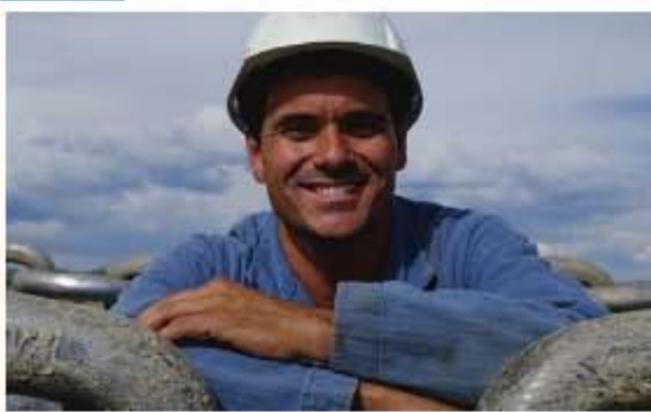


What Works:



Effective Public Health Responses to Drug Use



March 2008

Contents

Overview	3
Anti-Drug Media Campaigns.....	6
Drug-Free Community Coalitions.....	9
Drug Testing in Schools and in the Workplace.....	12
Screening, Brief Intervention, and Referral to Treatment.....	16
Improving Access to Treatment and Recovery	19
Drug Courts	21

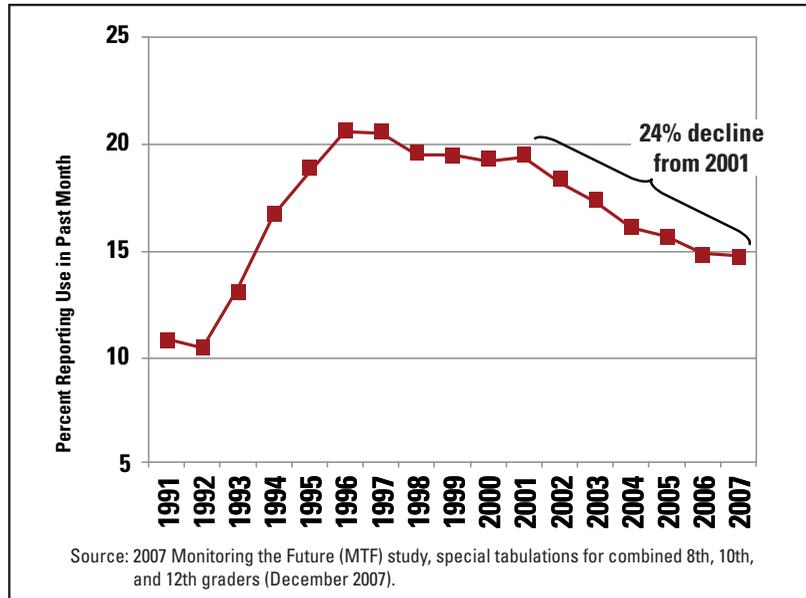
Overview

The United States has historically suffered from some of the highest rates of drug abuse in the world, and, as a result, has made unparalleled investments in demand reduction research and programming. Through hard experience, we have learned much about the nature of addiction and what works in prevention and treatment. Our policies are still evolving as we seek to incorporate the latest research findings into anti-drug programs and phase out program components that do not deliver sustained, measurable results. Now, however, ten years after the United Nations General Assembly Special Session on Drugs, it is appropriate to look back and take stock of the knowledge we have gained about what works to reduce drug abuse.

The United States National Drug Control Strategy seeks to put resources where research and experience have proven that they can have the greatest effect in reducing the demand for drugs in America. The results achieved over the last six years are particularly clear and instructive. Current use of any illicit drug among young people in America has declined by 24 percent since 2001. Youth marijuana use has fallen by 25 percent, MDMA (Ecstasy) by 54 percent, LSD by 60 percent, amphetamines by 32 percent, methamphetamine by 64 percent, and steroids by 33 percent. Use of alcohol and tobacco among American youth has also declined significantly (by 15 percent and 33 percent, respectively), suggesting a broad shift in youth attitudes and behavior. These results illustrate what can be achieved through the implementation of a balanced strategy that focuses on research-proven approaches.

It is our hope that the significant investments made by the United States in the area of drug research and program evaluation can serve to benefit nations around the world that are confronting drug abuse problems of their own. In an effort to make this hope a reality, we have produced this publication for the international community as a guide to the demand reduction efforts that have produced results in the United States.

Current Use of Any Illicit Drug Among Youth in the United States



We know that many nations now face the kinds of drug abuse problems that the United States has faced for decades. Perhaps it is inevitable. Over time, improvements in communications, travel, and technology have made our world smaller and have dramatically improved the quality of life for people around the globe. However, this interconnectedness has also led to the globalization of problems that at one time may have been considered local, national, or regional. Drug abuse has truly become such a global problem, impacting many societies in ways that they have not seen before. Although the international community has made great strides in strengthening its collective fight against drug abuse, there is still much that we can learn from each other.

In this booklet we highlight several of the cost-effective, research-tested demand reduction initiatives that have proven successful in the United States and could be helpful to countries around the world in addressing their own drug abuse challenges. The following pages will focus on such proven initiatives as

- ❖ Launching a comprehensive youth anti-drug media campaign
- ❖ Building successful community coalitions
- ❖ Employing drug testing in the workplace and at schools

- ❖ Screening and intervening to interrupt the cycle of drug abuse
- ❖ Providing quality drug treatment services at low cost
- ❖ Establishing drug treatment courts

In addition to sharing our experiences with these programs, we would like to invite readers to explore the wealth of information available from U.S. research institutions such as the National Institute on Drug Abuse (NIDA). Much of this information has been summarized and organized at the Office of National Drug Control Policy (ONDCP) web site, www.whitehousedrugpolicy.gov. Even more information, including links to thousands of peer-reviewed journal articles, is available at the National Institute for Drug Abuse (NIDA) web site, www.nida.gov.

Although the international community has made great strides in strengthening its collective fight against drug abuse, there is still much that we can learn from each other.

NIDA plays a critical role in helping to shape effective, evidence-based prevention and treatment strategies. NIDA researchers have been conducting groundbreaking research into how drugs of abuse affect a user’s brain and behavior, including the roles played by genetics, environment, age, gender, and other factors. By improving our understanding of addiction, NIDA-supported research can help to determine which measures are most effective in preventing drug abuse. In the area of treatment, NIDA-supported research is offering new hope through research into medications that can reduce an addict’s urge to use, or that can chemically prevent a drug from entering a user’s brain.

Of course, as is highlighted in the section of this document on drug free community coalitions, drug problems vary not only by nation, but also by region, city, and town. Nonetheless, we believe at least some of the work conducted in the United States will prove useful in the design and implementation of effective programs in other countries. We hope that the knowledge gained from drug research conducted by institutions like NIDA can help nations make the tough decisions about where to invest limited resources to confront the difficult problem of drug abuse.

Anti-Drug Media Campaigns

Media campaigns work. Any country that intends to reduce drug abuse among its youth should dedicate resources to project consistent anti-drug messages out to their youth through the media. All over the world, parents, teachers, religious leaders, and others are struggling to compete with the volume of misleading messages and negative influences that young people are exposed to through the media, especially when it comes to drug use. Anti-Drug Media Campaigns are an effective way to push back against these negative messages and “unsell” the idea of drug use to young people. Private corporations spend money on advertising because they know it works. Anti-drug media campaigns, properly executed, will reduce drug use.

In the United States, the National Youth Anti-Drug Media Campaign has sought to turn youth attitudes against drug use and encourage increased parental engagement through national paid advertising and public communications outreach. The intent is to deliver clear, consistent, credible, and sustained anti-drug messages. Most of the advertising is created by the Partnership for a Drug-Free America, one of our most creative and effective advertising agencies.



A still from “Drug Dealer Testimonial,” an ad in which a dealer of street drugs complains about slow business because young people have turned to abusing prescription drugs. The ad was aired during the Super Bowl and aimed to make parents aware of the danger posed by the abuse of prescription drugs among young people.

The teen brand “Above the Influence” inspires young people to reject drug use by appealing to their sense of individuality and independence. All television advertisements are subject to a rigorous process of qualitative and quantitative testing, ensuring, before they are ever broadcast, that the advertisements are credible and have the intended effect on awareness, attitudes, and behaviors.

Since 2002, the Campaign has been strategically focused on marijuana, as that is often the first illegal drug a young person will try, and studies show that preventing or delaying the onset of illegal drug use during youth significantly reduces the likelihood of substance abuse problems later in life. This focus on marijuana has contributed to the 25 percent reduction that the United States has seen in youth marijuana use since 2001, a trend that will benefit this generation for decades to come. However, the abuse of prescription drugs by young people has increased over the past several years. In response, the Campaign is addressing this emerging drug threat through a national effort to inform parents about the risky and growing abuse of prescription drugs by young people.

The intent is to deliver clear, consistent, credible, and sustained anti-drug messages.

Keys to a Successful Anti-Drug Media Campaign:

- ❖ Strong legislative support
- ❖ A solid scientific and research base
- ❖ Free advertising created in conjunction with private partners
- ❖ Participation by leading media corporations as well as civic, volunteer, youth-serving, education, prevention, public health, and multicultural organizations

For more information, please visit:

www.mediacampaign.org

This web site provides information on all aspects of the National Youth Anti-Drug Media Campaign in the United States.

www.abovetheinfluence.com

Above the Influence is an interactive drug prevention web site for youth.

www.theantidrug.com

This web site equips parents and other adult caregivers with the tools they need to raise drug-free kids.

www.freevibe.com

This web site provides drug-related information and other resources for youth.

www.laantidroga.com

This Spanish-language web site includes drug information, expert advice on how to handle youth drug use, and an interactive feature through which parents can submit questions to a drug-prevention expert and have them answered online.

www.druganswer.com

This site provides drug prevention advice for parents in Chinese, Korean, Vietnamese and Filipino.

Drug-Free Communities Coalitions

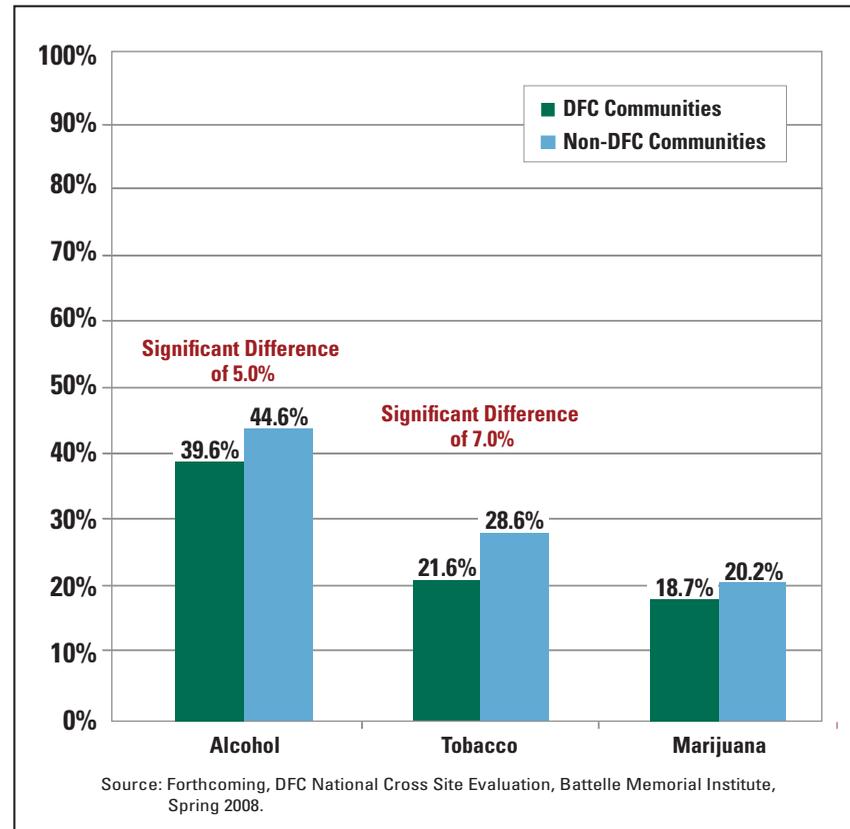
In every country, drug problems vary from community to community, creating the need for local solutions to local problems. In the United States, the formation of Drug Free Communities (DFC) coalitions has proven to be an effective catalyst for reduced drug use among youth and increased citizen participation. The Federally-funded Drug Free Communities Support Program enables such coalitions to strengthen their coordination and prevention efforts, encourage citizen participation in substance abuse reduction efforts, and disseminate information about effective programs. The Federal Government is currently supporting 736 (FY 2007) local drug free community coalitions through this program, reaching 31% of all youth in grades 6-12 in the United States, Puerto Rico, and the U.S. Virgin Islands.

This initiative primarily targets youth, but there is also support for a number of local coalitions that focus on young adults aged 18-25, as well as support for efforts that assist parents and youth in mobilizing their communities to prevent youth alcohol, tobacco, prescription, and other drug abuse. The coalitions supported by the Federally-funded Drug Free Communities Program must include local representatives of the following groups in their membership: young people; parents; media; law enforcement; school officials; faith-based organizations; fraternal organizations; State, local, and tribal government agencies; healthcare professionals; and other community representatives.

In order to support the growth and development of community-based coalitions, the Office of National Drug Control Policy contracts with a non-governmental organization, Community Anti-Drug Coalitions of America (CADCA), to provide training and technical assistance through its National Coalition Institute. Originally formed in 1992 in response to the dramatic growth in the number of community coalitions and their need to share ideas, problems, and solutions, CADCA's National Coalition Institute not only supports emerging community coalitions, but it also works in partnership with ONDCP to help strengthen DFC-funded communities.

Understanding that there is no one-size-fits-all approach to protecting youth and strengthening communities to prevent drug use, Drug Free Communities promote creative local solutions. The result is that communities who receive funding and support through the Drug Free Communities program experience lower rates of substance use among their youth through their comprehensive, community-wide approach to substance abuse and its related problems. As shown in the following chart, where there are DFC coalitions, there are significantly lower percentages of youth substance abuse.

Percentage of Youth Reporting Substance Abuse During the Past 30 Days



For more information, please visit:

www.oncdp.gov/dfc

The White House Office of National Drug Control Policy web site features a dedicated section on the Federally-funded Drug-Free Communities Support Program.

www.cadca.org and www.coalitioninstitute.org

CADCA's National Coalition Institute helps build more effective community anti-drug coalitions through training, technical assistance and educational materials.

Drug Free Communities promote creative local solutions.

Drug Testing in Schools and in the Workplace

Substance abuse problems take a terrible toll on the productivity of any country's population, undermining the role of the school as a place of learning and of the workplace as an engine of the economy. Random drug testing holds great promise both as a prevention tool and as an effective means of reducing the costs of drug abuse to society.

In schools, random student drug testing programs satisfy two important public health goals: the prevention and treatment of substance abuse. Student drug-testing programs are non-punitive. They are designed to 1) deter students from initiating drug use, 2) help identify students who have just begun to use drugs before a dependency begins, and 3) help identify students with a dependency so that they may be referred to appropriate treatment.



Random student drug testing programs serve to both prevent substance abuse and expand the reach of treatment.

The power of random student drug testing as a prevention tool cannot be understated. The spread of drug use throughout a school often closely mirrors the way a disease is spread—from student-to-student contact, multiplying rapidly as more and more students are affected. Random testing can provide young people with a reason to never start using drugs that will be accepted by their peers—protecting them during a time when they are most vulnerable both to peer pressure and to the adverse health effects of drug use.

Random Student Drug Testing Programs Are Legal and Effective

In the United States, the Supreme Court has upheld the authority of public schools to test students for illegal drugs, allowing random drug tests for all middle and high school students participating in competitive extracurricular activities, as well as those who, with a parent or guardian, consent to testing. In addition, in order for a student drug testing program to receive Federal support, it must be part of a comprehensive drug prevention program, provide for referral to treatment or counseling as appropriate, and it must ensure the confidentiality of its testing results.

For research on the effectiveness of random student drug testing programs in the United States, please refer to the following resources:

“The Effectiveness and Legality of Random Student Drug Testing Programs Revisited” by Joseph R. McKinney, J.D., Ed.D.

http://randomstudentdrugtesting.org/pdf/el_random_student_drug_testing.pdf

“Report of a Preliminary Study: Elements of a Successful School-Based Student Drug Testing Program” by Robert L. DuPont, M.D., Teresa G. Campbell, Ph.D., and Jacqueline J. Mazza.

http://randomstudentdrugtesting.org/pdf/elements_sdt_program.pdf

The SATURN Study

This is a survey of student athletes in Oregon that underscores the preventative power of drug testing. As part of the Student Athlete Testing Using Random Notification (SATURN) study, researchers compared rates of drug use among student athletes at one Oregon high school with those at another Oregon school that did not have a testing policy. Note: This study is only available to subscribers of Pubmed Medline.

The concept of testing for drug use as a prevention tool has been proven effective in the workplace, as well. The U.S. Department of Defense began testing its military personnel more than 25 years ago, and during that time the rate of positive tests among service members has fallen from nearly 30 percent to less than 2 percent. Drug testing has also proven effective in the broader workforce. As drug-free workplace programs have expanded, positive test rates have fallen, reaching the lowest point since 1988, according to Quest Diagnostics' Drug Testing Index.

However, workplace safety is the reason most commonly cited by employers for implementing drug testing programs. In fact, one study found that construction companies that tested for drug use experienced a 51 percent reduction in injury rates within 2 years of implementing their drug testing programs. Studies have also clearly demonstrated the impact that drug abuse can have on workplace productivity if left unchecked. A 2000 Substance Abuse and Mental Health Services Administration (SAMHSA) study revealed that workers who reported past month illicit drug use were more likely than those who did not report such use to say that: they had more than three employers in the past year (5.7 percent vs. 2.3 percent), they had missed work for more than two days in the past month due to illness or injury (11.6 percent vs. 6.5 percent), and they had skipped work more than two days in the past month (4.4 percent vs. 1.6 percent).



Workplace safety is the reason most commonly cited by employers for implementing drug testing programs.

It is for these reasons that U.S. Federal agencies such as the Department of Health and Human Services, the Department of Labor, and the Department of Transportation have undertaken initiatives to actively encourage adoption of drug-free workplace programs in both the private and public sectors.

For more information on random student drug testing, please visit:

<http://www.randomstudentdrugtesting.org/>

For more information on workplace drug testing, please visit:

<http://www.whitehousedrugpolicy.gov/prevent/workplace/index.html>

The White House Office of National Drug Control Policy web site features a dedicated section on drug free workplace programs.

<http://workplace.samhsa.gov/>

The Center for Substance Abuse Prevention's (CSAP's) Workplace Resource Center provides centralized access to information about drug-free workplaces and related topics.

<http://www.dol.gov/workingpartners/welcome.html>

The web site for the Working Partners for an Alcohol- and Drug-Free Workplace program provides employers and employees with timely, supportive and easily accessible information about how to successfully confront workplace substance abuse.

<http://www.dot.gov/ost/dapc/>

The web site for the U.S. Department of Transportation's Office Drug & Alcohol Policy & Compliance describes required procedures for conducting workplace drug and alcohol testing for the Federally regulated transportation industry.

<http://ncadistore.samhsa.gov/catalog/results.aspx?topic=12&h=>

The National Clearinghouse for Alcohol and Drug Information provides resources on drug-free workplace programs for employees, employers, small business, and Federal agencies. Information may also be obtained by calling the Workplace Helpline at 1-800-WORKPLACE

Screening, Brief Intervention, and Referral to Treatment

Millions of people around the world suffer from serious problems with addiction, but the vast majority likely are not aware that they need help. In the United States alone, the *National Survey on Drug Use and Health* estimates that there are more than 20 million individuals who meet the medical definition of abuse or addiction to alcohol or drugs. Of this number, more than 94 percent do not realize they need help and have not sought treatment or other professional care.

It is estimated that 180 million Americans age 18 or older see a healthcare provider at least once a year, which gives the healthcare community the potential to become a powerful tool in identifying substance abuse problems—or potential problems—and intervening as appropriate. With a few carefully worded questions using an evidence-based questionnaire, health care providers can learn a great deal about whether a patient is at risk for problems related to substance abuse. Depending on the answers to these questions, physicians can intervene with a brief, nonjudgmental motivational conversation about the dangers of substance abuse and ways to overcome it—or, on the other end of



The healthcare community can become a powerful tool in identifying substance abuse problems and intervening as appropriate.

the spectrum, if a patient's screening score falls in the range associated with addiction, the patient can be referred to specialty treatment for a more extensive and longer period of care.

The great promise of screening is not just in that it is highly effective, it also does not require an expensive or new comprehensive mechanism to institute. Screening can be added, or “mainstreamed,” into the existing medical infrastructure of each country. Although it is always true that it takes more than one initiative to cause sustained positive change, screening in and of itself has tremendous potential to transform an entire nation's drug abuse problem.

Screening Tools for Drug Use

A number of standard screening tests have been developed for use by healthcare professionals. They are designed to help doctors and counselors determine the full spectrum of drug use. Patients are asked to answer “yes” or “no” to a list of questions, which may include the following:

- ❖ Have you used drugs other than those required for medical reasons?
- ❖ Have you abused prescription drugs?
- ❖ Have you lost friends because of your drug use?
- ❖ Have you gone to anyone for help for a drug problem?

Screening can be added, or “mainstreamed,” into the existing medical infrastructure of each country.

In the United States, the Federal Government is actively supporting the adoption of screening and brief intervention practices in the medical community through a demonstration program administered by SAMHSA. The Federally-funded Screening, Brief Intervention, and Referral to Treatment (SBIRT) program is supporting screening and brief intervention activities in hospitals, primary care settings, colleges, and one tribal council. As of December 2007, more than 577,436 clients in 11 States had been screened. Approximately 23 percent received a score that triggered the need for further assistance. Of this number, 15.9 percent received a brief intervention, 3.1 percent received brief drug treatment, and only 3.6 percent required referral to specialized drug treatment programs.

Outcome measures from the Federal program reveal that screening and brief intervention helps reduce substance abuse and related consequences, including emergency room and trauma center visits and deaths. By encouraging health-care professionals to identify at-risk populations and intervene early, we can significantly reduce alcohol and drug abuse and possibly prevent an individual in need of help from ever reaching the point of addiction.

For more information, please visit:

http://www.whitehousedrugpolicy.gov/treat/screen_brief_intv.html

Improving Access to Treatment and Recovery

As screening and brief intervention services bring more of those in need into contact with the treatment system, we must ensure that treatment providers have the capacity to serve these individuals. The United States has tried to close this “treatment gap” through an initiative known as “Access to Recovery,” or ATR. First announced by the President in his 2003 State of the Union Address, ATR expands substance abuse treatment capacity, promotes choices in both recovery paths and services, increases the number and types of providers, allows clients through the use of voucher systems to play a more significant role in the development of their treatment plans, and links clinical treatment with important recovery support services such as transportation, mentoring, and childcare.

Flexibility is one of the hallmarks of the Access to Recovery initiative. A grant program administered by SAMHSA, ATR allows States and tribal organizations to tailor programs to meet their primary treatment needs. In Texas, ATR has been used to target the State’s criminal justice population, which generally has been underserved in the area of drug treatment. Tennessee has used its ATR funds to target those whose primary addiction is methamphetamine. The voucher component of the program allows individuals to choose among eligible clinical treatment and recovery support providers—including, for the first time, faith-based and community-based providers—thereby empowering Americans to be active in their recovery.



ATR provides funding for recovery support services such as transportation, mentoring, and childcare, services not typically funded through other Federal grant programs.

How Access to Recovery (ATR) Works in the United States:

- ❖ Those individuals seeking drug and alcohol treatment and recovery support are assessed and receive a voucher to pay for a range of appropriate services.
- ❖ The States work with a consortium of public and private entities to jointly administer the program, distribute vouchers, and deliver alcohol and drug treatment and other services.
- ❖ States are required to monitor client outcomes and to make adjustments based on the cost-effectiveness of services received.
- ❖ Accountability is achieved by linking reimbursement for services to demonstrated abstinence from drug and alcohol use by clients after discharge.

As of September 30, 2007, more than 190,000 people with substance use disorders had received clinical treatment and/or recovery support services through ATR, exceeding the 3-year target of 125,000. Approximately 65 percent of the clients for whom status and discharge data are available have received recovery support services, which, though critical for recovery, are not typically funded through other Federal grant programs. As a result of ATR, States and tribal organizations have expanded the number of providers of treatment and recovery support services. Faith-based organizations, which generally do not receive funding from State governments for substance abuse treatment, have received approximately 32 percent of ATR funds. These organizations offer a unique and compassionate approach to people in need.

For more information, please visit:

<http://www.whitehousedrugpolicy.gov/treat/initiative.html>

For a complete webcast presentation, please visit:

<http://ncadi.samhsa.gov/multimedia/webcasts/w.aspx?ID=250>

Drug Courts

As in the rest of the world, substance abuse problems in the United States often go hand-in-hand with criminal behavior. For nonviolent drug offenders whose underlying problem is substance use, drug treatment courts combine the power of the justice system with effective treatment services to break the cycle of criminal behavior, alcohol and drug use, child abuse and neglect, and incarceration. In the time since the first drug court was founded in Miami, Florida, in 1989, drug courts have proven to be one of the most successful demand reduction initiatives in the United States. Today, there are more than 2,000 drug courts in operation in the United States, and additional drug courts have been established in 10 other countries.



Drug courts have proven effective in reducing recidivism, substance abuse, and criminal justice costs.

Drug treatment courts combine the power of the justice system with effective treatment services.

The objective of drug courts is to stop alcohol abuse, drug abuse, and related criminal activity by offenders. Drug courts handle cases involving drug-addicted offenders through an extensive supervision and treatment program. In exchange for successful completion of the program, the court may dismiss the original charge, reduce or set aside a sentence, offer some lesser penalty, or offer a combination of these. Some drug courts are co-located on the grounds of residential treatment facilities, reducing additional barriers to recovery.

There is a great deal of information readily available, not only documenting how and why drug courts are so effective, but also on how to start up a drug court. We strongly encourage those countries interested in starting or expanding their drug court program to attend the annual National Association of Drug Court Professionals (NADCP) conference, which is held each May in the United States. More information is available at the NADCP web site listed on the next page.

Research Supports the Effectiveness of Drug Treatment Courts

- ❖ A decade of drug court research indicates that drug courts reduce crime by lowering rearrest and conviction rates, improving substance abuse treatment outcomes, reuniting families, and producing measurable cost benefits.
- ❖ A National Institute of Justice study found that the likelihood that a drug court graduate would be rearrested and charged for a serious offense in the first year after graduation was 16.4 percent, compared to 43.5 percent for non-drug court graduates. By the two-year mark, the recidivism rate had grown to 27.5 percent, compared to 58.6 percent for non-graduates.
- ❖ An analysis in Washington State concluded that drug courts cost an average of \$4,333 per client, but save \$4,705 for taxpayers and \$4,395 for potential crime victims, thus yielding a net cost-benefit of \$4,767 per client.
- ❖ An analysis in California concluded that drug courts cost an average of about \$3,000 per client, but save an average of \$11,000 per client over the long term.

For more information, please visit:

<http://www.ndci.org/>

The National Drug Court Institute (NDCI) promotes education, research, and scholarship for drug courts and other court-based intervention programs.

<http://www.nadcp.org/>

The National Association of Drug Court Professionals (NADCP) seeks to reduce substance abuse, crime, and recidivism by promoting and advocating the establishment and funding of drug courts.

<http://spa.american.edu/justice/project.php?ID=1>

The Drug Court Clearinghouse Project serves as a national clearinghouse for drug court information and activity.

<http://dcpi.ncjrs.gov/dcpi/dcpi.html>

The Drug Court Planning Initiative (DCPI) is a training initiative that helps communities develop effective adult, juvenile, family, and tribal drug court programs.

<http://www.drugcourtttech.org/>

The Drug Court Technology Resource Center is an online forum offering tools and information for drug court practitioners who are creating computer applications for their courts.

<http://spa.american.edu/justice/news.php>

The Drug Court Clearinghouse and Technical Assistance Project has developed “Drug Courts in the News” to provide links to recent news articles about drug courts.

*Through hard experience,
we have learned much
about the nature of addiction
and what works in prevention
and treatment.*





For more information on
the United States National Drug Control Strategy and
the demand reduction programs mentioned in this booklet please visit:

www.whitehousedrugpolicy.gov