Primary results of the Spanish adaptation of the Universal Prevention Curriculum (UPC)

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GOALS OF THE UPC-ADAPT

Main Objective: to train prevention professionals with standardized curriculum Specific Objectives:

To establish an **European curriculum**, based on the UPC.

To establish quality standards for staff in prevention.

To cover **universal quality standards** to the practice floor of prevention. To **promote teamwork in 9 EU countries (Estonia, Poland, Czech Rep, Germany, Belgium, Zagreb, Slovenia, Italy and Spain)**; connected with civil society, academics, practitioners, policy, and the EUSPR net.

GOAL OF THIS POSTER

To show the initial Spanish contribution to this project [UPC-Adapt] concerning the review of the existing prevention curricula in Spain and the mapping of the training needs in the target audiences and the identification of contextual elements for training design

METHOD AND SAMPLE

INTRODUCTION

Evidence-based programs are getting increasingly important. The Universal Prevention Curriculum (UPC), a comprehensive training package in the field of drug use prevention, is based on evidencebased principles. The UPC was developed through the APSI (Applied Prevention Science International, <u>www.apsintl.org</u>).

RESULTS

1. Mapping of existing DEGREES with prevention curriculum in Spain

	Degree in		
	Psychology	Social	Social Work
		Education	
Universidad de Sevilla	1		
Universidad de Málaga	2	1	1
Universidad Complutense de	2	1	
Madrid			
Universidad de las Islas Baleares	2	1	1
Universitat Oberta de Catalunya	2	1	
Universidad de Granada	2	1	1
Universidad de Valencia	1	1	1
Universidad de Las Palmas	1	1	1
Universitat de Girona	1	1	1
Universidad de Santiago de	1	1	1
Compostela			
Universidad de Barcelona	2		Without data
Universidad de Oviedo	1		2
Universidad de Salamanca		1	No degree offer
Universitat Ramon Llull		1	1

Our contribution draws on qualitative data from three focus groups in a sample of 31 participants **(13 practitioners and policy makers, 6 academics and 12 university students)** and on document analysis. Information collected:

Existing study support documents in general, and specifically for online prevention.

We included articles from the literature review of: drugs prevention; alcohol use and misuse. Prevention and treatment: tobacco use, toxic drugs use, diseases and disorders, cannabis use, intravenous drug use, and opium use.

Existing prevention curricula in Spain (degrees and masters)

Training needs in the target audiences (policy makers, coordinators, implementers, academics and students).

3. Review of existing study support documents

Main results of this review:

- Family and school guidance.
- Appropriate policies for prevention and effective parts of programs.
- Risk/protective factors, reasons for drug use, and values, attitudes, and beliefs.
- The importance of fidelity of implementation, and training the trainers.

4. Training needs in the target audiences

Policy makers, coordinators, and implementers:

2. Mapping and review of existing MASTERS with prevention curriculum in Spain



Method of presentation: 5 in-class, 2 partial in-class/ blended learning, 4 online.

Number of credits: average of 161.6 ECTS credits (2 years long).
Formal recognition: Master's degree, Expert Diploma, Diploma.
Topics (i.e. substances, pharmacology, pathology, general prevention and/or specific school and family prevention).

- Messages of prevention: clarified on a universal level.
- More practical skills.
- Communication between the various departments.
- Easily applied to a master level.
- Continuous training to the current professors.

Academics:

- Create deliberate spaces of intellectual cooperation and collaboration for students.
- Better understanding of the field of prevention.
- Improve the measures to evaluate the efficiency of prevention initiatives.
- The restrictions imposed by universities create a large barrier regarding the implementation of new curriculums.
- Students must have certain innate abilities and have experience in the field.

University Students:

- Training for the teaching staff in order to become aware of the current needs of prevention
- More internships throughout the training.
- To enter in the training with abilities already cultivated and formed from previous years.
- The training must be in line with the cultural practices of the country.

DISCUSSION AND CONCLUSION

According to the abovementioned points, our conclusions are that there exists:

- 1. A lack of a homogeneous curriculum.
- 2. A lack of evaluation of current prevention initiatives.
- 3. A need of an academic and institutional recognition.
- 4. A lack of professors with practical experiences and adequate motivation.



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