cases of maltreatment among children and/or adolescents, as defined by the [World Health Organization](#) and/or your country.

Age group	Number	Percentage (%)
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5) Number (and/or percentage) of families reporting strong attachment between parents and children and/or adolescents (e.g. parents and/or children reporting close and warm relationship).

Age group	Number	Percentage (%)
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6) Number (and/or percentage) of adolescents reporting good monitoring by their parents (e.g. parents really know what the youth are doing and who they are with).

Age group	Number	Percentage (%)
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7) Number (and/or percentage) of primary school children who are currently out of school.

Age group	Number	Percentage (%)
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8) Number (and/or percentage) of adolescent who are currently out of education.

Age group	Number	Percentage (%)
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9) Number (and/or percentage) of children and/or adolescents who report positive attachment to school (e.g. 12-14 year olds reporting that they 'like school').

Age group	Number	Percentage (%)
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10) Number (and/or percentage) of children and/or adolescents who are street children or homeless.

Age group	Number	Percentage (%)
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11) Number (and/or percentage) of children and/or adolescents who are ex- or current child-soldiers.

Age group	Number	Percentage (%)
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12) Number (and/or percentage) of children/adolescents who are working children as defined by the [International Labour Organization](#).

Age group	Number	Percentage (%)
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13) Number (and/or percentage) of adolescents reporting they suffer from anxiety or depression disorders or related symptoms.

Age group	Number	Percentage (%)
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14) Regarding the children/adolescents' risk perception:

Please provide the percentage of children and/or adolescents who report that using various substances either occasionally or regularly carries little or no risks.

	0-20%	21-40%	41-60%	61-80%	81-100%
Tobacco (smoked) Occasional use					
Tobacco (smoked) Regular use					
Alcohol Occasional use					
Alcohol Regular use					
Drunkenness Occasional					
Drunkenness Regular					
Marijuana Occasional use					
Marijuana Regular use					
Amphetamine-type stimulants Occasional use					
Amphetamine-type stimulants Regular use					
Ecstasy Occasional use					
Ecstasy Regular use					
Non-medical use of prescription drugs Occasional use					
Non-medical use of prescription drugs Regular use					

	0-20%	21-40%	41-60%	61-80%	81-100%
Inhalants Occasional use					
Inhalants regular use					
Heroin Occasional use					
Heroin regular use					
Cocaine (including crack cocaine) Occasional use					
Cocaine (including crack cocaine) Regular use					

II. Evidence-based interventions and policies

The following questions focus on the availability of specific types of drug use prevention interventions in your country according to the age of the target group.

Note:

- Every intervention is introduced with a brief definition. If an intervention meeting the definition is implemented in your country, please tick "yes" and also answer sub-questions a and b.
 - The term "strategy" is used to refer to either an intervention or a policy.
 - As this is a questionnaire about interventions and policies to prevent drug use and substance abuse, an evaluation of the effectiveness of an intervention or a policy would investigate whether the intervention or policy has been effective in preventing drug use or substance abuse. It would investigate, for example, whether the prevalence of or the rate of initiation to drug use / substance abuse decreased. Results such as 'the majority of participants found the programme very relevant' are an important part of monitoring, but do not constitute an evaluation of effectiveness. Mediating variables that have been recognised in the scientific literature (e.g. parental monitoring) can also be used as acceptable indicators, particularly with regard to strategies targeting children.
 - A scientific evaluation would: a) be undertaken by or in cooperation with a research institution / university; b) be based on a rigorous scientific methodology (e.g. randomised control trial, matched control trial, or time series analysis); c) be published in an official report or scientific journal. If an evaluation of this kind has been undertaken for this intervention / strategy in the last three years, or is ongoing, please reply "yes" in sub-question b. The bibliographic reference or a copy of the relevant documentation would be highly appreciated.
 - The above definition corresponds to what is referred to as "impact evaluation" in the respective section of UNODC's Annual Report Questionnaire (ARQ).
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18. Does your country currently implement another strategy targeting this age group nationally or locally? yes no

18a. If yes, please describe briefly:

18b. If yes, please provide the number and/or the percentage of beneficiaries (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

18c. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

2. Middle childhood

a. Parenting skills targeting middle childhood

Parenting skills programmes work with parents and their children to strengthen the bond within the family and improve the way the family functions. These programmes are offered both for all families and for families considered at high risk.

19. Does your country currently implement such a strategy nationally or locally? yes no

19a. If yes, please provide the number and/or the percentage of families with children of the relevant age group (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

19b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

b. Personal and social skills education

These interventions give primary school children the opportunity to learn and practice a range of personal and social skills to be able to cope with difficult situations in their daily life in a safe and healthy way. These programmes are typically delivered to all children.

20. Does your country currently implement such a strategy nationally or locally? yes no

20a. If yes, please provide the number and/or the percentage of primary school children (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

20b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

c. Classroom management

These interventions provide teachers with simple techniques based on incentives to manage classes and promote the pro-social behaviour of pupils in class.

21. Does your country currently implement such a strategy nationally or locally? yes no

21a. If yes, please provide the number and/or the percentage of teachers (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

21b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

d. Policies to keep children in school

After attachment to the family, attachment to school is one of the most powerful protective factors. Policies to keep children in school can thus strongly contribute to prevent risky behaviours, including drug and substance abuse, among children and youth.

22. Does your country currently implement such a strategy nationally or locally? yes no

22a. If yes, please provide the number and/or the percentage of children (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

22b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

e. Community-based multi-component initiatives which include a component targeting middle childhood

These strategies mobilise communities to implement evidence-based interventions and policies, some of which might be targeting middle childhood. Please reply to the following questions taking into consideration only community-based multi-component initiatives that target this age group.

23. Does your country currently implement such a strategy nationally or locally? yes no

23a. If yes, please provide the number and/or the percentage of children (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

23b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

f. Other interventions and policies targeting this age group

24. Does your country currently implement another strategy targeting this age group nationally or locally? yes no

24a. If yes, please describe briefly:

24b. If yes, please provide the number and/or the percentage of beneficiaries (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

24c. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

28. Does your country currently implement such a strategy nationally or locally? yes no

28a. If yes, please provide the number and/or the percentage of youth (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

28b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

e. Mentoring targeting early adolescence

These strategies match youth, especially from marginalised / deprived families and communities, with adult mentors.

29. Does your country currently implement such a strategy nationally or locally? yes no

29a. If yes, please provide the number and/or the percentage of youth (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

29b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

f. Brief interventions targeting early adolescence

These strategies deliver one or a few short sessions to screen substance abuse disorders and address them through brief counselling or referral. They have been delivered successfully in primary health care, emergency services, schools and workplace by trained health workers.

30. Does your country currently implement such a strategy nationally or locally? yes no

30a. If yes, please provide the number and/or the percentage of youth (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

30b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

g. Community-based multi-component initiatives which include a component targeting early adolescence

These strategies mobilise communities to implement evidence-based interventions and policies, some of which might be targeting early adolescence. Please reply to the following questions taking into consideration only community-based multi-component initiatives that target this age group.

31. Does your country currently implement such a strategy nationally or locally? yes no

31a. If yes, please provide the number and/or the percentage of youth (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

31b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

h. Media campaigns targeting early adolescence

These strategies use a variety of media to reach target groups with messages aimed at changing knowledge, attitudes, intentions and/or behaviours. Please reply to the following questions taking into consideration only media campaigns that target early adolescence.

32. Does your country currently implement such a strategy nationally or locally? yes no

32a. If yes, please provide the number and/or the percentage of early adolescents (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

32b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

i. Other interventions and policies targeting this age group

33. Does your country currently implement another strategy targeting this age group nationally or locally? yes no

33a. If yes, please describe briefly:

33b. If yes, please provide the number and/or the percentage of beneficiaries (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

33c. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

4. Adolescence and adulthood

a. Prevention education based on personal and social skills and social influence targeting adolescence and young adulthood

These interventions give adolescents and young adults the opportunity to learn and practice a range of personal and social skills to be able to cope with difficult situations, as well as drug or substance related situations, in their daily life in a safe and healthy way. These programmes are typically delivered to all adolescents and young adults.

34. Does your country currently implement such a strategy nationally or locally? yes no

34a. If yes, please provide the number and/or the percentage of adolescents and young adults (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

34b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

b. School-based policies on substance abuse targeting adolescence and young adulthood

School policies about substance use promote and enforce “no use” of substances in the school. Schools might be required to develop and implement such policies by law or might be assisted to do so by a special programme. These policies are particularly relevant in middle and high school, as well as tertiary education institutions.

35. Does your country currently implement such a strategy nationally or locally? yes no

35a. If yes, please provide the number and/or the percentage of schools (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

35b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

c. Addressing individual psychological vulnerabilities targeting adolescence

These strategies target vulnerable adolescents due to temperamental traits (sensation-seeking, impulsivity, etc.) to help them recognise and deal with negative emotions, preventing negative coping strategies, including substance abuse.

36. Does your country currently implement such a strategy nationally or locally? yes no

36a. If yes, please provide the number and/or the percentage of adolescents (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

36b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

d. Mentoring targeting adolescence

These strategies match adolescents, especially from marginalised / deprived families and communities, with adult mentors.

37. Does your country currently implement such a strategy nationally or locally? yes no

37a. If yes, please provide the number and/or the percentage of adolescents (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

37b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

e. Brief intervention targeting adolescence, young adulthood and adulthood

These strategies deliver one or a few short sessions to screen substance abuse disorders and address them through brief counselling or referral. They have been delivered successfully in primary health care, emergency services, schools and workplace by trained health workers.

38. Does your country currently implement such a strategy nationally or locally? yes no

38a. If yes, please provide the number and/or the percentage of adolescents, young adults and adults (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

38b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

f. Community-based multi-component initiatives which include a component targeting adolescence, young adulthood and adulthood

These strategies mobilise communities to implement evidence-based interventions and policies, some of which might be targeting adolescents, young adults and adults. Please reply to the following questions taking into consideration only community-based multi-component initiatives that target this age group.

39. Does your country currently implement such a strategy nationally or locally? yes no

39a. If yes, please provide the number and/or the percentage of adolescents, young adults and adults (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

39b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

g. Media campaigns targeting adolescence, young adulthood and adulthood

These strategies use a variety of media to reach target groups with messages aimed at changing knowledge, attitudes, intentions and/or behaviours. Please reply to the following questions taking into consideration only media campaigns that target adolescents, young adults and adults.

40. Does your country currently implement such a strategy nationally or locally? yes no

40a. If yes, please provide the number and/or the percentage of adolescents, young adults and adults (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

40b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

h. Alcohol and tobacco policies

These policies aim at restricting the access to tobacco and alcohol, particularly among youth and include increase in prices, minimum age, bans on advertising, particularly if targeted at youth.

41. Does your country currently implement such a strategy nationally or locally? yes no

41a. If yes, please provide the number and/or the percentage of adolescents (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

41b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

i. Workplace prevention programmes

Together with the family and the school, the workplace is also a setting for effective prevention. Prevention programmes in the workplace are typically multi-component, including policies as well as counselling and referral to treatment. Employers might be required to develop and implement such programmes by law or might be assisted to do so by a special programme.

42. Does your country currently implement such a strategy nationally or locally? yes no

42a. If yes, please provide the number and/or the percentage of employers (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

42b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

j. Entertainment venues

Entertainment venues such as bars and taverns, dance venues (RAVES), and clubs are settings where many people are exposed to substances. Successful programmes to prevent substance use in these venues are typically multi-component.

43. Does your country currently implement such a strategy nationally or locally? yes no

43a. If yes, please provide the number and/or the percentage of entertainment venues (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

43b. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

k. Other interventions and policies targeting this age group

44. Does your country currently implement another strategy targeting this age group nationally or locally? yes no

44a. If yes, please describe briefly:

44b. If yes, please provide the number and/or the percentage of beneficiaries (as defined by your strategy and/or country) reached by the strategy over the last year. Number reached: % reached

44c. Please indicate whether the effectiveness of the strategy has been scientifically evaluated (or whether such an evaluation is ongoing). yes no

b. Training on drug prevention is provided to staff on an AD-HOC or AS-NEEDED basis yes, optional yes, compulsory
no

c. Training on drug prevention is included in the ONGOING staff development training yes, optional yes, compulsory
no

C) Doctors

a. Training on drug prevention is included in the PRE-SERVICE training yes, optional yes, compulsory
no

b. Training on drug prevention is provided to staff on an AD-HOC or AS-NEEDED basis yes, optional yes, compulsory
no

c. Training on drug prevention is included in the ONGOING staff development training yes, optional yes, compulsory
no

D) Nurses

a. Training on drug prevention is included in the PRE-SERVICE training yes, optional yes, compulsory
no

b. Training on drug prevention is provided to staff on an AD-HOC or AS-NEEDED basis yes, optional yes, compulsory
no

c. Training on drug prevention is included in the ONGOING staff development training yes, optional yes, compulsory
no

E) Psychologists

a. Training on drug prevention is included in the PRE-SERVICE training yes, optional yes, compulsory
no

b. Training on drug prevention is provided to staff on an AD-HOC or AS-NEEDED basis yes, optional yes, compulsory
no

c. Training on drug prevention is included in the ONGOING staff development training yes, optional yes, compulsory
no

F) Social workers

a. Training on drug prevention is included in the PRE-SERVICE training yes, optional yes, compulsory
no

b. Training on drug prevention is provided to staff on an AD-HOC or AS-NEEDED basis yes, optional yes, compulsory
no

c. Training on drug prevention is included in the ONGOING staff development training yes, optional yes, compulsory
no

G) Others (please specify)

a. Training on drug prevention is included in the PRE-SERVICE training	yes, optional no	yes, compulsory
b. Training on drug prevention is provided to staff on an AD-HOC or AS-NEEDED basis	yes, optional no	yes, compulsory
c. Training on drug prevention is included in the ONGOING staff development training	yes, optional no	yes, compulsory
52. Does your country require staff involved in drug prevention to be certified?	yes	no

Thank you for taking the time to complete this questionnaire.

Please save the completed questionnaire and send it by email to the Paris Pact Coordination Unit: paris-pact@unodc.org
