

Preventing Drug Use by Youth – Interventions Delivered in Non-School Settings

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The Bottom Line:

The authors looked at current literature around the effectiveness of interventions delivered in non-school settings designed to prevent or reduce drug use by young people under the age of 25. They found that family interventions and motivational interviewing were beneficial in preventing marijuana use, but that community and educational interventions did not reduce drug use. However, due to problems in the ways the studies were carried out and poor follow-up rates the evidence was not strong enough to draw firm conclusions. Further research is needed.

What problem is being addressed?

Many interventions designed to prevent or reduce drug use by young people are delivered at school, yet there are many youths who do not attend school and therefore may not receive any sort of drug prevention education. What programs are offered outside a school setting, and are they effective?

What intervention is being tested?

This review looked at any non-school based intervention for youth under 25 years of age, intended to prevent or reduce drug use. Four main types of non-school based interventions were assessed:

- brief interview or motivational interview (a counseling style that helps people explore the reasons for their inaction and then find ways to make changes in their lives);
- education or skills training;
- family interventions; and
- community interventions.

The interventions targeted non-users, existing users or both, and took place in such non-school settings as youth clubs, emergency rooms, colleges, young offender institutions, family homes and community agencies or facilities. Some targeted population at large,

while others were directed at a specific group. Each intervention was followed up after it took place. Follow-ups varied from immediately after the intervention to six years after.

What is the *real scientific evidence*?

Of the 17 studies reviewed, one study found that motivational interviewing was effective in reducing marijuana use, and three studies found that family interventions were useful in preventing marijuana use. Neither community interventions nor educational interventions reduced drug use.

Although the results suggest that motivational interviewing and family interventions are beneficial, the evidence is not strong enough to draw any firm conclusions. Many of the studies had problems with the way they were carried out and very few participants took part in the follow ups. More research is needed.

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The preceding is a summary of:

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