

## *Principle Four*

### **Prevention Programs and Activities Should be Part of a Comprehensive, Long-Term Prevention Effort**

The prevention effort in Utah is a comprehensive approach that includes delivery of a consistent, community-wide message delivered in multiple ways to reach the entire population. We recognize that no one program or any one-time event will be enough to address alcohol, tobacco, and other drug problems. Community programs that combine two or more effective programs can be more effective than a single program alone.

For a list of research-based prevention programs and events, please see: [www.nida.nih.gov](http://www.nida.nih.gov).

Utah's prevention network includes 13 Local Authority Districts, each with a coordinator who assesses needs and implements prevention services. To join the coalition in your area, see: [www.hdsa.state.ut.us](http://www.hdsa.state.ut.us).



An example of a long-term prevention program is Utah's "Prevention Dimensions."  
[www.utahpd.org](http://www.utahpd.org)

## *Principle Five*

### **Research-Based Prevention Programs and Activities Should be Used and Implemented with Fidelity. Efforts Should be Made to Evaluate.**

There are several reasons to conduct an evaluation of programs:

- To determine the effectiveness of programs for participants
- To document that program objectives have been met
- To provide information about service delivery that will be useful to program staff and other audiences
- To enable program staff to make changes that improve program effectiveness
- Funding agencies require it

When communities adapt programs to match their needs, community norms, or differing cultural requirements, they should retain core elements of the original research-based intervention which include:

- Structure (how the program is organized and constructed)
- Content (the information, skills, and strategies of the program)
- Delivery (how the program is adapted, implemented, and evaluated)

## *Utah Substance Abuse Prevention*

## **Guiding Principles**



## Principle One

### Prevention Programs Are To Do No Harm.

Many prevention materials detail the effects alcohol, tobacco, and other drugs (ATOD) have on the user. Even though your materials are designed to prevent ATOD use, your reader may perceive that you are condoning drug use. Materials targeting youth should not use recovering addicts or alcoholics as role models. Often, adolescents have a sense of invincibility. They think they can receive the effects of the drugs but be able to avoid the negative consequences.

Prevention programs are designed for specific audiences. Examples are as follows:

- *Universal* programs are designed for the general population
- *Selective* programs target groups that are high risk
- *Indicated* programs are designed for people making high risk choices with substances.

## Principle Two

### Prevention Programs Should Increase Protective Factors and Decrease Risk Factors

The prioritization of risk and protective factors should be based on a thorough community assessment using survey and archival data. Care should be given to deliver unduplicated services and to collaborate with existing prevention programs and resources. Prevention programs should address the type of drug abuse problem in the local community, target modifiable risk factors, and strengthen identified protective factors.

For your community risk and protective factors and to contact your local Prevention Coordinator, please log on to:

[www.hsdsa.state.ut.us/locationsmap.htm](http://www.hsdsa.state.ut.us/locationsmap.htm)



Prevention programs should be tailored to address risks specific to population or audience characteristics to improve program effectiveness.

## Principle Three

### Delivery of Clear Messages

Make it clear that all illegal and unwise drug use is unhealthy and harmful for all. In an attempt to be “realistic,” many prevention materials acknowledge illegal drug use as a “fact of life.” Even though the ultimate intention may be to prevent this kind of behavior, this acknowledgement will be read by some to mean that such drug use is “normal.” All prevention materials should take a clear stand against:

- The use of any legal\* drug, including alcohol by those under-age for its use.
- The use of any illegal drug.
- The use of a legal\* drug for a purpose other than its prescribed use and prescribed amount.
- The use of any product or substance that can produce a drug-like effect.
- Tobacco use at any age.
- Any alcohol use by pregnant women.

\*There can be associated health risks with legal drugs.