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AUTHOR Harrison-Burns, Bettye; And Others
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ABSTRACT

This guide focuses on developing effective strategies for multicultural drug abuse prevention programs. The guide is designed to provide information that can assist minority communities in setting up drug abuse prevention programs in their neighborhoods. It discusses a holistic framework for empowering client populations and outlines four program designs: informative, eudcational, interveption, and those that offer alternatives. (Author/APM)

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A GUIDE TO MULTICULTURAL DRUG ABUSE PREVENTION: STRATEGIES

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Prevention Branch
Division of Prevention and Treatment Development
National Institute on Drug Abuse
5600 Fishers Lane
Rockville, Maryland 20857

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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PREFACE

The booklets in this resource guide were designed to provide information about concepts, techniques and strategies that can assist minority* communities in developing and evaluating drug abuse prevention programs to meet the specific needs of their neighborhoods, barrios, reservations, and towns.

These booklets are not "how to" publications. Every community, when viewed in terms of its needs, preferences, financial resources, and most importantly, inner strengths, is unique. There are no standard blueprints to address the needs of each ethnic community. The members of the community must work closely together to find solutions to common problems. We hope that these booklets will provide some guidance to beginning the process of community involvement in drug abuse prevention.

*the words "minority" and "ethnics of color" will be used interchangeably in this booklet. Many people feel that the term "minority" refers to a status of powerlessness within the system, and thus prefer "ethnics of color."

PREFACE

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How to Use this Booklet

This booklet on strategies, the third in the series, discusses a framework for developing effective strategies for multicultural prevention programs.

This Guide to Multicultural Drug Abuse Prevention series includes:

- Booklet 1: Introduction
- Booklet 2: Needs Assessment
- Booklet 3: Strategies
- Booklet 4: Resources
- Booklet 5: Funding
- Booklet 6: Evaluation

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SETTING THE STAGE FOR MULTICULTURAL DRUG ABUSE PREVENTION

Access and Empowerment

Effective drug abuse prevention pre-supposes the ability of individuals, agencies, and communities to alter the forces that cause abuse of substances. For ethnics of color, altering these forces requires above all, access to the political, social, and economic systems affecting the quality of their individual and community lives, and the recognition that those systems can, in turn, be affected and changed.

Among minorities, drug abuse prevention efforts have been severely hampered due to lack of such access. Institutional racism, unemployment/underemployment, inadequate housing, poor education, and lack of esteem for ethnic group lifestyles and values on the part of the dominant society have had a severe negative impact on minority drug abuse prevention efforts. The latter factor is best exemplified by the assumption of many policy makers that strategies designed for general use (white middle class audiences) can and will work in any community. What may seem ironic is the fact that much of the progress that has been made in the drug abuse field has occurred in minority communities with minority practitioners and clients. Dr. William Harvey, the director of a drug abuse program in St. Louis, stated in his keynote address to the Center for Multicultural Awareness' Symposium in June of 1980,

"It must be noted, however, that the combined weight of the (early) prevention forces, inside and outside of government was not sufficient to overcome or win over those committed to a Methadone - LAAM - Naltrexone solution to the problem. Rather, it took a coalition with another unheard, undernoticed constituency -- the ethnic minor-

ities . . . The minority leaders for the most part, did not come from academic settings or the government's intra-mural research campus. Rather, their experience was from a point much closer to the action. They lived, worked, and struggled in the communities with the high incidence of addiction and related crime. They were familiar with the intricate pattern of community resources and the many hurdles associated with tapping into them. Many were former addicts."

Program strategies and techniques designed for a multicultural audience, or any audience for that matter, must take into account the cultural settings, traditions, backgrounds, values, etc., experienced by the group to be served. Racism and discrimination, and their dehumanizing effects must be recognized and dealt with in the program design. But it is critical to note here that while it is counter productive to blame the victim and place the burden of solution on those experiencing discrimination, neither does it serve a purpose to claim helplessness and stand unmoving until the system changes. Empowerment is the key. Power, and its attendant level of responsibility, allows for a sense of independence and control, and must start at the personal level. When one takes responsibility for one's actions, within the given environment, there is power. Taken at a community level, this thought carries even greater weight, and can be seen in the light of systems change. Ethnic of color must see that they can be empowered to take charge of and control their lives and their environment. This means that they must have the resources and information that can assist them in assessing and impacting upon their environment and managing their personal lives in such a way as to reduce the possibility of problem drug use. Once these resources and information have been made available, it is then necessary to assist communities in developing skills for shaping prevention activities to meet the demand and expectations of their unique community cultural systems.* Then and only then, can "multicultural prevention" become a term which describes plurality rather than one which restricts ethnic of color.

In this booklet we will discuss various strategies and techniques (with some real life examples) for multicultural drug abuse prevention. The discussion is based on a holistic approach that takes NIDA's primary prevention modalities and makes them relevant to ethnic of color.

*"Community" used here refers to a self-defined group usually living in the same geographic area and identifying primarily on the basis of cultural similarity. A "cultural system" contains similar beliefs and practices in such areas as family networks, child rearing practices, moral precepts, traditional healing practices, etc.

The Holistic Approach

Drug abuse prevention services significantly increase their chances for success in minority communities when issues of economic, social, and political empowerment (or self-sufficiency) are addressed. This requires an approach which incorporates two concurrent concepts into design and delivery:

- individual empowerment: the full development of personal, social, economic, and political skills by which to manage one's own life in the short and long range;
- systematic change; impacting institutions (church, schools, governmental institutions, and others) to ensure flexibility and sensitivity toward accommodating differences and offering fair access and equitable participation for all.

Thus, minority leaders and program developers must design approaches for drug abuse prevention with an understanding of the whole set of community influences acting on individuals in those communities. These approaches must encompass not only the more visible target areas consisting of individuals, family, and peers, but also organizations (such as schools, social service agencies, parent groups; etc.) and the broader area of community socio-economic and political systems. Traditionally prevention approaches have been designed to serve only the individual, a peer group, or perhaps the individual's family. In using a holistic approach, services are geared to four areas: the individual, small groups or families, organizations, and the community at large. By networking with other organizations such as the schools, churches, the juvenile justice system, and others, a prevention program can have a greater knowledge of and impact on the individual and that individual's environment. The fourth target area, the community, expands the scope of prevention programming to include community organization and mobilization, and networking with such community elements as the media, the business enterprises (local and corporate), local government, and fraternal and other philanthropic organizations. This approach of involving all community elements and designing strategies which affect change can enhance a program's achievement of empowerment goals.

This holistic or systems approach is extremely important in that it extends the focus of attention beyond that of changes to be made within particular organizations. This approach focuses on maximizing linkages between members of the system so that there is mutually reinforced planning and action for long-term helping relationships, social/governmental policy changes, and socio-economic development which will benefit minorities as community groups. A complement to this focus on linkages is the

element of cultural accountability. It is crucial in any systems change approach to provide consistent support of those cultural systems being served. Thus, the community systems approach, as defined here, is the key element in individual and group empowerment, in that it simultaneously promotes cultural identity and political/social/economic power.

It is important here to identify and define those personal, social, political, and economic factors that can contribute to empowerment and systemic change. A number of questions need to be addressed in relation to these factors when designing prevention strategies, as portrayed below.

Personal Elements

- What is the effect of drug abuse on physical, mental and emotional health?
- How does drug use effect the power of the individual to control his/her life?
- What health issues impact on drug use?

Social Elements

- How do ethnic/cultural differences relate to stress and drug usage?
- How do age/generational differences relate to stress and drug usage?
- Are religious differences related to stress and drug usage?

Political Elements

- What are the political factions and elements in the community?
- How can these elements help or hinder systemic change in the community?
- What is the relationship between drugs and these elements (e.g., what law enforcement practices exist, how flexible is the juvenile justice system, etc.)?
- How much influence do the media wield politically?
- What special interest groups exist and how much power do they have?

Economic Elements

- What is the relationship between drugs and economics in the community?
- What is the economic picture of the community?
- Is there an underground drug market?
- What is the employment situation of the community, particularly for youth?

From the identification of these factors comes a broader knowledge of the helping and hindering forces at work in a community. More specific planning for prevention strategies that builds on this knowledge can now begin.

Early Planning Factors

As you are visualizing possible action strategies that adopt a holistic approach, it is important to think of planning and needs assessment issues (which are discussed in greater detail in Booklet 2: Needs Assessment). Some of these initial planning issues focus on these questions:

- How does this strategy relate to prioritized community needs and preferences, as indicated by your needs assessments?
- How does it relate to your resources, including those resources accessible through networking with other community organizations and institutions?
- How would this strategy be received by the community in general, the target group(s), potential funding sources, and other involved parties?

Once these questions are thoroughly explored and answered, it is possible to get into the specific details of who, what, where, why, and how much. A detailed list of planning questions that define the who, what, where, etc., is provided below.

1. Target Population

Who will be served by the strategy(ies)?

How will the target population be identified, selected, or rejected?

How many people will participate?

What will be the staff/client ratio?

Have they been involved in planning?

2. Methodology

What specific methods will be used?

Can their results be measured and accurately observed?

How much will they cost?

Is the cost justified in relation to other methods and the total budget?

3. Management/Administration

Who will implement the strategy(ies)?

Who will organize the program?

Who will teach or supervise it?

Who will be responsible?

Who will select the training?

Who will conduct the training?

Staffing-functions, staff load, etc.

4. Timing Considerations

When will the strategy be implemented?

How much planning time and staff training are needed before implementation?

How long will the program last?

When should it start?

How long is the funding period(s)?

5. Other Logistics

Facilities?

Recruitment plan?

Retention plan?

Ongoing community support plan?

Networking plan with community institutions?

Accountability to funding source and community (reports)?

6. Funding

Who is responsible for organizing a funding plan?

What are possible sources?
(see Booklet 5 for more details on funding)

Building to Empowerment

Admittedly, it is tempting to design a program with the intent of impacting upon all or the majority of socio-economic ills affecting the community. This holistic orientation is natural to minority groups, who tend to view substance abuse as a comprehensive social problem, rather than as an individual psychological problem. Valid as this view is, care must be taken from the start to maintain manageable objectives and scope of services and to build gradually on accomplishments. Otherwise, the program will be faced with overwhelming goals and objectives and will risk alienating community members should it not "live up" to admirable, but unrealistic intentions. In short, it is best to start small and build gradually! The extent to which a program can and should address each one or more of the target areas discussed earlier depends upon prioritized community needs and resources. (See Booklets 2 and 4 for further discussion of needs assessment and resource development.) Resources, of course, include those accessible through networking with other organizations and individuals.

Even if a program is new (in which case it is facing a host of challenges in terms of organizational development and community involvement), it can still address community-systems impact on a small, beginning scale. This is exemplified by community-based programs which establish staff members as liaisons between individual clients and service agencies, acting as advocates for both the individual's needs and for appropriate cultural approaches in delivery systems.

Economics and politics greatly affect the impact of prevention on individuals, communities, and society at large in this country. For example, by developing youth enterprise (i.e., building youth employment skills) in an inner city area, a prospect is created for a positive ripple effect: by making improvements in the job skills of a "small circle" of youth, an entire neighborhood area may benefit, thus improving social and political relations between ethnic and Anglo majority groups. However, no matter how well program staff facilitate youth employment skills, the impact of their effort is minimal if neighborhood civic associations and the local governing body fail to actively promote the employment of such skills. In sum, failure to create linkages for active support from above (i.e., local groups and local government entities) or at the "action level" (i.e., directors, staff, and minority families) will sooner or later signal obstruction of systemic change. It is therefore critical to network for change at all points. It is from this base that strategies must be developed for multicultural drug abuse prevention programs in the 1980's.

In selecting a program design that will foster individual empowerment and systemic change, there are several basic elements to consider:

Overcoming Resistance to Change

Resistance to change in the status quo is a recurrent issue in change processes. Those who are benefitting (or perceive they are benefitting) by the current set of circumstances are unlikely to "open up" until they perceive that an idea is sanctioned by a respected friend or established authority figure. Conversely, those who perceive that the change will bring about some sort of loss (of position, importance, resources, power, etc.) will fight that change at all costs. To bring about change, it is essential to identify and reach key people who will provide support, both within and outside the community, to overcome the resistance and fear that accompanies change.

Community Input

Changes which are more lasting - as opposed to crisis oriented remedies - occur when they are the result of ongoing community input. When soliciting community input, it is important to be sure to include these elements: sub-group representation, inter-generational representation, and key community leaders. Sub-groups may be numerous within any given community; for example, within an urban "Indian" community, there may be scores of tribes represented. Most American Indian people identify themselves as being part of a tribal group as opposed to the general notion of being "Indian." Similarly, Pacific Islanders may or may not consider themselves as being closely identified with mainland Asian groups. Taken community by community the number of possible examples is staggering. The important point here is that one should look closely at how people identify with the cultural groups around them. Inter-generational representation refers to providing for input from elders, parents, and youth - not just relying on youth input. Key leaders are often those working behind the scenes and not just those on the platform. Thus, finding out about the different kinds of leadership in a community is crucial.

In addition to involving the key community leaders, inter-generational representation and sub group representation, it can be beneficial in the early stages to network with a variety of other community institutions. To "network" (inform them of your

plans for services, solicit their opinions on how best to succeed and what traps to look out for, and question them on their experiences and efforts) brings about a sharing of information between groups and, hopefully, support from existing groups and community service providers. The idea is to pull them into your circle, improve communications, share information and resources, and determine how best to work together to achieve each groups' respective goals. On the next page, we present different components of a community, what their concerns in regards to drug abuse prevention might be, and how they can work together or help your program.

Involvement such as that outlined above provides the necessary base of sharing, through which lasting change in terms of knowledge and attitudes is possible.

KNOWLEDGE, SKILLS, AND RESPECT: KEYS TO EMPOWERMENT

Any prevention strategy -- whether it emphasizes alternative activities, such as recreation or arts, or whether it is designed to provide economic development -- must have as an underlying philosophy these elements: the transfer of knowledge and skills and the development of respect. Knowledge includes an understanding of the personal, social, economic, and political elements of life and their relationship to drug abuse. Skills are needed to survive. Attitudes of respect for self first and for others create a healthy environment.

Knowledge

In terms of drug abuse prevention, drug information is one aspect of knowledge. Accurate information about drugs and their known effects comprises the basis for making decisions about using those drugs. But this information is useful only if one understands the personal, social, economic and political causes and effects of using those drugs. In other words, how does using that drug effect the power of the individual, the family or the community to control destiny? Knowledge of personal, social, political, and economic realities is, in the long run, more important for prevention than knowledge about drug themselves.

Skills

Real skills are needed to survive in this world. Sometimes called savvy or street smarts, there are certain basic skills that make it less difficult to live. For example, the skill of calculation, the ability to make change, to add and subtract, to understand unit pricing at the grocery store, is a necessary skill. On a

deeper level consider the skill of communication, the ability to speak and be understood; to express feelings, thoughts and emotions; to relay verbal and non-verbal messages, is obviously a requisite for empowerment. Other skills, which are equally important and should be fostered include:

- decision making and rational analysis.
- understanding values of one's own group and other surrounding groups.
- self-development skills of leadership, risk taking, self-control, assertiveness, etc.

Respect

Respect for self and for others addresses attitudes that are critical for individual empowerment in a democratic society. Respect grows out of the awareness of the value and importance of differences among people. The dignity and self-esteem of the individual are fragile, intangible things which are influenced daily by how we live and what kind of treatment we receive from others. Dignity and self-esteem have been linked to drug abusing behaviors; that is, a lack of positive self-esteem and personal dignity is a real cause of drug use and abuse. The lack of respect for cultural and ethnic differences has historically been the major cause of racism and discrimination. Both subtle and overt messages have been sent to ethnics for too long that they do not measure up to the white so called "ideal" model. The results of lack of self-respect among ethnics of color and the lack of respect for the differences among cultures by the majority society are feelings of inferiority and acts of subordination. As ethnics we value differences and take pride in culture in the face of discrimination and racism. To achieve empowerment, prevention programs need to develop strategies that instill self-respect, human dignity, and pride. The end result can be success in drug abuse prevention strategies for ethnics of color.

We have discussed a variety of considerations which impact on multicultural drug abuse prevention, the need to recognize the influence of political, social, and economic factors on drug use; the importance of involving all parts of a community in prevention activities, and three elements of knowledge, skills, and respect which must be found in prevention activities. In the following section we will discuss program strategies and modalities and how they are implemented.

PREVENTION PROGRAM DESIGNS

The National Institute on Drug Abuse classifies primary prevention activities into four main categories or "modalities" (information, education, alternatives, and intervention.) Any one program can have any combination of these modalities carried out in a variety of ways. Often, prevention activities are a component of a treatment facility, or are incorporated into a school curriculum. Drug abuse prevention activities are often carried out by a community mental health center or a health service facility. As prevention concepts begin to receive greater acceptance and support, we are witnessing more free standing prevention programs, and other types of drug programs changing their focus toward prevention. There are many issues involved in each of these modalities which must be considered.

INFORMATION

It is rare that a prevention program is solely made up of information activities; rather information is provided with other services. In developing an information capacity of a program the following concerns deserve attention:

- audience: what is the target audience? Is it the whole community or just selected portions, such as parents of grade school youth, the elderly, teenagers, single women, etc.
- content: what does the target audience really want, or need to know? For example, is physical or chemical information sufficient or should other information also be provided?
- purpose: do you intend to only inform your audience or do you really wish to persuade, enlighten, scare, or influence the audience. Design a purpose and objective of the information activity in a clear and straight forward way that is appropriate to the cultural norms of the community. (For example, some Indian programs have found that scare tactics are a very effective means in preventing drug abuse. Other groups have found otherwise.)
- language: the presentation of information is just as important as the content. Is technical jargon or street slang more effective in getting the ideas across? Should the information be provided in English, a bilingual form, or in another language only? For that matter, should information be provided in a written form to get the desired results or would another medium (radio, T.V., posters, slide shows, films, etc.) be more effective?

- delivery: the most successful strategies in sharing information and awareness about drugs actively involve the participants in the process. Just passing out pamphlets or showing a movie without a discussion afterwards have not been proven very effective. The process of making pamphlets or posters, reviewing movies, designing and performing puppet and other shows, playing games, writing and narrating stories, debating issues, and critiquing movies, films, television shows, or written materials are much more useful activities because of the active participation.

EDUCATION

Education, as a part of primary prevention, implies exploration, learning, and examination that goes beyond mere sharing of facts. Education as a process is oriented to active participation of learners, imparting new knowledge, skills, and/or attitudes. It can mean learning skills to better cope with stress, examining and understanding peer and parental influence and pressure. It can be a vehicle for "clarifying" one's values and understanding the values of others. Education is much more than providing information.

Schools have traditionally been the primary vehicle for drug abuse prevention youth activities. Typically, school-based activities have fallen into the information and affective education areas. Affective education has emphasized values clarification, communication skills, decision-making, and self-esteem. These have usually been taught from a middle class Anglo perspective and have focused on the individual, with little consideration of community-wide influences.

This approach has clearly not been appropriate for multicultural drug abuse prevention. In order to develop an appropriate approach, we must first view education as a process, not an institution or product. Secondly, education must be a process which involves all groups which influence youth. With these views in mind, one moves beyond the traditional idea of education as being synonymous with schools, to the idea that groups such as families, peer groups, churches, parent groups, media, and the school are all integral parts of an ongoing educational process.

This view is crucial in that it is the basis for approaching multicultural drug abuse prevention as meeting the needs of the entire population in this country and not simply as an add-on to existing educational activities. With multicultural drug abuse prevention as an educational process involving the total population, the nature of educational goals and strategies will be changed. Goals and strategies will finally begin to address the personal, social,

and economic conditions necessary for individual empowerment and systematic change.

With this holistic approach, the three other primary prevention modalities - information, alternatives, and intervention - can be seen as part of an overall education process. Without such an overall educational process, information becomes simply dissemination of drug data, alternatives are just activities, and intervention will only be for those 15% that we missed somewhere on the road.

Within the context of a drug abuse prevention program that seeks to apply a holistic approach, the following activities (and many more) can be particularly educational:

Community Involvement

- meet with community leaders for them to explain "what they do"; attend city council/tribal council meetings, hearings, press conferences, speeches, schools board meetings, etc.
- conduct a community survey of needs, problems, assets, demographics, voting trends, or business statistics, etc., to "learn about the community" or to identify "what is right" and "what is wrong" about the community
- visit local business and industry including media, manufacturing, utilities, transportation, etc.
- organize a community improvement drive
- visit drug abuse/mental health services, court, police station, etc.

Creative Activities

- performing arts, i.e., drama, dance, voice, mime, etc.
- art work
- storytelling, recording folk history
- creative writing, newspaper, public service announcements, letters to the editor/editorials
- restoration/renovation
- media, filmmaking, photography

Economic Development

- youth business ventures (examples: silk screening and selling T-shirts, making/rebuilding furniture, writing and selling comic books.)
- fundraising activities (see Booklet 5 for ideas)

Personal Growth/Early Intervention

- peer counseling
- rap groups
- role exchange/role play situations
- decision-making skills exercises
- values clarification sessions

Materials and activities developed by local community members are a valuable method to share information, and a means to validate, which information is most accurate and reflective of their social environment. They can do the research, writing, illustrating, evaluation. The products can be displayed, disseminated and/or sold around the community, effectively spreading the word. Networking with colleges/media organizations is helpful for audio-visual equipment loans; volunteer media people can also help put the finishing touches on a film or booklet.

There are a variety of excellent, culturally specific drug information materials developed by local programs. For example, the TRAILS Program in Odama, Wisconsin developed an illustrated brochure oriented to Native Americans on communication/coping skills which included the use of legends in drug abuse prevention; PARA in Chelsea, Massachusetts developed bilingual flyers for Puerto Ricans; Casa de Amigos Program in Austin, Texas developed a film for Chicanos on sniffing. Also, the Do It Now Foundation has translated several of its flyers into Spanish.

ALTERNATIVES

A major goal of prevention is enabling individuals to have more internal control over their lives and less dependence/vulnerability to external factors such as drugs. Alternatives offer a wide range of options to help minority populations to be successful and to find enjoyment in personally meaningful ways.

The essential criterion of alternative activities is that they meet needs which drugs meet, but in a positive way. Dr. Alton Dohner, of the Indian Health Service (Public Health Service), emphasized that alternatives to drugs should:

- be realistic, attainable and meaningful;
- assist people to find self-understanding, improved self-image, feelings of significance; to achieve the expanded awareness of new experiences which they now seek through drugs;
- contribute to individual identity and independence;
- offer active participation and involvement;
- provide a feeling of identification with a larger body of experience and relate this experience to one's feelings; and
- touch one's feelings, emotions, and spirituality.

The Mexican American Council on Drug Abuse (MACADA) adds four more criteria:

- alternatives must be truly available and accessible;
- the person must be able to exercise the alternatives without feeling like a deviant;
- the alternatives must be at least as, or more attractive than, the behavior they are replacing;
- the alternatives cannot apply a negative label to the person exercising them. (prevention is not rehabilitation!) The alternatives cannot carry a negative social label.

Where drug abuse prevention activities are oriented to the majority population, efforts to accommodate cultural diversity have usually resulted in traditional arts and crafts, murals for Chicanos, martial arts for Asians, or occasional "international food festivals." etc. These activities are meaningful if they are presented and conducted in the context of respect for a culture's philosophy and an understanding of how it is expressed through certain characteristics. Otherwise, they become substitute activities rather than meaningful cultural expressions. Legends, for example, can provide a sense of personal continuity (an important part of our cultural "identity") in that they provide a sense of the past world order and how it links to the way the world is to be. Thus, legends serve to provide a message that we must persevere with the proper "vision" and dedication if we are to make the link to the future world. Taken in this context, legends can be useful in gaining a sense of one's cultural heritage and values, and the need to persevere in what one believes in. If legends are treated merely as tales, however, masterpieces such as the heroic legends of various Native American tribes are reduced to melodramatic stories.

Designing alternative activities presents a real challenge for local communities, for the factors leading to drug abuse are many and the answers are wide open. Recreation and sports activities come to mind first and are the easiest and surely most popular alternatives. Youth businesses and the arts projects (like murals), folktale collecting and telling, and dramatics can serve as both drug education and alternative activities. The Tulsa Indian Theater Dance Group, Immigrant Social Services' Tai Chi classes, and La Casa de Don Pedro Program in Newark, New Jersey (a program emphasizing Puerto Rican culture) are all examples of culturally specific alternatives. A particularly interesting alternative approach is that offered by the New Mexico Free Theater, a state-wide program which presents dramas geared to various minority communities. Each community presentation is preceded by site visits and is carefully geared to articulate that community's concerns so that members can recognize, reflect on, and begin to work on generating approaches to solve community problems.

The following lists provide examples of alternative activities focusing on all four levels of change. As is the case with information and education, activities oriented to organizational and systems change usually incorporate some aspect of individual/small group change.

Activities oriented to individual or group change levels:

1. counseling and group education activities (stressing affective and/or behavioral change) e.g., peer tutoring, counseling
2. drama or music groups
3. film making/booklets
4. life-coping skills instruction
5. recreational (family and/or peer oriented)
6. sports
7. cultural events/activities
8. employment skills development

Activities oriented to organizational or systems change levels:

1. organizing an alternative drug program within the school system;
2. providing outreach drug education class for local agency to promote awareness/planning to meet youth needs;

3. acting as a liaison between clients and local agency, to provide a point of contact for collaboration and policy change;
4. developing a community youth newspaper, filmmaking, booklets; distribution to promote awareness and collaboration between the program and public and private sectors (business, academia, government, etc.);
5. developing employment skills training and implement employment agreement between youth and local businesses;
6. participating in community-wide boards which impact on policy;
7. utilizing parent advisory group to provide input into development of drug abuse curriculum to school system.

One example of a program which has clearly diversified to cover all four types of prevention activities is the Youth Advocacy Program in Austin, Texas. Begun in 1965, this program addresses inhalant abuse among Mexican American youth through a variety of individual/group and systems change activities. Among these activities are:

- individual and group counseling;
- in-school drug education classes;
- participation in a nationwide prevention program in which small motorcycles are loaned out for riding to those youth who successfully progress in meeting pre-arranged behaviorally oriented contracts;
- active use of media (radio, T.V., and newspaper) through which they have developed effective working relationships with agencies; One result has been the program's active role in influencing the passage of a city ordinance restricting the sale of certain substances to youth, and program assistance in enforcement.

In viewing the varied approaches in alternative programs it becomes evident that there is no clear distinction between alternatives and educational activities. If, as stated previously, education is a process that leads to new skills, knowledge, and attitudes, alternatives then become part of an overall educational process affecting all parents, youth, and agencies affecting the quality of life in minority communities. Viewing and designing alternatives in this light helps to address not only personal and social factors, but also economic and political empowerment.

INTERVENTION

Early intervention is prevention, not treatment. It means stepping into the social reality of a youth and/or the entire family before drug abuse is a chronic problem. Working with a client or a client's family about related stress problems, helping them to gain control over their life situation, and dealing with stress can help prevent drug abuse.

Some approaches include:

● Natural Helping Networks

Natural helping networks and similar support groups are not new to minority communities, but in some instances need encouragement and reinforcement. This type of network, whether an extended family, the neighbors, or a combination of both, provides both emotional and material support in times of distress, as well as joy, comfort, a sense of security, and often a link to the past, on a continual basis. Where they do not exist, or are in need of some assistance, the following will serve to reinforce family and community networks.

- Pairing families or individuals to serve as official "buddies" in cases of depression or emergency and to spread important information;
- Reinforcing existing child rearing practices whenever possible (thereby reinforcing the extended family concept among youth);
- Sponsoring activities emphasizing whole family involvement, etc.

● Direct Professional Counseling

Knowledge of a client's cultural background and his/her socio-economic reality is as vital in determining a program's counseling approach as is the background of the counselor. Training is therefore needed to improve cross-cultural knowledge and counseling techniques if the counselor is of a different ethnic group or social class. (This is true whether the intervenor is a teacher, social worker, counselor, doctor, nurse, or child care worker). Such training is vital in assessing the most successful counseling interactions between different ethnic/racial groups. Studies on Black counseling, for example, have frequently indicated that Blacks as a group are socialized at a very early age to assume responsibility for resolving their own problems. This being the case, most Black clients utilize counseling as a last resort. As a result, they usually seek tangible solutions

from the counselor (as opposed to the mainstream "self-actualization" counseling approach, or the need for counseling "just to feel better about myself"). Cultural patterns have also been studied among Blacks and other groups along such dimensions as: willingness to self-disclose, direct vs. abstract orientation, communication through body language, range of physical space in interacting, touching behavior, eye contact, etc. Knowledge and sensitivity to these and other variables will have a positive effect on any cross-cultural counseling situation.

● Stress Management Programs

Stress has been identified as a result of societal problems of discrimination, poverty, unequal education, and un/underemployment, not to mention the pressures of current society such as inflation, energy concerns, and political situations. To escape or deal with stress, people often turn to drugs, a reaction due to a drug oriented society. The skill of stress management without drugs is one that is relatively new in its application to drug abuse prevention interventions, but can be successful. Stress management activities include the following steps:

1. Identify and describe major stressors among ethnic groups; breakdown of family cohesion, lack of urban coping skills (for rural families migrating to urban areas), reduced self-esteem (whether due to lack of a job or menial job status), peer pressure conflicting with family expectations, systemic problems -- discrimination (subtle/overt), powerlessness, unemployment, etc.;
2. Identify those stresses that can be controlled directly (through job training, provision of health and social services, high school equivalency, child care, recreation, etc.);
3. Develop approaches which are culturally amenable in dealing with those stresses (e.g., use of ethnic peer workers and advocates, use of elders in informal counseling, tai chi and other traditional philosophies linking mind and body, etc.);
4. Provide techniques for coping with everyday stresses crowding, noise, etc.

A CONCLUDING NOTE

Regardless of which modalities and activities you have in mind for your program, there are some basic guidelines which are very helpful in ensuring community involvement. Remember, the community and its people are your most important resources! Some of these guidelines include:

1. Start with what you can handle and plan gradual expansion.
2. Network from the start with community leaders and agency heads.
3. Emphasize and plan for whole family involvement at several points in your program's activities.
4. Be prepared, when necessary, to take on a comprehensive "whole person" approach - there is often a host of initially hidden problems contributing to drug use which will require attention from a variety of sources (e.g., welfare, clinics, consumer rights organizations) - which may require you and your staff to "walk through the system" with a person to help him/her gain skills in accessing and successfully utilizing resources for personal empowerment.
5. Child rearing is very ego-oriented; emphasize the positive points and avoid preaching about "proper" child rearing practices.
6. Allow for program portability - you may get more and sustained participation by rotating sites or by holding meetings in the neighborhood park - wherever your target participants hang out.
7. Community peer workers produce the best recruitment and retention rates. Hiring peer workers is however, only the beginning of your staffing plan. The most effective programs are those which build in a feeling of personal investment on the part of their staff. On-going training is a key element to such investment. In-service training - and where needed, professional development (e.g., seminars, relevant coursework) - should be planned along with increasing job responsibility and increases in pay.
8. Don't be surprised if parents are not responsive at first to the program. Often you must help deal with a person's perceived needs before you can deal with a drug problem. Often the first priorities are basic necessities. If this is the case, "prevention" is often viewed as nothing more than a luxury item.

SUMMARY

The purpose of this booklet has been to provide a framework of concepts and approaches which will provide minority drug abuse prevention advocates with the resources, information, and skills by which to reduce the possibility of problem drug use. The underlying premise is that it is only through a holistic approach encompassing individual empowerment and systems change that we will finally see equitable access to social, economic, and political systems and cultural accountability for the total population.

Interwoven in the discussion on the holistic approach have been specific examples of culturally relevant activities and programs. It is hoped that the material included here provides a tool for both minority and majority groups to learn and help each other, to use each other's strengths and insights toward positive change for all groups in this country.

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