

**ALCOHOL AND OTHER
DRUG ABUSE
PREVENTION STANDARDS**



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Maryland Alcohol and Drug Abuse Administration

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ALCOHOL, TOBACCO, AND OTHER DRUG PREVENTION PROGRAM OPERATING STANDARDS

Basic Principles of Prevention

Prevention is the promotion of constructive lifestyles and norms that discourage drug use. It is the development of social and physical environments that facilitate drug-free lifestyles. Prevention is achieved through the application of multiple strategies; it is an ongoing process that must relate to each emerging generation.

Science-based prevention refers to the process in which experts use commonly agreed upon criteria for relating research interventions and come to a consensus that evaluation research findings are credible and can be substantiated. From this process, set of effective principles, strategies, and model programs can be derived to guide prevention efforts. This process is sometimes referred to as research-or-evidence-based.

Effective Alcohol, Tobacco and Other Drug (ATOD) prevention programming:

- is based on a sound long and short term planning process, including an assessment of community needs and assets incorporating relevant state-of-the-art research into program policy, implementation and evaluation. The planning process must involve and be representative of the multiple systems within a community.
- provides opportunities for people to be meaningfully involved in the design, selection, planning, implementation and evaluation of the prevention strategies.
- meets the specific needs of individuals, families, and groups by including components which are ethnically and culturally relevant and age appropriate. In addition, the services are accessible to the population being served.
- uses the systems approach with the community in a collaborative effort. Each system's involvement is necessary but not sufficient by itself to ensure the maximum success of the program. In order to have an impact on a full range of target populations, all relevant systems must be included.
- develops a written document which establishes specific and measurable goals and objectives. The goals and objectives are based on a needs assessment and are tailored to reflect specific action plans appropriate for the target populations.
- includes a marketing component that advocates prevention by demonstrating effectiveness within the community and the respective target populations. It also includes a strategy for heightening public awareness, support and involvement.
- involves the use of multiple prevention strategies including information dissemination, education and training, social competency skills, alternative activities, environmental change, social policy and norm change, problem identification and referral, and community mobilization.
- takes into account the unique and special needs of the community and provides strategies targeting specific populations, e.g., youth, cultural, ethnic, high-risk, and gender-specific groups. The interrelatedness of each group is recognized in program development.

Purpose of the Program Standards

The following standards were developed to ensure consistent ATOD prevention services throughout the State of Maryland. The purposes of the standards are:

- to ensure that the Basic Principles of Prevention are incorporated into a comprehensive system of services.
- to establish consistency in the assessment, design, and implementation of prevention services.
- to provide standards for program quality through commitment to a meaningful evaluation process.
- to guarantee minimum standard of service for all recipients.
- to support family and community involvement in all aspects of prevention programming.
- to promote the inclusion and participation of all relevant agencies and individuals in the delivery of prevention services.
- to promote a continuity of service beyond prevention services as needed.

Purpose of Minimum Skills and Competency Guidelines

The Minimum Skills and Competency Guidelines for prevention staff were developed to ensure consistency in the level of knowledge and skills of persons providing prevention services throughout the State of Maryland. The specific purposes of the minimum skills and competencies guidelines are:

- to promote professional capabilities in research-based knowledge and practice.
- to promote continued professional development.
- to provide guidance for prevention program administrators when developing job descriptions, recruiting and hiring staff and volunteers.
- to establish guidelines for new staff and volunteer orientation and ongoing in-service training plans, as well as documentation of education and training received.
- to provide agencies and educational institutions with information for the development and ongoing revision of entry, intermediate, and advanced prevention curriculum.
- to ensure knowledge of the development and monitoring of contractual agreements.
- to ensure that staff and volunteers are qualified to meet contractual agreements.
- to provide support to community task forces, coalitions, and other prevention groups in the assessment of their technical and training needs.

Standard A: Participants' Rights and Responsibilities

The dignity and rights of participants in prevention programs shall be protected.

Guideline 1. Prevention programs shall have a written explanation on file of the civil rights and responsibilities of all participants and the means by which these are to be protected and exercised. These include:

- a. the right to receive all available services without discrimination on the basis of race, creed, color, gender, sexual orientation, age, disability, national origin, or marital status;
- b. the right to be informed of all rights and responsibilities;
- c. the right to a humane and safe environment;
- d. the right to an alcohol, tobacco, and other drug free environment, and
- e. the right to confidentiality.

Guideline 2. A grievance process shall be established. Participants shall have the right to access this grievance process in a fair, timely, and impartial manner.

Guideline 3. Prevention programs shall ensure that individual program content, goals, and objectives are available for review by interested parties.

Guideline 4. Prevention programs shall ensure that all staff and volunteers working with participants adhere to the Code of Ethical Conduct for Prevention Professionals.

Standard B: Program Development and Evaluation

In order to provide quality and effective prevention programs, a systematic and comprehensive method of development and evaluation shall occur.

Guideline 1. Prevention programs shall develop a long and short term plan relevant to the needs of the community which include:

- a. needs and assets assessment;
- b. program policy and implementation based on current and valid research;
- c. a written document which establishes specific, realistic and measurable goals and objectives; and
- d. realistic timelines shall be developed for program implementation and evaluations.

Guideline 2. The Prevention strategy adopted within a community must meet the specific needs of its respective individuals which include:

- a. ethnic, gender, age and culturally appropriate components;
- b. community involvement in all phases of the program development and evaluation; and
- c. accessibility for the populations being served.

Guideline 3. Prevention programs will encourage involvement of all relevant segments of the community in collaborative efforts which include:

- a. a design that plans for transfer of program ownership to the community itself, and
- b. utilization of community services and resources.

- Guideline 4. Prevention programs will have, as an integral component, a comprehensive method of evaluation which includes:
- a. scientific and current research methods;
 - b. identified components, strategies, and other relevant factors;
 - c. measured effectiveness in relation to the scope, intensity and duration; and
 - d. an evaluation plan as part of the program proposal.

Standard C: Program Implementation and Integration

Effective prevention practice shall involve the use of multiple strategies to accomplish its goals and objectives and demonstrate positive outcomes for effective programming.

- Guideline 1. A community needs assessment shall determine the need for prevention services; shall determine the appropriate prevention strategies to meet assessed needs and resources to implement the strategy.
- Guideline 2. A written document shall be established for the program with realistic and measurable goals and objectives which are:
- a. based on the community needs assessment;
 - b. research based; and
 - c. action plans appropriate to the target population.
- Guideline 3. A process shall be developed for identifying the target populations. This process shall include selection criteria and other identifying characteristics.
- Guideline 4. Prevention programming shall be integrated into regular and ongoing community activities and services including:
- a. referral linkages and collaborative community planning, and
 - b. preferably, programs offered in the participants' environment.
- Guideline 5. Prevention strategies include information dissemination, education and training, problem identification and referral, alternative activities, environment and social policy change, and community mobilization.
- Guideline 6. Individuals identified in prevention programs as needing more intensive services shall be informed of treatment options and encouraged to access them.
- Guideline 7. Prevention programs shall incorporate a staff and volunteer plan. This plan will develop:
- a. basic skills and competencies for successful implementation of the prevention activities, and
 - b. advanced skills and competencies including program coordination, education and training, community organization, public policy, professional growth and responsibility, planning and evaluation.

Standard D: Continuum of Service

This continuum includes prevention, intervention, treatment and aftercare. Effective programming recognizes the need for ongoing social change to support healthy communities; addresses the need for inclusion, and addresses all segments of the population, taking into account the unique and special needs of each community. These programs represent a continuous progression of strategies that meet those identified needs throughout life – prenatal to elderly.

Guideline 1. Effective programming reflects comprehensive planning and accountability for the following:

1. unique and special needs of the community i.e., language, physical disabilities, and cultural norms;
2. location of programming should be publicized through appropriate media to reach the target population;
3. location of program activities should be geographically accessible with consideration given to transportation needs of the target population; and
4. the process by which participants can access services along the continuum should be defined.

Guideline 2. The prevention continuum shall be composed of the following:

- a. **UNIVERSAL** prevention programs that reach the general population such as all students in a school;
- b. **SELECTIVE** prevention programs that target groups at risk or subsets of the general population such as children of alcoholics or drug users; and
- c. **INDICATED** prevention programs that are designed for people who are already experimenting with drugs or who exhibit other risk-related behaviors.

Standard E: Responsibility for Lasting Outcome

Effective prevention programming is an essential component of an overall public health effort which provides a variety of services along a continuum. Within this continuum is the understanding that prevention is a shared responsibility among individuals, agencies, and the community. Community level ownership and responsibility are the essential elements in program planning, implementations, and evaluation. Effective programming documents its research based theory, methods, and procedures so that other organizations may use these concepts to further program development.

Guideline 1. The sequence of prevention programming should be based on strategies reflecting a continuum of service. These considerations include each phase of the individual, family, and community development and empowerment.

Guideline 2. Prevention programming reflects shared responsibility among individuals, agencies and the community. The prevention provider is responsible for a balanced demographic representation of the community including grassroots groups.

Guideline 3. The prevention provider is responsible for documenting the needs assessment, program design, implementation and evaluation processes and outcomes to determine effectiveness. This documentation supports the development of prevention science, practices and replication of successful programs.

SKILLS AND COMPETENCIES FOR PREVENTION PROFESSIONALS

The prevention professionals must possess and maintain proficiency in program coordination and development; education and training, community organization; public policy, professional growth and responsibility; planning and evaluation.

1. Program Coordination and Development

Skills and competency will include the ability to:

- a. set measurable goals and objectives;
- b. design programs to meet the needs of participants;
- c. assess and evaluate program effectiveness;
- d. identify financial sources and appropriate resources; and
- e. identify, recruit and use volunteers.

2. Education and Training

Skills and competency will include the ability to;

- a. identify needs and provide for training;
- b. address the ATOD educational needs of the target population;
- c. design training and recruit qualified trainers;
- d. design and conduct training evaluations;
- e. provide prevention information to professionals in related fields; and
- f. address the education and training needs of the volunteers.

3. Community Organization

Skills and competency will include the ability to:

- a. network with other agencies, organizations and community members;
- b. facilitate opportunities for community empowerment;
- c. promote increased community involvement through the use of volunteers; and
- d. recognize and respect community diversity.

4. Public Policy

Skills and competency will include the ability to:

- a. advocate for ATOD prevention efforts;
- b. develop a working relationship with policy makers;
- c. articulate the purpose and role of prevention to communities, legislature, media and the public at large; and
- d. organize and present useful information in a written form.

5. Professional Growth

Professional growth skills and competencies include the responsibility to:

- a. develop public speaking and presentation skills;
- b. recognize existing community norms through awareness of culture, lifestyle, and other factors;
- c. participate in professional growth and development opportunities as appropriate to the professional's role in such areas as human development, behavioral health, alcohol, tobacco, and other drug abuse, family dynamics, family violence, family dysfunction, community collaboration, group facilitation, and communication; and
- d. understand and adhere to ethical and professional standards of conduct.

6. Planning and Evaluation

Planning and evaluation skills and competencies include the ability to:

- a. encourage and use community involvement in assessing, planning, developing, and evaluating programs;
- b. understand evaluation methods in order to measure process, outcome, and impact;
- c. assess community needs through various systematic data methods, and
- d. use evaluation information for future planning.

CODE OF ETHICAL CONDUCT FOR PREVENTION PROFESSIONALS

The Prevention Code of Ethics is a model standard for exemplary professional conduct. This Code expresses the professional's recognition of responsibility to the public, recipients, and colleagues. It guides members in the performance of professional responsibility and expresses the basic tenets of ethical and professional conduct. The Code calls for commitment to honorable behavior, even at the sacrifice of personal gain. This Code will be regarded as the goal toward which prevention professionals should constantly strive. The Code is guided by core values and competencies that continue to evolve with the development of the field.

PREVENTION CODE OF ETHICS

NON-DISCRIMINATION: The alcohol and other drug abuse prevention specialist must not discriminate against clients, the public or others based on race, religion, age, sex, national ancestry, sexual orientation or economic condition or against persons with disabilities.

RESPONSIBILITIES: The alcohol and other drug abuse prevention specialist shall exercise competent professional judgment when dealing with clients, the public and other professionals and shall maintain their best interest at all times.

COMPETENCE: The alcohol and other drug abuse prevention specialist shall provide competent professional service to all in keeping with prevention certification board standards. Competent professional service requires, through knowledge of alcohol and other drug abuse, skill in presentation and education techniques, thoroughness and preparation reasonably necessary to assure the highest level of quality service and a willingness to maintain current and relevant knowledge through on-going professional education. The alcohol and other drug prevention specialist shall assess personal competence and not operate beyond his/her skill or training level.

PROFESSIONAL STANDARDS: The alcohol and other drug abuse prevention specialist should maintain the highest professional standards and should not:

- claim either directly or by implication, professional knowledge, qualifications or affiliations that the prevention specialist does not possess; lend his/her name to, or participate in, any professional and/or business relationship which may knowingly misrepresent or mislead the public in any way;
- misrepresent his/her certification to the public or make false statements regarding qualifications to the prevention certification boards;
- jeopardize or compromise his/her professional status through the association, development and/or promotion of books or other products offered for commercial sale (for example, personal endorsement of products and/or techniques); and
- fail to recognize the effect of professional impairment, i.e., intoxication, drug use relapse, on professional performance and the need to seek appropriate treatment for oneself.

PROFESSIONAL OBLIGATIONS TO THE PUBLIC: Although certified alcohol and other drug abuse prevention specialists may feel a need to market themselves as competent or professional, they are to be mindful that they are discouraged from championing their own case by denigration of others. In addition, the alcohol and other drug abuse prevention specialist shall not engage in false or misleading communication about his/her own or other professional abilities, training and/or experience.

PUBLICATIONS: The alcohol and other drug abuse prevention specialist who participates in the writing, editing or publication of professional papers, videos/films, pamphlets or booklets must act to preserve the integrity of the profession by acknowledging and documenting and materials and/or techniques or people (i.e., co-authors, researcher, etc.) used in creating the opinions, papers, books, etc. Additionally, any work that is photocopied prior to receipt of approval by the author is discouraged. Whenever and wherever possible, the alcohol and other drug abuse prevention specialist should seek permission from the author/creator of such materials. The use of copyrighted materials

without first receiving author approval is against the law and, therefore, in violation of professional standards.

PUBLIC WELFARE: The alcohol and other drug abuse prevention specialist shall maintain objectivity, integrity and the highest professional standards in delivering prevention services, holding the best interest of the public first, and always striving to provide an appropriate setting to ensure professionalism and provide a supportive environment.

CONFIDENTIALITY: The alcohol and other drug abuse prevention specialist shall adhere to all applicable state and federal laws and rules, including reporting child abuse/neglect or misconduct by individuals or agencies. As such, alcohol and other drug abuse prevention specialists have the responsibility to be aware of and be in compliance with all applicable state and federal guidelines, regulations and statutes and agency policies regarding confidentiality, data privacy and professional relationships.

PROFESSIONAL RELATIONSHIPS: The alcohol and other drug abuse prevention specialist shall maintain an objective relationship with those he/she serves and shall not exploit them sexually, financially or emotionally. Further, the alcohol and other drug abuse prevention specialist shall maintain the ability and willingness to make appropriate referrals.

PROFESSIONAL INTEGRITY: An alcohol and other drug abuse prevention specialist should:

- never knowingly make a false statement to prevention certification board or any other disciplinary authority;
- promptly alert colleagues to potentially unethical behavior so said colleague can take corrective action;
- report violations of professional conduct by other alcohol and other drug abuse professionals to the appropriate authority when there is knowledge that said professional has violated professional standards and has failed to take corrective action after a formal intervention.

FINANCIAL ARRANGEMENTS: The alcohol and other drug abuse prevention specialist should not personally accept gifts or gratuities for professional work above and beyond the fees and gratuities being paid to the agency by which the prevention specialist is employed.

PROFESSIONAL PROMOTION: The alcohol and other drug prevention specialist should strive to maintain and promote the integrity of certification within the State of Maryland, nationally and internationally, and the advancement of the alcohol and other drug abuse prevention specialist profession.