seARCH
Suchtprävention
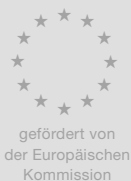für Flüchtlinge und Asylbewerber

GESUNDHEITSABTEILUNG

Rapid Assessment and Response (RAR)

für problematischen Substanzgebrauch
unter Flüchtlingen, Asylbewerbern und
illegalen Einwanderern on Problematic Substance Use
among Refugees,
Asylum Seekers
and Illegal Immigrants

Ein Handbuch
A Manual

Richard Braam
Hans Verbraeck

Franz Trautmann

Trimbos-
instituut

Centrum **voor**
Verslavingsonderzoek

gefördert von
der Europäischen
Kommission

Landschaftsverband
Westfalen-Lippe www.lwl.org

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Manual

'Rapid Assessment and Response' (RAR) on Problematic Substance Use among Refugees, Asylum Seekers and Illegal Immigrants

Richard Braam
Hans Verbraeck
Franz Trautmann

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH Suchtprävention
für Flüchtlinge und Asylbewerber

Table of contents

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SEARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Dear reader,

For many years now the Landschaftsverband Westfalen-Lippe (LWL), Coordination Office for Drug-Related Issues, has been occupied with addiction problems that occur within the context of migration and which, when compared to the native population, are always distinctive in character. Until now, however, the addiction problems of asylum seekers and refugees have neither been examined by us nor by other institutions in Germany, and specific prevention strategies have not been developed which are appropriate to the situation. On the other hand, we have received many indications from those working in addiction care at local level that drug problems among the aforesaid groups belong to the most frequent health problems, and that there has been little success in providing effective drug prevention owing to many reasons, including legal, political, psychological, methodological and financial ones. This was reason enough for the LWL to examine the extent and genesis of the addiction pressures amongst refugees and asylum seekers, as well as to develop adequate preventive strategies for addiction.

Since partners from many other European countries have told us that they are experiencing problems similar to the ones depicted here, the idea was born to submit a joint project proposal to the European Commission with the aim of examining the pressures of addiction on these target groups at European level (by taking six regions in six countries as examples), and to develop drug preventive measures that are as effective as possible.

However, we wanted to complement this undertaking with a second aspect that is equally important to us: many urgent problems in the public health sector, such as the spread of specific drug and addiction problems or epidemics (HIV, hepatitis, etc.), need rapid and qualified interventions. When health and social problems start appearing, however, lengthily planned research projects, which are often very time consuming and expensive, are particularly unsuited at local authority level for rapidly providing adequate, secure and qualified data that can serve as a basis for planning interventions.

The Rapid Assessment and Response (RAR) method, which was developed by British addiction researchers and tested in different WHO projects in the field of drugs and aids, seemed to us to be a research method particularly suited for quickly examining problems in the public health sector without becoming "unscientific" or speculative in approach, and for providing instruments and data for the concrete planning of interventions. Thus it seemed reasonable to deal with the initial task - the assessment of addiction-related problems amongst refugees and asylum seekers in six European regions, and the planning of specific preventions - by using (or "testing out") this research method.

This 18-month European project has been given the name 'SEARCH', which refers to our search for results and solutions, but also the target groups' search for greater freedom, security and happiness. The results are documented in two manuals: the manual on the "RAR" method, which is presented here, and the "practice manual", which was also published on completion of the project.

The LWL is glad to have won the services of two renowned Dutch Addiction Research Institutes for the scientific support of the project. Their manual is presented here with the title "Rapid Assessment and Response (RAR) on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants". It first of all describes the basic essentials of the RAR method before going on to document, in a very practice-oriented way, its concrete application in the aforesaid research field. Its intention is that the methods described should be used in dealing with the problems being investigated in the regions. It also requests that the instruments used ("the grids") be further developed and adapted to meet specific needs.

We believe that the manual does even more: for the first time in Germany it has been verified that this research approach is entirely suited for examining, without spending too much time and money, social and health questions on the basis of acknowledged scientific research. At the same time it is very practice and intervention-oriented, and therefore represents an instrument of "social research in the hands of practitioners".

Together with our project partners and the research institutes, the project team has been able to complete 'SEARCH' very successfully. This is documented by the variety of practical results, suggestions and ideas which have been presented in the "prevention manual", but in particular, by the RAR manual presented here, which in many respects is probably unique in Germany.

We would also like underline the authors' request to be able to discuss the RAR method and its results with you and us: you, dear readers, are cordially invited to provide us with praise and criticism, suggestions and personal reports - to put it briefly, tell us your opinions and experiences!

Dr. Wolfgang Pittrich
Regional Councillor

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

se∧Rch
Suchtprävention
für Flüchtlinge und Asylbewerber

Acknowledgements

The authors:

Richard Braam (developmental psychologist) is social scientist and general manager at the CVO - Addiction Research Centre - in Utrecht, the Netherlands.

Hans Verbraeck (cultural anthropologist, specialized in ethnographic research on urban subcultures) is social scientist and science manager at the CVO - Addiction Research Centre - in Utrecht, the Netherlands.

CVO – Addiction Research Centre – is an independent research group attached at Utrecht University. CVO is specialized in field research among hidden populations.

Franz Trautmann (educational scientist) is head of the programme international affairs of the Trimbos Institute - Netherlands Institute of Mental Health and Addiction in Utrecht, the Netherlands.

Trimbos Institute Utrecht
Franz Trautmann
Da Costakade 45
P.O.Box 725

NL-3500 AS Utrecht

Phone: 0031.30.297.1100
Fax.: 0031.30.297.1111
e-mail: Ftrautmann@trimbos.nl

Internet: www.trimbos.nl

Centrum voor Verslavingsonderzoek
Richard Braam, Hans Verbraeck
Oudegracht 325

NL-3511 PC Utrecht

Phone: 0031.30.2381495
Fax: 0031.30.2381496
e-mail: addict@fss.uu.nl

Internet: www.fss.uuu.nl/cvo

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

II Rapid assessment

1 Introduction

In different Member States of the European Union local, regional and national (health) authorities are faced with the inflow of a growing number of refugees, asylum seekers and so-called illegal immigrants, i.e., immigrants from different countries and various sociological and ethnic backgrounds, without legal residence permits. Their stay in a particular Member State is sometimes limited to several months, but a substantial number stays on for years, or even permanently, either with legal status or as illegal immigrants. UNHCR, the United Nations High Commission for Refugees, estimates that one in every two hundred fifty world citizens left their country to find a safer existence elsewhere.

Different sources show that refugees and asylum seekers suffer from various health problems. Problematic substance use appears to be one of their more prominent health problems. Except for some explorative studies (Braam et. al 1999), there is not much reliable data about the nature and extent of these problems. What little information there is rarely ever consists of more than hearsay - often based on dubious political interests - and some anecdotal evidence from health and social agencies.

Various European and national projects on the topic of migration and substance use focused on different aspects of this issue, e.g. mobility of substance users among EU Member States, including infectious diseases and substance use among migrant groups in different EU Member States, etc.. Refugees, asylum seekers and illegal immigrants, however, differ substantially from the groups covered by these projects. Major differences are their diversity (different nationalities and languages, different ethnic, religious and sociological backgrounds) and their generally unclear legal position.

From what little we know, we can conclude that some refugees were using substances before they came to Europe, while others became involved in substance use during their stay in refugee camps. Different factors contribute to making refugees especially vulnerable to substance use. These factors include traumatic experiences in their home countries, psychosocial problems connected to difficulties to adapt to their new environment (language problems, different norms and attitudes, etc.), lacking social and family contacts, their often uncertain future, and boredom due to forced unemployment and lacking activities.

In different Member States drug agencies have developed ad hoc approaches and information material in the field of drug prevention and demand reduction. However, information generally is lacking as to the extent and nature of substance use among refugees and their specific needs concerning drug prevention and demand reduction.

1.1 The 'SEARCH' project

The findings outlined in the previous chapter led to the creation of 'SEARCH', a two-fold European project named 'Drug Prevention for Refugees and Asylum Seekers'. This project was funded by the drug prevention programme of DG Public Health and Consumer Protection in Luxembourg and co-ordinated by the Landschaftsverband Westfalen-Lippe (Münster/Germany). The project's aim was to contribute to the development of instruments in the field of drug prevention that can be used in other regions and Member States. The objectives were:
• to obtain a picture of the drug problem among refugees in a number of EU Member States
• to identify the needs of refugees in EU Member States concerning information on drugs
• to identify good practice already developed
• to initiate and support the development of new approaches and information material
• to initiate and support exchange of expertise

The first phase of the project was to focus on developing and piloting a method for the quick collection of valid information on drug problems among the target population, that can be used directly for drug prevention activities. To collect this information we have used the Rapid Assessment and Response (RAR) method, as developed by Stimson, Fitch and Rhodes (Stimson et. al 1998a). This approach was used with success notably in the prevention of infectious diseases among injecting drug users (see chapter I.2).

This phase of the project included the following activities:
- An inventory of existing interventions and information material in the regions of the partner projects in six European Member States (Institut für Sozial- und Gesundheitspsychologie, Vienna, Austria; De Sleutel, Merelbeke, Belgium; Kreisverwaltung Soest, Germany; Gruppo Abele, Torino, Italy; Tactus, Enschede, the Netherlands; and Fundación Salud y Comunidad, Barcelona, Spain);
- Developing a RAR model for refugees and substance use;
- Training and support in RAR;
- Realising RAR's in the six Member States. These surveys will cover topics such as the nature of substance use, the (legal and illegal) substances used, the routes of administration, recreative and problematic use, background of substance use, the specific needs of refugees in terms of drug prevention, etc.
- Producing a manual on how to conduct RAR on the issue of refugees and substance use to allow other organisations to use this approach.

Trimbos Institute - the Netherlands Institute of Mental Health and Addiction (Utrecht / the Netherlands) and the CVO - Addiction Research Centre (Utrecht/the Netherlands) have been responsible for this part of the project.

The second phase of 'SEARCH' consisted of the development of interventions in the six involved regions based on the results of the surveys conducted in part one. The results of this work are presented in a separate guide to drug prevention interventions for refugees and asylum seekers. Landschaftsverband Westfalen-Lippe is in charge of this second phase.

1.2   How to use this manual

We have written this manual for health professionals working with refugees, asylum seekers and illegal immigrants. These professionals can be both staff of drug services and prevention agencies, and staff connected to aid services and target group centres, etc.. Although we did attempt to make RAR accessible to individuals without expertise and experience in research, we have learnt from the project that training and support by an experienced researcher is important.

We have divided the manual into three parts. Part 1 is an introductory chapter explaining the project's background and the basics of RAR. Part 2 contains an instruction on how to perform RAR, describing the process in detail. The attached CD-ROM contains the instruments for administering RAR's, examples of questionnaires and focus groups for collecting and checking information, and models of grids to aid in processing the collected information.

2   The RAR approach

2.1   The rationale of RAR

In recent years alternatives have been sought for traditional scientific research methods, which have proven expensive and time-consuming in terms of assessing and responding to public health pro-

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seARCh
Suchtprävention
für Flüchtlinge und Asylbewerber

blems. This has been the case especially in the field of illicit substance use and HIV prevention, where attempts were made to develop new assessment and response models. Financial resources necessary for traditional research are often hard to find. Many public health problems require a quicker response than traditional scientific research generally allows. Drug trends can develop very quickly. The same applies to local or regional outbreaks of HIV epidemics among substance users. Case studies from developing and transitional countries underline the need for faster, less expensive research and immediate action.

This has led to the development of so-called rapid assessment approaches. The core of this approach is the set of Rapid Assessment and Response (RAR) guides developed by the Centre for Research on Drugs and Health Behaviour at the University of London for WHO and UNAIDS (Stimson et. al 1998a/b/c and Rhodes et. al 2000). Since 1997 the approach has been tested extensively in developing and transitional countries in different regions around the world. This testing has been carried out by employing implementation strategies including training and consultancy, in order to support the implementation of assessments and subsequent intervention developments, using a draft version of the RAR Guide (Burrows et. al 2000, Trautmann and Burrows 2000). The findings generated by these field tests were used to adapt the RAR guide to the needs in the field.

Due to the overall positive experiences with RAR and other similar approaches, rapid assessments have been applied in various problem areas in European countries, such as the UK and the Netherlands. RAR's are used to collect relevant information for developing tailor-made health interventions and to assist in making decisions about appropriate interventions for health-related and social problems.

2.2   Characteristics of RAR

One important characteristic of RAR is that in order to get a reliable picture in a short period of time, it uses multiple indicators and data sources. It brings together various data sources and combines various methods to collect this data. This is to avoid and correct biases of a single source of information that might only cover a part of the phenomenon one is interested in. RAR helps you to get a more complete picture, including context information facilitating a better understanding of a complex phenomenon.

RAR helps you to explore a certain phenomenon or problem rather than to establish quantifiable facts about it. This investigative orientation will provide you with information on the differences in background, perception and interests of the actors involved, making you understand the biases of the information you receive. This will facilitate a process of 'weighing' the reliability of the information you receive. Cross-checking, 'triangulating' information from different sources is a crucial element of RAR.

From the information you receive you are inducing hypotheses about the nature of the subject you are investigating. These hypotheses can then be cross-checked again. This illustrates the importance of consulting a wide range of people from different backgrounds.

The focus of RAR is on adequacy rather than on scientific perfection. For adequate interventions in the field of health promotion you do not need to know the absolute number of people involved in certain risk behaviour. It is sufficient to know that a substantial number of people are involved in this risk behaviour. Through cross-checking information from various data sources, RAR enables you to establish reliable information about the occurrence and the nature of certain forms of risk behaviour.

RAR is therefore used in cases where the focus is not on knowledge as such, but on knowledge which makes quick response possible. Relevance to interventions and pragmatism are key features of RAR.

2.3 Methods / steps in RAR

RAR is, in fact, not a new method; it is a relatively new approach (though similar approaches can be traced back as far as the twenties of the last century). It consists of a mix of widely used research methods, such as interviews, observation, focus groups and estimation techniques. The major difference between empirical research and RAR is the pragmatic orientation of the latter, its practical orientation focusing on adequacy rather than on scientific perfection.

Stimson, Fitch and Rhodes (Stimson et. al 1998a) included the following methods / steps in their RAR approach:
- Examining existing information
- Access and sampling
- Interviews
- Focus groups
- Observation
- Estimation techniques

⟾   *Examining existing information*

Consulting existing information is the first step in a RAR process. Existing information can include research reports, reports prepared by health and drug services, information in the media, etc.. For reasons of efficiency you should, of course, first sort out what information is already available. At the same time, this helps you to identify possible gaps in this information. Moreover, viewing existing information can help in monitoring changes over time. Finally, useful background information may be gained from assessing the value or bias of findings.

⟾   *Access and sampling*

The next step is identifying possible sources of information. Key informants, i.e., people with knowledge that exceeds their personal experience, play an important role here. These people might be able to tell you more about the whereabouts of the target group in order to facilitate access. Direct access to the target group is crucial for collecting valid information about the issue of interest to you. Based on the information from these key informants you can start networking by visiting key locations, i.e., places where a particular target group meets.

The information collected through this process is the basis for mapping the community, i.e., to arrange and possibly even represent the information about the target group in graphical format. Mapping is a useful instrument to identify potential points of entry and access.

As it is usually not possible in a RAR to study all cases in a given population, you may need to systematically select a sample of cases from the study population. There are different ways to accomplish that:

- **Purposive samples** are used if you want to select certain cases which will quickly maximise your understanding of social processes and activities.
- **Opportunistic sampling** is not really a sampling method, as it actually is nothing more than simply collecting all the cases you can find. There may be occasions when cases have to be selected simply because they have become available.
- **Block sampling**. You may wish to select a series of sample 'blocks' from the total target community. These should be comprised of a number of communities and sites relatively close to one another, such as city blocks, groups of streets, or village tracts.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

- **Network samples** (often also known as 'snowball samples' or 'chain-referrals') involve the researcher contacting an individual connected with the population of interest and getting introduced by this individual to other members of the population. These individuals are usually interviewed, but could also be observed, or invited to attend a focus group. In turn, these individuals introduce the researcher to other members of the population. This continues until either no further sample members can be contacted or the point of saturation is reached.
- **Quota samples** can be used to investigate a range of different, theoretically important categories. This includes defining the categories and then deciding on how many individuals from each category - or quota - should be contacted.

➡ *Interviews*

Interviews can either be structured or unstructured. Unstructured, or more frequently 'semi-structured interviews' - using mainly open-ended questions - are used to explore a phenomenon, to obtain more information that helps you to understand what is going on. Structured interviews - using mostly closed questions that allow certain answers only - are used to target specific topics and to check whether your assumptions or the information gathered in earlier stages of a RAR are confirmed.

Interviews can be conducted with individuals or with groups. Often the former are more suited to collect in-depth information about sensitive issues. The latter are especially useful for gathering context information.

➡ *Focus groups*

The difference between a group interview and a focus group is that in the latter the aim is to generate group discussion about certain topics, whereas in a group interview individuals are requested to limit themselves to answering specific questions. Participants can be selected either on the basis of common experiences and similar backgrounds, or on different social positions and viewpoints. In both cases they are selected due to their specific expertise or extensive knowledge. Frequently they are likely to be key informants, i.e., people with knowledge that exceeds their personal experiences.

Focus groups are good for producing a lot of information quickly and identifying and exploring beliefs, attitudes and behaviours. They are a useful instrument to formulate hypotheses, check information and find explanations for diverging information. Their major disadvantage is that you have less control than in an interview, the data cannot tell you about the frequency of beliefs and behaviours and the group may be dominated by one or two participants who can influence the views of others.

➡ *Observation*

Like interviews, observations can either be structured or unstructured. Unstructured observation is useful in the early stages of a RAR, when background data is collected on the local places where target groups get together, and target group behaviour, etc.. Its aim is to explore. The information gathered through observation can afterwards be classified and coded according to relevant topics. Observation is especially useful for highlighting behaviour that you initially were not aware of.

Structured observation is used, once you have decided what type of data is most relevant for the RAR. It is usually carried out using observational guides stating what should and should not be observed and record sheets to record the presence of a particular behaviour or the number of times it occurs.

➡ *Estimation techniques*
Estimation techniques are useful instruments to assess the size of a population or scale of a problem.

Stimson, Fitch and Rhodes include case finding, multiplier technique, nomination technique and capture-recapture technique. Except for case finding (which is, in fact, nothing more than case counting) the estimation technique makes assumptions combining (existing) quantitative data as to the extent of a certain phenomenon.

2.4 Applicability of RAR

When considering RAR as the appropriate approach to collect information for your purposes, you should consider what it can and cannot offer you.

➡ *Speed*

One strong point of RAR is its time-saving ability. It facilitates quick and adequate response/interventions to urgent problems. With the RAR method you can collect information faster than with traditional empirical research. This is especially important in cases that require rapid responses; if you do not have the time to wait roughly two years for research results, such as in the event of an explosive development of an epidemic. Speed is also a must when fast changing phenomena, such as drug trends, or regularly changing populations are concerned. The latter generally applies to asylum seekers, refugees and illegal immigrants. Empirical research would be too time-consuming. Obtaining the results of a research after, let's say, 1 or 2 years means that they will be outdated, no longer representing the actual situation, and thus not allowing a tailor-made response to the actual situation.

➡ *Cost-effectiveness*

Compared to empirical research RAR generally is less expensive. Due to its pragmatic orientation - focusing on adequacy rather than on scientific perfection - it has a high output of information in relation to the work input.

➡ *Combination of assessment and response*

The process of collecting information as described above - identifying possible sources of information, involving key informants from various backgrounds and gaining access to/establishing contacts with the target group - implies direct involvement in the field. Through this direct involvement a network of personal contacts is established that is not only valuable for collecting information, but also provides food for thought about adequate interventions and works as a trigger for developing interventions. The assessment element of RAR entails community involvement, which contributes to effective interventions. Restricting oneself to the assessment process would mean not making the most of the opportunities which the network offers for interventions. It would mean an artificial split, all the more as most RARs involve people from the practical spectrum.

The experiences gained in 'SEARCH' underline this conclusion. In all six projects involved, people came up with ideas for interventions even before the assessment stage had been completed.

➡ *Collecting context information*

As stated above, the exploratory orientation of RAR allows a deeper understanding of the nature of a problem, and greater insight in differences of concept, etc.. In contrast to empirical research, RAR primarily does not work with clearly formulated hypotheses, i.e. closed questions on whether or not something is true. Obtaining a picture of the different views, interests and agendas of people involved in the issue at hand is an important part of the RAR process.

The perception of problematic substance use among refugees and asylum seekers can be used to illustrate the importance of an adequate understanding of concepts. In an Islamic culture the use of alco-

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search
Suchtprävention
für Flüchtlinge und Asylbewerber

hol is forbidden, leading to a view - even among not-religious people - which considers the consumption of two glasses of an alcoholic beverage a day as problematic. Refugees from the Balkan region tend to have a different view. The same applies to the use of substances that are illegal in the EU. Whereas non-medical opiate use as such is generally considered problematic, this is not the case in different Asian and Arab countries.

➡   ***Dynamic***

Its consultative character and mostly direct link to the development of interventions makes RAR a dynamic approach that does not have a fixed end in a research report, in which the compiled findings are presented. For adequate interventions it is vital to regularly check if these interventions are still adequate for the problems and needs they intend to address. This need to monitor/evaluate the development and implementation of interventions results in a cycle of assessment and response that includes the following steps:

---

rapid assessment of the situation

Ò

decisions about what kinds of interventions should be implemented

Ò

implementation of interventions

Ò

evaluation of interventions

Ò

further assessment of the situation

Ò

modification of interventions or development of new ones
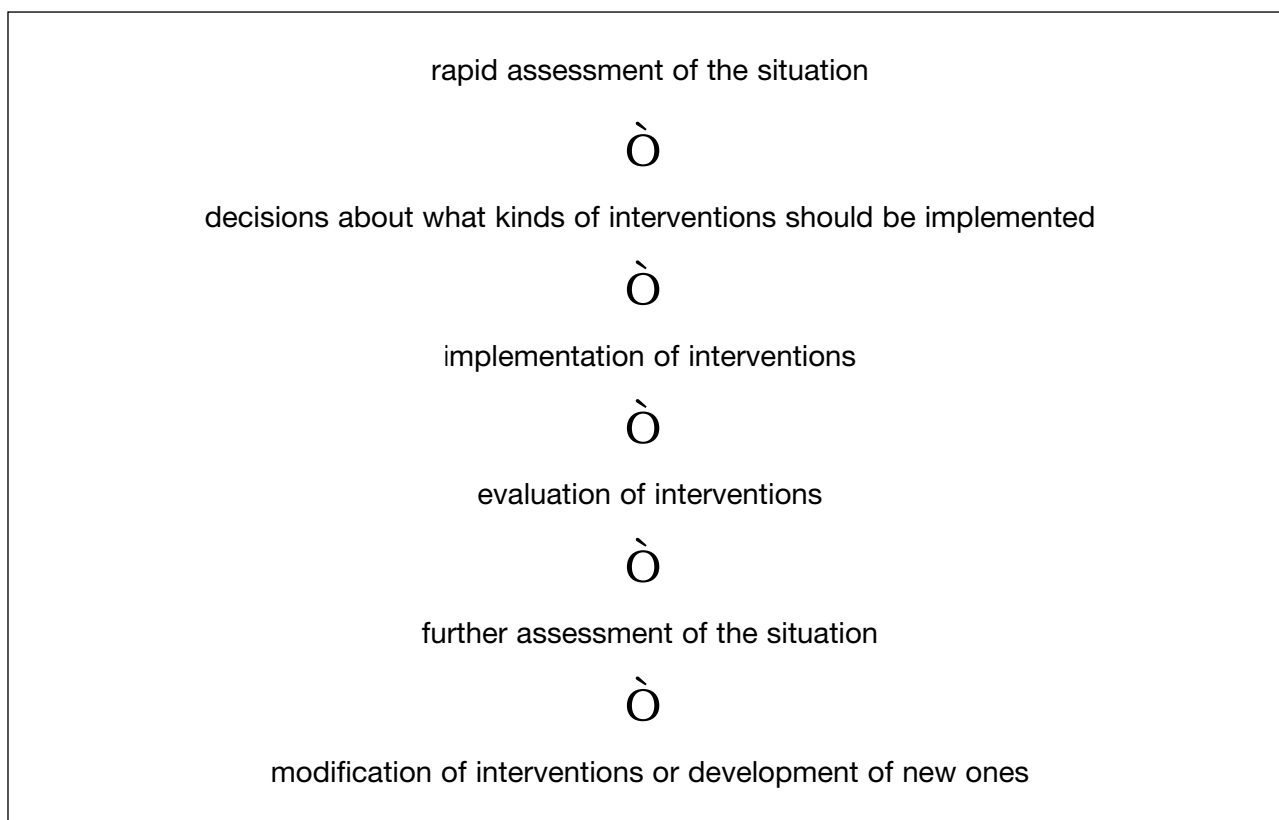
➡   ***RAR and/or empirical research***

As the authors of the WHO RAR guides have emphasised already, RAR does not replace traditional scientific research, but builds on this knowledge (Rhodes et. al 2000). RAR is an approach which provides indicators about certain phenomena; it does not produce 'hard' data, or so-called scientifically sound data. The result of RAR is an assessment, rather than knowledge tested with all the scientific scrutiny empirical research methods do allow.

Depending on the actual problem you would like to examine or tackle and the specific aims and needs of your plan, you will have to decide what is more appropriate: RAR or scientific research. In the case of the outbreak of the AIDS epidemic among substance users in the Russian Federation, for instance, it was not only the need for a quick response that made RAR a preferable choice. There simply was

no basis for taking a representative random sample, a basic requirement for empirical epidemiological research. Reliable data about the population of (injecting) drug users was not available. An important factor here was that the illegal character of substance use created the phenomenon of a 'hidden population'.

When collecting valid information, especially on the nature and extent of substance use among asylum seekers and refugees, the same problems are encountered. For different reasons the usual methodology of epidemiological research (e.g. interviewing representative samples of the target population) will not be adequate. In this case too, it will be difficult, for example, to obtain a representative sample of substance using asylum seekers and refugees, as there is no reliable information on the total population. It can be expected that respondents will not provide honest answers about their substance use, for example, because they may fear possible sanctions. This means that the 'hidden population' of substance users among asylum seekers and refugees may also be substantial.

In these kinds of situations RAR allows the researcher to gain access to the target population and explore a problem by collecting some basic information as to its extent and nature, thus facilitating the implementation of adequate preventive interventions. As regards the latter, we do not need to know the exact number and personal characteristics (age, gender, social, cultural and economic specifics) of the users of certain psychoactive substances. It would be neither responsible nor logical to wait with preventive measures until we have obtained exact information. However, what we do need in order to develop adequate preventive interventions, are sound estimates as to the extent of a particular problem and thoroughly checked information about the specifics of the problem and the target group. And this can be achieved through RAR.

Finally, rapid assessment and empirical research can even be a fruitful combination. Rapid assessment can be used effectively as an approach to formulate and check hypotheses, a first step in a research process, facilitating the process of formulating core research questions.

➡ *RAR as support of interventions*

RAR can be applied in various fields, in different ways and for different purposes. Its application is not only restricted to health and social interventions. Comparable approaches are used in advertising , e.g. when positioning and launching a new product. It is applicable both in the field of policy-making and developing and implementing interventions.

RAR can be an effective instrument to support the whole process of implementation. It can be used before starting an intervention, to analyse the situation, to verify one's hypotheses about the RAR process, to get a picture about the nature and extent of a problem, to identify relevant factors and appropriate interventions.

When implementing the intervention RAR can be used for the evaluation of a process, and for monitoring and analysing the development of a project. It can help to establish whether there is a need for changing particular aims, target groups or interventions, or to identify changes that sometimes simply seem to occur over time, without being noticed by the individuals involved. Monitoring can also include information about the response of others (partner organisations, policy makers, the general public and the media) to one's intervention, or information about the development of a local or regional network, etc..

Finally, RAR can also be used for a basic effect evaluation. It can provide information about the impact and effects of an intervention.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

3. RAR and refugees

3.1 Methods used in 'SEARCH'

As regards 'SEARCH' we have decided to limit the number of methods used in RAR. We omitted observation and estimation techniques, as we wanted to design a basic RAR approach for use by people without thorough research experience, who can only spend a limited amount of time on extra work. Although conducting a rapid assessment as outlined in this manual still requires a substantial amount of time, the experiences gained during 'SEARCH' confirmed that the format chosen allowed the staff in the six countries to complete a rapid assessment in a reasonable period of time. If sufficient human resources are available and the assessment is well-planned from the beginning - meaning, among other things, that the staff involved has scheduled their RAR tasks well in advance - a RAR process, as presented in this manual, can be completed in three months.

Observation can be a useful tool to collect important information, especially when working in an open setting (see below) on the streets, etc.. It can provide valuable information about the behaviour of the target group, locations, relationships between people, etc.. However, we decided not to include observation, as it is a rather time-consuming tool. Observation generally demands patience, i.e., time. It will take you a considerable amount of additional time, if you opt for including observation in a RAR. Additionally, it is of limited use in closed settings like refugee or asylum seekers centres, as - except in the communal areas - observation in occupants' private quarters would be perceived as intrusive. However, for those who are interested, we have included a chapter about observation in Annex 1.

We also decided to omit estimation techniques. The use of these techniques requires relatively large samples to allow reliable estimates about the size of a population or the extent of a problem. In addition, very careful examination of the data is required to make sure that you are working with independent samples, etc.. Again, for people who are interested, a more detailed description of these methods is included in Annex 2.

We further decided to follow a strictly ordered RAR process; again, to allow people who are not experienced researchers to employ this method. We start with a very open form of collecting information, trying to collect as much information as possible on the subject of substance use among the target group and about possible preventive measures. As the initial phase consists of exploring the subject, we will use open questions. This first step will provide background information for formulating hypotheses for more directed, closed questions at later stages, in order to check the hypotheses about vulnerable groups, substances used, useful preventive interventions, etc.. This means that the process of RAR is one of narrowing the scope from exploring to checking, thereby feeding the wide range of information to relevant findings. It is a process leading from unstructured to structured forms of collecting information.

The approach chosen for 'SEARCH' includes the following steps or phases:
• Examining existing information
• Access and sampling
• Semi-structured interviews
• Structured interviews
• Focus groups, and
• Reporting

To structure and organise the RAR process we have developed a set of key questions, containing the most basic questions for collecting information about both substance use among asylum seekers and refugees, and possible adequate prevention measures. They form the basis and the framework for all

these information gathering steps. During the RAR process they will be subdivided into more detailed questions, which are designed based on the findings in the preceding information collection phases.

There are four questions focusing on substance use:
1. Who is using substances problematically?
2. What substances are used problematically?
3. What is problematic substance use?
4. What factors are of influence in developing problematic substance use?

Another four questions concern possible preventive measures:
5. What does the target group know about the risks of substance use?
6. What are existing effective preventive interventions/preventive conditions?
7. What preventive interventions/preventive conditions are needed by the community?
8. What are the priorities in prevention?

➡ *Examining existing information*

The first step is to establish whether there already is some existing information on the subject and what aspects are covered. Possible sources to check include reports/information from health, justice and police authorities, reports/information from health, social and legal services, reports by centres for asylum seekers and refugees, information from organisations representing the interests of asylum seekers and refugees, etc.. Information from the media can also be helpful; maybe not as far as actual facts are concerned, but in terms of the perception of substance use among asylum seekers and refugees, and the attitude of the public. It also can help you to identify key informants and lead you to further sources of information.

Though in this phase you will simply look for relevant information available on the issue, the set of key questions will help you to sort the information and limit the scope of your search, and to distinguish between information directly relevant to the issue and context information.

The available existing information will help you to identify what kind of further information is required, as well as assist you in defining the problem and specifying/prioritising the target group. It can give you an idea on how substance use among asylum seekers and refugees and its perception have changed over time. Lastly, existing information can also be used in the process of triangulation, in order to assess the value or bias of different findings.

➡ *Access and sampling*

The second step is to identify possible sources of information and to gain access to the target group. Here your focus lies on identifying key informants, establishing contact, collecting information from these informants, and through them, gaining access to the target group. Key informants can be asylum seekers and refugees, staff of centres for asylum seekers/refugees, health and drug services workers, people connected to organisations that represent the interests of asylum seekers and refugees, police officers, substance users and dealers, etc.. As stated above (see chapter 2.3) key informants should be individuals with knowledge that exceeds their personal experiences.

In this phase of RAR process, your focus will still lie on gathering all the information you can get on substance use among the target group, in order to allow you to understand the problem. As in the case of examining existing information the key questions will serve you as guidelines and help you to sort the information you obtain.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

se∧RCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Through the information gathered in this phase you will be able to specify the problem and the target group. In addition to information directly related to the key issues of interest to you, you will also obtain a great deal of information not directly connected to these key issues, such as information about cultural and religious backgrounds of the target groups, and their way of life and living conditions, etc.. This context information is far from irrelevant, and can be valuable in giving you a better understanding of the issue of substance use.

Based on the information collected you will be able to map the community, outlining the locations where certain parts of the target group get together, who lives where, who is connected to whom, etc.. This mapping will be helpful to select the respondents for the next stages of RAR.

Additionally, through making contacts with various people, i.e., representatives from relevant services and organisations and asylum seekers and refugees, you are starting to develop a network that will serve as a fruitful basis for future prevention activities. Direct involvement with the issue and the people concerned facilitates and motivates a process of going beyond the role of researcher and getting engaged in interventions.

➠ *Semi-structured interviews*

The information collected in the first two stages serves as the basis for the subsequent, more structured, form of collecting information, i.e., the semi-structured interview. Whereas in the second phase you will generally use the format of unstructured interviews, using the key questions as basis for the unstructured collection of relevant information, you will now be using a questionnaire with a mix of open and closed questions in a set order. This, to be able to formulate clearer hypotheses about substance use and possible preventive measures. Which groups are especially vulnerable, what substances are used problematically, what can be done in the field of prevention, etc.?

To accomplish this, based on the key questions - which also define the structure of the questionnaire - more detailed questions have been designed. These questions reflect the information you will have gathered in the first two phases. The interviewees will be key informants.

➠ *Structured interviews*

Phase four consists of structured interviews, using a questionnaire with closed questions, again a more structured form of collecting information than in the previous phases. The information obtained from the semi-structured interviews is used to design the questionnaire for the structured interviews. This questionnaire has the same structure as the questionnaire for semi-structured interviews.

Its purpose is to test the hypotheses and conclusions about substance use and preventive measures drawn in the earlier phases and to obtain additional information. You are trying to establish whether another sample of respondents does confirm the picture you have gained from the semi-structured interviews concerning especially vulnerable groups, substances used problematically, and suggestions for effective preventive measures, etc.. Interviewees do not have to be key informants, but should represent different relevant groups, both health professionals and target groups.

➠ *Focus groups*

As a means of checking results in the concluding stage of the process, focus groups have two different aims. The first objective is to check diverging or contradicting information received in earlier phases and to validate and cross-check findings from earlier RAR stages. The second is to assess the representativeness/validity of conclusions and to discuss the implications of the results for planning and undertaking preventive interventions.

This generally means that you will have to organise two focus groups. Viewing and discussing the information you have obtained in earlier phases may reveal some contradictions in the findings which you can't explain. You can solve this problem by conducting individual interviews with some key informants, but a focus group is usually the better option. Bringing together key informants can provide you with information about the reasons why people have different views. Maybe this is related to their social position, their political agenda, or - as a result of these factors - simply because people see different aspects of reality.

The next step, after having solved these problems is to decide which preventive measures should be taken. Here too, a focus group has proved to be a valuable instrument. Of course you will be able to formulate a number of hypotheses about this issue in team discussions about the information collected in the earlier stages. However, bringing together a group of experts and target group representatives and discussing the results of your RAR concerning adequate preventive responses to the problems found, will help to make the plans more solid. To implement interventions successfully, it will further help you to obtain the necessary commitments from the relevant individuals.

➡ *Reporting and data management*

Formulating preliminary conclusions will complete every phase of the RAR process. The conclusions of one phase will serve as a basis for specifying the steps to be taken in the subsequent phase. What information do you lack? What questions have arisen in the phase just completed? Which individuals could provide you with this information or answer these questions?

As stated earlier, one of the characteristics of RAR is to use multiple methods and to collect data from different sources. This means that in order to guarantee the validity of the collected data, you have to make sure that you obtain your information from a variety of independent sources, i.e., from people with different professional backgrounds and from different groups within the target population. Since all these different aspects were considered in collecting this information, you will be able to get a comprehensive picture about substance use among asylum seekers and refugees and possible preventive measures. However, this picture may also contain diverging information on some issues. Triangulating this data, trying to identify biases and finding explanations for deviations and contradictions is an important element in processing the information.

As you will be confronted with a vast amount of information on various subjects during the RAR process, good and efficient data management is vital. You need to organise the information clearly to make it easily accessible. Once again, the key questions will serve as the basic structure for this data management, for sorting the information you have collected. In part two you will find formats, grids, in order to structure the process of data collection.

➡ *Some concluding remarks*

We have chosen a RAR format that starts with a very open form of collecting information, and then gradually develops from unstructured to more structured methods of information collection, feeding the wide range of information collected in the starting phase to the relevant concluding findings.

This strict order of phases in the information collection process has the advantage of offering someone without research experience something to hold on to. On the other hand, it takes away one of the advantages of RAR, namely that of being a flexible instrument that can be adapted to changing needs.

Consequently, if you have experience in the field of research, or receive assistance from someone who has, you can, of course, decide to deviate from the proposed format, choose a different sequence of

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

phases or include additional instruments, e.g. observation. There are various options you can consider. For example, you could backtrack one step from structured to semi-structured interviews, if the structured interviews do not confirm the picture you have gained from the earlier round of semi-structured interviews. The divergences between the results from the first round of semi-structured interviews and the results from the structured interviews can be used for designing a questionnaire for an additional round of semi-structured interviews to find explanations for these divergences.

You also can decide to have focus groups in the very beginning of the RAR process, as it can be useful and efficient to bring together key informants for discovering opinions and behaviours (that are not covered by existing information), for collecting information to formulate first hypotheses, for discussing how to gain access, and defining the details of questionnaires. A focus group can also be of value in the middle of a RSA to check findings, assess the accuracy of hypotheses, validate or cross-check findings, and find explanations for divergent information. Once the semi-structured interviews are completed, you might consider a focus group for designing and fine-tuning the questionnaire for the structured interviews.

Observation can be a helpful technique in different stages of a RAR process. Unstructured observation in the starting phase might provide information about behaviour and social relationships in the target community. Structured observation might help you to check certain information in the later stages of the process.

3.2 Project target group

The question as to who exactly constitutes the target group in a project such as 'SEARCH' may require some clarification. The terms asylum seeker and refugee refer to people who leave their homeland in the hope to find a better future in another country. Asylum seekers are individuals who apply for legal status. In some countries, the term refugee applies to individuals who have been legally recognised as such, and have received a permit to remain in the host country.

According to the 1951 Convention Relating to the Status of Refugees, a refugee is a person who, "owing to a well-founded fear of being prosecuted for reasons of race, religion, nationality, membership in a particular social group, or political opinion, is outside the country of his nationality, and is unable to or, owing to such fear, is unwilling to avail himself of the protection of that country." Reasons for people to flee their home country can be varied: civil wars and ethnic, tribal and religious violence.

A refugee applies for asylum and has the right to safe asylum in other countries, because his own government has proved unable or unwilling to protect his basic rights and physical safety. If the application for asylum is granted, a refugee - apart from physical safety - should receive the same rights and basic assistance as any other foreign resident with legal status, including certain fundamental rights which every individual is entitled to. This means that refugees who seek asylum have basic civil rights, including the freedom of thought, movement, and freedom from torture and degrading treatment. Given that liberty is a fundamental human right, the detention of asylum seekers is generally not acceptable. Each refugee should have access to medical care. Each adult refugee should have the right to work. No refugee child should be deprived of education. But refugees also have certain obligations. In particular, they should abide by the laws of their country of asylum.

In addition to 'refugees' and 'asylum seekers'- i.e. people fleeing from persecution and oppression on political, religious or other grounds - there are migrants, who are trying to escape poverty and seek a better economic future in another country. To a refugee, the economic condition of the country of asylum is less important than its safety. In practice, it can sometimes be difficult to make the distinction, but it is a fundamental one nonetheless: a migrant can benefit from the protection of his government, a refugee can not.

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

Every country in Europe has its own history of immigration and its own immigration policy. Definitions of who classifies as refugee, asylum seeker or (illegal) immigrant vary from country to country. Sometimes the definitions of these different groups of immigrants are not clear to the policy makers themselves. Moreover, immigrants can fall under different definitions during their way through immigration procedures. Some immigrants are granted permanent residence. Others will be accommodated in a host country for a shorter period of time, depending on the situation in their homeland.

From the experience in the 'SEARCH' project, we know that the phenomena of asylum seeker and refugee are common concepts in the northern EU Member States, i.e., Austria, Belgium, Germany and the Netherlands. In these countries clear guidelines and procedures have been designed - at least on paper - as to the grounds on which an immigrant can claim legal status in the host country. In the two southern EU Member States, Italy and Spain, things are completely different. The vast majority of people defined as asylum seekers and refugees in the latter countries are simply described as illegal immigrants. Italy, for example, is confronted with a substantial inflow of immigrants from Africa seeking better economic prospects. During the civil war in former Yugoslavia, many people fled to Italy in search of a safe haven.

Moreover, the situation in the more northern EU Member States - which appears well-regulated on the surface - results in a reality not regulated that well. People who see their application for legal status on humanitarian grounds turned down often choose to stay and lead a life without legal status, turning in fact into illegal immigrants. A certain number of people even refrains altogether from applying for legal status and tries to make a living without legal residence permits. In some European countries, these illegal immigrants are formally legalised after years.

All these different groups generally share certain unfavourable living conditions. Not integrated in the society they are living in, many of them are without family and friends and live in social isolation. Their future is uncertain, they cannot make use of the normal educational, social and health services, they have no access to regular work, and have to live in fear of getting arrested and expelled, etc.. All this makes them prone to social and health-related problems. Problematic substance use just being one of them.

3.3 Settings: open and closed

In general, we can distinguish between two main settings in which you can contact the target group. In countries with a well-regulated policy on asylum seekers and refugees, substantial parts of the target group live in refugee centres or camps. This 'closed setting' makes the target group easy to trace, but not necessarily easy to reach. You need to have the approval and - better still - the support of the management and staff, both for administering an assessment and realising prevention interventions. In a closed setting it might be difficult to create an atmosphere of trust necessary for getting honest answers to questions on sensitive issues such as substance (ab)use. People might fear that being suspected of, or admitting to substance use could have harmful consequences, even leading to expulsion. Such a threat could come from staff, as well as from other residents.

In countries without a clearly formulated policy the approach will have to be different. To get in contact with the target group the RAR team generally will have to work in an 'open setting', i.e., informal meeting points on the street, in pubs, etc.. To get access to the target group and gain their trust can be quite tough. Here experience with outreach work can be helpful. One can opt for training RAR staff by experienced outreach workers, or decide to involve outreach workers in the actual RAR work.

We will cover the differences in approach to these two settings in part III, when discussing the issue of access to the target group.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seARCh
Suchtprävention
für Flüchtlinge und Asylbewerber

III. How to conduct a RAR

1 Assembling a RAR team

One of the organisational prerequisites for conducting RAR successfully is a well-chosen and well-prepared team. To get the work done in a quick and efficient way the team should not be too big. However, in order to accomplish the work, identify and avoid possible biases in the information and discuss tasks and findings, exchanges with colleagues are essential. According to our experience, three or four people would be a reasonable size for a team.

To carry out a rapid assessment quickly, the RAR team should be made up of a limited number of people, preferably three or four: one coordinator and two or three co-workers.

If an asylum seekers centre, refugee camp or health care organisation wants to carry out a rapid situation assessment, it means that the RAR team leader and the team members have to be relieved from most of their daily routine jobs for the duration of the rapid assessment.

The composition of the RAR team should remain unchanged during the whole RAR process. This contributes to an efficient management of knowledge in that all team members share the information collected, thus avoiding the need to transfer information collected during preceding stages to any new colleagues.

All RAR team members have to be acquainted with the entire RAR process. This means that they generally will require training in data collection methods. If the RAR team leader is an experienced social scientist, he or she can train the rest of the team. Special attention has to be paid to ensuring that every team member is trained in administering interviews, especially semi-structured interviews.

We want to emphasise that all team members, i.e., not only the RAR team leader, have to have an overview of the rapid assessment during the entire process. This implies that the RAR team has to meet frequently. During these team meetings, the RAR team makes a planning for all activities to be carried out between then and the next meeting, divides all these activities between different team members and discusses all stages of the RAR process: access and sampling, the selection of respondents for both semi-structured and structured interviews, the quality and triangulation of the collected data, as well as data management and reporting, etc.. Moreover, (preliminary) results can be discussed and (preliminary) conclusions drawn. Ideally, all activities and responsibilities of each RAR team member, all communications between RAR team members and all interview appointments with respondents are entered in a log. Both meetings and logs allow efficient sharing of information within the RAR team during the entire process.

To allow a fruitful discussion of the findings and identify possible biases, you should make sure that the team members represent a broad range of different - professional and personal - characteristics. Relevant criteria to take into account can be gender, ethnic, socio-cultural and religious background, age, profession and experience. Reporting to and input from a larger group of people or key informants can be of value here, too.

Interviewing members of communities from different cultural backgrounds sometimes deserves special attention. In some cultures, women may only be interviewed by women, in others, men will not offer reliable information when interviewed by females, while in yet another culture older people do not like to be interviewed by young persons.

SEARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

Most of the methods in the RAR process derive from empirical research in social sciences. Therefore the RAR team should have some social scientific expertise. Ideally the coordinator is a social scientist. Another option would be a social scientist supporting the team. Other members of a RAR team could consist of health care staff, social workers from a refugee camp, drug services staff and drug prevention workers. If possible, former asylum seekers, political refugees or illegal immigrants could be added to the team; ideally consisting of people who speak the mother tongue of the target community being studied.

Especially in the response phase when preventive measures are being developed, the RAR team needs a network of allies in order to implement these preventive measures successfully. Potential allies are:
• Health care workers and organisations
• Welfare workers and organisations
• Accommodation services
• Law enforcement and human rights services
• Community members and groups

To strengthen this supportive network the RAR team can also consider to involve:
• Representatives from local and regional political parties
• Local and regional policy makers

From our experiences in the 'SEARCH' project we have learnt that the contacts established in the assessment phase will be the first steps in developing this network. Involving the above-mentioned people and groups in the assessment process has the additional advantage of creating commitment. Asking people to bring in their expertise and experience usually makes them feel involved. The awareness that they can influence the process contributes to feelings of shared ownership of and responsibility for the RAR project. All that will aid you to gradually create a network that will prove helpful when designing and implementing preventive measures in the response stage.

2. Information collection and data management

2.1 Information collection

The rapid assessment process includes five methods to collect relevant information:
• Collecting existing information
• Access and sampling
• Semi-structured interviews
• Structured interviews
• Focus group(s)

All information collected with these five methods provides:
• Answers to key questions
• Context information, i.e., all other information relevant to gaining a better understanding of the problem.

In the 'SEARCH' project we have used eight key questions to guide the collection of information during all phases of the rapid assessment. These key questions form the basis for the RAR process as a whole. Four key questions focus on substance use:
• Who is using substances problematically?
• What substances are used problematically?
• What is problematic substance use?
• What factors are influential in the development of problematic substance use?

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Another four key questions concern possible preventive measures:
• What does the target group know about the risks of substance use?
• What are existing effective preventive interventions/preventive conditions?
• What preventive interventions/preventive conditions are needed by the community?
• What are the priorities in prevention?

In 'SEARCH', teams in some countries focused on two or more target communities of refugees and asylum seekers. Given the amount of time required to carry out a rapid assessment, it appeared to be too much work to cover the whole range of relevant issues involved, when working with several target communities. To allow an efficient and rapid assessment we advise you to limit the scope of the assessment. Select one, or - at the most - two communities, which, based on initial talks with key informants and other indications, are supposed to be the most vulnerable ones.

2.2 Storing information

During every phase of the RAR process the RAR team will collect a huge amount of data, produce an extensive amount of grids (for further information about grids, see chapter 2.3) and some (preliminary) reports.

When collecting **existing** information the RAR team will compile written material: scientific research documents, policy papers, reports by addiction and health care organisations and articles in newspapers and magazines. Data is processed in existing and context information grids.

During the **access and sampling** phase relevant informants will be identified. Informants will answer key questions and provide context information. In addition they will give the RAR team members more existing information. The RAR team should store all information on relevant informants, such as:
• Addresses, telephone and fax numbers, email addresses
• Meeting places of informants who can't, or prefer not to give addresses, telephone numbers, fax numbers, or email addresses
• Any information the informants can provide
• Networks to which informants belong, etc.

In addition, the RAR team should start a log of the assessment during the access and sampling phase, in order to manage and organise fieldwork activities and informal talks in the field.

The next stage of the RAR process, i.e., the **semi-structured interviews**, consists of filling in questionnaires, and processing and analysing the information from these questionnaires. In addition, team members will compile more context information and continue to update the log throughout this phase. The same activities are to be carried out in the **structured interview phase**. Lastly, in the **Focus Group Phase**, the information resulting from the discussions of the selected issues has to be processed and analysed.

In these three phases too, you should store the data of interview respondents and focus group(s) participants, i.e., where to locate them (addresses, telephone numbers, fax numbers, email addresses, or locations where they can be found), as well as what type of information they can provide, and any networks they are part of, etc..

Information collection is a process in which each phase is based on and/or adds to the information gathered in the previous phase.

Every member of the RAR team has to have an overview of the entire RAR process. Data management has to be the responsibility of one member of the RAR team, preferably the coordinator, but has to be well-structured, transparent, and accessible to all RAR team members. To accomplish this, data management has to be discussed during team meetings and information should be stored in a structured way. For example, to make the information easily accessible, store questionnaires from semi-structured interviews in a separate directory, etc..

Furthermore, as confidentiality is guaranteed to each informant, respondent, and focus group participant during the various phases, all data collected must be managed discretely. All personal data, logs, interview tapes, interview transcriptions, grids and (preliminary) reports must be kept under lock and key and all digital documents secured with a password.

It is up to the coordinator and the RAR team how they want to manage the data. Here some assistance will be given to develop protocols for data management.

Most existing and context information will consist of written material, or of print-outs of material downloaded from the Internet. All existing and context information is to be tagged or labelled. It is to contain the date of collection, name of the RAR team member, who screened the information, and the date when the information was processed into grids.

If printed out, all records of collected information should be kept in separate folders, arranged according to the phase in which the particular information was collected, and in separate folders, if stored digitally on the computer. If printed out, the information should be dated.

Separate files can be kept for names, telephone numbers, fax numbers, and email addresses of informants, respondents and focus group participants in the respective phases. The best way to keep this data up-to-date is to upload it into a computer, and secure access with a password. If printed out, the files of informants, respondents and participants have to be dated.

If semi-structured interviews are taped, the tapes must be kept under lock and key. All tapes are to be tagged or labelled, with a number assigned to the respondent and the interview date. The same applies to structured interviews, provided these are taped, and to focus group(s). Minutes of focus groups can be stored in a separate folder on the computer. The folder is to be secured with a password. When printed out, focus group minutes can be kept in a separate file and tagged or labelled with the date.

2.3 Processing and analysing information

A rapid assessment generates a substantial amount of information. How to organise all this information, how to establish an overall view and how to draw conclusions from this information?

To structure and simplify the process of data analysis, we have developed grids according to the method of information collection. During the rapid situation assessment, all relevant data is processed into grids. Grids are tools for analysing relevant data easily. The grids are designed so that team members can enter and organise the data collected from interviews and other forms of information collection. All grids basically have the same lay-out.

In one column there is space for entering all answers from respondents to a (key) question. At the bottom of the column a summary of the answers can be made.

In addition, there is a column for remarks to respondents' answers. At the bottom of this column deviant answers and unresolved questions can be memorised for further investigation.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search
Suchtprävention
für Flüchtlinge und Asylbewerber

Once all grids on key questions have been filled in, the summaries and unresolved questions can be transferred to a summary grid. Two rapid assessment phases end with a summary grid on the key questions: one summary grid for the semi-structured interviews and one for the structured interviews. With the help of these summary grids the outcomes from the different RAR phases can be compared and conclusions drawn.

3. Context information

When collecting information the RAR team will not only obtain data to answer the key questions, but also retrieve context information. Context information can be as comprehensive as the RAR team chooses before data collection starts. During the assessment the RAR team will come across context information. Please keep in mind, that the timeline for a RAR process is restricted and collecting structural and purposive data on context information may be too time-consuming. Only in cases in which team members have the impression that they lack an adequate understanding of a particular phenomenon, they should seek the information that helps them understand the problem.

In the available timeframe the team will discover some relevant aspects of the homelands of the target communities, for example:
• The socio-economic situation
• The cultural and religious situation
• Recent social, economic or political developments in these countries

In addition, the RAR team will come across relevant aspects of drug policy in both homelands and host countries of the target communities:
• Drug policy, drug availability, (in)formal drug control mechanisms and drug enforcement
• Drug prevention and intervention policy in the homelands of the target communities

Furthermore, some relevant aspects of immigration will be uncovered:
• History, reasons and motives for emigration of the target communities
• Immigration history and immigration policy of the host country
• Official and unofficial statistics of the target communities in the host country
• Definitions for distinct groups of immigrants in the host country
• Procedures for distinct groups of immigrants in the host country

Likewise, some attention has to be paid to obtaining context information on the immigration policy of the host country that may affect the substance use of the target communities; for example:
• Time-consuming immigration procedures
• (Im)possibilities to receive working permits during the immigration process
• (Im)possibilities to receive education during the immigration process
• Social isolation and discrimination during the immigration process
• Uncertainty about the future in the host country

Eventually context information will be discovered about existing drug prevention services, drug interventions and other services for the target communities in the host country, such as:
• (In)formal drug prevention initiatives
• (In)formal drug intervention initiatives
• (In)formal other relevant services

During team meetings, the RAR team decides how extensively and exhaustively context information has to be collected. The amount of data collected on context information has implications on how to

manage and analyse this data. The more data is collected, the more time it will take to record and sort the information. All relevant data on context information has to be entered into grids. Grids are forms to structure collected information.

To structure all context information five grids have to be used in order to cover the following topics:
• Relevant information on the homeland (of a certain community)
• Relevant information on the drug policy in the homeland
• Relevant information on the drug policy in the host country
• Relevant information on the immigration policy in the host country
• Relevant information on existing drug intervention initiatives and other services in the host country

In this manual, the grids on context information are limited to five grids. Keep in mind, that if the RAR team targets more than one community, the grids 'Relevant information on homeland' and 'Relevant information on drug policy homeland' have to be filled in for each separate community.

If you decide to collect a lot of context information during the assessment, it may be necessary to split up some of the grids mentioned above into sub-grids. You can also opt to limit the information recorded to the most relevant topics. For example, the grid 'relevant information on homeland' can be subdivided into:
• Relevant socio-economic information on homeland
• Relevant cultural/religious information on homeland
• Relevant (recent) historical information on homeland

As the assessment has to be carried out rapidly, we suggest sticking to the five main grids as mentioned above. All context grids have the same structure and are made up of three columns:

GRID Context information
Topic:

Source	Information	Relevancy for RAR

Summary	Gaps

Under topic you fill in one of the five topics mentioned above.

In column **'Source'**, the RAR team has to fill in where, respectively from whom the data was collected. Context information will be compiled during the whole rapid assessment process, but especially from:
• Existing information: scientific research, policy papers, reports by drug services and health care organisations and articles in newspapers and magazines.
• Access and sampling.
• Semi-structured interviews.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seARCh
Suchtprävention
für Flüchtlinge und Asylbewerber

If the source of the information consists of written material, enter author(s), title, publisher, year of publication, newspaper or magazine in which the article was published, etc.. If context information was collected during an interview, enter the respondent in column **'Source'**.

In the **'Information'** column, relevant data to describe and to understand the context can be entered.

In column **'Relevancy for RAR'** the RAR team can determine the exact implications of this specific context information for the next phase in the assessment or for the response stage, when developing new prevention and intervention initiatives, or adjusting existing ones. These things are established in team meetings.

In the **'Summary'** column the RAR team can summarise the context information on the particular topic. In the **'Gaps'** column the RAR team can decide what aspects of the topic are still unanswered and require special attention during the remaining time of the assessment. As rapid assessment is an ongoing process, information can be added to the context grids during the subsequent stages of the assessment.

4. Collecting existing information

During the RAR process, the RAR team will collect data from two main sources.
- The first source is existing information: scientific research, policy papers, reports by drug services and health care organisations and articles in newspapers and magazines. This might be superadded by the information received during access and sampling.
- The second source - and most likely the main source - will consist of data collected by the RAR team itself: through semi-structured interviews, structured interviews and focus group(s).

An important finding during 'SEARCH' was that existing information about problematic substance use among asylum seekers, refugees and illegal immigrants is very limited. During the rapid situation assessment, RAR teams in six European countries came across written sources about:
- Target groups of asylum seekers, refugees and illegal immigrants lacking information about problematic substance use;
- Problematic substance use among ethnic minorities, not focusing on asylum seekers, refugees and illegal immigrants.

One of the pitfalls of the RAR process is, if all these data sources are screened too thoroughly in the search to find answers to the key questions. Only examine written sources that offer information on both problematic substance use and the target groups.

Answers to key questions encountered in existing information are processed into existing information grids. Eight existing information grids have been designed, one for each key question. All existing information grids have the same structure:

Start with entering the key question, e.g.: Who is using substances problematically?
In the **'reference'** column, enter author(s), title, publisher, year of publication, newspaper or magazine in which the article was published, etc..

In the **'information'** column, relevant data, taken from the source, can be entered to answer the key question.

In the **'remarks'** column, the RAR team can comment on the quality of the information, taken from the source, and agreed on during team meeting. An article in a tabloid, for example, will contain more biased information than an extensive article in a magazine based on interviews with the target group. A social scientific study based on a large survey on, or in-depth interviews with the target group, will offer more reliable information than a policy paper based on immigration and/or police statistics.

GRID Existing information
Key question:

Reference	Information	Remarks

Summary	Gaps

In the **'summary'** column, the RAR team can summarise the answer to the key question gathered from the scanned sources.

In the **'gaps'** column, the RAR team can enter what aspects of the key question are still unanswered and require special attention during the remaining phases of the assessment. As rapid situation assessment is an ongoing process, context grids can be adapted during every stage of the assessment.

Feeding relevant data into grids will be discussed in more detail in the chapters on semi-structured and structured interview phases.

5. Access and sampling

5.1 Introduction

After leaving their homelands, asylum seekers, political refugees and illegal immigrants end up staying in a wide variety of settings in their host countries. Settings vary from prison-like facilities to drifting on the streets, i.e. from very closed to very open settings.

As already mentioned in part II, two possible blueprints to gain access to a setting will be described below, i.e. blueprints to a closed and to an open setting. Please keep in mind that in reality each setting may have characteristics of both settings and therefore will require a specific and creative strategy by the RAR team.

5.2 Access to open settings

Examples of an open setting are streets, squatted houses, pubs, stations etc.. An open setting does not mean that the target community is open to outsiders like members of the RAR team. Usually there are barriers to entry and contact, making access to the target community difficult. Outsiders may the-

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search
Suchtprävention
für Flüchtlinge und Asylbewerber

refore require the help of intermediaries for establishing initial contact with members of the target community.

To gain access to an open setting, members of the RAR team will have to pay frequent visits to key areas, where members of the target communities are known to congregate. By visiting key areas regularly, members of the RAR team will be able to identify key informants, both with information about the target communities and the infrastructure of the key areas. An infrastructure of a key area is made up of:

- An (informal) network of care facilities, such as (voluntary) outreach workers, facilities set up by different religious groups and the like;
- The normal infrastructure of an area and its social surroundings, such as bus and train stations, shops, cafes, restaurants and so on.

By visiting an area frequently, members of the RAR team will ultimately get into contact with key informants, both in the target communities and in the infrastructure of an area. To facilitate this process the RAR team can use existing contacts to collect information about the infrastructure and/or to get introduced to key persons and the target community. As members of the RAR team are likely to be health or drug services workers themselves, establishing (informal) contacts with fellow workers won't be the most difficult problem. The emphasis during the access phase of the assessment should therefore be on finding key informants from within the target communities and the normal infrastructure of an area.

5.3 Access to closed settings

Examples of closed settings are refugee camps, asylum seekers centres and other places where the target group might be housed, such as former hospitals, cheap hotels or military bases. Usually some kind of social and medical care is provided in or around closed settings for refugees and asylum seekers. These social workers and medical staff might be an excellent starting point for the RAR team in their aim to identify key informants in and around the closed setting. Like in open settings, target communities initially may not be accessible to outsiders.

A pitfall in focusing exclusively on social workers and medical staff is that they sometimes consider themselves as gatekeepers for the target communities. Therefore, like in the access phase in an open setting, the emphasis must lie on getting key informants from within the target communities and from the normal infrastructure in and around the closed setting (bus drivers, taxi drivers, shop keepers, café owners).

5.4 Trust

During the access phase RAR team members have to establish rapport with key informants and gain their trust. During the semi-structured and structured interview phases, rapport and trust has to be established with respondents. Most key informants and respondents, especially if they are members of the target communities, might consider the issue of substance use a sensitive matter and any information offered about this issue as a possible threat to the target community.

One way to solve this problem is for RAR team members to visit the setting on a regular basis during the access phase. Through these regular visits to both open and closed settings, target communities will become accustomed to the presence of the RAR team. Again, it can be helpful if the introduction occurs through existing contacts, provided of course, that these contacts are trusted by the target community.

Another prerequisite for establishing rapport and trust during the access phase, is that RAR team members are as open as possible about the aims and objectives of the assessment. Before entering the setting the RAR team should agree on some consistent one-liners that were worked out during team meetings, which explain the aims and objectives of the process to the target community.

A further means of establishing rapport and trust during the semi-structured and structured interview phases of the assessment is an indispensable one: during the introduction to an interview the interviewer has to guarantee the interviewee total anonymity. In chapter 6.4 you can find an example of an introduction to an interview in the questionnaires.

5.5 Sampling techniques

During the access phase the RAR team will identify key informants, who have knowledge of the target communities or know people with such knowledge. Team members can establish the level of knowledge of each key informant by administering a very short questionnaire, for example:
- What experience with and knowledge of the target communities do you have?
- What is your knowledge on the use of substances within the target communities?
- What is your knowledge of drug-related problems within the target communities?

The questionnaire can be modified and/or expanded, but the RAR team should agree on a consistent, short questionnaire for screening key informants. These details should be worked out in team meetings.

If key informants show substantial knowledge of the issue (beyond their own experience), they can be selected as respondents during the semi-structured interview phase. But people who do not possess substantial knowledge could also be helpful, namely by identifying other people with knowledge, who will then become respondents for semi-structured interviews.

During all data collection phases of the rapid assessment, except for the focus group phase, key informants and respondents will be asked to identify others with substantial knowledge on the issue. This research tool is referred to as snowball sampling (also called network sampling or chain sampling). Snowball sampling is the most important research tool in the assessment of substance use among refugees, asylum seekers and illegal immigrants.

To collect information from different angles during the assessment, members of the RAR team should try to start snowball samples in different networks during the access stage. To avoid overlaps these networks should be independent from each other. So, do not only focus on volunteers and professionals from the social and medical fields, but also on the target group and the social surroundings. In general, members of the RAR team should consider to stop the process of interviewing respondents in a specific network sample, if new respondents are unable to add new information to answer the key questions.

Some target communities may be hidden to such an extent that RAR teams will have to resort to another sampling technique, namely opportunistic sampling. In opportunistic sampling all respondents are interviewed, simply because they have become available.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

6. Semi-structured interviews

6.1 Introduction

Interviewing means: ask questions systematically and listen carefully to the answers given by respondents. In explorative research, such as an assessment of substance use among refugees, asylum seekers and illegal immigrants, interviewing respondents is the most effective way to collect data. By using interview techniques, the RAR team gathers data on facts, meaning and opinions, and starts to create a network to facilitate the implementation of preventive future interventions.

6.2 Respondents

During the assessment process two interview techniques will be employed, namely semi-structured and structured interviews. Once the access and sampling phase has been completed, the RAR team will have an overview of potential respondents with substantial knowledge of the key questions. By network sampling the RAR team will identify additional respondents with such knowledge. These respondents will be questioned in semi-structured interviews.

Respondents of semi-structured interviews:
• Are closely connected to the target communities on a professional basis, or
• Have daily contacts with the target communities through their position in the 'normal' infrastructure, or
• Have central positions within the target communities

Moreover they:
• Have a good overview of the local situation
• Have a network of people with excellent knowledge of the key questions

In the 'SEARCH' project the teams in the different countries had to conduct the semi-structured interview phase in about one month. All teams were able to administer about ten to fifteen semi-structured interviews. We advise you to limit the number of respondents for semi-structured interviews to about fifteen. Make sure that these respondents are selected from different angles.

6.3 The semi-structured questionnaire

In semi-structured interviews the whole range of key questions is covered. In general, we would advise you to stick to this questionnaire, as changes will involve a far more complex RAR process.

The semi-structured questionnaire contains the following questions:

A1.Background information on respondent from target community

A2.Background information on respondent involved with target community

B.Community (key question 1)
  1. According to key informants, substance use in the target community is problematic; do you agree?

C. Substances (key question 2)
  2. What substances are used problematically in the target community?

D. Vulnerable groups (key questions 1 + 2)

3. Can you link the substances, just mentioned by you, to specific groups in the target community in which these substances are used problematically?
4. Can you give an indication of the percentage of people in the target community we are talking about?

E. Definition (key question 3)

5. What are the three most important substance-related problems of this vulnerable group in terms of physical and psychological health, social and financial problems, or trouble with the law?

F. Factors (key question 4)

6. In what respect do differences in substance use between homeland and host country explain problematic use by this vulnerable group?
7. In what respect does the situation in the homeland (traumatic experiences, economic factors, etc.) explain problematic use by this vulnerable group?
8. In what respect does the situation in the host country (uncertainty about the future) explain problematic use by this vulnerable group?
9. What is the function/benefit of substance use for this vulnerable group?
10. Do you see any other causes that may explain problematic use by this vulnerable group?

G. Prevention (key questions 5 - 8)

11. What does the vulnerable group know about the risks of the substance(s) they use?
12. From what sources did the vulnerable group obtain this information?
13. What are the existing types of preventive interventions and/or preventive conditions that target this vulnerable group?
14. What types of preventive interventions and/or preventive conditions are needed to target this vulnerable group?
15. What types of preventive interventions should have priority in targeting this vulnerable group?

The semi-structured questionnaire used in the 'SEARCH' project is contained as Word file on the enclosed CD-ROM. You can either use it as it is, or adapt it to your specific requirements.

Respondents can also provide other relevant information that is not covered by the key questions, i.e., context information. Respondents are invited to answer all key questions and relevant issues freely and in detail. Answers are not limited to predefined categories.

Although semi-structured interviews yield an immense amount of information in a short amount of time, they require much preparation. Besides, a fair amount of time is needed for managing the information from the semi-structured interviews.

Furthermore, the interviewer needs some experience to administer the interview properly. An unprejudiced and open attitude towards the respondent is also a must.

During the preparatory work for the semi-structured interviews, the RAR team members screen all the relevant existing data and context information thus far collected. This data can serve as the basis for

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search
Suchtprävention
für Flüchtlinge und Asylbewerber

adaptations of the enclosed questionnaires. Furthermore, the RAR team needs to consider carefully, which questions to ask. This is determined in meetings of the team. The RAR team also has to agree on the sequence of the questions. Finally, the RAR team has to decide how the questions have to be phrased. Both sequence and phrasing of questions depends on the individual respondent.

Be mindful to avoid:
- Complex and technical questions. Use clear and simple language, which is easy to understand and unlikely to being misinterpreted.
- Long and multiple questions. Long questions might confuse respondents; when asking multiple questions, there is a chance that respondents might only answer the part they remember.
- Leading questions. When asking suggestive questions, even if these are based on existing data or context information (for example, "Do you also agree that all Iranian adolescents smoke opium"?), respondents might come to conclusions they would not have considered otherwise.

6.4 Introduction to an interview

Before you start an interview, both a semi structured and a structured one, a good introduction is essential.

An introduction to an interview must be tailored to every respondent. Both respondents working with the target communities and respondents from the target communities will be interviewed during the semi structured and structured interview phase.

An introduction to an interview must contain the following topics:
- Start your introduction how you got in contact with the respondent. Most of the times the respondent is introduced/mentioned by a key informant or other respondent.
- Continue your introduction by introducing yourself and the organization you are working for.
- Then introduce the causes of the research. The causes vary from target community to target community, but are most of the times based on (anecdotal) sources that show that refugees and asylum seekers suffer from various health problems and problematic drug use seems to be one of their more prominent health problems.
- Subsequently explain the aims of the research. The main aims are to monitor the use of substances among the target community, to make inventory of existing preventive interventions, to develop new effective preventive interventions and to push back the problematic use of substances by refugees, asylum seekers or (illegal) immigrants. Explain that substances not only comprise illicit ones, like heroin, cocaine and cannabis, but also the licit ones, like alcohol, tobacco, tranquilizers and sleeping pills.
- Further, when you interview members of the target communities, explain that you are not interested in the personal substance use of the respondent, but that you made an appointment with the respondent because he or she has an excellent overview on the problem among his or her fellow compatriots.
- Conclude your introduction by explaining that all respondents will stay anonymous and that all information given will be dealt with strictly confidential, which means that information never will be passed through to police, customs, city hall, the government et cetera.

6.5 Administering a semi-structured interview

Before administering interviews, the semi-structured questionnaire has to be tested. Test interviews should be conducted within the RAR team, preferably also including one or two respondents. When members of the RAR team interview each other and these interviews are then discussed and evaluated by the team, questions can be rephrased and their sequence changed. Through these tests, RAR

team members with no prior interview experience receive instant interview training. Once the semi-structured questionnaire has been tested within the team, the RAR team should consider to retest and re-evaluate the questionnaire by interviewing one or two respondents. This might help you to detect and solve possible problems in the formulation and sequence of the questions.

Once the interview test is completed and the actual interviews are under way, the RAR team members will have to determine how detailed they want each key question answered, and whether further clarification of each key question is required. Two techniques with which to obtain more detail, clarification and additional information, are probes and prompts.

• Probes are intended for encouraging respondents to provide more information, or to continue speaking. Probes may consist of making silent gestures (e.g. nodding your head), encouraging sounds, or asking questions (e.g. "is there anything more you can tell me about this subject?").

• Prompts encourage respondents to raise issues that have not arisen spontaneously (e.g. "Another respondent told me …, what is your opinion on that?")

13 steps to administering a semi-structured interview

1. Arrive early at the location where the interview is to take place. Try to ensure that the location is as quiet and as free of interruptions as possible.

2. Interpreters - if needed - should be briefed on what is going to happen. If a tape recorder is used, it should have an external microphone, and you should have extra batteries and tapes.

3. Introduce everyone present to the respondent. Introduce people in a friendly way. State reasons and aims of the RAR. Promise respondents that everything discussed will remain confidential. Assure respondents that they are the expert, and that the RAR team wants to learn from their knowledge, experience and opinion.

4. Use clear and simple language when asking questions. Allow participants time to think and speak.

5. Sensitive subjects can be introduced by mentioning what 'other' people in the target community are said to be doing in terms of substance use or certain behaviour patterns, and then inviting critical comment.

6. Repeating respondents' answers in their own words is a good method of checking that you understand what they are trying to say.

7. Be a good listener and ask 'why' and 'how'.

8. Check with the respondent that it is acceptable to continue an interview, if it looks as if it may last longer than expected.

9. Always collect demographic data, such as background, function, ethnicity and status. This will be useful in considering the link between certain types of people and specific behaviours.

10. Summarise the key issues and opinions, once the interview has ended. Ask if respondents have any questions. It is important that RAR team members do not offer any advice or answers they are not in a position to give.

11. Ask respondents whether they have anything to add to the discussed topics.

12. Conclude the semi-structured interview by asking respondents, whether they know any other people who also have knowledge of the issue.

13. Thank the respondents for their contribution.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

The best way to record a semi-structured interview is to tape record it, though transcribing the information from a tape recording is very time-consuming. Naturally you will have to make sure that the respondent agrees to the interview being taped. Besides tape recording a semi-structured interview, it is recommended to take some notes. In the event a respondent does not agree to being taped, the interviewer will have to take written notes only. Ideally, these interviews should be administered by an interviewer and a note-taker. If this is not possible the interviewer will have to take the notes. This will prolong the interview, one reason being that respondents will sometimes have to repeat their answers. Occasionally a respondent may not even give the interviewer consent to take notes. In that case the notes should be made immediately after the interview, beginning with the answers to the key questions, followed by the rest of the information.

Tapes and notes must be labelled (interview date, respondent's name or code, interviewer's name). Interview tapes and interview notes have to be processed as soon as possible. Ideally, all interviews, and especially the first interviews administered, will be discussed and evaluated in meetings of the RAR team.

6.6 Analysing data

Semi-structured interviews always produce a huge bulk of information. To process and analyse all this data, you will have to feed it into a set of grids.

One set of grids is used for one studied community each. If you are focusing on several communities, you will have to use several sets of grids. In a set of grids, each key question has its own grid, in which the answers given by each individual respondent to the specific key question can be entered. Besides there is space for commenting on the answer of respondents. A grid ends with a summary of the answers provided by all respondents on each key question, and a column in which deviant answers and unsolved questions can be memorized. Once all the grids relating to key questions have been filled in, the summaries and unresolved questions can be transferred to a summary grid. This summary grid can help the RAR team to draw conclusions.

In the next paragraphs we will explain all grids for the semi-structured interview (SSI). We have included example grids with some (fictive) information, to show how the grids might be filled in. You can find the original grids on the attached CD-ROM.

Most grids have the same structure as shown in the following example.

Country:	City:	Contact person:	Date:

GRID: X (name of the grid)

Item: X (Key) question (enter question concerned)

Community: C (name of target community concerned)

Respond-ents	Answers to the key-questions	Assessment of information
01	Answer from respondent no 01	From what viewpoint did this respondent answer?
02	Answer from respondent no 02	and/or: Why did this respondent give a deviant answer?
03	Answer from respondent no 03	and/or: What is the background information on this respondent?

Summery of the answers to the key question	Deviant answers, topics for discussion
Answers mentioned by most respondents	Answers on which most respondents do not agree, items to be clarified in next interviews, or to be discussed in a focus group

In this example grid **GRID X** refers to the name of the grid.

Item X: (Key)question refers to the topic and questions in the semi-structured questionnaires concerning the relevant key-questions.

Community: C refers to the target community to be studied.

In the **'Respondents'** column an identifying number for a respondent can be entered. Every respondent receives a personal 'ID' number. By using these ID numbers, it is always clear which particular respondent gave what answer. Don't forget to make a list of all respondents with their corresponding ID numbers. You can use the 'respondents' grid for that (see chapter 6.6.1).

In column **'Answers to the key question'** the answer from each individual respondent to the specific key question can be entered.

In column **'Assessment of information'** remarks can be made about the respondents or their answer to get a better understanding why a particular respondent gave this specific answer.

Once all answers are filled in, they can be compared. If several respondents give the same answer, it can be entered in the column **'Summary of the answer to the key question'**. It is possible that some respondents give two or more different answers. In that case, fill in all these answers. For example, the key question 'substances' might be answered with 'alcohol and sleeping pills'.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Deviant answers that are not shared by several other respondents need to be examined more closely. A case study of the respondent might explain the deviant answer. In column **'Assessment of information'**, remarks can be entered as to why the respondent might have given a different answer. The deviant answer might be a complement to the shared answer. For example, a respondent from the community might describe a particular problem differently than a physician, while both, in fact, mean the same thing. Another explanation for a deviant answer could be that the respondent sees different aspects of reality, for example, a different section of the target population. Finally, differences in moral beliefs, certain preconceptions, and interest in the subject can also play a role in this.

Any remaining deviant answers that can not be explained by the available information can be described in column **'Deviant answers, topics for discussion'**. The items in this column can be studied at a later time, after having gathered additional information (e.g. an additional interview with the particular respondent, or with an expert on the subject). The divergence might be confirmed in the answers given in the structured interviews, or become a topic for discussion in Focus Group I.

6.6.1 GRID A SSI C1 Respondents

Item A: Background information on the respondents, question A1 or A2 from the semi-structured interview (SSI)

Use GRID A SSI C1 Respondents

The set of grids starts with a grid about the respondents. In this grid, background information about the respondent can be entered, in order to better understand the answers and to explain possible deviant answers. To illustrate the grids, we use the example of a Bosnian community in a refugee camp.

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID A SSI C1 Respondents

Item A: Background information

Community: C 1 Bosnian refugees

Respond-ents	Function and background/position	Sources of infor-mation	Remarks
Resp 01	Female, outreach worker	First hand info from target group.	Long career in outreach work, extensive knowledge about substance use in the Bosnian community.
Resp 02	Male, GP	First hand info from target com-munities.	Little contact with target groups, knows much about the use of medicines (sleeping pills, etc.) by the communities in the refugee camp.
Resp 03	Male, social scientist, director of refugee camp	Written material, mainly scientific papers, second hand info from professional workers.	No direct contacts with target group. Overview of all com-munities in the camp.
Resp. 04	Male, Bosnian, spokesman of Bosnian target group	First hand info from target group and community.	Has central position in Bosnian community in refu-gee camp, knows about half of the people in the commu-nity personally.
Resp 05	Male, security officer in refugee camp	First hand info from target com-munities.	Works both day and night shifts in the camp, has good contacts with camp resi-dents.
Resp 06	Et. cetera		
Resp 07			
Resp 08			
Resp 09			
Resp 10			

For filling in the above grid, you should use the answers to question A1 or A2 (background informati-on) from the semi-structured interviews.

In the **'Respondents'** column you can enter the ID number of each respondent.

In column **'Function and background/position'** you can enter background information on a res-pondent, such as profession, gender or any other demographic characteristics that might be of impor-tance.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

In column **'Sources of information'** you can enter from where the respondents obtain their information (first or second hand information from target groups, community or professional workers), and what type of information it is (written material, such as scientific studies, policy papers or mass media).

In the **'Remarks'** column you can enter any relevant data that might help to interpret the answers given by the respondents: what is their experience/knowledge, what kind of (professional) relationship do they have with the community or target group, what is their position within the community or target group.

6.6.2 GRID B SSI C1 Community

Item B: Agreement on problematic substance use in the target community, question 1 from the semi-structured interview (SSI)

Use GRID B SSI C1 Community

The second grid focuses on the question whether the respondents agree that there is problematic substance use in the target community.

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID B SSI C1 Community

Item B: Agreement on problematic substance use in the target community

Community: C 1 Bosnian refugees

Respondents	Agree	Dis-agree	Assessment of information: explain bias
01	X		She knows many people from the Bosnian community in the refugee camp who have problems with substance use.
02	X		There is a GP in the refugee camp. Has several patients who use medicines for sleeping problems; a few use sedatives.
03	X		Respondent is director of refugee camp, has second hand information: problematic substance use was once discussed in a staff meeting in the refugee camp.
04		X	Member of target community. Many medicines are being used, sometimes people get drunk; however, respondent disagrees because not substance use, but the refugee situation constitutes the main problems.
05	X		Respondent is security officer in refugee camp. Sees drunk people in the refugee camp, sometimes there are fights.
06	Etc.		

Summary agreement on problematic use	Deviant answers, topics for discussion
Most respondents agree on the issue of problematic substance use in the Bosnian community	It seems clear that problematic substance use does exist among the Bosnian community in the refugee camp. It is not clear to what extent. Respondents describe the problems from quite different views. The Bosnian respondent says that substance use is not the problem, but the situation people having to face by being refugees.

Use the answers to item B (community), question 1 from the semi-structured interviews.

Enter the respondents' ID numbers in the **'Respondents'** column.

In the next two columns **'Agree'** and **'Disagree'** enter whether the respondent agrees or disagrees.

In column **'Assessment of information'** enter the data that you consider important concerning the respondents who disagree. For background information you can use the completed **'GRID A SSI C1 Respondents'**.

Summarise the extent of agreement among all respondents in the **'Summary'** column.

In column **'Deviant answers, topics for discussion'** enter the possible reason for disagreement. To discover this possible reason, you could try to find similarities in the data entered in the **'Assessment of information'** column. If you are unable to find any similarities, then make a note of it in **'Deviant answers, topics for discussion'**. Disagreement can be a reason for collecting more information.

6.6.3   GRID C SSI C1 Substances

Item C: Key Question - What substances are being used problematically, question 2 from the semi-structured interview (SSI)

Use GRID C SSI C1 Substances

In all the following grids per grid one key question each is answered.

In the next grid, you can enter information from the semi-structured interview on what substances are being used problematically.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID C SSI C1 Substances

Item C: Key Question - What substances are being used problematically?

Community C1: Bosnia

Respondents	Substances	Assessment of information: explanation bias
Resp 01	Alcohol, medicines	Respondent has good insight into the Bosnian community
Resp 02	Sleeping pills, alcohol	As GP, respondent has excellent overview of medicines used in the community. Heard about problematic alcohol use, but has no first hand information. Hasn't had any patients for alcohol problems yet.
Resp 03	Alcohol, medicines	What kind of medicines?
Resp 04	Medicines	Alcohol not mentioned: Respondent is member of Bosnian community. Information might be biased due to cultural factors. What kind of medicines?
Resp 05	Alcohol	Has seen drunk Bosnians every now and then
	Et. cetera	

Summary substances	Deviant answers, topics for discussion
Alcohol Medicines	Get additional information from respondent 4 on the extent and nature of alcohol use by Bosnians. Deviant information might be explained by the fact that respondent 4 does not consider excessive alcohol use as a problem. (Answer might be influenced by the fact that alcohol use is considered normal in Bosnian culture). Find out what kind of medicines respondents 1, 3 and 4 mean; do they also refer to sleeping pills?

Target substances:
S1: Alcohol
S2: Medicines
S3: ……………

Use the answers to item C (Substances), question 2 from the semi-structured interviews.

Fill in respondents' ID numbers in the **'Respondents'** column.

In the **'Substances'** column list the substances mentioned by the respondent in order of importance.

Outline briefly in column **'Assessment of information'** how any deviant information by a respondent might be explained.

In the **'Summary substances'** column enter the substances that most respondents agree upon.

Enter any unresolved questions in column **'Deviant answers, topics for discussion'** and outline what kind of information should still be gathered.

At the bottom of the grid, fill in the selection of substances that will be the further focus of your RAR. As alcohol and medicines were the substances mentioned most frequently by respondents, we have assigned the following codes to them: S1 = Alcohol and S2 = Medicines. Try to limit yourself to a maximum of three target substances. If the target group uses a combination of substances without any of them playing a dominant role, then describe the target substance as 'poly-substance use'. You can define the substances covered by the term 'poly-substance use' in the **'summary'** column. For example, the summary could read: "Many people in the target group are poly-substance users. They mainly use heroin and cocaine, sometimes alcohol or cannabis. Another group mainly uses alcohol." In that case the codes for the selected substances would be: S1 = poly-substance use, mainly heroin and cocaine; S2 = alcohol.

6.6.4   GRID D SSI C1 Vulnerable group

Item D: Key Question - Who is using substances problematically, questions 3 + 4 from the semi-structured interviews (SSI).

Use GRID D SSI C1 Vulnerable group

You can use the next grid for compiling the data from the semi-structured interview on who is using substances problematically. Vulnerable groups can be entered in regard to both alcohol-related problems (S1) and problems related to medicine (S2), i.e. the substances selected in the previous grid.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID D SSI C1 Vulnerable group

Item D: Key Question - Who is using substances problematically?

Community: C1 Bosnians

Respondents	Vulnerable groups + substance	Assessment of information: explanation bias
Resp 1	Single young males, drinking alcohol.	Respondent has close contact with the target community.
Resp 2	Females, using sleeping pills.	Heard about alcohol abuse among men, but has no reliable information.
Resp 3	Single young males, drinking alcohol, and females, especially mothers, using sleeping pills.	
Resp 4	Some people, mostly females, using medicines for sleeping problems, some needing tranquillisers.	Didn't mention problematic alcohol use by single young males.
Resp 5	Single young males, adolescent males cause problems when drunk.	As security officer, respondent is confronted with groups of noisy adolescents.
	Et. cetera	

Summary vulnerable groups	Deviant answers, topics for discussion
Single young males using alcohol, and females using sleeping pills.	Get additional information from respondent 4 on the extent of alcohol use among Bosnian refugees; why does respondent not agree with rest of respondents?

Target Vulnerable groups + substance:
V1: Single young males - problematic alcohol use
V2: Females - problematic use of sleeping pills
V3: …………………..

Use the answers to item D (Vulnerable groups), questions 3 + 4 from the semi-structured interviews.

Enter respondents' ID numbers in the **'Respondents'** column.

In column **'Vulnerable groups + substance'**, list - in order of importance - the vulnerable groups and the substances they use problematically, based on the information by respondents.

Outline briefly in column **'Assessment of information'**, how any deviant information by a respondent might be explained.

In column **'Summary vulnerable groups'** fill in those groups that most respondents agree on being vulnerable.

Enter any unresolved questions in column **'Deviant answers, topics for discussion'** and outline what kind of information should still be gathered.

In the next steps a new set of grids has to be used for each vulnerable group.

6.6.5   GRID E SSI C1 V1 Definitions

Item E: Key Question - What is problematic substance use, question 5 from the semi-structured interview (SSI)

Use GRID E SSI C1 V1 Definitions

In the following grid, you can enter all information from the semi-structured interviews on how respondents describe problematic substance use within the target groups. This grid differs from the former grid, inasmuch as the key question is subdivided into five subjects, with a separate section for each one. Try to define the answers given by respondents according to physical, psychological, social, financial, and law-related problems.

This grid should be used for the different specific vulnerable groups (one for V1, another for V2 etc.).

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search
Suchtprävention
für Flüchtlinge und Asylbewerber

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID E SSI C1-V1 Definitions

Item E: Key Question - What is problematic substance use?

Community: C1 Bosnia

Vulnerable group: V1 Single young males with problematic alcohol use

Definition	Description	Respondent	Assessment of information
Physical	Liver problems	02	Mentioned by GP only
	Injuries	05	Mentioned by security officer only
Psychological	Depression	01, 02, 03	
	Sleeplessness	01	Mentioned by outreach worker only
	Aggression	05	Mentioned by security officer only
Social	Isolation	03, 02	
	Boredom	01, 03, 05	
Financial			
Law			

Summary definitions problematic substance use	Deviant answers, topics for discussion
Physical:	Both liver problems and injuries are mentioned by one respondent only; other respondents don't mention any problems in this area.
Psychological: Depression	Most respondents mention 'depression'; 'aggression' and 'sleeplessness' resp. are mentioned by one respondent only (an outreach worker and a security officer).
Social: Boredom	Isolation is mentioned by two respondents.
Financial:	
Law:	

Target problems
P1: Depression
P2: Boredom
P3: ………………..

Use the answers to item E (Definitions), question 5 from the semi-structured interviews.

Use the **'Definition'** column for a short description of problems in the physical, psychological, social, financial and law-related areas, as mentioned by respondents. Use one row for each specific description. If a respondent mentions more than one physical problem, use a new row. Insert additional rows in the grid, if there is insufficient room.

Fill in the respondent's ID number in the **'Respondent'** column.

Enter an **'Assessment of information'** in this column for each respondent, if necessary.

Summarise the most important problems per item in the **'Summary'** column.

Explain different answers and describe unresolved questions in column **'Deviant answers, topics for discussion'**.

Fill in the three most important problems at the bottom off the grid.

6.6.6   GRID F SSI C1 V1 Factors

Item F: Key Question - What factors are of influence in the development of problematic substance use, questions 6-10 from the semi-structured interviews (SSI)

Use GRID F SSI C1 V1 Factors

The grid for the key question 'what factors are of influence in the development of problematic substance use' has the same layout as the previous grid and should be filled in likewise. This grid too, should be filled in for each specific vulnerable group (V1 or V2 etc.).

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

searCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID F SSI C1 V1 Factors

Item F: Key Question - What factors are of influence in the development of problematic substance use?

Community: C1 Bosnia

Vulnerable group: V1 Single young males with problematic alcohol use

Factor	Description	Respondent	Assessment of information
Differences	In the homeland it is more accepted to drink (large amounts of) alcohol than in the host country	04	Answer by member of target group, who didn't agree on problematic alcohol use in the community.
Homeland	Traumatic experiences from the civil war	01, 02, 03, 04, 05	
	Worries about family left behind in homeland	01, 04	Mentioned by security officer only
Host country	Uncertainty about the future	03, 04, 05	
	Rules in refugee camp too strict	01	
Function/ Benefit	Escapism, forgetting problems for a while	01, 02, 03, 04	
Other factors			

Summary definitions problematic substance use	Deviant answers, topics for discussion
Differences:	
Homeland: traumatic experiences (mentioned by all respondents)	
Host country: uncertainty about the future	
Function/benefit: escapism	
Other factors:	

Main Causes

1 Traumatic experiences

2 Escapism

3 Uncertainty about the future

Use the answers to item F (Factors), questions 6 - 10 from the semi-structured interviews.

In the **'Description'** column, outline briefly the points mentioned by the respondent.
Use one row each for every description made by the respondent. If a respondent makes more than one statement on a specific topic, use additional rows. Insert extra rows in the grid, if there is insufficient room.

Enter respondents' ID numbers in the **'Respondent'** column.

If necessary, enter an **'Assessment of information'** for each respondent in this column.

Summarize the most important factors of each topic in the **'Summary'** column.

Explain different answers and outline unresolved questions in column **'Deviant answers, topics for discussion'**.

Fill in the three most important causes at the bottom of the grid.

6.6.7   GRID G1 SSI C1 V1 Knowledge

Item G1: Key Question - What does the target group know about the risks of substance use, questions 11 + 12 from the semi-structured interviews (SSI).

Use GRID G1 SSI C1 V1 Knowledge

There are four grids for the key questions on prevention.

The first grid on prevention concerns knowledge of the risks of substance use.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search
Suchtprävention
für Flüchtlinge und Asylbewerber

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID G1 SSI C1-V1 Knowledge

Item G1: Key Question - What does the target group know about the risks of substance(s) used?

Community: C1………………………

Vulnerable group: V1 ……………………………………………

Respondent	Knowledge about risks of substance(s) used	Assessment of information

Respondent	Summary knowledge of the target group about risks of substance(s) used	Deviant answers, topics for discussion
Risks		

Use the answers to item G1 (prevention/risks), questions 11 + 12 from the semi-structured interviews.

Enter the respondents' ID numbers in the **'Respondent'** column.

In column **'Knowledge about the risks of substance(s) used'** enter respondents' answers concerning what the target group knows about risks of substance(s) used.

If necessary, make an evaluation of the information for each respondent in column **'Assessment of information'**.

Outline the three most important answers in column **'Summary knowledge of target group about the risks of substance(s) used'**.

Describe **'Deviant answers, topics for discussion'**.

6.6.8 *GRID G2 SSI C1 V1 Existing prevention*

Item G2: Key Question - What are the existing effective preventive interventions / preventive conditions, question 13 from the semi-structured interviews (SSI).

Use GRID G2 SSI C1-V1 Existing prevention

Two other grids with the same layout concern existing and needed prevention. First we examine the grid for existing interventions.

Use the answers to item G2 (prevention / existing), question 13 from the semi-structured interviews.

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID G2 SSI C1 V1 Existing prevention

Item G2: Key question - What are the existing effective preventive interventions/preventive conditions?

Community: C1 ....

Vulnerable group: V1...........................

Respondent	What are the existing effective preventive interventions/preventive conditions?	Priority

Methods	Summary existing effective preventive interventions/preventive conditions
First	
Second	
Third	

Enter respondents' ID numbers in the **'Respondent'** column.

In column **'Existing effective preventive interventions/preventive conditions'**, enter all interventions and conditions mentioned by the respondents.

Describe in column **'Priority'** what respondents consider to be the most effective methods.

Use the **'Summary'** column for filling in the three most important methods (highest priorities) indicated by the respondents.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

6.6.9   GRID G3 SSI C1 V1 Needed prevention

Item G3: Key Question - What are the needed effective preventive interventions/ preventive conditions, question 14 from the semi-structured interviews (SSI).

Use GRID G3 SSI C1 V1 Needed prevention

The grid used for needed interventions is almost the same as that used for existing preventive interventions.

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID G3 SSI C1-V1 Needed prevention

Item G3: Key question - What are the needed effective preventive interventions/ preventive conditions?

Community: C1…………………

Vulnerable group: V1 ……………………………..

Respondent	What are the needed effective preventive interventions/preventive conditions?	Priority

Methods	Summary needed effective preventive interventions/preventive conditions
First	
Second	
Third	

Use the answers to item G3 (prevention/needed), question 14 from the semi-structured interviews.

Enter respondents' ID numbers in the **'Respondent'** column.

In column **'What are the needed effective preventive interventions/preventive conditions'**, enter all interventions and conditions mentioned by the respondents.

Outline in column 'Priority' what respondents believe to be the most effective methods.

In the **'Summary'** column enter the three most important methods (highest priorities) mentioned by respondents.

6.6.10 GRID G4 SSI C1 V1 Priorities in prevention

Item G4: Key Question - What are priorities in preventive interventions/preventive conditions, question 15 from the semi-structured interviews (SSI).

Use GRID G4 SSI C1 V1 Priorities in prevention

The last grid concerns priorities in prevention.

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase

GRID G4 SSI C1-V1 Priorities in prevention

Item G4: Key question - What are the priorities in preventive interventions/preventive conditions?

Community: C1 ....

Vulnerable group: V1 ....

Respondent	What are the priorities in preventive interventions/preventive conditions?	Priority

Methods	Summary priorities in preventive interventions/preventive conditions
First	
Second	
Third	

Use the answers to item G4 (prevention/priorities), question 14 from the semi-structured interviews.

Enter respondents' ID numbers in the **'Respondent'** column.

In column **'What are the priorities in preventive interventions/preventive conditions'** describe the effective preventive interventions/preventive conditions that respondents consider as having priority.

Point out in the **'Priority'** column the most effective methods in the view of the RAR team.

In the **'Summary'** column outline the three most important methods (highest priorities) mentioned by respondents.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search
Suchtprävention
für Flüchtlinge und Asylbewerber

6.6.11 GRID SSI Summary

Once the SSI grids for the key questions have been completed, the columns 'Summary' and 'Deviant answers, topics for discussion' can be transferred to the SSI summary grid. Fill in a separate summary grid for each vulnerable group.

Country:	City:	Contact person:	Date:

SSI – Semi-Structured Interview phase
GRID SSI SUMMARY
Community C1: ....
Vulnerable group and problematic substance(s) V1 : ....

GRID	Key question	Summary	Deviant answers, topics for discussion
B SSI	Community		
C SSI	Substances		
D SSI	Vulnerable group		
E SSI	Definitions		
F SSI	Factors		
G1 SSI	Knoledge of risk		
G2 SSI	Existing interventions		
G3 SSI	Needed interventions		
G4 SSI	Priorities		

The summary grid can be used to define and fine-tune steps to be taken in the next phase. Furthermore, it can be used to compare the results obtained from the key questions in the different phases of the rapid assessment, i.e. with the grid on existing information and the summary grid of the structured interview phase. By comparing these summary grids, the RAR team can draw conclusions and prepare a topic agenda for the focus groups.

7 Structured interviews

7.1 Introduction

At the end of the semi-structured interview phase the RAR team will be able to formulate tentative answers to almost all key questions. Given the time schedule of a rapid situation assessment, the semi-structured interview phase should not last longer than about a month.

These tentative answers to the key questions will be tested during the next phase of the rapid situation assessment, i.e., the structured interview phase.

7.2 Respondents

Respondents for the structured interviews basically do not differ from respondents for the semi-structured interviews; they:

• Are closely connected with the target communities on a professional basis, or
• Have daily contacts with the target communities through their position in the 'normal' infrastructure, or
• Have central positions within the target communities.

Furthermore they:

• Have a good overview of the local situation
• Have a network of people with substantial knowledge of the key questions

During the structured interview phase you might encounter respondents, who can add new elements to the information gathered so far. In that case, the interviewer can decide to collect additional answers in regard to certain key questions during that interview, or even administer a semi-structured interview to gather answers to certain key questions.

7.3 The structured questionnaire

The structured questionnaire used in the 'SEARCH' project is contained as Word file on the enclosed CD-ROM. You can either use it as it is, or adapt it to your specific requirements.

The structured questionnaire consists of the following questions:

M1. Background information on respondent from target community

M2. Background information on respondent involved with target community

N. Vulnerable groups and substances (key questions 1 + 2)
1. According to key informants, substance use is problematic in vulnerable group V1, do you agree?
2. Are most of the problematic users male or female?
3. In what age category will we find the majority of problematic users?
4. Are most of the problematic users here alone, or with their families?

O. Definitions (key question 3)
5. Problematic substance use expresses itself in different ways. Can you estimate, on a scale from 1 - 5, to what extent these problems express themselves in the following areas?

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

P. Factors (key question 4)

6. There may be several causes for problematic substance use. Can you estimate, on a scale from 1 - 5, the significance of these causes for your community?

Q. Prevention (key questions 5 - 8)

7. Key respondents in the semi-structured interviews mentioned several intervention methods that might be useful to prevent problematic substance use among asylum seekers and refugees. Can you estimate, on a scale from 1 - 5, how useful you think these methods are?
8. Can you estimate, on a scale from 1 - 5, the knowledge of the target group about the risks of the substance(s) used?

Structured interviews:

- Are used to check the results and conclusions from the semi-structured interview phase.
- As a rule, use a detailed questionnaire with clearly formulated and ordered questions, most of them consisting of closed questions that allow certain answers only.
- Use the same format for each interview, making it easier to code, analyse and compare data.

You are, of course, free to add or delete questions in the structured questionnaire. However, please keep in mind that the grids described below, are based on the key questions and questionnaires from the 'SEARCH' project. According to our experience, they cover the most relevant issues concerning substance use in the target group and possible preventive interventions.

Keep in mind that before you start an interview a good introduction is essential (see chapter 6.4)

7.4 Administering a structured interview

Although a structured interview can be administered by less experienced interviewers than a semi-structured interview, its scope may be more limited. Due to the strict preset format, interviewers might fail to collect information that presents itself unexpectedly, but is relevant nevertheless. Besides, structured interviews generally will not facilitate the collection of additional answers to key questions, or zooming in on unresolved questions of the semi-structured interview phase.

Before starting the structured interview phase, the structured questionnaire must be tested. Test interviews should be conducted within the RAR team, and preferably include a couple of respondents. The results of these test interviews should be discussed and evaluated during meetings of the team. They may aid you to detect and solve possible problems in the formulation and sequencing of questions.

13 steps to administering a structured interview:

1. Arrive early at the location where the interview is to take place. Try to ensure that the location is as quiet and as free of interruptions as possible.

2. Interpreters - if needed - should be briefed on what is going to happen. If a tape recorder is used, it should have an external microphone and you should have extra batteries and tapes.

3. Introduce everyone present to the respondent. Introduce people in a friendly way. Introduce reasons and aims of the RAR. Assure respondents that everything discussed will remain confidential. Assure respondents that they are the experts and that the RAR team wants to learn from their knowledge, experience and opinion.

4. Use clear and simple language when introducing questions. Allow participants time to think and speak.

5. Sensitive subjects can be introduced by mentioning what 'other' people in the target community are said to be doing in terms of substance use or certain behaviour patterns, and then inviting critical comment.

6. Repeating respondents' answers in their own words is a good method of checking that you understand what they are trying to say.

7. Be a good listener and ask 'why' and 'how'.

8. Check with the respondent that it is acceptable to continue an interview, if it looks as though it may last longer than expected.

9. Always collect demographic information, such as background, function, ethnicity and status. This will be useful in considering the link between certain types of people and specific behaviours.

10. Summarise the key issues and opinions once the interview is finished. Ask if the respondents have any questions. It is important that the RAR team member does not give any advice or answers he/she is not in a position to offer.

11. Ask the respondents if they have anything to add to the questions discussed.

12. Conclude the structured interview by asking the respondents if they know other people who also have knowledge of the issue.

13. Thank the respondents for their contribution.

7.5   Analysing data

The grids you will use for managing the information from the structured interviews are very similar to the ones used for the semi-structured interviews. Use one set of grids for each vulnerable group (V1, V2, etc.). Answers by respondents, taken from the structured interviews (SI), can be entered, summarized and assessed in these grids. Once all grids have been filled in, the summaries on the key questions can be transferred to a summary grid. The summary grid of the structured interview phase can be compared with the summary grid of the semi-structured phase in order to evaluate and check the results. Both summary grids will be used for preparing the discussions of the Focus Groups.

In the following chapters all grids for the structured interview (SI) are outlined. Some grids contain (fictitious) examples on how the grid should be filled in. You can find the original grids on the enclosed CD-ROM.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

7.5.1 GRID M SI V1 Respondent information

Item M: Background information.

Use GRID M SI V1 Respondents

As in the semi-structured interviews you will begin with the grid outlining information about the respondents.

Country:	City:	Contact person:	Date:

SI – Structured Interview phase
GRID M SI V1 Respondents
Item M: Background information
Community C 1: ....

Respondents	Function and background/position	Sources of information	Remarks
01			
02			
03			
04			
05			
06			
Etc			

Use the answers to items M1 + M2 (Background information) from the structured interviews (SI).

Enter respondents' ID numbers in the **'Respondents'** column.

Use column **'Function and background/position'** for a short description of:
• Whether respondent is member of target community or is involved with target community
• Profession
• Age & gender
• Position in target community (for refugees, fill in the answers to questions 4 - 8; for professionals, indicate: 'inside' or 'outside closed setting')

In column **'Sources of information'** enter from where the respondents obtain their information (first or second hand information from target groups, community or professional workers), and what type of information it is (written material, such as scientific studies, policy papers, or information from the mass media).

Use the **'Remarks'** column for noting down any additional information about the respondent's background (such as refugee's ethnicity/religion) you consider important.

7.5.2 GRID N1 SI V1 Vulnerable group

Item N1: Vulnerable groups and substances, question 1 from the structured questionnaire.

Use GRID N1 SI V1 Vulnerable group

This grid helps to check the extent of agreement among respondents on the issue of vulnerable group(s) and problematic substance use, mentioned in the semi-structured interview phase (SSI).

Country:	City:	Contact person:	Date:

SI – Structured Interview phase

GRID N1 SI V1 Vulnerable group

Item N1: Key question - Agreement on vulnerable group(s) and substance(s)

Vulnerable group V 1: …………………….

Respondents	Agree	Disagree	Remarks

Summary agreement on vulnerable group and problematic substance use	Deviant answers, topics for discussion

Use the answers to item N1 (vulnerable groups and substances), question 1 from the structured interview.

Enter respondents' ID numbers in the **'Respondents'** column.

Indicate whether the respondent agrees or disagrees in the next two columns **'Agree'** and **'Disagree'**.

Use the **'Remarks'** column for entering data that you consider important concerning the 'disagreeing' respondents.

Summarise the extent of agreement among all respondents in the **'Summary'** column.

In column **'Deviant answers, topics for discussion'** enter the possible reason for disagreement. To discover this possible reason, you could try to find similarities in the data entered in the **'Remarks'** column. If you are unable to find any similarities, then make a note of it in **'Deviant answers, topics for discussion'**. Disagreements can be discussed in Focus Group I in order to gather more information on the issue.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

7.5.3 GRID N2 SI V1 Demographic features vulnerable group

Item N2: Who is using substances problematically, questions 2, 3 + 4 from the structured questionnaire.

Use GRID N2 SI V1 Demographic features vulnerable group

You can use this grid for entering the demographic features of the vulnerable group(s).

Country:	City:	Contact person:	Date:

SI – Structured Interview phase
GRID N2 SI V1 Demographic features
Item N2: Key Question - Who is using substances problematically?
Vulnerable group V1: ………………………

Respondents	Gender	Age	Alone/ with family	Remarks/possible other vulnerable groups

Summary vulnerable groups	Deviant answers, topics for discussion

Use the answers to item N2 (Vulnerable groups and substances), questions 2, 3 + 4 from the structured interviews.

Enter the vulnerable group concerned.

Fill in respondents' ID numbers in column **'Respondents'**.

Outline demographic features mentioned by respondents in columns **'gender'**, **'age'** and **'alone/with family'**.

Column **'Remarks/possible other vulnerable groups'** is intended for entering relevant information concerning the answers of respondents in the preceding columns and other vulnerable groups.

Under **'Summary vulnerable groups'** outline those demographic features of the vulnerable group that most respondents agree upon.

Enter any unresolved questions in column **'Deviant answers, topics for discussion'** and indicate what kind of information should still be gathered.

7.5.4 GRID O SI V1 Definitions

Item O: What is problematic substance use, question 5 from the structured questionnaire

Use GRID O SI V1 Definitions

During the semi-structured interview phase, respondents have indicated how problematic substance use by a vulnerable group within a community expresses itself (item E, GRID E SSI C1 V1). Three main problems were mentioned. To verify these findings in the structured interview phase, a 5-point scale is used in the questionnaire. Based on this scale you can give an estimate of the importance of these three main problems.

The next grid shows an example for the vulnerable group 'single young males with problematic alcohol use'.

Country:	City:	Contact person:	Date:

SI – Structured Interview phase

GRID O SI V1 Definitions

Item O: Key Question - What is problematic substance use?

Vulnerable group: V1 Single young males with problematic alcohol use

Target problem 1: Boredom		Appraisal of respondents	Remarks
Little	**1**		
	2		
	3	08, 11	
	4	02, 03, 04, 05, 09	
Much	**5**	01, 06, 07, 10, 12, 13, 14, 15	

Target problem 2: Physical damage		Appraisal of respondents	Remarks
Little	**1**	01, 02, 04, 05, 07, 09, 10,12,13,	
	2	08, 14	
	3		
	4	06	Respondent 06 is a security officer, he mentioned injuries from fights as a result of alcohol use.
Much	**5**	03, 11	Both respondents are GP's; they referred to liver problems and memory loss.

Target problem 3:		Appraisal of respondents	Remarks
Little	**1**		
	2		
	3		
	4		
Much	**5**		

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Target problems	Summary definitions problematic substance use	Deviant answers, topics for discussion
1	Boredom: most respondents consider boredom an important problem connected to problematic alcohol use.	
2	Physical damage: 12 in 15 respondents do not consider this an important problem.	Both GP's mention physical damage caused by drinking, such as liver damage and memory loss.
3		

Use the answers to item O (definition), question 5 from the structured interviews.

Next to **'Vulnerable group'** note down (one of) the selected communities.

In column **'Target problem'** fill in the three main problems connected to problematic substance use, as established in the semi-structured interviews (see GRID E SSI V1).

In column **'Appraisal of respondents'** enter the evaluation by respondents on the extent to which the target problem expresses itself. Note down the respondents' ID numbers behind their respective assessment.

You can use the **'Remarks'** column for indicating why you believe a group of respondents gave a deviant assessment. (For example, a couple of respondents estimate the extent of a target problem as 'little', while most others perceive it as 'much').

In the last table **'Summary definitions problematic substance use'** enter the mean value of the respondents' assessments for each target problem; i.e., the total assessment score divided by the number of respondents who made an assessment. The most important problems mentioned can be discussed in Focus Group II and could be starting points for developing prevention strategies.

Use column **'Deviant answers, topics for discussion'** for listing 'target problems' that some respondents assessed very differently than other respondents. These problems could be a topic for discussion in Focus Group I, in order to obtain more data about diverging, conflicting definitions.

seARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

7.5.5 GRID P S1 V1 Factors

Item P: What factors are of influence in the development of problematic substance use, question 6 from the structured questionnaire.

Use GRID P S1 V1 Factors

During the semi-structured interview phase respondents have identified what factors cause problematic substance use. To verify these findings (using the summary grid of the semi-structured interview) in the structured interview phase, a 5-point scale is used for assessing the factors for problematic substance use.

Country:	City:	Contact person:	Date:

SI – Structured Interview phase

GRID P SI V1 Factors

Item P: Key Question - What factors are of influence in the development of problematic substance use?

Vulnerable group: V1: ....

Factor: Differences		Appraisal of respondents	Remarks
Not Important	1		
	2		
	3		
	4		
Important	5		
Factor: Homeland		Appraisal of respondents	Remarks
Not Important	1		
	2		
	3		
	4		
Important	5		
Factor: Host country		Appraisal of respondents	Remarks
Not Important	1		
	2		
	3		
	4		
Important	5		
Factor: Function/ Benefit		Appraisal of respondents	Remarks
Not Important	1		
	2		
	3		
	4		
Important	5		

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

Other factor:	Appraisal of respondents	Remarks
Not Important **1**		
2		
3		
4		
Important **5**		

Summery factors problematic substance use	Deviant answers, topics for dicussion
Differences:	
Homeland:	
Host country:	
Function/Benefit:	
Other factor:	

Use the answers to item P (factors), question 6 from the structured interviews.

Column **'Factor'** lists various causes of problematic substance use (differences between homeland and host country, situation in the homeland, situation in the host country, function and benefit of current drug use, other factors); respondents then decide which of these factors they consider important.

In column **'Appraisal of respondent'** note down the respondents' ID numbers behind their respective assessment.

Under **'Remarks'** explain why you believe a group of respondents gave a deviant assessment regarding the importance of a cause/factor for problematic substance use (for example, a couple of respondents consider a particular cause as 'not important', while most others do consider it 'important'). Your explanation should be based on background information, data sources, etc..

Respondents might identify other causes for problematic substance use. Only if at least five respondents identify the same 'other' cause for problematic substance use, describe the newly identified cause in column **'Factor'**, row **'Other factor'**.

In column **'Summary'** enter the mean value of the respondents' assessments for each cause (as outlined above). The most important causes mentioned can be discussed in Focus Group II and could be starting points for developing prevention strategies.

In column **'Deviant answers, topics for discussion'** list the 'other' causes for problematic substance use, and factors that some respondents assessed very differently than other respondents. These causes could be a topic for discussion in Focus Group I to obtain more information.

7.5.6 GRID Q1 SI V1 Prevention methods

Item Q1: Prevention methods, question 7 from the structured questionnaire

Use GRID Q1 SI V1 Prevention methods

During the semi-structured interview phase respondents are asked to list both existing and needed preventive interventions and preventive conditions to target vulnerable groups, and to set priorities for these groups. The three most important interventions and conditions are summarised in the grid priority (GRID G4 SSI V1) of the semi-structured interview phase and used in item Q of the structured questionnaire (Method 1- Method 3).

To verify the established priorities in the structured interview phase, a 5-point scale is used for assessing the level of usefulness of the preventive interventions and preventive conditions.

Country:	City:	Contact person:	Date:

SI – Structured Interview phase

GRID Q1 SI V1 Prevention methods

Item Q1: Key Question - Prevention methods

Vulnerable group: V1: ....

Method 1:		Appraisal of respondents	Remarks
Not Useful	1		
	2		
	3		
	4		
Useful	5		

Method 2:		Appraisal of respondents	Remarks
Not Useful	1		
	2		
	3		
	4		
Useful	5		

Method 3:		Appraisal of respondents	Remarks
Not Useful	1		
	2		
	3		
	4		
Useful	5		

Summery prevention methods	Deviant answers, topics for discussion
Method 1:	
Method 2:	
Method 3:	

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

se∧R(H
Suchtprävention
für Flüchtlinge und Asylbewerber

Use the answers to item Q1 (prevention methods), question 7 from the structured interviews.

Describe in column **'Method'** the (existing and needed) preventive interventions and preventive conditions, as mentioned in the structured questionnaire.

In column **'Appraisal of respondents'** note down the respondents' ID numbers behind their respective assessment.

Use the **'Remarks'** column for explaining why you believe that a group of respondents gave a deviant assessment on the usefulness of a preventive intervention or preventive condition.

In column **'Summary'** enter the mean value of the respondents' assessments for each method. The most useful methods mentioned can be discussed in Focus Group II and could be starting points for developing prevention strategies.

Use column **'Deviant answers, topics for discussion'** for indicating whether the respondents of the structured interview phase assess useful preventive interventions and preventive conditions very differently than other respondents. If so, differences in the assessments of respondents could be a topic for discussion in Focus Group I to obtain more information.

7.5.7   GRID Q2 SI V1 Knowledge

Item Q2: Level of knowledge about the risks of substance(s) used, question 8 from the structured questionnaire

Use the GRID Q2 SI V1 Knowledge

To get an idea about the vulnerable target group's level of knowledge about the risks of the substance(s) used, we again will make use of a 5-point scale.

Country:	City:	Contact person:	Date:

SI – Structured Interview phase
GRID Q2 SI V1 Knowledge
Item Q2: Key Question - Level of knowledge about the risks of substance(s) used
Vulnerable group: V1: ....

Knowledge risks		Appraisal of respondents	Remarks
Not Informed	**1**		
	2		
	3		
	4		
Well Informed	**5**		

	Summary knowledge	Deviant answers, topics for discussion
Knowledge risks		

Use the answers to item Q2, question 8 from the structured interviews.

In column **'Appraisal of respondents'** note down the respondents' ID numbers behind their respective assessment.

In the **'Remarks'** column you can indicate why you believe that a group of respondents gave a deviant assessment on the vulnerable group's level of knowledge about the risks of substance(s) used.

Enter in column **'Summary'** the mean value of the respondents' assessments (according to the method outlined above). If the knowledge of the target group does not provide enough info, prevention strategies might be considered in a discussion of Focus Group II.

Use column **'Deviant answers, topics for discussion'** for indicating whether respondents of the structured interview phase assessed the level of knowledge of the vulnerable target group very differently. If so, differences in respondents' assessments could be a topic for discussion in Focus Group I.

7.5.8 GRID SI Summary

Once the grids for the structured interviews (SI) have been completed, the columns 'Summary' and 'Deviant answers, topics for discussion' can be transferred to the SI Summary grid. Fill in a separate summary grid for each vulnerable group.

Country:	City:	Contact person:	Date:

SI – Structured Interview phase
GRID SI SUMMARY
Vulnerable group and problematic substance(s): …………………………………………

GRIDS	Key question	Summary	Deviant answers, topics for discussion
N1 SI	**Vulnerable group**		
N2 SI	**Demographic features**		
O SI	**Definitions**		
P SI	**Factors**		
Q1 SI	**Prevention methods**		
Q2 SI	**Knowledge**		

This summary grid can be used for comparing the results obtained from the key questions during the different phases of the rapid assessment. The existing information has also been organised according to key questions and a summary grid was filled in for the semi-structured interview phase. By comparing these two summary grids, the RAR team can draw conclusions and draw up a topic agenda for the Focus Groups.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

sea**R**ch Suchtprävention
für Flüchtlinge und Asylbewerber

8 Focus groups

A focus group consists of a number of individuals who are presented with a list of unresolved issues. Some of these issues, relevant to the expertise and knowledge of the focus group, are then discussed collectively. Participants can be recruited based on their homogeneity (because they share common experience and similar backgrounds), or their heterogeneity (different social position and viewpoint). In both cases they are selected because of their specific skill, expertise or extensive knowledge. Often they are likely to be key informants, i.e. people with knowledge that exceeds their personal experience.

Focus groups are good for producing a lot of information quickly and identifying and exploring beliefs, attitudes and behaviours. They are a useful instrument to formulate hypotheses, check information and find explanations for diverging data. Their major disadvantage is that you have less control than in an interview, that data cannot tell you about the frequency of beliefs and behaviours and that the group may be dominated by one or two participants, who may influence the views of others.

However, you can decide to combine the advantages of a group interview with the advantages of a focus group. In doing so, you would start with a certain question and ask each participant to answer this question individually, not allowing any discussion. Once each participant has answered the question, you start discussing the various viewpoints with the aim to find explanations for differing views.

In the 'SEARCH' project we have decided to use focus groups in the concluding stage of the process with two different aims. One objective was to check diverging or contradicting information received in earlier phases and to weigh the validity of (certain) information; the second was to assess the representativeness/validity of conclusions and discuss the implications of the results for planning and undertaking preventive interventions.

This generally means that you will have to organise two focus groups. Viewing and discussing the information you have obtained in earlier phases may reveal some contradictions in the findings which you can't explain. You can solve this problem by conducting individual interviews with some key informants, but a focus group is usually the better option. Bringing together key informants can provide you with information about the reasons why people hold different views. Maybe this is related to their social position, their political agenda, or - as a result of these factors - simply because people see different aspects of reality.

The next step after having solved these problems is to decide which preventive measures should be taken. Here too, a focus group has proved to be a valuable instrument. Of course you will be able to formulate a number of hypotheses about this issue in team discussions about the information collected in the earlier stages. However, bringing together a group of experts and target group representatives and discussing the results of your RAR concerning adequate preventive responses to the problems found will help to make the plans more solid. To implement interventions successfully it will further help you to obtain the necessary commitments from the relevant individuals.

8.1 How to prepare a focus group

The focus group is a method for collecting data that is not as well-defined in advance as the other methods discussed before. Like these, the focus group is also structured on the basis of key questions, but the actual topics - such as diverging/contradicting information to be settled and prevention activities to be undertaken - depend on the results from the preceding phases. This means that you will have to define the aims and the scope of the focus group.

➠ *Define the aims*

The first step is to define the aims of a focus group. Are there any conflicting findings or conclusions that need to be weighed or cross-checked. If so, you will have to organise two focus groups, using the first group to clarify divergences in your data. The summary grids from the earlier phases of information collection will provide you with this data.

If there are no major divergences you can bypass Focus Group I and limit yourself to a focus group for discussing the implications of your findings for future preventive measures (Focus Group II).

➠ *Define the scope*

It is essential for both focus groups to clearly define their scopes. In regard to Focus Group I, it means that you will have to identify relevant divergent information. This can be done easily, if you filled in the summary columns of the above grids and especially the columns for registering deviant answers and topics for discussion. Here the summary grids might be particularly useful. Also to identify relevant propositions for preventive interventions in Focus Group II, the grids from the preceding stages will provide the necessary information. You can take this information from the grids in which you have filled in and summarised the information collected on prevention activities.

In defining the scope of a focus group you will have to keep in mind the amount of time available to you. This again will depend on the kind of people you are intending to invite. How much time can you ask of them? Are they used to participating in this sort of thing? How much time do you or does your team have? There are no clear guidelines on how long a focus group should last. In general, it is advisable to limit a session to four hours, including breaks. Should you need more time, you can choose different options, such as splitting up the focus group in separate sessions to be held on different days. You can also opt for a one-day meeting. In this case the agenda should not only have a clear structure, but also include a number of breaks (coffee or tea breaks in the morning and afternoon and a lunch break around noon, preferably with food included).

The maximum amount of time available will set the framework for limiting the aims of the focus group. This should be done after first having prioritised and organised the topics of discussion.

➠ *Choose the format*

The next step is to choose the format. Do you merely want to discuss the selected topics, or do you want to start off with the participants stating their viewpoints. The latter might be an interesting option for Focus Group I when discussing diverging opinions. After having heard and noted down the different views, you can try to establish the underlying reasons for these views in a discussion. To avoid participants influencing the answers/statements of others, you might even opt for collecting the individual responses to the selected topics in advance (in writing or during a personal talk). You can inject these personal viewpoints into the Focus Group when introducing a topic.

➠ *Select the participants*

For Focus Group I you should recruit those individuals who provided the diverging or contradicting information, thus representing different viewpoints. You could also select key informants with knowledge about the background of the different viewpoints.

As regards Focus Group II, you should select individuals already known to you from the RAR process as having relevant knowledge and ideas about preventive interventions.

Keep in mind that the number of participants in a focus group should be limited to allow for an effect-

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

ive discussion, in which everybody has the opportunity to speak. From our experience, we would suggest to keep the size between 6 and 10 participants.

➡ *Draw up the agenda*

After having selected the issues you would like to deal with in the focus group, you should draw up a clear topic agenda. There are different ways to structure topics. You can decide on a logical sequence, e.g. by following the order of the key questions. However, you can also proceed from very important to less important topics. The decisive criterion will usually be: what information is absolutely essential and what is important, though not vital. Sometimes it might be wise to choose a mix of complex and less complex questions to avoid participants having to face a series of difficult discussions. The person chairing the session will have to make sure that discussions are not getting too time-consuming and therefore tiring for the participants. You should keep in mind that reaching a consensus is not your primary aim.

Based on the list of topics you should also prepare a preliminary timetable to make sure that you will be able to deal with all the topics you have selected. The number of topics to be discussed and the amount of time available (see 'Define the scope') provide the framework for setting the time period you allow for each topic. The person chairing the session has to ensure that people stick to this timetable.

Naturally you should make sure that there is sufficient time available for discussing each topic. If you anticipate that there may be too many items to cover in a 4-hour or a 1-day session, you will have to cut down on the number of topics, or decide to hold more sessions.

➡ *Prepare the logistics*

Preparing a focus group also includes preparing logistics, such as:
- The choice of location. It should be as neutral, comfortable and accessible to participants as possible. Moreover, you should be certain that you can have a meeting free of interruptions.
- A tape recorder can be a helpful tool (not forgetting extra batteries, tapes and labels to number the tapes); however, only if participants consent to being tape recorded.
- A blackboard, whiteboard, or paper and pens can be helpful for taking notes to remember points discussed earlier and structure the results of the discussion.
- A moderator to participate in the focus group and encourage participants to talk about interesting and relevant issues.
- A note-taker to observe and record significant verbal and non-verbal details.
- Lastly, you should ensure that participants are informed about the meeting and invited in good time.

8.2 How to run a focus group

When actually running a focus group you should proceed as follows:
- At the very start of the session warmly welcome the participants (thank them for coming) and introduce yourself, possible colleagues, and their functions (chair person, note-taker, etc.).
- Inform participants about:
    - The purpose of the focus group, and what you would like to gain from it;
    - Agenda and timetable;
    - The procedure, if you haven chosen a mix of group interview and focus group;
    - Rules of behaviour. These include that only one person should speak at a time, and that people should not interrupt each other. Emphasise that you are interested in everyone's view,

that each participant's contribution is valued and that everyone will get a chance to speak;
- How information will be treated and used. Naturally it is of vital importance to stress that all personal information will remain absolutely confidential.
• Allow participants to introduce themselves.
• Listen well and, if necessary, ask for clarification.
• Do not express your own opinion on a topic.
• Summarise the preceding discussion at appropriate points.
• Encourage passive participants to speak and curb the enthusiasm of overly dominant participants. This can be done by addressing passive participants directly, like asking them for their opinion. You could also interrupt overly dominant participants by simply stating that you would like to hear the view of other people on a certain issue. Or you could ask all participants to speak, one after the other. However, structuring a focus group along those lines makes the whole thing somewhat schematic, thereby frustrating the discussion that might reveal additional - sometimes even non-verbal - information about the relationship (likes/dislikes) between participants.
• Allow sufficient breaks for refreshments.

8.3 How to manage the information

To ensure that you keep track of all the relevant data revealed during the discussion, the following points can be helpful:
• Record the discussion (including the introduction of participants). So as not to overlook or lose important information, you preferably should work with one person chairing the session and another person taking notes;
• Make (additional) notes of especially relevant statements (when using a tape recorder include date and tape number);
• Keep a list of participants;
• Fill in the focus group grids.

GRID Focus Group I

Key question	Unresolved topic in key question	Priority on agenda	Discussion, implications and suggestion for prevention

After the structured interview phase, any unresolved topics concerning the key questions will be discussed in Focus Group I. Enter the key questions in the left column and important unresolved topics concerning the key question in column **'Unresolved topic in key question'**.

If a lot of unresolved topics remain at the end of the structured interview phase, it will not be possible

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

to discuss all of them in Focus Group I. An agenda will therefore have to be drawn up, listing the most important ones. Enter in column **'Priority on agenda'** the unresolved topics you want to discuss first, second, and third, etc..

In column **'Discussion, implications and suggestion for prevention'** enter the main conclusions drawn from the discussion of the unresolved item.

GRID Focus Group II

Key question	Main conclusion	Priority on agenda	Discussion, implications and suggestion for prevention

---

Once the structured interview phase is completed, the main conclusions drawn about key questions and the implications and suggestions for preventive interventions will be discussed in Focus Group II. List the key questions in the left column and the main conclusion drawn in column **'Main conclusion'**.

It will probably not be possible to discuss all conclusions in Focus Group II. An agenda will therefore have to be drawn up, listing the most important conclusions to be discussed. In column **'Priority on agenda'** enter the conclusion you want to discuss first, second, and third, etc..

In column **'Discussion, implications and suggestions for prevention'** enter the most important implications and suggestions for preventive initiatives.

8.4   How to analyse and weigh the results

The final step will consist of analysing and weighing the results of the focus group. This will be the subject of an extensive discussion within the RAR team. The following points are part of this exercise:
- Play back the recording and discuss its content with colleagues. If this is too time-consuming, you can base your discussion on the written summary notes taken during the focus group and consider to select certain parts from the recording (using the notes of especially relevant statements as a guiding tool).
- Seek explanations for diverging answers:
  - Interests connected to profession or position of participants
  - Political or ideological viewpoints
  - Cultural differences
- Look for arguments or sources supporting the different answers

- Look for arguments or sources that moderate different answers
- Try to reach a consensus with your colleagues on:
  - A summary of key points
  - Possible weaknesses in the way the focus group was conducted
  - Possible issues missed in the discussions
  - Issues previously not considered
- Decide if you need further information or discussion

9. Reporting

The concluding phase of the RAR process consists of compiling a report in which the findings and conclusions of the rapid assessment are outlined.

An important point to begin with is defining the report's target audience. In most cases the report is likely to be written for:
- People working with refugees, asylum seekers and illegal immigrants
- Health care workers, drug services staff, and drug prevention workers
- Policy makers

Reporting on a project is not an easy task, but we have tried to make things easier for you in three different ways, namely:
- The strictly ordered RAR process, consisting of different stages of data collection that are based on each other, can serve as a basic structure of your report.
- Key questions are determined in order to define the problem and structure the collection of data. You can use these key questions to structure reporting, possibly subdivided into phases of the assessment.
- Grids are designed to order all data collected.

Nearly all grids for processing and analysing data of the RAR process are designed in a similar way. At the bottom of all grids we have created two boxes, both for answers to key questions and context information:
- A box for summarising (preliminary) conclusions
- A box for listing gaps, unresolved problems, deviant answers and so forth.

After each consecutive phase of the RAR process, answers to key questions will become more reliable and clearer. Summary grids are designed for those phases of the RAR process in which most of the data will be collected, namely in the semi-structured and structured interview phase. A summary grid provides an overview of the preliminary conclusions about all key questions and an overview of any deviant answers by respondents.

In the course of the assessment your compilation of context information will become more complete and the boxes for 'gaps' in these grids will gradually become emptier.

Additional information from key informants and respondents will help you to fill these gaps, provide more clues to key questions, as well as explain unresolved problems and deviant answers. Last but not least, you have Focus Group I as a tool for tackling the rest.

Listing all summary boxes and summary grids at the end of the RAR process will serve as a solid framework for a draft report on the rapid assessment.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

SeARCH
Suchtprävention
für Flüchtlinge und Asylbewerber

When writing a first draft report you should not aim at perfection immediately. A first draft serves as a base for brainstorming and discussion in the team before preparing the second version. After the team has discussed the second draft of the report, it is recommended to let readers from outside, e.g. a number of key informants, comment on it.

In the 'SEARCH' project, each team in the six countries wrote preliminary reports after every phase of the RAR process, starting after the completion of the access and sampling phase. A final report was compiled once the focus groups had been organised.

Writing preliminary reports may seem like a great deal of extra work, but a lot of intensive discussions and brainstorming about preliminary reports in team meetings helped the teams to compose the final reports. Confining yourself to short draft reports and using the summary boxes and grids will help you to limit the time you invest in this task.

A RAR team may naturally decide to produce only the final report and do without preliminary reports. Depending on the amount of time available for conducting the rapid assessment, this could certainly be a valid option. If no preliminary reports are prepared, at least the summary boxes and summary grids with answers to key questions and the summaries of context information and gaps should be discussed intensively in team meetings at the end of every phase. This is necessary for defining the details of the next phase, but compiling reports of these discussions can also help to write a final report about the rapid assessment.

When writing the report, consider the following:
- It involves a lot of hard work. Do not wait for inspiration. Try to write every day.
- Take breaks during the writing process. Breaks are perfect for relaxing and organising your thoughts.
- Stop writing in the middle of a sentence, paragraph or chapter, or after having roughly formulated your next thoughts. When you continue writing the following day, it will be easier.
- When you have finished one chapter of the draft report, start writing the next chapter. You can add ideas and thoughts to the finished chapter directly, but you should modify chapters only after you had a chance to let them 'sink in' for a day or two.

The final report of the rapid assessment ultimately serves as a basis for the next and most important phase of the RAR process: developing prevention and intervention methods for vulnerable target groups among refugees, asylum seekers and illegal immigrants. It will, in fact, include the first step to intervention strategies by presenting the results of Focus Group II.

The aim of the RAR process is not to produce a thorough scientific study or a literary essay, but to react rapidly to an acute problem previously unmapped. The RAR team should therefore make an assessment of a problem that is understandable for the audience and involves and stimulates people, who can play a role in developing and realising intervention strategies.

sear(h
Suchtprävention
für Flüchtlinge und Asylbewerber

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

Annex 1 Observation

Introduction

To identify key informants and respondents in closed settings, but especially in open settings, members of the RAR team will have to visit the setting frequently. Observations made during these visits can provide data for answering or triangulating key questions and context information.

An observation is data collected by watching and listening to what is happening in the settings frequented by members of the RAR team. Observations can be structured or unstructured. Discoveries made while moving around in a setting to identify key informants, or while on the way to interview a respondent, are unstructured observations.

Observations can be useful in all phases of a rapid assessment. In the beginning, observations can provide valuable information for mapping. This can include identifying locations where the target group meets and where key informants 'hang out'. Mapping can also help you to get a picture of the relationship between different members of the target group and between the target group and the community. Mapping will help you to distinguish between normal and unusual events. Observations might further help you to gain access to the target group and identify key informants. During the middle and final phases of the rapid assessment, observations can prove useful to validate, check and cross-check findings.

One thing you will have to keep in mind is that there are settings and situations in which observations are not appropriate. One of the most important restrictions, of course, is that you have to respect people's private space. This is not only limited to someone's private home or room. Certain public spaces like a bar, or even a corner in a square or park, can be regarded as the private domain of a certain group. Entering these private domains, observing people in these areas is only possible, if these people - implicitly or explicitly - give their consent.

Partly in connection with this ethical limitation of observation you will also have to make sure not to endanger the safety and security, both of the people observed and the observers. Entering the territory of a group of illegal immigrants and collecting information on substance use by observing, for instance, could expose these people to the risk of arrest and expulsion. On the other hand, entering a private domain without approval of the 'occupant' could endanger the safety of the intruder.

Unstructured observations are useful in the early phases of a RAR process, when background data on the local area and behaviours is being collected. They should not exclude any prominent features, but should also avoid concentrating on any one aspect. These observations can then be classified and coded after the event according to relevant themes. Unstructured observations are useful for highlighting behaviours which neither the researcher, nor the participants were initially aware of.

Structured observations are undertaken when the team has decided what data is most relevant for the RSA. There are three specific forms of structured observations:
• Extended observations
• Time point observations
• Spot checks

➠   ***Extended observations***

Sometimes you might want to make ongoing observations of a particular event or site. For example, you might want to monitor the types, behaviours and interactions of members of a target group at a location where they regularly hang out. You could then decide to observe this location for a number of hours to check if and how the gathering at this certain place changes over time, who is related to whom, etc..

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

seaRCh
Suchtprävention
für Flüchtlinge und Asylbewerber

➡ *Time point observations*

Another useful approach to monitor behaviour over a period of time consists of time point observations. These can be a good alternative for the rather time-consuming extended observation. Time point observations means monitoring behaviour for a certain period of time at predefined intervals. You can, for example, make observations for 60 seconds every 10 minutes, for 10 minutes every three hours, or twice a day for a week.

➡ *Spot checks*

Doing a spot check means checking what is happening at a certain location at irregular times. These are generally one-off observations. Usually the researcher will arrive unannounced at a particular site, perform the check and leave.

➡ *Demonstrations*

Some acts and events that take place in certain settings will be very hard to observe, but are essential for the rapid assessment. People from Somalia chew khat and people from Iran smoke opium in private rooms or settings that are inaccessible to outsiders. The only way to collect data about these acts, events and behaviours, is to ask people for a real life demonstration.

Demonstrations have proven successful in identifying possible health risks involved in injecting drugs. In studies on the risks of Hepatitis C infection, researchers asked IDU's to demonstrate the preparation of a 'shot' in order to identify what risk behaviours are involved that might cause infection with Hepatitis C.

Demonstrations are useful as the researcher can:
- Ask for certain stages of the act to be repeated or explained, thus allowing detailed note-taking and the avoidance of misunderstandings.
- Have a good visual view of the process. If this is not the case during an observation, certain behaviours or activities are likely to be overlooked by the researcher.

However, demonstrations always hold a risk that the people observed might behave differently than they would otherwise under normal, unobserved circumstances. People might try to behave in a way which they think is expected of them. Using demonstrations successfully therefore requires a relationship of trust between the observer and the observed.

Recording, managing and analysing data from observations

Observations - especially structured ones - are often carried out with the use of an **observational guide** to indicate what should and should not be observed, and/or a **record sheet** for recording the presence of a certain behaviour and its frequency. For all observations - structured and unstructured - you should use **field notes** (the researchers' written description of what they have observed). Finally, **tape recordings, video recordings, and photographs** can be useful records of observations, as long as they are acceptable to those being observed.

When recording observations, for example in the form of field notes, you should include the following information:
- Settings - Where does the observation take place? What is the physical layout? What kind of objects are present?
- People - Who is present? What type of people are they? Why are they there?
- Activities - What is going on? What kind of activities are the people involved in?

- Signs - Are there any 'clues' which provide evidence about meaning and behaviour?
- Acts - What are people doing?
- Events - Is this a regular occurrence? Or is it a special event, such as a meeting or a disagreement?
- Time - In what order do things happen? Is there a reason for this?
- Goals - What are people trying to accomplish?
- Connections - How do people know one another? Is their relationship social or business-related? Does the relationship change over time?

A field note should start with the date and time of the observation, the setting where the observation is carried out, and the name of the observer. All field notes should be kept in a log, either analogue or digital. This log should be accessible to every member of the RAR team.

One of the pitfalls of observations is that they can produce biased data. An observer in a setting always has a selective view or influences a setting simply by being there. Biases can be limited to a minimum by:
- Writing down field notes immediately after observations. The longer an observer waits with converting observations into field notes, the less likely it is that field notes are accurate and clear. During an ongoing observation, members of the RAR team could jot down 'memory joggers' in little notebooks, on receipts, bus tickets, beer mats and the like. If no scrap of paper is available at all, realise that your body can serve as an excellent notebook alternative: the back of your hand, the inside of your arm, etc..
- Being as neutral as possible when translating observations into field notes. Avoid making colourful characterisations, interpretations and opinions in field notes.

In team meetings the RAR team discusses the collected field notes and feeds them into grids, i.e., record sheets to aid you to systematically analyse and write down your observations. Field notes are fed into observation grids for key questions and into observation grids for context information All observation grids for key questions have the same structure and are made up of two columns:

GRID Observations

Key question:

Observation code	Information

Summary of answer to key question

In column **'Observation code'** the RAR team fills in date, time, setting and name of observer.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search Suchtprävention
für Flüchtlinge und Asylbewerber

Relevant information from the field notes is entered in column *'Information'* by the RAR staff in team meetings, in order to answer the key question. Keep in mind that a field note could provide answers to more than one key question. If the RAR team gathers a large amount of observations on more than one vulnerable group in more than one community, the team could decide to fill in different observation grids per key question for each vulnerable group or community. However, as the assessment has to be carried out quickly, we suggest sticking to one observation grid for each key question.

Column *'Summary of answer to key question'* is used for outlining preliminary answers to key questions. As rapid assessment is an ongoing process, observation grids can be adjusted after every phase of the assessment. We suggest summarising observations after the access and sampling phase, the semi-structured interview phase, and the structured interview phase. If data on key questions in your field notes differs from data obtained in interviews, you can ask the respondents of the semi-structured - but also of the structured - interview phase to explain these discrepancies. If that check does not solve the discrepancy, you should consider putting the unresolved key question on the agenda of Focus Group I.

For processing field notes into context information, you can use the same grids as shown in chapter III.3.

GRID Context information
Topic:

Source	Information	Relevancy for RAR

Summary		Gaps

Use the *'Source'* column for inserting the observation code: date, time, setting and observer's name.

In column *'Information'*, enter relevant data from field notes to describe and understand the context. Keep in mind that one field note can provide answers to more context information issues.

In column *'Relevancy for RAR'* the RAR team can enter its evaluation as to the implications of this specific context information for the phase following the completion of the rapid assessment: developing new prevention and intervention initiatives or adjusting existing ones.

The *'Summary'* column can be used by the RAR team for summarising the context information on the issue.

In column *'Gaps'* the RAR team can decide what aspects of the issue are still unresolved and require special attention during the remainder of the rapid assessment. As RAR is an ongoing process, context grids can be adjusted during every phase of the assessment.

Annex 2 Estimation techniques

Estimation techniques are useful instruments to assess the size of a population or scale of a problem. This will be valuable information for planning and designing interventions, i.e., what types and what scale of interventions are needed. In making estimates over time, estimation techniques are also useful for monitoring the size of a population and the scale of a problem. This information can be used to set and adapt priorities for intervention strategies. But it also can help to identify changes and trends, such as new groups of illegal immigrants involved in substance use, or changing patterns of substance use.

The basic principle of estimation techniques is that a limited number of known cases is used to estimate the total number of cases. This can be done on the basis of existing data, such as client registration data of drug agencies, or based on data collected for undertaking the estimation, or on a mix of both.

In their manual on RAR, Stimson, Fitch and Rhodes (Stimson et al 1998a) include the following estimation techniques:
• Case finding
• Multiplier technique
• Nomination technique
• Capture-recapture technique

Except for case finding - which is, in fact, nothing more than case counting - estimation techniques make assumptions combining (existing) quantitative data on the extent of a certain phenomenon.

Estimation techniques have proven especially useful in gaining insight in the size and problems of so-called hidden populations, such as illegal immigrants using (illicit) substances, one reason being that it is not possible to select a representative sample from this population. In general access is only possible to reported or registered cases taken from police, social and health services. These figures tend to underestimate the real size of the target population.

➡ *Case finding*

Case finding results in a rough assessment of the prevalence of unique individuals 'visible' during a particular period of time in a particular region. It is, in fact, not an estimation technique. It simply means counting the visible individual cases at a certain time in a certain region. You can improve the quality of the data through so-called multi-source enumeration, i.e., counting the cases of illicit substance use by refugees from refugee camps, drug treatment services and police.

When applying case finding, you should keep in mind, first and foremost, that you will not be able to cover 100 percent of all cases. When using multi-source enumeration you will have to make sure that you are not double-counting. Not counting cases twice is only possible if you have unique personal identifiers, e.g. unique personal codes, at your disposal. The latter naturally involves the risk of breaching confidentiality.

➡ *Multiplier technique*

The multiplier technique entails making assumptions about the proportion of cases in a population that experiences an event in a particular period of time (such as an overdose, imprisonment, death). This is the so-called ***multiplier***. In addition you are using a benchmark, i.e., the number of such events that are known to occur.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

search
Suchtprävention
für Flüchtlinge und Asylbewerber

For example, a **benchmark** could be the total number of the population using illicit substances, who was in treatment at some point during the year in question, say 3,000 people. A **multiplier** could be an estimate from a sample survey of the proportion of the population using illicit substances, who was in treatment that year, say 20% (one fifth). If the benchmark-multiplier calculation were to be applied to these figures, the overall size of the population of illicit substance users would be estimated as: 3,000 X 5 = 15,000.

The benchmark is generally taken from existing data sources. Of course you should select data sources which have proven to be reliable. The multiplier can either be taken from existing research or from a study specifically undertaken for this estimation. You should be sure, of course, that this data is reliable.

Of course, using several benchmarks and multipliers will make the estimation more robust.

Finally, you can use the result from applying a multiplier technique as the basis for further calculation. For instance, if the finding from another study suggests that about 13% of illicit substance users are involved in drug-related crime at least once a year, you can estimate that 13% of the earlier estimated 15,000 are involved in drug-related crime, i.e., about 1,950 people.

➡ ***Nomination technique***

The nomination technique works along similar lines. It consists of estimation methods based on information given by individuals in a sample about their acquaintances. Sample members are, for instance, asked to enumerate drug-using acquaintances and to indicate whether these acquaintances have been in contact with drug treatment centres, health services or any other similar body within a certain period of time. The proportion of substance users in treatment, as nominated by the sample, is then used as a multiplier - as described above - in conjunction with the benchmark of known attendance figures at the drug treatment agencies in order to arrive at an estimate of the total number of substance users.

For example, if a substance user were to indicate in an interview that an average of three of his/her friends underwent treatment in the past 6 months and had 10 drug-using friends, then the proportion of drug users attending treatment would be 30%. If it were known that 3,000 people in the area attended treatment in the past 6 months, then the number of drug users in the area would be estimated at 10,000, as 30% of the total population is 3,000.

➡ ***Capture-recapture technique***

Capture-recapture technique is the most reliable estimation technique and therefore also widely used in empirical research, among other things to estimate the size of drug-using populations.

It involves 'capturing' a random sample that is "marked" in some way (let's say n1). Subsequently, a second random sample is 'recaptured' (n2) and the number of marked people from the first sample (m) observed. The ratio of marked people m to the recaptured sample size n2 is assumed to be the same as the ratio of the first captured sample n1 to the total population. This is expressed as (n1 / m) x n2 = N (total population).

		Sample 1		
		Present	Absent	
Sample 2	Present	M		n2
	Absent		–	
		n1		N (estimated)

For example, in a certain city researchers estimated the total population of street-based sex workers. Key informants were recruited to distribute a set of cards to each sex worker they contacted during a 24 hour period; this was the first 'capture' (n1 = 100). These cards provided details about local services and safer sex practices. Seven days later the key informants returned to that location and distributed more of these cards to sex workers there; this was the second 'capture' (n2 = 70). They also asked the sex workers, whether they had previously received a card. Those who had received a card were recorded by the key informants; this was the 'recaptured' sample (m = 20).

From this, researchers calculated that the total number of sex workers in the area was:
(100 / 20) x 70 = 350

		Sample 1		
		Present	Absent	
Sample 2	Present	20	50	70
	Absent		–	
		100		350

For effective two-sample capture-recapture studies it is important to:
- Cover different angles of substance use (health-related and legal aspects, etc.).
- Take two samples from different sources.
- Consider representativeness and homogeneity of the samples in relation to the population being estimated.
- Consider in which direction biases may occur, i.e., if samples are not independent then estimation will over-estimate the true population.
- Use a limited time period and geographical area.
- Use an equivalent definition of the target population in all samples (in relation to substance use, age range, geographical area and time period).
- Consider the adequacy of the identifier for individual matching.
- Calculate rates: the reference population should be taken consistently according to age range, geographical area and calendar year.
- Compare the resulting estimate with other prevalence information.

Remarks

Estimation techniques are useful instruments, but should be handled with care. There are stringent requirements that have to be complied with in order to obtain reliable outcomes. When you use a multiplier or capture-recapture technique you have to be / make sure:
- That you can avoid double-counting, meaning you have to find a controllable way to record personal data without violating the confidentiality of information collected and/or interfering with the privacy of the target group.
- That the two samples you are taking are independent of one another, e.g. by comparing information from community health services with data from refugee support or interest groups.
- That there is an equal likelihood of each member of the population being sampled on each occasion. This is not easy to guarantee, but the least you can do is to reduce a possible bias by checking - in case you are taking one sample from a health service - whether this service is visited or avoided by a certain sub-population.
- That the population is stable while you are taking the sample. This can be done by limiting the period and the geographical area.

Rapid Assessment and Response (RAR)
Guide on Problematic Substance Use Among Refugees, Asylum Seekers and Illegal Immigrants

se∧RCH
Suchtprävention
für Flüchtlinge und Asylbewerber

A critical review with colleagues, key informants and people with research experience of possible biases in the samples is therefore of vital importance.

Finally, you should never forget that what you get is an estimate, i.e., an indication about the size of a population. This is something people often tend to forget, and they show or read these figures as representing reality. Especially when working with politically sensitive issues where figures could be misused for dubious political purposes and as a result affect people in negative ways, one should either be very conscientious, carefully employing the estimation techniques and taking even more care when presenting the results, or leaving quantitative estimates aside. The extent of substance use among asylum seekers and refugees is one of the subjects where an extremely careful approach is a must. If you have the slightest doubt about the quality of your estimates and if you cannot guarantee that the information you provide will not be misused, then you should refrain from assessing the target population.

References

BRAAM R, DUPONT H, VERBRAECK H (1999)
Asielzoekers en middelengebruik.
Utrecht / Hilversum Centrum voor Verslavingsonderzoek & Jellinek Gooi en Vechtstreek

BURROWS D, TRAUTMANN F, FROST L, BIJL M, SARANKOV Y, SARANG A, CHERNENKO O (2000)
Processes and outcomes of training on rapid assessment and response methods on injecting drug use and related HIV infection in the Russian Federation.
International Journal of Drug Policy 1-2 11, 151-167

RHODES T, FITCH C, STIMSON GV, SURESH KUMAR M (2000)
Rapid assessment in the drugs field.
International Journal of Drug Policy 1-2 11, 1-11

STIMSON GV, FITCH C, RHODES T (1998a)
Rapid Assessment and Response Guide on Injecting Drug Use: Draft for Field Testing.
Geneva WHO

STIMSON GV, FITCH C, RHODES T (1998b)
The Rapid Assessment and Response Guide on Substance Use and Sexual Risk Behaviour: Draft for Field Testing. Geneva: WHO/UNAIDS, 1998.
Geneva WHO

STIMSON GV, FITCH C, RHODES T (1998c)
The Rapid Assessment and Response Guide on Psychoactive Substance Use and Especially Vulnerable Young People: Draft for Field Testing.
Geneva WHO

TRAUTMANN F AND BURROWS D (2000)
Conditions for the effective use of rapid assessment and response methods.
International Journal of Drug Policy 1-2 11, 59-61

Websites

An excellent start to collect existing and context information is to search the internet. In most European countries there are web sites of both national GOs and NGOs focusing on the problem.
International internet sites to find general information about refugees, asylum seekers and illegal immigrants are:
www.unhcr.ch: the official web site of the UN organization for refugees. Here you can find international conventions and agreements, general statistics, definitions of and policies on asylum seekers, refugees and (illegal) immigrants.
www.ecre.org: the European Council on Refugees and Exiles. Here you can find general statistics, policy and research, recent newspaper articles and a lot of links to other web sites.

Note

The questionnaires and grids mentioned and partly introduced in the text can be found in Microsoft Word formate on the attached CD-Rom (in RTF formate). They can be downloaded and adapted to specific requirements.