The Local PASS Toolkit: A Local approach towards the reduction of PsychoActive Substance uSe

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BACKGROUND: New drugs, of which the risks are still unknown, are attractive to various groups of people. The identification of local trends is crucial in order to prevent these trends from diffusing beyond a tipping point and becoming problematic at the macro level as well. Local authorities need to know the risks of new trends in the local situation, and how to respond to them. **AIMS**: In response to this need, the European Local PASS project was set up. The main aims of the project were to: develop standardised local guidelines for identification, risk assessment, and interventions; share knowledge on, discuss, and review best practice approaches to responding to emerging drugs, and raise social and political awareness of the consumption of new drugs. **DESIGN, MEASUREMENTS, AND SAMPLE:** Nine international partners from five European countries helped to collect data by means of a literature review, key informant interviews (five or six informants from each country), focus groups (one representative per partner), and an online survey (470 respondents from the five countries together). **RESULTS:** Some of the main findings are that it is crucial to know the target group of a newly emerging drug, the information provided on this drug needs to be tailored to the target group, and good communication and collaboration between all stakeholders is essential. **CONCLUSIONS:** All the findings have been processed into the Local PASS Toolkit, which is a set of guidelines, flowcharts, and tools that can be used for the early identification of, and an early response to, newly emerging trends in drug use and abuse in local settings. Its explicit goals are to inform local drug policy making, to contribute to a transparent decision-making process, and to provide relevant and evidence-based input into the implementation or design of appropriate responses to emerging drug trends.

● 1 INTRODUCTION

Substance use patterns in the EU are constantly changing, and recently have been influenced by developments in the new psychoactive substance (NPS) markets (EMCDDA, 2014; Griffiths et al., 2010; Hillebrand et al., 2010). The existing national and EU-level monitoring systems detect trends in new drugs, but in practice these give local authorities no or insufficient guidance as to how to respond to them. Local authorities would benefit from knowing what the risks posed by new trends in the local situation are, and how to respond to them. Since national trends often start locally (Nabben et al., 2010), the identification of local trends is crucial in order to prevent these trends from diffusing beyond a tipping point and becoming problematic at the macro level as well. Despite a variety of local consultations where new developments are discussed (e.g. by care institutions or the police), information often remains fragmented. The identification of new developments that deserve more attention may therefore come too late. To prevent this, a timely and complete overview of new or emerging trends on the local level and appropriate responses to them are essential. The Local PASS project developed a standardised local system for (1) the identification and (2) risk assessment of new developments in psychoactive substance use, and (3) developing an effective plan for local interventions. In this short report we present the project and its results, with a focus on the Local PASS Toolkit.

● 2 METHODS

The work was divided into workstreams for early identification, risk assessment, and interventions, and each assessed the best practices in their subject area. Within each workstream four different methods of data collection were used. These were literature reviews, key informant interviews, focus groups, and an online survey.

For the literature reviews a systematic research of the available literature was conducted to summarise the state of the knowledge on early identification, risk assessment, and intervention into emerging drug trends, with a focus on NPS. Peer-reviewed articles and publications were chosen as the sources of data. In addition, the grey literature was studied, such as reports from organisations and information from websites and fora.

The key informant (KI) interviews consisted of semi-structured interviews with five or six key informants from all of the Local PASS partner countries (i.e. Bulgaria, the Czech Republic, Italy, the Netherlands, and Portugal). The key informants represented various stakeholders from the local drug policy system (research workers, contact workers, peer workers, other workers in the drug use setting, policy makers in the public health sector, law enforcement representatives, epidemiologists, or other experts). They were interviewed to gain information on recent trends in drug use that had evolved in their locality. The aim was to obtain as detailed as possible a description of the most recent and significant trend(s) in drug use in the partner localities and their local drug policy framework on the topics of identification, risk assessment, and interventions.

The focus group meetings were semi-structured (brainstorming) sessions. Their aim was twofold: on the one hand, to clarify the information from the key informant interviews, and on the other hand, to gain additional information on the identification of new drug trends and responses to them. A total of three focus groups were held; one per workstream. At least one representative from each partner attended the focus groups and discussed the results from the KI interviews in depth.

The survey was conducted to collect quantifiable information on local trend identification, risk assessment, and interventions. The questions were based on the information gathered from the interviews, focus groups, and literature reviews. It was built into the online SurveyGizmo tool, and a separate version was made for each project partner's language (Bulgarian, Czech, Italian, Dutch, and Portuguese). The respondents were stakeholders in emerging drug trends – from service providers to policy makers and field workers. They were approached via e-mail. The survey was accessible online from August 15 to September 30 2014, with subsequent waves of reminders to fill out the survey. A total of 470 participants filled out the survey.

For more detailed information on the methodology we refer to the Best Practice Reports on the Local PASS website: www.localpass.eu.

● 3 KEY RESULTS

Some key findings recurred throughout the data collected. First, it is important to know the target groups: who they are, what defines and drives them, where they can be found, and how to gain their trust. To achieve this, active outreach and peer support are necessary. Training staff who work with (potential) users and involving the community and/or the users' networks also form part of this. Second, a group of local stakeholders establishing lines of communication is needed for sharing information about new trends and assessing their risks. Third, when information is provided, this needs to be tailored to the target group one wishes to reach, and one must ensure it is complete, correct, up-to-date, and easy to find. Fourth, a control policy installed by the (local) government which is not too oppressive is more desirable than a very strict one. Finally, good communication and collaboration between all stakeholders is essential. This includes local-level governance that listens to suggestions from care providers with hands-on experience, and an attitude that is open to change when circumstances require it.

● 4 THE LOCAL PASS TOOLKIT

The key elements mentioned above, together with all the other project results, were processed into the Local PASS Toolkit. This toolkit comprises a set of guidelines, flowcharts, and tools that can be used for the early identification of newly emerging trends in drug use and abuse in each locality and an early response to them (see http://www.localpass.eu/cms/local-pass-toolkit/ for the Toolkit and flowcharts). Its explicit goals are to inform local drug policy making, to contribute to a transparent decision-making process, and to provide relevant and evidence-based input into the implementation or design of appropriate responses to emerging drug trends. The toolkit can be implemented by local stakeholders, and requires only moderate research skills. The three guidelines within the toolkit – the Identification Guideline, the Risk Assessment Guideline, and the Intervention Guideline – present an overview of the procedures and tools involved in organising the identification and risk assessment of newly emerging drug trends and interventions towards these at the local level. The flowchart in *Figure 1* below is a representation of the organisational structure and the process flow of the Local PASS toolkit.

The core of the three Guidelines is presented here (see http://www.localpass.eu/cms/local-pass-toolkit/ for the complete guidelines).

● 4 / 1 Identification

The Local PASS Toolkit starts with the identification process. The aim of this process is to:
- identify trends at an early stage, before they reach the tipping point;
- obtain information about the trend;
- enable the efficient exchange of information between the persons involved in local drug policy decision making and implementation;
- provide data for the higher levels of drug policy decision making and implementation;
- alert relevant key players within the drug policy system in the event of a potentially high-risk trend.

This data is used for making a decision about whether or not it represents a new trend. When they do, and when this trend is considered possibly harmful, the local risk assessment process will be initiated.

See http://www.localpass.eu/cms/local-pass-toolkit/for the Identification flowchart.

● 4 / 2 Risk assessment

The aims of the risk assessment process are to:
- collect data about the risks posed by the new trend;
- assess the relevance of the available data and to evaluate it;
- inform drug policy decision making on the local level;
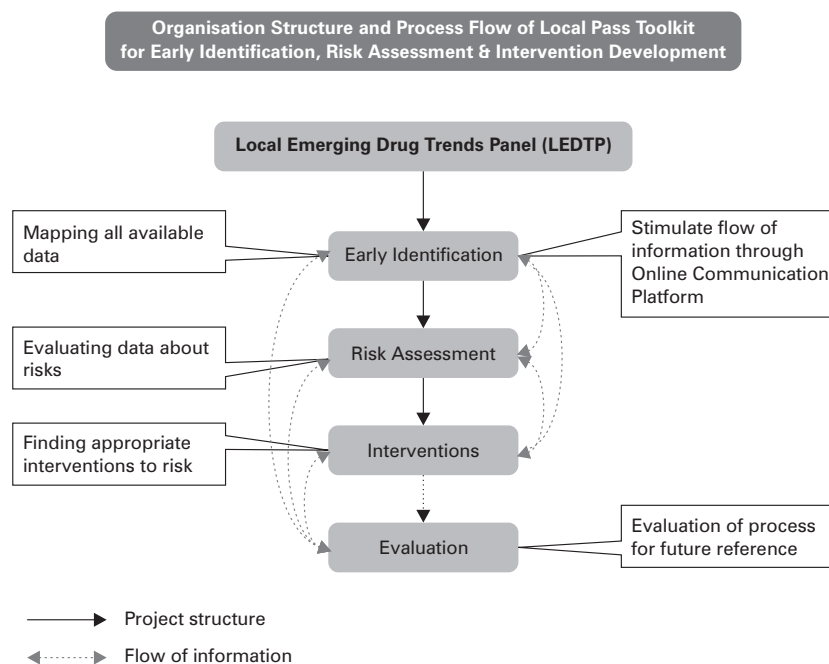- provide data necessary for implementing or designing appropriate responses to the new trend.

Figure 1 / Obrázek 1

Schematic representation of the structure and process flow of the Local PASS toolkit
*Schematické znázornění struktury a vzájemných vztahů mezi jednotlivými komponenty
a aktivitami metodiky Local PASS Toolkit*

On the basis of the collected data, a rapid assessment can be performed. If this points to risks posed by the new trend to the local community, an elaborate risk assessment will be performed. This will yield input for identifying (an) appropriate intervention(s).

See http://www.localpass.eu/cms/local-pass-toolkit/for the Risk assessment flowchart.

● 4 / 3 Interventions

The process of implementing a local intervention will be performed in order to:

- respond to a newly emerging drug trend with the correct interventions;
- counter the risks associated with this new trend;
- prevent the trend from reaching the tipping point and spreading to larger user groups within the locality, as well as outside it;
- enable the efficient exchange of information between the persons involved in the drug policy and healthcare system;
- provide data for the higher levels of the drug policy system.

On the basis of the risks associated with the trend, interventions tailored to the identified target group(s) can be selected and prioritised. After the intervention has been carried out, an evaluation of the process will enable the sharing of experiences and storing lessons learned for future reference.

See http://www.localpass.eu/cms/local-pass-toolkit/for the Interventions flowchart.

● 5 BENEFITS

The Local PASS Toolkit will better enable municipalities and other local stakeholders to: (i) identify emerging drug trends early on, before they tip over into a phase of wider diffusion; (ii) assess the risks involved and the potential harms that might occur, and (iii) implement and/or develop appropriate interventions when indicated by the risk assessment. The short-term benefits of this may be closer and quicker collaboration with all stakeholders, an earlier response, and interventions that are tailored to the target group. In the long run an early response to emerging drug trends may lead to a reduction in the use of psychoactive substances, a decrease in drug-related problems, and a reduction in the costs for society in terms of, for instance, treatment, prosecution, and healthcare.

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