

Implementing Methamphetamine Prevention Strategies into Action

IMPRESA

Presentations at international conference 'Lisbon Addictions 2022'

Work package 6:

Promotion of evidence-based methamphetamine prevention in Europe (Dissemination)

Deliverable 6.2

Work package lead:

Republican Centre for Addictive Disorders, Vilnius (RPLC)



Contributing consortium partners:

Centre for Interdisciplinary Addiction Research of the University of Hamburg (UKE/ZIS)



Akademia Pedagogiki Specjalnej (Maria Grzegorzewska University, Warsaw)



Department of Addictology, Charles University Prague (CUNI)



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Pracownia Badan I Inicjatyw Spoecznych Spolka z Ograniczona Odpowiedzialnoscia, Warsaw



Pavol Jozef Safarik University, Kosice (UPJS)



Vilnius/Hamburg, 30.11.2022



Co-funded by the European
Union's Justice Programme –
Drugs Policy Initiatives

Structured session/workshop section	
Title	Implementing Methamphetamine Prevention Strategies into Action (IMPRESA)
Chair	Marcus-Sebastian Martens, Centre for Interdisciplinary Addiction Research, University of Hamburg (ZIS), Hamburg Germany
Chair's e-mail	martens@uni-hamburg.de
Aim	<p>Methamphetamine use is spreading in the EU, whereas prevention efforts remain limited and inconsistent.</p> <p>Moreover, we lack a sound understanding what works, in which context, when and specifically for whom, when it comes to tackling methamphetamine use.</p> <p>This multidisciplinary symposium aims to provide an in-depth understanding of the translation processes of best-practice prevention of methamphetamine use related problems. It therefore supports the DG JUSTICE work programme priority of “practical application of drug-related research, and, in particular, addiction research with a view of addressing current challenges and new threats”. Furthermore it addresses action no. 29b of the EU Action Plan on Drugs 2017-2020 aiming to “strengthen the cooperation to tackle the rising trend of stimulant addiction, in particular methamphetamine....., focusing on creating and sharing best practices in preventing the spread from local epidemics”.</p> <p>In order to reduce methamphetamine related harm across Europe and to contribute to preventing a further spread of the methamphetamine epidemic, the symposium will present an effective knowledge transfer model for all affected regions in the EU which</p> <ul style="list-style-type: none"> a) synthesises the latest evidence on methamphetamine use prevention for the selection of the most adequate evidence-based prevention strategies, b) establishes multi-stakeholder partnerships (incl. local authorities, researchers and civil society stakeholders, e.g. service providers and users) in five highly affected EU cities in Czech Republic, Slovakia, Germany, Poland and Lithuania to drive the design, implementation and assessment of intervention packages to prevent methamphetamine use problems c) tailors and implements best practice strategies to prevent problems related to methamphetamine use in the five EU pilot cities and d) evaluates translation processes and public health impact of the tailored intervention packages and disseminates results and guidance. <p>No pharmaceutical grants were received in the development and conduction of this study. This work was supported by the EU Grant number: 957715 — IMPRESA — JUST-2019-AG-DRUGS</p>

Presentation section	
Presentation 1	Aims, scope and methodology of IMPRESA

Authors	<p><u>Dovilė Mačiulytė</u>⁶, Benjamin Petruželka³, Magdalena Rowicka⁴, Ondrej Kalina², Uwe Verthein¹</p> <p>¹ Centre for Interdisciplinary Addiction Research, University of Hamburg ² Pavol Jozef Šafárik University in Košice ³ Charles University, Prague ⁴ The Maria Grzegorzewska University, Warsaw ⁶ Republican Centre for Addictive Disorders, Vilnius</p>
Presenter's e-mail	dovile.maciulyte@rplc.lt
Introduction/ issues <u>OR</u> Introduction and aims	<p>IMPRESA is a multidisciplinary, participative project aiming to provide an in-depth understanding of the translation processes of best-practice selective and indicated prevention programmes as well as harm reduction addressing methamphetamine related problems in Europe. The project uses multi-stakeholder partnerships (MSPs) in five European countries for selection, development and tailoring of best-practice prevention interventions.</p> <p>The RE-AIM framework is employed to evaluate implementation outcomes and their public health impact. By drawing on implementation science, the project goes beyond the question of “what” works and provides a deeper understanding of “how” such interventions work, and for “whom”. Therefore it provides new insights on which areas to focus for maximum effect when implementing prevention programmes for methamphetamine use more effectively across Europe.</p> <p>This project uses cities for the implementation of case studies, as local ideas for best-practice implementation can be intensively tested within cities, leading to the generation of a set of context-sensitive strategies. Cities have an active role in health and prevention programmes and provide the needed key infrastructural components and relationship architectures for reaching the target group (e.g. clubs, youth services, schools). City-based MSPs can be replicated in order to scale-up best practice in affected cities and regions across Europe.</p> <p>The general objective of the project is to prevent problems related to methamphetamine use in Europe by establishing MSPs on the effective translation of best-practice strategies in “real world” settings.</p>
Method/ approach <u>OR</u> Design and methods	n/a
Key findings <u>OR</u> Results	n/a
Conclusions	Methodology, Aims and scopes of IMPRESA are presented to the audience

Presentation 2	Results of the literature review and the Delphi expert consensus finding process on Methamphetamine Prevention Interventions
Authors	<p><u>Benjamin Petruželka</u>³, Miroslav Barták³, <u>Moritz Rosenkranz</u>¹, Magdalena Rowicka⁴, Jozef Benka², Ausra Sirvinskiene⁶</p> <p>¹ Centre for Interdisciplinary Addiction Research, University of Hamburg ² Pavol Jozef Šafárik University in Košice ³ Charles University, Prague ⁴ The Maria Grzegorzewska University, Warsaw ⁶ Republican Centre for Addictive Disorders, Vilnius</p>
Presenter's e-mail	Benjamin.Petruzelka@lf1.cuni.cz
Introduction and aims	On specific objective of IMPRESA is to synthesize the latest evidence in order to select the most adequate evidence-based selective and indicated prevention strategies as well as harm reduction measures for different target groups of (potential) methamphetamine users.
Method/ approach OR Design and methods	<p>A scientific review of the relevant literature published in peer reviewed journals as well as a mapping of national prevention activities already in place (in the five IMPRESA countries) was undertaken. Electronic databases (MEDLINE, PSYINDEX, EMBASE, etc.) were searched, using appropriate keywords and inclusion / exclusion criteria to identify eligible studies.</p> <p>An online questionnaire with short descriptions of the interventions identified in the literature review, their setting and target group served as the input for a Delphi expert consensus finding process.</p>
Key findings OR Results	<p>N=1362 literature records were screened, selected, quality appraised and finally 20 relevant studies were extracted, synthesized and summarized. The country-specific mapping led to 27 eligible prevention/harm reduction measures. Both were combined in a list containing 47 good practice, evidence-based selective prevention strategies, indicated methamphetamine use/misuse interventions and harm reduction measures.</p> <p>36 national and international (European) experts took part in a two-round Delphi process. After two rounds 41 out of 47 interventions/measures (87%) reached consensus.</p>
Conclusions	The results represent a sound basis to serve as a source for the MSPs.

Presentation 3	Development of tailored prevention intervention packages
Authors	<p><u>Magdalena Rowicka</u>⁴, Harald Lahusen¹, Benjamin Petruželka³, Ondrej Kalina², Dovilė Mačiulytė⁶</p> <p>¹ Centre for Interdisciplinary Addiction Research, University of Hamburg ² Pavol Jozef Šafárik University in Košice ³ Charles University, Prague ⁴ The Maria Grzegorzewska University, Warsaw ⁶ Republican Centre for Addictive Disorders, Vilnius</p>
Presenter's e-mail	magda.rowicka@psych.uw.edu.pl
Introduction	A further specific objective of IMPRESA is to establish multi-stakeholder partnerships (MSPs) on methamphetamine use prevention in five European cities. These MSPs are in charge of developing and tailoring the most adequate methamphetamine prevention strategies according to the specific needs and resources
Method/ approach	<p>Multi-stakeholder partnerships are established to select the best practice strategies for each city. The selection is based on an assessment of the city-level delivery context which comprises the following elements:</p> <ul style="list-style-type: none"> • Survey among people who use methamphetamine on their needs and service utilisation • Survey among professional stakeholders on perceived needs and barriers in methamphetamine prevention and harm reduction • Secondary data assessment on the local implementation context
Results	Results of the selection process and key findings of the assessments in the five cities are presented.
Discussions	Experiences in applying these methods and possible improvements are discussed.

Presentation 4	The RE-AIM framework for evaluating implementation processes and public health impact
Authors	<p><u>Harald Lahusen</u>¹, Janusz Sieroslawski⁵, Miroslav Barták³, Ondrej Kalina², Dovilė Mačiulytė⁶</p> <p>1 Centre for Interdisciplinary Addiction Research, University of Hamburg 2 Pavol Jozef Šafárik University in Košice 3 Charles University, Prague 5 Pracownia Badan I Inicjatyw Społecznych Spolka z Ograniczona Odpowiedzialnoscia, Warsaw 6 Republican Centre for Addictive Disorders, Vilnius</p>
Presenter's e-mail	harald.lahusen@uni-hamburg.de
Introduction	IMPRESA employs the RE-AIM framework to assess the impact of tailored intervention packages on the prevention and harm reduction of methamphetamine use related problems among the target groups.
Method/ approach OR Design and methods	IMPRESA uses quantitative routine service and assessment data to evaluate the dimensions of Reach, Effectiveness and Adoption and semi-structured interviews including open questions with policy makers, providers/practitioners and the target group to gain qualitative and quantitative insights into the implementation of the interventions in “real world” settings and their potential for sustainability over time. A mixed-methods evaluation framework matches key evaluation questions for each dimension of RE-AIM with selected indicators and measures.
Key findings	The study specific RE-AIM evaluation tools and interim results are presented.
Discussions	Chances and limitations of the RE-AIM framework to measure and improve the generated public health impact

Discussion Section (optional)	
Title	The structured session will conclude with a panel Q&A session where participants will be asked which implications, conclusions and recommendations can be derived from the results for health professionals, researchers and policy makers
Chair	Jozef Benka, Pavol Jozef Šafárik University in Košice, Slovak Republic
Chair's e-mail	jozef.benka@upjs.sk



14:50

Break

14:50 to 15:00

15:00

A global symposium on the renaissance and promise of psychedelics for mental and substance use disorder treatment

15:00 to 16:30 Main stage

Johannes Thrul

Alcohol epidemiology and interventions

15:00 to 16:30

Networking zone 3 (N3)

Antoni Gual

Client-centered approaches

15:00 to 16:30 Central square 3 (C3)

Katrin Schiffer

Drug and alcohol treatment

15:00 to 16:30

Networking zone 1 (N1)

Tomi Lintonen

Drug deaths: A social, structural and systems analysis

15:00 to 16:30

Knowledge market 1 (K1)

Susanne MacGregor

Implementing Methamphetamine Prevention Strategies into Action (IMPRESA)

15:00 to 16:30

Knowledge market 4 (K4)

Marcus-Sebastian Martens

Implementing Methamphetamine Prevention Strategies into Action (IMPRESA)

📍 KNOWLEDGE MARKET 4 (K4)

IN PROGRAMME

Thursday, 24 November, 2022 - 15:00 to 16:30

[View presentations](#)

Chair



Martens Marcus-Sebastian
University of Hamburg, Germany

Type

STRUCTURED SESSION

Tracks

About

Methamphetamine use is spreading in the EU, whereas prevention efforts remain limited and inconsistent. Moreover, we lack a sound understanding what works, in which context, when and specifically for whom, when it comes to tackling methamphetamine use. This multidisciplinary symposium aims to provide an in-depth understanding of the translation processes of best-practice prevention of methamphetamine

work programme priority of “practical application of drug-related research, and, in particular, addiction research with a view of addressing current challenges and new threats”. Furthermore it addresses action no. 29b of the EU Action Plan on Drugs 2017-2020 aiming to “strengthen the cooperation to tackle the rising trend of stimulant addiction, in particular methamphetamine....., focusing on creating and sharing best practices in preventing the spread from local epidemics”. In order to reduce methamphetamine related harm across Europe and to contribute to preventing a further spread of the methamphetamine epidemic, the symposium will present an effective knowledge transfer model for all affected regions in the EU which a) synthesises the latest evidence on methamphetamine use prevention for the selection of the most adequate evidence-based prevention strategies, b) establishes multi-stakeholder partnerships (incl. local authorities, researchers and civil society stakeholders, e.g. service providers and users) in five highly affected EU cities in Czech Republic, Slovakia, Germany, Poland and Lithuania to drive the design, implementation and assessment of intervention packages to prevent methamphetamine use problems c) tailors and implements best practice strategies to prevent problems related to methamphetamine use in the five EU pilot cities and d) evaluates translation processes and public health impact of the tailored intervention packages and disseminates results and guidance. No pharmaceutical grants were received in the development and conduction of this study. This work was supported by the EU Grant number: 957715 — IMPRESA — JUST-2019-AG-DRUGS

Keywords

PREVENTION

TREATMENT

PUBLIC HEALTH

Presentations

Thursday, 24 November

15:00

Oral presentation

1. Aims, scope and methodology of IMPRESA

15:00 to 16:30 Knowledge market 4 (K4) Dovilė Mačiulytė

Oral presentation

2. Results of the literature review and the Delphi expert consensus finding process on Methamphetamine Prevention Interventions

15:00 to 16:30 Knowledge market 4 (K4) Benjamin Petruželka

Oral presentation

3. Development of tailored prevention intervention packages

15:00 to 16:30 Knowledge market 4 (K4) Magdalena Rowicka

Oral presentation

4. The RE-AIM framework for evaluating Implementation processes and public health Impact

15:00 to 16:30 Knowledge market 4 (K4) Harald Lahusen

[← Previous session](#)

[View the programme](#)

[Next session →](#)

IMPRESA – AIMS, SCOPE & METHODOLOGY

Dovilė Mačiulytė, Benjamin Petruželka, Magdalena Rowicka,
Ondrej Kalina, Uwe Verthein

Lisbon Addictions 2022

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IMPRESA project overview

Why?

Who?

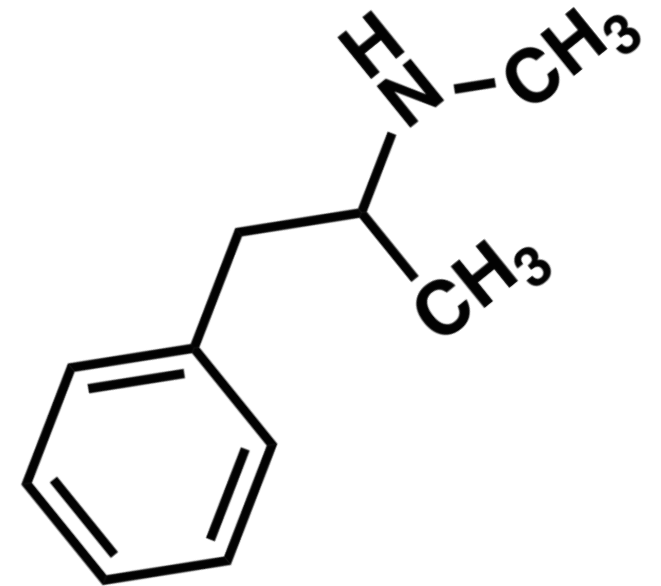
What?

How?

Where?

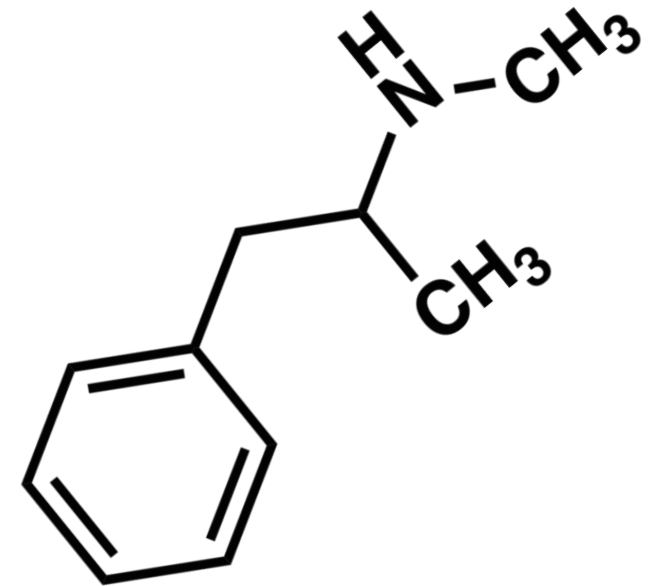
Why was there a need for IMPRESA project within the EU context?

- Popular drug in some countries for decades (Czechia, Slovakia) but there are signals that methamphetamine availability and use in EU are increasing (57 city wastewater analysis for 2020 and 2021, 26 reported an increase).
- Surveys (2016-2021) in 25 EU countries - 1.4 million young adults (15–34) used ATS in LY. High-risk methamphetamine use in Czechia 4.84 per 1 000 populations, 2.8/1000 – Slovakia.
- In Czechia, Germany, Slovakia and Turkey treatment entrants (9400) report methamphetamine as their main problem drug.



Why was there a need for IMPRESA project within the EU context?

- Problematic use poses serious health risks to the individual and the public (cardiovascular disease, addiction, infectious disease, economic burden and etc.)
- Lack of clear guidance on the best prevention and harm reduction practices.
- Can what is effective in theory translate into effective practices?



IMPRESA

Implementing
Methamphetamine
Prevention
Strategies into
Action

Implementation period: 2021-2022
(extension – June 2023)

Budget: 695 728.98 EUR

Co-funded by the European Union's
Justice Programme – Drugs Policy
Initiatives

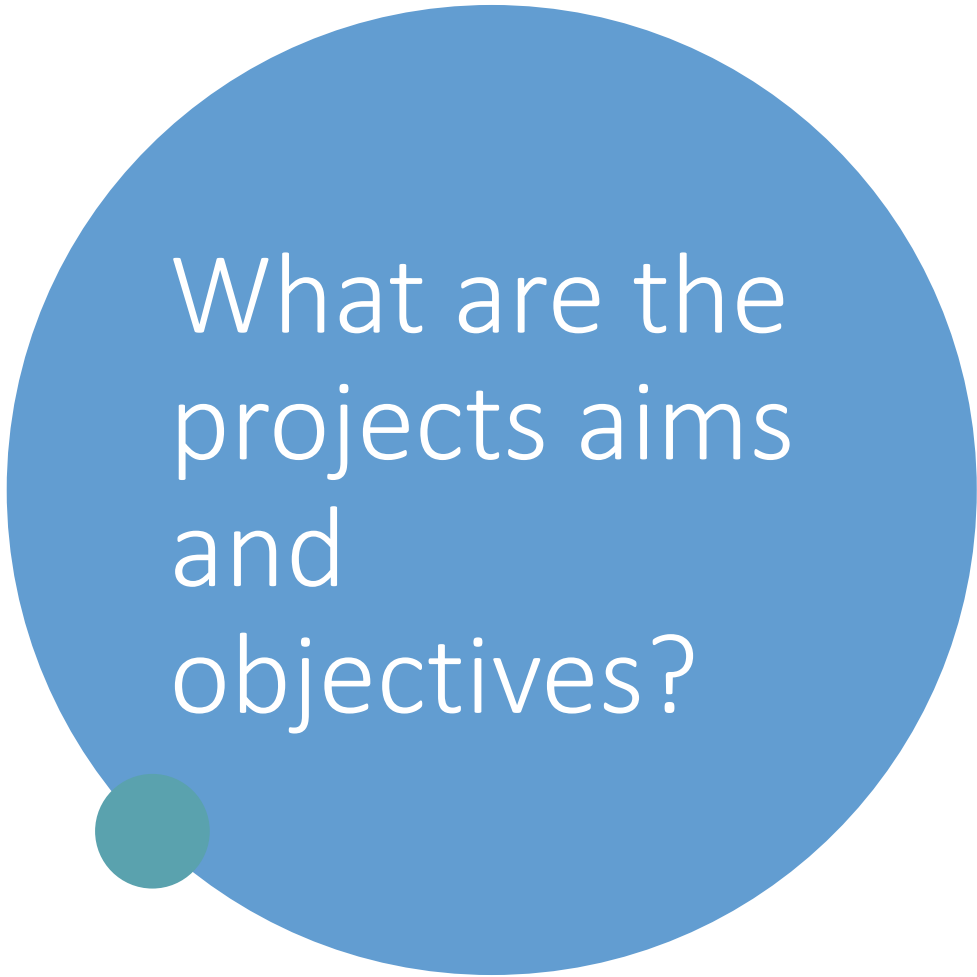
Who are the members of IMPRESA consortium?

5 countries with high methamphetamine availability and use:

Germany (coordinator), Poland, Czech Republic, Slovakia and Lithuania

- Centre for Interdisciplinary Addiction Research and University of Hamburg (Germany)
- Pavol Jozef Šafárik University (Slovakia)
- Charles University (Czech Republic)
- The Maria Grzegorzewska University and PBIS (Poland)
- Republican Centre for Addictive Disorders (Lithuania)

Organizations from countries with methamphetamine use and representing educational and addiction treatment sectors



What are the projects aims and objectives?



Aim - to reduce methamphetamine use related harm in Europe

Objective - provide an in-depth understanding of the how best-practice prevention and harm reduction interventions for methamphetamine use can be translated into action (practical application of research).

How – the methodology overview

RESEARCH

Learning what is effective?

IMPLEMENTATION

of selected interventions
in 5 cities
(Chemnitz, Prague,
Kosice, Warsaw and
Vilnius)

ADAPTATION

Forming local
multistakeholder
partnerships (MSP)

EVALUATION

using RE-AIM tool

Activity 1 – Literature review and evidence synthesis

- Systematic literature review - analyzing the latest evidence-based prevention and harm reduction interventions
- Delphi expert consensus process



Results:

- A systematic literature review
- A ranked list of effective prevention and harm reduction practices

Activity 2 - Development of tailored prevention intervention packages

- Forming local multistakeholder partnerships
- Review of local city-level context
- Conducting a RE-AIM planning tool informed electronic surveys
- Selecting best practice strategies for each five cities
- Production of tailored city-level intervention strategies



Results:

- 5 narrative reports about the local city context based on desk review and RE-AIM informed survey
- 5 intervention packages tailored for 5 cities

Activity 3 - Implementation of tailored prevention intervention packages

- Production of city-level intervention protocols
- Preparation of the implementation including recruitment and training of providers
- Implementation
- Data monitoring processes



Results:

- A protocol for the implementation of tailored city intervention packages for each city
- A set of training and intervention materials and assessment tools for each city

Activity 4 - Evaluation of implementation processes and public health impact

- Assessing the impact: reach, effectiveness, adoption, implementation and maintenance
- Mixed-methods data integration
- City case study reports
- Context specific recommendations and conclusions



- Results:
- 5 city case study reports on implementation outcomes
 - A guidance document on local implementation
 - A policy brief on effective methamphetamine prevention strategies in local settings

Where are we within IMPRESA timeframe?

Activity 1 – Literature review and evidence



Activity 2 - Development of tailored prevention intervention packages



Activity 3 - Implementation of tailored prevention intervention packages



Activity 4 - Evaluation of implementation processes and public health impact



Expected published results by June 2023

The logo for IMPRESA, featuring the word "IMPRESA" in a bold, blue, sans-serif font. Above the letters "I", "M", "P", and "R" are two rows of blue dots.

Implementing Methamphetamine
Prevention Strategies into Action

Thank you for your time

Dovilė Mačiulytė, Benjamin Petruželka, Magdalena Rowicka,
Ondrej Kalina, Uwe Verthein

Lisbon Addictions 2022

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DISORDERS



Co-funded by the European
Union's Justice Programme –
Drugs Policy Initiatives

IMPRESA WP2: Evidence on methamphetamine use prevention

WP2 working group: Benjamin Petruželka, Miroslav Barták , Moritz
Rosenkranz, Dovilė Mačiulytė, Magdalena Rowicka, Jozef Benka

What was our objective?

- to **synthesize the latest scientific evidence on methamphetamine use prevention**
- **determine** the most adequate **evidence-based** selective and indicated prevention **strategies** as well as harm reduction measures for different target groups of (potential) **methamphetamine users**
- the results of the synthesis and expert evaluation provided the **evidence for tailoring preventive measures**

How did we accomplish our objective to synthesize the latest evidence?

- Review of the literature (systematic review and mapping of national prevention activities)
- List of identified prevention activities
- International delfi expert consensus finding process

Systematic review of the literature

International review in English and review in national language

International review in English

- **Interventions of interest included** those related to the efficacy of prevention interventions who aim to **prevent methamphetamine use of members of risk groups** (selective prevention) and **interventions which address methamphetamine users who already show risky consumption patterns** (indicative prevention and harm reduction).
- **Protocol** was set up (for example some further criteria were established, language: english; location: worldwide; publication date: from year 2000 onwards)
- **search: seven established scientific databases** (Medline (PubMed) (Ovid), PsycInfo (Ovid), PSYINDEX (Ovid), Cochrane Drugs and Alcohol Group's Trials Register, Web of Science Core Collection, CINAHL (EBSCO), and SocIndex (EBSCO))
- **selection: de-duplicated and** screened by title and abstract and non-eligible results were removed, **full texts** of the remaining references were **checked in-depth for eligibility** and a final selection of publications to be included in the review

Review in national languages

- To include studies published only in the **respective national languages** of each IMPRESA partner country
- To search in the national databases with the search **strategy adapted from the international review**
- 27 hits (CZ: 4, PL: 10, SK: 8, LT: 4, DE: 1)
 - **none of them turned out to be eligible**

Mapping of the national prevention activities

Methods

Mapping of the national prevention activities

- **Country specific mapping protocols** were created
- **Grey literature search** (thesis, reports etc.)
- Only **evaluated prevention programs were included**
- Each prevention measure was assessed by two independent reviewers regarding quality rating/level of evidence with the **EDDRA quality grid**

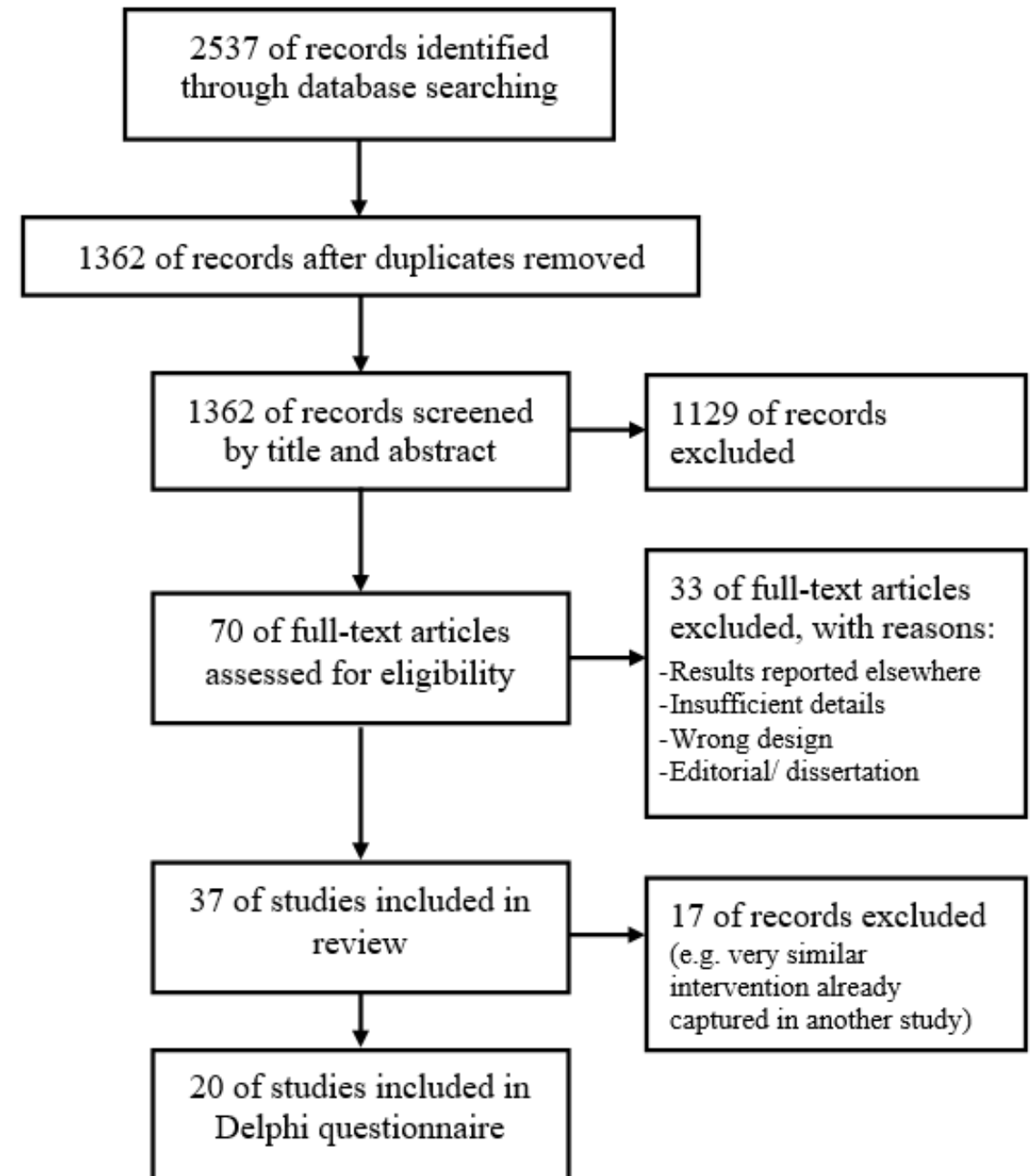
Results of the literature review and mapping

Results of the literature review

- **20 out of 37** studies were selected for the delfi survey.
- The reduction was due to the fact that some interventions did not fit the purpose of the project and that some studies examined the effectiveness of very similar interventions.

Identification
Screening
Eligibility
Included

Figure 1: Flow chart



Results of the literature review and mapping:

Overview of the numbers of measures/ interventions

- The **majority of measures** are **indicated prevention** measures (N=18)
- **Selective prevention measures** (N=6) form the **smallest group** of interventions.

Country (mapping)	SEL	IND	IND + SEL	SEL, IND, HR	HR	TOTAL
CZ	3	1	0	2	3	9
SK	1	1	0	0	0	2
PL	0	1	1	0	2	4
LIT	0	0	0	0	5	5
DEU	1	3	0	2	1	7
Total mapping	5	6	1	4	11	27
Literature review	1	12	0	5	2	20
TOTAL	6	18	1	9	13	47

Delfi expert consensus finding
process

Delfi expert consensus finding process

- Experts were asked about the **effectiveness of identified interventions** and our aim was to reach a **consensus on effectivity of given interventions**
- the interventions (as a list of statements) were administered to the expert's panel via online questionnaire in two rounds.
- After first round the responses were analyzed and sent to the experts for the second round (if there was no consensus reached) while the experts were provided with the results of evaluation

Characteristics of expert panel

- In **both rounds of the delfi**, a total of **36 experts** completed the questionnaire
- most experts had an education status higher than a master degree
- Experts had average of more than 11 years of work experience
- experts had **adequate education and work experience**
- More than half of the experts specific expertise in methamphetamine prevention
- specific expertise in methamphetamine prevention might be rare in the European context (except for Czech Republic and Slovakia)
- **reasonable coverage of experts with specific expertise**

		N	%
Gender	Female	20	56
	Male	16	44
Age	21 to 30	5	14
	31 to 40	5	14
	41 to 50	14	39
	51 to 60	7	19
	61 or older	5	14
Educational	Bachelor	3	8
	Master	18	50
	Doctoral	15	42
Expertise in methamphetamine	Yes	22	61
	No	14	39
Years of work experience in substance use and addiction	5 to 10	12	33
	11 to 20	14	39
	21 to 30	9	25
	31 and more	1	3
Field of expertise	Prevention	23	64
	Harm reduction	20	56
	Research	16	44
	Treatment/counselling	15	42
Country	SK	9	25
	PL	7	19
	DE	7	19
	CZ	5	14
	LT	3	8
	International	5	14

Analysis of delfi process

- A separate **analysis was conducted after the first and second round of delfi** (in the second round, we used a slightly different algorithm because the “neither agree, nor disagree” option was not provided anymore)
- the **rate of (dis)agreement** (percentage of experts)

$$\text{Rate of disagreement} = \frac{N_{\text{strongly disagree}} + N_{\text{disagree}}}{N_{\text{strongly disagree}} + N_{\text{disagree}} + N_{\text{neither agree, nor disagree}} + N_{\text{agree}} + N_{\text{strongly agree}}} \times 100$$

- a **consensus** existed if the rate of agreement was **$\geq 80\%$ of informants**
- Based on the rate of agreement, we allocated the interventions to the following groups:
 1. **positive consensus,**
 2. **negative consensus,**
 3. **no consensus.**

Results of the consensus

- In the **first round** the experts did **not reach consensus on 45 %** of interventions and **consensus was positive in all cases**.
- The 21 interventions with no consensus in the first round were presented to the experts in the second round.
- In this **second round** the experts did reach **consensus on 15 of the remaining interventions**
- **In total** (combined results from both rounds), a **consensus was not reached on 6 out of 47 interventions (13 %)**.

	First round		Second round		Total	
	N	%	N	%	N	%
Positive consensus	26	55	15	71	41	87
Negative consensus	0	0	0	0	0	0
No consensus	21	45	6	29	6	13
Total	47	100	21	100	47	100

Results of the consensus

- There was no consensus on:
 - a) one intervention in selective prevention (16 %),
 - b) four in indicated prevention (22 %),
 - c) and one in harm reduction (7 %).
- There was agreement on all mixed interventions.

Selected results

- SEL: **A positive consensus of 97%** was achieved for three interventions, namely **Motivational interviewing focused on reducing club drug use**, **SKOLL** (Early intervention focused on risky users (methamphetamine included) or those who want to prevent relapse) and **Brief intervention** consisting of motivational interviewing and cognitive behavior therapy.
- SEL: The lowest agreement among the experts was on the **Conditional cash transfer and microenterprise opportunity** for amphetamine-type stimulants using female entertainment workers and the **School based preventive brief intervention program** focused on drug use.
- IND: The lowest rate of agreement (76%) was on a **prevention program in schools based on a screening questionnaire** (Substance Use Risk Profile Scale). There was **no consensus on this one intervention**.
- IND: The **lowest level of agreement was found for a periodical booklet** providing information for methamphetamine users, which there was also no consensus on.
- MIXED: Three interventions were **on-line based**: on-line counselling, on-line forum and automated web-based intervention. There was positive consensus on these interventions.

Conclusion

Conclusion

- **The evidence base especially in the field of selective and indicated prevention should be extended** – selective prevention measures (N=6) form the smallest group of interventions.
- The systematic literature review as well as the mapping of national measures yielded a **set of evidence based interventions**.
- The additional experts' opinion allowed for further selecting and ranking effective measures and for setting up a ranked list
- **The list of interventions was provided to members of the local multi stakeholder partnership (MSP) board.**
- This allowed the MSP members to discuss different possible measures to be implemented and in the end served as a basis for choosing measures which fit the local needs.

Development of tailored prevention intervention packages (WP3)

Magdalena Rowicka¹, Harald Lahusen, Benjamin Petruželka, Ondrej Kalina, Dovilė Mačiulytė

¹ Magdalena Rowicka, Institute of Psychology, The Maria Grzegorzewska University
mrowicka@aps.edu.pl

Project website (in Poland): www.impresa.link/projekt



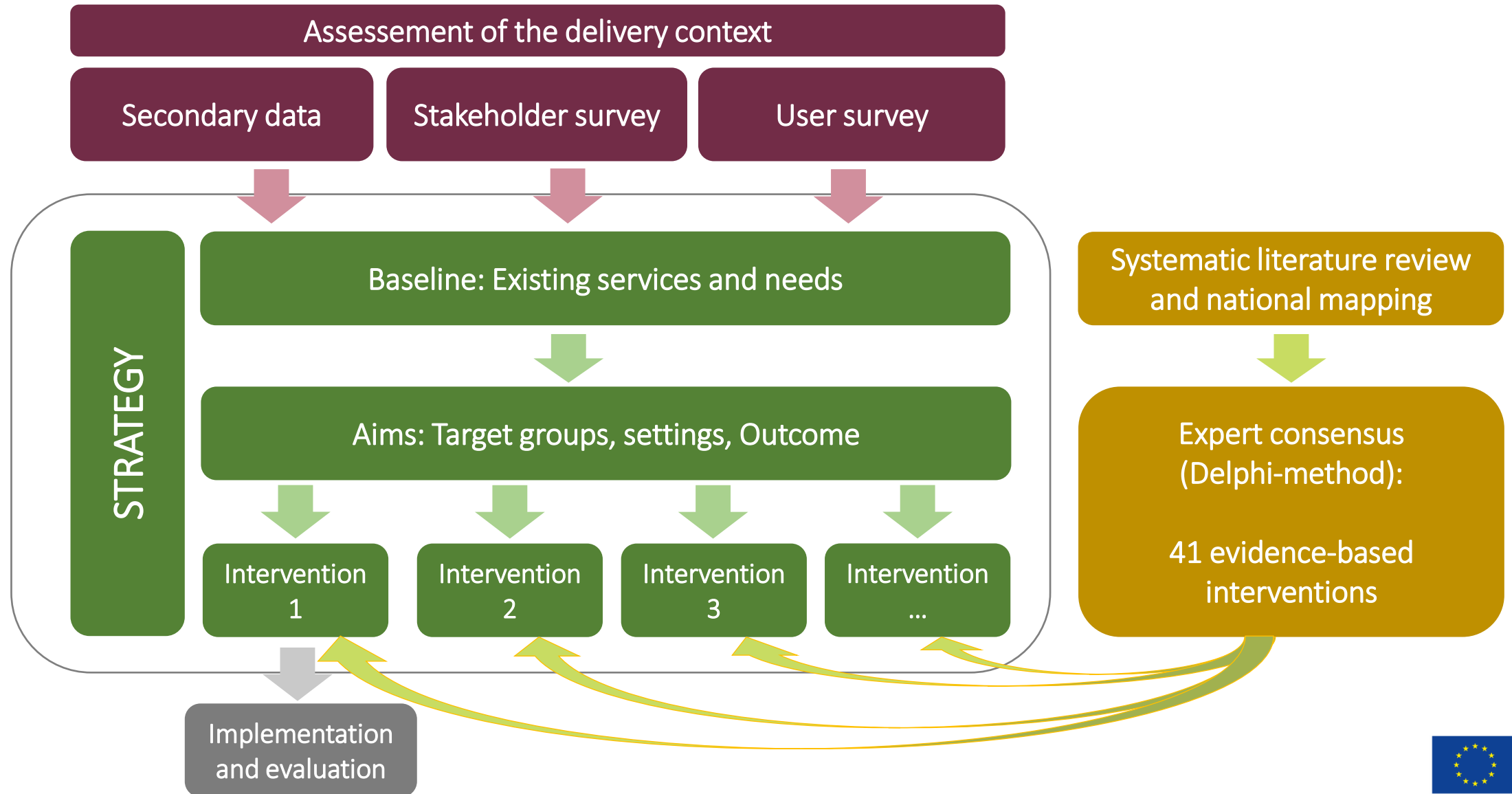
The Maria Grzegorzewska
University
1922–2022

Ministry of Education and Science
Republic of Poland



Co-funded by the European
Union's Justice Programme –
Drugs Policy Initiatives

Multi-
Stake-
holder-
Partner-
ship
(MSP)



Assessment of the delivery context

Stakeholder survey

1. Estimated size and characteristics of illicit drugs / methamphetamine users
 2. Needs of people who use methamphetamine
 3. Methamphetamine-related harms
 4. Institutional reach
 5. Barriers to reach people who use methamphetamine
 6. Facilitators in reaching people who use methamphetamine
 7. Availability and effectiveness of prevention and harm reduction services
 8. Inter institutional cooperation
-

Assessment of the delivery context

User survey

1. Substance use
 2. Sociodemographic characteristics
 3. Estimated size of illicit drugs / methamphetamine users
 4. Needs of people who use methamphetamine
 5. Availability of prevention and harm reduction services
-

Estimated size and characteristics of illicit drugs / methamphetamine users (stakeholders' perspective)

Country - city	illicit drugs users ¹	methamphetamine users ²	females
Czechia - Prague	12 250	11 000	30%
Germany - Chemnitz	4 000	2 000	30%
Lithuania - Vilnius	10 000	6 000	30%
Poland - Jelenia Gora	3 000	2 000	40%
Slovakia - Kosice	3 000	900	30%

¹ What do you think, roughly how many people who use illicit drugs (so called “hard drug users”, excluding cannabis) live in your city?

² What do you think, roughly how many people who use methamphetamine are among these in your city?





Service availability and needs in Chemnitz

	Service availability according to secondary data assessment	Existing service needs/gaps according to stakeholder survey	Existing service needs/gaps according to user survey
Selective Prevention	<ul style="list-style-type: none">Kindergarden and school programs	<ul style="list-style-type: none">Cooperation with inpatient youth services	
Indicated Prevention	<ul style="list-style-type: none">Counselling for young drug users, families and pregnant women as well as homeless peopleLow-threshold centers	<ul style="list-style-type: none">(Family-oriented) Outreach work	
Harm Reduction	<ul style="list-style-type: none">Limited needle and syringe provisionSafer nightlife volunteer initiatives	<ul style="list-style-type: none">Safer nightlife interventionsDrug checking services	<ul style="list-style-type: none">Drug checking servicesSafer Nightlife interventionsInformation on controlled use of illicit drugsInformation on Safer Use



Prevention Strategy for Chemnitz

Target groups	Settings	Interventions
Young people (e.g. with low socioeconomic status)	Nightlife	Harm reduction and health promotion in nightlife settings
Families and pregnant women	Hospital	Integrative care in maternity clinics (indicated prevention)
(Young) Individuals with multiple problems	<ul style="list-style-type: none">• Inpatient youth services• Streets	<p>Selective prevention in inpatient youth services</p> <p>Outreach work for sex workers (harm reduction)</p>
Prison inmates	Prison	Brief intervention for prison inmates (indicated prevention)



Activities promoting safer nightlife in Chemnitz

AIM:

Raising awareness of safer use and harm reduction for methamphetamine and other stimulants among club owners and partygoers.

TARGET GROUP:

Primary: people (+18 years) who attend music clubs (party-goers) and use stimulants (especially methamphetamine) or consider doing so.

Secondary: club owners and peers implementing safer nightlife activities.

INTERVENTION:

Activity 1: Involvement of club owners in safer nightlife activities

Activity 2: Information talks with party-goers by trained peers during club events

Activity 3: Distribution of safer use kits and information flyers on safer snorting and support services by trained peers during club events





Service availability and needs Vilnius

Service availability according to secondary data assessment	Existing service needs/gaps according to stakeholder survey	Existing service needs/gaps according to user survey
<ul style="list-style-type: none">• Harm reduction services are being provided by 13 low-threshold cabinets and one mobile clinic around the country• No stimulant use specific prevention or harm reduction activities presently exist.	<ul style="list-style-type: none">• job seeking• accommodation• social security issues	<ul style="list-style-type: none">• health services• free HIV/HCV testing and consulting• legal services

discrepancy

Prevention and harm reduction activities should focus on education and information about the availability of services and harm reduction practices.



Prevention strategies in Vilnius

Target groups	Settings	Interventions
People who use psychoactive substances and/or are interested in use of them	Nightlife, low-threshold cabinets, general community	Website with evidence-based information about various psychoactive substances
Men who have sex with men and use psychoactive substances in recreational settings	Out patient treatment centers, drop in centers	Motivational interviewing focused on reducing club drug use
Individuals experimenting with and/or using psychoactive substances in recreational settings	Music festivals Bars Nightclubs	<ul style="list-style-type: none">• Peer-to-peer consultations• Educational initiative (consultations and leaflets)• Psychological support to those feeling unwell during the event• Drug checking services



Activities promoting safer nightlife at festivals in Vilnius



AIM:

Raising awareness of the risks among recreational users of psychoactive substances about the use of methamphetamine (and other stimulants) and harm reduction.

TARGET GROUP:

- Primary: people who attend music festivals and use stimulants (and other psychoactive substances).
- Secondary: music festival goers who are MSM (men who have sex with men) and who use psychoactive substances.

INTERVENTION:

1. educational lecture about safer chemsex practices and
2. drug checking services provided at music festivals in Lithuania





Service availability and needs in Prague

Service availability according to secondary data assessment	Existing service needs/gaps according to stakeholder survey	Existing service needs/gaps according to user survey
<ul style="list-style-type: none">• low-threshold centers and outreach programs, outpatient treatment, substitution treatment, outpatient aftercare and housing. Two services are in category of day care center, detoxification and an inpatient healthcare facility.• There are 10 educational and psychological counseling centers and 6 educational care centers, 14 general prevention programs, 6 selective prevention programs and 1 indicated prevention program	<ul style="list-style-type: none">• social support,• family support,• health needs• harm/risk reduction needs.	<ul style="list-style-type: none">• psychological counseling and treatment,• health care,• free sterile injection equipment and free counseling• testing for HIV and hepatitis C.



Activities promoting safer nightlife in Prague

AIM:

Raising awareness of the risks related to methamphetamine use and motivating to reduce use or harm caused by stimulants (activity 1) and chemsex (activity 2).

TARGET GROUP:

1. Individuals (+18 years) using stimulants in night-life setting (activity 1)
2. individuals from the LGBTI+ group or with experience of chem-sex (activity 2).

INTERVENTION:

The (chem-sex) harm reduction intervention is focused on providing harm-reduction information about (chem-sex) to the participants in the form of leaflet or verbally. This is supported by providing harm-reduction materials



Service availability and needs in Košice

Service availability according to secondary data assessment	Existing service needs/gaps according to stakeholder survey	Existing service needs/gaps according to user survey
<ul style="list-style-type: none">• Domination of universal prevention, followed by selective and indicated prevention services;• Harm reduction services are missing	<ul style="list-style-type: none">• MSP identified three main needs related to the family, social and health domains (e.g. counselling services dealing with family problems of the users, health care services, social services)• Major gap - missing of continuous harm reduction services	<ul style="list-style-type: none">• psychological counselling and treatment,• crisis intervention



Prevention strategies in Košice

Target groups	Settings	Interventions
<ul style="list-style-type: none">youth - under 18, students, young adults,	universities, campuses	<ul style="list-style-type: none">Psychosocial skills training
<ul style="list-style-type: none">people with psychological difficultiesmanual workers, people with a high workloadpeople with low income and low social status, unemployed,participants in some cultural and entertainment events where there is a high level of availability and at the same time a low level of control	private places private parties festivals	<ul style="list-style-type: none">Prevention aimed at risky users – motivation interviewDrop – in centres.Centers providing clean and safe material (needles, syringes), accessible directly in the field or mobile drop-in centers.

Evidence suggest that methamphetamine is frequent drug in Košice context also among young population. But the character of use has been changed from public places to private.



Selected strategy in Kosice, Slovakia

IMPRESA
Implementing Methamphetamine
Prevention Strategies into Action

AIM:

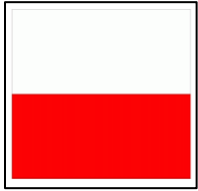
To support the development of social-psychological skills and strategies that will help the students resist the influence of the social environment regarding the use of addictive substances.

TARGET GROUP:

First year at-risk university students

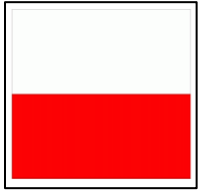
INTERVENTION:

An intensive three-day group training course for the young at-risk university students. The content of the program will be focused on the development of protective socio-psychological factors and mechanisms, such as: authenticity, resilience, self-esteem, subjective well-being, risk management, correction of normative expectations, assertiveness, decision-making strategies and goal setting.



Service availability and needs in Jelenia Góra

Service availability according to secondary data assessment	Existing service needs/gaps according to stakeholder survey	Existing service needs/gaps according to user survey
<ul style="list-style-type: none">• Some universal prevention, followed by indicated and selective prevention services addressing substance use problem in general• Harm reduction services are missing• No services targeting stimulant/methamphetamine use	<ul style="list-style-type: none">• Psychological counselling,• Harm reduction• Treatment of other health issues (not addiction)• Stakeholders assessed harm reduction interventions to be missing.	<ul style="list-style-type: none">• Psychological counselling / addiction treatment,• Legal help• Harm reduction interventions and facilities.



Jelenia Gora, Poland

Target groups	Settings	Interventions
Pupils (minors), students (university level), young adults;	Schools	<ul style="list-style-type: none">• Peer activists training• A school-based preventive brief intervention• Peer networking intervention• Street work• 10-step brief intervention for substance users• Brief intervention consisting of motivational interviewing and cognitive behavioural strategies
Individuals with various psychological problems, including addictions / other substance use disorders;	Streets (particular places in the city)	
Individuals with low socioeconomic status, unemployed;	Outpatient drug treatment and/or counselling centers and drug prevention facilities	
Workers at factories, manual workers performing monotonous type of work, workers working in shifts (e.g. in three-shift days), truck drivers		



Selected strategy in Jelenia Gora

Key objective: To support regular methamphetamine users by increasing their motivation to control their use (incl. Abstinence)

Target groups: 18+ regular methamphetamine users

Short description: 4 sessions described in the protocol by Baker et al. (2003)

SECTION 3. THE INTERVENTION	15
SESSION 1: MOTIVATIONAL INTERVIEWING	20
PHASE 1: Building motivation to change	21
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PHASE 5: Session termination	36
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PHASE 2: Introduction to coping with cravings	38
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PHASE 4: Strategies to cope with cravings	41
PHASE 5: Developing a craving plan	43
PHASE 6: Dealing with a lapse	45
PHASE 7: Session termination	46
SESSION 3: CONTROLLING THOUGHTS ABOUT USING SPEED	47
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SESSION 4: RELAPSE PREVENTION	60
PHASE 1: Session introduction	61

Similarities and differences



HARM REDUCTION

18+ who attend music clubs/festivals and use psychoactive substances (especially methamphetamine) or are considering using them. Club owners and festival organizers.



HARM REDUCTION

18+ at music festivals using psychoactive substances.

Participants of music festivals who are MSM and who use psychoactive substances.

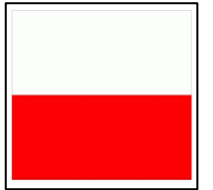


HARM REDUCTION

18+ using stimulants in nightlife and people from the LGBT+ group or with chem-sex experience.

HARM REDUCTION

18+ using stimulants and experiencing negative consequences



SELECTIVE PREVENTION

Students at risk
Psychosocial skills development



Lessons learnt

- MSPs and their immense role in the need assessment and the final choice of interventions to be implemented
- MSP as a moderator of competing interests in the planning of interventions (e.g. between harm reduction services and law enforcement)
- Funding is needed to perform similar assessments in other affected cities/regions

Thank you

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Ministry of Education and Science
Republic of Poland



FIRST FACULTY
OF MEDICINE
Charles University





Structured Session: Implementing Methamphetamine Prevention Strategies into Action (IMPRESA)

The RE-AIM framework for evaluating implementation processes and public health impact

Harald Lahusen, Janusz Sieroslawski, Miroslav Barták, Ondrej Kalina, Dovilė Mačiulytė
Lisbon Addictions 2022
November 2022

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für Gesundheit

aufgrund eines Beschlusses
des Deutschen Bundestages



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Union's Justice Programme –
Drugs Policy Initiatives

What's the problem? – The Research-Practice-Gap in the Public Health Sector

**It takes 17
years for
research to
reach practice.**

**Only 14% of
research
reaches a
target
recipient.**

**Only 18% of
administrators and
practitioners
report using
evidence-based
practices
frequently.**

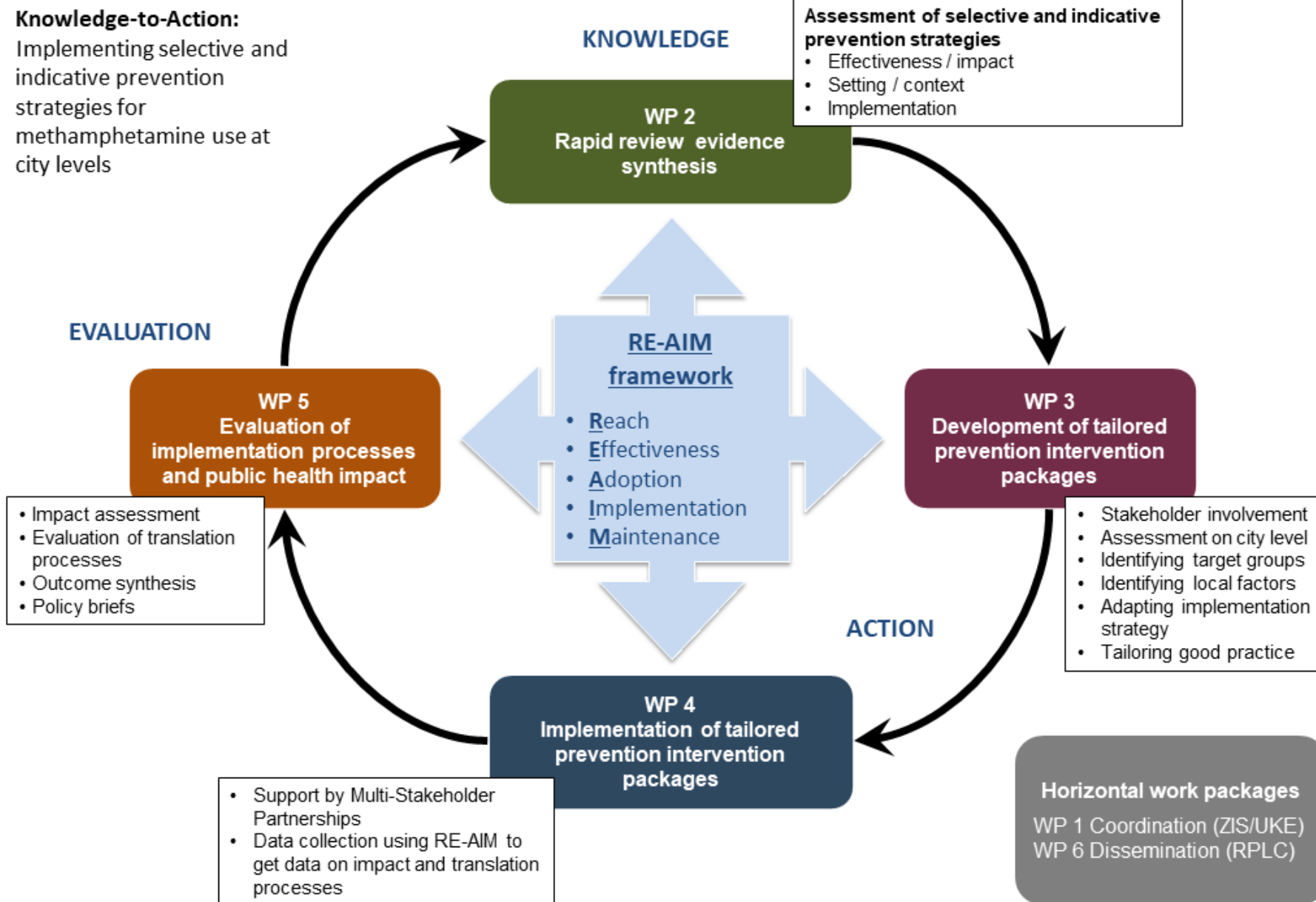
Impact in “real world settings”: a function of 5 RE-AIM dimensions



Even if 100% effective, impact depends on:

- (1) Adoption
- (2) Training
- (3) Fidelity (Implementation)
- (4) Access (Reach)
- (5) Sustainability (Maintenance)

50% threshold for each step=
 $.5 * .5 * .5 * .5 * .5 =$
 3% benefit



Project Overview

Technical Definition

The absolute number, proportion, and representativeness of individuals willing to participate in a given initiative, and the reasons why (qualitative).



REACH

Pragmatic Use

WHO is intended to benefit and who actually participates or is exposed to the initiative?

REACH: Interim results of a brief Intervention approach combining motivational interviewing and a cognitive behavioral strategy (2 or 4 sessions) for ATS users in Jelenia Gora (Poland)

Implementation progress:

- 47 individuals who use ATS recruited out of 120 (completed: 4, dropped out: 5)

Demographic characteristics:

- Age 25-42
- single mothers living in shelters, factory workers, truck drivers, and individuals who lost their jobs due to substance use

Technical Definition

The impact of an initiative on outcomes, including potential negative effects, heterogeneity, quality of life, and economic outcomes as well as the reasons why (qualitative).



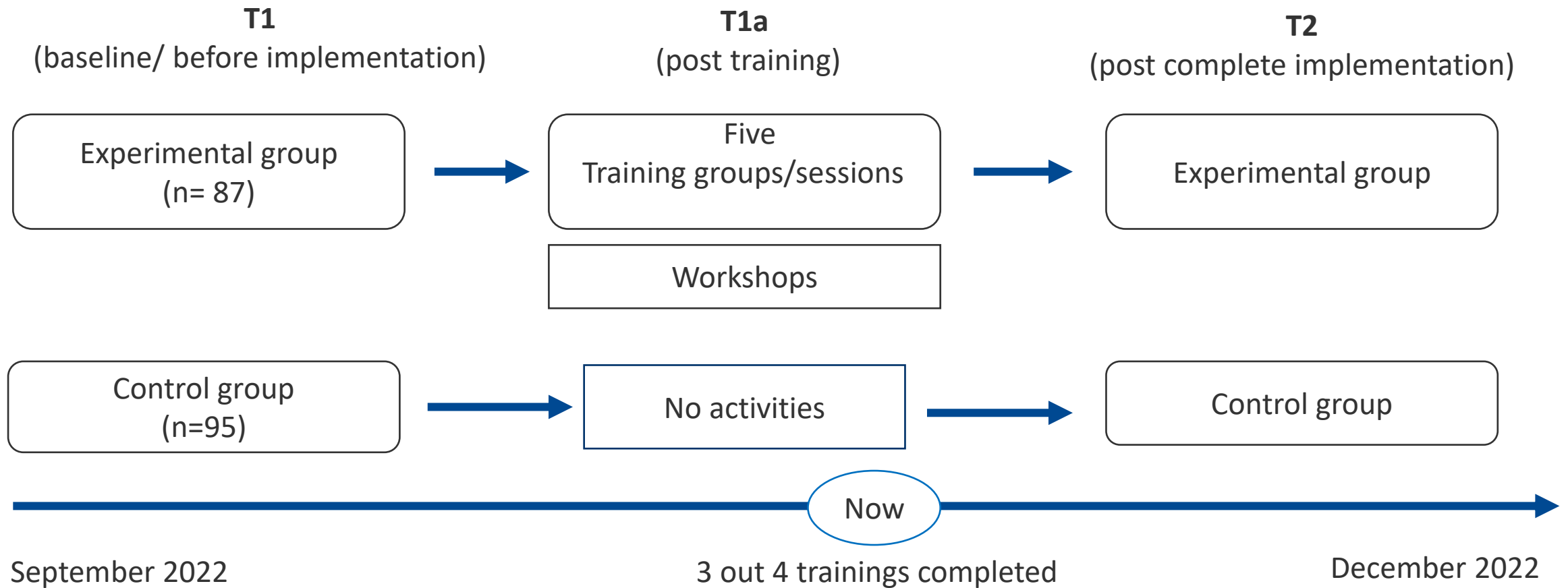
EFFECTIVENESS

Pragmatic Use

WHAT is the most important benefit you are trying to achieve and what is the likelihood of negative outcomes?

EFFECTIVENESS: Interim results of a 3 day SDT-based methamphetamine use prevention program among first year bachelor students in Košice (Slovakia)

Implementation progress:



EFFECTIVENESS: Interim results of a 3 day SDT-based methamphetamine use prevention program among first year bachelor students in Košice (Slovakia)

No direct changes measured post trainings (T1a) regarding

- personal motivation not to use methamphetamine (Treatment Self-Regulation Questionnaire (TSRQ)) and
- normative motivation why others use methamphetamine (APSN adaption of Basic psychological needs satisfaction and frustration scale)

Further analysis will be focusing on:

- effects of the intervention on protective social psychological characteristics in relation to actual and normative aspects (including motivation) in relation to stimulant (meth) use measured at T2

Technical Definition

The absolute number, proportion, and representativeness of settings and agents willing to initiate a program, and the reasons why (qualitative).



ADOPTION

Pragmatic Use

WHERE is the program applied and
WHO applied it?

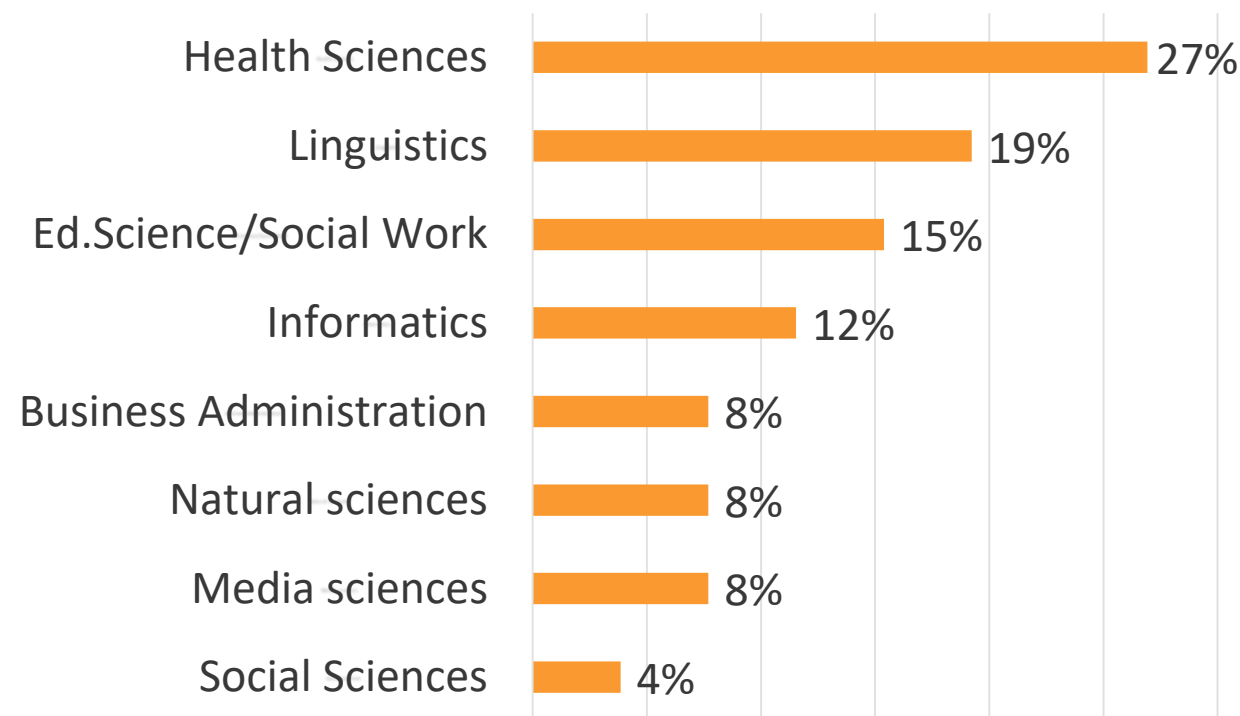
ADOPTION: Interim results of activities promoting safer nightlife among clubs and partygoers in Chemnitz (Germany)

Implementation progress: 31 peers trained; 3 of 12 peer-led activities implemented in clubs

Social demographics of peers (N=26)

Social demographics		
Gender	Male	35%
	Female	42%
	Other	19%
Age	M (SD)	26.4 (5.8)
Professional qualification (multiple response)	University qualification	36%
	Vocational qualification	16%
	Current University student	60%
	Other	12%

Subject area of peers (graduates & current students (N=20)



ADOPTION: Interim results of activities promoting safer nightlife among clubs and partygoers in Chemnitz (Germany)

Training evaluation and prior participation in safer nightlife activities (N=25)

Training and experience		%
I received new information during training	Completely agree or rather agree	80%
All my questions were resolved during training	Completely agree or rather agree	80%
I have previously participated in safer nightlife activities	Yes	44%

Reasons for participation in safer nightlife activities (N=22)

Open answers (summarized)	N
To make drug use and/or nightlife safer	7
Because of my specific interest and/or experiences	6
Because it is meaningful and/or necessary work	5
To support peers	4
Because I support the safer nightlife approach	3
Because it is fun	2
Because I get payed	1
To support research	1

Technical Definition

Fidelity to the intervention protocol, and including adaptations, time, and cost as well as the reasons why (qualitative).

IMPLEMENTATION

Pragmatic Use

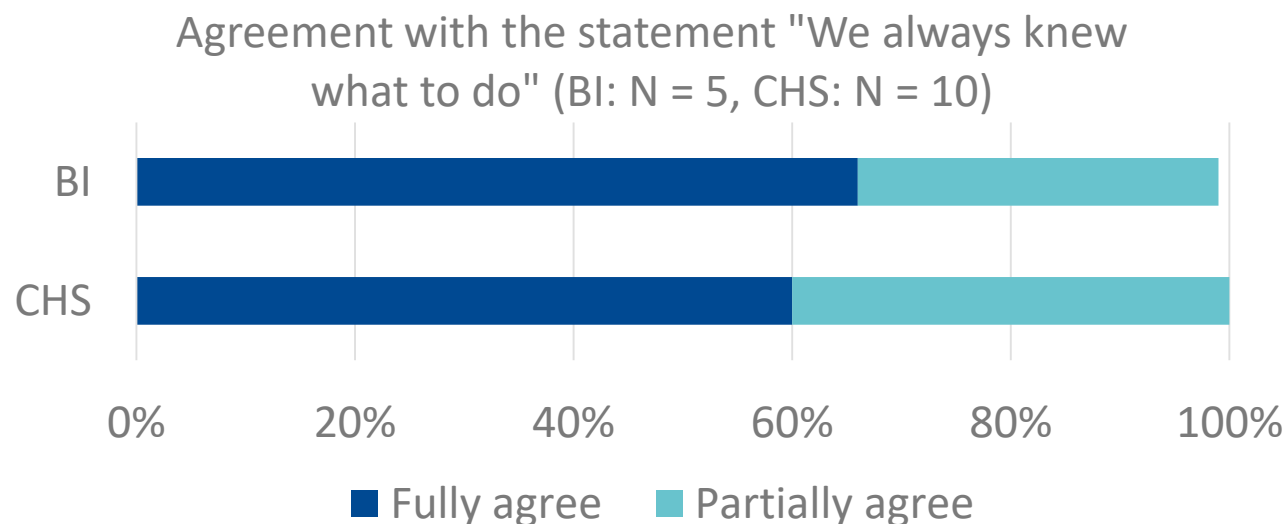
HOW consistently was the program delivered, how was it adapted, how much did it cost, and **WHY** did the results come about?

IMPLEMENTATION: Interim results of brief interventions for partygoers (BI) and chemsex harm reduction (CHS) in nightlife settings in Prague (Czech Republic)

Implementation progress:

Type of intervention	No. of events	No. of persons reached
Brief Intervention (BI)	5 out of 10 smaller events	5 provided with BI
Chemsex Harm Reduction (CHS)	3 out of 4 festivals	206 (data from Prague Pride)

Quality assesement by providers:



IMPLEMENTATION: Interim results of brief interventions for partygoers (BI) and chemsex harm reduction (CHS) in nightlife settings in Prague (Czech Republic)

Quality assesement by target group:

Chemsex Harm Reduction (CHS):

- 90 % (N=175) found about new risks of chemsex
- 97 % (N=188) will be more attentive to the risks of chemsex

Brief Intervention (BI):

- 5 out of 5 agreed with statement „I would recommend this to someone else“
- 2 out of 5 declared they received new information about risks of stimulants

Cost assesment:

Chemsex Harm Reduction (CHS):

about 1.000 Euro per festival day

Brief Intervention (BI):

about 700 Euro per smaller event

Technical Definition

The extent to which a program becomes institutionalized at the setting level or sustained at an individual level as well as the reasons why (qualitative).



MAINTENANCE

Pragmatic Use

WHEN was the program operational and how long are the results sustained?

MAINTENANCE: Interim results of education and harm reduction among recreational psychoactive substance users in Lithuania

Implementation progress:

Type of intervention	No. of events	No. of persons reached
Educational lecture on safer chemsex	3 out of 3 events	85
Drug checking services	5 out of 5 festivals	400 drug testing kits distributed

Potential for further implementation of services:

Educational lecture on safer chemsex:

- Intervention can be delivered outside of the IMPRESA project
- Focus on smaller targeted events instead of large festivals

Drug checking services:

- Planned be continued next festival season
- Could be expanded to day parties at larger clubs in Vilnius where harm reduction services are available

MAINTENANCE: Interim results of education and harm reduction among recreational psychoactive substance users in Lithuania

Barriers and facilitators for further implementation of services:

Educational lecture on safer chemsex	Barriers	<ul style="list-style-type: none"> • Difficulty of finding appropriate settings for reaching the target group • Lack of stakeholders working with MSM in health and drug care sector • Lack of financing
	Facilitators	<ul style="list-style-type: none"> • Importance of safer chemsex practices and safer drug use for MSM
Drug checking services	Barriers	<ul style="list-style-type: none"> • Lack of financing and of human resources • Fear of prosecution among people who use drugs • Unwillingness of festival and party organizers to invite drug checking services
	Facilitators	<ul style="list-style-type: none"> • Relatively inexpensive and easy to implement • Increasing awareness, expectations and popularity among people who use drugs

Thank you very much for your attention!

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