Capacity building

- assessments of prevention infrastructures

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Disposition

• Whole-of-community approaches – what characterises this approach (compared to specific school based programs)

• The problem of the ‘black box’ -- what happens in the community after data delivery and given recommendations and degree of involvement from Prevention model providers

• Importance of appropriate prevention structures and of capacity building

• Experiences from Sweden

• The assessment of prevention structures-capacity within the PY
Community prevention intervention work

Different models for local prevention work in Europe and USA. They differ but all have in common is that they focus on:

• the structure and organization

• mapping the actual situation

• working closely with local actors and

• that indicators should be locally grounded
Endurance – sustainability – a never ending cycle but improvements over time (a spiral)

Needs assessments – Alcohol and drug situation and the ongoing prevention work

Recommendations – improved structure, policy, mobilisation and appropriate actions

Implementation of methods/actions in the community
A big difference between specific programs and community approaches (prevention, promotion)

• School programs: follow closely a manual for each session – should be done more or less the same everywhere – fidelity, compliance

• Also easier to evaluate – RCT (gold standard), more difficult with communities in prevention interventions and promotion approaches

• Community work – the most successful includes several components – a whole-of-community approach: cannot be dictated in the same way...

• ...although generic basic components should always be included. More of a perspective – a process that takes time!
Capacity- infrastructure assessment

  • Assessing each country’s alcohol policy infrastructure (indicators on alcohol policy and interventions)

On the city level – Partnership for Healthy cities
  • The need to develop and implement indicators for monitoring and assessing city scale implementation of NCD policy

In the health promotion literature (more than the prevention literature)
  • Stresses the need to assess and improve local communities (municipalities) capacity in order to focus on health promotion structures
Steps in community prevention

Mapping – recommendations

Few years later: outcome - results
Steps in community prevention

Mapping – recommendations

Black box – what happened after the mapping/recommendations?

Output (good or bad) – due to the model?

Output - results

AOD use
Steps in community prevention

Mapping – recommendations

Was the recommendations followed?
- Unforeseen problems arising, barriers?

Often:
- Structural and organisational delays/hinders for implementation

Outcome - results

E.g. lack of communication of who does what, when, where and what resources are available
How deep should one dig?

- If 'no' involvement: only those already motivated will succeed. (Succeed anyway?)
- If external program providers do 'everything' – not sustainable, must be locally anchored.
- Most communities – in the middle - need some support, recommendations and concrete guidance and regular recurring feedback.
How deep one (project provides) dig?

From a black to a grey or white box

Mapping – recommendations

From black to white: capacity building: a joint work

Output - results
So – capacity building an important step all along the work – from needs assessments to implementation

Improvement in prevention structures (policies, coordination, resource allocation, program formulation, readiness...)

Higher likelihood of long-term sustainable work

Higher likelihood of successful implementation and successful outcomes
EDPQS (European Drug Prevention Quality Standards) (EMCDDA)

- 8 Dissemination and improvement
- 7 Final evaluation
- 6 Delivery and monitoring
- 5 Management and mobilisation of resources
- 4 Intervention design
- 3 programme formulation
- 2 Resource assessment
- CROSS-CUTTING CONSIDERATIONS
  - A: Sustainability and funding
  - B: Communication and stakeholder involvement
  - C: Staff development
  - D: Ethical drug prevention
The infrastructure (the capacity) does it matter?

- Yes – shown in several studies – those scoring higher on prevention index – better development of alcohol and harm rates (e.g. dissertation by Nilsson, 2019)

- Policy, mobilisation, resource allocation, program formulation (as important parts of effective prevention structures) – stressed in literature as important basic conditions for effective sustainable promotion and prevention interventions
Experiences from Sweden
**Prevention index scores – structure in 2017**

(min. 0 p, max 60 p) 263 out of 290
Swedish municipalities Different starting points for prevention

(Structural index sum of items on policies, cooperation, resources)

*Often:* updated policies and clear actions plans of who do what when and where. Political support and mandate. A shared vision of goals, good cooperation. Also implemented different prevention methods

*Often:* no policies and action plans, poor coordination, no steering group, lack of political commitment, no consensus of why prevention and of the problem picture
Experiences from Sweden – community intervention projects

• In all: strong focus of local ownership and local initiatives grounded on local conditions (but with clear and concrete recommendations from project leaders/researchers)

• For all of them improved structure and organisation – better equipped. Policy work been a necessity – steering documents as guiding principles

• Effectiveness studies (thus not evaluations of ideal project conditions) conducted in four: effects on drinking found in the three (Trelleborg, LUMA, STAD)

• All three of them: multi-components and one component being availability regulations
Alcohol prevention index scores for different community prevention trials in Sweden (Nilsson, Leifman & Andréasson, 2015)

Table 2. Total sum of the Alcohol Prevention Magnitude Measure (max=100 points) among municipal intervention projects and other municipalities, years 2006–2010.

<table>
<thead>
<tr>
<th>Year</th>
<th>Six community Trial</th>
<th>Small municipalities</th>
<th>Three times three</th>
<th>Local development with ambitions</th>
<th>Other municipalities (not included in intervention projects)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Points)</td>
<td>(Points)</td>
<td>(Points)</td>
<td>(Points)</td>
<td>(Points)</td>
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<tr>
<td>2006</td>
<td>70.20</td>
<td>58.05</td>
<td>55.25</td>
<td>54.68</td>
<td>57.49</td>
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<tr>
<td>2007</td>
<td>75.70</td>
<td>63.32</td>
<td>58.67</td>
<td>58.52</td>
<td>59.36</td>
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<tr>
<td>2008</td>
<td>72.40</td>
<td>69.00</td>
<td>62.00</td>
<td>58.86</td>
<td>61.07</td>
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<tr>
<td>2009</td>
<td>65.70</td>
<td>64.68</td>
<td>61.67</td>
<td>61.70</td>
<td>61.71</td>
</tr>
<tr>
<td>2010</td>
<td>64.40</td>
<td>67.66</td>
<td>63.83</td>
<td>64.77</td>
<td>60.66</td>
</tr>
</tbody>
</table>

* Intervention period.
An example: prevention index (0-100 p) in 13 municipalities in Östergötlands county in Sweden 2015

Big variations!
Prevention index, could change rather quickly, examples from some municipalities in 2011-2015
Assessment of prevention structure in Planet Youth
Capacity assessment

• How is your community prepared to take on prevention work?
• Questionnaire to take status of various factors related to prevention
• Advice will be given
• Monitor changes within the municipality over time
In the capacity building process: an important tool – a prevention structure assessment: a (web based) questionnaire

- Assessing the **infrastructure, organisation** – the degree of basic functions in place
- **Barriers**- **preparedness** – **awareness** among key stakeholders and community members
- **Availability** regulations -- always important
- **All these**: basic foundations needed before implementation of different prevention measures
- Forming sub-indexes for the different categories and a total prevention index

Why monitoring this?
1: As an input to a dialogue – as proactive indicators
2: For follow-up – what did happened - did the prevention structure improve? A kind of diagnostic check
3: Compliance with the components decided to be implemented
4: Wants to know what is happening –understanding the output in relation to the input
Thus

- Efficient prevention structure and capacity activities important
- Assessment – an important tool for this – creates a dialogue and better understanding of processes. **Room for improvements!**
- However, when it comes down to it: the only long-term sustainable change can only be achieved by the community itself
- Of course: no structures will change behaviours, but it may facilitate the implementation of prevention actions that do
Thank you!

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