

# PREVENTION IS POSSIBLE

January 2020



# Evidence Based Primary Prevention

The Icelandic Model

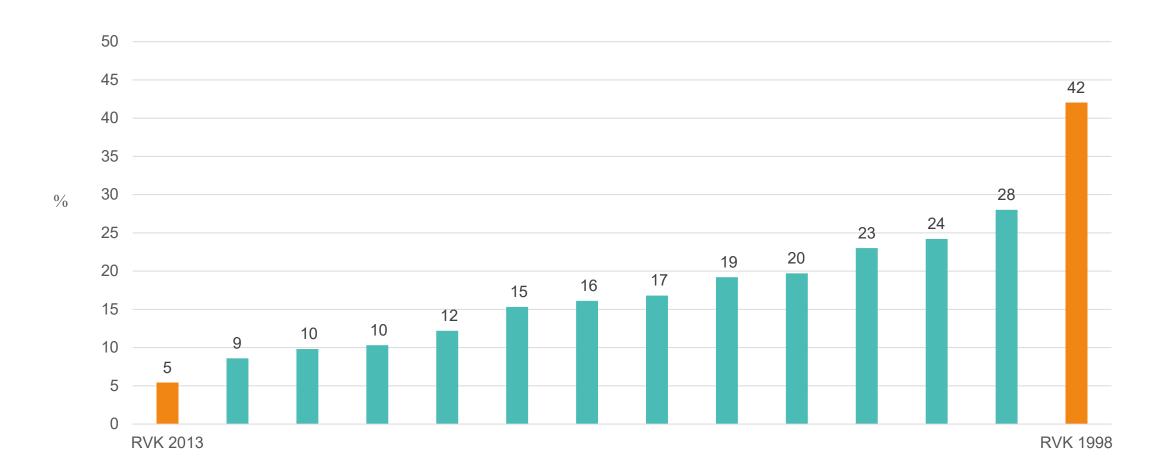
JonSigfusson ICSRA



## Introduction

## 15-16 year old who have become drunk past 30 days in some European cities 2017







# Iceland knows how to stop teen substance abuse

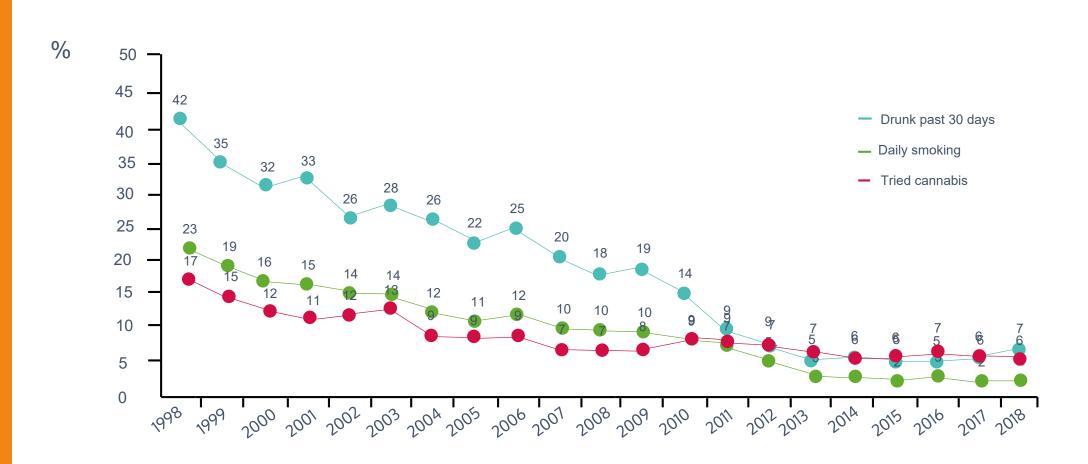
But the rest of the world isn't listening



From highest to lowest in substance use – 15/16 year old students

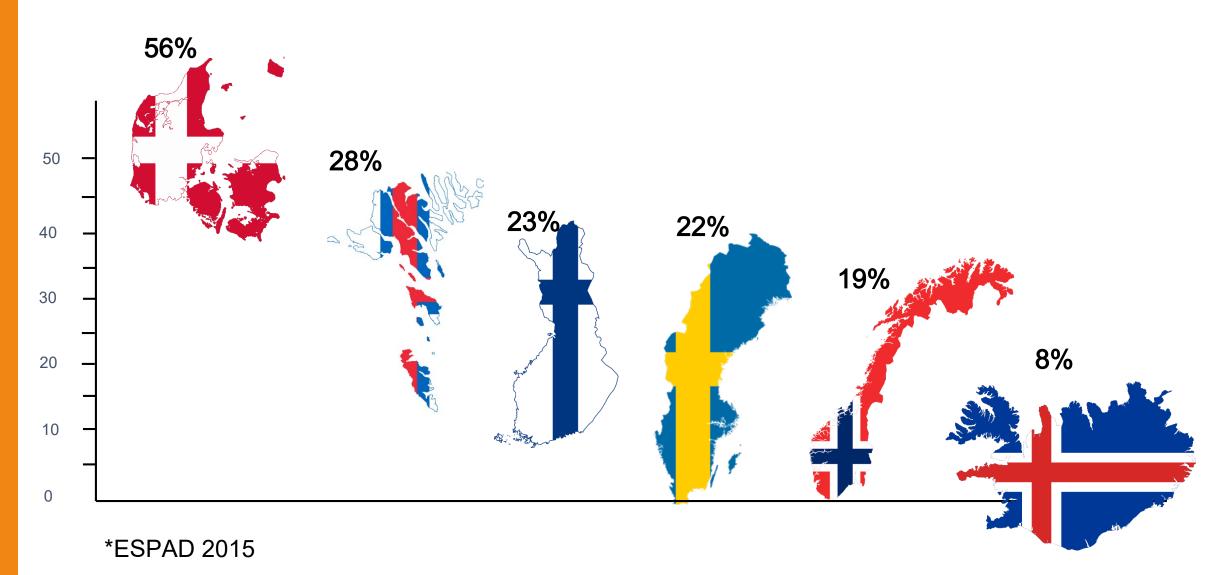


### Based on the Icelandic Prevention Model



### Heavy episodic drinking in the last 30 days\*

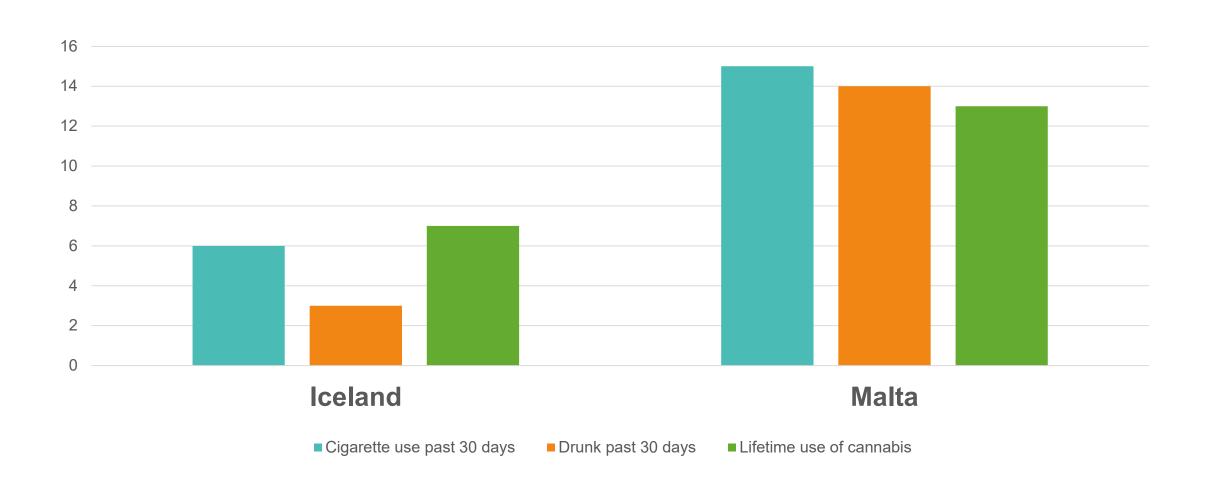




### Substance Use Amongst European Youth



(ESPAD, 2015)

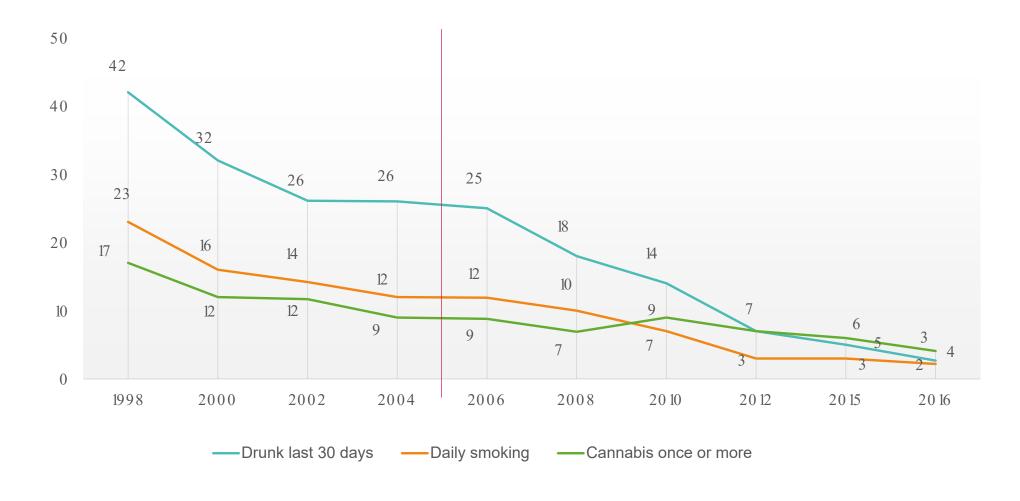




## International Development



### International development of the Model







- The Model can be implemented in any community
- Everywhere parents are afraid that their children start using drugs
- If the solution is there, why not at least give it a try?







### Global reach



As of 2019 we have partnered with a total of 120 communities in Chile, Portugal, Spain, France, Malta, Italy, Greece, Turkey, Slovakia, Romania, Moldova, Bulgaria, Lithuania, Latvia, Estonia, Russia, Finland, Sweden, Norway, Faeroe Islands, Netherlands, Ireland, Australia, Ukraine, South-Korea, Kenya, Guinea-Bissau, Mexico, Colombia, USA and Iceland



## **Building blocks**







The Icelandic model is predicated upon three pillars:

- 1) Evidencebased practice
- 2) Using a community-based approach
- 3) Creating and maintaining a dialogue among research, policy and practice

Community-based

Evidence

Jialogue

### Upon reflection



**EVIDENCE** 

COMMUNITY

DIALOGUE







- Medicine
- Engineering
- Tourism
- Fisheries
- Pharmaceutical industries
- Children's lives, health and well-being



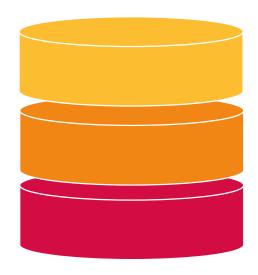
### Youth in Iceland database 1992 - 2019



#### Data collections in schools

- 10– 13 year old (since 2000) Primary school
- 14– 16 year old (since 1992) Primary school
- 16– 20 year old (since 1992) Highschool

1992



### **Indicators**

## anxiety



peer group economic and psychological issues

negative life events and strain

physical health status

values and attitudes

lifestyle and leisure time activities

internet

depressive symptoms

Health status indicators substance USE

studies and school

violence and delinquency, and more ...





## The twofold use of research

1. Scientific

2. Practical



## The scientific role of research



- In depth analysis of the data
- Over 100 peer reviewed publications in international journals
- Science forms the platform for practice



## The practical role of research



- Data collections on substance use regularly
- Practical information immediately to the municipalities
- Local information INTO all levels of prevention work is a KEY issue



## Immediate feedback



- Make sure practical information is out immediately after data collection
- Not 3-4 years later but almost immediately
- Every school, every parent, every prevention worker can have access to current situation in the close community







- Continuously
- At least bi-annually
- Things change fast in the lives of adolescents





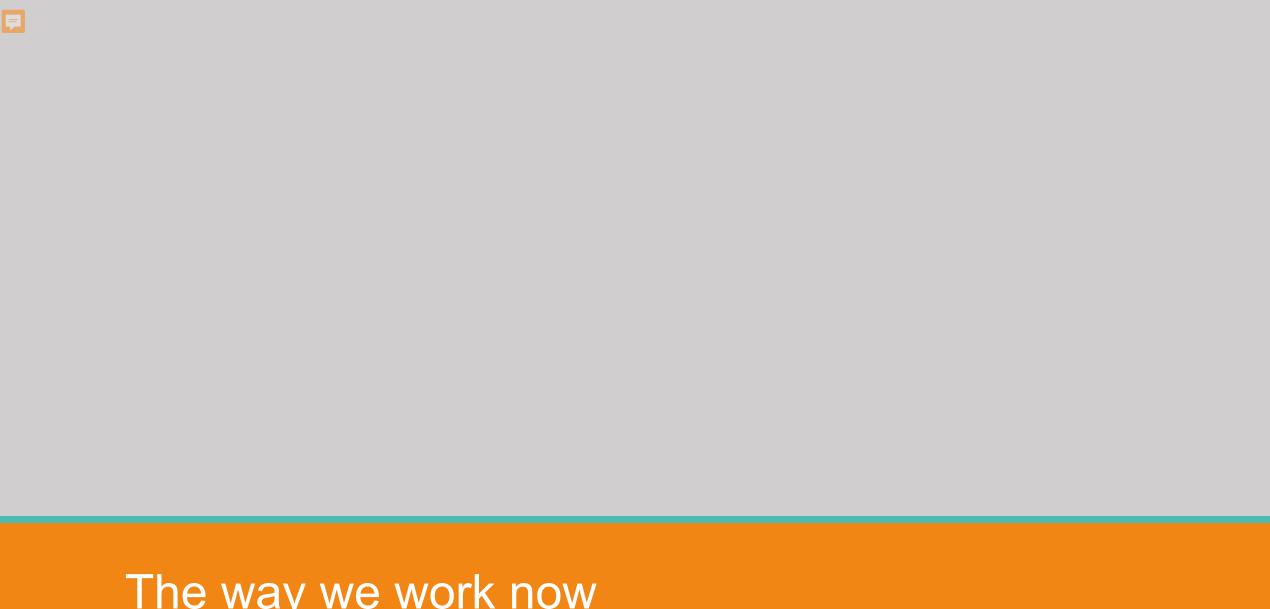
 Guarantee immediate feedback to municipalities, schools and practitioners about the local situation amongst youth.

Speed and accuracy





The researchers "guru" approach

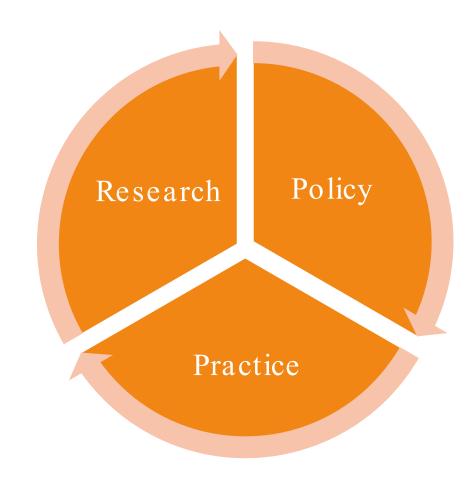


The way we work now













Substance use prevention: There are no quick fixes or simple solutions

Long term population changes will require long -term, population level, interventions



## What did we learn?



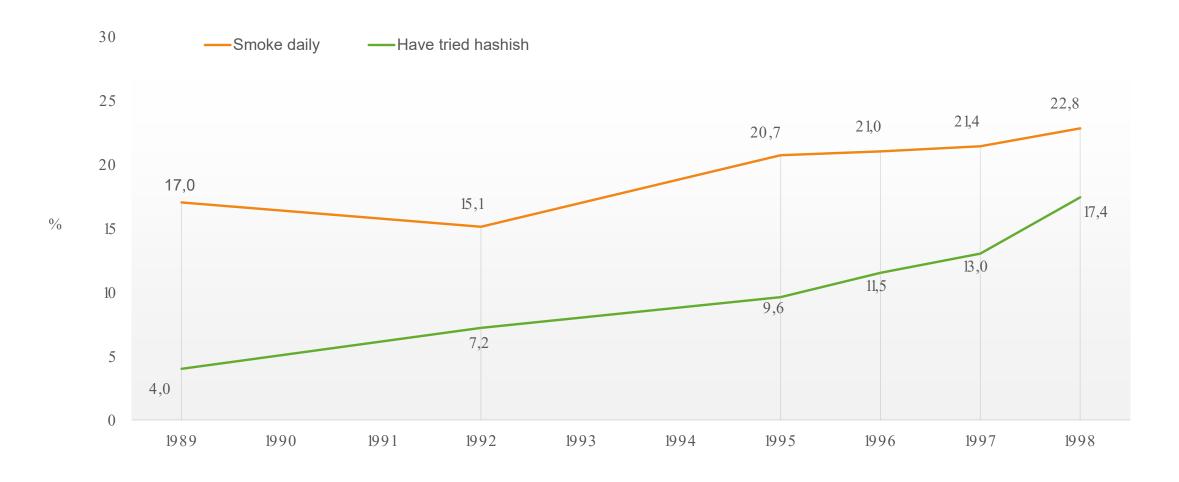


We learnt several things



## Trends in substance use among 10th grade students in Iceland from 1989 -1998







At this point in time research had already showed us that certain circumstances and behaviour in the lives of adolescents were strongly connected with substance use

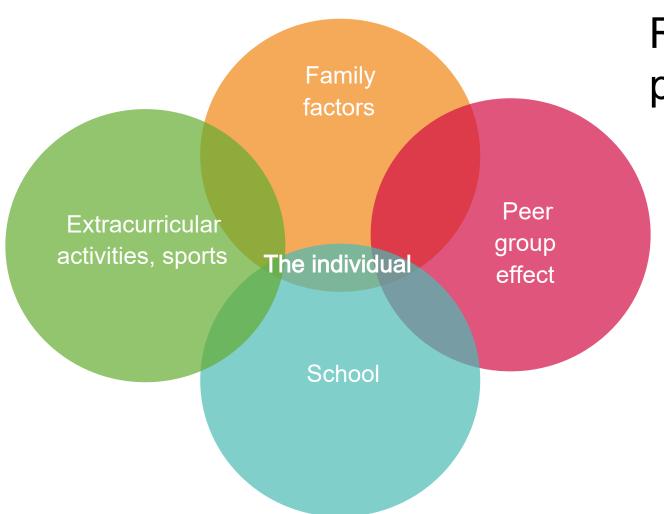


We tried to establish the risk and protective factors





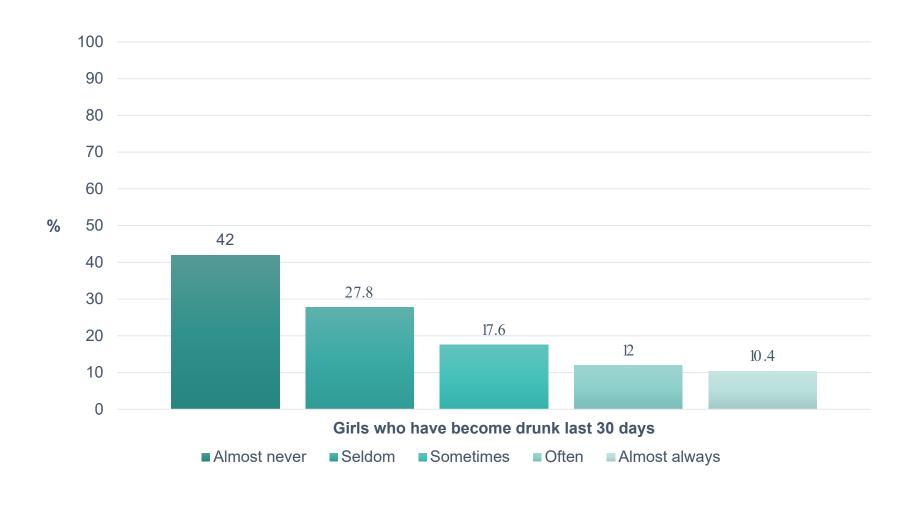




Risk and protective factors

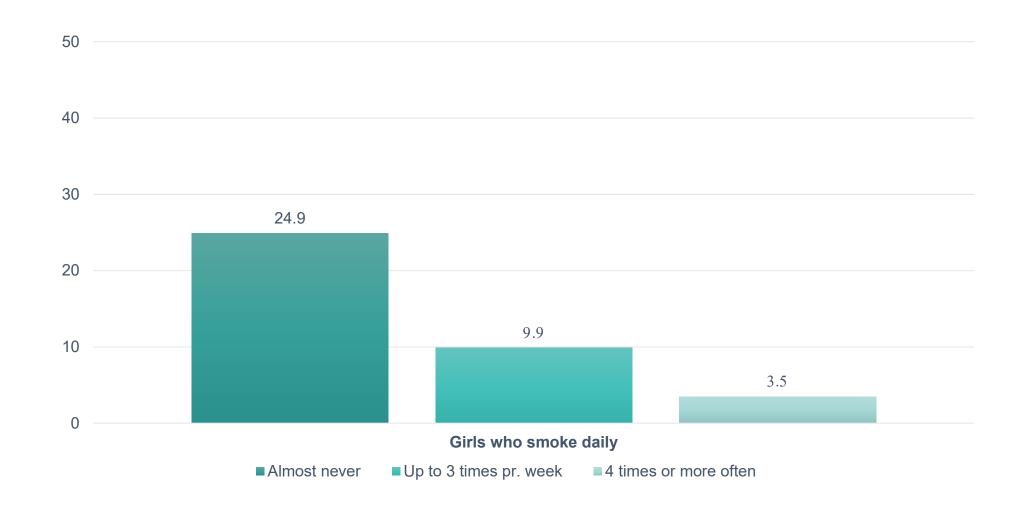
## Strong connection between drinking alcohol and time spent with parents





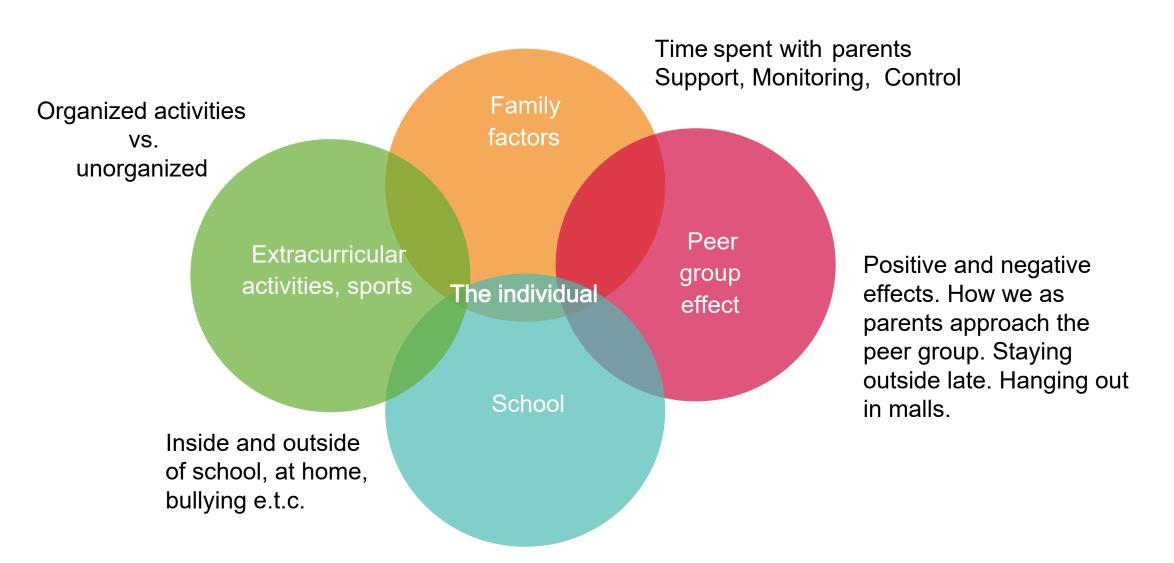
## Strong connection between smoking and participation in sports





## And analysing deeper









A totally new methodology in substance use prevention

 Obviously, what we had been doing before, was not working

## We had been doing this



















## Aim of Drug free Iceland



• To change the **actual behavior** of youth and not only their attitudes

• To change the life -style environment of our children so that they would be in lesser risk of substance use

## The Reykjavik campaign



- A clear message to society about risk and protective factors
- From Research and Evidence to Action
- Information and research was absolutely essential then and still is today

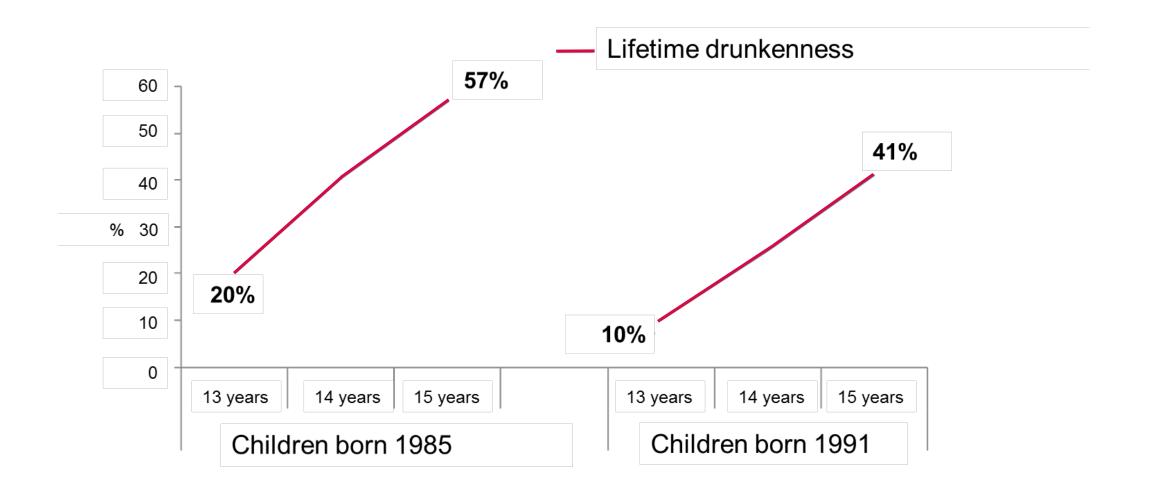


## Digging deeper





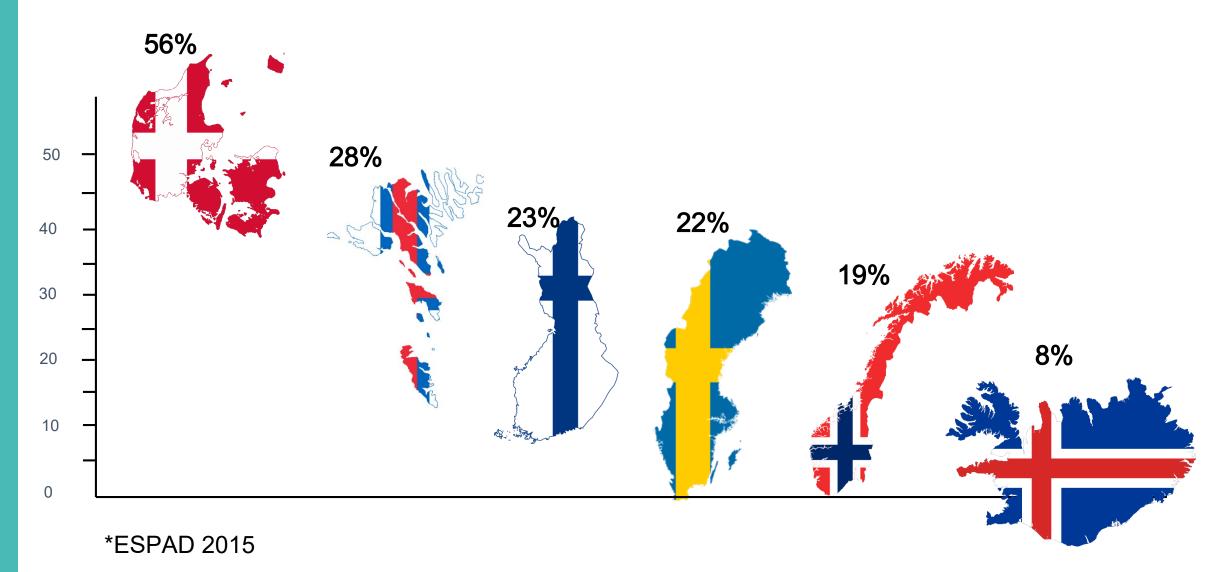






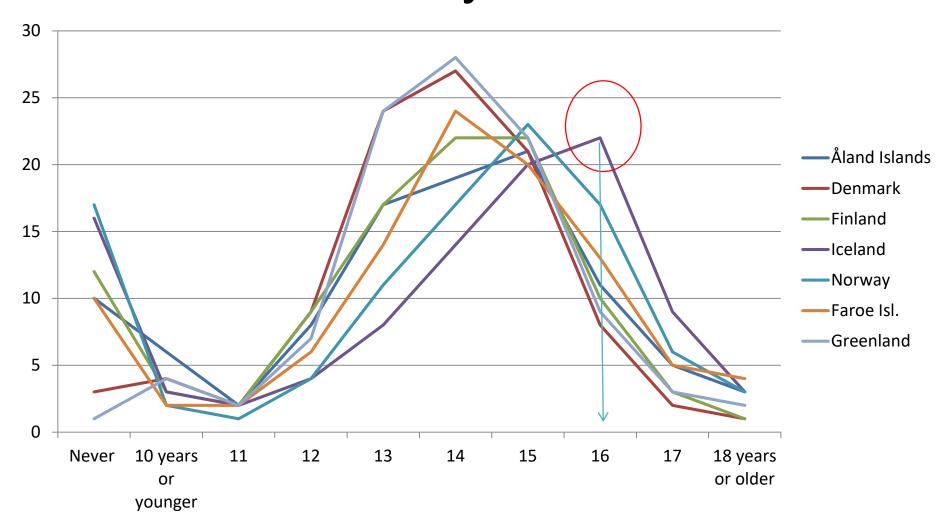






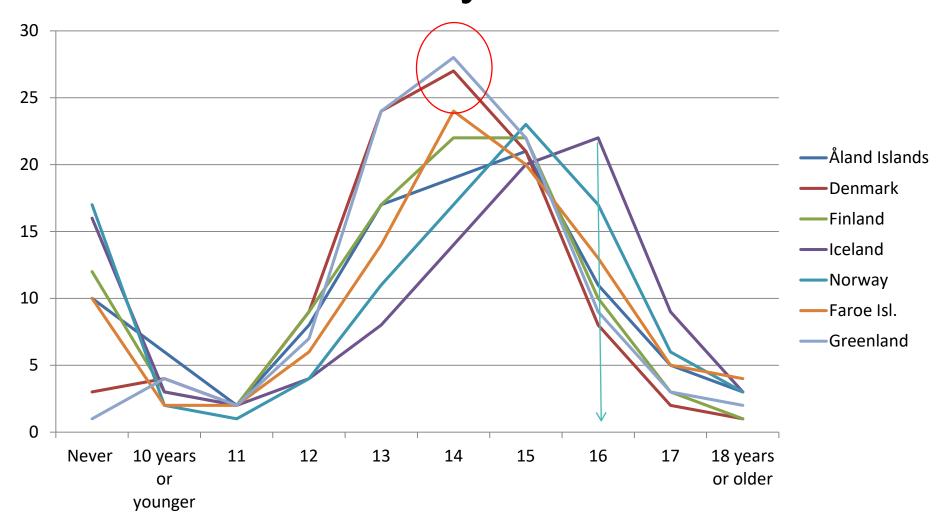
## Alcohol onset — From the 2009 Nordic Youth Study





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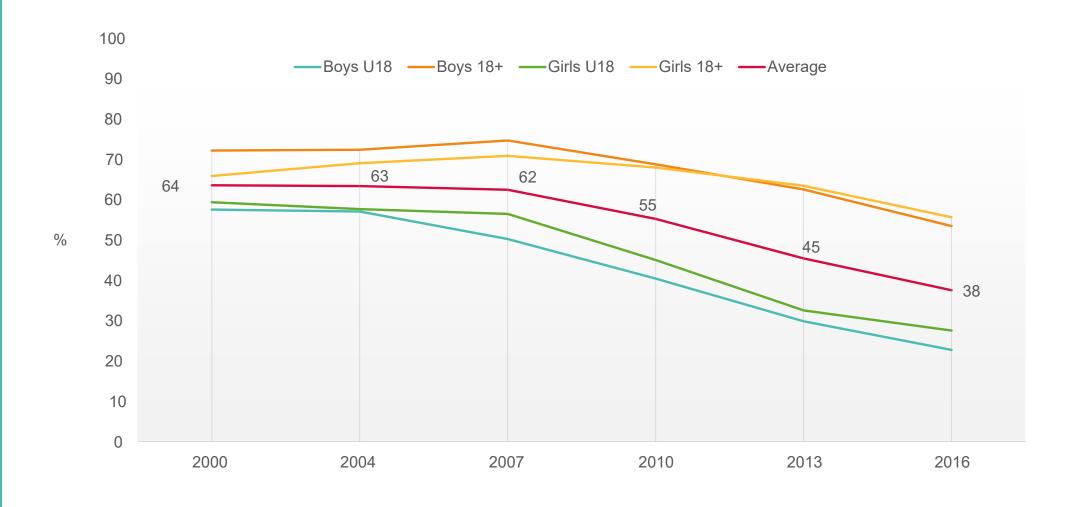






## Alcohol use trend in Icelandic High-Schools 16 - 20 year old students

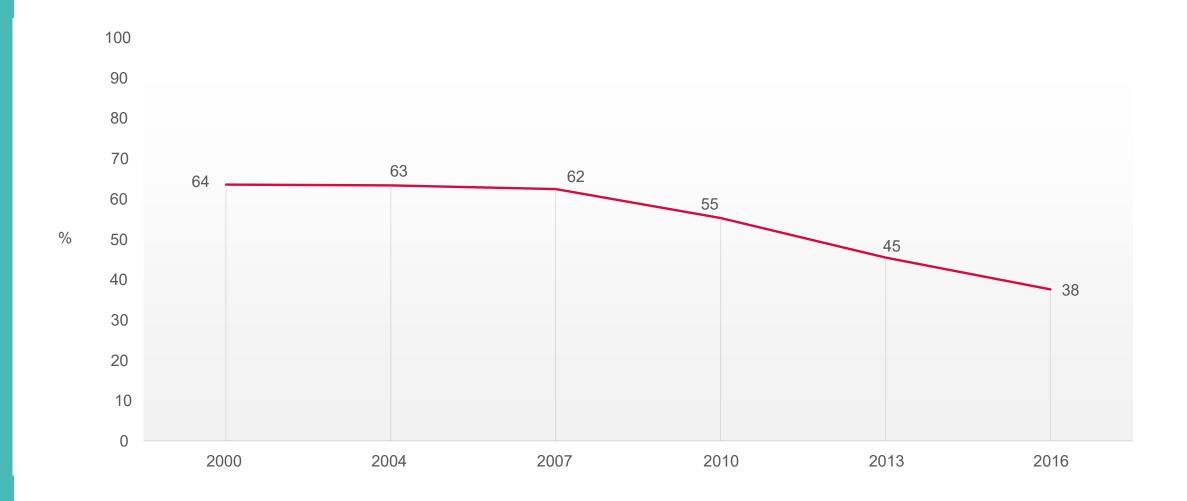




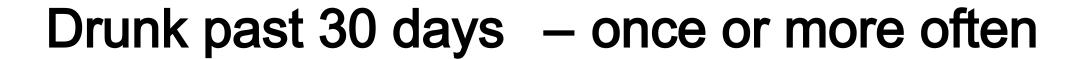


## Alcohol use trend in Icelandic High-Schools 16 - 20 year old students

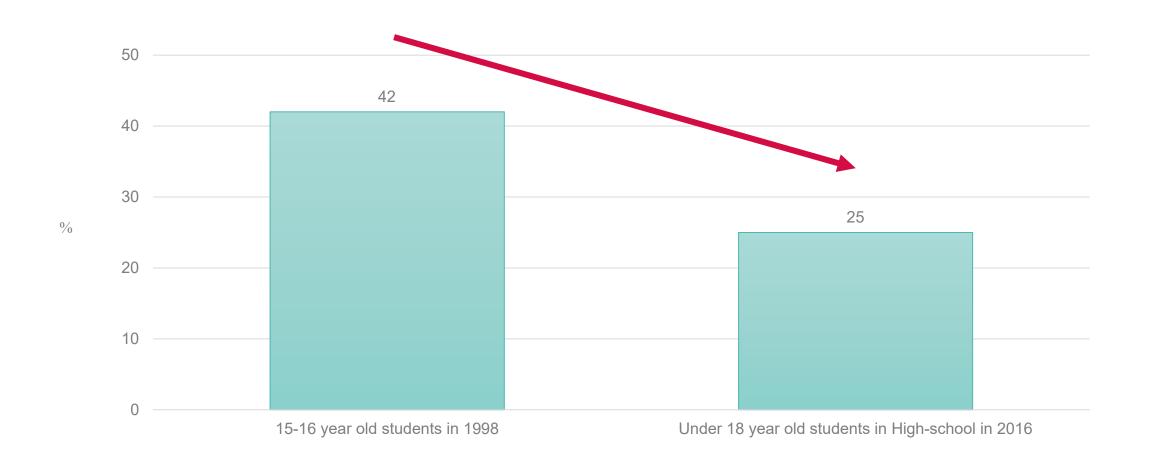








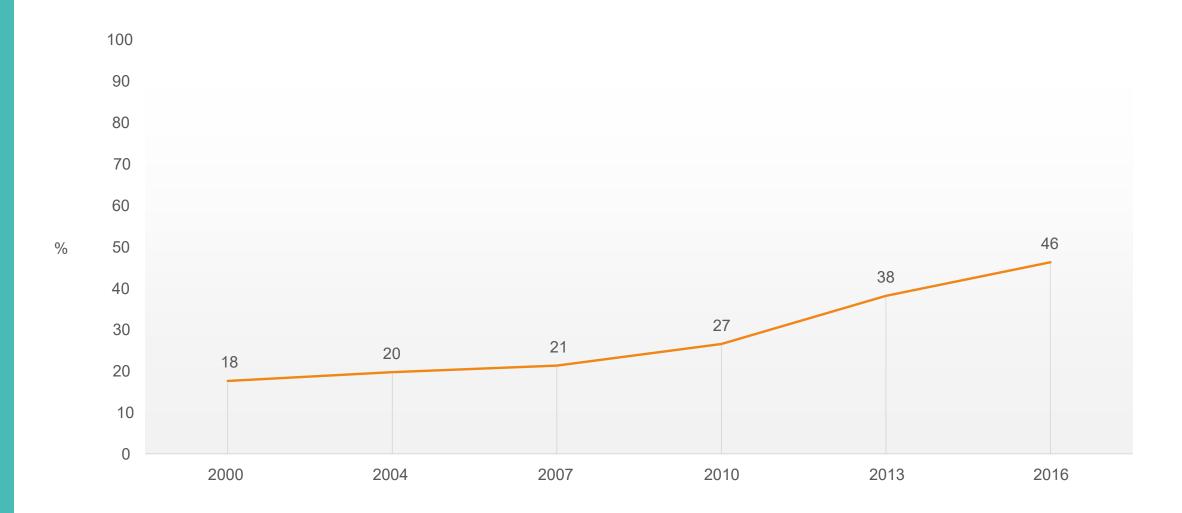






## Never got drunk in lifetime High-Schools 16 - 20 year old students







#### **Quote from NIH\***



"Underage drinking is a leading public health problem.

People who reported starting to drink before the age of 15 were four times more likely to report meeting the criteria for alcohol dependence at some point in their lives"

<sup>\*</sup> National Institute of Health







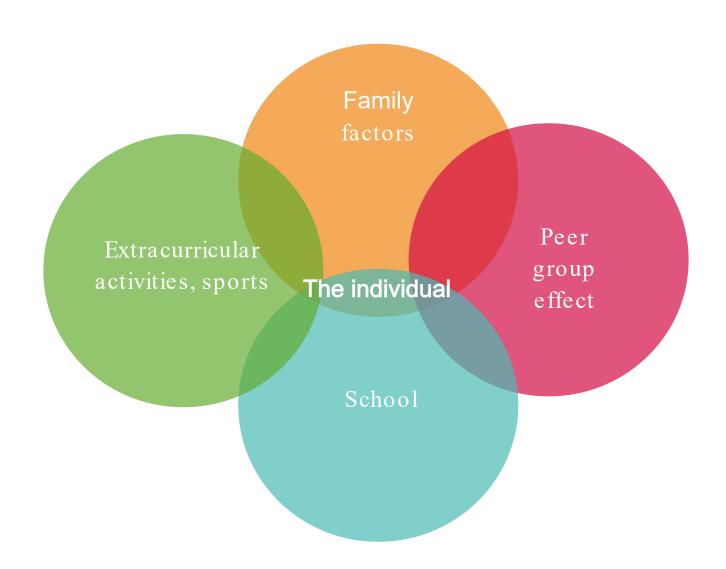
- Primary prevention, preventing the development of substance use before it starts
- 2 Secondary prevention, that refers to measures that detect substance use
- Tertiary prevention efforts that focus on people already abusing substances



## How were the findings used?

### This we knew was important











- Research as a basis before deciding on any actions
- Strengthen parent organizations and co -operation
- Support young people at risk inside schools
- Form co-operative work groups against drugs
- Support active NGOs'
- Support extracurricular activities / sports











+ 70% of awake time

## "Time spent in a year"







# Reykjavik City grants to organizations NGO's in the year 2015



#### Total grants around 7% of the overall budget of the City

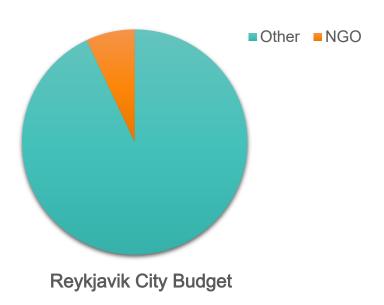
Youth- and Sports Organizations Euro 48 m.

Youth clubs/centres, after school activities Euro 24 m.

Cultural organizations Euro 14 m.

Music schools and schoolbands Euro 8 millj.

The Leisure Card – Euro 6 millj.



#### The Leisure Card



- The grant is 400 Euro pr. child for children 6 -18 years old
- Parents have the right to allocate / transfer a certain amount in the name of their child, to refund the registration fees
- The purpose of the Leisure Card is that all children and adolescents in Reykjavik 6-18 years old can participate in constructive leisure activities regardless of economic or social circumstances

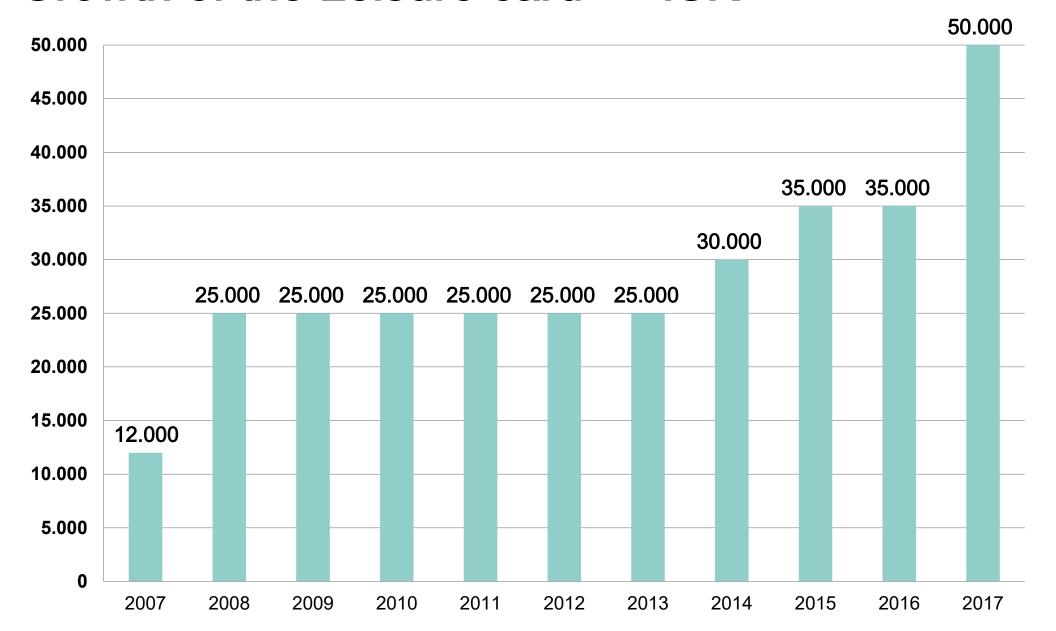
# Totally vital Quality criteria and quality control



- The City of Reykjavík makes an agreement with all NGO's working with children and adolescents
- Special agreements are made for the Leisure card
- The agreements set out special quality criteria
- That is, "We'll give you support and money you agree to ensure quality in your business"
- (Fyrirmyndarfélög) (Role) model sports club ideal exemplary sports organization
- A system within the sports movement where a club is recognized as a "best practice club"

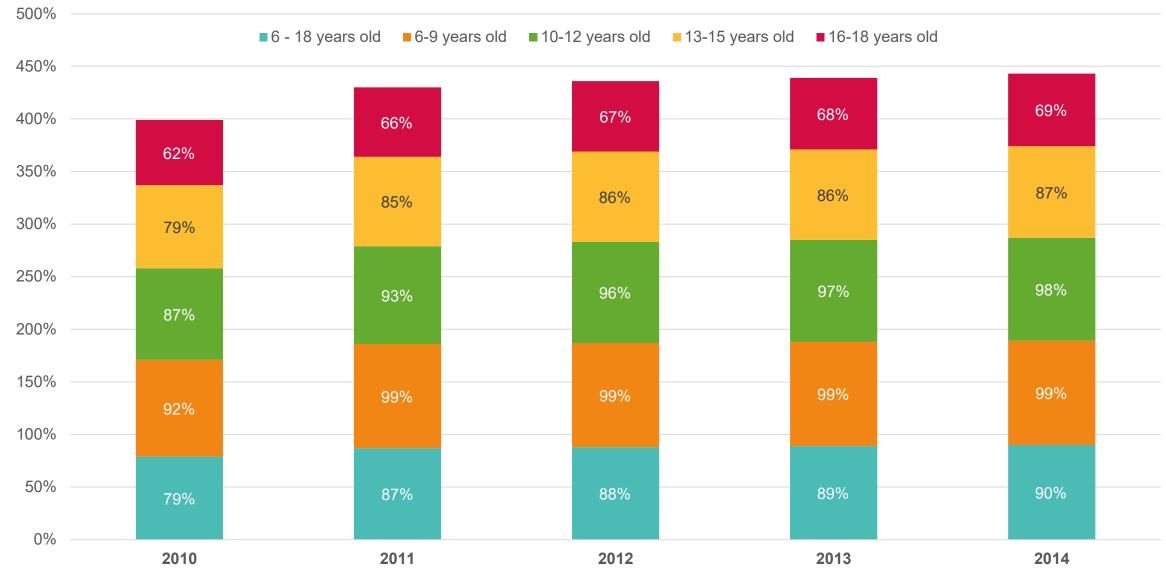
#### Growth of the Leisure card - ISK





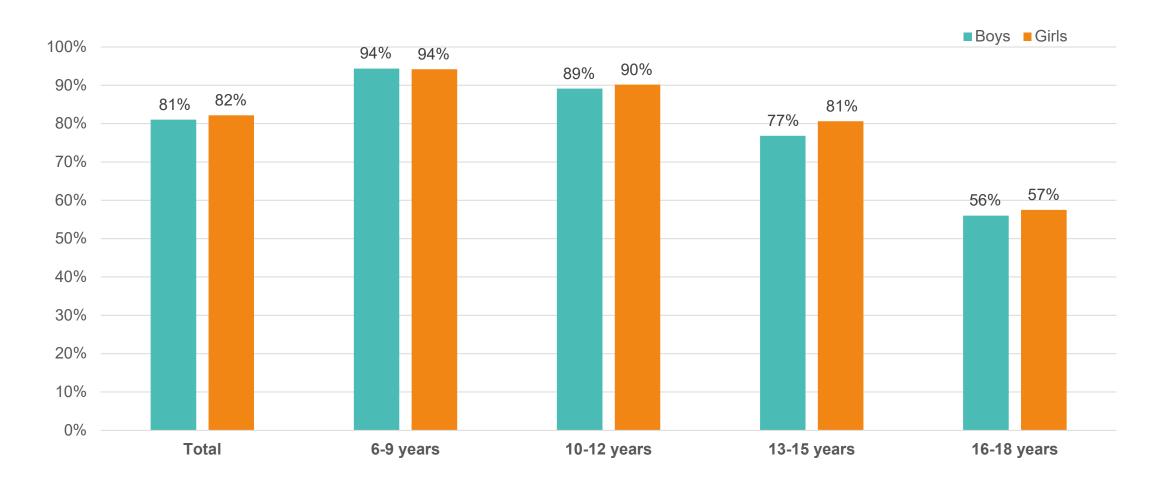
### Registration for activities - development





## Percentage of children and adolescent involved in organized leisure activities by age groups (2017)







# Knowing is not enough How you act is most important

# Doing nothing is the most expensive method







- Age limits to buy tobacco and alcohol (18 and 20)
- Age of adulthood raised from 16 to 18
- Advertising ban of tobacco and alcohol
- Guidelines on outside hours for adolescents
- Visibility ban of tobacco and alcohol



## Community focus







How could an average figure on alcohol use in your country help prevention workers in your community/municipality?

"Average" doesn 't tell all the story!





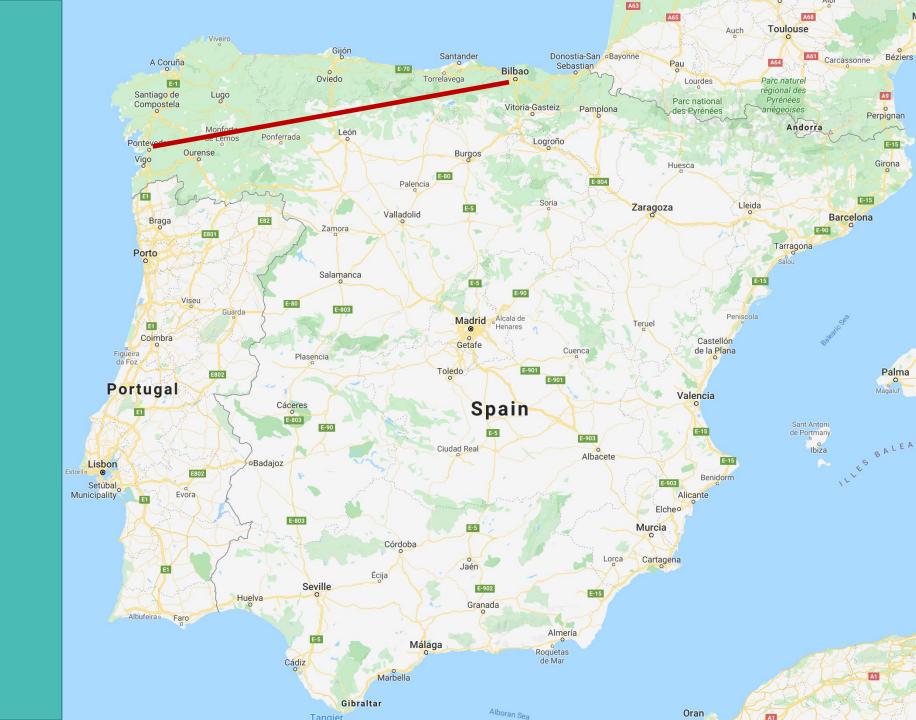


## Denmark

- Århus
- Esbjerg

# Focus on the close community

- Pontevedra
- Bilbao



# Focus on the close community

Sao Paulo

**Montes Claros** 









#### Dialogue between key stakeholders

- Politicians, municipalities and local authorities
- Parental groups and family planners
- School authorities and school workers
- Health educators, health and social services
- Leisure time workers, prevention workers
- Sports and youth institutions NGO's

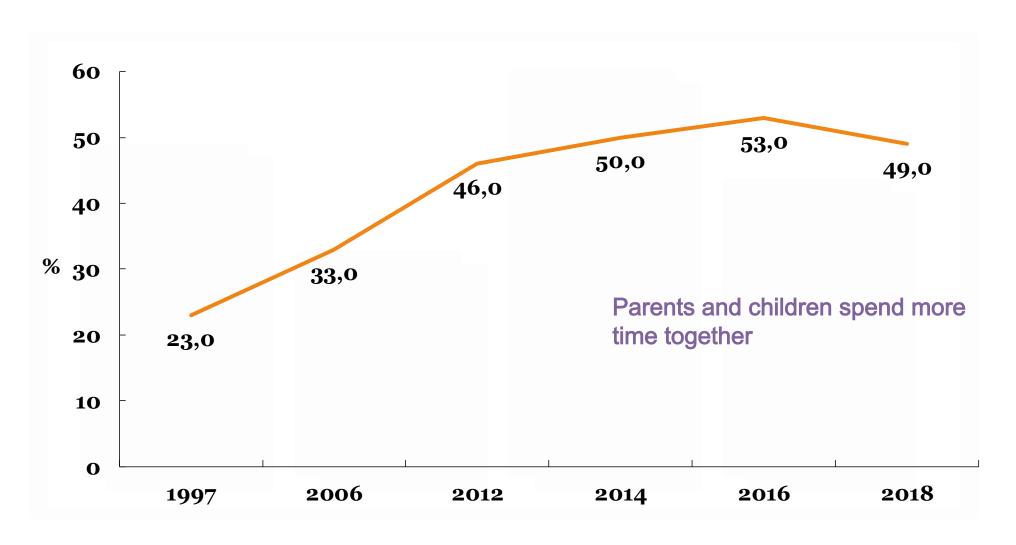
Dia logue



## Impact

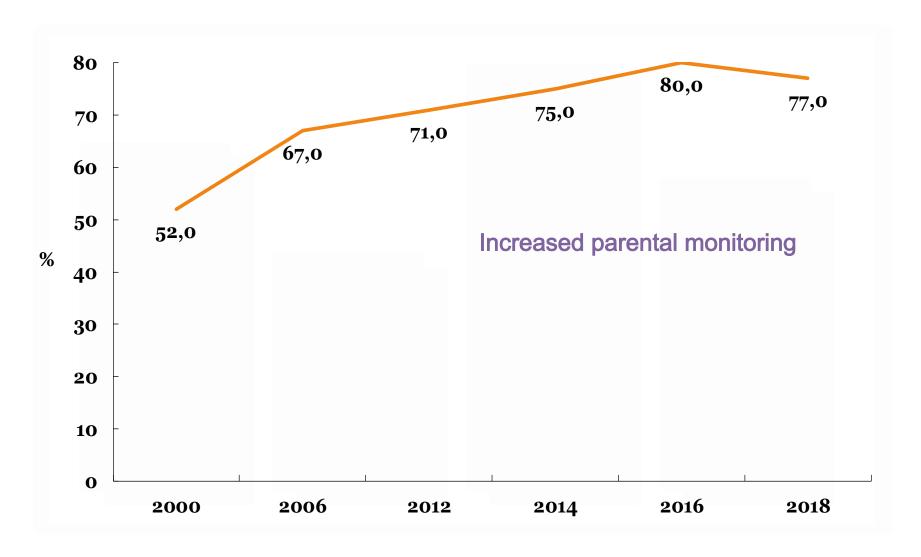
## Rates of students in 9 <sup>th</sup> and 10<sup>th</sup> grade who spend time (often/almost always) with their parents during weekdays





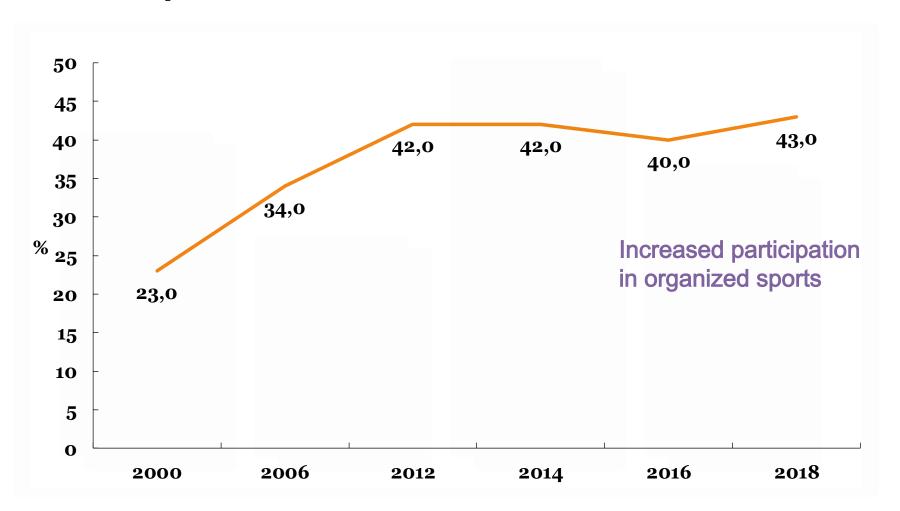
# "My parents know where I am in the evenings" (applies very or rather well to me) 9 th and 10th grade





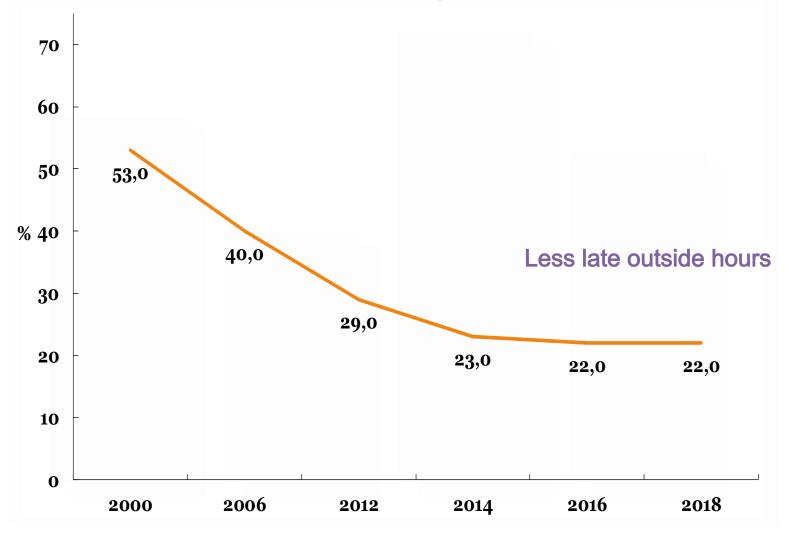
# Rates of students in 9 <sup>th</sup> and 10<sup>th</sup> grade that participate in sports with a team or club four times per week or more often





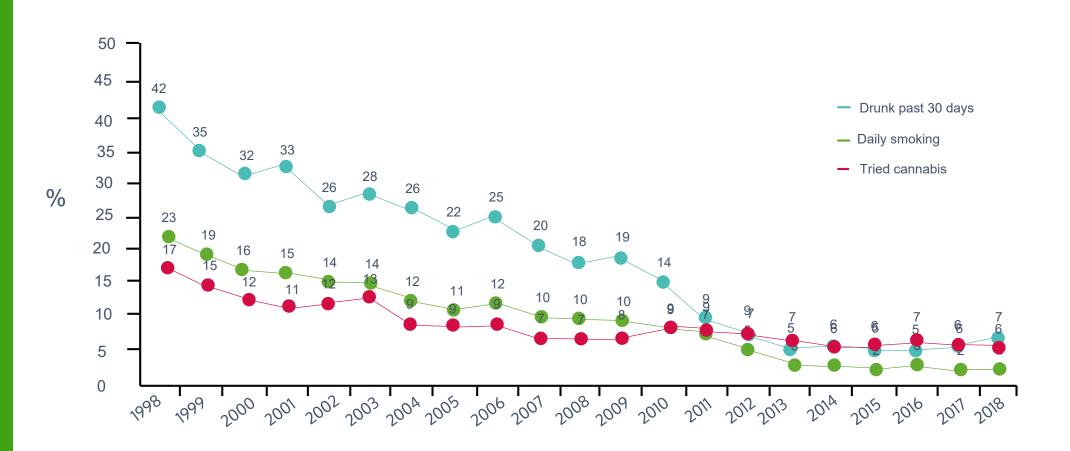
## Rates of students in 9 <sup>th</sup> and 10<sup>th</sup> grade who have been outside after 10 pm, 3 times+ in the past week







#### And substance use is going down



year





Substance use prevention: There are no quick fixes or simple solutions

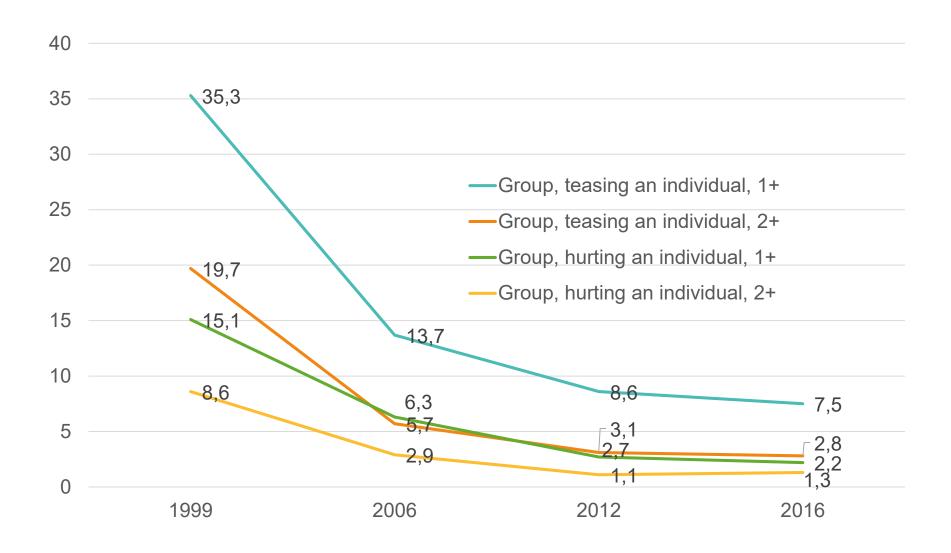
Long term population changes will require long -term, population level, interventions

#### Other associated factors



#### Measures on bullying (10 th graders)





#### Measures on theft (10 <sup>th</sup> graders)





#### www.planetyouth.org



- Overview of publications
- Members area with more info on processes
- News
- Overview of the team
- Our history
- The method
- Examples from our data collection
- Applications and contact us forms

#### Next Planet Youth Conference



#### PREVENTION IS POSSIBLE

Reykjavik, ICELAND

4th – 6th March 2020

**VENUE: GRAND HOTEL** 



### Thank you!



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#### Icelandic Model publications

- 1. Kristjansson, AL., Sigfusdottir, ID., Thorlindsson, T., Mann, MJ., Sigfusson, J., Alle (2016). Population trends in smoking, alcohol use, and primary prevention variables among adolescents in Iceland, 1997 -2014. *Addiction*, 111, 64652.
- 2. Kristjansson, A.L., Sigfusdottir, I.D., Allegrante, J.P. (2013). Adolescent substance use and peer use: A multilevel analysis of cross -sectional population data. *Substance Abuse Treatment, Prevention, and Policy*, 8:27.
- 3. Kristjansson AL, Sigfusson J, Sigfusdottir ID, Allegrante, JP (2013). Data collection procedures for school -based surveys among adolescents: the Youth in Europe Study. *Journal of School Health*, 83, 662-667.
- 4. Sigfusdottir, ID., Kristjansson, AL., Gudmundsdottir, ML., Allegrante, JP. (2011). Substance use prevention through school and community—based health promotion: A transdisciplinary approach from Iceland. Global Health Promotion, 18(3), 23—26.
- 5. Sigfusdottir, ID., Kristjansson, AL., Gudmundsdottir, ML., Allegrante, JP. (2010). A collaborative community approach to adolescent substance misuse in Iceland. *International Psychiatry*, 7(4), 86-88.
- 6. Kristjansson, AL., James, JEAllegrante, JP., Sigfusdottir, ID., Helgason, AR. (2010). Adolescent substance use, parental monitoring, and leisure time activities: 12 -year outcomes of primary prevention in Iceland. *Preventive Medicine*, 51, 168171.
- 7. Sigfusdottir, ID., Thorlindsson, Th., Kristjansson, AL., Roe, KM., Allegrante, JP. (2009). Substance use prevention for adolescents: The Icelandic Model. *Health Promotion International*, 24(1), 1625.

