

**EG on SIHLWA
Fourth Meeting
Helsinki, Finland
29 – 30 May 2007**

Reference	SIHLWA 4/5/1/Info 2
Title	Discussion on project implementation for “Alcohol & Drug Prevention among Youth in SPb”
Submitted by	SIHLWA Coordinating Chairman
Summary / Note	<p>The NCM funded project “Alcohol & Drug Prevention among Youth in SPb” is in the start-up phase. The project was thoroughly discussed in SIHLWA 3rd meeting in Vilnius.</p> <p>Additional reading: ANNEX 1: Short project summary ANNEX 2: Updated plans of 3 NGOs in SPb ANNEX 3: Summary of discussion of the project in SIHLWA 3rd meeting in Vilnius</p> <p>Mikko Vienonen and Anna Skvortsova will provide additional information for basis of discussion</p>
Requested action	For information and additional advise

ANNEX 1: Short project summary

ANNEX 2: Updated plans of 3 NGOs in SPb

ANNEX 3: Summary of discussion of the project in SIHLWA 3rd meeting in Vilnius

ANNEX 1: NCM and MoFA/Finland project documents

Nordic Council of Ministers

<p><i>To be able to complete this form you should first read attached guidelines.</i></p>	<p>1. Name of the project: Social Inclusion, Healthy Lifestyles & Work Ability: Alcohol and drug prevention among youth</p>	
<p>Nordisk Ministerråds sekretariat Store Strandstræde 18 DK-1255 København K. Denmark Att.</p>	<p>2. Starting year: 2007 3. Ending year: 2008 4. Total budget: 1,010.000 DKK [about 134.000 Euro]</p>	<p>5. Amount applied for in Danish Crowns (DKK): 600.000 DKK [about 80.000 Euro]</p>

Content

<p>6. Goal of the project: <u>Primary objectives:</u></p> <p>To improve measures on how to provide more assistance to young people/children at risk (and their families) of social and health consequences including use of alcohol and drugs, and to raise awareness of problems and to increase people's knowledge about their rights to care and assistance (incl. legal counseling). A gender perspective will be included in all stages of the project.</p> <p><u>Secondary (long term) objectives:</u></p> <ul style="list-style-type: none"> • To reduce alcohol and substance use in general and hazardous use in particular, and alcohol's destructive impact on young people's future. • To change misconception of society at large underestimating the negative impact of alcohol and drugs to health and wellbeing of individuals and to public health in general. • To influence risk-behaviour of young people towards responsible, sustainable relationship with alcohol, and towards abstinence vis-à-vis drugs.
<p>6a. Goal of the project in view of the sector's Collaboration Programme on Industrial Development Policy:</p> <p>Work ability of new working generation is crucial for industrial and economic development. Net-loss of human potential due to alcohol and drug use in financial terms is calculated in the category of billions of EURO per year in most European countries. Reduction of alcohol related accidents and disease is one of most urgent measures for health services to tackle. As an antagonistic industrial development one can see the growth of brewing sector in Russia. Public health concern has the obligation to challenge short term business interest of brewing and alcohol industry, which is lobbying in favour of ever growing consumption. As an immediate goal in Russia the project has that beer and other mild alcoholic beverages are rightfully classified as alcoholic drinks and regulated as such, recognizing and admitting their full societal, economic and legal consequences. Entertainment-business is strongly linked with alcohol, tobacco, and even illegal drug marketing and creating positive attitudes towards them. The social responsibility of entertainment-business needs to be recognized and explicitly addressed. Role models in every respect are crucial for young people who often drink alcohol in order to be like grown ups – including their own parents. Emphasizing gender¹ focus and youth perspective is a cross-cutting goal in the project.</p> <p>Nordic countries are presently struggling to maintain their values considering healthy lifestyles and moderation when it comes to alcohol consumption and zero-tolerance when it comes to the use of drugs. Global and commercial pressures have strong influence on consumption habits of alcohol among young people in particular. Increasing globalization also facilitates drug trade and exposes young generation to narcotics.</p>

¹ Carita Peltonen/NCM has promised to elaborate on the gender issue as appropriate

7. Summary of the project description²:

The project will start in St. Petersburg (with possible expansion to Kaliningrad region and the Republic of Karelia). In the second phase Estonia, Latvia and Lithuania will be involved. Dialogue among partners will draw from each others' experience and involve also Sweden and Finland. Media coverage of project activities will be used to raise public interest to the growing alcohol problem and what is in the process of happening in our developed regions as well. Northern Dimension Partnership political support will make this possible.

1. In project areas previous alcohol/drug intervention projects among youth will be quickly mapped and evaluated. The focus is on identifying the most innovative and practical interventions and "lessons learned", rather than trying to make an all-covering research. The aim is also to explore the validity of the hypothesis that unfortunately in their impact has been low or nil (in other words, countries are trying to tackle the problem with wrong methods and tools, and new ground-breaking approaches are now needed).
2. In project areas a stakeholder analysis of agencies and actors aiming to tackle alcohol/drug problem among youth and children (including "low threshold clinics" rendering assistance to especially young girls in difficult situations and in risk of alcohol and drug misuse, prostitution and even trafficking). Stakeholder analysis would also include assessment antagonistic forces.

3. In collaboration with St. Petersburg Youth & Children Health Promoting Projects/Programmes³

Estimation of efficiency and productivity of actions directed on healthy lifestyles of children and teenagers.
Definition of most effective ways and methods of influence on young population with the purpose of promotion of healthy lifestyles in respect to alcohol and drugs.

- Training of school teachers and psychologists to methods of initial preventive measures and rendering the initial/first help to children at risk.
 - Training teenagers to methods and monitoring and control of their own mental state and health and methods of self-control and coping strategy in different problem situations.
4. Media seminar for journalists (at least one per project site with the aim of repeating it towards the end of project period ("Creation of outrage").
 5. Seminar for local politicians to understand their role better and seriousness of the problem (at least one per project site with the aim of repeating it towards the end of project period ("Creation of determination").
 6. Development of regional and local legislative and administrative measures for better enforcement of alcohol and drug policies.

Nordic value

8. What is the need for Nordic co-operation in this field and how does the project contribute to this?

Concerning alcohol, the Nordic countries have a special agreement and understanding to work towards reduction of harm of alcohol. Also for narcotic drugs close collaboration exists. The Nordic countries have important experiences, which they together can share with other collaborative partners within Northern Dimension Partnership in Public Health and social Well-being (NDPHS), and they have come in agreement through the partnership to organize their activities within the region.

² Please observe: For projects that have previously been funded by the Nordic Council of Ministers, a short status report should be included.

³ St. Petersburg Health Committee (Head of Intl. Dept. Dr Yuri Petrov), St. Petersburg Social Committee, Project sites' expert- and administrative bodies (e.g. MAPS/ Medical Academy Postgraduate Studies), relevant NGOs.

9. How does the project strengthen the Nordic influence internationally?

Nordic influence is strengthened internationally when the project is implemented together with other partners (Baltic Sea States, France, Canada, EU, WHO, ILO, UNAIDS and other organizations). WHO and ILO, with involvement through their Moscow based country/regional offices, have taken a special responsibility on concrete issues and fitting the activities to their approved strategies. The project is fully in line with EU public health programme, WHO's and ILO's programme, and Barents' Sea Social- and Health programme. They will contribute in the actual implementation of the project and policy development.

Links of the project vis-à-vis the Convention of Children's rights further strengthen Nordic interest as defender of children.

10. How does the project strengthen the Nordic identity and community?

Alcohol and drug related problems (violence, accidents, mental and social problems, interpersonal conflicts, etc.) pose a serious risk to Nordic identity and community. The project will strengthen policies, which emphasize the importance of interventions, instead of a fatalistic attitude that we are powerless in front of the "alcohol and drug tsunami" which kills annually much more young people than the real tsunamis ever have done. Action needs to shift from retro-active to being pro-active.

11. How does the project take account of gender⁴ equality?

The project will take into account gender issues in general and equality in particular at every level as a cross-cutting issue. Social vulnerability due to alcohol and drug misuse affects girls and women in particular through violence in its various forms. Sexually transmitted infections threaten women in particular, and sexual exploitation with prostitution and trafficking are the top of the iceberg. The project will make a special effort for making the interventions/services particularly easily available and suitable for adolescent girls and women. Care systems should better learn to recognize gender specificities in alcohol and drug problems, and to develop suitable care packages. Recognition of gender specificity is also important for men, not only for women.

11. a. Output/results (whole project)

- **Project review and best practises focusing on and evaluating alcohol/drug use programmes and low threshold units;**
- **Stakeholder analysis in project areas;**
- **Young people at large provided with skills to cope with alcohol and refuse drugs.**
- **Development, testing and distribution of methodology to better identify children at risk of alcohol and drugs;**
- **Media seminars (1-2 per site) organized;**
- **Decision makers/administrators seminars (1 per site) organized;**
- **Regional and local legislative and administrative measures for better enforcement if alcohol and drug policies identified and enforced.**

11.b Activity outline (whole project)

- **Project review by end of 2007;**
- **Stakeholder analysis by end of 2007;**
- **Coping skills through schools and other possible channels for general youth improved;**
- **[Children at risk identification methodology October 2007 – September 2008];**
- **Media seminars (1-2 per site) autumn 2007 and autumn 2008;**
- **Decision makers/administrators seminars (1 per site) spring or autumn 2008**

⁴ Carita Peltonen/NCM has promised to elaborate on the gender issue as appropriate

11.c Indicators for fulfilment of the objectives (on gender focus)

- Project reporting statistics need to be gender sensitive and specific (e.g. number of girls/women of target group; number of women among journalists in training; number of women among politicians & administrators in training, etc.);
- Qualitative indicators: problems for boys and girls specifically analysed;
- All actors involved have awareness and focus on gender perspective in all stages of project;
- Methods developed specifically suited/adapted for girls/women and boys/men.

11.d Success criteria (assessing success/failure will be very difficult due to multi-factoriality and difficulty in deciding about causality. Nevertheless, the project tries to assess:

- **Successful implementation of activities;**
- **Assessment of media understanding of the problem before and after;**
- **Assessment of politicians'/administrators' understanding of the problem before and after;**
- **Positive development of administrative interest and measures protecting children and adolescents from alcohol and drugs.**

12. When and how will the results be used and/or published?

The project will be implemented because this is an important focus of the NDPHS. Through a thorough consultancy process the NDPHS came to the conclusion that lifestyle related health and social problems not only in Russian Federation but in the whole Northern Dimension area pose one of the biggest threats to both economic and human social development in general. Russia is already facing a demographic crisis of unprecedented magnitude, and Nordic and Baltic countries will soon follow. Finland has already become the most violent and accident prone country within the European Union, and the situation is getting worse. The project will improve understanding and awareness of the problem. Special emphasis is put on media collaboration and to create "outrage" of the situation that our societies would rather close their eyes from. NDPHS provides a good forum to make our message to penetrate decision makers, media, professional organizations, NGOs and the general public.

Nordic media and decision maker forum (tentatively in May 2007) in Stockholm in connection of the conference for Committee of Baltic Sea States (CBSS) under Swedish chairmanship will provide a high level forum to publicize the project's findings and results by that date.

13. Other arguments why the project should be financed by the Nordic Council of Ministers

The project is very timely and extensive background work through the SIHLWA expert group has been done three sub-groups, which have met in November 2005 and May 2006:

Subgroup on Alcohol (periodic/ "binge" drinking) (Chair Kari Paaso⁵/WHO-EURO)

Subgroup on Adolescent health and socially-rewarding lifestyles (Chair Mikko Vienonen/ Daiva Zeromskiene⁶)

Sub-group on Workplace health and safety (Chair Wiking Husberg⁷/ ILO-Russia & Remigijus Jankauskas⁸/ Institute of Occupational Health- TTL/Finland)

The NCM is one of the Partner organizations, which has expressed concern of well-being of youth in the north, gender related inequalities, and social exclusion. It is fully in line with Nordic values to emphasize the importance of investing into human capital, especially the young generation.

⁵ kari.paaso@stm.fi

⁶ daiva.zeromskiene@takas.lt

⁷ husberg@ilo.org

⁸ jank@dmc.lt

Participants

<p>14. Project leader⁹: Dr. Mikko Vienonen Consultant in International Public Health Coordinator for SIHLWA* Sysimiehenkuja 1 FIN-00670 HELSINKI, Finland Tel GSM: +358 50 442 18 77 Tel bost. +358 9 724 86 21 E-mail: m.vienonen@kolumbus.fi</p> <p>* NDPHS Expert Group on Social Inclusion, Healthy Lifestyles and Work Ability</p>	<p>15. Responsible organisation/Administrative body¹⁰:</p> <p>a) Secretariat of the Northern Dimension Partnership in Public Health and Social Well-being P.O.Box 2010 SE-103 11 STOCKHOLM, Sverige Tel. +46 8 440 19 20 Fax: +46 8 18 44 Marek Maciejowsky e-mail: marek.maciejowsky@ndphs.org</p> <p>b) Nordiska ministerrådets informationskontor i S:t Petersburg</p> <p>Contact person (responsible for the contents and finance of the project): Dr. Mikko Vienonen (see item 14.) E-mail: m.vienonen@kolumbus.fi</p> <p>Auditor (if the project sum applied for exceeds DKK 50.000):</p>
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<p>16. Participants from Nordic countries or from the adjacent areas (Lithuania, Latvia, Estonia, NW Russia)</p> <p>Finland (MoSA&H)¹¹ and Lithuania (MoH)¹² and Sweden¹³ have pledged financial support to the SIHLWA EG, which would be responsible for the implementation and subcontracting of activities needed for the project. Sweden has also after the April meeting of Senior Representatives decided to pledge financial support specifically to this SIHLWA Adolescent health lifestyle-focused project. The exact amounts have not yet been defined but it is envisaged that these three funding sources would provide sufficient matching funds for the project (3 x DKK 100.000/ about 3 x 13.000 EURO).</p> <p>NCM Information Office in St. Petersburg (Sweden House, Malaya Konyushennaya ul. 1/3, RU-191186 St. Petersburg), co-ordinates and administrates the project.</p> <p>NDPHS/SIHLWA Expert group members and their background organizations (see list in ANNEX) will be involved as implementers and partners. This is a great asset for the project, because networking has already started. Existing contacts with municipal authorities and political structures will be an enhancing factor in a project, which is operating on a difficult, delicate and politically sensitive topic</p>
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⁹ Name, institution, address, telephone, fax, e-mail.

¹⁰ Institution, address, telephone, fax, e-mail.

¹¹ Ms Seija Saana, Ministerial Advisor of International affairs/ MoSA&H/Finland, phone: +358-9-160 73168, Fax:+358-9-160 73 296, e-mail: seija.saana@stm.fi

¹² Mr Viktoras Meizis, Head of Foreign Affairs division at MoH/Lithuania, phone: +370-526 6 1420, Fax: 370-526 6 1402, e-mail: viktoras.meizis@sam.lt)

¹³ Ms Kerstin Ödman, Deputy Director, Socialdepartementet/ MoH&SA, S-103 33 STOCKHOLM, Phone: +46-8-405 22 46, Fax.: +46-8-21 78 76, e-mail: kerstin.e.odman@social.ministry.se ,

17. Is the project in accordance with national priorities? How is the project anchored nationally?

The project is fully in line with the Nordic countries' national strategies and priorities within health- and social sector, health promotion, collaboration within alcohol policies, drugs and NDPHS agreements.

The project is also in line with the Partnership countries' (Russian Federation, and the Baltic States) national strategies and priorities . Combating the harmful use of alcohol and drug abuse and its consequences is an explicitly expressed common goal.

Evaluation

18. How will the project be evaluated?

The project will be monitored on continuous basis through SIHLWA Expert Group. Feed back will be requested twice per year. Criteria for evaluation will be further developed in SIHLWA biannual meetings.

WHO-EURO is requested to provide external evaluation support.. This would also benefit WHO's own alcohol strategy development.

Final evaluation will be made at the end of the project.

19. Expected end date of the project (071231) End of 2007		NB: There will be a subtraction of 15% of the total sum per month if the project is not finished within two months after the date given here.		
20. Geographic distribution Which countries are involved in the project? 00 means institutions within the authority of the Nordic Council of Ministers	Country 1:14	00: Nordic institutions 01: Denmark 02: Finland 03: Iceland 04: Norway 05: Sweden	11: Estonia 12: Latvia 13: Lithuania 14: Russia	
	Country 2:11 ?			
	Country 3:12 ?			
	Country 4:13 ?			
	Country 5: 02 ? Country 6: 05 ?			
21. Type of activity	<input type="checkbox"/> Making a study <input type="checkbox"/> Evaluation <input type="checkbox"/> Research <input checked="" type="checkbox"/> Competence development <input type="checkbox"/> Other, please specify			
22. Type of results	<input type="checkbox"/> Publication/report <input type="checkbox"/> Seminar/conference <input checked="" type="checkbox"/> Seminar+publication <input checked="" type="checkbox"/> Network/mobility <input type="checkbox"/> Exhibition <input checked="" type="checkbox"/> Other, please specify*	*Policy guidelines for health, social and school authorities to deal better and more effectively with adolescents: primary prevention to all, special services for youngsters in risk and intensive interventions for victims with serious disturbances and problems		

Budget* / see Excel spreadsheet attached

Costs (in Danish crowns, DKK)	2006	2007	2008
23. Wages			
24. Social expenditures			
25. Travel			
26. Dissemination of results			
27. Evaluation			
28. Other expenditures, please specify			
29. Total project expenditures			
30. Comments on expenditures: * See separate Excel spreadsheet			
Funding (in Danish crowns, DKK)	2006	2007	2008
31. Funding by your own ¹⁴ means			
32. Nordic Council of Ministers	300.000 DKK	300.000 DKK	
33. Nordic national funding	205.000 DKK	205.000 DKK	
34. EU funding			
35. Other funding, please specify (BCA-Russia / EURO/Paaso) tentat. ¹⁵	[? WHO-EURO 5.000\$]	[? WHO-EURO 5.000\$]	
36. Total project funding	505.000 DKK	505.000 DKK	
37. Comments on funding (please note if applied for or granted): Finland: 100.000 DKK /Granted for SIHLWA/ status of pledge for this project needs to be verified. Lithuania: 100.000 DKK/Granted for SIHLWA/ status of pledge for this project needs to be verified. Sweden: 221.000 DKK/ status of pledge for this project needs to be verified.			
	2003	2004	2005
38. Former funding from the Nordic Council of Ministers, if any.	None	None	None

¹⁴ N.B.: NDPHS/SIHLWA is neither an organization nor an NGO. Therefore, it cannot provide independent funding from its Partner countries and/or organizations. Matching must therefore come from partners.

¹⁵ Technically possible (Russia earmarked funding on Alcohol) but requires more discussion in EURO

39. Enclosures to the application:
 a) Detailed project description (**in due course**)
 b) Detailed budget/ **YES**
 c) Time table for the project completion (**in due course**)

<p>40. Applicant¹⁶: Nordic Council of Ministers Maria-Pia de Palo (Senior Adviser) mpp@norden.org Tel: +45-339 60 277 Carita Peltonen (Senior Adviser) cp@norden.org Tel: +45-339 60 345</p> <p>Store Strandstræde 18 DK-1255 København K. Denmark</p>	<p>41. Date and signature of the applicant: / June, 2006</p> <p>..... (signature)</p>
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Project component from MoFA/ Finland:

**MINISTRY FOR FOREIGN AFFAIRS
 UNIT FOR NEIGHBOURING AREA COOPERATION (ITÄ-24)**

Project Description 2007-2008

Ministry in charge: Ministry of Social Affairs and Health / Finland
Project Title: Alcohol and drug prevention among youth in St. Petersburg
New Project: YES On-going Project/Number: -
Sector: Social and Health
Project's starting year and estimated duration: 2007-08 (2 year)
Target Country: Russian Federation
Target Regions in Russia: St. Petersburg City (as target areas for the intervention in schools, health care sector and social services will be chosen 2-3 city-rayons, as will be agreed upon with the St. Petersburg City Health Committee)
Implementing Organisation (Finland): Finnish Centre for Health Promotion, Karjalankatu 2 C 63, 00520 Helsinki, FINLAND. Tel: +358 9 7253 0300, Fax: +358 9 7253 0320. [Mika Pyykkö (mika.pyykko@health.fi), Executive Director] ,

¹⁶ Name, institution, address, telephone, fax, e-mail

National Public Health Institute, Mannerheimintie 166, 00300 Helsinki, FINLAND, Tel: 358 9 4744 8936, Fax: +358 9 4744 8338 [Tiina Laatikainen (tiina.laatikainen@ktl.fi) Chronic Disease Prevention Unit , Head of the Unit].
A-Clinic Foundation Tel:+358-9-6220 2934 [Ari Saarto, (ari.saarto@a-klinikka.fi)]

NORTHERN DIMENSION PARTNERSHIP FOR PUBLIC HEALTH AND SOCIAL WELLBEING

Expert Group on Social Inclusion, Healthy Lifestyles & Work Ability

Coordinator, Dr. Mikko Vienonen, GSM:+358-504421 877, e-mail: m.vienonen@kolumbus.fi

Organisation in charge (Target Country): St. Petersburg Health Committee (Contact: Head of Intl. Dept. Dr Yuri Petrov), St. Petersburg Social Committee, Project sites' expert- and administrative bodies (e.g. MAPS/ Medical Academy Postgraduate Studies), relevant NGOs.

Implementing Organisation (Target Country):

STELLIT, Saint Petersburg. Non-Governmental Organization of social Projects. Bumazhnaya ul. 9/617, St Petersburg, Russia. 190020. Tel.: +7-812-445 28 93, Fax: +7-812-445 28 94, GSM: +7-812-934 46 33 [Maia Rusakova, (maia@ngostellit.ru) Director]

Note: other implementing NGOs need to be identified, as well. Process is ongoing.

Ministry's proposal for financing to the MFA (EURO): 30.000 €

Local Financing

EURO: 23.000 € when calculated from the total budget of the project (161,000€) consisting mainly in kind contributions from St. Petersburg own staff time and facilities for seminars, workshops, etc. In proportion of the MoFA/Finland contribution the local financing is calculated to be about 4,500 €, **about 14.2 % of the total budget:**

Other Financing: EURO: 108.000 € NCM, Sweden

Short description of the project

Objectives:

To improve measures on how to provide more assistance to young people/children at risk (and their families) of social and health consequences including use of alcohol and drugs, and to raise awareness of problems and to increase people's knowledge about their rights to care and assistance (incl. legal counseling). A gender perspective will be included in all stages of the project.

Long term objectives:

- To reduce alcohol and substance use in general and hazardous use in particular, and alcohol's destructive impact on young people's future.
- To change misconception of society at large underestimating the negative impact of alcohol and drugs to health and wellbeing of individuals and to public health in general.
- To influence risk-behaviour of young people towards responsible, sustainable relationship with alcohol, and towards abstinence vis-à-vis drugs.

The most important activities:

1. The project will start in St. Petersburg in 2007. Previous alcohol/drug intervention projects among youth will be quickly mapped and evaluated. The focus is on identifying the most innovative and practical interventions and "lessons learned", rather than trying to make an all-covering research. The aim is also to explore the validity of the hypothesis that unfortunately in their impact has been low or nil (in other words,

countries are trying to tackle the problem with wrong methods and tools, and new ground-breaking approaches are now needed.

2. In St Petersburg will be performed a rapid stakeholder analysis of agencies and actors aiming to tackle alcohol/drug problem among youth and children (including “low threshold clinics” rendering assistance to especially young girls in difficult situations and in risk of alcohol and drug misuse, prostitution and even trafficking). Stakeholder analysis would also include assessment antagonistic forces in order that they could be influenced or at least take into consideration their negative impact.

3. In collaboration with St. Petersburg Youth & Children Health Promoting Projects/Programmes, estimation of efficiency and productivity of actions directed on healthy lifestyles of children and teenagers. Definition of most effective ways and methods of influence on young population with the purpose of promotion of healthy lifestyles in respect to alcohol and drugs. Based on this, an intervention will be implemented by:

- Training of school teachers and psychologists to methods of early preventive measures and problem identification and rendering the initial/first help to children at risk.
- Training teenagers to methods and monitoring and control of their own mental state and health and methods of self-control and coping strategy in different problem situations.

4. Media seminar for journalists (at least one per project site with the aim of repeating it towards the end of project period. In media language we aim towards “creation of outrage²” towards a problem which no longer seems to concern anyone, at least not the media in spite of the fact that thousands of people die and otherwise destroy their lives (compare with bird-flu, which so far in Russia not a single person has neither got nor died, but which everyone is afraid of demanding that authorities have done all possible and impossible to protect human life.

5. Seminar for local politicians to understand their fundamental role better and seriousness of the problem (at least one per project site with the aim of repeating it towards the end of project period (“Creation of determination”). You cannot remove the problem, if you do not want to remove it.

6. Development of regional and local legislative and administrative measures for better enforcement of alcohol and drug policies, which are suited for existing circumstances, in order to strengthen poorly functioning alcohol and drug policies. These models will be discussed at seminars directed for journalists and politicians (see item 4 and 5)

To be noted as clarifying information:

This project component, for which funding is now sought from MoFA/Finland (30,000 EURO) will be about 25% of the whole project on “Alcohol and Drug Prevention among Youth in SPB”, mainly to be funded through Nordic Council of Ministers. With this input we will be able to channel Finnish NGO and other expertise to this project, for which Nordic Council of Ministers plans to provide most of expenses locally. Without input from Finland the use of experts outside Russia would be very limited, which would weaken the whole implementation of the project. A-Clinic Foundation (“A-klinikka säätiö”), Public Health Institute (KTL) and the Finnish Centre for Health Promotion (including its “Russia Network”), have long term experience in social projects similar to this one. Hence, working together will provide excellent opportunity to continue from where previous projects and programmes have already reached. Through NDPHS/SIHLWA network and the good links with St. Petersburg Health committee we will be able to use the political strength and achieve more sustainable results through incorporating the practices into mainstream activities.

ANNEX 2: Updated plans of project implementation unit and 3 identified NGOs in SPb

ALCOHOL & DRUG PREVENTION AMONG YOUTH IN St. PETERSBURG (A&D PreY SPb)

Information and Analyses Center for Social and Health NGOs, St. Petersburg Action Plan for April-December 2007

April-May:

1. Project review
2. Stakeholder analysis in project areas and pointing out local actors in St. Petersburg
3. Negotiations with potential project partners
4. Preparation of the project proposals of local NGOs working in alcohol/drug sector with young people
5. Selection of activities that could have an impact
6. Agreement on timetable
7. Writing project proposals, translation to English
8. Recruitment of A&D PreY SPb Project Coordinator, Project Assistant and part time accountant
9. Cooperation agreement with Information Bureau of the Nordic Council in St. Petersburg
10. Establishment of a project Steering Committee in St. Petersburg
11. Establishment of a project work group consisting of all local actors and participating organizations (Health committee, Social committee, Young affairs committee, Stellit, Rovesnik, Vzgliad v budusceje)
12. Preparation of annual work-plans for upcoming project activities, to be discussed and decided upon at the St. Petersburg based Steering Committee;
13. Organization of group discussions and the process of decision making (work group meetings - 1 x month or if necessary more often)

June-August:

14. Previous activities continued
15. Informing all the stakeholders and the participants of the project about project activities;
16. Coordination of possible activities (public action of "Vzgliad v Budusceje" – 1-st of June?)
17. Organization of group discussions and the process of decision making (seminars, meetings, working groups, evaluation meetings etc.);

18. Work with mass media;
19. Preparation of methodological materials;
20. Fulfilling other project related tasks as decided and approved by the Project Steering Committee;
21. Preparation of quarterly report of the project for steering committee and project funding agencies according to their rules and regulations;

September-December:

22. Previous activities continued
23. Updating of the plans of activities of project partners
24. Coordination of the activities of NGOs according to the action plan
25. Organization of the seminar for media
26. Organization of the seminar for decision makers
27. Preparation of quarterly (and annual) report of the project for steering committee and project funding agencies according to their rules and regulations

A. NGO STELLIT

Project budget – Stellit: € 10.800

11.b Activity outline (whole project)

- **Project review by end of 2006;**
- **Stakeholder analysis by end of 2006;**
- **Coping skills through schools and other possible channels for general youth improved;**
- **Children at risk identification methodology October 2006 – September 2007;**
- **Media seminars (1-2 per site) spring 2007 and autumn 2007;**
- **Decision makers/administrators seminars (1 per site) spring or autumn 2007**

Proposals of SPb NGOs:

“Stakeholder analysis”

The focus of stakeholder analysis of agencies and actors aiming to tackle alcohol/drug problem among youth and children is on identifying the most innovative and practical interventions and “lessons learned”, rather than trying to make an all-covering research.

Estimation of efficiency and productivity of actions directed on healthy lifestyles of children and teenagers will be done. Definition of most effective

ways and methods of influence on young population with the purpose of promotion of healthy lifestyles in respect to alcohol and drugs will arise as a result.

SPb NGO "Stellit" will map and analyze:

- Best practices in alcohol prevention among young people in St. Petersburg, including:
 - Preventive programs for young people provided by state, municipal and non-governmental organizations in St. Petersburg;
 - Peer-to-peer education (including on alcohol prevention);
 - Work of so called "Health Councils" in the schools aimed to share responsibility for planning and implementing of preventive work in the schools among teachers, school psychologists, social workers, parents and pupils; this work has to be systematic.¹⁷
- Best practices in other European countries.

Timetable: February – June 2007

Reason: Various trainings are provided today in St. Petersburg' schools in order to improve skills in preventive work. They are organized by Academy of post gradual education, Departments of education of city districts' administration, Scientific-methodological centers and Psychological-medical-social centers in 18 districts of the city, with a participation of local NGOs.

As a result, in the schools a lot of various actions are organized aimed to health promotion and prevention of risk behavior among the pupils. For ex. "Days of Health" are organized every year, excursions to the Museum of Hygiene, thematic lectures in the classes, competitions, exhibitions, publishing of the student's newspapers and radio programs etc.

But still preventive work is not enough efficient in the most of the schools of St. Petersburg:

- Preventive actions are aimed on importance of healthy lifestyle as a whole, to prevention of smoking, drug and HIV-prevention. There are almost no actions aimed on alcohol prevention. One of the reasons is that school teachers and other specialists in the schools are poorly informed about the alcohol problems, about organizations provided assistance in a case of alcohol problems and they have almost no skills of practical preventive work in this sphere.
- Young people themselves are not involved: almost all work is provided by adults (school teachers and other specialists working in the schools).
- Responsibility for prevention work is not shared equally among school specialists. Usually it's vice-director for education who is responsible for prevention but often it's not among the priorities in the long list of duties.
- Preventive work is not systematical.

¹⁷ Health Councils have been established in 9 schools of Nevsky district of St. Petersburg as a result of joint Finnish-Russian project "Support to the Schools for Development of Healthy Lifestyles of the Pupils in St. Petersburg in 2004-2006". Main partners of the project were Stellit and STAKES. Financial support: Ministry of Foreign Affairs of Finland.

Results will be presented to the project group and to the schools of Nevsky district of St. Petersburg that will be chosen as pilot areas for the project (see below). Practices that could be trained and used afterwards in the schools will be discussed with the school specialists and young people.

“Coping skills through schools and other possible channels for general youth improved”

In project areas previous alcohol/drug intervention projects among youth will be quickly mapped and evaluated. The focus is on identifying the most innovative and practical interventions and “lessons learned”, rather than trying to make an all-covering research. The aim is also to explore the validity of the hypothesis that unfortunately in their impact has been low or nil (in other words, countries are trying to tackle the problem with wrong methods and tools, and new ground-breaking approaches are now needed.

2. In project areas a stakeholder analysis of agencies and actors aiming to tackle alcohol/drug problem among youth and children (including “low threshold clinics” rendering assistance to especially young girls in difficult situations and in risk of alcohol and drug misuse, prostitution and even trafficking). Stakeholder analysis would also include assessment antagonistic forces.

3. In collaboration with St. Petersburg Youth & Children Health Promoting Projects/Programmes¹⁸

Estimation of efficiency and productivity of actions directed on healthy lifestyles of children and teenagers. Definition of most effective ways and methods of influence on young population with the purpose of promotion of healthy lifestyles in respect to alcohol and drugs.

- Training of school teachers and psychologists to methods of initial preventive measures and rendering the initial/first help to children at risk.
- Training teenagers to methods and monitoring and control of their own mental state and health and methods of self-control and coping strategy in different problem situations.

4. Media seminar for journalists (at least one per project site with the aim of repeating it towards the end of project period (“Creation of outrage”).

5. Seminar for local politicians to understand their role better and seriousness of the problem (at least one per project site with the aim of repeating it towards the end of project period (“Creation of determination”).

6. Development of regional and local legislative and administrative measures for better enforcement of alcohol and drug policies.

Proposal of “Stellit”:

Initial phase of the project should include:

¹⁸ St. Petersburg Health Committee (Head of Intl. Dept. Dr Yuri Petrov), St. Petersburg Social Committee, Project sites’ expert- and administrative bodies (e.g. MAPS/ Medical Academy Postgraduate Studies), relevant NGOs.

1. Inform school directors and school administration about the project. Choose particular schools for participation in the project.
 - Presentation of the project for Scientific-Methodological center of Nevsky district (coordinating body for project that includes trainings for the schools); choosing 6 schools supposed to participate in the project;
 - Presentation of the project for directors and administration of the schools, discussion about participation of school staff in the project;
 - Writing list of the schools and school staff participating in the project

Timetable: March-May 2007

2. Analyses of the best practices in alcohol prevention, including peer-to-peer education (see above)

Timetable: February-June 2007

Implementation phase consists of:

3. Development of training program for the schools in prevention of alcohol consumption among teenagers; searching of the trainers; preparation of handouts for trainings.
 - Development of the program of 2-days initial seminar for school staff;
 - Agreement with the specialists on participation in the seminar (leading, teaching);
 - Writing handouts materials for trainings.

Timetable: July-September 2007

4. Training of the school staff in prevention of alcohol consumption among teenagers
 - Development of the instruments for evaluation of an effectiveness of the seminar (September 2007)
 - Organization of 2-days seminar-training for school staff on alcohol prevention among teenagers (October 2007)
 - Data collection (on evaluation of an effectiveness of the seminar), entering and interpretation of data (October 2007)

Timetable: September-October 2007

5. Organization of the meetings of Health Councils in the schools participating in the project; support to the staff in development of the action plan for prevention of alcohol consumption among teenagers tailored to particular school and using skills learned in the trainings.
 - Organization of the meetings of the Health Councils in each school, participating in the project; development of action plan of alcohol prevention for each school (November 2007)
 - Including of these prevention actions to the schools plans on healthy lifestyles for 2007/2008 school year (December 2007)

Timetable: November-December 2007

Target group: vice-directors responsible for education, teachers, psychologists, social pedagogues, school nurses of 6 schools of Nevsky district of St. Petersburg¹⁹

Reason: In year 2006 SPb NGO "Stellit" interviewed pupils of 9-11-th classes of 9 secondary schools of Nevsky district of St. Petersburg. 92,7% of them said that they have an experience of using alcohol, including soft drinks. First attempt for most of them happened in age 14-16 (40,9%) or age 11-13 (36,0%). Concerning types of alcohol: wine (85,3%), soft drinks (82,8%), beer (78%) and liquors (55,4%). Soft drink and beer are used weekly (once or several times a week), wine and liquors – 1-2 times a year. Teenagers said that they experienced negative consequences of using alcohol: 20% - that their friends were worried about them and told them about dangers of using alcohol; 10% were absent because of using alcohol.

"Stellit" proposes to strength alcohol prevention in the schools. Nevsky district is supposed to be pilot district: there is good basis thanks joint Finnish-Russian project on Healthy Lifestyle in the schools implemented by Stellit and STAKES in 2004-2006. District also participated in joint Finnish-Russian project "NESTS – Children and Families of Risk" supported by Tacis CBC program (2005-2006).

18. How will the project be evaluated?

The project will be monitored on continuous basis through SIHLWA Expert Group. Feed back will be requested twice per year. Criteria for evaluation will be further developed in SIHLWA biannual meetings.

WHO-EURO is requested to provide external evaluation support.. This would also benefit WHO's own alcohol strategy development.

Final evaluation will be made at the end of the project.

Stellit is ready to do evaluation of the whole project. This can be discussed after project plan will be completed.

B. NGO Vzgliad v budusceje

Project budget – Vzgliad v budusceje: € 13.000

11.b Activity outline (whole project)

- **Project review by end of 2006;**
- **Stakeholder analysis by end of 2006;**
- **Coping skills through schools and other possible channels for general**

¹⁹ Stellit suggests that project will be implemented in 6 of 9 schools in Nevsky district of St. Petersburg that participated in the Finnish-Russian project "Support to the Schools for Development of Healthy Lifestyles of the Pupils in St. Petersburg in 2004-2006".

youth improved;

- Children at risk identification methodology October 2006 – September 2007;
- Media seminars (1-2 per site) spring 2007 and autumn 2007;
- Decision makers/administrators seminars (1 per site) spring or autumn 2007

Proposals of SPb NGO “Vzgliad v budusceje” (Look to the Future)²⁰:

I. Project “**Independence Day**” in the secondary schools / technical colleges of St. Petersburg (and Leningrad oblast). The project on the organization and carrying out of actions and measures in educational institutions of Saint-Petersburg and Leningrad region, aimed at propagation of healthy life style and preventive measures of drug addiction, alcoholism, tobacco smoking, HIV/AIDS among teenagers, and also intended for stirring up of youth for participation in solving social problems.

Duration: 12 months

Target group: students, age 13-18; teachers, social workers, psychologists, parents, volunteers.

Aim:

- Development of interaction program of “Day of health” – action “Independence Day” – in the schools and colleges in order to focus on health promotion and alcohol prevention among young people, with using play methods in education and creating motivation to healthy lifestyle;
- Healthy lifestyle education is organized as preventive games and trainings;
- Presentation of new methods of prevention to the teachers, psychologists, social workers of the schools and colleges;
- Establishment of network of the specialists of social sector and education, between state institutions/organizations and NGOs.

“Independence Day” will be organized each month in various schools and colleges of St. Petersburg and Leningrad oblast by a mobile team of young people with wide scope of technical tools.

1-st phase of implementation of the project (2 months):

- Buying necessary equipment and materials (see list in the budget);
- Writing detailed scenario of the action “Independence Day”, creating logo;
- Writing texts (information materials) for the seminars;
- Decorations and requisit (props) for the game will be made;
- Information bulletins and posters will be printed;
- T-shirts and caps with logo will be made for encouragement of the active participants of the game;
- Meetings (negotiations) with schools’ administrations will be organized in order to make agreement on schedule of the actions on particular schools (timetable will be agreed).

²⁰ NGO “Vzgliad v budusceje” (Look to the Future) has been established and registered in 1994. Mission: health promotion, prevention of risk behavior of young people, involvement of the young people into prevention work. Central office is located in St. Petersburg, main staff: 15 people, volunteers in Russia (youngsters movement “Ekho”) – 2500. www.vvb.spb.ru

Second phase (9 months):

- Monthly actions "Independence Day" in the schools and colleges: mobile, technically equipped team of young people (5-10 leaders and 10-15 volunteers of the youth movement "Ekho") will come to the place. During 2 hours equipment will be installed on the place (hall, classes, stations). All participants of the action will be gathered in a hall and introduced with presentation of «Independence Day» project which includes advertising video specially prepared for the action, flash-cartoon films, the story about forthcoming game. Participants will be divided into teams of 8-10 people, they think out the name of the team and choose captain. Each team is supervised by a volunteer. The game starts.

Game by stations is a preventive game, the essence of which is receipt of the information, overcoming of obstacles and solving of the problems placed at each station. Each team will be offered to pass through the route which is planned in advance, as specified in a map. The route will consist of alternate game and information stations. Stations will be placed in separate rooms (classes). Information stations represent a brief seminar on which the participants of the game will be provided with information on specific problems (preventive measures against alcoholism) with the use of role games, interactive techniques of preventive work. At game stations participants of the action will pass the certain tests (испытания), thus using the received knowledge. At each station (information and game) each team earns counter-points. The team which has received biggest number of counters, will be declared a winner and receive the main prize. The Final stage of the action will take place in a hall. Participants and leaders gather all together, the results of game will be declared, prizes handed over. The basic moments of the game will be video recorded. Upon termination of game the equipment and decorations will be dismantled.

Third phase (1 month):

- Summary and results of the games;
- Report – finance and analytical – is written, including video-report of the action "Independence Day".

After project is completed, cooperation with schools will be continued. The further exchange of new techniques and the information, carrying out of preventive measures and actions is supposed.

II. Street action

Street public action is organized in order to attract attention to an important problem – alcoholism and promote healthy lifestyle.

Slogan of the action: "You can live without it – hammer in!"

Main target group: young people from 14 to 30. For participation of younger children will be organized special competitions and sideshows.

Plan of the action:

3 wooden figures - bottle, syringe and cigarette – are installed on the street. Compere person (ведущий) invites passerby people to participate in the action. They can choose one cotton thread – red, blue and yellow, tie it around a nail and hammer it to

one of the figures. Each color represents particular opinion and attitude to alcohol, smoking and drug consumption.

Participants can also test their knowledge about alcohol and drug consumption, smoking – they can answer to the questionnaire and get a prize and information leaflets (posters etc.). Volunteers propose to the participants and passerbies various interactive entertainments and amusements that allow to be included into an action small children and whole families.

In parallel there are 4 sideshows: "Break the cigarette – win a prize", "Knock off a cork", "Answer to the questions about alcohol and win a prize", etc. There is around a stand with infomaterials about topics.

Scheme of action (figures and volunteers):

Installation 1,2,3 – figures "Bottle", "Syringe", "Cigarette" (3 volunteers for each figure, = 9 volunteers)

Installation 4 – acoustic system (1 specialist and 1 volunteer = 2 people)

Installation 5,6,7,8 – Sideshows (2 volunteers in each)

Installation 9 – place for competitions, scene (1 compere person and 2 assistants - volunteers)

Coordinates:

«Взгляд в будущее» Алексей Хмыров - директор Россия, 195030, Санкт-Петербург, пр. Энтузиастов, 53/2 Тел./факс (812)521-89-17 E-mail: Khmyrov@rol.ru / Mail@vvb.spb.ru Web-сайт: www.vvb.spb.ru	„Vzgliad v budusceje“ Alexei Khmyrov – director Pr. Entuziastov, 53/2 195030 St. Petersburg Russia E-mail: Khmyrov@rol.ru / Mail@vvb.spb.ru Web-сайт: www.vvb.spb.ru
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C. NGO "Rovesnik rovesniku"

Project budget –"Rovesnik rovesniku": € 3.800

Target groups:

- teenagers and young people in age from 14 to 18 years old, students from professional schools and colleges.
- specialists who work with young people, psychologists and teachers.

Tasks:

- To increase of level knowledge about formation of dependences, consequences of using psychoactive substances
- To give information about medical, social, psychological services for youth

- To create conditions for development of motivation on healthy lifestyle, social welfare
- To organize consulting on consequences of usage of psychoactive substances.
- To provide participation of volunteers in organization and leading of prevention events among students of professional schools.

1. Preparation of volunteers among participants of Movement "Rovesnik – rovesniku" for work on prevention of dependant behavior among students of professional schools – March – May – September. The coverage: 20 people.

2. Supervision group for volunteers as individual and professional support in work on prevention of dependant behavior – September – December. Participants: 20 pers.

Organizational meetings with administration and teachers of professional schools which participate in realization of project.

Probable participants of project:

- Railway college (zheleznodorozhnyi) (Central district)
- Industrial college (Central district)
- Trade-economical college (Central district)
- Aleksandrovskii college (Petrogradskii district)

3. An organization of teacher's councils in the professional schools. Topics: organization of prevention of dependant behavior in teenager's and youth's environment at the separate territory of professional school. Participants: 35 pers.

4. Organization of medical and consulting assistance to the teachers, psychologists and social workers of professional schools during the project. (Option.)

5. Dissemination of informational materials about medical, social, juridical, psychological help services for teenagers and youth. Participants: 400 pers.

6. Leading of trainings on programme "Discovery" for the councils of self-government of professional schools and separate groups by the demand of administration. September – October. Participants: min. 60 pers.

Our work on prevention of addictive behavior we plan starting from the definition of concept of prevention as active progressive process of creation of conditions and forming of personal qualities which support prosperity. Thus aim of prevention is the increase of the quality of life. Prevention is not only about medical aspects of health but it calls upon to change social, psychological status of personality and to provide conditions for attaching positive changes.

From our point of view, the programme "Discovery" helps a person to learn how to express its feelings in socially adequate form, to listen to the person herself/himself and to her/his surroundings (friends etc.), to talk, to assert its point of view, to develop leader's qualities, to learn how to say "no".

7. Thematic lesson of prevention of addictive behavior and behavior of high degree of risk for the students of professional schools are conducted on the principle "peer to peer". Thematic lessons are conducted by volunteers of the movement "Rovesnik – rovesniku" in common with psychologists of Drug Abuse prevention center. September – October. Participants: 400 people.

Marina Orlova,
Coordinator of the movement "Rovesnik rovesniku"
St. Petersburg, March 27, 2007
orlova_m@mail.ru

ANNEX 3: abstract from SIHLWA 3rd meeting report (ADO-sub-group):

4.3.1 “Alcohol and drug prevention among youth” Summary of “Alcohol and drug prevention among youth” [about 120.000 Euro]

Primary objectives:

- To improve measures on how to provide more assistance to young people/children at risk (and their families) of social and health consequences including use of alcohol and drugs, and to raise awareness of problems and to increase people’s knowledge about their rights to care and assistance (incl. legal counseling).
- A gender perspective will be included in all stages of the project.

Secondary (long term) objectives:

- To reduce alcohol and substance use in general and hazardous use in particular, and alcohol’s destructive impact on young people’s future.
- To change misconception of society at large underestimating the negative impact of alcohol and drugs to health and wellbeing of individuals and to public health in general.
- To influence risk-behaviour of young people towards responsible, sustainable relationship with alcohol, and towards abstinence vis-à-vis drugs.

Goal of the project in view of the sector’s Collaboration Programme on Industrial Development Policy:

- Work ability of new working generation is crucial for industrial and economic development. Net-loss of human potential due to alcohol and drug use in financial terms is calculated in the category of billions of EURO per year in most European countries. Reduction of alcohol related accidents and disease is one of most urgent measures for health services to tackle. As an antagonistic industrial development one can see the growth of brewing sector in Russia. Public health concern has the obligation to challenge short term business interest of brewing and alcohol industry, which is lobbying in favour of ever growing consumption. As an immediate goal in Russia the project has that beer and other mild alcoholic beverages are rightfully classified as alcoholic drinks and regulated as such, recognizing and admitting their full societal, economic and legal consequences. Entertainment-business is strongly linked with alcohol, tobacco, and even illegal drug marketing and creating positive attitudes towards them. The social responsibility of entertainment-business needs to be recognized and explicitly addressed. Role models in every respect are crucial for young people who often drink alcohol in order to be like grown ups – including their own parents. Emphasizing gender focus and youth perspective is a cross-cutting goal in the project.
- Nordic countries are presently struggling to maintain their values considering healthy lifestyles and moderation when it comes to alcohol consumption and zero-tolerance when it comes to the use of drugs. Global and commercial pressures have strong influence on consumption habits of alcohol among young people in particular. Increasing globalization also facilitates drug trade and exposes young generation to narcotics.

Summary of the project description

- The project will start in St. Petersburg (with possible expansion to other regions or even countries. Dialogue among partners will draw from each others’ experience and involve also Sweden and Finland. Media coverage of project activities will be used to raise public interest to the growing alcohol problem and what is in the process of happening in our developed regions as well. Northern Dimension Partnership political support will make this possible.
- In project areas previous alcohol/drug intervention projects among youth will be quickly mapped and evaluated. The focus is on identifying the most innovative and practical

interventions and “lessons learned”, rather than trying to make an all-covering research. The aim is also to explore the validity of the hypothesis that unfortunately in their impact has been low or nil (in other words, countries are trying to tackle the problem with wrong methods and tools, and new ground-breaking approaches are now needed).

- In project areas a stakeholder analysis of agencies and actors aiming to tackle alcohol/drug problem among youth and children (including “low threshold clinics” rendering assistance to especially young girls in difficult situations and in risk of alcohol and drug misuse, prostitution and even trafficking). Stakeholder analysis would also include assessment antagonistic forces.

In collaboration with St. Petersburg Youth & Children Health Promoting Projects/Programmes

- Estimation of efficiency and productivity of actions directed on healthy lifestyles of children and teenagers. Definition of most effective ways and methods of influence on young population with the purpose of promotion of healthy lifestyles in respect to alcohol and drugs.
 - Training of school teachers and psychologists to methods of initial preventive measures and rendering the initial/first help to children at risk.
 - Training teenagers to methods and monitoring and control of their own mental state and health and methods of self-control and coping strategy in different problem situations.
- Media seminar for journalists (at least one per project site with the aim of repeating it towards the end of project period (“Creation of outrage”).
- Seminar for local politicians to understand their role better and seriousness of the problem (at least one per project site with the aim of repeating it towards the end of project period (“Creation of determination”).
- Development of regional and local legislative and administrative measures for better enforcement of alcohol and drug policies.

Output/results (whole project)

1. Project review and best practises focusing on and evaluating alcohol/drug use programmes and low threshold units;
2. Stakeholder analysis in project areas;
3. Young people at large provided with skills to cope with alcohol and refuse drugs.
4. Development, testing and distribution of methodology to better identify children at risk of alcohol and drugs;
5. Media seminars (1-2 per site) organized;
6. Decision makers/administrators seminars (1 per site) organized;
7. Regional and local legislative and administrative measures for better

Comments on the *Alcohol and drug prevention among youth* project

The ALCOHOL subgroup discussed the *Alcohol and drug prevention among youth* project and came up with the following points and suggestions:

- Any project planned by the SILHWA expert group should bring to the foreground and promote strategies and methods with proven effectiveness.
- Previous projects as well as pre-existing working methods and tools should be mapped at an early stage of project planning. The adolescent health group’s attention is drawn in particular to the *Prevention of Social Exclusion of Children and Youth at Risk in St. Petersburg* project, co-ordinated by Stakes, Finland, in 2005-2007. The project introduces and develops methods of early intervention in co-operation with the local NGO

Stellit and with the city's teacher training organisation. A possibly useful framework for developing alcohol and drug prevention in the school setting can be found from instance from Sweden.

- Pre-existing networks of potential partners should be contacted at an early stage, in this case in particular the Finnish-Russian Network of Social and Health NGOs.
- The planned project would benefit from an analysis of the target group (number, age, gender, socioeconomic background) and of the nature of risk behaviours and factors, and of a clarification of the project's focus, i.e. whether the project aims at primary prevention, at early intervention targeting children at risk, or at helping children living in high-risk conditions.
- The media component and the decision-maker component of the planned project were found potentially useful. It was suggested that education of the media and of decision-makers be focussed on increasing understanding of the effectiveness of population based strategies to prevent alcohol and drug problems among youth.
- It was further suggested that a clear distinction be made between short-term feasible objectives and long term goals. It is for instance unlikely that one or two seminars organised for the media or decision-makers would provide sufficient impetus for legislative changes relating to alcohol policy.
- The planned project's coordinative and administrative structures, as outlined in the project plan, were deemed a bit complex and heavy.
- It was noted that plans for the evaluation of the project were somewhat sketchy, and that a proper action plan and budget were missing from the materials presented to the alcohol subgroup.

The ADO group noted the following issues concerning the project alcohol and drug prevention among youth, and came up with the following points and suggestions:

:

- The overall project frame is acceptable, although very ambitious. Implementers may need to be more humble in what can be done. Important is to get started.
- Logical framework approach can be used (see outcome of problem tree). Problem analysis should provide a causal relationship of what is the situation and why. Problems can eventually be turned into positive statements, and hence we get our objectives: what and why we want to do something.
- Project document eventually also must elaborate on target groups ("who?"), strategy (how?), project elements (what?), project indicators (how to measure?).
- clarification of objectives is still important: is the primary objective to raise awareness?
- Long-term objective is of course that the population drinks less.
- Focus could be on behaviour change.
- Mapping on best practices is important and to identify the most relevant ones. This mapping is challenging. There are a lot of tools already: CDC ([www. communityguide.org](http://www.communityguide.org)) has a database in the web: topics like smoking interventions etc. under work. They have ranked these, what works and does not. Finnish National Health Institute did a literature review on school based programmes, what works and what does not.
- The title of the project is "Alcohol and Drugs". They are not separate problems. In Lithuania a new curriculum is just approved by the government, where they are all together. The problems indeed are not separate: actually smoking, physical exercise, obesity etc. could also be tackled. An integrated approach is important although we cannot change the project name. If we talk about young people, very quickly come other problems as well. It is important to have a holistic view. Actually technically (although not legally) alcohol is also a neurotoxic substance (= drug). And if we think about the lifestyle of the youth, substances are available for them: alcohol, drugs, anything. For example in Australia adolescents do not necessarily use alcohol when they go out, but drugs.
- To summarize: We should be more realistic, focus the objective more on youth, have an integrated approach. And that we should now elaborate on.
- Colleagues from Russia fully supported the principles of this project. There are many intoxicated children in St. Petersburg hospitals. We should remember that schools are different: some are wonderful, some less good. We should take into account: 1) criteria of the results 2) activity outline: how can we identify children: if we take only one school whose social portrait of parents is poor? Identifying children in need is an important aspect. 3) To what extent this information is collected from children, parents, social workers, teachers, psychologists, as without consulting them information is not valid. 4) Addiction related topic: this can vary on the stage of dependency. Different stages have different methodologies and objectives. The ado-group noted that we do not aim at research or a clinical intervention for alcohol dependent children. This is not a treatment project. Therefore, we do not need to identify children who are already affected, but have ALL pupils as our target group to PREVENT as many as possible from not starting. The situation is same in every school. After all, the majority of young Russian adults use alcohol and many of them (if not the majority) use too much from young age onwards. No family is immune, when we talk about risk for children to drink alcohol – or parents

for that matter. We should take a participating approach. Increase awareness, and responsibility of surrounding community. Norms, attitudes etc.

- Many things still need be discussed. The first reaction, though may be that this is too good to be true. It is a peer-to-peer programme, where young people think themselves. Good professionalism is facilitating this. Teachers and other people working with young people are interested to get this methodology more widely used. For example, this was used for prevention of tobacco-use. An NGO had a project on “Smoke free classes”, which was very successful. It is very important to find out WHAT to do and most importantly WHO are your partners in a local level. Working with the media can be done. We have links to journalists in St. Petersburg, who understand, and whom we can use as experts. With journalists we must keep in mind how they can make a story (journalists live of stories that they can sell!). Also we should try to make healthy people to understand newspaper articles better: to be come more educated readers. WHO has some experience from this in Moscow. Sometimes the journalists write what you want and we have had some successful seminars for local journalists. But to get them regularly write about these topics is hard. In Finland the media was quite active during the North-Karelia project. There has to be a clear new message which interests readers.
- We need to remember that 30 % of St. Petersburg city budget comes from brewing (beer) industry. The Chairman of the city’s Financial Committee comes from one of the brewing factories.

Work in smaller groups: The ADO Subgroup continued to work in smaller groups, and did project analysis trying to identify what is actually the problem in youth drinking, and what could be cause, what an effect, and what could be a solution. The summary project tree is presented for further elaboration (available in separate annex).

ADO-GROUP PROJECT PROBLEM TREE

Alcohol & Drug Prevention among Youth

Work in smaller groups: The Ado Subgroup continued to work in smaller groups, and did project analysis trying to identify what is actually the problem in youth drinking, and what could be cause, what an effect, and what could be a solution. The summary project tree is presented for further elaboration.



