

Evidence Based Primary Prevention

The Icelandic Model

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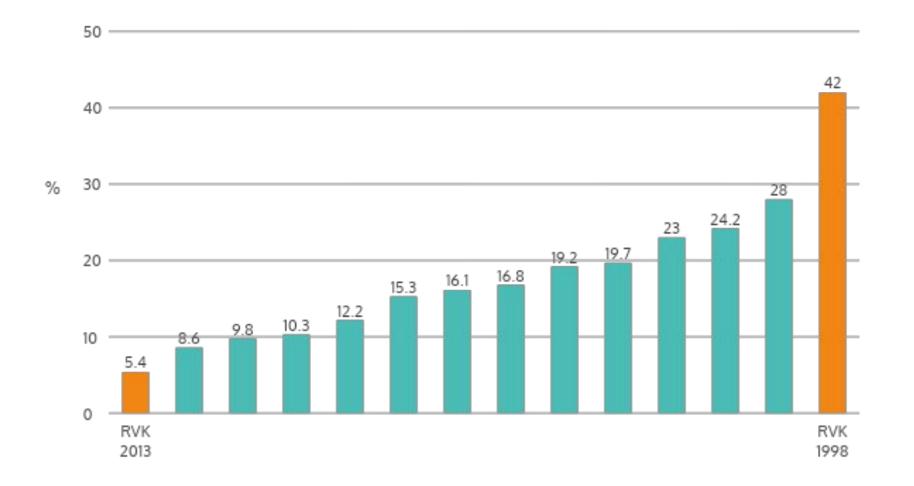




Reykjavik in the summer of 1997



15-16 year old who have become drunk past 30 days in some European cities 2017

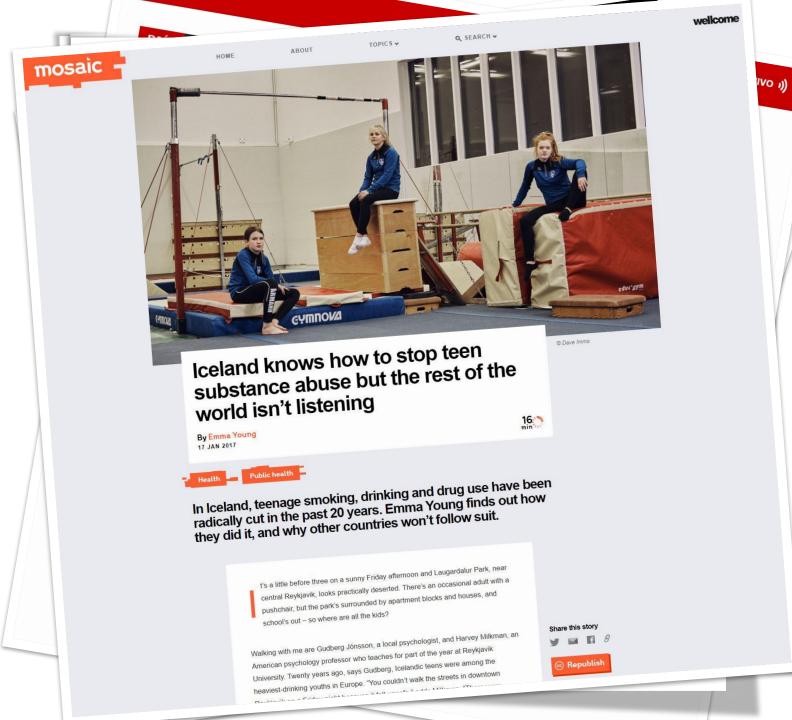


Iceland knows how to stop teen substance abuse



But the rest of the world isn't listening

Picture by courtesy of pexels.com - Andrea Piacquadio

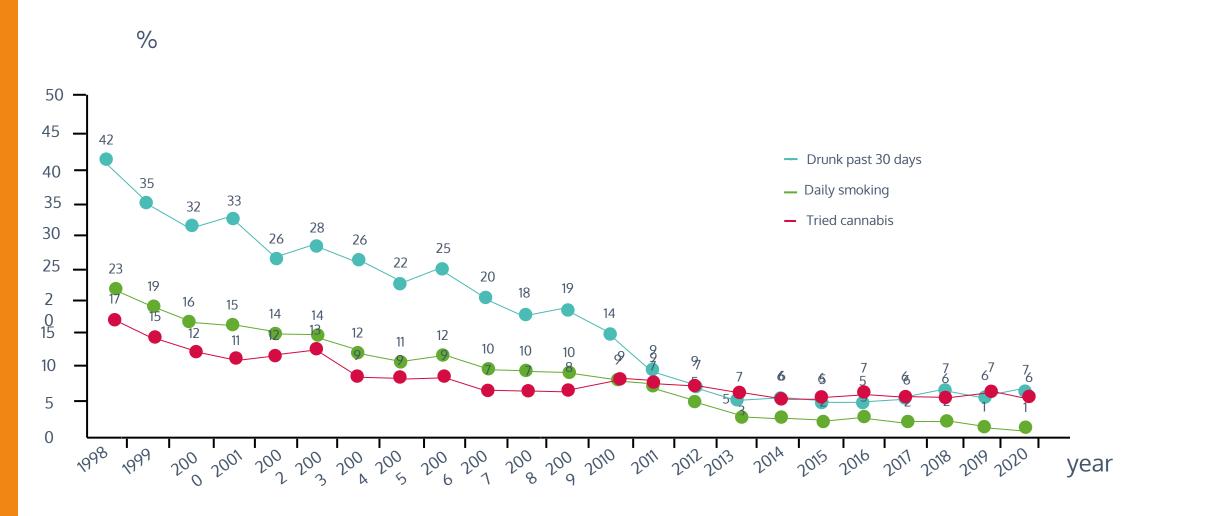




From highest to lowest in substance use – 15/16 year old students



Based on the Icelandic Prevention Model



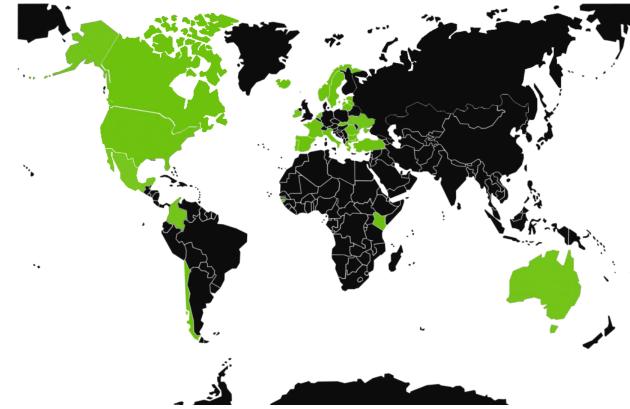


International Development

Global reach



As of 2020 we have partnered with hundreds of communities in five continents.





Building blocks

The three pillars of success



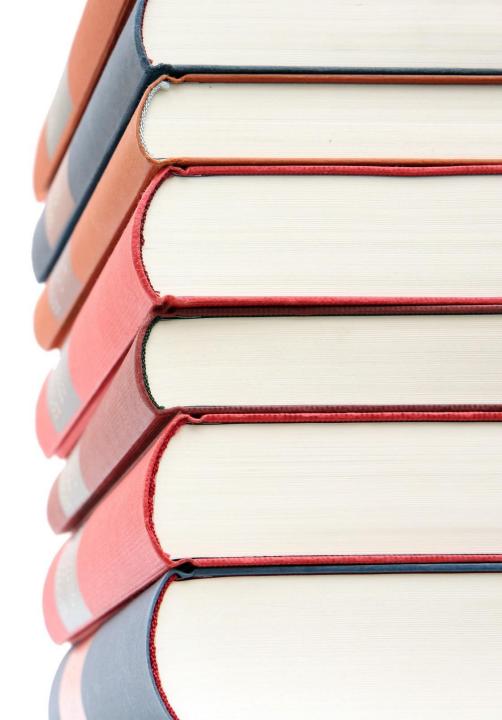
The Icelandic model is predicated upon three pillars:

Evidence-based practice
Using a community-based approach
Creating and maintaining a dialogue among research, policy and practice



Why research based?

- Medicine
- Engineering
- Tourism
- Fisheries
- Pharmaceutical industries
- Children's lives, health and well-being





Youth in Iceland database 1992 - 2020

Data collections in schools

1992

- 10 13 year old (since 2000) Primary school
- 14 16 year old (since 1992) Primary school
- 16 20 year old (since 1992) High-school



nmunity networks





The twofold use of research

1. Scientific



The scientific role of research

- In depth analysis of the data
- Over 100 peer reviewed publications in international journals
- Science forms the platform for practice





The practical role of research



- Data collections on substance use regularly
- Practical information immediately to the municipalities
- •Local information INTO all levels of prevention work is a KEY issue



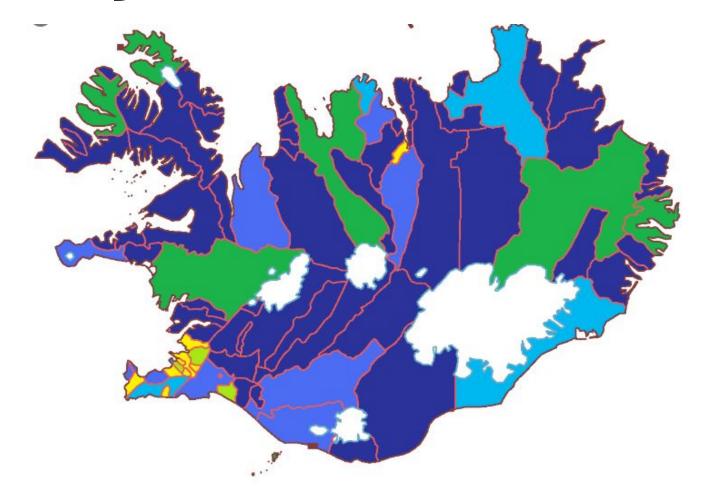
Immediate feedback



- Make sure practical information is out immediately after data collection
- Not 3-4 years later but almost immediately
- Every school, every parent, every prevention worker can have access to current situation in the close community

Municipalities with over 90% of the population get immediate information





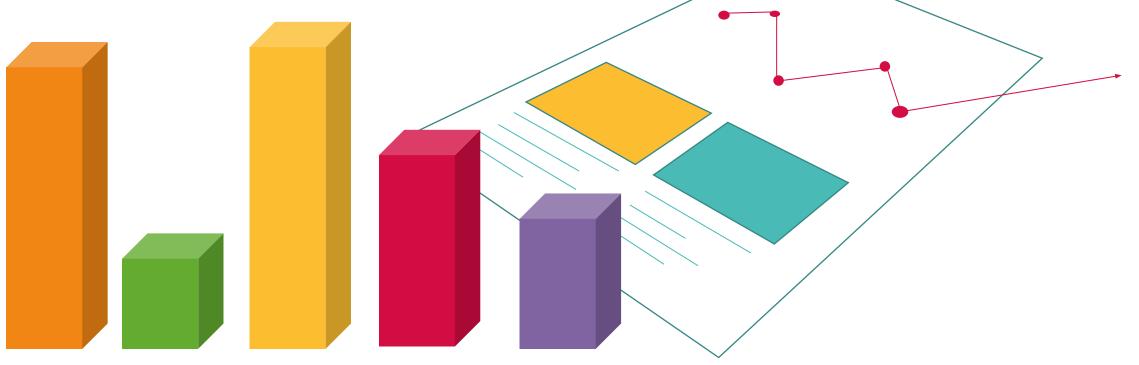


What did we learn?

Analysis



- We learnt several things
- Use of substances on an upward trend



The year is 1998

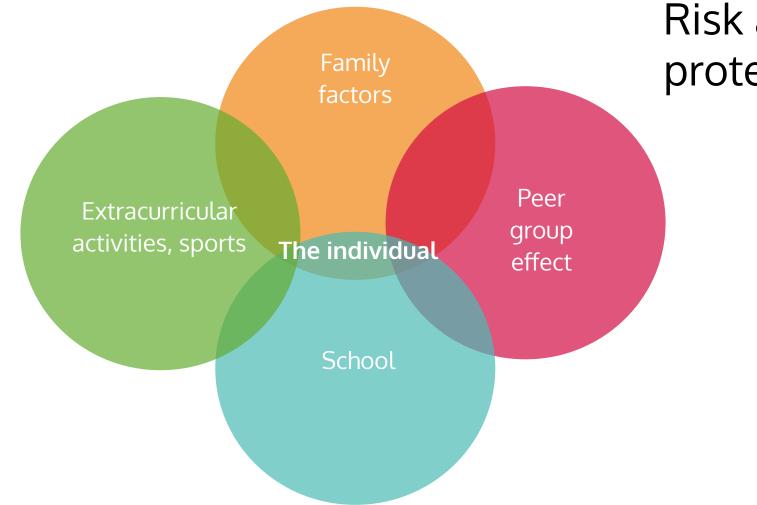
At this point in time research had already showed us that certain circumstances and **behaviour** in the lives of adolescents were strongly connected with substance use

We tried to establish the risk and protective factors



Domains of interventions





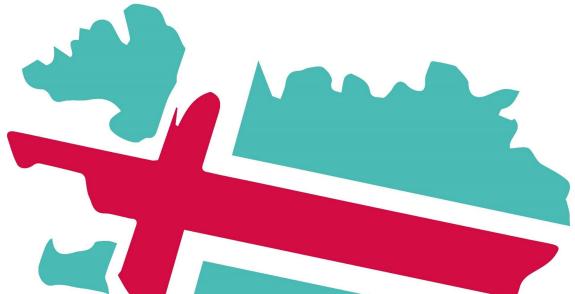
Risk and protective factors

1998 Drug-free Iceland



•A totally new methodology in substance use prevention

•Obviously, what we had been doing before, was not working





We had been doing this



Aim of Drug free Iceland



 To change the <u>actual behavior</u> of youth and not only their attitudes

 To change the <u>life-style environment</u> of our children so that they would be in lesser risk of substance use

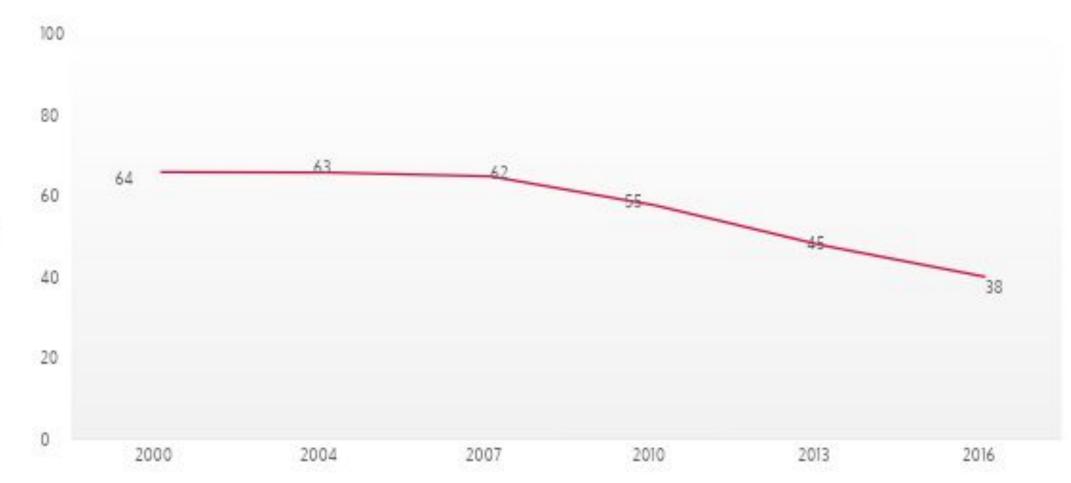






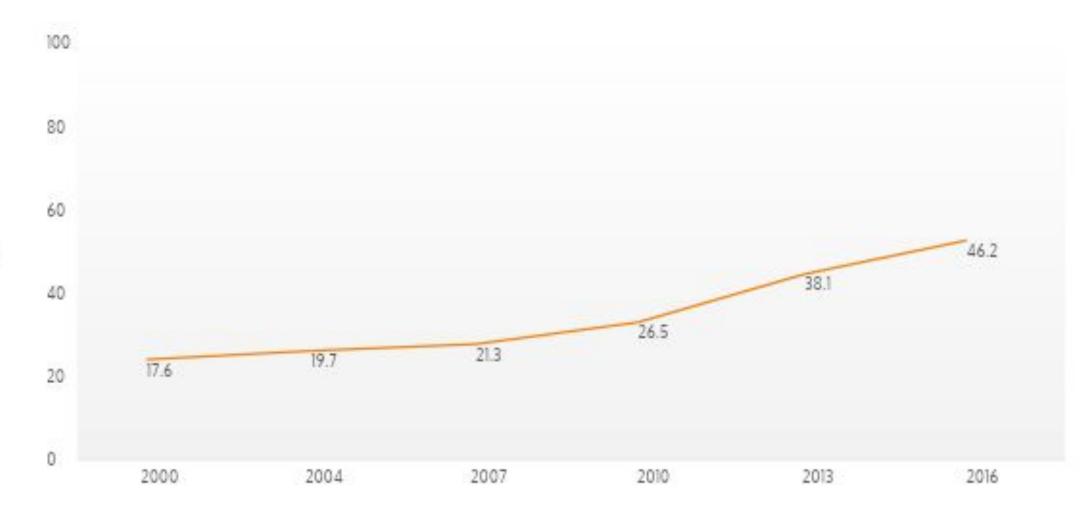


Alcohol use trend in Icelandic High-Schools 16 - 20 year old students



96

Never got drunk in lifetime High-Schools 16 - 20 year old students



96



Quote from NIH*

"Underage drinking is a leading public health problem. People who reported starting to drink before the age of 15 were four times more likely to report meeting the criteria for alcohol dependence at some point in their lives"

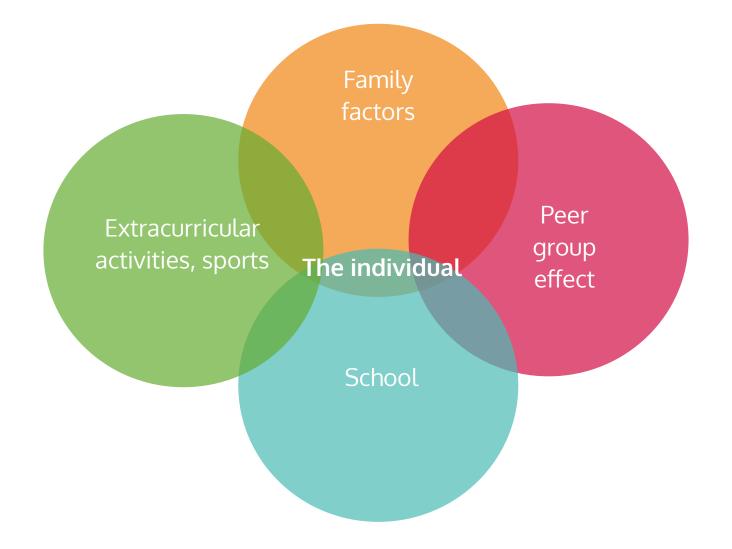
* National Institute of Health



How were the findings used?



This we knew was important



Focus on close community

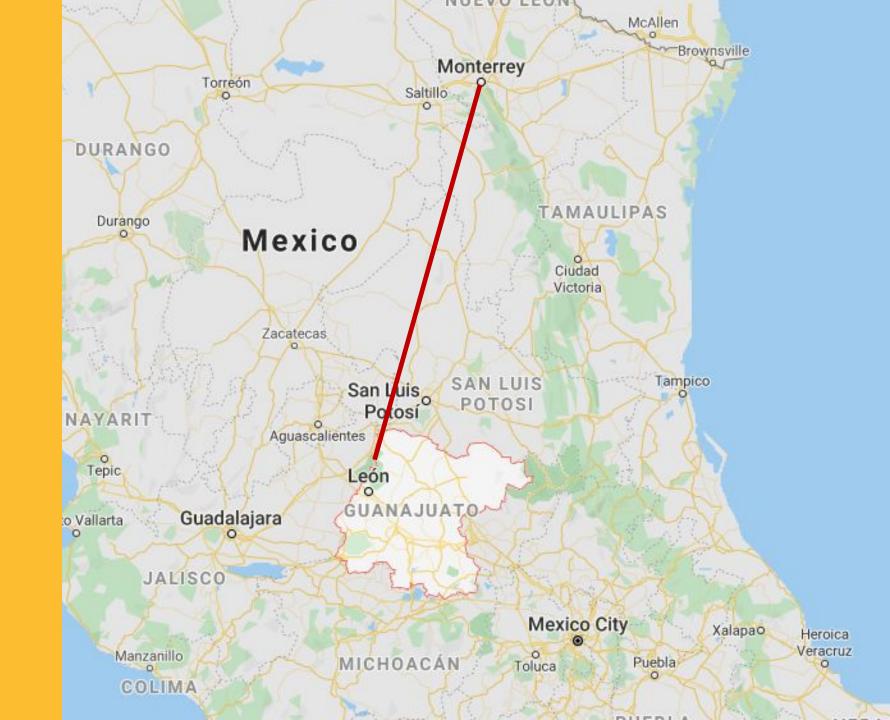


How could an average figure on alcohol use in your country help prevention workers in your community/municipality?

"Average" doesn't tell all the story!



Focus on the close community



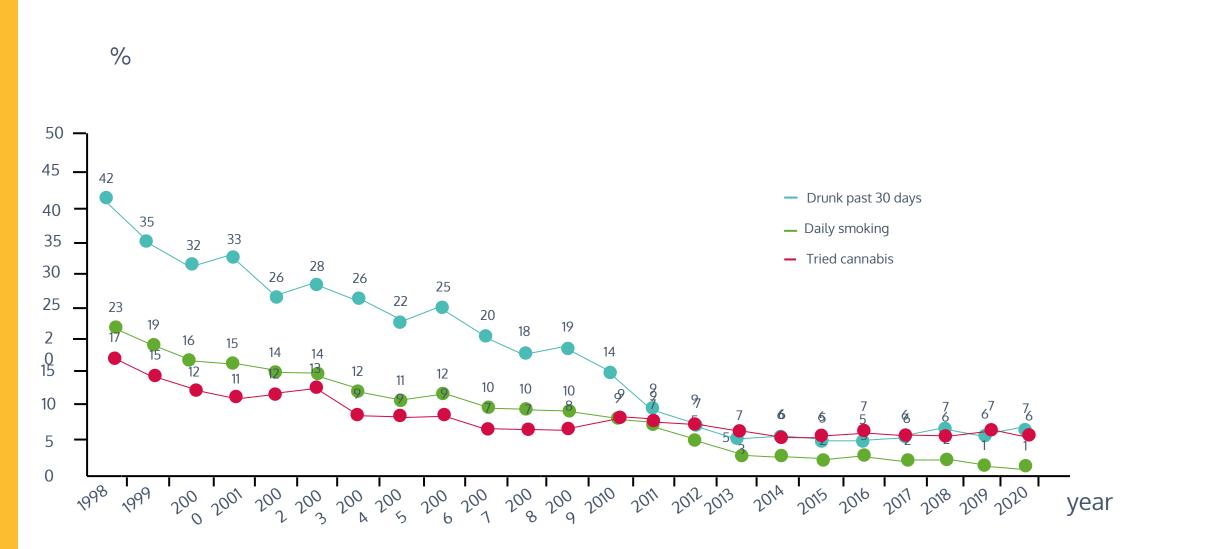




Strengthen the preventive factors Weaken or eliminate the risk factors

And substance use is going down







Thank you

www.planetyouth.org