



Strategies towards responsible alcohol consumption for adolescents in Europe

take care newsletter no. 1 september 2010

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Strategies towards responsible alcohol consumption for adolescents in Europe

Reports from the Project Coordination

What does TAKE CARE stand for?

The prevention project TAKE CARE is aimed at testing selected strategies towards responsible alcohol consumption for adolescents in Europe. 10 European partner institutions take part in this project. The LWL-Coordination Office for Drug-Related Issues in Münster, Germany is the project executing body and at the same time responsible for the project coordination. The most characteristic issue in this project is the implementation of a multilevel approach. Four different target groups (adolescents, parents, retail employees and key persons) are addressed using target group specific methods in a specific town or district.

TAKE CARE runs for a period of 33 months (March 2010 till November 2012) and is scientifically monitored by the Zurich University of Teacher Education, Switzerland.

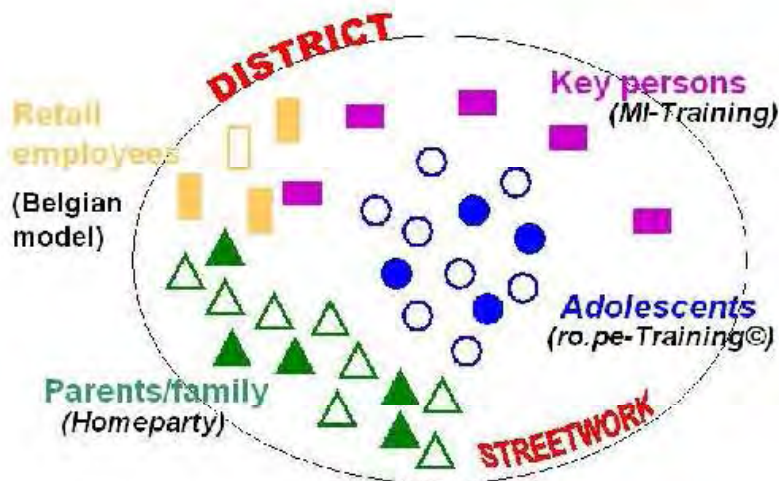


Figure 1: Multilevel approach of Take Care

For further information please have a look at our project website:

www.project-take-care.eu

Nadja Wirth

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Kick Off-Meeting in Luxemburg from March 22nd till 25th, 2010

Getting to know each other --- becoming familiar with TAKE CARE --- implementation of first project tasks

From March 22nd till 25th, 2010 all project managers responsible for the partner countries as well as the DG Sanco (represented by Ms Marjatta Montonen) and the EAHC (Dirk Meusel) met in Luxemburg for the kick off-meeting.

The meeting started with a presentation of the project's contents, methods and organisation. The methods which will be implemented for the different target groups have already been proven in the German pilot project "SeM – Secondary prevention in a multilevel approach". These interventions are supplemented by a training and the development of information material for retail employees by our Belgian partner CAD Limburg. If necessary, the four methods for the different target groups will be adapted to the specific cultural backgrounds of the countries involved. However this will depend on the results of a Rapid Assessment and Response (RAR) conducted in each country. RAR is a method derived from the qualitative social research work and serves to develop a situation analysis in every country on the one hand and on the other hand to build up first local cooperation relations.

During the kick off-meeting the partners agreed on criteria for the research of good practice projects - representing the first step in the RAR process – in their countries. These projects will be included in the EDDRA database. Further to this, useful aspects of good practice projects may be used in TAKE CARE.

By June 2010 (meeting in Ireland) the projects are to be identified and described. They will be presented in a special grid in order to make them comparable.

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Figure 3: Meeting participants



Figure 2: Facade of the conference centre in Luxemburg



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Workshop I in Navan, Ireland from June 14th till 18th, 2010

Presentation of the research for good practice projects --- introduction into evaluation --- training for conduction interviews



Figure 4: The participants of Workshop I.

The prevention experts who are going to implement TAKE CARE in their countries, met in Navan, Ireland from June 14th till 18th, 2010.

The presentation of the good practice projects which were identified by the partner countries was one of the central topics of the workshop. We were able to build up a good overview regarding target group specific projects in the field of risky alcohol consumption of adolescents in Europe. It became evident that there are a lot of projects for retail personnel as well as regarding visiting work for young people in nightlife. In contrast there seems to be a gap in offers for parents and especially a lack of offers for key persons (persons having close contact to the adolescents, like e. g. sports trainers, concierges, employees of recreational facilities).

In a subsequent discussion and voting it was decided which aspects of the presented projects should be included. The so-called „Wobbler“ from Belgium was well received by the prevention experts. The “Wobbler” is kind of a label showing which alcoholic beverages may be bought from which age on. It is attached to a metal spiral and swings back and forth from the supermarket shelves.



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In the course of the workshop the scientific monitoring for TAKE CARE, the Zurich university for teacher education, presented their methodical approach as well as the principles of a measurement of effectiveness for the different target groups.

A third focus of the workshop was on the method of Rapid Assessment and Response (abbreviated as RAR, see report of the kickoff-meeting in Luxemburg). The second phase of RAR (after the research phase for good practice projects) was to conduct interviews with representatives of the determined four target groups of TAKE CARE. This is done in order to ensure that their needs are covered by the methods. Further to this the interviews enable the experts to get in contact with the target groups. An interview guideline was presented and tested in a practical test run. It turned out that some questions had to be reworded and the guideline was optimised.

The prevention experts will send the results of their interviews to the project coordination by the end of November 2011 in a „RAR country report“. The project coordinator will then summarise all reports with the aim of adapting the methods in TAKE CARE. Modifications will be done in case of culture specific needs. The methods shall be implemented as homogeneously as possible in order to ensure the comparability in the evaluation.

Nadja Wirth

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Project flyer finalised

The bilingual project flyer offers an overview of TAKE CARE. It describes:

- what was the starting point to develop and implement TAKE CARE,
- which targets ...
- ... are followed for which target groups,
- which methods are used,
- the project course of TAKE CARE and
- which partners participate in the project.

If you would like to have the original project flyer please contact gerhild.meendermann@lwl.org.

The flyer can also be downloaded on our project website www.project-take-care.eu, category downloads (English and German version).

Nadja Wirth

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Reports from the European Partner Countries

KENTHEA: Cyprus' first steps as a TAKE CARE project member

Investigating the various prevention projects that are being implemented in Cyprus, it emerged that two specific projects were in their pilot stages and would be beneficial to the TAKE CARE project research, as they adhered to most of the good practice criteria. The good practice projects consisted of a Cyprus Anti-Drug Council project aimed at Safer Clubbing Interventions and of a KENTHEA project aimed at educating retail staff on Safe Alcohol Serving.

These projects were presented at the TAKE CARE workshop in Navan, Co Meath, Ireland in June 2010. The first workshop in Ireland was very productive as it gave all prevention experts a chance to discover the projects implemented in the other partner countries and the opportunity to come together and isolate the beneficial aspects of each country's projects in order to optimise the approaches used in the Take Care project. Furthermore, it was a fantastic opportunity to personally meet the other prevention experts involved in the project.

Returning to Cyprus and starting the interviewing process for the second part of the RAR (Rapid Assessment and Response research), it was decided that an area of Paphos town would be chosen. This was decided as Paphos is consisted of villages from which inhabitants travel to the town for their various activities. Thus, it is in Paphos town where there are more activities and as a results more retailers and key persons. Furthermore, the town is more multicultural and would give a more holistic sample of the population.

Wieder in Zypern starteten wir mit der Interview-Phase für den zweiten Teil vom RAR (Rapid Assessment and Response Untersuchung). Es wurde entschieden, einen Stadtteil der Stadt Paphos zu nehmen. Paphos besteht aus mehreren Dörfern und deren Einwohner/innen fahren für Freizeitaktivitäten in die Stadt Paphos. Es gibt hier ein größeres Angebot an Aktivitäten und folglich mehr Einzelhändler und Schlüsselpersonen. Darüber hinaus ist die Stadt multikultureller und stellt ein ganzheitlicheres Bild der Gesellschaft dar.

Miciei Kkeli und Catherine Rettig

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Diakonie Herford, Germany: First steps regarding the implementation of the European project „TAKE CARE“

After participation at the workshop in Navan the road map for further activities was set. First of all we decided on which communities or districts the project will be carried out.

The following factors were important for our decision:

- Rural or municipal
- Population with migration background
- Contacts in the region
- Have similar projects taken place in this area?
- Open communities of youngsters
- Discos available on site

We decided on the following two sites:

- The provincial town of Vlotho
- The historic city centre of Herford.

Information regarding the city of Vlotho:

The city of Vlotho is situated about 10 km south of Porta Westfalica at the crossing between the hill country of Ravensberg in the north-western part, the Lipper highlands in the south and the upper Weser valley in the east. The river Weser coming from the east changes its direction northwards in Vlotho and separates the north-eastern part from the remaining city.

The region Vlotho is an outlying district of the district of Herford and has preserved its rural character. Many people with Russian language migration background have settled down in Vlotho over the past years. Problems with alcohol consumption have regularly come to our attention from a recently shut-down disco and an open scene which meets under the Weser bridge. There are good contacts in the secondary schools in Vlotho, where we have a. o. discussed the topic of alcohol consumption with the pupils.

Occasionally we are working together with the youth welfare office (open youth work), such as on the occasion of the annual youth festival „outdoors and for free“ where alcohol consumption of young people is one of the focal points.

Information regarding the city of Herford:

Herford is the district town to the south of the district of Herford (administrative district Detmold in North Rhine-Westphalia). The former Hanseatic city has the status of a larger district town.



Figure 5: The region of Herford with Vlotho and the city of Herford

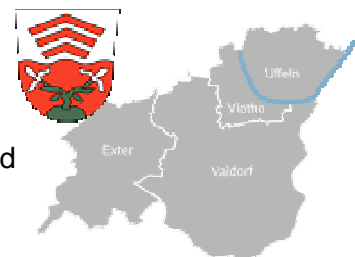


Figure 6: The city of Vlotho and its urban districts.



Figure 7: The city of Herford



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Herford, Bielefeld and Gütersloh are part of the urban agglomerations of the Federal Republic of Germany.

The city of Herford has approx. 50,000 inhabitants. We decided to concentrate on the historic city centre where approx. 12,000 people are living. There are well-known and distinctive places in this area and alcohol consumption of youngsters is regularly discussed in public (railway station, two disco complexes, public green areas and city centre squares).

There are some problem districts in Herford where different projects and programmes have taken place for many years now. During the past years no preventive projects have taken place in the historic city centre, so it was a matter of self-evidence for us to implement the multilevel approach of TAKE CARE in this district.

By choosing these two sites we have one more rural and another urban environment and thus a representative profile of the district of Herford.

Present status of the project:

Currently we are preparing the interviews (choosing persons and asking them if they are willing to participate ...). Further PR work has been intensified (press conference, presentations for local political and groups and committees).

Eva Liesche, Uwe Holdmann, Fachstelle für Suchtvorbeugung, Diakonisches Werk Herford, Hämelinger Str. 10, D-32052 Herford

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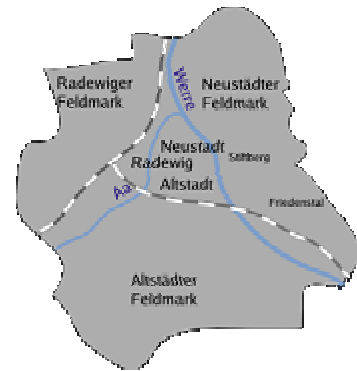


Figure 8: The historical centre of Herford

TAKE CARE Partners Present Their Organisations

Landschaftsverband Westfalen-Lippe (LWL) / LWL – Coordination Office for Drug Related Issues

The Federal Republic of Germany is divided into approx. 500 cities and 800 districts. The towns and districts form the so-called municipalities (German: Kommune). The nine urban municipalities (among them Münster) and 18 municipalities in Northrhine-Westphalia are members of the LWL. The Landschaftsverband Westfalen-Lippe (LWL) works as a local authority for the 8.5 million inhabitants living in this region. It is politically controlled and its parliament consists of 101 representatives.





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Significance and size:

(comparison by number of inhabitants)

Federal Republic of Germany	82.5 million
North Rhine-Westphalia	18.1 million
Westphalia-Lippe	8.5 million
LWL-budget 2010:	2.4 billion Euro
Employees:	approx. 13,500

Tasks:



Health/Psychiatry
(19 hospitals)



Culture
(17 musea)



Social affairs



Youth/schools
(35 special schools)

LWL – Coordination Office for Drug Related Issues

The LWL – Coordination Office for Drug Related Issues (German: LWL – Koordinationsstelle Sucht abbreviated as LWL-KS) is part of the department 50 (Youth & Schools). It was founded in 1982 and its main tasks can be divided into the following fields of work:

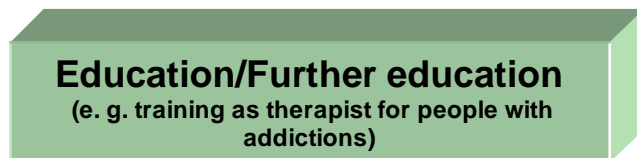
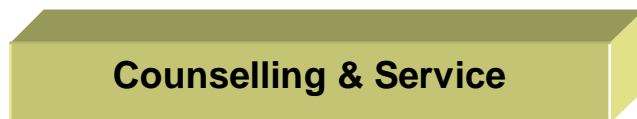


Figure 9: Wolfgang Rometsch, Head of LWL-KS head of the project TAKE CARE



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Today 13 employees are working in the LWL –KS, among them:

- 3.5 experts
- 5 administrative workers
- + project employees (with temporary contracts)
- + 2 trainees.

The LWL-KS is counselor and coordinator in questions of addiction aid and prevention, but also for related work fields like youth welfare, justice, etc. At the same time the LWL-KS serves as contact at regional, federal and European level. We offer professional trainings, provides practically relevant tools and informs about scientific results and legislation.



Nadja Wirth



Kathrin Horre



Gerhild
Meendermann

The members of the TAKE CARE project team of TAKE CARE are:

- Wolfgang Rometsch (Head of project)
- Nadja Wirth (Project coordinator)
- Kathrin Horre, Gerhild Meendermann (project assistants)

Weitere Infos unter:

www.lwl-ks.de

Gerhild Meendermann

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Center of Education about Drugs and Treatment of Drug Addicted Persons (KENTHEA)

KENTHEA's profile

KENTHEA is a Pan-Cyprian non-governmental and non-profit voluntary organization, working in the field of behavioural problems and particularly substance abuse prevention and the treatment, rehabilitation, harm reduction, general drug policies and information for drug and alcohol addicted persons.

KENTHEA was founded in 1994, and was established in order to face the increasing needs of society in effectively working professionals and professional settings. For the promotion of its goals, KENTHEA emphasizes in the unification and the coordination of voluntary initiatives and social networking, through which it aims in sensitising as much as more individuals and organized groups in the fight against addictions.



Figure 10: Prevention activity



Figure 11: Some of KENTHEA's member-organizations and collaborators include the church of Cyprus

Some of its member-organizations and collaborators include the church of Cyprus, the Union of Municipalities, the Union of Community Councils, University of Cyprus, the Youth Board of Cyprus, the Cyprus Youth Council, the Trade Union of Public Servants, the Teacher's Organizations, the Pan-Cyprian Confederations of Parents, and many other organizations and local associations.



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KENTHEA is appreciated and economically supported by the State (through national sponsorships), as well as by individuals, companies, and organizations of the Cypriot society.

KENTHEA has also been acknowledged by the World Health Organization (WHO), as was also honoured with the Organization's Award as the Best Volunteer Organization in the world promoting health.

KENTHEA's basic principles

KENTHEA implements the Nations Strategy about Drugs and the Anti-Drug Council's Action Plan 2008-2012 and cooperates with the governmental sectors with the goal of implementing the governmental policy.

KENTHEA also adopts and implements the prevailing international policy against drug addiction as suggested by the World Health Organization (WHO) and the European Union (EU), after adapting it to Cypriot reality.

KENTHEAs programs

The programs of KENTHEA attempt to cover Universal, Selective and Indicative prevention and include:

- Prevention Programs of universal and selective level as well as educational programs for parents, teachers, youths and the general public organized by the Prevention Sector of KENTHEA.
- Treatment programs.
- Conferences, seminars and international activities.
- Educational programs for prevention professionals through the "Institute of Continuous Education" (ICE).
- Publication of the magazine "How are you?" and "Parents do you hear us?" and other enlightening and informative material.
- Research implementation and documentation through the "Institute of Research and Monitoring" (IRM).
- Prevention and Counseling Stations situated around Cyprus.
- Community Volunteer Groups for Prevention in many Municipalities and other communities in urban centres and the countryside.

Further information:

www.kenthea.org.cy

Miciei Kkeli und Catherine Rettig

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CAD Limburg: “Proud to be part of Take Care”

The ‘CAD Limburg’ association was founded in 1958 in response to the alcohol problem that was lashing out in our region during that period. Stimulated by Professor Paesmans, ‘the bureau for alcoholism’ was set up in the city of Hasselt. Throughout the decades that followed the clinic evolved under the influence of new social trends and problems to the current centers for alcohol- and other drug problems it is now. Nowadays all drug addictions and compulsive addictions, like gambling and gaming are treated.

The CAD is organized regional and provides patient care and support to help anyone with questions or need for information about alcohol, medication, drugs and gambling within the province of Limburg.

Treatment

To improve the service to the people and to lower the threshold for people in need, the organization has a network of regional offices and organizes street corner work.

We respect the individual values and perceptions of our clients and offer our services in a spirit of solidarity and commitment. The quality of life of our clients is hereby of great significance.

The client-centered counseling can be done individually or can take place with partners and families.

The guidance can consist of:

- Providing information about:
 - products
 - Effects of substance use
 - Addiction
- Counseling
- Supporting the client and his / her immediate surroundings
- Psychotherapeutic (detoxification) support
- medical support.

Our treatment is realized with the cooperation of other local facilities and organizations like hospitals and such.

Addiction (to alcohol, drugs, illegal drugs, gambling) does not only have implications for the addicted person but also for his entire surroundings. Many family members are often as helpless as the addicted person. Therefore, the CAD offers specialized services to assist addicts and their families.

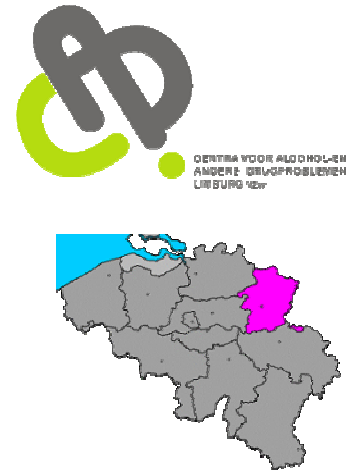


Figure 12: Limburg is a province of Flanders in Belgium



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Prevention

Prevention focuses on organizations and all kind of areas of society; like youth work, sports and healthcare.

The intention is to work on an alcohol- and drug policy with our partners who encounter problems or who consider prevention as very valuable. Coaching these organizations means you to take into account the specific features of the organization or sector!

The main purpose of the prevention work is the development of local prevention policies in the 'Limburg' municipalities. This is done in consultation with local key persons and adapted to local circumstances and opportunities.

Besides a coordinated approach, projects are developed in as many areas of society as possible, often in collaboration with other organizations.

Besides the implementation of existing projects, which often arise from a cooperation under guardianship of the VAD (our national federation), we also continue to develop new concepts. Therefore the role of prevention workers at the CAD has evolved into both concept developer and coach for our local partners who are engaged in the development of a local alcohol and drug policy.

More and more partners in the work field share a vision based on drug prevention.

Our principles in prevention work:

- It's about all the drugs: So both legal and illegal, but with paying special attention to the issue of alcohol addiction.
- It's about the entire population: So young and old get a customized message.
- Prevention is a long term process.
- Prevention is more than a transfer of knowledge alone.
- It is important to meet the experiences of the target groups.
- Multilevel approach
- Importance of the environment.
- Beware not to scare off people
- Participation of the target group
- Emancipation in time
- Regional opportunities
- Enable our partners.

Our offer ranges from giving information and advice to professional development, training and project management.



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Das TAKE CARE-Team

The “TAKE CARE” team is coordinated by Carlo Baeten and supported by Jeroen Aerts and David both prevention workers.

Further information:

www.cadlimburg.be

David Fraters

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News

Recommended Links:

- <http://ec.europa.eu/eahc/projects/database.html>
This database includes information on projects, conferences, and operating grants funded through calls for proposals in the years 2003 to 2008 under the previous EU Public Health Programme and the current EU Health Programme 2008-2013.
- <http://www.drinkaware.co.uk/>
This website offers interesting information on alcohol, alcohol dependency, health risks and binge drinking. Drinkaware highlights the dangers of alcohol misuse through innovative and challenging campaigns. The website addresses to experts, adolescents and their parents.

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Nadja Wirth

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