

# NIPSEURO

## Training Curriculum

New Psychoactive  
Substances in Europe

State of Affairs, Trends and Developments

# Colophon

**This publication is a product of the NPS in Europe project, which was coordinated by Apdes, Portugal. You can access the manual at [www.npsineurope.eu](http://www.npsineurope.eu)**

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# Foreword

New Psychoactive Substances (NPS) are becoming a major challenge to public health and drug policies in Europe and have become a high priority in Europe. The “new psychoactive substances in Europe” project (NPSinEurope.eu) aims to contribute to the development of innovative and effective health promotion interventions targeting emerging NPS use in Europe, in particular in response to more hazardous patterns of use and in vulnerable populations.

The overall project objectives are:

1. Provide an overview of the use of new psychoactive substances (NPS) in populations of People Who Use Drugs Heavily (PUDH) in the EU28 countries and identify the associated risks for harm and the existing legislative, preventive and harm reduction responses;
2. Assess, identify and describe harmful patterns of NPS use among PUDH, NPS related risks and harms in 5 selected countries, as well as identify and prepare adequate tailored public health responses;
3. Develop and implement targeted pilot interventions for prevention, demand reduction and harm reduction targeting NPS use among PUDH;
4. Build best practice guidance and capacity among harm reduction workers towards improving harm reduction responses; and,
5. Disseminate the results of the Europe-wide inventory, 5 country assessment and local pilots on public health responses through an online resource centre and a training manual, and at regional and national conferences.

# Introduction

## Background

This training curriculum is part of an European Commission funded project on developing effective health responses regarding the use of New Psychoactive Substances. The training curriculum has been developed and used in a training for European professionals and peer workers. This training was conducted in November 2015 at the premises of the EMCDDA in Lisbon, Portugal. The curriculum was tailored to this training and has been further adjusted according to the feedback and evaluation of the participants.

## Aim and purpose of the curriculum

This training curriculum is a description of the package of learning activities designed to achieve the objectives of the training program on NPS in Europe.

The main aim of the training is to support development of appropriate NPS responses with service providers and peers across Europe by raising awareness of new psychoactive substances, policy affecting them and identifying good practice on responding to NPS. Participants will also be supported to develop an action plan to address NPS issues in their country/city that they can implement once back in their day-to-day roles.

The learning objectives of the training on NPS in Europe will enable participants to get a better understanding and become better equipped to deal with current trends and developments in NPS in Europe.

By the end of the training, participants will be able to:

1. Recall the 7 main drug categories that NPS fall in to
2. Give an overview of relevant NPS substances in Europe
3. Recall current trends and developments in European NPS markets
4. Identify current patterns of use of NPS in Europe
5. Recall current drug patterns and policies in Europe including legal developments and restrictions affecting NPS
6. Identify barriers and problems in developing effective harm reduction responses targeting problematic drug use (PDU) in Europe
7. Recall best practice examples for responding to NPS users
8. Develop effective harm reduction service responses for NPS users relevant to their client/user group.

## Target group of the curriculum

The target group for the curriculum is service providers and peers supporting NPS users in Europe. The training is designed to enable professionals and peer workers to respond more effectively to NPS in their respective countries and in their individual roles.

The **trainees** can be anyone who is interested to learn and work on service provision or policy development on NPS.

Because of the interactive structure of the session and the broad spectrum of issues involved within the NPS agenda across Europe, a broad range of participants is helpful to produce a rewarding learning session. A beneficial range of experience and expertise may include:

- A selection of participants from various backgrounds
  - Professional: from service providers working with NPS on a daily basis to a NPS-policy EC officer
  - Personal: from individuals with personal experience to those who have less direct experience with NPS
- A wide regional diversity of the participants in order to learn from each other
- Experience of management and/or implementation of support/treatment “on the ground”
- Basic familiarity with harm reduction approaches and services is an asset for the training
- A medical background isn’t required, but expertise on basic health care for substance users is an asset.

## The trainers

The **trainers** of the NPS training are ideally selected on a set of complementary specialities. In order to ensure a good combination of competencies and interactivity during the training process, two trainers are recommended. A combined set of skills and competencies may include:

- Proven training experience
- Knowledge on psychoactive aspects of NPS
- Experience in working with consumers of NPS
- Knowledge of harm reduction approaches and harm reduction activities such as: injecting equipments provision services, pill testing, IEC development, on-site prevention and harm reduction at events, OD prevention and management, (supporting) peer involvement
- Experience in working in/with grass roots organisations
- Knowledge on international and national drug policy development and practice
- A medical background isn’t required, but expertise on basic health care for substance users is an asset.

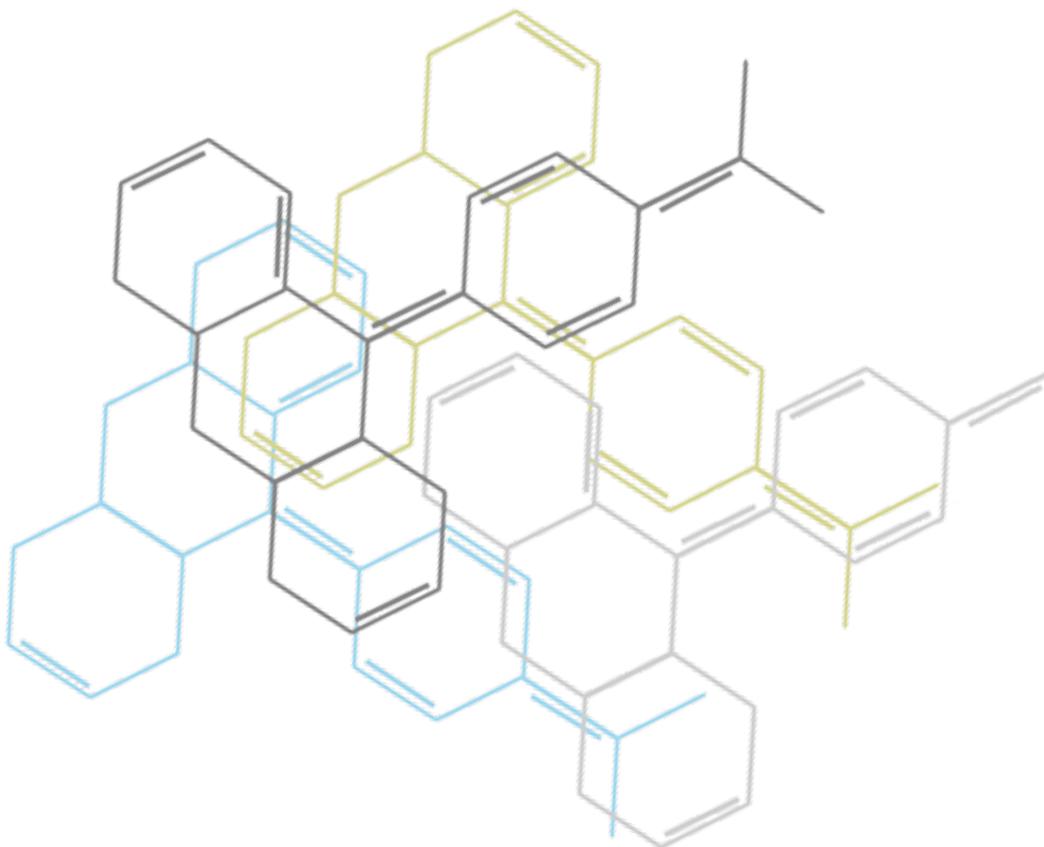
## Training approach and training methods

The training is based on a participatory and blended learning model using a range of methods including presentation, media, interactive group work, discussion, Q and A, case studies and action learning. Prior to the course, participants are asked to do pre-course preparations in the form of a presentation on the NPS situation in their country, a case study of NPS user they have worked with and a list of recommended resources they currently use for NPS.

Prior to the training the participants will be requested to:

- Prepare a brief 5 min presentation regarding 'The situation of NPS in their own setting'. This may include: substances, usage patterns, health consequences, policy & law enforcement responses etc
- Bring a potential case study that they would like to discuss with colleagues
- Prepare a 5 min presentation on a 'good practice' responding to NPS risks/harm
- Bring NPS related info materials to share with colleagues.

After the training the trainees can be provided with a USB resource with the training materials and additional resources that have been collected during the training. Another option is to provide follow up support in implementing the developed local actions plans.



# Structure of the training

## The basic training on NPS is designed for 3 full days.

It is recommended to plan brief sessions of presentations of the participants on their local situation throughout the training programme. The participants are requested to prepare a brief presentation on the situation in their home city or country regarding: epidemiological situation on NPS, trends and developments, risks and harms, policies and practices.

## Additional elements

The training course can include the following elements:

- Presentation of local experts on NPS; peers, professionals (e.g. from services, policy makers or trade industry)
- A site visit (e.g. to a headshop, information/drug checking service etc.) may further enrich the training programme
- A wide range of local and international resources stored on a USB with an electronic copy of the training module. For this session, included on the USB drive was the multimedia training presentation including film, the handouts and a wide range of resources taken from suggestions given by both facilitators and participants. It also included each country's presentations and the two presentations from the EMCDDA. The multimedia presentation is available here [http://prezi.com/ewbzkh03x7ty/?utm\\_campaign=share&utm\\_medium=copy&rc=ex0share](http://prezi.com/ewbzkh03x7ty/?utm_campaign=share&utm_medium=copy&rc=ex0share)
- The resource library can grow for future courses as it is added to.

## Option for short course

An introductory training with introductions on the key subjects and brief can be provided in a 1 day course. This introductory training will have less interactive elements and would not be able to cover the range of topics or the same depth of material.

## Day 1

Session	Subject
	Registration
	Opening
1.	Introduction to the Workshop and Training Programme
2.	<i>The Times They Are A Changing</i> : consumption of licit and illicit substances in Europe
3.	<i>Setting the scene</i> : Legal highs; definitions and terminology
4.	<i>Trends &amp; developments</i> , national and in Europe; EMCDDA presentation
5.	<i>The drugs wheel</i> : exploring the drug spectrum
6.	<i>Research chemicals</i> : assessment of selected substances
	Review of Day 1
	Closure of Day 1

## Day 2

	Recap of Day 1
7.	<i>Dependency, addiction or consumption</i> : substance use in perspective
8.	<i>Rate the risks</i> : effects, risks and harms of NPS
9.	<i>Local practices</i> : examination of local experience, derive good practices and lessons learned.
10.	Film: Legally High
11.	<i>Drugmarkets 2.0</i> : internet producers, consumers and governments
12.	Challenges in public health and harm reduction
13.	Drug policy and NPS options -Incl video-
14.	<i>'Good and bad policy'</i> : discussion session on policy and advocacy
	Review of Day 2
	Closure of Day 2

## Day 3

	Recap of Day 2
15.	<i>'Monster drugs and other myths'</i> : NPS and media
16.	Developing an effective response
17.	<i>'From theory to practice'</i> : development of action plans
18.	<i>'Towards Action Plans'</i> : support participants in development of local action plans to address NPS
	Evaluation
	Review and Closure

## Finish

# Sessions content

## Session 1

### Introduction

**Time:**

15 minutes

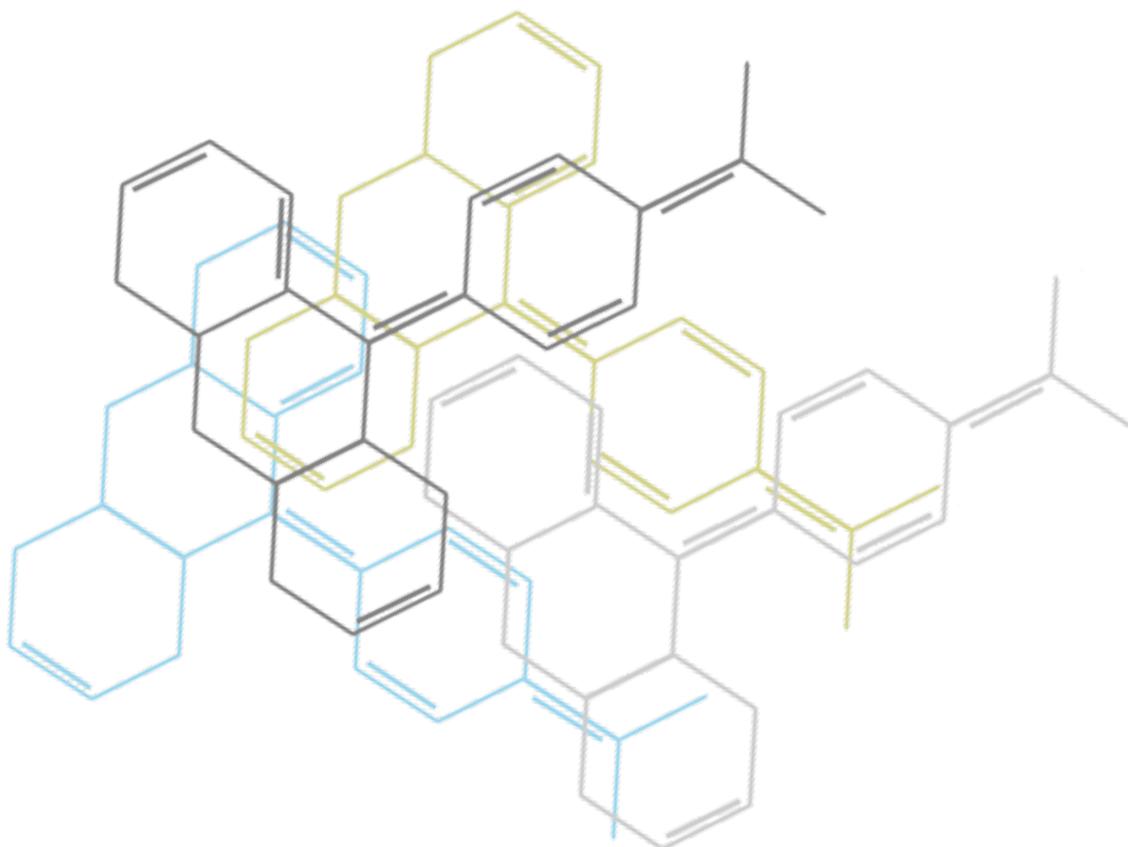
**Course learning objective:**

To provide participants with introductions of:

- the trainers
- the participants
- the training approach, sessions and the programme

**Methods:**

Presentation, Q&A



## Session 2

# The Times They Are A Changing: consumption of licit and illicit substances in Europe

<b>Time:</b>	30 minutes
<b>Course learning objective:</b>	To provide participants with an overview of key developments of substance use in Europe over the last century
<b>Learning aims:</b>	By the end of the session participants will have an increased understanding of: <ul style="list-style-type: none"> <li>• the dynamics of supply, demand and use of various substances including NPS</li> <li>• developments of trends in production, substance use, consumer populations, consumption patterns,</li> <li>• developments in drug responses and drug policy.</li> </ul>
<b>Methods:</b>	Presentation, Q&A, discussion
<b>Session key messages:</b>	

- Psychoactive substances can be defined as chemical substances, that when taken into the body, alters the physically and/or psychological functioning of the person (WHO, 1989)
- Substance use is part of human development since time immemorial
- Use is intended for medical, spiritual or recreational purposes
- The use of substances and the perception of society on the substances are dynamic and often change over time
- Rational for individual's drug taking is diverse (pain/psychological relief, relaxation, performance enhancing, self management of mental health)
- In 1960: major shift of substance use due to youth cultures in developed countries. In later decades also leading to problematic use and medical/societal issues
- Since 1990s increase of substance use in transitional and developing markets
- Consumption patterns also dynamic. Injecting is the most efficient method but also the most risky one in terms of medical risks
- Drug policy meant to channel and manage the societal effects of substances. The current policies are largely aiming at control of substance use by making them illegal
- Drug control is increasingly leading to new laboratory-based substances (NPS) that are mainly developed to bypass drug control.

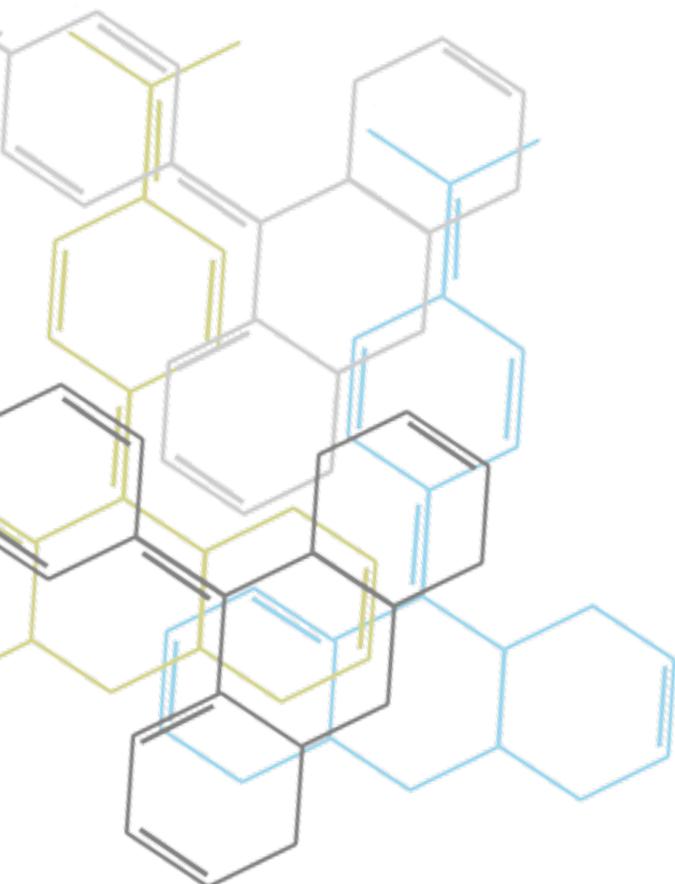
Illustration of diverse patterns of substance use;  
<http://www.albawaba.com/slideshow/these-are-9-most-popular-and-bizarre-drugs-middle-east-758836>

## Session 3

### Setting the scene: legal highs; definitions and terminology

<b>Time:</b>	30 minutes
<b>Course learning objective:</b>	Recall current trends and developments in European NPS markets
<b>Session aim:</b>	To provide participants with a definition of NPS, explore current terminology and introduce themes surrounding production of NPS
<b>Methods:</b>	Presentation, film, group discussion
<b>Session key messages:</b>	

- New or novel psychoactive substances (NPS) are internationally understood terms
- Defining NPS is complex; different definitions will take in substances which might be considered by some as 'traditional drugs' e.g. ketamine. Issues include when does a substance cease to be new?
- People who use drugs will be more likely to use term legal highs or research chemicals
- Legal highs is a problematic term for many due to the focus on legality, which can alter quickly and vary from country to country
- Source countries for production include China and India
- Chemists are creating designer drugs to mimic controlled drugs but fall outside legislation
- As with other elements of the drug trade, there may be a disconnect between manufacture and the more problematic side effects experienced by people who use.



## Session 4

### Trends & developments, national and in Europe: EMCDDA presentation

<b>Time:</b>	60 minutes
<b>Course learning objective:</b>	Recall current trends and developments in European NPS markets
<b>Session aim:</b>	To provide participants with a definition of NPS, explore current terminology and introduce themes surrounding production of NPS
<b>Methods:</b>	Presentation, Q&A, discussion
<b>Session key messages:</b>	

- Over the past five years or so there has been an unprecedented increase in the number, type and availability of new psychoactive substances in Europe
- During 2014 a total of 101 new substances were reported for the first time to the EU Early Warning System: 31 cathinones, 30 cannabinoids, 9 phenethylamines, 5 opioids, 5 tryptamines, 4 benzodiazepines, 4 arylalkylamines and 13 substances that do not conform to the aforementioned groups
- The total number of substances being monitored by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is more than 450 — close to double the number of substances controlled under the United Nations international drug control conventions - with more than half of these being reported in the last three years alone
- Between 2008 and 2013 there was a seven-fold increase in the number of seizures reported across Europe. In 2013 almost 47 000 seizures weighing more than 3.1 tonnes (Figures 2 and 3) were reported to the EU Early Warning System. Synthetic cannabinoids, which are sold as legal replacements for cannabis, accounted for the majority of these figures, with over 21 000 seizures weighing almost 1.6 tonnes
- Synthetic cathinones, which are sold as legal replacements for stimulants such as amphetamine and MDMA, were the second largest group, with almost 11 000 seizures weighing more than 1.1 tonnes

- The growth in the market is also responsible for the increase in serious harms reported to the EMCDDA in recent years. Most of these involve non-fatal intoxications and deaths, but they also include broader social harms, such as those caused by high-risk drug users switching from injecting heroin to synthetic cathinones
- During 2014 serious harms that required urgent attention led to 16 public health alerts being issued by the EMCDDA, while 6 new substances — 25I-NBOMe, AH-7921, methoxetamine, MDPV, 4,4'-DMAR and MT-45 — required risk assessment by the EMCDDA's Scientific Committee
- It is likely that the growth of the market in new psychoactive substances will continue to pose a range of challenges for public health and drug policy over the next few years. The major drivers of many NPS are the speed at which they appear, their open sale, and that there is little or no information on their effects and harms. It is here that strong early warning systems can play a critical role in ensuring a timely response in order to protect public health.

## Session 5

### The drugs wheel: explore the drug spectrum

<b>Time:</b>	30 minutes
<b>Course learning objective:</b>	Recall the 7 main drug categories that NPS fall in to
<b>Session aim:</b>	To raise awareness of the 7 key drug categories, their main effects and explore where traditional substances and NPS fit.
<b>Methods:</b>	Interactive groupwork, Q and A
<b>Session key messages:</b>	<ul style="list-style-type: none"><li>• The 7 categories are stimulants, empathogens, cannabinoids, opioids, psychedelics, depressants and dissociatives</li><li>• Effects and where drugs fit for the drugs wheel model can be found at <a href="http://www.thedrugswheel.com">www.thedrugswheel.com</a></li><li>• Understanding where traditional substances fit help us to understand what potential effects NPS may have</li><li>• There are other useful models to consider e.g. DASH model.</li></ul>

## Session 6

### Research chemicals: assessment of selected substances

<b>Time:</b>	30 minutes
<b>Course learning objective:</b>	Give an overview of relevant NPS substances in Europe
<b>Session aim:</b>	To take a more detailed look at the most popular NPS in Europe covering: appearance, typical doses, typical costs, route of administration, effects and side effects, harm reduction strategies.
<b>Methods:</b>	Interactive groupwork
<b>Session key messages:</b>	<ul style="list-style-type: none"><li>• NPS can appear in powder form, pill form, herbal matter, liquid or blotter form</li><li>• Effects and side effects are similar to the drugs they mimic</li><li>• Route of administration will have an impact on the intensity of drug experience, dose required and the</li><li>• Synthetic cannabinoids and stimulant/empathogen NPS appear to be the most commonly used NPS across Europe</li><li>• Specific countries within Eastern Europe have higher prevalence of opioid NPS, this is much rarer in other countries.</li></ul>

## Session 7

### Dependency, addiction or consumption: substance use in perspective

<b>Time:</b>	30 minutes
<b>Course learning objectives:</b>	Identify current patterns of use of NPS in Europe
<b>Session aim:</b>	To provide background information to get current NPS use in a wider perspective
<b>Methods:</b>	Presentation, group discussion
<b>Session key messages:</b>	<ul style="list-style-type: none"><li>• Modern addiction theory is providing insights in various aspects that are helpful towards gaining a better understanding of NPS use</li></ul>

- The dynamics and interplay of elements are considered to be crucial in the levels of individual substance taking (N. Zinberg; Drug, Set and Setting):
- Drug. Most NPS research and publications focus on the pharmaceutical impact of substances.
- Individual. Little research is published on the interplay between the individual's personality, mindset and the NPS
- Environment. One of the key drivers in the NPS development and consumption is current drug system that largely focuses on the legal status of the substance and often responds with monitoring new unregulated substances and controlling them by inclusion in the existing lists of illegal substances.
- Lessons for good understanding of NPS consumption: learn about the all three elements (pharmaceutical characteristics, user populations, and social/legal environment)

## Session 8

### Rate the risks: effects, risks and harms of NPS

**Time:** 45 minutes

**Course learning objective:**

- Give an overview of relevant NPS substances in Europe
- Identify current patterns of use of NPS in Europe

**Session aim:** To explore the effects, risks and harms of NPS

**Methods:** Interactive groupwork (body mapping), group discussion

**Session key messages:**

- The biggest risk may be that many NPS are unknown and have little history of use
- It is useful to understand the drug category which the NPS belongs to in order to predict the effects and potential harms
- Key effects of individual substances are similar to the drugs they mimic
- Risks and harms are increased where substances are mixed with other drugs or alcohol, large amounts are used or users re-dose too quickly
- Possible physical harms include suppressed or over stimulated central nervous system, overdose, contraction of STIs/BBVs
- Possible psychological harms include dependency, exacerbation of poor mental health, psychotic reactions, memory loss
- Other risks and harms include those to sexual health and increased risk-taking behaviours.

## Session 9

Local practices: examination of local experience, deriving good practices and lessons learned.

**Time:** 45 minutes

**Course learning objective:**

- Identify current patterns of use of NPS in Europe
- Recall best practice examples for responding to NPS users

**Session aim:**

To explore patterns of use within different EU countries and with different clients groups and to discuss good practice examples for responding to NPS users

**Methods:**

Case studies, group discussion

**Session key messages:**

- Vulnerable populations are at greater risk of experiencing problems from NPS use
- There are various harm reduction and treatment initiatives which exist in Europe including drug checking and 'specialist' services. The learning from these initiatives can be utilised by other EU countries
- Interventions should include prevention, harm reduction and recovery focused activities
- Useful to offer clients a 'menu of options'.

## Session 10

Film "Legally high"

**Time:** 15 minutes

**Course learning objective:**

Recall current drug patterns and policies in Europe including legal developments and restrictions affecting NPS

**Session aim:**

To gain insight from users of NPS and discuss issues surrounding distribution and legislation for NPS

**Methods:**

Film, group discussion

**Session key messages:**

- Wide range of users attracted to NPS which include young people and psychonauts
- Substances are often synthesised in countries such as China
- The media has a key role to play in the prevalence of NPS
- The numbers of NPS emerging are increasing
- Governments are struggling to respond to constantly evolving market

## Session 11

### Drugmarkets 2.0: internet producers, consumers and governments

<b>Time:</b>	30 minutes
<b>Course learning objective:</b>	Recall current drug patterns and policies in Europe including legal developments and restrictions affecting NPS
<b>Session aim:</b>	To explore the marketplaces for NPS and discuss the role and impact of the media on NPS
<b>Methods:</b>	Presentation, discussion
<b>Session key messages:</b>	<ul style="list-style-type: none"><li>• Drivers for where users choose to purchase may include accessibility, affordability and anonymity</li><li>• Branding and marketing of NPS targeted to different markets/user groups</li><li>• There is a constant cycle of new drugs emerging which is in part created by legislative responses and media coverage</li></ul>

## Session 12

### Challenges in public health and harm reduction

<b>Time:</b>	20 minutes
<b>Course learning objective:</b>	Identify barriers and problems in developing effective harm reduction responses targeting problematic drug use (PDU) in Europe.
<b>Session aim:</b>	To discuss and compare the main barriers and problems in developing effective harm reduction responses for PDU in the different EU countries
<b>Methods:</b>	Large group discussion
<b>Session key messages:</b>	<ul style="list-style-type: none"><li>• Constantly evolving market</li><li>• Lack of evidence of approaches</li><li>• Limited access in many EU countries to drug checking or early warning system data</li><li>• Stigma and legislation are key barriers</li><li>• Harm reduction for related substances is transferrable, e.g. safer sniffing, safer injecting</li></ul>

## Session 13

### Drug policy and NPS options

<b>Time:</b>	30 minutes
<b>Course learning objective:</b>	Recall current drug patterns and policies in Europe including legal developments and restrictions affecting NPS
<b>Session aim:</b>	To discuss the different legislative models open to policy makers and explore the costs/benefits of each
<b>Methods:</b>	Presentation, film, discussion
<b>Session key messages:</b>	<ul style="list-style-type: none"> <li>• 4 key models: regulation, 'quasi' regulation, analogue and blanket ban</li> <li>• We have well-established models of regulation with alcohol and tobacco</li> <li>• New Zealand opted for a model of regulation specifically in response to NPS market</li> <li>• Blanket bans and to a lesser extent analogue laws are trying to target the 'cat and mouse issue' of new drugs emerging to get around legislation</li> <li>• Difficulties with prosecution in countries which have introduced the 'blanket ban'</li> </ul>

## Session 14

### Good and bad policy: discussion session on policy using role-play debate

<b>Time:</b>	45 minutes
<b>Course learning objective:</b>	<ul style="list-style-type: none"> <li>• Identify barriers and problems in developing effective harm reduction responses targeting problematic drug use (PDU) in Europe.</li> <li>• Recall best practice examples for responding to NPS users</li> <li>• Develop effective harm reduction service responses for NPS users relevant to their client/user group</li> </ul>
<b>Session aim:</b>	To discuss the different legislative models open to policy makers and explore the costs/benefits of each
<b>Methods:</b>	Role-play debate using prepared statements

**Session key messages:**

- 'Build your case'; solid preparation of the advocacy is key
- 'Inclusive advocacy', using a variety of advocacy methods are recommended; networking, bridge building, involving stakeholders including peer consumer groups
- Learn from international evidence and experiences

**Session 15****'Monster drugs and other myths': NPS and media**

<b>Time:</b>	30 minutes
<b>Course learning objective:</b>	Identify barriers and problems in developing effective harm reduction responses targeting problematic drug use (PDU) in Europe.
<b>Session aim:</b>	To discuss the role of the media within the NPS market and the impact this has on drug-related harm
<b>Methods:</b>	Presentation, discussion
<b>Session key messages:</b>	<ul style="list-style-type: none"><li>• The media often have a sensational approach to any drug-related issue</li><li>• Public opinion is often in part formed from media coverage</li><li>• Drug myths can cause harm not only to the drug agenda but also in providing misinformation to clients which may cause direct harm e.g. dangerous practices</li><li>• It is possible to utilise media in more positive ways by working with them and helping educate them on drug issues</li></ul>

## Session 16

### Developing an effective response

<b>Time:</b>	40 minutes
<b>Course learning objective:</b>	Develop effective harm reduction service responses for NPS users relevant to their client/user group
<b>Session aim:</b>	To explore the main needs, requirements and priorities for a NPS response from the perspectives of users, support organisations and governments
<b>Methods:</b>	Group work
<b>Session key messages:</b>	<ul style="list-style-type: none"> <li>• It is beneficial to treat problem NPS use as a health issue</li> <li>• Access to drug checking can reduce harm and provide intelligence for support organisations and government</li> <li>• Offering accurate and credible information is a key element of a harm reduction response</li> <li>• Harm reduction responses can help people achieve goals such as abstinence</li> <li>• Access to sterile equipment including through needle exchange services is a key part of harm reduction response</li> </ul>

## Session 17

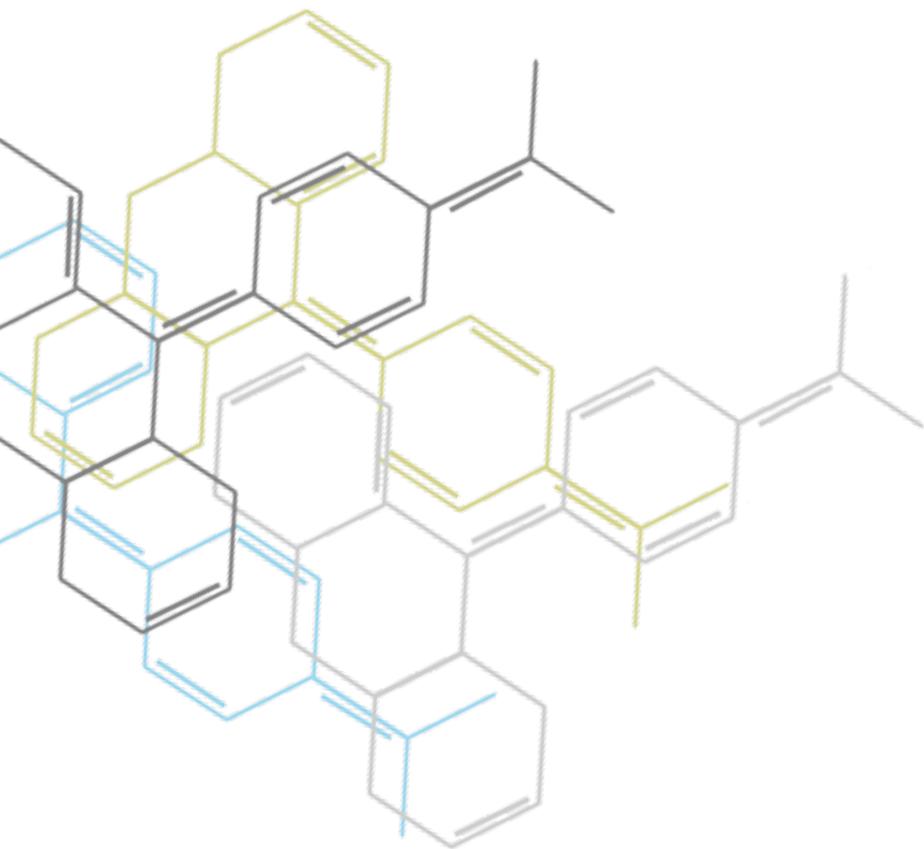
### ‘From theory to practice’: development of a draft action plan

<b>Time:</b>	1 hour
<b>Course learning objective:</b>	Develop effective harm reduction service responses for NPS users relevant to their client/user group
<b>Session aim:</b>	To give participants the opportunity to create a draft action which they can review and implement when back in their own organisations
<b>Methods:</b>	Group discussion, Q and A, written exercise using LOGIC model format
<b>Session key messages:</b>	<ul style="list-style-type: none"> <li>• Projects can learn from each other</li> <li>• It is important to consider both outputs and outcomes for monitoring and evaluation</li> <li>• Action plans need to be regularly reviewed and updated</li> </ul>

## Session 18

### 'Towards action plans': support participants in the development of local action plans to address NPS

<b>Time:</b>	1 hour
<b>Course learning objective:</b>	Develop effective harm reduction service responses for NPS users relevant to their client/user group
<b>Session aim:</b>	To give participants the opportunity to create a draft action which they can review and implement when back in their own organisations
<b>Methods:</b>	Presentations from participants on the prepared action plans in Session 18
<b>Session key messages:</b>	<ul style="list-style-type: none"><li>• Participants are encouraged to continue drafting of their action plan to address NPS</li><li>• Participants are encouraged to continue discussion with their colleagues in the training and use the available support from the organisers and the trainers.</li></ul>



# Annex

## Training Evaluation

In addition to a short check in with each participant asking them to identify one thing that they will take forward as a result of the training, we conducted an evaluation using the format below.

**Date:** .....

Thank you for attending training today. We would appreciate your comments on this training programme on new and emerging substances of use. Your feedback will help develop this training.

**How has your knowledge and confidence improved as a result of the training?**

Please indicate – put **X** inside relevant box

Please describe **your level of knowledge** on NPS (legal highs)  
**Before Session**

<b>Limited</b>	<b>OK</b>	<b>Good</b>	<b>Excellent</b>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please describe **your level of knowledge** on NPS (legal highs)  
**After Session**

<b>Limited</b>	<b>OK</b>	<b>Good</b>	<b>Excellent</b>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please describe **your level of confidence** in supporting users of NPS (legal highs)  
**Before Session**

<b>Limited</b>	<b>OK</b>	<b>Good</b>	<b>Excellent</b>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please describe **your level of confidence** in supporting users of NPS (legal highs)  
**After Session**

<b>Limited</b>	<b>OK</b>	<b>Good</b>	<b>Excellent</b>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What will you do **differently** as a result of the training?

Did you feel you met the learning objectives for the course?

Not at all

Partly

Mostly

Fully

How useful was the session?

Not useful

Fairly Useful

Useful

Very useful

Which elements of the course did you like **the best**?

Which elements of the course did you like **the least**?

How would you rate the trainers?

Poor

OK

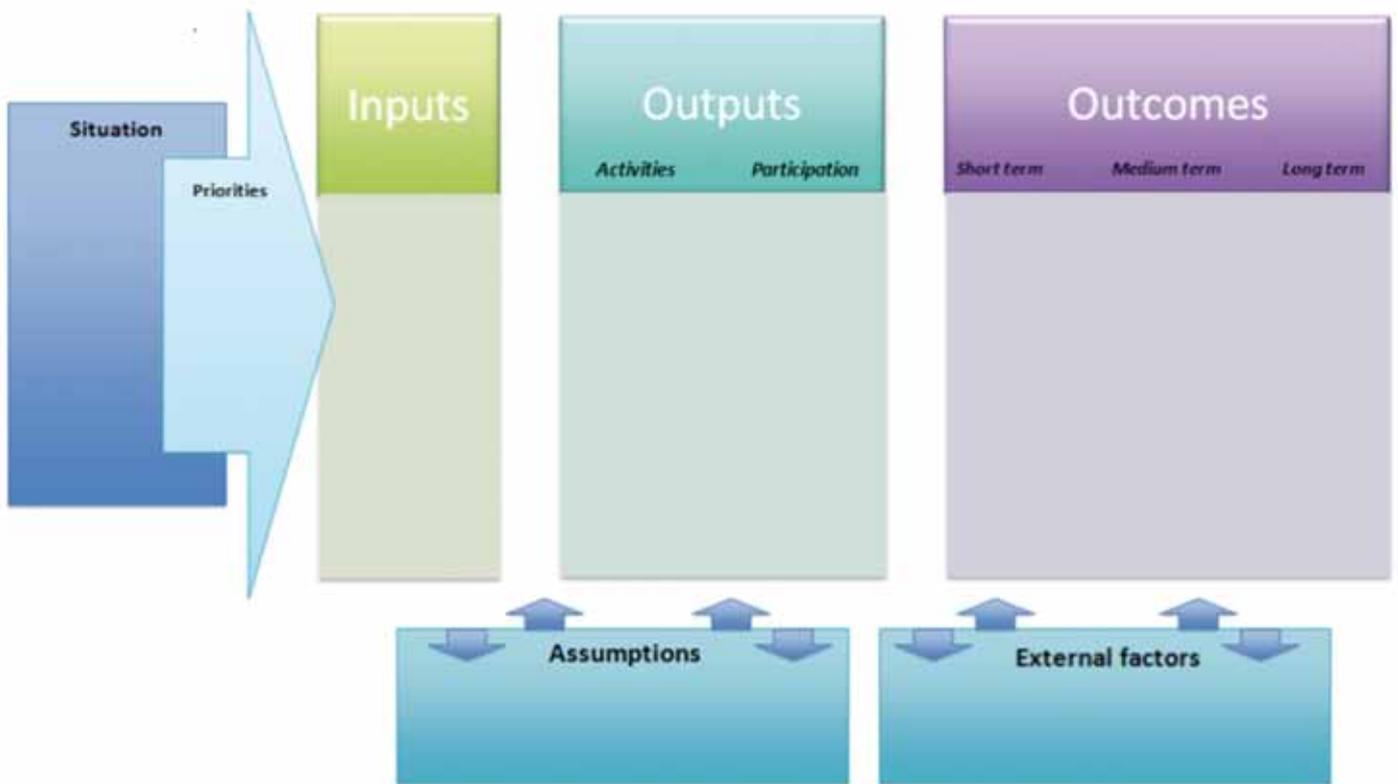
Good

Excellent

Have you any further **requirements, comments or suggestions**?

*Thank you*

# Action plan



## Resources and further reading (please check [www.npsineurope.eu](http://www.npsineurope.eu) for more resources)

**The drugs wheel**

[www.thedrugswheel.com](http://www.thedrugswheel.com)

**EMCCDA NPS in Europe, an early warning system update**

<http://www.emccda.europa.eu/publications/2015/new-psychoactive-substances>

**Project Neptune clinical guidance**

<http://neptune-clinical-guidance.co.uk/wp-content/uploads/2015/03/NEPTUNE-Guidance-March-2015.pdf>

**EU madness**

<http://www.eumadness.eu/>

**WEDINOS**

<http://www.wedinos.org/>

**Global Drug Survey**

<http://www.globaldrugsurvey.com/>

**EROWID**

<https://www.erowid.org/>

**Bluelight**

<http://www.bluelight.org/vb/content/>

**Drugs Forum**

<https://drugs-forum.com/index.php>

**Drugwatch briefings available at**

[www.sdf.org.uk](http://www.sdf.org.uk)

**DrugWise**

<http://www.drugwise.org.uk/drugs/>

**David Stuart Chemsex toolkit**

<http://www.davidstuart.org/chemsex-toolkit>

**Terrence Higgins Trust Understanding Chemsex**

<http://www.tht.org.uk/~media/707421C3EF3B4355BB06F3B0DF0AB177.pdf>

**Reshape**

<http://www.reshapenow.org/chemsex>

**The manual of psychedelic support**

<http://www.maps.org/resources/responding-to-difficult-psychedelic-experiences/5529-the-manual-of-psychedelic-support>

**MyCrew information site and self help tool**

<http://www.mycrew.org.uk/>

**KFx resources**

[http://www.kfx.org.uk/drug\\_facts.php](http://www.kfx.org.uk/drug_facts.php)

[http://www.kfx.org.uk/resources/Newer\\_Unregulated\\_Drugs\\_List\\_8.14.pdf](http://www.kfx.org.uk/resources/Newer_Unregulated_Drugs_List_8.14.pdf)

<http://www.kfx.org.uk/resources/nudst.pdf>

<http://www.kfx.org.uk/resources/SCRAst2015.pdf>

**I-trend**

<http://www.i-trend.eu/>

**NEWIP digital library**

<http://newip.safernightlife.org/digital-library>

**Safer Party**

<http://www.saferparty.ch/>

**Techo+**

<http://www.technoplus.org/>

**Energy control**

<http://energycontrol.org/>

**DrogArt**

<http://www.drogart.org/>

**Drug related cybercrime and associated use of the internet**

[https://www.coe.int/T/DG3/Pompidou/Source/Documents/P-PG-\(2013\)4Cybercrime-internet.pdf](https://www.coe.int/T/DG3/Pompidou/Source/Documents/P-PG-(2013)4Cybercrime-internet.pdf)

**Mephedrone AUDIT assessment tool**

<http://inef.ie/wp-content/uploads/2014/05/IV-Mephedrone-clinical-audit-tool.pdf>

**AIDES**

<http://www.aides.org/en>

<http://www.aides.org/en>

**Injecting NPS guide**

<http://www.sdf.org.uk/news-and-media/sdf-news/injecting-nps-advice/>

**Estonia support sites:**

[www.narko.ee](http://www.narko.ee)

[www.hiv.ee](http://www.hiv.ee)

[www.tai.ee](http://www.tai.ee)

**Apdes**

<http://www.apdes.pt/en/services/health-harm-reduction-human-rights/checkIn.html>

<http://www.apdes.pt/en/services/health-harm-reduction-human-rights/check!ng.html>

**Hungarian National Focal Point**

<http://drogfokuszpont.hu/>

**Drug Reporter**

<http://drogriporter.hu/>

**CheckIt**

<http://www.checkyourdrugs.at/>

**N.E.W.S**

<http://www.allertadroga.it/>

**Strange molecules**

[www.strangemolecules.org.uk](http://www.strangemolecules.org.uk)

NPS

New Psychoactive  
Substances in Europe

[www.npsineurope.eu](http://www.npsineurope.eu)