



Contents

Diversionary approaches1	-
The link between exercise and sports participation and substance use1	L
Interventions4	ļ
Use of drama7	7
Community sports8	3
Substance use treatment9)
Linking music to substance use1	L]
Implications for practice1	L]
Links to other Core Elements1	13













The link between exercise and sports participation and substance use

There is conflicting evidence in the literature as to whether exercise and sports participation is linked positively or negatively to substance use.

To illustrate, research has indicated that exercise and sports/leisure activity participation is associated with substance use, and as such

that leisure may be an important context of substance use prevention. For example, Moore and Werch (2008) examined self-reported exercise frequency and substance use among first year college students who self-identified as drinkers (n = 391) and found that frequent exercisers drank significantly more often and a significantly greater quantity than did infrequent exercisers.

Huurree et al (2010) found that among adolescent Finnish males, leisure-time spent daily among friends (among other factors including parental divorce) was a strong predictor of excessive alcohol use in adulthood. Tibbits et al (2009) examined the association between leisure activity participation and substance use among South African 8th graders (n = 3,497) and found that leisure activity profiles were significantly associated with past-month alcohol, tobacco, and marijuana use. Peck et al (2008) reported that childhood problem behaviour and adolescent sport participation can, but do not necessarily, predict heavy drinking in adulthood. They analysed data from four waves of the Michigan Study of Adolescent Life Transitions which provided data on participants aged 12 to approximately 28 years. They found that the relationship between adolescent sport activity and heavy alcohol use in later life was obtained primarily for sport participants who were also using more than the average amount of alcohol and other drugs at age 18. Similarly, children who were characterised by relatively high levels of sport participation, aggression and other problem behaviour at age 12 were more likely to become sport participants who used more than the average amount of alcohol and other drugs at age 18.

Mays et al (2010) investigated the relationship between school-based sports participation and alcohol-related behaviours using data from the National Longitudinal Study of Adolescent Health collected between 1994 and 2001 (n=8,271). The results indicated that greater involvement in sports during adolescence was associated with faster average acceleration in problem alcohol use over time among youths who only took part in sports, indicating that the relationship between sports participation and problem alcohol use depends on participation in sports in combination with other activities. They concluded that sports may represent an important context for alcohol interventions among adolescents.

Finlay et al (2012) conducted surveys with first year college students (n = 717) examining the relationship between day-to-day activities (volunteering, spiritual activities, media use, socialising, entertainment/campus events and clubs, athletics, classes, working for pay) and alcohol use. Findings indicated that alcohol use was higher among individuals who spent more time involved in athletics and socialising and lower among students who spent more time in spiritual and volunteering activities.













The link between exercise and sports participation and substance use (continued)

However, other studies have shown a positive relationship between participation in sports and exercise and substance use.

Taliaferro et al (2010) highlighted that the ways in which adolescents spend their out-of-school time is an important factor for predicting positive

youth development. They examined relationships between sport participation and numerous health risk behaviours among high school students. Data from the Youth Risk Behaviour Surveys (from 1999 through 2007) was analysed. They found that among white students, sport participation related to multiple positive health behaviours. Conversely, ethnic minority athletes showed fewer positive health behaviours and some negative behaviours. Martha et al (2009) examined the relationship between sports and alcohol consumption among French students (n = 1,356). Results indicated that engaging in physical activity (whether or not it takes place within an institution) and practising martial art were negatively related to heavy episodic drinking.

Terry-McElrath and O'Malley (2011) investigated the relationship between participation in sports, athletics or exercising and substance use in early adulthood using longitudinal data (n = 11,741). Results indicated that increased participation in sports, athletics or exercising was related to significantly lower substance use frequency at age 18 and through significantly and negatively correlated growth trajectories through early adulthood. Thus, they concluded that encouraging exercise among young people may relate to lower substance use levels throughout early adulthood. However, additional research by Terry-McElrath et al (2011) highlighted an important difference between exercise and team sport participation in relation to adolescent substance use. Using longitudinal data, they found that higher levels of exercise were associated with lower levels of alcohol, cigarette, and marijuana use but that higher levels of athletic team participation were associated with higher levels of high school alcohol use.

Other research has indicated mixed results for different types of substance use, generally indicating that sport is negatively associated with alcohol but positively associated with tobacco and cannabis use. For example, Lisha and Sussman (2010) reviewed studies on high school and college sports involvement and drug use and found that participation in sport was related to higher levels of alcohol consumption, but lower levels of both cigarette smoking and illegal drug use. Wichstrom and Wichstrom (2009) conducted surveys among Norweigan high school students between 1992 and 2006 (n = 3,251). They found that those involved initially in team sports had greater growth in alcohol consumption, but lower growth in tobacco use and cannabis use, during the adolescent and early adult years compared to those involved in technical or strength sports. However, taking part in endurance sports, as opposed to technical or strength sports, predicted reduced growth in alcohol intoxication and tobacco use. Thus, they concluded that sports participation in adolescence, and participation in team sports in particular, may increase the growth in alcohol intoxication during late adolescent and early adult years, whereas participation in team sports and endurance sports may reduce later increase in tobacco and cannabis use.













The link between exercise and sports participation and substance use (continued)

Weinstock (2010) highlighted how substance use often occurs at the expense of other, substance-free, activities. They proposed exercise as an intervention for hazardous drinking and substance use disorders due to its numerous physical and mental health benefits. It was also posited

that offering interventions for heavy drinking that do not stigmatise or require an individual to see a mental health professional may increase the utility and acceptability of the intervention and ultimately increase the number of individuals effectively treated.

Gender differences

As with other aspects of alcohol consumption, there appear to be gender differences. Although the literature generally indicates that there is more likely to be a negative association between exercise / sports activity and substance use for males than females, the evidence is not wholly consistent.

For example, Mays and Thompson (2009) examined alcohol-related behaviours among adolescent sports participants using the 2005 Youth Risk Behavior Survey data. They found that male sports participants were more likely to report heavy drinking and driving after drinking in the past month, whereas females were less likely to report ever drinking, early drinking, and drinking in the past month. Martha et al (2009) found that among males, practising sport in a formal context, team sports, and competitive participation represented risk factors for heavy episodic drinking, while practising an individual sport was a protective factor among females. Moreno-Murcia et al (2011) conducted surveys with Spanish adolescents (n = 472) and found that current physical activity positively correlated with the intention to be physically active in the future, and negatively with the consumption of alcohol and tobacco in boys. However, Modric et al (2011) found that among Croatian adolescents (n = 472), there were some protective effects of physical activity, exercise and athletic participation in boys, but there was a significant positive correlation between alcohol consumption and sport participation in girls.

Interventions

Special Interest Articles – Project Choice

Although there are various school-based diversionary interventions to prevent adolescent alcohol and drug use, very few are voluntary and take place outside of class time.

D'Amico and Edelen (2007) presented findings from a pilot evaluation of a voluntary alcohol and marijuana after-school intervention for young teenagers. Project CHOICE (PC) provides young people with normative information to help them better understand their peers' alcohol and drug use use, examine the pros and cons of alcohol and drug use, and provides skills training. Each "cycle" of Project CHOICE involved five half-hour sessions, one per week, repeated throughout the year until











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PC was implemented at one school and was voluntarily attended by 13% of adolescents. For the evaluation, baseline and follow up surveys were conducted over 2 year period (PC was implemented in Year 2) with intervention participants (n = 64) and pupils from a matched school (n = 264). Participants ranged from 10 to 15 years of age. Results indicated that PC participants reported lower rates of alcohol use and lower perceptions of friends' marijuana use and of schoolmates' use of these substances. Additionally, self use and perceptions of friends' use of alcohol and marijuana increased more sharply among control school students (n=178) relative to students from the PC school (n=270), regardless of participation in the intervention. Thus, the authors suggested that this brief voluntary after-school intervention attended by a small proportion of students can impact both individual and school wide substance-related outcomes.













Special Interest Articles – Project Choice

D'Amico et al (2012) conducted a larger evaluation study – a cluster randomised controlled trial which involved surveys with students from 16 schools at baseline and 6-7 months later (n = 9,528). Fifteen percent of students attended PC. Findings indicated that differences in lifetime alcohol use at

the school level, and also between participants in PC and matched controls reached statistical significance. Further results suggest that in a school where PC was offered, 1 adolescent out of 15 was prevented from initiating alcohol use during this time period. Although not statistically significant, results indicated that past month alcohol use was also lower in PC schools. The authors concluded that results were modest but promising, suggesting that the intervention may be effective in deterring alcohol use among early adolescents.

Kilmer et al (2011) estimated the societal costs of PC. They argued that estimating the societal costs of school-based prevention programmes is crucial for efficiently allocating resources to reduce substance use. Cost data were obtained from surveys of participants, facilitators, and school administrators; insights from programme staff members; programme expenditures; school budgets; the Bureau of Labour Statistics; and the National Centre for Education Statistics. Results indicated that from the societal perspective, the cost of implementing PC in eight California schools ranged from \$121 to \$305 per participant. Factors affecting the cost included labour costs associated with facilitating PC, opportunity costs of displaced class time (because of in-class promotions for PC and consent obtainment), and other efforts to increase participation. Substituting nationally representative cost information for wages and space reduced the range to \$100-\$206, which is lower than the Substance Abuse and Mental Health Services Administration's estimate of \$262 per pupil for the "average effective school-based programme in 2002." Denominating national PC costs by enrolled students instead of participants generates a median per-pupil cost of \$21 (range: \$14-\$28).













Interventions

Tebes et al (2007) investigated the effectiveness of an after-school programme (which implemented positive youth development - PYD) delivered in urban settings on the prevention of adolescent substance use. PYD emphasises a strengths-based approach to the promotion of positive outcomes for adolescents, with after-school programmes providing a unique opportunity to implement PYD approaches and to address

adolescent risk factors for negative outcomes, such as unsupervised out-of-school time.

The intervention included delivery of an 18-session curriculum adapted for use in urban after-school settings which emphasised adolescents' use of effective decision-making skills to prevent drug use. Participants were those involved in the intervention (n = 304) and those in the control group (n = 155). The results were positive, indicating that adolescents receiving the intervention were significantly more likely to view drugs as harmful at the end of the programme, and show significantly lower increases in alcohol, marijuana, other drug use, and any drug use one year after beginning the programme.

McCalman et al (2010) examined Australian men's support groups, which were designed to empower men to take greater control and responsibility for their health and wellbeing. Such groups provide a range of activities including diversionary programmes for men facing criminal charges, cultural activities, drug- and alcohol-free social events, health education sessions, counselling, and men's health clinics. Participatory action research was undertaken with two such groups. Self-reported benefits included improved social and emotional wellbeing, modest lifestyle modifications and willingness to change current notions of 'gendered' roles within the home, such as sharing housework. They concluded that their qualitative research indicated that men's support groups may be saving costs through reduced expenditure on health care, welfare, and criminal justice costs.

Stewart et al (2009) examined a pilot support intervention for homeless young people in Canada which optimsed peer influence. A 20-week pilot intervention programme was designed (based on research with homeless young people and service providers) which consisted of 4 support groups, optional one-on-one support, group recreational activities, and meals. Support was provided by professional and peer mentors, including formerly homeless young people. Participants were homeless individuals aged between 16 and 24 (n = 56). The results were positive, indicating enhanced health behaviours, improved mental well-being, decreased loneliness, expanded social network, increased coping skills, enhanced self-efficacy, and diminished use of drugs and alcohol among participants.

Special Interest Article - Patrick et al (2010)

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activities in terms of the context in which adolescent and young adult alcohol use typically occurs. According to this view, problem behaviours such as substance use and delinquency are most likely to occur during unstructured and unsupervised socialising with peers (Osgood et al, 2005). Thus, the development of programmes seeking to reduce drinking by attracting college students to alcohol-free social settings on such evenings could be an effective intervention.

LNPS provided students with a range of alcohol-free entertainment options during the busy social times of Thursday – Saturday night. The aims of the programme were to:

- (1) provide students with alcohol-free alternatives to alcohol-related activities.
- (2) offer a variety of high-quality programmes that will meet the interests of a diverse student body, and
- (3) encourage student involvement in leadership, planning, and co-sponsoring programmes.

Events included free movies, music, and comedy acts to board games, video games, and arts and crafts.

Results indicated that students drank less on days they attended LNPS and on days they stayed in (rather than going to bars/parties, other campus events, or entertainment), both especially among women.













Special Interest Article - Patrick et al (2010)

Thus, the programme was seen to have potential to reduce alcohol use, by serving as an alternative to the other venues in which students typically spend their nights out. However, it was considered important that such programmes target students who would otherwise be out, more than targeting

students who would otherwise stay in that night. Additional valued purposes of such programmes were enhancing the college experience, improving retention, preventing the onset of drinking among abstainers or light drinkers, and changing the socio-cultural environment for students on campus by demonstrating that the university values alcohol-free activities and limits access to alcohol during events. In addition, students who attend such activities are exposed to peers who are more likely to value alcohol-free entertainment, which may affect their normative beliefs about drinking on campus.

An obvious design limitation is that students could not be randomly assigned to participate in the programme in order to eliminate the possibility of selection effects. Further limitations included having only 14 daily reports from each student, thus capturing only six weekends, (Thursday, Friday, or Saturday), both attendance and drinking being self-reported, and not having daily reports of intentions to drink. Thus, it might be that on days students did not intend to drink they were more likely to choose to go to LNPS, still making it a programme success in that non-drinking activity choices were available.

Thus, the study was seen to support the importance of a campus-based strategy providing alternative entertainment options as one element of a comprehensive programme to decrease alcohol use. However, understanding the lesser effect of LNPS in decreasing men's drinking remains a challenge.













Use of drama

The successful use of drama as a vehicle to influence health-related attitudes and behaviours and divert young people into healthier choices is credited to its ability to elicit an emotional experience and identification among audience members. Guttman et al (2008) examined opinions towards a live performance of a professionally produced anti-drug misuse drama; a component of the school's anti-drug programme in Israel. Focus

groups (n=64) and guestionnaires (n = > 1700) were conducted with young people. Results indicated that the adolescents were generally entertained by the drama and moved by its "authenticity," which emerged as a central construct in the study. However, only a small proportion identified with the characters and many remained unwilling to "tell" on a friend who uses drugs. Pelto and Singh (2010) conducted research in India on the use of street theatre as a communication intervention on HIV risk. They proposed that street plays should be a part of prevention strategies, which can be effective in reducing HIV risks, including those related to alcohol use.

Quek et al (2012) investigated the impact of an Australian intervention in reducing drinking and other risk behaviours during post-school celebratory events which place young people at elevated risk of excessive drinking. The prevention programme – Choices – was a youth-specific applied theatre prevention programme employing a harm minimisation framework delivered in the last term across 28 schools. A survey was conducted with school leavers at post-school celebratory events (n = 352); 49% of respondents had attended Choices. Results indicated that intervention participants were significantly less likely to report illicit drug use and problem behaviours than control participants. There was, however, no intervention effect in risky drinking (i.e. drank on 5 or more days, typical amount five or more standard drink and binge drank on 3 or more days).

The authors concluded that the intervention may be effective in reducing high-risk behaviours associated with alcohol consumption at celebratory events, even if young people expect to engage in excessive alcohol consumption.













Community sports

Sporting clubs are an ideal setting to potentially advocate diversionary approaches as they promote community-wide participation in physical activity. However, a high level of alcohol consumption tends to be commonplace in community sports clubs. For example, community sports clubs show evidence of higher levels of alcohol consumption and higher

rates of risky consumption than the general community (Rowland et al, 2011).

Tobin et al (2012) analysed data from an Australian Community Attitudes Survey on Healthy Sporting Environments. Results indicated very high support for removing alcohol sponsorship of community sport, and also that if alcohol sales at community sports clubs were reduced, participation may increase among population groups currently identified as least engaged with community sport. The authors suggested that making community sporting environments healthier by reducing the ties with alcohol may lead to an increase and diversification of participants in community sport.

The Good Sports programme was designed to reduce harmful alcohol consumption in Australian community sports clubs, and offers a staged accreditation process to encourage the implementation of alcohol harm-reduction strategies. Rowland et al (2011) conducted research to evaluate whether community sports club accreditation through the Good Sports programme was associated with lower rates of alcohol consumption, by comparing alcohol consumption rates in 113 clubs (n = 1,968) to consumption rates in the general community. Results indicated that on days when teams competed, members of clubs with more advanced implementation of the programme consumed 19% less alcohol than those with less advanced implementation. Higher accreditation stage also predicted reduced long-term risky drinking by club members. In addition, the length of time a club had been in the programme was associated with reduced rates of weekly drinking that exceeded risky drinking guidelines. The authors concluded that implementation of the Good Sports accreditation strategy was associated with lower alcohol consumption in community sports settings.

Eime et al (2008) conducted research with State Sporting Associations in Australia (n = 42) to determine opinions of whether funding provided to develop healthy and welcoming environments (HWE) in their clubs would facilitate sporting club membership. The elements covered by the programme include welcoming and inclusive environments, 'smoke-free' environments and responsible serving of alcohol. Almost all believed that the creation of HWE in clubs would facilitate increases in participant membership. However, there appeared to be barriers to implementation such as limited club capacity and support. Thus, it was suggested that sporting associations should plan a structured approach to the development of HWEs that acknowledges the diverse capacity of their clubs, and gain the support of key club volunteers.













Substance use treatment

Relapse continues to pose a major problem to the substance misuse treatment field as a whole and to individuals attempting recovery from drug use disorders. Despite the availability of effective treatments for substance use disorders, engaging people in treatment remains a challenge.

Dingle et al (2008) described a 7-week trial of music therapy as an adjunct to group cognitive behaviour therapy with the aim of increasing patient engagement in a private hospital open group programme in Australia. Surveys were conducted with participants (n = 24). The average attendance rate over the trial was 75%. The results indicated that enjoyment and motivation to participate during the sessions was uniformly high, with the majority reporting that they would attend another music therapy session. Additional analyses revealed that music therapy was able to engage patients regardless of their age group or substance (alcohol only vs. other drugs). Thus, music therapy was seen to be a promising approach to improving engagement in substance misuse treatment groups.

The benefit of exercise in early recovery from substance use disorders has been demonstrated. For example, Weinstock et al (2008) found that in a sample of participants (n = 187) undergoing intensive outpatient treatment with contingency management, individuals who engaged in exerciserelated activities (n=45) were found to achieve longer durations of abstinence during treatment than individuals who did not complete an exercise-related activity (n=142). The findings were taken to be evidence that exercise may be of benefit to individuals undergoing substance use disorders treatment.

Brown et al (2010) conducted a pilot study to examine the feasibility of aerobic exercise as an adjunct to substance misuse treatment among drug dependent patients. Participants (n = 16) participated in a 12-week, moderate-intensity aerobic exercise intervention (attending a mean of 8.6 sessions). Results indicated that participants demonstrated a significant increase in percent days abstinent for both alcohol and drugs at the end of treatment, and those who attended at least 75% of the exercise sessions had significantly better substance use outcomes than those who did not. The authors outlined various benefits to exercise including the physiological and psychological benefits, the fact it can be cost-effective, flexible and accessible, the fact that many forms of exercise (e.g., running, fitness videotapes, swimming) may be conducted independently, and that exercise has minimal side effects compared to pharmacological treatment.

Kendzor et al (2008) sought to determine whether greater involvement in physical activity was associated with greater reductions in alcohol consumption. They examined the physical activity of male veterans (n = 620) enrolled in a treatment intervention study for heavy drinkers. Findings suggested that engaging in physical activity does not enhance treatment outcomes within interventions that do not specifically aim to increase physical activity. The authors proposed that commonly endorsed activities may be easily incorporated into interventions in which physical activity is a desired component.













Substance use treatment (continued)

However, the recruitment and adherence of participants to exercise interventions has been challenging. Abrantes et al (2011) proposed that tailoring interventions based on patient exercise preferences may address this issue. They conducted research with patients taking part in an intensive substance misuse outpatient programme (n = 97). Almost all expressed an interest in taking part in an exercise programme specifically

designed for persons in substance use recovery, with the majority wanting to initiate an exercise programme within the first 3 months of sobriety. This indicates the need to tailor interventions to the unique preferences of individuals.

Linking music to substance use

Research from the Netherlands has investigated the link between particular types of music and substance use. Engles et al (2011) tested whether textual references to alcohol in music played in bars lead to higher revenues of alcoholic beverages. In a field experiment, customers in three bars were exposed to either music textually referring to alcohol or to the control condition (for a total of 23 evenings across both conditions) for a 2 hour period. The results indicated that customers exposed to music with textual references to alcohol spent significantly more on alcoholic drinks than customers in the control condition. Thus, the authors concluded that this pilot study provides preliminary evidence that alcohol-related lyrics directly affect alcohol consumption in public drinking places.

Mulder and colleagues reported on data collected from the Dutch National School Survey on Substance Use, a self-report questionnaire among a representative school-based sample of 7,324 adolescents aged 12 to 16 years which assessed music preference, substance use and related factors. They found that punk/hardcore, techno/hard house, and reggae were associated with more substance use, while pop and classical music marked less substance use (Mulder et al, 2009). They concluded that preferences for nonmainstream music are associated positively with substance use, and preferences for mainstream pop and types of music preferred by adults (classical music) mark less substance use among adolescents. Mulder et al (2010) found that music can model substance use and fans of different types of music may select friends with use patterns that reinforce their own substance use inclinations.













Linking music to substance use (continued)

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Implications for practice

Further research needed into link between exercise/sports participation and alcohol consumption

The evidence in relation to exercise/sports participation and alcohol consumption is mixed. That is, some studies indicate that those who exercise frequently are likely to drink more alcohol, particularly if they only take part in sports as opposed to engaging in other types of leisure activities. In particular, participation in team sports for males has been negatively related with alcohol consumption. However, other factors also have an impact, such as levels of aggression and other problem behaviours. Other evidence has suggested a positive relationship between participation in sports and substance misuse. Thus, further evidence is needed at a local level to establish the link between exercise and substance misuse.

Sports provide a useful context for alcohol and drug interventions

Some research indicates that exercise should be encouraged as a means of reducing alcohol consumption or delaying alcohol onset. Although the evidence is conflicting, it has been suggested that exercise should be used as a means of providing interventions as it does not stigmatise and does not require the individual to see a professional. In a similar vein, community sporting clubs are an ideal setting as they promote participation in physical activity. However, there is a need to reduce the association between sporting clubs and alcohol consumption, with clubs being encouraged to implement alcohol harm reduction strategies.

Gender differences in sports participant and substance misuse

Again the evidence is not entirely consistent, but there is some consensus of a negative association between exercise and sports activity for boys, whereas individual sports can have a protective effect for females. This suggests the need to further investigate this area, while encouraging individual sports for females.













Implications for practice (continued)

Use of voluntary after-school interventions

Recent evidence indicates the potential benefit of after school programmes as a means of both reducing unsupervised out of school time and implementing interventions (such as decision making to prevent drug use). Evidence indicates that a brief, voluntary intervention can have an

impact on both the individual and school wide substance related outcomes.

Use of support groups and alcohol free activities

As well as after school clubs, both support groups which offer diversionary activities for vulnerable groups, and offering alcohol free alternative activities for e.g. students are possible means of reducing alcohol related harm. However, it is important that such activities target those who would be otherwise drinking, as opposed to only attracting those who would be less likely to be engaging in alcohol or drug use.

Use of drama

An innovative method of engaging with individuals is by the use of drama, both as a means of undertaking a prevention programme and also as a means of conveying important harm reduction messages. Drama is thought to be effective as it elicits an emotional response, with participants appreciating the authenticity of the approach.

Use of music and exercise in substance misuse treatment

Relapse continues to pose a major problem to substance misuse treatment, as does engaging people in treatment. Music therapy and exercise have been proposed as promising approaches to improving engagement in substance misuse treatment groups. Exercise has been said to have various benefits including the physiological and psychological benefits, the fact it can be cost-effective, flexible and accessible, the fact that many forms of exercise (e.g., running, fitness videotapes, swimming) may be conducted independently, and that exercise has minimal side effects compared to pharmacological treatment. However, the need to tailor interventions to the unique preferences of individuals is once again important.













Links to other Core Elements

Resilience and Protective Factors

Community Approaches

Education

Parenting Programmes

Harm Reduction - Alcohol

Harm Reduction - Drugs









