

**— Final Project Evaluation —**

**Project Number: AD/RER/04/H37**

**Drug abuse and HIV/AIDS prevention through mass media,  
NGOs and civil society organizations**

**A project of the United Nations Office on Drugs and Crime,  
Region of Central Asia  
(2004-2007)**

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## List of acronyms

CA: Central Asia	MOA: Memorandum of agreement
CSO: Civil Service Organization	NGO: Non-government organization
DCC: Drug Control Committee	ROCA: Region of Central Asia
GCS: Global Challenges Section	TPR: Tri-partite reviews
LSBE: Life-skills based education	

## ***Executive summary***

### **Summary table of findings, supporting evidence and recommendations**

<i>Findings: identified problems/issues</i>	<i>Supporting evidence/examples</i>	<i>Recommendations</i>
1. Instability in all sectors impeded project progress.	A number of participants were unavailable to the project because they no longer held their positions; some key informants spoke from new positions.	Examine sources of instability and, through a workforce development lens, address factors within UNODC's scope.
2. There is need for heightened cooperation and collaboration among international agencies.	Expert informants identified examples of weak cooperation and collaboration occurring among international aid groups and government offices.	Develop an honest broker role to support heightened cooperation and collaboration between prevention stakeholders.
3. The project experienced a small amount of "conceptual drift".	Project documents and key informant comments. Vienna study tour had a treatment focus.	Prepare and broadly disseminate a logic model as a planning and communication tool to ensure consistent focus.
4. Prevention is a "poor sister" of enforcement/supply reduction in CA governments.	Interviews with government officials.	Promote a strategic approach to prevention as an indispensable cost effective complement to supply reduction/enforcement measures.
5. Project follow through including planned web section remains to be done	There is no reference to the project on UNODC ROCA's web site.	Establish a prevention section to the UNODC ROCA web site to provide ongoing focus to relevant work.
6. Project documentation could have been stronger.	Documents arising from various activities and meetings were unavailable.	Ensure adequate project staff resources to prepare project documentation when planning future similar projects.

Project RER/H37 *Drug Abuse and HIV/AIDS Prevention through Mass Media, NGOs and Civil Society* (2004-2007) aimed to mobilize the efforts of governments, the media, and civil society organizations to produce an expanded and concerted response to drug abuse and HIV/AIDS prevention and care in Central Asia.

Four of the five targeted countries agreed to UNODC stipulations and joined the project: Uzbekistan, Kazakhstan, Kyrgyzstan, and Tajikistan. Turkmenistan did not participate. Targeted sectors in each country were government offices concerned with drug abuse, mass media outlets, NGOs with relevant interests, and schools for children Grades 5-9.

Means used to achieve the project aim were: a monitoring/scanning phase to identify appropriate participants in the media and NGO sectors; use of incentives to encourage participation in these same sectors; training on best practices in all sectors, and ongoing opportunities for information exchange and experience sharing.

With its prevention focus targeting non-users, the project was breaking new ground in the region. The four targeted sectors were very appropriate in that each has a large role to play in advancing prevention. When introducing a new concept or innovation, there will always be varying levels of readiness in a population; nevertheless, all key informants saw the project to be relevant and appropriate.

The project design was for the most part quite logical. Identifying appropriate partners and participants, providing incentives for involvement to increase motivation where it might not otherwise exist, and delivering training on evidence-based approaches all made good sense.

The project did not operate from an explicit theory base (e.g. social influence theory; problem behaviour theory) which would have helped retain focus in all of the project's strands and increased confidence in the possibility of effectiveness. Nevertheless, for a large, multi-component project operating in four countries, it retained a strong focus. There was some evidence of "conceptual drift" with the study tour in that it focused more on treatment populations and issues than prevention. Also, the target age range of youth varied between the NGO, school and the media sectors, which may have diminished the impact.

Feasibility was an important question given that the project aimed to break new ground. In an environment of significant political and social instability and uncertainty, it

was understood that these sectors may not fully commit or be able to organize themselves to fully participate. In the end, the general environment and the level of readiness affected project success.

The political situation in the region made it challenging to even convene workshops at times. Many participants in each of the sectors (government offices, NGOs, media outlets and schools) moved out of their positions during the course of the project. Seeing trained staff move away and re-igniting plans with new staff was a common feature of the project, slowing momentum and preventing the project from fully achieving its objectives. Slow negotiations and decision-making in the education sector had a particularly strong effect on the education-related objective.

The project largely, but not fully, met its objectives. The project did not reach the numbers of participants planned in all cases. Nevertheless, it appears that those reached (according to key informants interviewed) viewed the project very positively, with many indicating that their project experiences shifted their attitudes and changed the way they do their work. Will they prove to be a sufficient spark to mobilize their respective sectors and ignite evidence-based prevention across the region?

Without strong, strategic follow-up the answer is “not likely”. Important ground has been broken on promoting evidence-based prevention in the region. Public awareness on the issue may have slightly shifted, a number of professionals in the region have been exposed to new ideas and have changed the way they do their work, and some important school-related materials have either been developed or are under development. But most of these efforts will dissipate without continued attention from UNODC ROCA. An important exception is the teacher training initiative in Uzbekistan. With a manual having been prepared for Grade 5-9 teachers, and 16 trainers certified to train other teachers, the impact could well broaden over time. UNODC ROCA should follow through on a planned Web resource to support ongoing information exchange.

For good reason, UNODC held the reins on this project – CA governments need to take those reins and begin to lead future prevention efforts. But in the face of the enormous stakes involved in stemming drug trafficking in the region, drug abuse prevention can easily be viewed as a secondary priority. Evidence-based prevention has however shown itself to be cost effective in ways that supply reduction activities have not demonstrated, and drug strategies world wide recognize the need to balance demand (i.e.

prevention and treatment) and supply reduction efforts. Central Asian countries need to strive for greater balance between the prevention and supply reduction arenas, and approach their prevention work more strategically.

The recommended role for UNODC ROCA going forward is to model a balanced approach in its own work, advocate for evidence-based prevention at the highest levels, urge the development of formal prevention strategies and provide ongoing consultation on the roll-out of these strategies and the involvement of necessary stakeholders. Change will be incremental, and instability in the region will continue to loom large as a factor, but institutionalizing prevention as a core government mandate must be the aim.

This doesn't necessarily call for significant project funding. In fact, there is some indication that the availability of large amounts of funds on the part of international agencies can be disruptive. It is recommended that UNODC ROCA consider taking on an "honest broker" role between Central Asia governments, international funders, and other stakeholders. This is a role that requires the credibility of a UN agency and is one that is not so easily taken on by a large funder.

## **1. Introduction**

### **1.1. Background and context**

- 1.1.1. In 2004, the United Nations Office on Drugs and Crime (UNODC) Region of Central Asia (ROCA) initiated the project, *Drug abuse prevention and HIV/AIDS care through mass media, NGOs, and civil society organizations* to assist Central Asian (Uzbekistan, Tajikistan, Kyrgyzstan, Kazakhstan, and Turkmenistan) governments in developing a comprehensive response to drug abuse and HIV/AIDS.
- 1.1.2. This project built on the regional project, *Training of Central Asian Mass Media Practitioners and Raising of Public Awareness on Drug Related Issues*, and drew guidance from the UNODC Demand Reduction Section, particularly the project, *“Developing and disseminating good practice in using the media for drug abuse and crime prevention”*.
- 1.1.3. The problems defined for this project were: a lack of public awareness and information on drug abuse and HIV/AIDS issues; particularly among youth; and a lack of technical expertise and capacity among NGOs and CSOs to undertake evidence-based prevention.
- 1.1.4. The project document presented a generally clear and logical response to these problems. The immediate objective of the project was to mobilize the efforts of governments, the media, and civil society organizations to produce an expanded and concerted response to drug abuse and HIV/AIDS prevention and care in the Central Asian region through:
  - promoting mass media-driven mechanisms in prevention of drug abuse and HIV transmission;
  - supporting NGOs and CSOs in effective community based prevention activities, and;
  - contributing to the development of effective primary drug and HIV prevention at schools.
- 1.1.5. The strategy was to enhance the capacity of governments, mass media, NGOs and schools to prevent HIV/AIDS and drug abuse by providing training, consultation and incentives to engage on the issue. Given that the concept of drug abuse prevention is

quite new to the region, a strategy targeting these sectors has sound basis – while other sectors have roles in drug abuse prevention, the sectors targeted in this project would generally (along with parents) be viewed as having primary importance. Youth were the ultimate target for all project activities, and while prevention can occur at other points in the life span, youth are a logical target.

- 1.1.6. The original project proposal presented a two year plan with a \$400,000 budget. At the mid-point, the project was revised to include a third year and additional \$300,000. The project consisted of four objectives – one each pertaining to the media, NGOs, and schools and a final objective concerned with UNODC communications.
- 1.1.7. The ultimate budget and time lines were reasonable given the complexity of the project (addressing four objectives in five countries<sup>1</sup>). With the exception of several small inconsistencies and questions of focus discussed in Section 2.1, the project document reflected a project with good logic and coherence.

## **1.2. Purpose and objectives of the evaluation**

- 1.2.1. This final independent evaluation was carried out to: reach conclusions on the project's *relevance, design and progress* towards stated objectives; provide information on *findings, lessons learned, recommendations* with regard to *efficiency, effectiveness, appropriateness, relevance, impact and sustainability*; provide information on *gaps, unintended outcomes, effectiveness of the mode of implementation, appropriateness and application of guidelines and policies* and; strengthen the *monitoring and evaluation* system to support results-based management of the project.
- 1.2.2. The primary client for this evaluation was UNODC ROCA while Central Asian governments and UNODC HQ were viewed as secondary clients.

## **1.3. Executing modality and management arrangements**

- 1.3.1. The independent evaluator was recruited and contracted by the UNODC ROCA as a result of consultations with the Independent Evaluation Unit (HQ), DR Unit and a bidding process undertaken by UNODC ROCA. The UNODC ROCA office provided

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<sup>1</sup> Turkmenistan did not sign the project agreement and was not involved in this project.



administrative support that included preparation of travel itineraries, visa support and dissemination of questionnaires to key informants.

#### **1.4. Scope of the evaluation**

1.4.1. This evaluation covers the activities of the project implemented from September 2004 (start of the project) to the end of 2007 in Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan. The Terms of Reference for the evaluation called for assessment of the following:

1. The relevance and effectiveness of the project design, strategy, approach and activities in response to the needs;
2. The project's implementation;
3. Efficiency of the project in terms of resource utilization, technical inputs and support to the national counterparts and other beneficiaries;
4. Factors contributing to or impeding achievement of the results/outcomes;
5. The sustainability of project results after the project's completion;
6. The outcome of project interventions;
7. Anticipated impact of the project in primary prevention in countries in terms of social, technical and other effects;
8. Identification of best practices for replication in other UNODC projects at other locations and within the region.

#### **1.5. Evaluation methodology**

1.5.1. The evaluation methodology comprised the following:

1. Review of relevant documents (project document, project revision document, mid-term evaluation report, semi-annual and annual project progress reports; mission reports); project grant reports as well as materials developed under the project were, for the most part unavailable in English;
2. Briefing by responsible UNODC staff in the Regional Office for Central Asia (ROCA) and in the UNODC Sub-Offices in Kazakhstan, Kyrgyzstan and Tajikistan;

3. Individual and group interviews with national focal points, officials from various government ministries, Drug Control Coordinating bodies, NGOs representatives, school representatives, experts and other knowledgeable parties in the region;
  4. Focus group discussion with students of one pilot school (Uzbekistan).
- 1.5.2. A standard questionnaire that sought details on each objective on a country-by-country basis was administered. Information and perceptions were sought on the initiative in each country from the various stakeholders.
- 1.5.3. All key informants and focus group participants were forwarded the questionnaire in advance; they were informed that their comments would be held in confidence and that their names would not be associated with any comment or issue in the report. The Project Coordinator accompanied the evaluator to all sites but remained only to introduce the evaluator and summarize the purpose of the evaluation. Participants were provided a translated draft of the evaluation report and invited to react to the draft or otherwise provide further information.

## **1.6. Evaluation limits**

- 1.6.1. There were several limitations to this evaluation. Limited data were available on the behaviours and indicators in question; consequently much of the information provided represents respondents' perceptions, which could not be independently corroborated. Not all relevant documents were available to the evaluator in English due to Russian being the working language in the subject countries, and limited translation resources. Key informant interviews and focus groups were conducted in Russian or one of the national languages and translated into English. It is possible that some detail or accuracy was lost in the translation process. Some of the events in question occurred two years previously, so recollection of these events may have been less than complete.

## ***2. Analysis and major findings***

### **2.1. Relevance and appropriateness of project**

- 2.1.1. Transshipment of Afghan heroin and opium occurs in all Central Asian countries. As such, counter-trafficking supply reduction measures are major preoccupations for CA governments and indeed UNODC. Each country's drug control agency, commission or

committee (DCC) sees the reduction of trafficking of opiate substances as their primary focus. This is completely understandable. Yet the increased exposure to heroin has fuelled significantly increased use and call for greater demand reduction attention in these countries.

- 2.1.2. It is commonly agreed that a national drug strategy must attempt to balance supply reduction measures with efforts to reduce demand through prevention and treatment. DCCs and other government officials in the region indicated that they understood this and acknowledged that prior to the project they needed to enhance their expertise and capacity in prevention.
- 2.1.3. Similarly, according to key informants, prior to the project mass media coverage was skewed in the direction of sensationalized accounts of “drug busts” – little attention was paid to prevention activity. There was otherwise a tendency to underreport social problems (which key informants say continues to some extent).
- 2.1.4. While NGOs had some appreciation for the importance of prevention, they lacked guidance on how to best approach the issue. NGOs in the region were seen as having large potential to strengthen their role in this area. They were seen as mobile, resourceful and possessing grass roots experience. Many of them had been trained by different international organizations.
- 2.1.5. Similarly, schools and educators in some regions had some experience with Life Skills Based Education (through UNICEF) and the WHO’s Healthy Schools movement, and were seen as good candidates for drug prevention programming.
- 2.1.6. This project, aimed at building capacity in the government as well as non-government, media and school sectors, was widely seen by key informants in the region as highly relevant and necessary.
- 2.1.7. The general project design was well reasoned, involving identification of candidate groups, training, incentives for engagement, and opportunities for experience sharing in most cases. In a sense, national governments were viewed as both partners and targets of this project. This was appropriate – governments needed to begin to assume a role in prevention, yet they needed support and direction in playing this role.

## **2.2. Logic of project design and effectiveness and efficiency of project**

2.2.1. The project plan presented the statement of the problem and the overall and immediate objectives of the project in a relatively clear and logical fashion. All project participants perceived the plan to be clear and logical and they had a sound understanding of what the project was meant to achieve.

2.2.2. However, small discrepancies and inconsistencies existed in the project document:

- This was a prevention project directed to non-using populations, yet (as a result of input from the UNODC HIV/AIDS unit), the word “care”, which is associated with treatment populations/issues, was added to the overall objective of the project. The vast majority of project activities focused on prevention but a few gave attention to treatment issues, and in so doing, slightly eroded the prevention focus.
- Though the school sector had an objective associated with it (#3), it was not identified in the title (as were the other sectors targeted in the project), and it was not introduced initially in the document (e.g. Brief description; Target area and beneficiaries; Expected end of project situation) as were the other sectors.
- Governments were mentioned as a target of this project and resources were in fact committed to this sector, yet no objective was prepared for the government workshop activity, nor was this activity a part of the work plan.
- In what may have been typing errors, Section III Activity 1.2 called for 5 media workshops while the workplan identified 7, and Section III Activity 1.3 called for 4-5 journalists maximum to participate in a study tour, while the workplan called for 4-5 journalists maximum from each country.

2.2.3. The project aimed to prevent drug abuse and HIV/AIDS. Drug abuse prevention, according to the most common current model (U.S. Institute of Medicine, 1997), can target universal, selective or indicated populations; these levels of prevention distinguish between different levels of risk or engagement with substance use in a target group and can be placed alongside treatment in a continuum of services. A project that does not

clearly identify the level of prevention can experience some lack of focus and possibly, dissipation of effort; this may have been the case with Project H37 in that some elements of the project actually focused more on treatment than on prevention. Specifying the targets of this project more precisely may have led to a more consistent target and focus between the four elements of the project.

2.2.4. Also, prevention research is clear that multi-component initiatives that integrate the various elements have more potential than single efforts. This project contained the seeds of an integrated multi-component initiative and in some ways integration appeared to occur, but it wasn't an explicit objective of the project. By clearly aiming for integration between components, more opportunities may have been identified, for example by bringing together messages presented in the radio spots and those in the school booklet, as was suggested by one respondent.

2.2.5. The project may have benefited from a more consistent focus on a particular age range of youth. The project's school programming involved youth age 11-15 years, while media programming was directed at older youth. Data reported by K. Niaz (Oct 2007) concerning drug use in Uzbekistan found that less than 1% of 16 year olds had ever used an illicit substance, while a sample of problem drug users reported first use of a substance at between 19 and 25 years of age depending on the drug. Allowing for some under-reporting among students, these data suggest that drug use is not a part of the reality of young adolescents in this country and that prevention messages and activities would be more salient for older youth; so assuming the situation doesn't differ greatly across the region, older adolescents may have constituted a more logical target group for the project (it might be argued that "getting to them early" is a good prevention practice but experts caution that educationally introducing substances that wouldn't otherwise be a part of the reality of young people can lead to curiosity and increased use).

2.2.6. Youth were identified as one of four targets of this project along with mass media governments and NGOs. Another way to present the logic that was apparent in the project would be to see youth as the primary target of the project with governments, mass media, NGOs, and schools being the intermediary targets or vehicles to reach young people.

- 2.2.7. It makes sense to see mass media as an important vehicle for reaching youth and increasing visibility on this issue. But it is important to be realistic with what the media can accomplish. Research suggests that mass media is less effective on its own and more likely to have an effect when combined with community-based action. It is possible that the situation in this region differs from the West (where most research is conducted) in that regional research has found that a very high percentage of young people trust the media and indicate they would like to get information on drugs from the media. In any case, definite efforts were made in this project to tie the media component with the government and NGO components, but they may have been strengthened by explicitly stating this as an aim in the project document.
- 2.2.8. The final objective of the project focused on strengthening advocacy for UNODC's role in the region. This objective appears less central to the overall objective of the project, yet while strengthening the agency's visibility in the region generally, it could also be supporting the aims of this project.
- 2.2.9. A Logical Framework outlining the project elements and logic was prepared for this project (as with all UNODC projects). This is a crucial planning tool, but if broadly disseminated and referenced, it or a graphic summarizing the key elements can also serve as an important communication tool, helping all participants understand the project.
- 2.2.10. Notwithstanding these suggestions, there was good overall logic to the project design. Also, as a prevention project it broke new ground, engaging new actors (e.g. media, NGOs) in prevention; so it could be argued that there were limits to how far these new players could be brought along in their thinking and practice in this project.

### **2.3. Clarity and measurability of objectives**

- 2.3.1. The objectives and outputs were stated in clear and measurable terms.

### **2.4. Feasibility of the plan**

- 2.4.1. Going into the project it was understood that several risks threatened its feasibility:
- difficulty in engaging media due to political sensitivity or due to private enterprises seeing no benefit;

- unstable financial situation of NGOs hampering their capacity to sustain prevention activities over the long term;
- government bureaucracy limiting progress with school prevention work.

2.4.2. The proposed risk management strategies involved advocacy with government, drug control commissions and media managers to support media, NGO and school involvement in drug abuse and HIV/AIDS prevention. The above-mentioned risks lie to a large extent beyond the control of UNODC so advocacy may be one of the few instruments available to UNODC on this matter. Advocacy can take different forms. Might there have been a role for strenuous high-level advocacy between for example, the Regional Representative and senior government and media officials? Shifts in attitudes, policies and practices take time – nevertheless it was fair to assume some movement in the desired direction would be feasible.

## **2.5. Operational plan, monitoring and backstopping**

- 2.5.1. The project was executed by UNODC ROCA and managed on a day to day basis by a Project Coordinator who reported to the Regional Representative. The Coordinator was supported by a Project Assistant. Indications are that project staff sought close cooperation with other international organizations such as UNICEF, UNESCO and the Global Fund to Fight AIDS, Tuberculosis and Malaria.
- 2.5.2. The plan called for the project to be implemented by UNODC only when the obligations of the respective governments were met to UNODC's satisfaction. One of the governments, Turkmenistan, chose not to pursue the project.
- 2.5.3. It was UNODC's plan to have governments establish working groups consisting of the policy-making representatives of mass media institutions, the Ministries of Health and Education and other concerned bodies. The extent to which this occurred is unclear. According to project staff, it proved challenging to sustain the interest of government offices for a number of reasons, including movement of officials, and a lack of appreciation for the importance of demand reduction and prevention in relation to supply reduction. Because the level of technical knowledge on prevention was quite low among all stakeholders, including government officials, these parties may have been viewed more as targets for prevention competency building than partners in executing the

project. Though a functioning working group structure for each country does not appear to have been sustained, there is evidence that strong efforts were made to inform and collaborate with these various groups during this project. It is likely that the training of government officials conducted through this project has contributed to a heightened appreciation of the importance of prevention, which may (with continued support) lead to more formal, systematic attention to the issue.

- 2.5.4. It was arranged that the respective governments and UNODC could jointly review the project at any point. The project was subject to the usual United Nations audit mechanisms, and was audited in September 2006. Monitoring of project implementation was the responsibility of the UNODC Regional Representative for Central Asia. Monitoring by the Project Coordinator occurred through regular contact and visits with government counterparts (approximately quarterly) to discuss project implementation, problems faced, etc.
- 2.5.5. Participating countries did not prepare reports for the project; rather, the Project Coordinator prepared annual or semi-annual reports for the focal points in each country. In Uzbekistan, government counterparts received a brief activity report from the Project Coordinator every three months. Also, eight focal points appointed by the Uzbek government from relevant ministries were invited to semi-annual project briefings. A complete slate of annual and semi-annual reports from 2004 was prepared for the overall project by the Coordinator.
- 2.5.6. It was proposed that a mid-term evaluation be carried out two years after commencement, and this internal evaluation was prepared October 2006 and placed on UNODC's Intranet site. Tri-partite reviews (TPR), that is, joint reviews by the Government(s), the executing agency and UNODC, were to be held every 12 months with the final TPR occurring four months before the end of the project. The final TPR report is available in Russian. Provisions for a final external evaluation were made in the project budget with the understanding that they may not be reduced or eliminated except by written agreement of all parties.
- 2.5.7. The mid-term evaluation included two recommendations: (1) Lessons learned and experience gained from the implementation of the project should be noted and used in



planning and implementation of UNODC's future demand reduction projects in Central Asia; and (2) Continue close cooperation with relevant governmental and non-governmental organizations, mass media and other international organizations in planning and organization of various prevention activities. These are reasonable recommendations but, for the most part, they call for attention to the way future projects are conducted, rather than recommending changes to this project. The first recommendation calls for attention to the mid-term lessons learned from the same document, which can be summarized as follows:

- It is necessary to concentrate UNODC efforts on media campaigns involving young prospective journalists;
- With limited funds, it's possible to support a large number of active and properly trained NGOs in the field of demand reduction;
- There is increasing demand and initiative from governments in support of effective drug prevention activities;
- It's necessary to concentrate on long-term activities like production and dissemination of information, education and communication materials on drugs, train the trainers. (e.g., organize regular standing courses for teachers with proper trained staff).

These are sound observations, and are worth referencing as UNODC ROCA considers future demand reduction efforts. The second recommendation could be understood as relevant to this project, and indications from key informants are that project staff gave this recommendation close attention. As mid-term evaluations can guide decisions to redirect and optimize project resources, recommendations bearing more directly on the project would have been helpful.

2.5.8. It appears that extensive support was provided by UNODC Headquarters in Vienna (Operations Branch, Global Challenges Section (GCS), and HIV/AIDS Unit). Backstopping by UNODC's GCS occurred throughout the project. Prevention staff of the GCS provided consultation and facilitated four workshops for the project; resources prepared by the GCS detailing best practices on use of mass media and school-based prevention were central resources for the project.

## 2.6. Attainment of objectives

- 2.6.1. **Objective 1:** To promote mass media-driven mechanisms in prevention of drug abuse and HIV/AIDS prevention and care.
- 2.6.1.1. It appears that this objective was somewhat achieved. The project document stated that 200 journalists, journalism students or press secretaries would be trained through the project; however the actual number reportedly trained was 90.
- 2.6.1.2. Although the intended numbers were not attained, virtually all activities were completed as planned: media were monitored in all countries to identify candidates for the study tour; five of the most active journalists undertook a study tour to Austria and produced a number of publications on their return; and FM radio stations popular with youth were selected and funded for 6-months (through additional project monies in 2006). A fifth media workshop was convened at the end of the project to give media outlets involved with the 6-month campaign an opportunity to share experiences, and other efforts were made to support networking and information exchange in this sector.
- 2.6.1.3. No significant implementation problems were reported by participants of Objective 1 activity. At the outset, participants were asked for their input and vision. They reported that they very much appreciated the guidance given while also being afforded the latitude to use their professional judgment with their work.
- 2.6.1.4. The workshop sessions reflected this same approach; the interactivity featured in these sessions demonstrated a belief that participants had much to give to the process of arriving at good practices in media coverage of this issue in the region. The materials that were made available at the workshop were greatly appreciated. When problems did arise, the Project Coordinator was reportedly quite available, and the administrative support for the project (e.g. to prepare itineraries and process expense claims) was perceived as strong.
- 2.6.1.5. According to comments from mass media participants, it appears that key project concepts were, for the most part, understood. Most participants understood that effective prevention calls for a clear understanding of the perspective of youth that can best be obtained through focus testing of ideas. They all understood that sensationalized reports of drug busts and overdose deaths do not have a preventive effect. They all saw that a

criminalizing approach is not as helpful as a health-based approach and that “loud, one-day events” don’t work.

- 2.6.1.6. The Vienna study tour was seen as very intensive but highly valuable by participating journalists. They were impressed by the humane approach to treatment witnessed and the continuum of services that were available for people with drug use problems.
- 2.6.1.7. Some lack of focus was apparent in that the study tour appeared to give more attention to treatment populations/issues than non-using populations. Resulting articles by participants on their return home reflected this same pattern. A main message associated with this coverage was that drug users are human and should be accorded humane treatment. This may have been viewed by project staff and media representatives as a necessary basic message that needed to precede prevention messaging, but it is not a prevention message.
- 2.6.1.8. The Project Coordinator had a clear understanding of these distinctions but may have seen the need to allow journalists some measure of autonomy to arrive at the most appropriate coverage according to their professional judgment.
- 2.6.1.9. While indications from key informants are that this objective was achieved, little supportive evidence was available in English (e.g. data on the number of articles/programmes; content analysis of articles/programming).
- 2.6.2. **Objective 2:** To mobilize and support NGOs and CSOs in effective community based prevention activities.
  - 2.6.2.1. It appears that this objective was partially achieved. The project document stated that 50 NGOs would be strengthened through project activities and five would receive focused support through a grant process; however, the actual number was 19 trained with three or four receiving grants (not clear from project documents). Evaluations of the NGO grant projects were planned and this took the form of site visits by the Project Coordinator and the provision of final narrative and financial reports by each grant recipient.
  - 2.6.2.2. Nevertheless, most activities planned to achieve this objective were completed: an inventory of Central Asian NGOs dealing with prevention issues was developed and provided to governments and international organizations; 19 of the NGOs in the inventory participated in three workshops (addressing needs assessment, programme

planning and basic principles of primary prevention, and experience sharing); and the grants process was undertaken.

- 2.6.2.3. No significant implementation problems or gaps were identified by participating NGOs. Some had received little training of any sort to date, so the whole experience was novel and viewed very positively. Participants welcomed the interactive approach taken in the workshops and their practical nature. Notable new knowledge included: the structure of NGOs; the relationship between NGOs and government; the importance of a comprehensive approach involving different sectors; how to undertake effective prevention programming (e.g. activity circles); grant application skills (including role plays of funder meetings); and what other NGOs were doing. Two participants cautioned about adopting Western best practices without tailoring them to the region.
- 2.6.2.4. A small question is whether the NGOs were engaged in truly effective prevention work. One of the NGO grantees implemented a school program that involved former drug users making school presentations. Former drug users can unwittingly glamorize their experiences, so this work needs to be approached with great caution. That said, it appears from their agendas that these presenters discussed life skills-related issues such as relationships with friends and parents, and problems of adolescence (e.g. love, leisure)
- 2.6.2.5. An important value of NGOs is that they are close enough to their community to tailor their programme. For example, one NGO representative noted that some girls in one community didn't feel the issue was relevant to them for religious reasons, but the NGO was able to engage these girls because it operated from a religious basis.
- 2.6.2.6. While indications from key informants are that this objective was achieved, little supportive evidence was available in English (e.g. NGO inventory, grant project reports or evaluations).
- 2.6.3. **Objective 3:** To contribute to the development of effective primary drug and HIV prevention at schools.
- 2.6.3.1. This objective aimed to: set up multi-sectoral working groups (comprising representatives of ministries of education, teachers, representatives of relevant international organizations) to develop school curricula in each Central Asian country; assess existing school curricula on drug abuse prevention or identify the needs in developing curricula;

provide working groups with assessment results for elaborating an evidence based strategy in compliance with guiding principles for school-based education for drug abuse prevention in each Central Asian country; and assist working groups in strategy implementation. It was planned that 25 trainers from Teacher Upgrading Institutes would be trained through the project, and this was achieved.

- 2.6.3.2. This objective was not met within initial project funding. As was anticipated in the project document, bureaucracy appeared to have been a large constraining factor, so work on this objective was delayed until November 2006. Additional project funding of \$200,000 provided in 2006 allowed the project to take advantage of interest among key stakeholders in Uzbekistan.
- 2.6.3.3. Through the additional funding, the most recent report indicates that sixteen pilot schools in four oblasts of Uzbekistan completed 215 workshops on drug abuse and HIV/AIDS (involving 2,880 students, 960 parents/community leaders, and 50 teachers); 15 teachers, 245 youth and 192 parents were selected and trained as trainers; pre- and post-surveys of student awareness were conducted; a manual for teachers on Life Skills Based Education (LSBE) for grades 5-9 was prepared by the working group of the ministry of public education (Uzbekistan); 60,000 copies of IEC materials, along with selected prevention information produced by UNODC's HQ Global Challenges Section (translated into Uzbek) were provided to schoolchildren, along with other materials. Also UNODC supported a regional conference on strengthening the education sector's response to HIV/AIDS in Tashkent in 2006, and supported UNICEF in conducting two education-sector workshops in Kyrgyzstan at the end of the project.
- 2.6.3.4. Training for educators in Uzbekistan took the form of a series of four workshops that built from basic to advanced concepts. Participating educators reported that they greatly valued these workshop opportunities. They came to understand a number of important principles as a result of the project, such as: the power of social influences such as the Internet and other media in the lives of youth; single education sessions are not effective; simply giving information to students is not effective; "making too much noise around the topic" (i.e. sensationalizing) is not effective; drug education needs to be age and developmentally appropriate; and drug education messages/activities need to be located

in various subject areas (e.g. literature, geography, biology) because health classes don't afford enough time to adequately cover drug education topics.

- 2.6.3.5. The student programme was also built on a four-stage model, concluding with training for peer leadership and featuring a range of interactive activities (e.g. games, brainstorming). According to the post-pilot survey, about 3 in 4 students found the sessions to be interesting and informative.
- 2.6.3.6. In two countries, there were challenges in working through the process of preparing a school manual. To bring together the requisite knowledge and skill involved in preparing manuals of this sort (this requires a high degree of pedagogical as well as drug-specific knowledge), a number of parties with different perspectives and agendas are typically required; in two countries it proved challenging to find consensus among these various parties (e.g. ministry of education officials, UNODC and other UN agencies) and to arrive at a strong product.
- 2.6.3.7. Having access to the English follow-up drug use survey report helped to assess achievement of this objective. Also helpful would have been any completed national curriculum assessments, Uzbek pilot project report, or programme materials developed through the project.
- 2.6.4. **Objective 4:** To strengthen the advocacy role of UNODC in the implementation of its mandates and programmes in Central Asia.
  - 2.6.4.1. This objective aimed to support this project and UNODC ROCA generally with a communication strategy targeting national authorities, international and national mass media and the public in general. It was planned that, in association with this project, 10 press conferences would be convened and twice yearly presentations would be conducted for governments, donors and other partners. By project termination, ten press conferences had been organized and the Regional Representative along with responsible UNODC ROCA staff briefed governments on a regular basis.
  - 2.6.4.2. While not explicitly planned under this objective, the project convened a workshop for government officials in each country with a total of ninety attending. Resourced by an international expert, reaction to the four workshops was quite positive. Participants

reported that the workshop improved their knowledge of evidence-based prevention practices and methods for training others.

- 2.6.4.3. Annual June 26<sup>th</sup> and December 1<sup>st</sup> celebrations with active participation of youth occurred in each CA country, although they were not listed as planned outputs for this objective. Also UNODC's support of summer camps for schoolchildren might be seen as falling under this objective. Poster contests are often a part of awareness raising events; one NGO extended the use of the posters by analyzing their content to gain insight into how youth perceive the issue.
- 2.6.4.4. It could be argued that this objective was not as central to the overall objective of the project as the first three objectives; the counter argument is that UNODC's efforts at achieving project objectives (i.e. building capacity and mobilizing governments, the media, NGOs and schools) will be strengthened if the agency is seen as a credible leader.
- 2.6.4.5. Through the course of this evaluation it became apparent that cooperation between international organizations in the region was critical to achievement of this project's objectives (and indeed programming more generally). Because of the significant number of international agencies active in the region on issues linked to drug abuse and HIV/AIDS prevention, and the large sums of money available to this work, it is important that effective working relationships be forged. This evaluation found examples of effective collaboration (e.g. with Global Fund, and with UNICEF, Kyrgyzstan) and one example of challenges in collaborating (UNICEF, Tajikistan).

### ***3. Outcomes, impacts, sustainability and constraints***

#### **3.1. Outcomes**

- 3.1.1. **Objective 1:** The project has apparently had a positive effect on the manner in which participating journalists report or develop programming on this issue. All journalists interviewed indicated that this project improved their understanding of the issues and gave them the knowledge to cover the issues in a way that contributes to prevention or treatment. Several participants mentioned that visiting the treatment centre at Pavlodar was a key to shifting their views on the issue. They came to see that poor coverage can lead to misunderstanding of the issue and can worsen the problem (e.g. by increasing stigma on drug users; by highlighting the amount of money that can be made by

trafficking in drugs; or by sending the general message: Drugs! Something Special!). The experience reportedly changed the way they did their work. Government officials in one country observed that journalists/media were less likely to go for the “hot” story as a result of the project.

- 3.1.1.1. It needs to be emphasized that preventative media coverage directed to non-users was a new concept in the region – previous campaigns were typically aggressively aimed at current users. FM stations conducting the 6-month campaigns were faced with a mandate that was new to them – to communicate positive messages to non-using youth. They responded with a range of new approaches (e.g. vox populi, serial vignettes, and “edutainment”) that appeared to be well received and have positive effect. All stations were impressed by the amount of feedback they received – in some cases, more than they had ever received on any other campaign, and it was clear to programmers that young people were being emotionally affected.
- 3.1.1.2. At least some of the journalists reached through this project have continued to network and exchange information with each other. While some felt that more positive drug coverage in their country had expanded and deepened as a result of this and other recent projects, others didn’t feel that the numbers of journalists trained were sufficient to significantly shift overall coverage.
- 3.1.1.3. The extent to which the media component, particularly the 6-month campaign aimed at youth, might have shifted attitudes or behaviours is unclear as no surveys were conducted. The track record for media effectiveness in effecting change on this issue is not strong internationally. Nevertheless in local research youth have reported that they trust local media and look to it for drug information. Also one respondent correctly observed that immediate shifts in behaviours can occur among targeted youth because they typically don’t go through the same decision-making process as adults.
- 3.1.1.4. A major factor limiting outcomes was the extreme transience of media workers – many who were engaged and trained on this issue did not remain in their position for the duration of the project.



- 3.1.1.5. Evidence of media-related outcomes was limited to key informant opinion. No documentation of media audience reaction was available, nor was analysis of a sample of media coverage prior to and following the project.
- 3.1.2. **Objective 2:** A number of NGO participants echoed the fact that the workshops changed the way they approached their work. For example, one participant noted that as a result of the workshops their agency conducts quarterly assessments of their work and adjusts their programming accordingly; another has set up an accounting system. One NGO representative reported that, as a result of proposal writing skills gained through the project, her agency has received funding from another international organization to continue their work.
- 3.1.2.1. In terms of messages, one agency now understands that it is not effective to tell youth not to use drugs – that for example showing the balance of what can be lost against what can be gained with different drug use decisions is more effective.
- 3.1.2.2. In drawing conclusions on what difference activity under Objective 2 made, certain realities need to be acknowledged: the NGO community in Central Asia is young and fluid. A strong entrepreneurial attitude exists also – that is, NGOs are seen as a route to accessing the very significant amounts of money available from international agencies.
- 3.1.2.3. While it is to be hoped that trained NGOs will carry their new knowledge of effective drug abuse and HIV/AIDS prevention practices into future related work, the extent to which this will happen is unclear.
- 3.1.3. **Objective 3:** The school program developed in Uzbekistan attained the formal approval of the Ministry of Education, which is very important. Significantly, the Uzbekistan school-based activities were included in that country's national drug strategy (2007-2010). Sixteen trainers certified through the project are continuing to train and in some cases meet to discuss their work. While respondents indicated that their participation resulted in improved instructional practices there is no documentation to support this.

3.1.3.1. The project included a pre- and post-program survey of a sample of pilot students.<sup>2</sup> It isn't clear from the final report whether changes reached statistical significance but it shows that recent alcohol use increased slightly while rates of recent tobacco, and marijuana, hashish or anasha use decreased slightly.

**Table 1. Past 30 day use of selected substances among Grade 5-9 students**

Substances	November 2006	June 2007
Tobacco	1.63%	1.10%
Alcohol	1.26%	1.73%
Marijuana/hashish/anasha	.21%	.08%

Student knowledge of risks linked to tobacco, alcohol use and other substance use behaviours strengthened slightly through this period.

**Table 2. Perception of risk associated with selected patterns of substance use (Gr. 5-9)**

"What do you think about the extent of health risk (physical or other harm) people face if they...?"			
Substance use pattern	"High risk"		
	June 2007 (1)	November 2006 (2)	Change (1) - (2)
Smoke a pack of cigarettes or more a day	53.20%	48.12%	5.08%
Have 1-2 drinks nearly every day	49.20%	44.39%	4.81%
Have 4-5 drinks nearly every day	60.69%	51.88%	8.81%
Sometimes smoke marijuana or hashish	51.39%	45.27%	6.12%
Regularly smoke marijuana or hashish	61.53%	52.51%	9.02%

As may be seen below, most Grade 5-9 students viewed the project sessions positively.

**Table 3. Assessment of HIV/AIDS prevention workshops in schools**

Option	% of respondents
Interesting and informative	70.0%
Obtained a lot of new information which helped me to learn more about drugs and HIV/AIDS	31.5%
Materials were presented in a complicated and difficult to understand way	4.3%
I had known the information presented	8.8%
Uninteresting	6.8%
N/A	0.3%

<sup>2</sup> Tobacco, alcohol and drug use among 5-9-grade secondary school students in the republic of Uzbekistan.

3.1.4. **Objective 4:** Government officials who received training were in many cases also exposed to media programming and contact with NGOs, which may have combined to shift attitudes and work practices of some officials.

3.1.4.1. In conclusion, many of the groups that worked with UNODC on this project expressed interest in continuing and, if possible, expanding the cooperation. Without exception, participants commended the Project Coordinator for her efforts in implementing the project and fostering a strong working relationship with partners.

### **3.2. Impact**

3.2.1. **Objective 1:** One person tasked with monitoring the media early in the project saw coverage that was dominated by drug busts, overdose deaths, and scare stories, featuring inaccurate information and no analysis. Another respondent observed, “Previously the routine was to go to the narcology centre to find a story with a strong scare message”.

3.2.1.1. Some but not all key informants felt that the quality of reporting will shift due to this project and one sponsored by the Global Fund. According to one key informant, programming interests of the participating FM stations will likely shift as a result of their positive experience.

3.2.1.2. One media representative pointed to the training of young journalists as having a longer-term compound effect: by reaching them early, they may adopt professional reporting practices (for example, basing stories on epidemiology rather than sensation) but they are also part of the target group and the training may affect their personal drug use decisions.

3.2.1.3. Another respondent believed that coverage will shift in a positive direction because competition has developed between media outlets to provide objective coverage. According to Diffusion of Innovation theory, trained journalists could be seen as “Innovators” or “Early Adopters” of a new approach to reporting on this issue, which could lead to others shifting their coverage over time. Changing attitudes such as stereotypes takes time (e.g. bringing people to see that drug and HIV/AIDS problems affect all layers of society and are everyone’s issue).

3.2.1.4. The study tour presented the role of harm minimization measures (such as state-funded housing for active drug users) within a larger strategy, but participants were not

optimistic that these measures would find favour in their region any time soon because the legal environment doesn't support it.

- 3.2.1.5. At least one media outlet has been approached by other international agencies to do further related work based on their work on this project.
- 3.2.2. **Objective 2:** The project strengthened the relations between NGOs representatives, and led to exchange of experience and information. However, it is not certain NGOs that have been trained and supported by the project will be able to continue their activities without financial support. A lack of funds and a challenging environment for NGOs in general (including strong competition for funds) make them vulnerable. On the other hand the evidence-based knowledge they have received through the project workshops will guide any future related efforts and possibly put them in a position to provide good guidance to newly established NGOs. According to several participants, governments are now giving the issue more attention and are, in at least some cases, showing great interest in working with NGOs, and this project will help direct their policies and activities.
- 3.2.3. **Objective 3:** Work with the education sector should be viewed as a work in progress given the slow pace of change characteristic of this sector. Teachers, students, parents and community leaders trained as trainers in pilot oblasts in Uzbekistan will no doubt contribute to future similar efforts pertaining to this issue. Student/teacher manuals developed in Uzbekistan and Tajikistan will have important enduring value over the next several years. Although much transience occurs in this sector, it is to be hoped that at least some of the relationships forged with government and international agencies through this project will pay dividends with future similar efforts. Ultimately however, the impact of the training, curriculum, and materials will depend heavily on the strength of the educational systems in these countries and any reforms that occur.
- 3.2.4. **Objective 4:** Because this objective was not so clearly delineated, it is not completely clear which project efforts were directed to this objective; hence the long term effects of work in this area are more difficult to predict. Support for annual celebrations (Dec 1 and June 26) may help to maintain visibility for the issue, but these types of showpiece events are generally not viewed as very potent vehicles for change. If the four government workshops are placed within this objective, they would be seen as having very good

potential for enduring effects. It could be argued that building the prevention capacity and leadership of government officials is the single most important need in the region.

### **3.3. Sustainability**

- 3.3.1. This project aimed to build prevention capacity in the mass media, government, NGO, and school sectors, which by its nature is concerned with sustainability. Capacity building is a long term process that requires attention to both human and institutional aspects. Evidence of institutional sustainability would include formal national drug or prevention strategies that were influenced by this project. It was not possible to analyze the extent to which national strategies may have been influenced by this project but because prevention was not really on the agenda for these governments prior to the project, it is likely little has changed strategically at this point. However, all government respondents (e.g. the deputy director of the Tajikistan Drug Control Agency; representatives of the National Information-Analytic Centre on Drug Control, Uzbekistan and representatives of the Drug Control Committee of the Ministry of Internal Affairs of the Republic of Kazakhstan) did express a desire to continue to collaborate with UNODC and to build a greater prevention focus into their work.
- 3.3.2. Other evidence of institutional sustainability would be in the form of Memoranda of Agreement (MOA) between UNODC and project partners. MOAs were at times a part of this project but did not appear to hold great weight (e.g. one participant wasn't sure an MOU in question was for this project or another). Arriving at MOAs between parties takes time and the significant movement of staff in and out of the project may have made it difficult to complete these processes. However, a well-developed MOA can, on the other hand, help to mitigate the effect of staff turnover and establish an institutional commitment to prevention that may transcend individual interests and changes.
- 3.3.3. A strong indication of institutional sustainability is the formal approval of the project's drug education program by the ministry of education, Uzbekistan. This approval calls for 16 hours of instruction for Grade 5-9 students through the program "Healthy Generation".
- 3.3.4. Because dissemination of evidence-based guidelines and training of government, NGO, mass media and school representatives lay at the core of this project, there is good

potential for human sustainability. The hundreds of professionals trained on evidence-based practices should have some ripple effect throughout the region for years.

- 3.3.5. However, an approach limited to dissemination of practice guidelines and training, while necessary, should be viewed as insufficient. A “workforce development” approach that accounts for the various organizational and contextual factors (both barriers and opportunities) affecting uptake of good practices by targeted professionals is now recommended. This type of approach would for example accept that the transience of workers in the various sectors reduces the impact of training and capacity building efforts, and work with others to investigate and mitigate the problem.
- 3.3.6. Because capacity building is a long term process, the question of sustainability of effect will depend on what follows this project. There is much to build on.

### **3.4. Constraints**

- 3.4.1. This project experienced very significant constraints. Drug use and HIV/AIDS problems in the region have strong socio-economic roots (e.g. employment, income and education levels), and the prevention of drug abuse and HIV/AIDS calls for attention to these roots. The unstable and evolving political, economic and social environment has placed great strain on individuals, families, communities and governments in the region. Governments are attempting in their own fashion to build new infrastructure, policies and priorities to meet overwhelming societal needs. Non-government organizations and civil society are in their fledgling years, attempting to carve out a role in the region. The drug trade and the corruption surrounding it feed on the economic and social uncertainties. A project introducing prevention to CA countries must grapple with and seek headway in this very challenging environment. For instance, the complicated political situation in the region made it difficult to even organize regional workshops.
- 3.4.2. The unstable economic situation is also likely one of the reasons that frequent movement of staffs was witnessed in all sectors (media, government, NGOs, and schools); this proved to be a major impediment to progress in the project.
- 3.4.3. There were a number of constraining factors in work with the mass media. Censorship remains a factor to varying degrees in the region; as one participant noted, “one phone call can kill a story”. This led many editors-in-chief to avoid the issue and some

journalists to censor themselves when writing on the issue. It was difficult in the media (and schools also) to openly discuss sexual issues (e.g. use of condoms) in the region. Private media staff indicated that it was often difficult to cover drug problems without offending funders. The commercialization of mass media in the region complicated the ability to gain free coverage. A limiting factor for a number of the media outlets was their inability to access good information or experts who could speak on the issue with accuracy and in an audience-friendly way, particularly in national languages (e.g. Kyrgyz). Respondents noted that journalists are not taught about social issues in training; low fees for these kinds of stories are also an issue. Perhaps as a result few graduates are interested in covering drugs and other social issues (they are more likely to seek careers in business media or TV).

- 3.4.4. Finances loomed as a large issue for NGOs. In poorer oblasts, volunteers faced a bottom line: their volunteer involvement in prevention programming took time away from income generating activity. On the other hand, the availability of large sums of money from international agencies is creating an entrepreneurial class of NGOs in the region who are becoming adept at following the money from issue to issue. One respondent remarked that some NGOs appear to be working for themselves rather than for the community. This phenomenon feeds fluidity in the NGO community that may not be altogether negative; but if in the pursuit of funding, NGOs lose sight of serving their communities' needs, they won't be effective. In this environment it is difficult to envision a stable NGO commitment to drug abuse prevention without long term funding dedicated to that issue.
- 3.4.5. National governments have a large role to play in nurturing the NGO sector and organizing prevention activity, but governments in the region admitted to little experience in either area. Some are encouraging the growth of "quasi-NGOs" as a vehicle to implement projects. This represents a double edge sword because although it means the two parties are increasingly collaborating and more opportunities are being created for NGOs, there is also more opportunity for corruption ("some NGOs look very good on the outside but nothing is going on inside"). As one expert noted, "government is wishing to develop civil society but at this point is supporting NGOs that are loyal to government; it

is otherwise very difficult to get registered as an NGO; to get registered you must be prepared to collaborate with the presidential party”.

- 3.4.6. International experience shows that in order for prevention and demand reduction to be advanced, governments need to provide strong leadership. Because prevention was a relatively new concept at the inception of this project, there was insufficient leadership from government offices on where they wanted to take their prevention plans. Several government ministries have roles in prevention, and there may have been questions over which should assume the lead role. Working with governments to build their knowledge of prevention while calling on them to take on more leadership required careful navigating.
- 3.4.7. An internal constraint was the lack of sufficient UNODC staff resources to support strong project documentation. Various activities in this project could have been better documented. For example a number of meetings focusing on good practices or experience sharing were convened through this project and they undoubtedly generated knowledge that would have been helpful for participants and others. Stronger documentation would have also facilitated a stronger evaluation.

## ***4. Lessons learned and best practices***

### **4.1. Lessons learned**

- When providing training to government offices, take care to also build their sense of ownership and leadership on the issue.
- Ensure that publications or training developed outside the region go through an “adaptation” step to ensure good fit with local circumstances.
- As much as local resources permit, try to arrange for media outlets to have access to a stable of experts that can present information in a clear, simple manner.
- Assist young NGOs with organizational development, strategic management and in learning how to be part of the policy development process (e.g. through advocacy).
- Build evidence-based prevention knowledge into university programs that train professionals (e.g. journalists, community-based workers and teachers).



- Adopt a workforce development approach that accounts for the range of factors affecting uptake of practices.

## **4.2. Best practices**

- Recognizing that the decision may not be in the hands of UNODC, try to ensure an active and effective national focal point for large, complex projects.
- Target journalism students and young journalists for training because their attitudes and biases have not hardened.
- Focus test messages to determine messages and to avoid misinterpretation of messages.
- Promote collaboration between local media outlets as a way to maximize resources and outputs (e.g. by sharing focus testing, and by sequencing messages through a broadcast day).
- Consider judicious use of incentives to encourage various sectors to engage (from laptop computers to hats, t-shirts), taking care to also build intrinsic motives for involvement.
- Incorporate pre and post project surveys into prevention projects to assess the extent of the problem and determine project effects.
- Approach all prevention work with caution, recognizing that it is possible to unintentionally do harm through prevention.

## **5. Recommendations**

1. Examine sources of workforce instability and, through a workforce development lens, address factors within UNODC's scope.

Rationale: widespread workforce mobility and instability in the region greatly reduce the value of efforts to inform and train allied professionals. A workforce development analysis that examines the context within which allied professionals operate may reveal ways that UNODC, in concert with others, can mitigate the effects of instability.

2. Develop an honest broker role to support heightened cooperation and collaboration between prevention stakeholders.

Rationale: There is some indication that the availability of large amounts of funds on the part of international agencies can disrupt sound planning by governments and impede collaboration between various agencies. There may be a role for an “honest broker” to urge stronger collaboration and planning among the parties in the region, and UNODC ROCA may be appropriately positioned to play that role.

3. Prepare and broadly disseminate a logic model as a planning and communication tool to ensure consistent focus.

Rationale: with a large multi-component and multi-sectoral project such as H37, it is easy for some misinterpretation of project aims to occur. A logic model or framework that is clear and, ideally, rendered in a graphic form, can help ensure that all participants remain clear on project aims and parameters if widely distributed and referred to on an ongoing basis.

4. Promote a strategic approach to prevention as an indispensable cost effective complement to supply reduction/enforcement measures.

Rationale: supply reduction and enforcement activities have historically dominated national drug strategies, and this is clearly the case with governments in Central Asia. It is now widely accepted that national strategies that balance and integrate supply and demand reduction activities have more promise. A number of prevention measures have been found to be cost-effective and need to be the basis of a strategic approach.

5. Ensure that program design is based on the best available epidemiological information, particularly that produced by in-house sources.

Rationale: epidemiological information is crucial to prevention program design but the worlds of research and programming often need to be bridged. Bridging is a two-way process wherein researchers render relevant information in practical ways and programmers identify and communicate their information needs.

6. Establish a prevention section to the UNODC ROCA web site to provide ongoing focus to relevant work.

Rationale: establishing a prevention section to the UNODC ROCA web site would demonstrate that the office views prevention as a critically important complement to supply reduction initiatives. Many key informants expressed a continuing need for good information – a commitment to establishing and maintaining this section of the site would help sustain the work of this project.

7. Ensure adequate project staff resources devoted to preparing project documentation when planning future similar projects.

Rationale: The documentation required by UNODC for project planning and implementation were completed for this project, but a number of meetings focusing on good practices or experience sharing were convened through this project and they undoubtedly generated knowledge that would have been helpful for participants and others. Resources to more fully prepare and disseminate project products would have strengthened the project.

## **6. Conclusion**

- 6.1. The project aimed to mobilize the efforts of governments, the media, and civil society organizations to produce an expanded and concerted response to drug abuse and HIV/AIDS prevention and care in Central Asia. Focusing on the prevention of drug abuse among non-users, the project broke new ground in the region. Nevertheless, all key informants saw the project to be relevant and appropriate.
- 6.2. The project design was for the most part quite logical. Identifying appropriate partners and participants, providing incentives for involvement to increase motivation where it might not otherwise exist, and delivering training on evidence-based approaches all made good sense.
- 6.3. Operating from an explicit theory base (e.g. social influence theory; problem behaviour theory) would have increased confidence in the possibility of effectiveness, and helped retain focus in all of the project's strands. Nevertheless, for a large, multi-component project operating in four countries, it retained a reasonably strong focus. There was some evidence of "conceptual drift" with the study tour in that it focused more on treatment

populations and issues than prevention. Also, the target age range of youth varied between NGOs, schools and the media sectors, which may have diminished the impact.

- 6.4. Feasibility was an important question given that the project aimed to break new ground. In an environment of significant political and social instability and uncertainty, it was understood that these sectors may not fully commit or be able to organize themselves to fully participate. In the end, the general environment and the level of readiness affected project success.
- 6.5. Many participants in all sectors (i.e. government offices, NGOs, media outlets and schools) moved out of their positions during the course of the project. Re-igniting plans with new staff and seeing trained staff move away was a common feature of the project, slowing momentum and preventing the project from more fully achieving its objectives. Slow negotiations and decision-making in the education sector had a particularly strong effect on the education-related objective. The political situation in the region made it challenging to even convene workshops at times. UNODC ROCA bears responsibility for not (at least at this late point in the project) following through on a planned web resource to provide ongoing access to project materials and information for the media sector.
- 6.6. The project largely, but not fully, met its objectives. The project did not reach the numbers of participants planned in all cases. Nevertheless, it appears that those reached (according to key informants interviewed) viewed the project very positively, with many indicating that their project experiences shifted their attitudes and changed the way they do their work. Will they prove to be a sufficient spark to mobilize their respective sectors and ignite evidence-based prevention across the region?
- 6.7. Without strong, strategic follow-up the answer is “not likely”. Important ground has been broken on promoting evidence-based prevention in the region. Public awareness on the issue may have slightly shifted, a number of professionals in the region have been exposed to new ideas and have changed the way they do their work and some important school-related materials have either been developed or are under development. But these efforts will dissipate without continued attention from UNODC ROCA. UNODC ROCA should follow through on a Web resource to provide ongoing access to project materials and information for the media sector as planned.
- 6.8. A major question for UNODC is how best to work with the instability witnessed in the various sectors in future similar efforts. The answer must be to build toward

“institutionalizing” prevention and prevention training. Training in and of itself is not cost effective if trainees tend not to remain in their positions. Some of the factors affecting transience are large and beyond UNODC’s scope. But by adopting a broader “workforce development” approach to building capacity, UNODC may identify ways to reduce prevention worker movement or its impact (e.g. focusing on bringing training curricula into the university professional schools).

- 6.9. For good reason, UNODC held the reins on this project. CA governments need to take those reins and begin to lead future prevention efforts. But in the face of the enormous stakes involved in stemming drug trafficking in the region, drug abuse prevention can easily be viewed as secondary. Nonetheless, evidence-based prevention has shown itself to be cost effective in ways that supply reduction activities have not demonstrated, and drug strategies world wide recognize the need to balance demand (i.e. prevention and treatment) and supply reduction efforts. Central Asian countries need to strive for greater balance between the prevention and supply reduction arenas, and approach their prevention work more strategically.
- 6.10. The recommended role for UNODC ROCA going forward is to model a balanced approach in its own work, advocate for prevention at the highest levels, urge the development of formal prevention strategies and provide ongoing consultation on the roll-out of these strategies and the involvement of necessary stakeholders. Change will be incremental, and instability in the region will continue to loom large as a factor, but institutionalizing prevention as a core government mandate must be the aim.
- 6.11. Another important possible contribution of UNODC is to provide empirical data on the prevalence and nature of drug abuse in CA countries, because it is critical to effective prevention. For example, several key informants recommended extending training into rural and remote communities – this has appeal but if rates of drug abuse are very low and there is no upward trend in these regions, it may not be warranted.
- 6.12. These roles don’t necessarily call for significant project funding. In fact, there is some indication that the availability of large amounts of funds on the part of international agencies can disrupt sound planning. It is recommended that UNODC ROCA consider taking on an “honest broker” role between various CA governments, international funders, and other stakeholders, a role that is not so easily taken on as a large funder.

Providing a formal advisory function for key participants in this present project would ensure strong continuity.

- 6.13. Finally, with future similar projects, UNODC needs to ensure sufficient project staff resources to generate strong documentation. This will ensure important project knowledge (e.g. the best practices identified during the NGO and media experience sharing meetings) is available for dissemination to various stakeholders; the documentation will also permit a stronger evaluation.

## **7. Appendix:**

### **7.1. Documents reviewed**

1. Initial project plan by G. Fomaidi and U. Hausserman (April 29, 2004)
2. Annual project progress report (Jan – Dec, 2004)
3. Semi-annual project progress report (Jan – June, 2005)
4. Agenda for the Forum of the Central Asian mass media leaders: Mass media regional cooperation: Joint efforts against drugs and HIV/AIDS, Almaty, Kazakhstan (June 9, 2005)
5. Annual project progress report (Jan – Dec, 2005)
6. Semi-annual project progress report (Jan – June, 2006)
7. Annual project progress report (Jan – Dec, 2006)
8. Project Self-evaluation for RER H37 (Oct 30, 2006)
9. Revised project document by G. Fomaidi and UNODC Vienna (2006)
10. Semi-annual project progress report (Jan – June, 2007)
11. Survey report: Tobacco, alcohol and drug use among 5-9-grade secondary school students in the republic of Uzbekistan (June, 2007)
12. Slide presentation: Nature and extent of drug use in Uzbekistan, Kamran Niaz, UNODC/Tashkent (October 15, 2007)

### 7.3. Persons interviewed

#### **Uzbekistan**

Mr. Djavlon Egamberdiev  
 Ms. Galina Smirnova  
 Mr. Tuhtasin Arslonov  
 Staff of National Information-Analytic  
 Center on Drug Control  
 Ms. Lola Isamova  
 Ms. Sayhora Ruzikulova  
 Ms. Mila Mirova  
 Mr. Sergey Kargin  
 Ms. Guzal Salihova  
 Ms. Vasila Amanova  
 Ms. Gulnoza Alimjanova  
 Mr. Bakhtiyor Yakubov  
 Ms. Nurjakhon Ismoilova  
 Ms. Aziza Abdullakhodjaeva  
 Mr. Ilkhom Soliev  
 Students of School #73  
 Ms. Nigora Nishanova  
 Ms. Mukambar Sobirova  
 Ms. Yulduz Hamdamova  
 Ms. Zulfiya Pardaeva  
 Ms. Natalya Kurganovskaya

#### **Tajikistan**

Ms. Bunafsha Odinaeva  
 Ms. Vera Kulakova  
 Mr. Abdurakhim Abdumadjitov  
 Mr. Sukhrob  
 Mr. Nuriddin Karshabaev  
 Mr. Rustam Tursunov  
 Mr. Sulaymonxon Sultonov  
 Mr. Mirzomatov Nurullo  
 Ms. Maysara Kurbanova

#### **Kyrgyzstan**

Ms. Ainagul Isakova  
 Mr. Nurbek Teleshaliev  
 Teachers of school #70  
 Mr. Aibar Sultagaziev  
 Mr. Erlan Satybekov  
 Ms. Saltanat Musuralieva

#### **Kazakhstan**

Round table of representatives of  
 participating FM radio stations  
 Mr. Adyl Djalilov  
 Mr. Serik Abushaminov  
 Ms. Yelena Aitbayeva  
 Ms. Gulnar Tatyamtayeva  
 Ms. Alfiya Yussupova  
 Ms. Yelena Pak



### 7.3. Key informant questionnaire

Tailored but largely similar survey instruments were prepared for national focal points, government officials, NGOs, mass media representatives, school personnel and students. The sample below is the questionnaire prepared for the national focal points.

Dear colleague, thank you very much for agreeing to be interviewed to help evaluate the project, *Drug Abuse and HIV/AIDS Prevention through mass media, NGO and civil society* led by UNODC, Central Asia. The interview questions are being sent to you in advance to allow you to prepare your responses. You or your organization will not be linked to any comments in the evaluation report. You will have a chance to review a draft of the report and to suggest changes.

As you know, this project had four objectives pertaining to mass media, NGOs, schools and UNODC communications. The questions that follow are concerned with these four components of the project. The purpose of the interview is to learn your opinion about *planning, implementation and effects* of this project, and to learn your method of *monitoring and evaluating*. To help reduce misunderstanding that may arise from working in two languages, terms have been simplified.

Gary Roberts  
Ottawa, Canada  
Independent Evaluator

#### I. The project plan

1. How would you describe the *drug abuse situation* in your country (age, gender, type of drug, etc)? What do you base this description on (surveys, project report, caseloads, rapid assessment)?
2. What is the *most important need* concerning drug abuse and HIV/AIDS prevention in your country?
3. Was this project a *realistic response* to the drug abuse situation in your country?

4. Did UNODC need to increase its *profile* in your country?
5. Were the goal and objectives for this project *clearly presented* to you?
6. Do you see a strong *logical link* between drug abuse problems in your country ↔ the overall goal ↔ objectives ↔ and activities for this project?
7. Did you involve representatives of the *target groups* in planning for this project?
8. What *activities* did you plan for this project?
9. What were the *main results* you were seeking from this project?

## **II. Implementation of the plan**

1. Did you establish any *policies, principles or guidelines* to help achieve project objectives?
2. Did you establish any *formal arrangements* (e.g. steering committee, memoranda of agreement) with participating organizations to help implement this project?
3. How did you *monitor* implementation?
4. Did you implement all the activities *planned* for this project? If not, why not?

5. Did representatives of the *target group* help with implementation of any of the activities?
6. Were there *problems* with implementation that you did not anticipate?  
*Opportunities*?
7. Were there any *gaps* that arose as you implemented the project? (e.g. groups not served, activities that should have been included)?

### **III. Effects of the project**

1. Can you point to any *immediate* positive effects as a result of implementing this project? Negative effects?
2. Did anything happen through the project that you didn't expect?
3. Do you anticipate any *longer term* positive or negative effects?
4. Did the project achieve the expected *results*? Why do you think this?
5. Was UNODC effective in increasing its *profile* in your country? Please explain.
6. Given the *resources spent*, were the activities chosen for this project the best ones? Can you think of a way the same resources could have been used to achieve more?

7. What are you basing your responses on? How did you measure *outcomes* for the project in your country?

#### **IV. Recommendations**

1. Looking back, would you change the *plan* in any way? Would you change *implementation*?
2. What were the main *lessons* you've learned as a result of this work? Things that you would do differently?
3. Were there any activities in the project that resulted in particularly strong positive results (i.e. you would consider them *best practices*)?
4. Will the work on these objectives *continue* after the project? If yes, how? If no, why not?
5. Are there important *obstacles* on the horizon related to continuing these objectives? *Opportunities*?
6. Do you have any *recommendations* to the UNODC as a result of your experience? Any other *concluding thoughts*?