



UNODC

United Nations Office on Drugs and Crime

Country Office for the
Islamic Republic of Iran

**Report of
Workshop on Monitoring & Evaluation
Of Community-based Drug Prevention
Programme
in the Islamic Republic of Iran**

9-10 December 2009

Venue: Homa Hotel, Aiyeeneh Conference Hall

Facilitators:

- Professor Fabrizio Faggiano, International Consultant, Avogadro University;
- Mr. Hamidreza Taherinakhost, National Project Coordinator, UNODC;
- Dr. Hooman Narenjiha, Director General of Prevention and Cultural Affairs, DCHQ;
- Dr. Gelareh Mostashari, Expert in Drug Demand Reduction, UNODC;
- Dr. Hassan Rafiee, Professor, Welfare and Rehabilitation University;
- Dr. Mehrdad Ehterami, In-charge of Research and Development Office, State Welfare Organization;
- Dr. Abbas Vosoogh Moghaddam, Secretary of Iranian Social Medicine Society;
- Dr. Farhad Aghtar, Director General for Drug Abuse Prevention and Treatment Office, State Welfare Organization.

Date: 9-10 December 2009

Introduction:

Researches has emphasized the importance of monitoring and evaluating the substance abuse prevention programmes, not only because this helps identify areas in which services can be improved, but also because evidence of service effectiveness can inform decision-making around the allocation and distribution of prevention resources. Despite the widespread use of prevention programmes worldwide, evaluations take place seldom, if ever take place at all (Gulotta & Bloom, 2003). Many organizations did indicate that outcome and process evaluations were conducted yet discrepancies in the evaluation and monitoring aspects of the organization were noted. These discrepancies could be attributable to the poor understanding of Monitoring and Evaluation. This fact demonstrated the necessity of performing monitoring and evaluation programmes and the need to improve the knowledge of relevant experts in this regard.

Objectives:

1. To increase the capacity of the Iranian Monitoring & Evaluation system;
2. To enhance the knowledge and skills of Iranian experts in the filed of Monitoring and Evaluation
3. To facilitate the evaluation of community-based drug prevention programme in I.R. of Iran

The following is the list of participants:

- Ms. Fatemeh Khazaeli Parsa, Expert of Drug use Office, State Welfare Organization
- Ms. Maryam Mosavi, Expert, State Welfare Organization
- Dr. Mohammad Hossein Salarianzadeh, Expert, Health Ministry
- Ms. Mehri Moghadam, Expert, Fars Welfare Organization
- Ms. Laleh Hamidi, Expert, Khozestan Welfare Organization
- Ms. Azra Moradali Beigi, Expert and Physician, Mazandaran Welfare Organization
- Ms. Shirin Izadi, Expert, Hamedan Welfare Organizaton

- Ms. Bita Agahi, Expert in Drug use, Isfahan Welfare Organization
- Mr. Maziar Moradi Lakeh, member of Scientific Panel, University of Medical Sciences of Iran
- Dr. Habiballah Masoudifarid, General Director of Social Harm Organization, State Welfare Organization
- Mr. Abass Borhani, Expert in Prevention, Khorasan Welfare Organization
- Mr. Reza Heshmatifar, Expert, Ministry of Education
- Dr. Mohammad Chinian, Prevention Deputy, Ministry of Education
- Dr. Reza Omid, In charge of Treatment and Drug use Prevention, Gilan Welfare Organization
- Dr. Behzad Damari, Head of University of Medical Sciences of Iran
- Ms. Zahra Heydari Azad, Expert, Zanzan Welfare Organization
- Dr. Manelie Sadeghi, Expert, Health Ministry Office on Drug Abuse
- Mr. Kamran Bahrami, Head of Office, Drug Control Headquarter
- Dr. Termeh Tarjoman, Expert, Health Ministry Social Office
- Dr. Shabnam Mirbeigi, Deputy, State Welfare Organization
- Ms. Mariet Ghazarian, Expert, State Welfare Organization Drug use Office
- Ms. Mahboobeh Shojaeddin, Expert, State Welfare Organization
- Dr. Abolfazl Vatanparast, Managing Director, Tosse-e-Kiana Institute
- Dr. Nematolah Babaei, Professor Assistant, University of Social Welfare
- Ms. Ani Minas Mirzabeik, Support Service I55 Project, UNODC
- Ms. Shahrzad Ebrahimi, Volunteer I55 Project, UNODC



Opening Ceremony - Wednesday, 9 December 2009

The Opening ceremony of the workshop started with the speech of Ms. Gelareh Mostashari, Drug Demand Reduction Expert of UNODC Iran. She explained that at the current stage, drug use prevention could be considered vital. As she explained the drugs produced in Afghanistan during the last years were more than use of the entire world and this fact demonstrated that a huge amount of these drugs are available in the border regions. The mentioned fact should make us much more alert in this regard and we, as the experts of this field should pay appropriate attention to the production and trafficking of

artificial drugs. Considering all the mentioned facts, primary drug use prevention should be considered one of the most important subjects in drug use campaign.

Dr. Mostashari expressed the importance and necessity of monitoring and evaluation for drug use prevention programmes. This initiative would assist us to observe the efficiency of performed activities and programmes to make these programmes more effective and efficient. At the end of her speech she expressed her happiness, meeting the relevant experts of this field and also expressed her hope to achieve valuable results from this workshop.

The second speech maker was Dr. Hooman Narenjiha, Director General of Cultural and Prevention Affairs of Drug Control Headquarters.

He introduced himself and he commenced explaining on the history of drug use prevention in The Islamic Republic of Iran. He presented a book on quick assessment of drug use and said that it is under compilation. He also promised to publish their recent evaluation activities which had been newly finished. Dr. Narenjiha mentioned that the drug demand reduction activities have begun since 1998 in the Islamic Republic of Iran. In the beginning these activities were not centralized. He added: at that time, they had one hundred and twenty billion Rials as their budget and they allocated some of that budget to Physical Training Organization but it was not effective enough to prevent drug abuse.

“In 2005, the budget was two hundred billion Rials and we tried to extend our prevention activities. At the moment we have extended our budget from twenty billion Rials to one hundred and twenty billion Rials and we are going to extend it in the next year as well. As Dr. Narenjiha explained they are going to have two hundred sixty billion Rials. He explained that according to statistics there are one million and fifty thousand drug users in the Islamic Republic of Iran. Except those who use drugs as their amusement, there are hundred and twenty million drug users in the Islamic Republic of Iran. He also mentioned that their patterns are way different than Asian countries’. Even there is a fine line between percentages of female drug users and male drug users. In Indonesia the percentage of female drug users was more than male drug users which is not the same in the Islamic Republic of Iran.

“For effectively prevent drug use we have to consider the dropouts. Most of them leave collage or school because of drug use.” he said.

As he explained drug use is not limited to a certain level of the society and nobody is immune to drug use. However the minority of the drug users are workers and drivers. He described that in most of the studied cases they had started their drug use with cigarettes. He also stated that 75% of our young population initiated drug use when they were below nineteen-year-old by drinking alcoholic beverages and smoking cigarettes.



Then he described the drug abuse epidemiology in the Islamic Republic of Iran. He stated that the opium use has decreased; instead crack use has increased lately. He continued his speech by presenting examples likely as, in South Korea; injection is one of the most common methods of drug use (67%). According to statistics, 54.8 % of drug users did not have any special reason when they first started using drugs. Some of them started to use drugs since their friends suggested them to do so. He added that it is going to cost a drug user approximately three billion dollars to only buy drugs, which is a huge problem. As Dr. Narenjiha explained, they had provided a precise programme to prevent drug abuse in 2008. He elaborated that their approach in preventing drug use is community-based. He explained that with regards to their community-based approach their organization is planning to have training programmes for different residential settings. Dr. Narenjiha explained the importance of providing correct information for the people, especially those who usually do not have access to it.

After the speech of Dr. Narenjiha, Mr. Taherinakhost asked the participants to introduce themselves. There were from Tehran province as well as other provinces.



The next speech maker was Prof. Faggiano who appreciated UNODC for providing such an opportunity for him to be in the Islamic Republic of Iran and exchange his ideas. Then he described the role of monitoring and evaluation programmes in the field of drug abuse prevention. He started his speech by explaining their own prevention project in Italy, including nine Arabian countries such as Egypt, Lebanon and etc. Central Asian countries like Tajikistan, Kazakhstan and etc. were also included in this monitoring and evaluation programme. Once more he expressed his happiness on participating in such a workshop which would provide an opportunity to examine the practicality of their project in a middle Asian country such as the Islamic Republic of Iran.

Second Session - Wednesday, 9 December 2009

After the break, Prof. Faggiano was surprised of the knowledge of the participants on the subject; therefore, he decided to move on to more critical problems and their solutions. He said that the main goal of his presentation is to coordinate some basic elements in this area.

Prof. Faggiano expressed that drug use has a process which all the participants are aware of it and mentioned that this is a great opportunity to elaborate it. He continued his speech by this statement that, a person who starts to use drugs as his amusement does not have any problem at first. On his elaboration on the related harms he mentioned the necessity of studying each drug with its own related harms. Later in his speech he described drug use as a disease that has some particular features. He emphasised that drug use would lead to a permanent change in the character and the person involved with drugs can not be the same person anymore. “Even if he quits using drugs for years; he can never be the same person” he insisted. He explained that when a drug user sees drugs, some of his neurons remind him of the first pleasant feelings of his drug use and this will tempt him to use drugs again. He even provided an example of himself and expressed that he have had the same experience with cigarettes. Prof. Faggiano explained that he had quit smoking twenty years ago, but because of the loss of one of his best friends and many pressures that he had faced at that time, he started smoking again. He compared his case to those dealing with stronger drugs and said it is going to be more difficult for them to ignore all these temptations. He also described the following chart:

Natural history of drug use

No use ↔ Use without problem ↔ Problem use ↔ Drug use ↔ Health & Social effects



“I myself as a physician know the importance of prevention. This is one of the challenges of the community. Drug use has many destructive effects on both individuals and the society. Whoever uses drugs, limits his pleasures in life. For instance, a smoker may prefer his cigarette instead of enjoying watching a beautiful painting”. Prof. Faggiano said.

He labelled drug use as an important problem and explained even if it does not harm a person severely; it still is a big threat for that person and the society as well. He explained that for preventing drug abuse, we should observe and study drug user features and according to these kinds of surveys we can plan an appropriate programme to prevent drug use.

He then continued his speech by introducing a research for reducing the social effects of using heroin which is implemented in Switzerland. He also elaborated on prescribed drugs and said that in some special rehabilitation centres free methadone or heroin is prescribed to drug users. He explained that this method was a good technique to reduce HIV/AIDS risks and street wanderers as well. He later described that controlling drug use and its related harms as well as getting the drug users back to their normal life are the main purposes of the mentioned rehabilitation centres. Prof. Faggiano explained the concept of prescribing methadone as a method to prevent drug users from risking their lives as well as the life of others by stealing, using violence and etc. “Even giving low dosages of methadone to drug users can reduce risks of injection and many other unpredictable risks” he said. Prof. Faggiano once more insisted on performing survey and study on drug use stages and declared that it has got many unknown stages. He insisted on the necessity of finding the reasons, making a person to use drugs and labelled it as the most important step in preventing drug use.

“Any kind of drug has potentials to cause dependency. Heroin and tobacco are two kinds of drugs which have ability to cause strong dependency but heroin causes psychological dependency as well.” Prof. Faggiano said. He attracted the participants’ attention to this issue by demonstrating the findings of some researches on the dependency of tobacco. According to the research, 32 of every 100 first-time tobacco user continue smoking. The research also indicated that 17% of the sample group (100 people), using cocaine for the first time continued their use. Regarding the first time alcoholic beverage users 15% of the sample group continued the process. Prof. Faggiano mentioned that using cigarettes

(tobacco) for the first time is not pleasant but the user will continue smoking it, on the other hand using heroin for the first time causes euphoria for the person which can be a reason for considering heroin more hazardous.



Interrupting prof. Faggiano one of the participants said that in the Islamic Republic of Iran, using tobacco and drinking alcohol is not considered as using drugs and it is very common amongst people. Most people think that heroin or other strong drugs are real drugs and they don't consider tobacco or alcohol as drugs.

Prof. Faggiano responded to the mentioned participant's statement and pointed to a key point in the participant's statement and said: "Whenever any kind of drug is considered as a normal thing, it is much more difficult to avoid it in a society". He continued and mentioned that the fact of considering a drug, common in the society is one of the reasons for young population to use drugs and said: "They think if they do not use these common drugs they are not normal". Prof. Faggiano also provided the solution to this problem and explained that this common image of drug should be effaced in the society. He explained that for instance teachers and professors should quit smoking in front of students or even police should not smoke in public areas, also smoking should not be demonstrated in movies; smoking should not be advertised.

Later that day he continued his lecture by introducing possible interventions destined to prevent drug use.

Prof. Faggiano then stated: "We know all the consequences of drug use in the very last state of it, when treatment becomes important and necessary". He also explained the ignorance of factors, encouraging people to use drugs and concluded that because of this we, as the experts of this field have to prevent people from using drugs even just once in their lives. He also stated that a European institution tried to evaluate a preventive programme among 15-17 years old students in Arabian countries and central Asian countries such as Tajikistan. In this evaluation they informed students on the disadvantages and terrible consequences of drug use. Students heard the information but no changes happened in the pattern of drug use. They kept using drugs though they were fully aware of the consequences. Prof. Faggiano continued that the important thing is that these students who become drug users do not cover life skills such as saying "No" to those things that are not good for them and just because their friends suggest them to try

drugs they do so since; they think if they say no they will be ignored among their friends. He referred to the same research again and explained that those students, who have the life skill to say “No”, are five times more immune to drug use than others and those who do not cover this skill are four times more at risk.



Prof. Faggiano agreed with the point of view of one of the participants, mentioning that the lack of self-confidence could also be considered as one of the drug use reasons. He also added that young population think smoking is a normal action in the society and that is because we see people smoking almost everyday in streets, public places, advertisements, movies and even in universities. This fact makes smoking cigarettes, a normal action.

Prof. Faggiano warned on the importance of prevention strategies’ planning and said: “We have to be very careful because the strategy may have negative effects at the end”. He continued that several different theories are present in prevention strategies but they can not go further just by theories. He explained that some years ago they thought that drug users did not know the disadvantages, destructive consequences and relevant harms of drug use but nowadays if you ask any drug user “whether he/she is aware of the relevant harms of drug use or not?”, most of them would answer positive.



Later that day Prof. Faggiano described a project, performed in an Australian school. A group of uniformed police went to this school to inform students on harms of drug use as well as disadvantages and destructive consequences of it. They also describe a good life without using cigarettes and alcohol. The project seemed doing fine. Even the government was impressed by this project in result of which they decided to extend this project in other schools of Australia as well. After two years they evaluated this project. Ironically it had negative effects among students. The statistics demonstrated that the rate of alcohol and cigarette use was increased in the mentioned schools (25% among girls and 19% among boys). He continued that in fact this project was considered as one of the strongest prevention projects but it did not work as it was expected. "Maybe they should not have used police as trainers" Prof. Faggiano said. He stated that planning prevention programmes are very crucial. In this context, he also mentioned another example of unsuccessful project. This project was implemented in the United State of America in 1997. It was about the advertisements on Marijuana and Hashish prevention in media. One and half billion dollars were allocated to this project. The advertisement started with the scene that some young people use drugs and they get on the car. They drive very fast and at last they have an accident, all die in this accident. Prof. Faggiano explained that Policy Control Organization of United States of America decided to allocate some of this budget to monitor and evaluate the project. This advertisement was supposed to prevent young population from using drugs, but the result demonstrated that the usage of Marijuana (21%) and Hashish (2.5%) increased! Prof. Faggiano concluded that it is obviously clear that young population did not get the message of that advertisement and they thought using drugs is something that people do and it is normal. He then re-stated that before planning any programme, we have to consider all the aspects of it to check the potential negative effects.



Later that day Dr. Narenjiha participated in the discussion and emphasised on updating the drug prevention patterns in the Islamic Republic of Iran as well as the necessity to provide right and appropriate education for people on drug use such as this fact that Meth-amphetamine (Crystal) has been a very common drug in the Islamic Republic of Iran lately. Dr. Narenjiha mentioned that the information on Crystal was very limited when its use increased in the society and it took two or three years to collect the

necessary information about it. He also mentioned that it took a very long time to know how to prevent Crystal use in the society. Dr. Narenjiha also expressed that it was obviously too late because it had many victims already. He explained that evaluating a prevention programme takes time and suggested to plan a strategy, providing tools for young population not to use drugs not even for the first time.

Prof. Faggiano commented on Dr. Narenjiha's statement and said that the research he has been talking about was implemented in 1994 and at that time Crystal was not introduced to the market. He added that discussing Crystal prevention programmes is quite difficult since it includes many integrants and there are many different kinds of crystal. He also mentioned that according to the statistics provided by the Islamic Republic of Iran, the most common used drugs are tobacco and heroin not Crystal.

One of the participants expressed his point of view in this regard and said we should also notice unsuccessful programmes in this field. In fact these unsuccessful experiences can assist us to prevent other failures. He also suggested monitoring and evaluating the conducted programmes regularly since it would assist us to recognize the problems in the process and avoid them in the future. The participant expert also suggested to compare the performed strategies of Islamic Republic of Iran with other countries' strategies once in a while and added: "by these comparisons, we, as the experts of this field can improve our programmes". He also pointed to the fact that monitoring and evaluation of a programme takes a lot of time and money because of which he suggested to use the results of the performed evaluations of other countries' prevention programmes. In the other hand the result of the performed evaluation on our prevention programmes may be useful for other countries such as Greece and etc. as well.



Third Session - Wednesday, 9 December 2009

After the lunch break, Dr. Narenjiha once again handled the session and presented information on drug use prevention in the Islamic Republic of Iran; programmes, projects and activities. He explained that the main focus is on Ministry of Education and in this context a drug use prevention package was prepared for kindergarten's children. The second area of focus is on training centres, schools and families. Dr. Narenjiha continued his speech explaining that the budget of the mentioned project was presented to them in

1381 (2002). In this context, a number of experts have been trained and had been sent to other provinces of the Islamic Republic of Iran to train relevant experts.

Dr. Narenjiha elaborated the subject and said: “We should be more careful on collecting data in this regard since we intend to evaluate the drug use prevention programme this year”. He also mentioned the purpose of school-based programmes and prioritized it to teaching life skills to the students and their parents. He said that they have trained a number of soldiers from Army Forces of the Islamic Republic of Iran to train other people from different districts of Tehran province and Basij human resources, working with families. Dr. Narenjiha mentioned the production of some television programmes in the field of drug prevention. He also promised a CD named “Shock” which is about drug prevention and life skills and aims at university students as its main target. He added that 150 drug prevention mottos are being prepared and will be sending to other cities of the Islamic Republic of Iran. In this regard, Dr. Narenjiha mentioned that a movie is going to be produced on “Life Skills Training” by Mr. Bijan Birang, one the famous directors of the Islamic Republic of Iran with the cooperation of UNODC.

He concluded his speech by referring to the deficiencies discovered according to the performed evaluation activities and said: “In my opinion, we have to find those high-risk students in each school after which the primary drug use prevention activities should be performed for them.”

Regarding the speech of Dr. Narenjiha, Dr. Damari asked about the principles of the performed programme in 1382(2003).

In response to Dr. Dammari’s question, Dr. Narenjiha said some of the activities started years ago but the rest of them such as compiling and developing packages for soldiers have begun since 1386 (2007).

Dr. Rafiee continued the workshop by presenting a lecture on the community-based drug prevention in the Islamic Republic of Iran; initiating of the programme as well as drug trafficking.

Dr. Rafiee stated that there are two million drug users who are severely involved with drugs and obviously there are many others who are using drugs just for their amusement. He described the Community-based programme as a participatory activity and explained after the failure of their performed programme, they had a meeting with their colleagues from the other provinces of the Islamic Republic of Iran to assess and evaluate the programme. He added that they can not eliminate risk factors in many circumstances and for that reason they have to tolerate the situation and try to apply a different solution to the problems. Dr. Rafiee said: “one of the advantages of community-based programme is that if we can not find the ways to success, we already know the ways to failures instead thus we can avoid making the same mistakes, demonstrating that this is an issue which takes time to be succeeded.”



Later that day Dr. Ehterami explained community-based drug prevention programmes in the Islamic Republic of Iran in the past. He also explained the results of a drug use prevention programmes.

Dr. Ehterami described their project and explained the approach of the mentioned programme that was community-based and was considered as a health intervention in all districts. This project was carried out according to the complied programme which was given to them in 1382 (2003). Dr. Ehterami mentioned that they had held some focus group meetings with the cooperation of statistics' experts and sociologists after three years. He stated that they decided to evaluate their own project. Their samples were the people living in districts of different provinces of the Islamic Republic of Iran. He stated that the methods for implementing this project in each province were different. "There were also differences in culture of every province therefore based on the necessities of each province we allocated different amount of money." Dr. Ehterami said. He insisted that the achieved results indicated that after four years, the positive points of the performed project had superiority to the deficiency of it. "Risk factors were decreased 12% in average and there were an obvious difference between provinces." he explained.



The next speech maker was Dr. Aghtar. He continued the workshop and elaborated the current and the future of community-based drug prevention programmes in the Islamic Republic of Iran.

Dr. Aghtar said that he has been working in this field for ten years. He added that they had started their activities when they observed the dire need of community-based programmes. He admitted that one of the problems in the Iranian society is negligence of mistakes. Dr. Aghtar stated: “we are working with community; we can not hide our mistakes because we are working with people”. Dr. Aghtar called the participants’ attention to the switch of approaches of the In-Charge authorities in 1381(2002) towards drug use. He said that at that time they had understood that a drug user is not a criminal but a patient who needs care and treatment. He also described the change of attitudes of police forces as the result of the change in authorities’ attitude. Dr. Aghtar admitted that the general director of anti-narcotics police had allocated much more budget to the drug use prevention projects; they were not successful in achieving their goals, though. He also mentioned the good points of their project which was the attitude change of Drug Control Headquarters of the Islamic Republic of Iran. He said: “They decided to prevent drug use instead of fighting against it”. Another issue in their project implementation was the change of manager at the time and said: “The management was changing every 6 months at that time and the interested party was not a part of the management”. He admitted that nowadays young people are not afraid of posters which try to illustrate drug use relevant harms in frightening pictures and they even enjoy watching horror movies. Dr. Aghtar stated that this is why we should find other methods to prevent drug use amongst them. He said our situation is no longer like before and we should update our knowledge as well as ourselves with the new criteria and society. Dr. Aghtar considered the planning of drug use prevention programme a difficult task and explained that the drug use prevention programmes must be designed considering the needs of people therefore; the relevant experts have to go among them and listen to their needs. “We have to act like a facilitator and we should guide them to a right road of life” he said. He considered three areas in community-based programme as follows:

1. Urban districts
2. Educational environments
3. Workplaces

He then elaborated the subject and described that they had tried to connect people in urban districts by advertising in media but that was not successful. Thus they had entered districts by holding Quran reciting courses. Dr. Aghtar continued that they did not promise people to solve their problems but they did their best to do so and they collected as much data as they could. He described people with the term “more satisfied” after participating in drug prevention programmes. Dr. Aghtar also explained that reading brochures or observing posters were not interesting for people. They wanted something more practical and tangible. They like to make their own wallpaper based on their needs. He also stated that people like to participate in prevention activities and have the opportunity to inform other people. He said that according to the evaluation results the participation of people in relevant activities had been increased. He also provided the following details: “In 1384 (2005), 675 urban districts were covered, in 1385 (2006), 873 urban districts were covered and in 1388 (2009), 1116 urban districts were covered by their programmes. In workplaces, the target groups were supervisors, employees, and employers. They could cover 332 workplaces in 1384 (2005) and 375

workplaces in 1388 (2009). In educational settings, we covered 1627 educational environments such as pre-schools, schools, collages and universities in 1384 (2005).”

Dr. Aghtar informed the participants of a serious problem which was “not analysing the situation and not having a policy to confront drug use problem”. He said that the only solution for this problem was to encompass a defined policy. He also mentioned that with all recent changes in the society, people want to have a healthy environment for their children and also themselves.

After that a few question were raised by the participants whom Dr. Aghtar answered and the participants discussed the mentioned subjects.



Fourth Session - Wednesday, 9 December 2009

After a short break, Dr. Vosoogh continued the workshop by explaining the current proposal on evaluation of community-based drug prevention programmes which should be performed by representative of Iranian evaluation team. He stated that according to a research conducted by the Ministry of Health, Treatment and Medicine sciences , in 1381 (2002), one of the most common reasons for premature death was drug abuse.

“The most important limit of this research is the lack of accessibility to data and relevant point of views in the research environment.” he explained.

After Dr. Vosoogh’s speech, Prof. Faggiano handled the workshop and explained the impact of drug prevention interventions index.

Prof. Faggiano insisted that analysing and surveying the situation is prior to prevention interventions and considered the lack of it as one of the most important and common issues in the drug use prevention field. Of course he admitted that priorities can change based on the situation. The next step after evaluation is problem existence check as the next step after evaluation. “If the problem still exists, we should amend our method” he explained. He stated that the following three basic elements should be very well considered:

1. Intervention

2. Process (this is one of the most important parts of a community-based drug use prevention programme)
3. Input

Following his explanations prof. Faggiano clarified “Direct contact” and “Prevention” as two different things. He introduced an example and named “Stress” as one of the main problems in any society. He said: “It can be cured to some extents by medicine, but the impact of that medicine depends on its result and there are some factors for a satisfactory result”. He explained that the ability of the physician in understanding the patient and their need as one of the important factors. The other factor is the right diagnose of a physician and the patients perseverance in following the exact prescriptions. He stated that even if you consider and performed the mentioned factors thoroughly, yet the impact on the result would be 28%.



“We should know that our goal is to prevent those people who are in high risk of drug use (10-20 year-old population).” he added.

Prof. Faggiano considered evaluation as a critical phase of a prevention programme which is not easy at all and even called it “a complicated strategy”. He insisted that every part of an intervention should be evaluated separately. He also stated that the interventions should provide an opportunity for families to be involved in the programme and it also should provide them some tools to deal with the situation. At the same time these interventions should work on the relationship of children and their parents. He once again re-stated himself and said that for evaluating a programme, the situation should be analysed first.

Day Two, First Session – Thursday, 10 December 2009

In the second day, Mr. Taherinakhost started the workshop and provided a summary of the first day's achievements. It was continued by the question and answer session. He also announced that they were going to have a group work that day.

Mr. Taherinakhost stated that there are three important things that he could mention about the previous day. He mentioned the agreement of participants on having an evaluation and need assessments as the most important thing. The second thing which he named was the agreement they achieved with almost all related organizations on performing a monitoring and evaluation programme –It is important because it is a participatory job-. Mr. Taherinakhost said: “Considering some community-based programmes, which are based on health promotion, we have to consider the process as an important factor as well as the impact”. He mentioned that there were many expectations from a monitoring and evaluation programme. He stated that some implementers decided to perform evaluation programmes to persuade others to continue prevention programmes and some other decided to perform it since they want to achieve better results. In this context, he expressed his hope for achieving better results which could lead to utilise the achieved results as a prevention policy in the nationwide. He introduced the available data as one of the possible options and mentioned basic data collection as another possible option. Mr. Taherinakhost explained it would be better to use available data as much as it is possible and also produce new data as well. In result of which a model could be created according to those data to have a new prevention programme which would be qualitative as the final possibility.

After Mr. Taherinakhost, Prof. Faggiano once again handled the workshop. Prof. Faggiano explained that, on that day he wanted to lecture on effective indicators in evaluation but he preferred to have a quick review on the previous day conclusions. He re-stated that an appropriate project has appropriate inputs and process and its impact should be evaluated. He said: “Whenever we want to evaluate a system or a project, we should consider its input, process, output and its outcome to have an organized evaluation”. He said: “provided that we have effective results, we can use this prevention project to have epidemiologic evaluation”. Prof. Faggiano explained that the interventions could be considered as the input data and the health status of people could be considered as the output. He elaborated the concept of output and said that output data are what we obtain through processes such as reports, statistics and results during and after the implementation process of a project. He even mentioned an example and said: “For instance, we are working on 100 schools. If we performed an activity in one of those schools, the outcome is the students who did not use drugs. As he explained whenever we want to have an intervention (input), we should initiate with a theory. Prof. Faggiano insisted that it is very important to acknowledge the theory we want to use, what exactly our principles are, which kind of intervention is convenient for the desired situation and what our basic data are. He said that previously obtained statistics should be used as our basic data. He mentioned the following step as a highly important one, because in that step we were supposed to survey all the details. Prof. Faggiano said: “Any failure or any error should be explained in this step”. Prof. Faggiano explained output as results and defined impact as: “how faithful we have been to the principles”. He said this is why we have to define exactly our principles at the beginning of the project. “For finding accurate indicators, these explanations may help you.” he said. As the next stage of the workshop, participants were divided into working groups and Prof. Faggiano asked every group to work and find indicators of input, process, output, outcome and impact without thinking

how they are supposed to evaluate their projects. He suggested the participants to think theoretically.



Second Session - Thursday, 10 December 2009

The participants endeavoured to find out the requested indicators in their working group and then they took a short break after which each group presented their group work and the achieved results.

Group one find out the requested indicators for neighbourhoods and the achieved results was presented by their representative. She explained their outputs as followings:

1. Number of neighbourhoods they covered for their project
2. Number of programmes they compiled
3. Number of trainer's teams they organized

Outcomes:

1. Increased rate of social awareness on drug use prevention
2. Increased rate of social participation in neighbourhoods
3. Decreased rate of risk factors

Impacts:

1. Decreased Drug abuse in the society
2. Increased Health promotion in the society



Group two also worked on neighbourhoods. Their outputs are as follows:

1. Number of participatory activities' reports
2. Number of plans and participatory programmes
3. Amount of restored financial resources in neighbourhoods

Outcomes and Impacts:

1. Number of clean drug users
2. Similar programmes development in other communities
3. Increased Knowledge and life skills among people



The presentation of group three was on drug use prevention in workplaces. Their outputs are as follows:

1. Number of participants
2. Number of teams
3. Number of implemented plans

Outcomes and impacts:

1. Obeying the rules
2. Health promotion in workplaces
3. Empowerment
4. Promotion of organized participation level
5. Increased productivity in workplace



Group four worked on drug use prevention in schools and universities. Their outputs are as followings:

1. Rate of Knowledge, attitude and life skills
2. Number of reports sent by teams
3. Number of trained teams based on the standard work guidance

Outcomes:

1. Rate of healthy schools and universities
2. Rate of academic failure
3. Rate of students who leave schools or universities

Impacts:

1. Rate of Health promotion
2. Rate of drug abuse prevention

After the presentations Mr. Taherinakhost continued the workshop and said: “In my opinion, it would be helpful if we organize the indicators which we defined today. With your cooperation we can use them in smaller groups in community. He suggested preparing a proposal and forwarding it to some organizations such as the State Welfare Organization or educational organizations via Drug Control Headquarters of the Islamic Republic of Iran to complete the activity. Mr. Taherinakhos made two suggestions: one was implementing monitoring and evaluation programme with the existing information and the other was collecting information and working on drug use prevention projects to implement a monitoring and evaluation programme in the next five years. He insisted that the participants should consider the fact that they should define their based lines and principles prior to any other thing. He also suggested to hold another training workshop

with the presence of Prof. Faggiano in the following few months, upon the participants agreement.

Dr. Rafiee explained his point of view regarding this suggestion and said he does agree on implementation of a monitoring and evaluation programme. One of the participants supported Mr.Taherinakhost and suggested to hold these types of workshops also for other provinces of the Islamic Republic of Iran.



At the end of the workshop Prof. Faggiano expressed his appreciation for holding this workshop and said:

“In my opinion, we did a great job. You have an appropriate drug use prevention programme which you have applied it for years. It seems that it did work. It is very good to hear that you have found a way to get close to people and apply your drug use prevention programme”. He also expressed his happiness and said that he was glad that everyone agreed to perform a monitoring have an evaluation programme at this point of their work which it is indeed very important. He then instructed the participants to finish their list of indicators and insert any necessary changes to finalise them. Prof. Faggiano suggested creating a monitoring and evaluation system benefiting from the list of indicators obtained. Also he requested to collect data in this regard in case there is no data base available. He said: “I think this workshop was a successful one and I presented a small part of a monitoring and evaluation programme and the rest was your successful work and participation.”

The workshop adjourned at 16:00.

Annex I

Agenda of Monitoring & Evaluation

For Community-based Drug Prevention Programme in I.R. of Iran

<i>Time</i>	<i>Topic</i>	<i>Speakers</i>
First day: Wednesday, 9 December 2009		
10:30-11:00	Opening: - Opening statement	Mr. K. Moradi Deputy Representative, UNODC COIRA
	- The history of drug use prevention in I.R. of Iran	Dr. Narenjiha, Director General of Drug Prevention Office, Drug Control Headquarter
	- Brief outline of drug abuse epidemiology in I.R of Iran	
	- Brief outline of Community-based Drug Prevention Programme methods and objectives	
- Objectives of UNODC “Nationwide Drug Prevention Measures in the Islamic Republic of Iran” project	Mr. H. Taherinakhost National Project Coordinator, UNODC COIRA	
- Planning further activities		
11:00-11:30	Introduction of participants: - The current position of participants in the Community-based Drug Prevention Programme - The role of participants in implementation of Community-based Drug Prevention Programme	All participants
11:30-12:00	Break	
12:00-12:30	Introduction: - The role of programme evaluation in the field of substance abuse prevention (presentation)	Prof. Fabrizio Faggiano Int. Consultant, Avogadro University
12:30-13:15	The natural history of drug problems: from experimental use to drug dependence (interactive discussion) - Theoretical stages and progression through these stages - Factors influencing the progression or regression through stages: the intermediate factors - Possible interventions with aim of preventing drug use and progression into the natural history (primary prevention, harm reduction, treatment) - Specifications of I.R of Iran situation	Prof. Fabrizio Faggiano Int. Consultant, Avogadro University & Participants
13:15-14:00	Lunch	
14:00-14:15	- Drug prevention in I.R. of Iran; programmes, projects, activities	Dr. Narenjiha, Director General of Drug Prevention Office, Drug Control Headquarter
14:15-14:30	- Community-based Drug Prevention in I.R of Iran; initiating of programme	Dr. Rafiee, Ex-Director General of Drug Prevention Office, State Welfare Organization, University of Welfare and Rehabilitation Sciences
14:30-14:45	- Community- based Drug Prevention in I.R of Iran; past	Dr. Ehterami, Ex-Director General of Drug Prevention Office, State Welfare Organization
14:45-15:00		

<i>Time</i>	<i>Topic</i>	<i>Speakers</i>
First day: Wednesday, 9 December 2009		
15:00-15:20	- Community-based Drug Prevention in I.R of Iran; present and future	Dr.Nafariyeh. Deputy for Prevention, State Welfare Organisation
	- Current proposal on Evaluation of Community-based Drug Prevention by Representative of Iranian evaluation team	Dr. Vosough. Secretary of Iranian Social Medicine Society, Rep. of Iranian evaluation team
15:20-15:40	Break	
15:40-17:00	Indicators of prevention interventions' effectiveness (interactive discussion) <ul style="list-style-type: none"> - Objectives of drug dependence prevention and identification of possible indicators - Definition of health indicators and discussion on instances coming from the international health statistics - Types of health indicators: incidence, prevalence, proportions, rates, mortality, morbidity, etc - Characteristics of health indicators: validity, precision, sensitivity, specificity, role of time, numerators, denominators 	Prof. Fabrizio Faggiano Int. Consultant, Avogadro University & Participants
17:00-17:45	Defining indicators for the evaluation of Community-based Drug Prevention Programme <ul style="list-style-type: none"> - Effectiveness versus process - Final outcomes versus intermediate variables 	Group work
17:45-18:00	Closure of workshop's first day	Mr. H. Taherinakhost National Project Coordinator, UNODC COIRA

Second Day: Thursday, 10 December 2009		
<i>Time</i>	<i>Topic</i>	<i>Speakers</i>
9:00-9:30	Opening: - Summary of the first day's main achievements as well as question and answering session	Mr. H. Taherinakhost National Project Coordinator, UNODC COIRA
9.30-10:20	Reviewing the discussions of the day before, groups should elaborate a list of suggested indicators to use in the evaluation - Effects of Community-based Drug Prevention Programme in reducing drug use (effectiveness) - Quality and completeness of the Community-based Drug Prevention Programme implementation process - Effects of Community-based Drug Prevention Programme in obtaining general effects, like quality of life (effectiveness) - Development of the Community-based Drug Prevention Programme implementation: schools, communities, families, individuals attained (process)	Group work
10:20-10:40	Break	
10:40-11:00	Plenary session: - Presentation and discussion of the proposals of four groups - Preliminary list of indicators for the evaluation of Community-based Drug Prevention Programme	Mr. H. Taherinakhost National Project Coordinator, UNODC COIRA & Participants
11:00-12:00	Target group of the evaluation: - Which target group should be studied by the Community-based Drug Prevention Programme evaluation? - How to choose a representative sample from the target group?	All participants
12:00-13:00	Summary of workshop's main achievements and planning on: - Needs for further methodological discussions - Next steps to be developed for the evaluation of Community-based Drug Prevention Programme - Opinions on the methods of workshop and changes in proposals - Next meetings to be scheduled - Sharing tasks	Prof. Fabrizio Faggiano Int. Consultant, Avogadro University & Mr. H. Taherinakhost National Project Coordinator, UNODC COIRA
13:00-13:15	Closure of the workshop	
13:15-14:00	Lunch	

Annex II

Evaluation Form of Monitoring & Evaluation

For Community-based Drug Prevention Programme in I.R. of Iran

5.Very Good	4.Good	3.Average	2.Poor	1.Very Poor
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Subject	Lecturers Scientific Mastery	Management of Topics' Presentation	Management of Time	Appropriate and Logical Continuance	Relation of Content with the Basic Topic	Group Work
-Monitoring and Evaluation For Community-based Drug Prevention Programme	4.5	4	3.5	4.1	4.3	3.9

Subject	Very Good	Good	Average	Poor	Very Poor
The Quality of Place	15	6	1	-	-
The Quality of Food and Reception	16	5	1	-	-
The Behaviour of Administrative agents	18	4	-	-	-
Management and Workshop's Conduction Style	11	8	3	-	-
Participant's Opportunity to Take Part in Discussions	11	10	-	1	-

Question 1	Comments
<p>What are the strength points of the workshop?</p>	<ul style="list-style-type: none"> -Subject of workshop -Lecturer's mastery -Getting familiar with foreign experts' attitude -Experienced participants' attendance -Getting familiar with monitoring and evaluation community-based drug prevention programme -Giving appropriate scientific information and statistics related to the subject of workshop by Prof. Faggiano

Question 2	Comments
<p>What are the weak points of the workshop?</p>	<ul style="list-style-type: none"> -Time of workshop was too long. And made participants tired. - Some of the information was repetitive. -There was delay in some sessions of the workshop.

Question 3	Comments
<p>Suggestions</p>	<ul style="list-style-type: none"> - It would be better if conducting these workshops continue. -It would be better if the group work was more than it was.