

Country: Ireland
Partner organisation: Health Service Executive
Course site(s): Cavan / Monaghan / Drogheda / Dundalk
Contact person: Liz-Ann McKeivitt

I. Basics

1. Are there any differences between the intended target groups for FreD goes net and what was actually achieved?

Below is a summary of the intended target groups as originally defined. Please delete the entries in the column "planned" and replace them with the correct information for your country in the new column "implemented".

Criterion	PLANNED (according to 2008 RAR)	IMPLEMENTED (Pilot phase 2009)	brief comment if necessary
Age		14 to 21-year-olds	
Access route	<ul style="list-style-type: none"> - School - Training Centre 	<ul style="list-style-type: none"> - Police / judiciary - School / Training Centre 	
manner of (first) coming to notice	It is possible to also include youths that have come to notice several times on account of their drug use	Noticed by: Teachers Trainers Youth & community workers Police	
Substances		Illegal (excluding heroin) Alcohol included	
classification of drug user		Experimental to high risk drug user	

2. Meeting the main aims

2.1. Was it possible to implement FreD goes net in the pilot regions?

yes no

Comments:

*Yes it was possible to implement Fred in pilot region.
It was delivered in four sites.*

There was a need for and an expressed interest in the Fred pilot especially in the Training Centres.

2.2. *In the pilot regions, has FreD goes net contributed to improving access to drug-consuming adolescents and young adults?*

yes no

Reasons for this:

It met a need in the region. Up to now there has been no evidence based early intervention programme of this kind for this age group.

2.3. *In the pilot regions, has FreD goes net contributed to developing or improving cooperative relationships between the chosen settings (police, schools etc) and drug counselling organisations/institutions (course sites)?*

yes no

Reasons for this:

Yes it has contributed to strengthening links with certain schools and training centres in sites within the region.

It has also highlighted where more work is needed to build trust and improve commitment.

2.4. *If cooperation as set out in 2.3 was successfully established/developed, will it be sustainable and continue beyond the pilot phase?*

yes no

Reasons for this:

Due to the economic and political situation in Ireland at present, the sustainability of FreD goes net is tenuous. E.g. The funding for the prevention expert responsible for sites 1& 2 has been cut so that post no longer exists.

HSE staff alligned to sites 3&4 are involved in industrial action i.e. 'work to rule'.

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2.5. Were there any specific conditions/changes (political, economic) in your country during the first two years of FreD goes net that affected the implementation of the project?

yes no

If yes, what were they?

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HSE staff aligned to sites 3&4 are involved in industrial action i.e. 'work to rule'.

Recruitment Embargo

Travel restrictions

Budgets cut

II. RAR

In the first project year all partners used the method of RAR to carry out a stocktake of the current situation and current needs. This consisted of three elements:

- Background research,
- Interviews with key persons
- Identifying „good practice projects“.

Results were documented in country reports.

1. Did you identify good practice projects in your country that met the agreed criteria?

yes no

2. Looking at it retrospectively after concluding the pilot phase: Was the method of RAR useful in identifying suitable settings for your site(s)?

yes no

Reasons for this:

*Identified need
Established access routes
Identified key stakeholders*

3. Judging by the results it achieved, and based on your professional perspective, was the time spent on the RAR exercise justified?

yes no

Reasons for this:

It clarified what actions needed to be taken and allowed for a smooth transition from planning stage to implementation stage (as a lot of the ground work required for set up was already completed).

4. Would you recommend this method of stocktaking to other early intervention projects?

yes no

Reasons for this:

*Helped detail the facts.
The methods were appropriate to the objectives.*

III. Cooperation

1. Implementation of FreD goes net requires **viable cooperative relationships between the participating institutions. What methods of establishing/maintaining these have proven successful in your pilot region?** (e.g. informal verbal agreements, formal written agreements, regular meetings, agreements at certain levels of hierarchy) Please describe these.

Involving prevention experts with long established & good relationships with partners, compounded by:

Convergence at levels of hierarchy

Formal presentations

Regular meetings

Verbal Agreements

2. **What difficulties were encountered in developing and maintaining cooperative relationships?**

Please describe these.

While commitment between partners should prove to be stronger than the individuals involved, in some cases change in key personnel did have an impact on commitment and in turn the effectiveness of communication.

3. **Did you enter into any written cooperation agreements?**

yes no

If not: Why not?

The intention is to include the FreD goes net Programme into the individual organisation's substance use policy.

4. **Was there a local steering group for implementing the FreD approach?**

yes no

If yes, please list the members and rate the work of the steering group in implementing FreD goes net for each of the pilot sites.

– Site 1: (Name of town)

The FreD goes net Ireland Steering Group is the Prevention Education Sub Group of the North East Regional Drug Task Force:

Andrew Ogle

Lisa Gavillet

Michael Walsh

*Cathy Whelan
Samantha Teather
Lee O Neill
Sharon Cumiskey
Elizabeth-Ann McKevitt*

Drogheda / Dundalk County Louth

The steering group was very supportive of FreD goes net and offered assistance/advice at all stages of the pilot.

– Site 2: (Name of town)

The FreD goes net Ireland Steering Group is the Prevention Education Sub Group of the North East Regional Drug Task Force:

*Andrew Ogle
Lisa Gavillet
Mixhael Walsh
Cathy Whelan
Samantha Teather
Lee O Neill
Sharon Cumiskey
Elizabeth-Ann McKevitt*

Cavan / Monaghan

The steering group was very supportive of FreD goes net and offered assistance/advice at all stages of the pilot.

5. Please list those institutions/organisations/services that really did refer young persons to the courses.

Police / judicial system

Which institutions and divisions exactly were these? Who were your contact persons (function/position)? Why was cooperation successful in these specific cases?

School

What types of school? Who were your contact persons (function/position)? What characterises the schools that were willing to cooperate/where cooperation was successful?

Breifne College, Cavan

Theresa Clerkin

*Youthreach Cootehill, Cavan
Training Centre*

June Hanratty

Coordinator

*Youthreach Monaghan Town
Training Centre*

Niall McCann

Coordinator

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*Youthreach Castleblayney, Monaghan
Training Centre* *Sinead Duffy* *Coordinator*

*Youthreach Carrickmacross, Monaghan
Training Centre* *Bernie Duffy* *Coordinator*

St Oliver's School Drogheda *Caroline O Neill,
School Completion Programme
Greta Bohan,
Home School CommunitLiason*

*Boyne Project, Drogheda
Muirhevna Mor Community Council
HSE Addiction Services* *Garda Diversion Project
Tony Jordan
Ciaran Marley, Outreach Worker*

The prevention experts had worked previously with the above mentioned schools on universal prevention education projects therefore good relations and synergy existed prior to FreD.

The Youthreach "Training Centres" & Garda Diversion projects in particular were very keen to facilitate the FreD goes net courses in their organisations. A large proportion of their participants would have misused substances at some stage. They felt there was a need for an intervention of this kind.

Other settings, specifically:

What divisions/ contact persons (function/position)?

Why was cooperation successful in these cases?

6. Chapter 4.4 of the manual gives recommendations for successfully establishing structures of cooperation. Did you find these tips helpful?

yes no

Reasons for this:

Very clear guidelines & checklist.

4. Did you change any of the main messages of the template?

yes no

5. Can the universal flyer for young persons (the emplate) be included as a recommendation in the handbook or does it need to be changed in any way?

Yes it can

6. What are typical situations for youngsters to come to the notice of a particular setting and be referred to FreD?

Typical situation of coming to the notice...

of the police /
judiciary system

Drunk / Disorderly / Assault / Criminal Damage

of school

Young person presenting for school hungover. Aggitated. No attention span. Distant. Disruptive.

of another setting
(please state which):

7. What benefits can young persons draw from taking part in a course that could motivate them enough to contact the course leader?

gains or benefits obtained from participation

Police / judiciary
system

Behaviour modificaton.
In the case of court appointed drug education the Awarding of certificate of compeltion will have benefits for the participant in terms of proof of attendance for the judge.

School

A positive change in behaviour & values.
Not being suspended from school.

Other setting
(please state which):

8. FreD goes net works to the principle that “coming to notice on account of legal or illegal drug use is followed by intervention.” For your chosen settings, please describe a **typical chain of events/the individual steps from first being noticed all the way to completing the intervention** (bullet points; if needed refer to the chart “Alex is caught...” from the ppt of the kick-off workshop – see attachments of the e-mail that was used to send out this questionnaire).

Noticed as a result of their behaviour in school.

Class teacher notifies appropriate staff member e.g. Home School Community Liason Officer (HSCLO)

HSCLO contacts FreD goes net trainer.

Young person is interviewed by FreD trainer

Accepted

Course commences within two weeks of interview

Young person attends 4 sessions over 3 – 4 week period

9. **Were the parents involved in referring the youngsters to FreD?**

yes no

If yes:

- How and in what form were they involved?

In the school setting parent’s only involvement was by way of giving consent for their child to take part in the FreD goes not course.

- Would you recommend parental involvement to new FreD sites?

yes no

Reasons for this:

In the school setting parents are already involved in relation to giving consent.

Parents also refer into the addiction services so it is worth exploring the option of parents refering directly to a FreD goes net trainer.

10. **Do you have any other comments on the topic of access? What measures do you find helpful in facilitating access to the intake interview and/or course?**

V. Implementing the intervention (Intake and courses)

1. After the intake interview, what were typical reasons for you to find that FreD was unsuitable for the adolescent/young adult in question?

People who were dependant

Young people who did not need this level of intervention (experimented once and ceased)

2. On average, how many weeks were there between the intake interview and the beginning of the course?

2 / 3 weeks

3. Up to this point, at which sites did you carry out how many courses with how many participants?

Name of site 1: Cavan

2 courses with 22 participants

Name of site 2: Monaghan

3 courses with 33 participants

Site 3 Drogheda

2 courses 21 participants

Site 4 Dundalk

3 courses 35 participants

In case of strongly divergent numbers, can you think of reasons?

4. How many sessions did you divide the course into?

2 sessions

3 sessions

4 sessions

5. Did some of the sessions also take place at weekends?

yes

no

6. How satisfied are you generally with the exercises that currently make up the course?

Please rank on a scale from 1 to 4
(1 = very satisfied, 4 = not at all satisfied)

2,5

7. Please name (up to 3) exercises that have proven particularly effective: The following should definitely remain in the manual (please give the exercise name and number):

(5) statements cards on legal statements
(6A) instruction leaflets: knowledge about effects and risks
(10) check yourself

8. Were there any exercises in the course that proved ineffective or too difficult to implement?

yes no

If yes: please list a maximum of three together with the respective name and number.

(7A) The spliff is hot
(9A) Risk positioning
(15) Encounter with future self – (however this may have more to do with who is delivering it, the concept is good)

9. Are there any other exercises you would like to be included in the manual?

yes no

If yes: please write them out separately in the format of the manual and attach to this report.

10. Was / is implementing the FreD courses something that enriches your work?

Did you gain any particular insights? Did something unexpected happen?

Yes both prevention experts found it to be a positive and challenging experience. They were surprised by the young people's high level of information and experience of drugs.

11. What are your experiences with respect to group composition?

(gender, age, different substances consumed, different patterns of consumption etc)

Groups should be of a similar age & similar consumption pattern, in as far as possible.

Mixed groups worked well.

Venue – out of school setting worked well.

12. Do you have any further comments/ideas/recommendations on the topic of course implementation?

Include extra resources from other countries.

VI. Summary

1. Do you find the overall concept and approach of FreD goes net convincing?

Please rate on a scale from 1 (yes, very) to 4 (no, not at all)

2

Reason:

The course works because it is acknowledging and giving young people the space to admit they are using without being judged.

There was a need for a harm reduction approach at this level.

2. If you had several pilot sites: Were your experiences at each site fundamentally different? (e.g. with respect to cooperation, access or course implementation)

Skip this question if there was only one pilot site.

yes no

3. Please summarise the aspects you consider central for each of the thematic blocks.

aspects that obstruct...

... cooperation	Differing attitudes to substance use
... access	Variance in substance use policy from one organisation to another
... course implementation	Venue

aspects that facilitate...

... cooperation	RAR
... access	Intake interview
... course implementation	venue