

Strategies towards responsible alcohol consumption for adolescents in Europe

Country Report about the Multilevel Approach of TAKE CARE

(implementation period September 2011 to May 2012)

Date:	15.6.2012	
Contact:		
Country/City:	Slovakia / Bratislava	
Organisation:	OZ Prevencia V&P	



General Information about TAKE CARE in Your Region

1. Has it been possible to implement TAKE CARE in the selected region?

	⊠ yes	☐ no			
Comments:					
Implementácia a regiónu a kod				-	podrobnej RAR analýze činnosti
2. How satis	fied are you	with the	impleme	ntation of	the different interventions in your region?
	1	2	3	4	Comment
ro.pe- Training©	not at all			x	
Homeparty		X			
Key Training				X	
First-Rate Retailer Tools				X	
3. Your assessment: Taking the TAKE CARE project as a whole, is it the right way to achieve the goals, as specified by the concept (reduction of the use of alcohol and the related damage to the young people; compliance with the legal norms regarding alcohol)? Please, express your opinion on a scale from 1 to 4 1 = "no, these goals are not achieved at all" to 4 = "yes, TAKE CARE achieves these goals completely"					
no	1 2	3	X y	res	
reasons:					
multiúrovňovsústredenie irzapojenie rod	ntervencii v je	-		upín (nielen	žiakov a odborníkov ako zvyčajne)



4. Please, describe the social environment, which you have been selecting for the implementation of TAKE CARE:

Name:	Bratislava - Ružinov		
Number of inhabitants:	<u>75 000</u>		
Number of inhabitants:	75 000		

What is the structure of the social environment? Is it a \dots (please, tick a box)

A community (a closed social environment, a small town)	An urban quarter (of a bigger city)	A sub-district (part of a city or an urban quarter)
	X	

5. Which have been the criteria according to which you have been selecting the social environment?

This social environment	Yes	No	Resp. comments
is a social hotspot	X		
has been noticed for an	X		Na základe depistážneho
increased use of alcohol			prieskumu na školách (VUDPAP, 2011)
overall is a residential area	X		
is an amusement mile/nightlife			
district		X	
has been selected, because there			
are no/hardly any prevention		X	
offers			
has been selected, because of a			
significant number of points of		X	
retail			
has been selected, because the			Dlhodobá spolupráca s odborníkmi v
support by cooperation partners	X		danej lokalite
was guaranteed			
other criteria, namely			
other criteria, namely			



6. Conceptually, the manual stipulates the implementation of the multilevel approach in a defined social environment/sub-district/urban quarter.

ADVANTAGES of the orientation towards social environments:

- poznanie rizík v danom sociálnom prostredí
- realizácia iných programov a projektov v danej sociálnej komunite
- zameranie pozornosti na danú lokalitu aj v dôsledku iných problémov
- možnosť zosieťovania starostlivosti a odbornej činnosti

DISADVANTAGES of the orientation towards social environments:

- niektoré problem v sociálnom prostredí sú pálčivejšie a je nutné ich riešiť prioritne (než ciele projektu a pod.)
- menšia efektívnosť prevencie a vyššia potreba intervencie
- vyššia koncentrácia problémov, nemotivovaných ľudí, ktorých sa problem týka

Orientation towards social environments versus "core target group"

One alternative of the orientation towards social environments is the decision for a "core target group". This means that the focus is more on a specific group of adolescents with a risky consumption of alcohol and less on a specific urban quarter.

(Example: Core target group are adolescents, who have been looked after by youth services fairly long-term and who consume riskily. Their parents are motivated to hold home parties, their counsellors and teachers run through a key training and the sales staff in their area is trained). Is this a good alternative?

	⊠ yes	no
reasons:		



To v "Pre	rall Assessment: which extent do you agree the following statement? ecisely because of the multilevel approach, TAKE CARE is suited to achieve the goals ntioned above."								
r	no	1 2	3	4	yes				
grou 4 = " inter	ips; the 'yes, TA rventior	effect of an inte KE CARE achiev ns."	ervention es those	n bey goals	ond the targe s precisely be	or in achieving the goals in the different target et group cannot be detected" to cause of the co-action of the different levels of terventions did you reach?			
		Number of applications	P at th beginn of the trainin	ing	Number of P, who completed ro.pe regularly	Resp. comment			
ro.pe- Trainir	ng©	44	42		42				
		Total number participants	of			Resp. comment			
Home	party			•					

	Total number of P	Completed	How many have been participating BEYOND their working hours?	Resp. comment
Key Training	15	15	15	



	Total	Number of	Number	Resp. comment
	number	short	of	
	of P	interventions	training	
		(10-30 min.)	(2 hrs.)	
First-Rate				
Retailer Tools				
(1)				

	Number of trained owners or branch managers	Number of trained employees	Number of supermarkets	Number of small stores	Number of cafés / pubs	Number of other points of sales	Number of schools providing vocational education
First-Rate Retailer Tools (2)							



II. Information regarding ro.pe-Training© (Adolescents)

1.	Who has been transfer	ring the adolescents to	ro.pe-Training©?	
	a)school advisors		c)	
	b)school psychologist	cs	d)	
2.	Which ways of transfer more or less fail?	ring (cooperation parti	ners) or methods of mo	tivation for a transfer did
	a)social service		c)	
	b)		d)	
4	yes no If "yes", please attach on		nosen how many times	for the ro.pe-Training©.
	Trease, tiek a box, wille	How many times conducted in your region? Please, with information about implementation data	How many times did you held a follow—up meeting?	
-	1 x 4 days (with three overnight stays)		5x	
	2 x 2 days (with one overnight stay each)			
	Other structures, namely:			



5.	Your recommendation about the best group sizes (please, enter figure)
	from _12 to _15 participants
6.	Do you recommend a preliminary talk with the whole group and / or individual talks before the actual training?
	yes no Superior no
7.	Are there any practical exercises, which have been proven inapplicable and which should be eliminated from the manual? If "yes" – which? Why?
	yes
	Which? Why?
	⊠ no
8.	Are there any practical exercises, which you can recommend additionally and which should be included into the tool box? If "yes", please use the attached sheets when describing them – if would be great, if you could describe them in your national language and in English each!
	Which?
	first "monkey" ter to next ones participant of rope
	□no



9. Which ideas do you want to share regarding gender-specific aspects? (For instance, how did the girls especially profit from ro.pe-Training©? How the boys? Which exercises are (not) right for which gender? How do the mixed-gender groups stand the test?)
 it Is very good to have mixed groups at the age of 14 girls had a more experiences of drinking while hanging with older boys v adolescencii je dôležitéformovanie partnerských vzťahov, ktoré môžu byť rizikové práve kvôli konzumácii alkoholu
10. Which ideas do you want to share regarding age-specific aspects? (For instance, precisely how did especially the younger resp. older participants profit from ro.pe-Training©? Where should be the focus when dealing with young resp. older participants?)
11. Your assessment: Is the ro.pe-Training© the right instrument to achieve the goals named in the concept (for instance, increasing of the knowledge about effects and risks of alcohol; improvement of risk competences when dealing with risky situations, especially the consumption of alcoholic beverages)? Please, express your opinion on a scale between 1 and 4
no \square \square \square \bowtie yes \square 1 2 3 4
Reasons:
Training contains of sharing information together with "fun" activities, which motivate youngster to act and learn at same time.

12. Are there any other interesting facts from your country – related to the ro.pe-Training© – which are worthwhile mentioning?

- dobrá dostupnosť lokalít s možnosťou realizácie horolezeckých , resp. iných outdorových aktivít

- tradícia práce horolezeckého klubu s mladými ľuďmi (dobrý komunikácia a profesionalita inštruktorov)
- celoštátny system prevencie v školskom systéme umožňuje začlenenie projektu do systematickej



odbornej práce			



III. Information about Homeparty (Parents)

1. Structure

	In private spaces of parents	In public spaces, namely	Resp. comment
How often did the Homeparty take place, and where? (please, enter number with dates and resp. location in the boxes)	2	<u>6</u>	

2. Who invited the parents?

	Yes	No	Resp. comment
Parents invited other			
parents	X		
(original Homeparty)			
You, as TAKE CARE			
prevention experts, invited	X		
parents			
Other experts (who?) invited			
parents	X		

3.	Do you use an information-flyer / an invitation card/ a letter to advertise the Homeparty?
	If "yes", please attach one.
4.	Are there any practical exercises, which have been proven inapplicable for the Homeparties and which should be eliminated from the manual? If "yes" – which? Why?
	□ yes
	Which? Why?



	⊠ no
5.	Are there any practical exercises, which you can recommend additionally and which should be included into the tool box? If "yes", please write "freely" when describing them, there is no given structure – it would be great, if you could describe them in your national language and English each!
	yes
	Which?
	☐ no
	Your assessment: Is the Homeparty the right instrument to achieve the goals named in the concept? (for instance, improving the competences to run a constructive conversation with their children about consumption of alcohol)? Please, express your opinion on a scale from 1 to 4 (1 = "no, these goals are not met at all" to 4 = "yes, the Homeparty achieves these goals completely") no
7.	Are there any other interesting facts from your country – related to the Homeparty – which are worthwhile mentioning?



IV. Information about Key Training (Key Persons)

1. Structure

no

	Yes (please, enter dates)	No	Resp. comment
2 x 8 hrs.	X		
	<u>1314.4.</u>		
Differently, namely:			
2. Did you held	a follow-up meeting	g with the coac	hed key persons? Why (not)?
⊠ yes			
no			
3. Do you use a yes If "yes", please	no	/ an invitation	to advertise the Key Training?
			een proven inapplicable for the Key Training al? If "yes" – which? Why?
yes yes √			



5.	Are there any practical exercises, which you can recommend additionally and which should be included into the tool box? If "yes", please use the attached sheets when describing them – if would be great, if you could describe them in your national language and English each!
	yes
	Which?
- fir	rst 10 sentences of counselling talk
	no
6.	Your assessment: Is the Key Training the right instrument to achieve the goals named in the concept? (for instance, improving the competences to run a constructive conversation with adolescents about the consumption of alcohol and, thereby, set up a (short) intervention)? Please, express your opinion on a scale from 1 to 4 (1 = "no, these goals are not met at all" to 4 = "yes, the key training achieves these goals completely") no
7.	Are there any other interesting facts from your country – related to the Key Training – which are worthwhile mentioning?



V. First-Rate Retailer Tools (sales staff)

1. Legal situation:

Sales of	Legal beyond the age of
Beer / wine	18
High-strength alcohol (for example, vodka)	18

	High-strength alcohol (for example, vodka)	18	
2.	Please, express your op 1 = "very inconsequenti	inion on a scale be ally, the rules bas	Iles regarding the sales of alcohol complied with? etween 1 and 4 ically exist on paper only" to s (for example, underage mystery shoppers) and resp. fines"
	no 🔲 🔀	y€ 3 4	es
Re	asons:		
3.		y the parents w	arding the sales of alcohol accepted by the <u>population</u> with whom you have been working)? etween 1 and 4
	1 = "the population conside 4 = "the population accepts	•	
	Irrelevant 1	2 3 4	completely accepted



material and used? Not useful useful useful Wobbler	Type of	Drintod					ntion resp. for its su
Brochure X X X X X X X X X X X X X X X X X X X	iiateiiai	and	Not useful	2	3	Very	Resp. comment
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comment")	naterials olease, pecify the	-					
		yes					



6.	Are there any practical exercises, which you can recommend additionally and which should be included into the tool box? If "yes", please write "freely" when describing them, there is no given structure – it would be great, if you could describe them in your national language and English each!
	yes
	Which?
	⊠ no
7.	Your assessment: Are the First-Rate Retailer Tools (short- and long-term training, including materials) the right instrument to achieve the goals named in the concept?
	(for instance, the retailers are aware of the legislation regarding alcohol; the retailers know how to deal with young people, who want to buy alcohol or are drunk already)? Please, express your opinion on a scale from 1 to 4 1 = "no, these goals are not achieved at all" to 4 = "yes, first-rate retailer tools achieve these goals completely"
	no
Rea	asons:
8.	Are there any other interesting facts from your country – related to the First-Rate Retailer Tools – which are worthwhile mentioning?

