



# European Monitoring Centre for Drugs and Drug Addiction

Report ID: EDDRA\_2008\_ES\_02

EDDRA Questionnaire

## **1. Project ID**

### **1.1. Additional Information**

#### **1.1.1 Project ID ES\_02**

#### **1.1.2 METATOBEBELETED**

#### **1.1.3 METAREVIEWPRAISEWORTHY 1**

#### **1.1.4 METAREVIEWCOMPLETED**

#### **1.1.5 METAREVIEWUSER**

#### **1.1.6 METAREVIEWSTATUS**

## **2. Executive summary**

### **2.1. Executive summary**

#### **2.1.1 Executive Summary**

The project "Sensitization of the youth population and their families to the problems resulting from drug use, through the Internet (website) and new mobile technologies (SMS)" has been created by health professionals, university professors and experts in the field of addictions. Its primary aim is the prevention of addictive behaviours among youth.

#### **2.1.2 Brief Summary**

Project of information and sensitization about drug dependency and addiction by means of information technologies and communication.

## **3. Identification**

### **3.1. Identification**

#### **3.1.1 Name of the intervention**

Sensitization of the youth population and their families to the problems resulting from drug use, via the Internet (website) and new mobile technologies (SMS).

#### **3.1.2 Starting date of the intervention**

10/09/1996

#### **3.1.3 Ending date of the intervention (if applicable)**

31/12/2005

### **3.2. Type of organisation**

#### **3.2.1 Type of organization responsible for operating the project**

Non-governmental organisation  X

Government organisation

International organisation

Private

Other

#### **3.2.2 Responsible organisation**

Instituto para el Estudio de las Adicciones (IEA)

#### **3.2.3 Name of the responsible organisation**

Instituto para el Estudio de las Adicciones (IEA)

#### **3.2.4 Address of the responsible organisation**

Av. Maritima, 25. Edificio Jardin del Mar, local 7

#### **3.2.5 Postal code of the responsible organisation**

38190

#### **3.2.6 City of the responsible organisation**

Tabaiba, Tenerife

#### **3.2.7 Email of the responsible organisation**

admin@lasdrogas.info

#### **3.2.8 Country of responsible organisation**

Spain

### **3.3. Contact**

#### **3.3.1 Name of contact person(s)**

Jesus A. Lacoste

#### **3.3.2 Email(s) of contact person(s)**

admin@lasdrogas.info

**3.3.3 Phone number(s) of contact person(s)**

+34 902 15 36 44

**3.3.4 Fax number(s) of contact person(s)**

+34 922 68 31 35

**3.3.5 URL of contact person(s)**

<http://www.lasdrogas.info>

**3.4. Additional organisations**

**3.4.1 Name of additional organisations involved (if applicable)**

Regional Office of the Government for the National Drug Plan (Plan Nacional sobre Drogas) Regional Government of Valencia Government of the Canary Islands

**4. Background and objectives**

**4.1. Background & objectives**

**4.1.1 Type of intervention**

Prevention X

Treatment

Social reintegration

Harm reduction

Interventions in the criminal justice system

Other (Please specify below)

**4.1.2 Describe other type of intervention**

Please chose corresponding to the type of intervention you ticked above the sub-areas below that apply.

**4.1.3 Prevention sub-areas**

Environmental Strategy

Universal X

Selective

Indicated

Other (Please specify below)

**4.1.4 Describe other sub-area for prevention**

**4.1.5 Treatment sub-areas**

Drug free treatment

Pharmacologically assisted treatment

Withdrawal treatment

Other (Please specify below)

**4.1.6 Describe other sub-area for treatment**

#### **4.1.7 Social reintegration sub-areas**

Education

Employment

Housing

Other (Please specify below)

#### **4.1.8 Describe other sub-area for social reintegration**

#### **4.1.9 Harm reduction sub-areas**

Reduction of overdoses

Prevention of infectious diseases (e.g Needle Syringe Programmes)

Drug consumption rooms

Other (Please specify below)

#### **4.1.10 Describe other sub-area for harm reduction**

#### **4.1.11 Interventions in the criminal justice system sub-areas**

Assistance to drug users in prison

Alternatives to prison

Other (Please specify below)

#### **4.1.12 Describe other sub-area for interventions in the criminal justice system**

#### **4.1.13 Other. Describe sub-area for any other type of intervention**

#### **4.1.14 Type of approaches (if applicable)**

Offenders (criminal justice system)

Ethnic

Family/first childhood

Gender

Telephone help-line

Mass media campaign

Peer

Community involvement (bottom up)

Training for professionals

Networking

Self help

Other (Please specify below) X

#### **4.1.15 Describe any other type of approach**

Information and prevention via the Internet.

#### **4.1.16 Needs assessment /initial situation. What is the problem that is being addressed? Describe the situation before the intervention was implemented in**

**order to clarify why it is needed. For example, information on the population, socio-economic and demographic data. This can include data sources, social perceptions and public discussion.**

The 2005-2008 Action Plan of the Plan Nacional sobre Drogas defined social prevention and sensitization as one of its priorities. To this end, it points out the fact that two things are necessary: First: Rigorous information. Children, youth, parents, teachers and people with political responsibility should all be properly aware of the effects of the use of psychotropic substances and their risks. Second: It is necessary to develop the independent decision-making ability of children and youth, promoting self-esteem, critical and self-critical abilities, tolerance, a positive attitude towards resolving difficulties, a willingness to work as a team, the ability to deal with frustration, an attitude of solidarity, the ability to take on responsibility, etc." Among this Strategy's many contributions, the most significant one is undoubtedly the fact that it has made prevention a key priority over all the other possible steps that might be taken against drugs. However, promoting prevention requires a huge effort, a joining of forces, and must be based on objective, factual and rigorous information about this complex subject. This is precisely why one key objective is aimed at "providing the population with sufficient information about the risks of using tobacco, alcohol and other substances that can create dependence or whose use can entail risks for those who consume them." For several years, the Regional Office of the Government and the other agencies that form part of the National Drug Plan have been carrying out a series of actions designed to raise awareness and inform the general population, and certain specific segments in particular, such as families and youth, about the consequences of drug use. Noteworthy among these actions are sensitization campaigns, in which social initiatives and many of the media have taken part. However, new technologies now offer a new channel for communication and interaction with the population. For this reason, recent years have seen a proliferation of websites and Internet portals aimed at providing information about drugs and raising the awareness of young people about the risks of their use. So, we pretend to use the new information technologies to offer relevant information about drug addiction and contribute to improve the knowledge level of the our visitors across the web site.

**4.1.17 Overall objective (impact evaluation). What is the main purpose of the intervention? How will it modify or change the stated problem?**

Increase awareness and sensitize the population to the problems of drug use, with special emphasis on young people and alcohol consumption, providing factual and scientific information.

Please specify the specific objectives which should always relate to changes in the target groups. The specific objectives do not necessarily have to relate to drug use but each of them, if achieved, should lead plausibly to fulfilment of the general objective.

**4.1.18 Specific objective 1 (outcome evaluation)**

**4.1.19 Specific objective 2 (outcome evaluation)**

**4.1.20 Specific objective 3 (outcome evaluation)**

**4.1.21 Operational objectives (process evaluation).** The operational objectives are the outputs or products of the intervention, for instance training sessions held, manuals published and distributed, teachers trained, schools involved, peers recruited, but also the demands for repetition of the intervention and the degree of acceptance. These are technical, intermediate aims in order to achieve the changes in the target group you have previously defined as specific objectives.

Improve the level of information about each and every substance, along with their effects, risks and harm, as well as the consequences of drug use. Information can be presented on the Internet about drugs and their effects, the levels of use in Spain and the legal status of each substance. However, it is also possible to mention risk factors (those that favour drug use) and protective factors and also offer information about services available if needed. The Internet is a wonderful platform for establishing an interactive relationship between the source that provides information or transmits a message and the end user. It presents numerous advantages over traditional methods: the transmission of information is immediate; it is a medium available 24 hours a day; it is an inexpensive resource, both for the provider and for the recipient; it can potentially reach everyone; it makes interaction or a two-way relationship possible; it is the technology that is now "in fashion" and the one that is experiencing the most growth worldwide.

**4.1.22 Basic assumptions/theory** Is there an explicit theory explaining your intervention and predicting its expected results running through your programme? If so can you identify and describe this theory? This theory will need to have a basis in the scientific literature such as medical, psychological, sociological etc. Alternatively: Is your intervention based on an implicit set of assumptions regarding how your intervention will work and what results it may provide? If so can you identify and describe these assumptions? Such assumptions may be developed through community learning or other grounded theory approaches.

The information is not a sufficient but necessary condition so that a change of behaviour is made. For that reason, our departure point is to use new information and communication technologies in order to transmit knowledge related to the drug dependency and addictions in a generalized, anonymous form and in real time.

## **5. Main characteristics**

### **5.1. Main characteristics**

**5.1.1 Target group (Universal)** Please indicate the final target group of the intervention

General population X

Children/young people X

Adults X

Family/Parents X

Other (Please specify below)

**5.1.2 Please describe age group for Children/Young people (Min/Max)**

8/18

**5.1.3 Describe any other target group (universal)**

**5.1.4 Target group (Specific). Please indicate the target group in relation to drug use**

Non-drug users X  
Experimental drug users X  
Drug users X  
Drug addicts X  
Problem drug users X  
Former drug users  
Other (Please specify below)

**5.1.5 Describe any other target group (specific)**

**5.1.6 Staff. How many people are involved in the intervention? Please specify, if possible, according to full-time staff, part-time staff and voluntary staff.**

From 1 to 5 weekly part-time voluntary staff (teachers/educators/journalists, GPs, social workers with youths) From 1 to 5 weekly part-time staff workers (psychologists and others)

**5.1.7 Staff. What is the status (profession) of staff working on the intervention e.g. psychologist, nurse etc?**

Teachers/educators, journalists, GPs, social workers with youths, psychologists and others.

**5.1.8 Coverage. How many people in each target group (universal) are reached by this intervention on an annual basis?**

99999

**5.1.9 Coverage. How many people in each target group (specific) are reached by this intervention on an annual basis?**

99999

**5.1.10 Substances addressed by the intervention:**

Alcohol X  
Tobacco X  
Cannabis X  
Cocaine and derivatives X  
Opiates X  
Amphetamines X  
Ecstasy X  
Methamphetamines X  
Inhalants/solvents X  
Other (Please specify below)

**5.1.11 Describe any other substance addressed by the intervention**

**5.1.12 Main substance addressed by the intervention:**

Alcohol  
Tobacco  
Cannabis X  
Cocaine and derivatives  
Opiates  
Amphetamines  
Ecstasy  
Methamphetamines  
Inhalants/solvents  
Other (Please specify below)

**5.1.13 Describe any other main substance addressed by the intervention**

Setting of intervention. Please note that the setting needs to match the type of intervention (1.2.1)

**5.1.14 Setting of prevention intervention**

School  
Community (including i.e.user scene) X  
Party scene  
Family  
Workplace

**5.1.15 Setting of treatment intervention**

Inpatient  
Outpatient  
GP

**5.1.16 Setting of social reintegration intervention**

Residential  
Community

**5.1.17 Setting of harm reduction intervention**

Low threshold service  
Needle/syringe provision  
Outreach/drug scene

**5.1.18 Setting of interventions in the criminal justice system intervention**

Prison  
Community

**5.1.19 Describe the setting of the intervention (if necessary)**

**5.1.20 Any other setting of intervention**

Yes  
No  
No Information

**5.1.21 Other. Describe any other setting of any other type of intervention**



**5.1.22 Action. Describe the main activities of the intervention and the type of service that is offered to the client. Kindly keep in mind that the description of the activities is of high relevance for the better understanding of the project.**

Update every day the web site with the most important news produces in the mass media and scientific Journals. Update with the new data about law, concerning Spain and Europe. Update our 'Calendar of Events' with all the conferences, seminars, congresses taking place in Spain and the most important taking place all around the world. Include new publications and others materials related with drug addiction published in Spain and from the EMCDDA. Send information across our mailing list to include nearly 8.000 persons from all around the world, every week.

## **6. Evaluation**

### **6.1. Evaluation**

#### **6.1.1 Evaluation status**

Evaluation has been carried out  X

Evaluation is currently running

Evaluation is carried out repeatedly

**6.1.2 Please indicate the month and year when the most recent evaluation was carried out (corresponding to the option you chose above (Evaluation status) (mm/yyyy)**

01/2005

#### **6.1.3 Type of evaluation**

Evaluation of intervention planning (needs assessment)

Process evaluation (how far are the operational objectives achieved)  X

Outcome evaluation (how far are the specific objectives achieved)

Impact evaluation (how far is the general objective achieved)

Other (Please specify below)

#### **6.1.4 Describe other type of evaluation**

Evaluation indicators. What indicators are used in order to monitor changes relating to the objectives?

**6.1.5 Outcome indicator 1 (relating to the specific objectives)**

**6.1.6 Outcome indicator 2 (relating to the specific objectives)**

**6.1.7 Outcome indicator 3 (relating to the specific objectives)**

**6.1.8 Process indicator 1**

The website has been active since 1996; this implies visitor interest and satisfaction. Every month, the [www.lasdrogas.info](http://www.lasdrogas.info) website, along with [www.lasdrogas.net](http://www.lasdrogas.net) (the first and only Directory of Internet Resources on addictions) serves up an average of 750,000 pages to over 150,000 visitors worldwide. It also has over 7,400 registered users, to whom information about addictions is periodically sent. It is the world's leading Spanish-language website on drug dependence.

#### **6.1.9 Process indicator 2**

Use and diffusion of the news related to the negative consequences associated to the drug consumption.

#### **6.1.10 Process indicator 3**

Visits received in the channel of parents/mothers and consultations generated by the subject families.

### **Evaluation design**

#### **Outcome evaluation**

#### **6.1.11 Evaluation design:**

Follow-up assessment  X

Pre-post design, no comparison group - naturalistic

Pre-post design AND comparison group - quasi-experimental

Pre-post design AND comparison group AND randomisation - RCT

Other (Please specify below)

#### **6.1.12 Describe other type of evaluation design**

#### **6.1.13 Quantitative data collection instruments, tools and measures used:**

Recognised (standard) instruments

Modified standard instrument used (e.g. a recognised standard instrument was used but modified according to programme specific needs)

Program specific instruments used (e.g. self-constructed collection instrument)  X

#### **6.1.14 Specify name of instrument(s) if you used a standardised instrument(s) for outcome evaluation:**

Statistics are gathered through a specific programme for measuring website traffic, "HTTP-ANALYZE 2.4 - A Log Analyzer for web servers" (<http://www.http-analyze.org/>).

#### **6.1.15 Specify name of instrument(s) if you used a modified standard instrument for outcome evaluation:**

#### **6.1.16 Please specify type of any qualitative data collection instruments (specify which type of data collection method was used e.g. semi-structured interviews, focus-groups, observation) used:**

Process evaluation

**6.1.17 Quantitative data collection instruments, tools and measures used in process evaluation:**

Recognised (standard) instruments

Modified standard instrument used (e.g. a recognised standard instrument was used but modified according to programme specific needs)

Program specific instruments used (e.g. self-constructed collection instrument)

**6.1.18 Specify name of instrument(s) if you used a standardised instrument(s) for process evaluation:**

**6.1.19 Specify name of instrument(s) if you used a modified standard instrument for process evaluation:**

**6.1.20 Qualitative data collection instruments. Please specify type of any qualitative data collection instruments (specify which type of data collection method was used e.g. semi-structured interviews, focus-groups, observation) used.**

**6.1.21 Type of Evaluator and references**

Internal evaluator X

External evaluator

Both internal and external

**6.1.22 Please specify the name of the external institution/s:**

**6.1.23 Give full reference for the evaluation report (when available):**

Instituto para el Estudio de las Adicciones (IEA). Memoria 2007. Tenerife: IEA; 2008

**7. Evaluation results**

**7.1. Results of evaluation**

**Present the results, to date, according to the specific and operational objectives**

**7.1.1 Results of outcome evaluation 1**

**7.1.2 Results of outcome evaluation 2**

**7.1.3 Results of outcome evaluation 3**

**7.1.4 Results of process evaluation**

As the website has been active since 1996, this implies visitor interest and satisfaction. Every month, the [www.lasdrogas.info](http://www.lasdrogas.info) website, along with [www.lasdrogas.net](http://www.lasdrogas.net) (the first and only Directory of Internet Resources on addictions) serves up an average of 750,000

pages to over 150,000 visitors worldwide. It also has over 7,400 registered users, to whom information about addictions is periodically sent. It is the world's leading Spanish-language website on drug dependence. The parents section actually is one the most successful part of the website.

## **8. Budget**

### **8.1. Budget**

#### **8.1.1 Annual budget**

Up to 100 000€X

Over 100 000 to 500 000€

Over 500 000€

Annual budget is not available

#### **8.1.2 Specify total budget:**

50.000- 100.000 Euros

#### **8.1.3 Sources of funding**

Local authorities

International organisations (operates in more than one country)

Regional authorities X

Community authorities

National government X

European commission

Non-governmental organisation

Private funds X

Other

#### **8.1.4 Percentage of funding from each source % of funding**

Local authorities

International organisations (operates in more than one country)

Regional authorities 30 %

Community authorities

National government 60 %

European commission

Non-governmental organisation

Private funds 10 %

Other

## **9. Abstract**

### **9.1. Abstract**

#### **9.1.1 Give a short summary of the intervention.**

Our project, "Sensitization of the youth population and their families to the problems resulting from drug use, through the Internet (website) and new mobile technologies (SMS)" has been created by health professionals, university professors and experts in the field of addictions, with the primary aim of preventing addictive behaviours among youth. It is also aimed at the adult population, which it seeks to inform about the

problems resulting from drug use. The Instituto de Estudio de las Adicciones (IEA) is an independent, non-profit, non-governmental organization whose activities take place in Spain. Information is a resource that is needed to make intelligent, informed and independent decisions when faced with any challenge (in this case, drugs). The real risks are a result of ignorance. There is no free choice without adequate knowledge. A society that is more educated, better informed and better trained about drugs will be more able to live in a world where they exist, with less risk of establishing conflictive relationships with them. The websites [www.drogasycerebro.com](http://www.drogasycerebro.com), together with [www.lasdrogas.info](http://www.lasdrogas.info) and [www.lasdrogas.net](http://www.lasdrogas.net) make up THE MOST IMPORTANT platform that in the SPANISH WORLD, offering useful, objective and scientific information via the Internet in order to build a more rational culture regarding drugs, and to create a perception that helps individuals adopt an independent attitude, aware of the pros and cons involved in any decision. Our aim is to enhance and reinforce this information/communication channel, appropriate for anyone who needs to acquire knowledge and form an opinion about the problems resulting from drug use. ANOTHER AIM IS TO PROMOTE HEALTH ACROSS SAYING NO TO DRUG USE, AND DISEMINATE RELEVANT INFORMATION AND DATA ABOUT DRUG ADDICTION This tool for transmitting information makes direct access possible for a large number of people, so that they can use new technologies to learn about the harm caused by drug use. The information presented is also useful for adults, parents, educators, etc., who want to know more about a subject which often comes up in their relationships with young people, and about which they are not sure they have the necessary knowledge. These different groups will find some useful keys for reflection on these web pages, in order to adopt clear and rational attitudes towards drug use. They are not an encyclopaedia, but rather a type of guide or compass which provides orientation in making decisions on a subject about which everyone has to decide at some point: drug use.

## **10. Output**

### **10.1. Outputs**

#### **10.1.1 List any interesting references, links, and literature relating to the intervention.**

[www.lasdrogas.info](http://www.lasdrogas.info) [www.lasdrogas.net](http://www.lasdrogas.net) [www.drogasycerebro.com](http://www.drogasycerebro.com)

## **11. Additional remarks**

### **11.1. Special remarks**

11.1.1 Use this space to add explanatory notes and highlight any specific features of the programme that are not well represented in other items of the questionnaire.

The programme is based on the development and maintenance of content included on the websites [www.lasdrogas.info](http://www.lasdrogas.info), [www.lasdrogas.net](http://www.lasdrogas.net) and [www.drogasycerebro.com](http://www.drogasycerebro.com). The websites are accessible to everyone via the Internet. It might be said that we currently 'publish' an average of 150,000 copies a month, as that is the average number of visitors to the main site, [www.lasdrogas.info](http://www.lasdrogas.info). These are dynamic websites, as they are updated every day with different sections: current news; new legislation; information about events, seminars and conferences; opinion pieces; discussion forums;

personal blogs; publication showcase; database of scientific journals; database of care facilities.

Report Comments:

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