

# Strengthening Prevention Through Quality Standards: The Example of the European Drug Prevention Quality Standards (EDPQS)

Dr Angelina Brotherhood

ISSUP webinar series

3<sup>rd</sup> March 2026

# Brief introduction

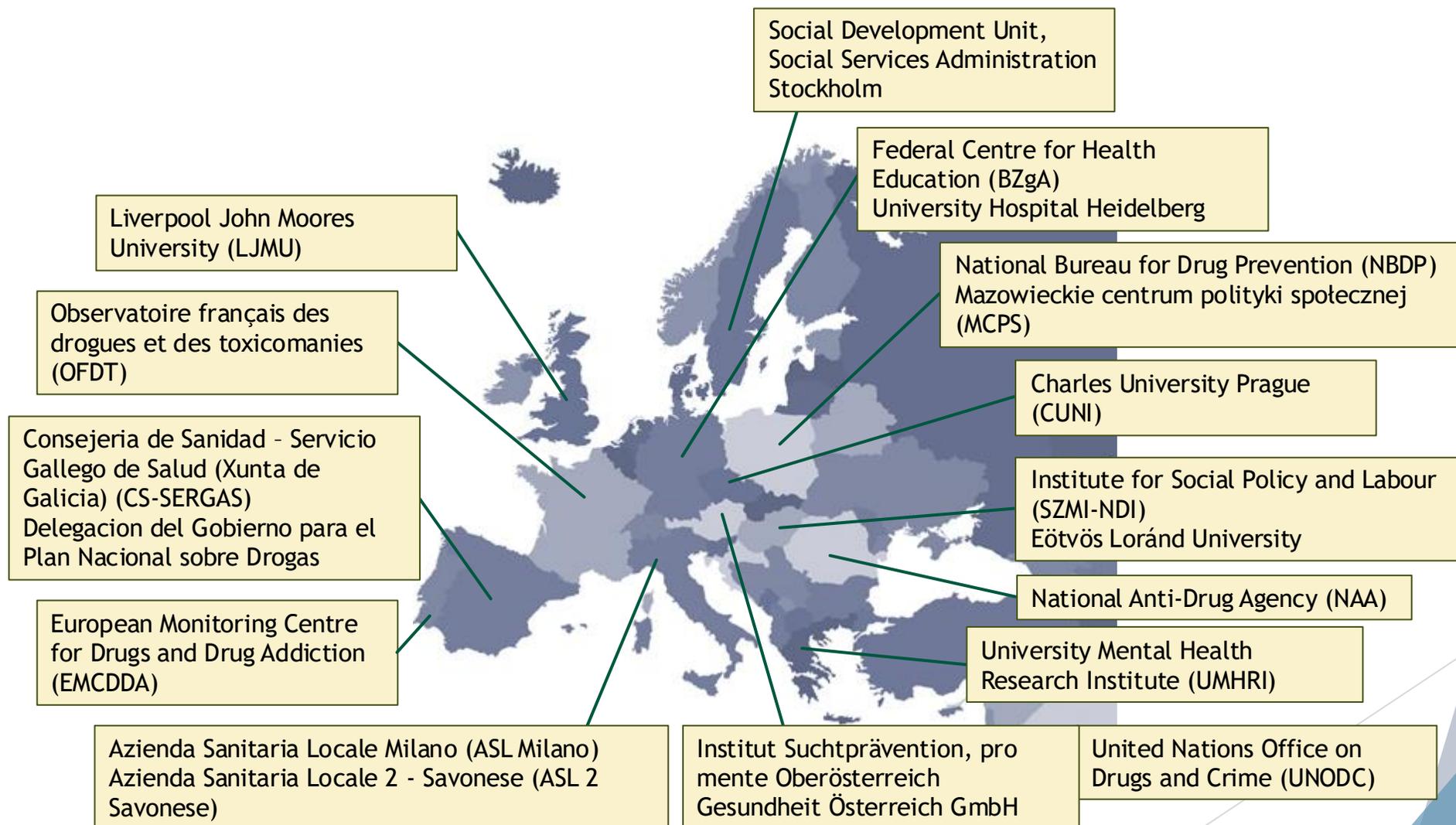
## Dr. Angelina Brotherhood

- ▶ Sociologist, working in drugs field since 2007
- ▶ Health Expert / Independent contractor at the Austrian National Public Health Institute
- ▶ Prevention specialist for the Austrian National Focal Point to the REITOX network of European Union Drugs Agency (EUDA, formerly EMCDDA)
- ▶ Focus on standards development and dissemination from 2009 to 2015 (with Dr Harry Sumnall, Liverpool John Moores University, UK, and many other colleagues)



Source: author's own

# Members of the European Prevention Standards Partnership 2008-2015



# Funding acknowledgement / declaration

- ▶ This webinar uses materials from EDPQS Toolkit 3 (“Training Toolkit”) and from the European Prevention Curriculum (EUPC)



With financial support from the  
Drug Prevention and Information  
Programme of the European Union

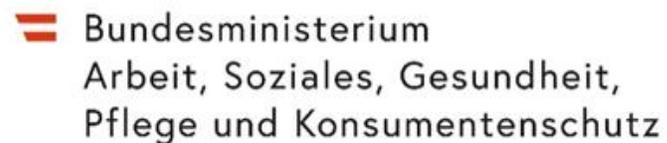


**EUPC**

- ▶ My prevention-related work is currently supported / funded by:



**Gesundheit  
Österreich GmbH**



**Bundesministerium  
Arbeit, Soziales, Gesundheit,  
Pflege und Konsumentenschutz**

# Overview of today's webinar

- ▶ Why do we need quality standards in substance use prevention?
- ▶ Examples of important quality standards in our field
- ▶ EDPQS: contents and development process
- ▶ EDPQS: application in practice
- ▶ Practical considerations when developing quality standards
- ▶ Brief reflections: 15 years since publication of the EDPQS

# Learning outcomes

- ▶ Understand the purpose, structure, and development process of the European Drug Prevention Quality Standards.
- ▶ Recognise how quality standards support evidence-based prevention planning, implementation, and evaluation.
- ▶ Identify key principles for adapting standards to local and regional contexts while preserving essential quality elements.
- ▶ Gain practical insights into developing or applying prevention quality standards within their own professional settings.

Why do we need quality standards in substance use prevention?

# What is our aim as preventionists?

Source: PowerPoint stock image



To offer target populations the best possible interventions

... while using available resources as efficiently as possible

... in order to effectively prevent morbidity, mortality and other negative consequences arising from substance use and substance use disorders (SUD)

... so that people can have happy and fulfilling lives and make positive contributions to society



How do you know if a prevention activity is of 'high quality'?

... or even minimum quality?

# This is NOT drug prevention



one-off Picnic Day  
at the school



Drug-sniffing dogs at schools

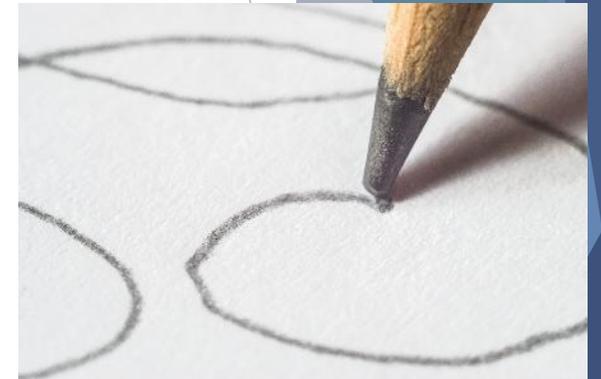
Just say

**NO**  **DRUGS**

Simplistic “Just say NO to drugs”  
campaigns



5km “Run against drugs”



Drawing competition in elementary school  
“How dangerous are cigarettes”

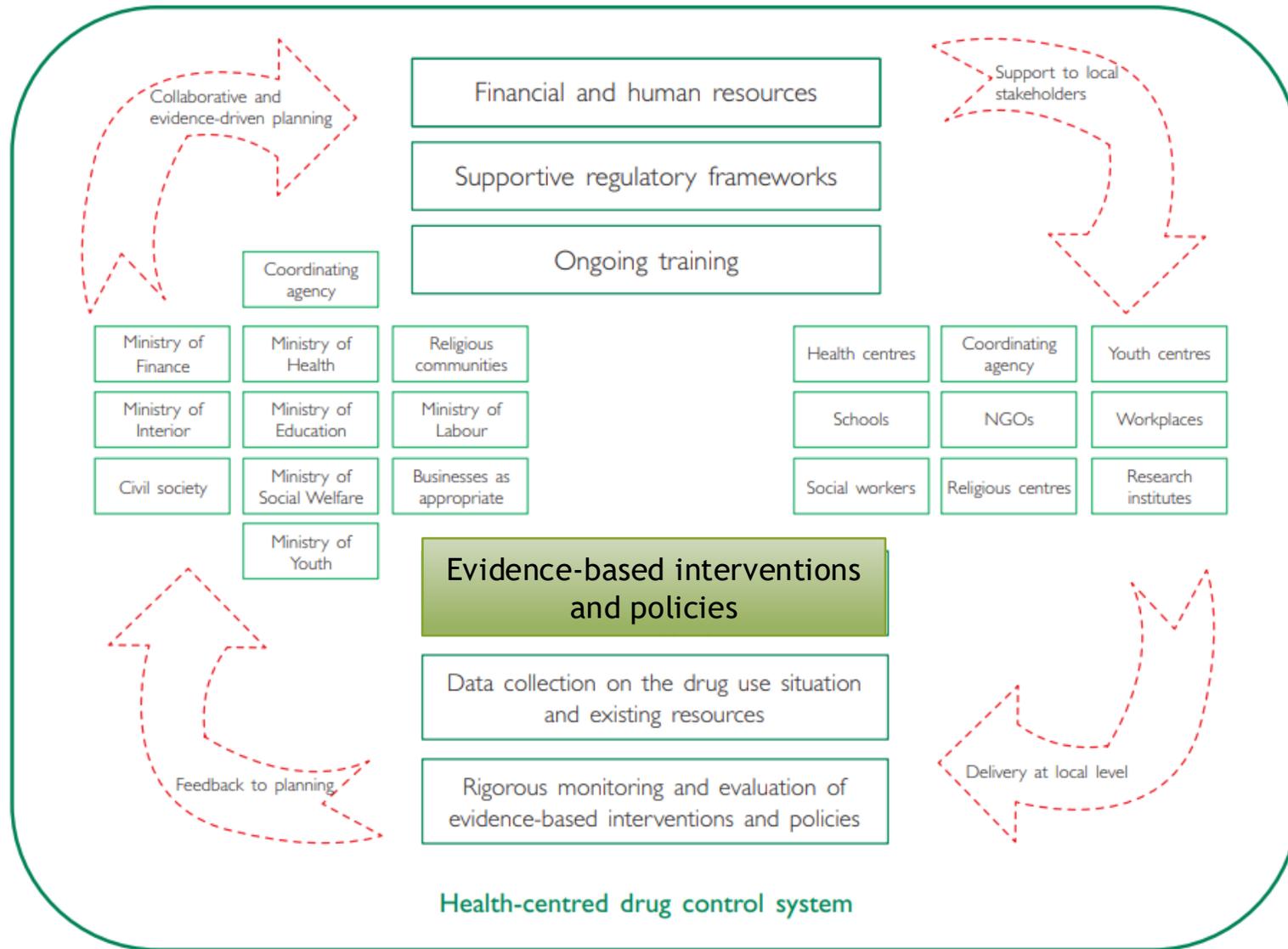
Money is still being spent on ineffective or even potentially harmful approaches.

# Additional problems in practice

Effective approaches are used but fail because of:

- ▶ poor planning and implementation or
- ▶ insufficient contextual or structural conditions

# Schematic representation of a national drug prevention system



Source:  
UNODC/WHO, 2018

# What is “good” prevention? And why does “bad” prevention happen?

## ‘High quality’ activities:

- ▶ Relevant to target populations and policy
- ▶ Ethical (no unintended ‘side effects’, takes into account reasons for drug use)
- ▶ Based on scientific evidence of what works
- ▶ Provide evidence on their own effectiveness
  - ▶ (Cost)Effective
  - ▶ Feasible
  - ▶ Sustainable

In reality, activities are sometimes chosen because of other criteria:

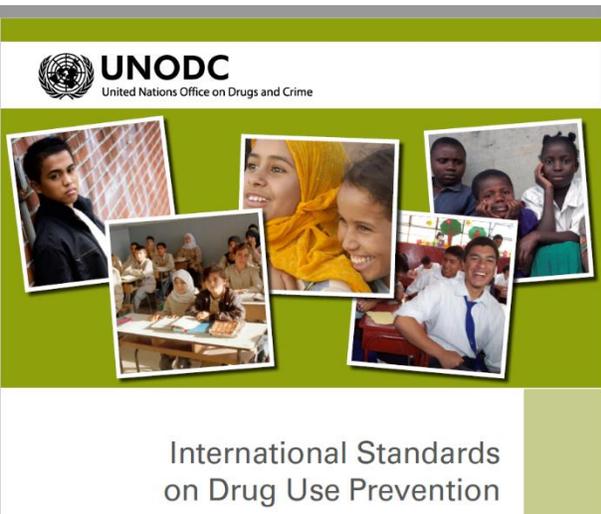
- ▶ Low financial cost
- ▶ Promise a ‘drug free’ world (even though the proposed activities are unlikely to achieve this)
  - ▶ Are fun for the kids
- ▶ Allow nice photos for the school newsletter
  - ▶ Easy to do
- ▶ Don’t need much time (one-off activities)

*(Actual quality or effectiveness relatively less important...)*

# Examples of important quality standards in our field

Main standards featured in the European Prevention Curriculum (EUPC) for decision-, opinion- and policy-makers

# UNODC/WHO International Standards on Drug Use Prevention

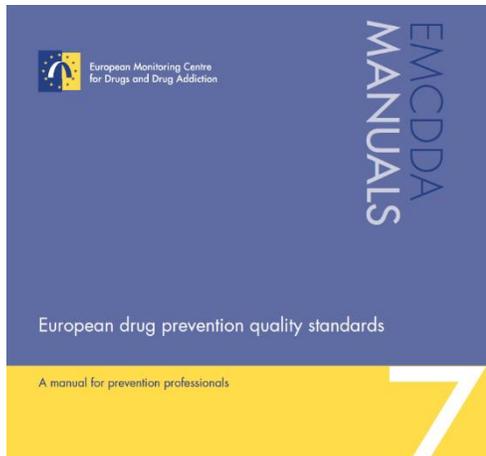


- ▶ WHAT to do in prevention
- ▶ “Menu” of interventions for different life stages, settings, and levels of vulnerability
- ▶ Based on evidence reviews and expert consultations
- ▶ First global reference framework on evidence-based prevention, for government-level decision-makers
- ▶ Also provides a useful model of ‘national drug prevention system’

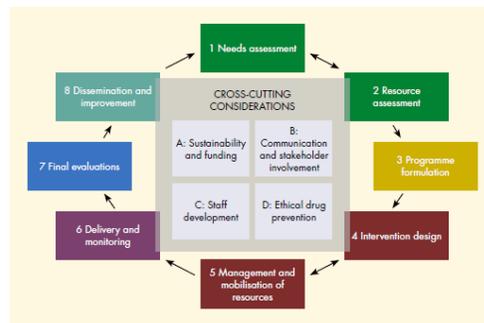
	Prenatal & Infancy	Early childhood	Middle childhood	Early adolescence	Adolescence	Adulthood
<b>Family</b>	Prenatal infancy & visitation ** Interventions for pregnant women with substance abuse disorders *		Parenting skills ****			
<b>School</b>		Early childhood education ****	Personal & social skills *** Classroom management *** Policies to keep children in school **	Personal & social skills & social influences education *** Addressing individual vulnerabilities **	School policies & culture ** Alcohol & tobacco policies *****	
<b>Community</b>			Community-based multi-component initiatives ***		Media campaigns * Mentoring * Entertainment venues **	
<b>Workplace</b>					Workplace prevention ***	
<b>Health sector</b>					Brief intervention ****	

# European Drug Prevention Quality Standards (EDPQS)

European  
drug prevention  
quality standards



- ▶ HOW to do prevention
- ▶ Criteria to recognise and ensure quality in prevention activities, using a project cycle structure
- ▶ Based on reviews of existing standards, funding criteria and expert consultations
- ▶ First European reference framework on quality in prevention based on empirical research



# EDPQS: contents and development process

# Key EDPQS resources



## Manual

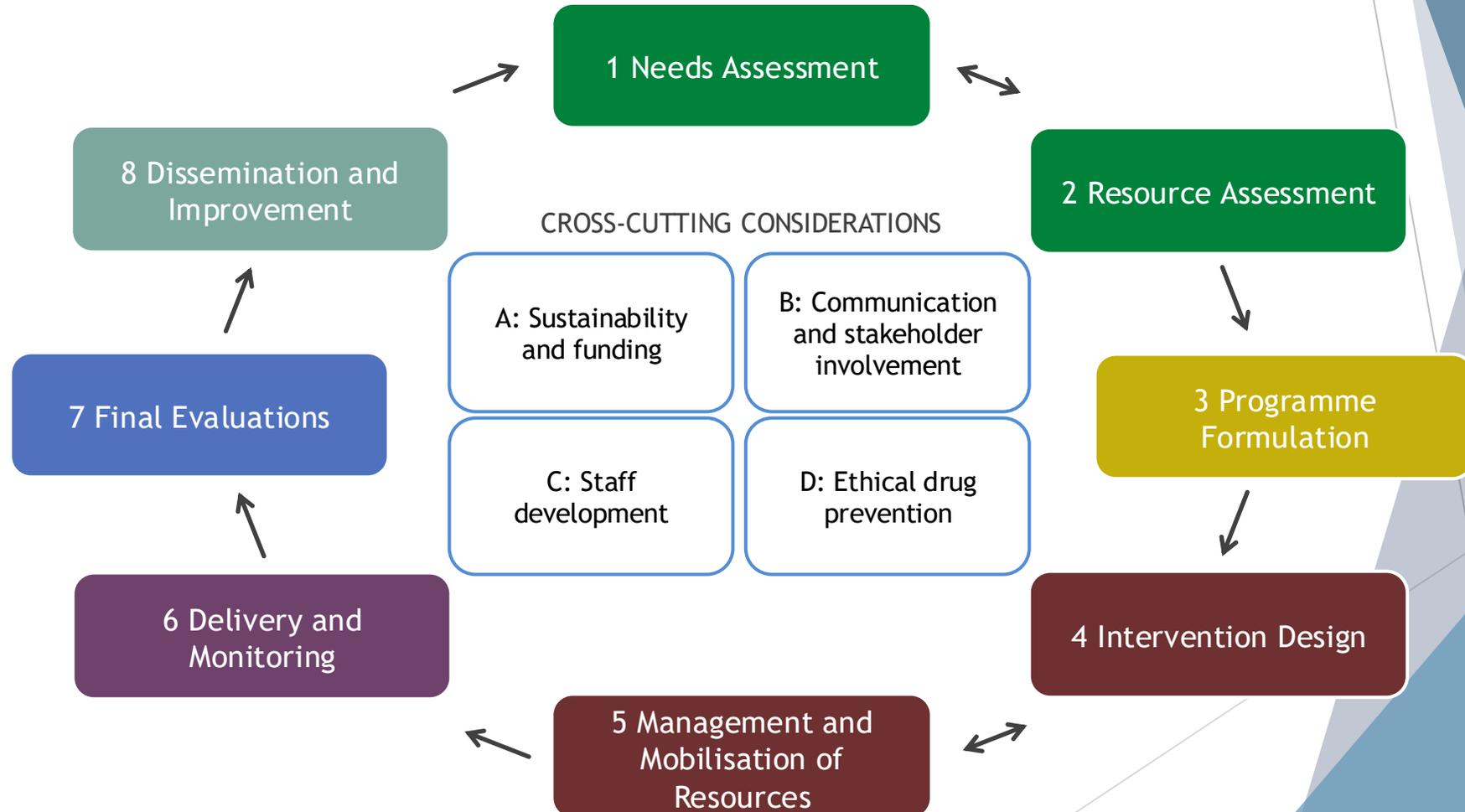
- 284 pages with detailed introductions, full list of standards, glossary



## Quick Guide

- 38 pages, with summaries and checklists
- Our most popular product!
- available in >15 languages
- Free download

# The drug prevention project cycle as core structure of the standards



# 35 components of quality

## Cross-cutting Considerations

A: Sustainability and funding

B: Communication and stakeholder involvement

C: Staff development

D: Ethical drug prevention

## 1 Needs Assessment

1.1 Knowing drug-related policy and legislation

1.2 Assessing drug use and community needs

1.3 Describing the need - Justifying the intervention

1.4 Understanding the target population

## 2 Resource Assessment

2.1 Assessing target population and community resources

2.2 Assessing internal capacities

# 35 components of quality

## 3 Programme Formulation

3.1 Defining the target population

3.2 Using a theoretical model

3.3 Defining aims, goals, and objectives

3.4 Defining the setting

3.5 Referring to evidence of effectiveness

3.6 Determining the timeline

# 35 components of quality

## 4 Intervention Design

4.1 Designing for quality and effectiveness

4.2 If selecting an existing intervention

4.3 Tailoring the intervention to the target population

4.4 If planning final evaluations

## 5 Management and Mobilisation of Resources

5.1 Planning the programme – Illustrating the project plan

5.2 Planning financial requirements

5.3 Setting up the team

5.4 Recruiting and retaining participants

5.5 Preparing programme materials

5.6 Providing a programme description

# 35 components of quality

<b>6 Delivery and Monitoring</b>
6.1 If conducting a pilot intervention
6.2 Implementing the intervention
6.3 Monitoring the implementation
6.4 Adjusting the implementation
<b>7 Final Evaluations</b>
7.1 If conducting an outcome evaluation
7.2 If conducting a process evaluation
<b>8. Dissemination and Improvement</b>
8.1 Determining whether the programme should be sustained
8.2 Disseminating information about the programme
8.3 If producing a final report

# What you'll see in the Manual

Component title



## 1.1. Knowing drug-related policy and legislation

In order to have an impact, all drug prevention activities must strive toward the same end, albeit through different means. By defining the aims of drug prevention work, drug-related policy and legislation act as signposts guiding drug prevention activities on a local, regional, national and international level. It is therefore essential that all professionals — not only those working 'at the top' — are aware of relevant policy and legislation, as this enables everyone to contribute to these aims. Other guidance, such as binding standards and guidelines, should also be taken into consideration where appropriate.

It is equally important to stay up-to-date with changes in drug-related policy and legislation, as these may affect different aspects of the programme. For example, changed funding priorities may require a new strategy to ensure the programme's sustainability (see A: *Sustainability and funding*); or, where participants receive information about drugs as part of the intervention, changes in legislation may require an update of the intervention content (e.g. reflecting changes in the legal status of drugs such as 'legal highs').

Moreover, by showing awareness of, and correspondence with, drug-related policy and legislation, providers maximise their chances of obtaining necessary support from commissioners and funders.

In some countries, demonstrating awareness of government funding. However, it is important to address needs that are not current policy priorities for the population or community may not be addressed (see Component 1.2: *Assessing drug needs*). Programmes should still support the wider drug prevention agenda as defined by national or international strategies and make a case for the response to other needs.

While it is ultimately up to funders and commissioners to ascertain that programmes are in line with policy and legislation, all professionals should have a general level of knowledge in this area. Practitioners who spend a large amount of time working in direct contact with the target population may feel that learning about drug-related policy and legislation, and staying up-to-date with new developments, is beyond the remit of their work. It is the responsibility of providers to support staff members in achieving these standards, for example by holding in-house training events (see C: *Staff development*).

Project stage 1: Needs assessment

Implementation considerations



Source: author's own



European drug prevention quality standards

It can be difficult to judge which policies and pieces of legislation are most relevant. Policy priorities can change frequently, coinciding with a new government, shifts in society's concerns, or an important new piece of research. The *Additional guidance* section contains a selection of important contemporary documents in relation to international and national drug policy and legislation. However, the relevance of documents can depend on the type of the programme. For example, a local programme would be expected to prioritise local or regional documents over national and international ones, as these would be less relevant to the local context.

Note: Component D: *Ethical drug prevention* contains standards on general policy and legislation.

### Basic standards:

1.1.1 The knowledge of drug-related policy and legislation is sufficient to inform the implementation of the programme.

Standards (basic)



relevant medicines, and volatile substances; health education policy.

1.1.2 The programme supports the objectives of local, regional, national, and/or international priorities, strategies, and policies.

Note: local/regional programmes should pay particular attention to local/regional policy documents.

Example of evidence: the programme description provides clear references to the most relevant policy documents.

Examples to clarify meaning



### Additional expert standards:

1.1.3 The programme complies with relevant local, regional, national, and/or international standards and guidelines.

Basic standards required by existing policy and legislation.

Example of standards: existing standards on making services young-people friendly (e.g. Department of Health, 2007).

Standards (expert)



# European Drug Prevention Quality Standards (EDPQS) - overview of timeline

2008-2010

Standards development



2011-2013

Manual and Quick Guide published by European Monitoring Centre for Drugs and Drug Addiction (EMCDDA, now European Drugs Agency, EUDA)

Since 2012

Follow-on projects to develop additional materials and training courses for dissemination and implementation



2015

Summary of EDPQS adopted as **Minimum Quality Standards** in drug demand reduction by EU Member States

Now

Taught through the **European Prevention Curriculum (EUPC)** to thousands of professionals in Europe and beyond



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2015

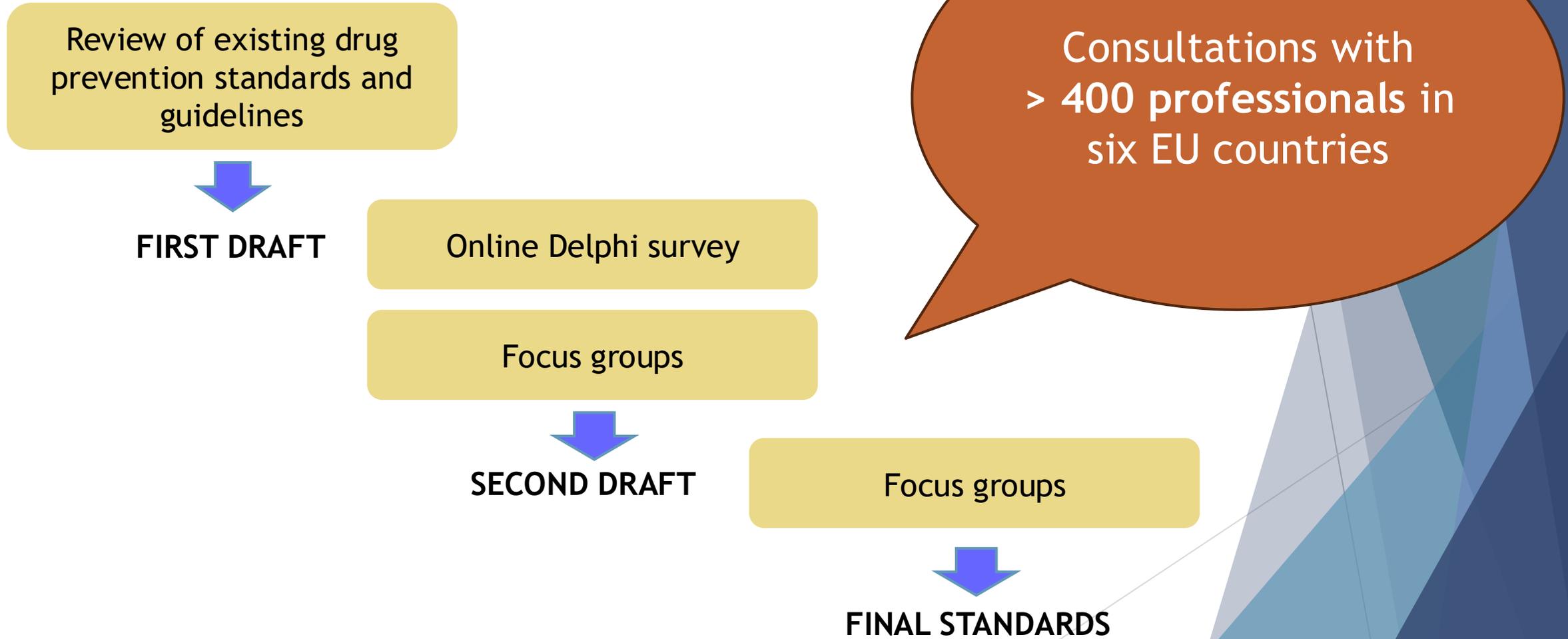
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# Process of two years to develop standards



# EDPQS: application in practice

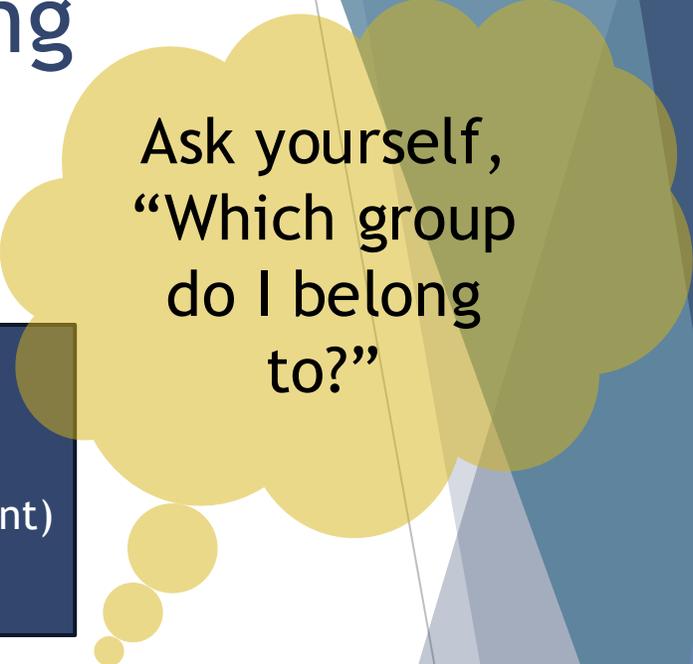
# Who can benefit the most from using quality standards?

Decision- and policy-makers  
(e.g. government, funding bodies)

Practitioners (e.g. NGOs,  
prevention providers, government)

Professional trainers and  
educators (e.g. at universities,  
continued professional  
development)

Prevention coordinators,  
opinion-makers, prevention  
advocates (e.g. at regional or  
local level)



Ask yourself,  
“Which group  
do I belong  
to?”

# EDPQS Toolkit 1 for funder and other decision-makers



Quality standards can help to:

- ▶ Select high quality drug prevention activities for (financial) support
- ▶ Identify the stronger and weaker aspects of prevention initiatives
- ▶ Write or revise funding criteria, funding mechanisms, budgets and calls for tenders
- ▶ Advocate for evidence-based policy-making
- ▶ Say NO to ineffective approaches, even if they are considered popular!

Real-life example:

- ▶ Croatian government supported funded projects with meeting EDPQS

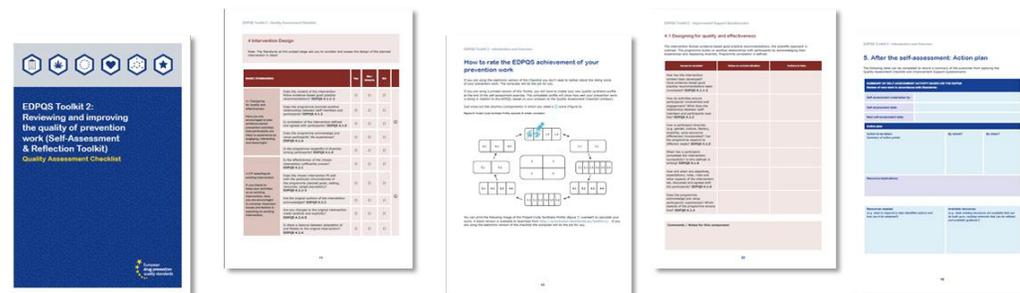
# EDPQS Toolkit 2 for practitioners

Quality standards can help to:

- ▶ Understand and communicate the conditions needed for effective prevention work
- ▶ Plan new prevention activities
- ▶ Checklist approach: check if all quality aspects have been considered (also useful when applying for project funding!)
- ▶ Review and revise existing prevention activities (what's already in line with the standards, areas for improvement)
- ▶ Undertake self-reflection or self-assessment for projects, people, organisations
- ▶ Have structured discussions within and between teams
- ▶ Develop/revise own project management and quality assurance tools

Real-life examples:

- ▶ e.g. Belgium, Austria



# Recent project: “FENIQS-EU”

- ▶ Additional resources (toolkit, videos, ...) for prevention providers who wish to start working with quality standards



# EDPQS Toolkit 3 for professional trainers and educators



Quality standards can help to:

- ▶ Clarify what prevention is and what it is trying to achieve (and what not)
- ▶ Deliver professional training on quality in drug prevention
- ▶ Teach students how to plan and review prevention projects
- ▶ Help develop a shared understanding and professional language around prevention

Real-life example:

- ▶ Development of European training course



EUPC

# Exercise: completing the checklist using example projects

## 3 Programme formulation

	Notes on current position	Actions to take
3.1 Defining the target population		
3.2 Using a theoretical model		

# Exercise: completing the checklist using example projects

## 3 Programme formulation

	Notes on current position	Actions to take
3.1 Defining the target population	<i>Target group defined (15- to 17-year-old school pupils; universal programme)</i>	
3.2 Using a theoretical model		

# EDPQS Toolkit 4 for ‘prevention coordinators’ or advocates for quality in prevention



Quality standards can help to:

- ▶ Promote quality from a strategic point of view
- ▶ Develop or update own quality criteria (by adapting existing standards)
- ▶ Communicate with others about what you're trying to achieve

Real-life examples:

- ▶ Contained in the toolkit e.g. Sweden, UK

# Practical considerations when developing quality standards

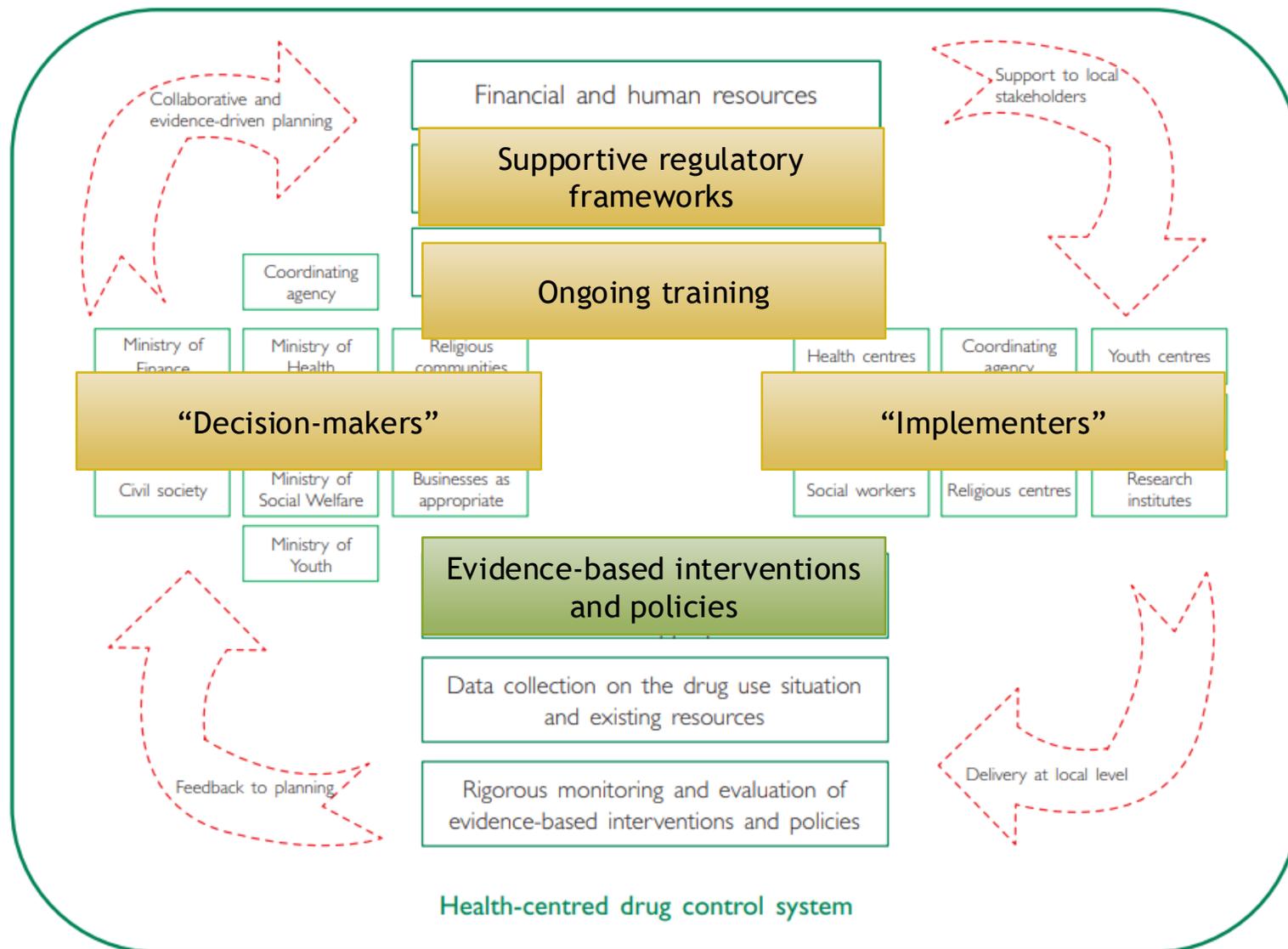
# Practical considerations when developing own quality criteria

See **EDPQS Toolkit 4** step-by-step guide with worksheets:

- ▶ What resources are realistically needed (time, money, people, materials)
- ▶ **Involving a broad range of stakeholders in the development process**
- ▶ Potential barriers and facilitators
- ▶ Type of adaptation: language adaptation, formal content adaptation, flexible content adaptation?
- ▶ What changes to original standards are acceptable
- ▶ What to consider when translating standards
- ▶ How to disseminate standards and promote their implementation



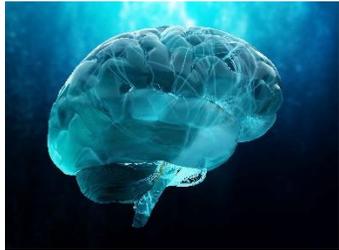
*Personal reflection:* plan to integrate standards in funding mechanisms and/or training curricula -> **sustainability**



Source:  
UNODC/WHO, 2018

# If I was to develop standards now ...

- ▶ Content of EDPQS remains valid and relevant
- ▶ Developments since 2011 that might lead to additional standards, e.g.:



## Xchange prevention registry

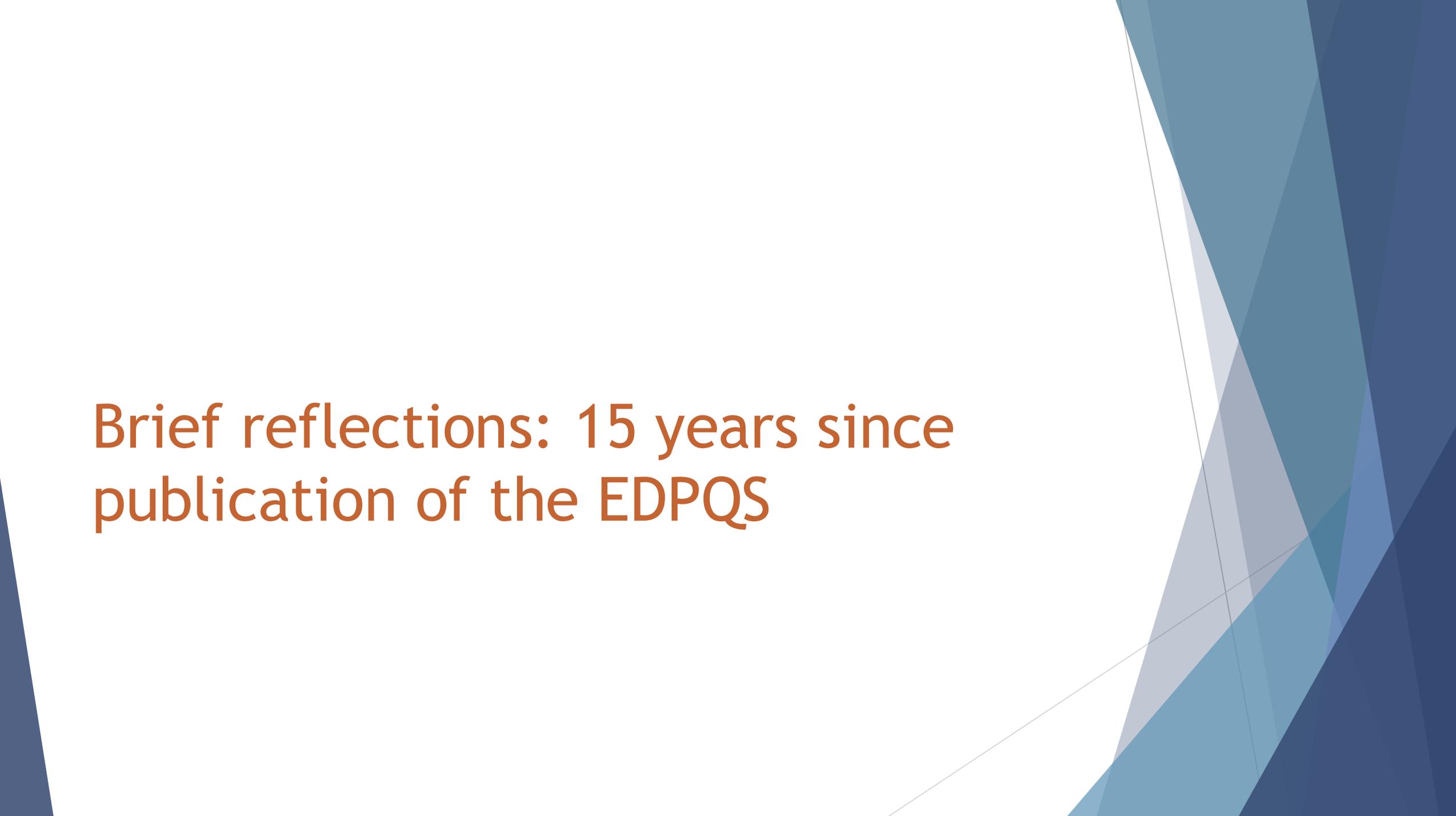
Subscribe for updates about best practice by e-mail 

### About the Xchange prevention registry

Xchange is an **online registry of thoroughly evaluated prevention interventions**. Use the options below to find prevention programmes or strategies. Find here [a toolbox for implementers](#) to make their interventions ready for inclusion in Xchange and fitter for real-life use. [Read more about Xchange here.](#)



- ▶ *Personal reflection* - Specify relevant indicators for measuring intervention success in evaluation



# Brief reflections: 15 years since publication of the EDPQS

# 2011 to 2026: 15 years of EDPQS

## What has been achieved?

- ▶ Follow-up projects to develop toolkits and supporting materials
- ▶ Adoption of Minimum Quality Standards (MQS) in demand reduction by EU member states
- ▶ Development of European Prevention Curriculum (EUPC) to promote EDPQS and dissemination in over 20 countries
- ▶ **EDPQS mentioned in EU Drugs Strategies and Action Plans**
- ▶ **Awareness and acceptance of quality standards among professionals is improving, greater readiness to say 'no' to poor prevention practices**

# 2011 to 2026: 15 years of EDPQS

## Remaining challenges:

- ▶ Lack of resources (knowledge, money) for implementing evidence-based approaches in practice
- ▶ We continue to see poor prevention projects implemented in practice
- ▶ EDPQS can be (inadvertently) misunderstood and misused
- ▶ **Funding criteria and procedures** largely remain unchanged

# Take-away messages

Source: PowerPoint stock images



- ▶ Quality standards clarify what we should expect from prevention - think of them as benchmarks to aspire to!
- ▶ They offer us a shared framework to talk about prevention
- ▶ Quality standards can help us distinguish between ‘better’ and ‘worse’ prevention work (or aspects thereof)
- ▶ Key factors for EDPQS sustainability after 15 years:
  - ▶ Developed through a rigorous process
  - ▶ Follow-on projects to disseminate and support uptake

**“Think of EDPQS next time you select or review a prevention activity!”**



## Q & A

Some questions to reflect upon now or later:

- ▶ What is the minimum of “quality” which YOU expect from a prevention activity?
- ▶ What criteria, checklists, standards or guidelines do you already work with? How do they differ from the EDPQS?
- ▶ Do funding criteria and procedures in your country/region promote ‘quality’ in prevention?

# For more information and to access the toolkits

## European drug prevention quality standards (EDPQS)

LISBON 01.12.2011 SERIES TYPE: [MANUALS](#)

### Introduction

This Manual is a joint production by the EMCDDA and the Prevention Standards Partnership, and presents and describes basic and expert level quality standards for drug prevention. The standards cover all aspects of drug prevention work, including needs and resource assessment, programme planning, intervention design, resource management, implementation, monitoring and evaluation, dissemination, sustainability, stakeholder involvement, staff development, and ethics. Considerations regarding the standards' real-life implementation are provided, acknowledging differences in professional culture, policy, and the structure of prevention delivery within Europe.

Click here for more information about the European drug prevention quality standards (EDPQS) including toolkits. **(The EDPQS Toolkit files are temporarily unavailable)**

#### Notes on translations:

- **German** (translated and produced by [Thüringer Fachstelle Suchtprävention](#))
- **Spanish** (in 2019 by Manuel José Bonilla Puerta, revised by Servicio de Promoción y Educación para la Salud (Dirección General de Salud Pública y Adicciones-Consejería de Salud- Comunidad Autónoma de la Región de Murcia) and by IREFREA-Instituto Europeo de Estudios en Prevención, España.)
- **Hungarian**: translated by the Hungarian national focal point
- **Polish**: translated by the Polish national focal point.

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**Pub. Author:** EMCDDA

**Pages:** 292

**Price:** free

**ISBN:** 978-92-9168-487-8

**Catalog Number:**  
TD3111250ENC

**Bookshop URL:**  
<http://bookshop.europa.eu/uri?target=EUB:NOTICE:TD3111250:EN:HTML>

- EDPQS: a quick guide
- About EDPQS and toolkits

▼ **Main subject**

► [www.euda.europa.eu/publications/manuals/prevention-standards\\_en](http://www.euda.europa.eu/publications/manuals/prevention-standards_en)

# Thank you for your attention!

Dr Angelina Brotherhood

E-mail: [angelina.brotherhood@goeg.at](mailto:angelina.brotherhood@goeg.at)

EDPQS manual, quick guide and toolkits available from EUDA's website:

- ▶ [https://www.euda.europa.eu/publications/manuals/prevention-standards/about\\_en](https://www.euda.europa.eu/publications/manuals/prevention-standards/about_en)