

17176

FIRST FLORIDA WORKSHOP
ON
WORKING DEFINITIONS OF PREVENTION
MAY 8 - 10, 1974

PROCEEDINGS

This workshop was sponsored by funds from the Governor's Council on Criminal Justice, State of Florida. The original project, known as the "Regional Youth Coordinator Project" (Grant No. 72-08-07) represented an early effort of the State of Florida Drug Abuse Program to address the problem of "prevention." The activities of that original grant were assumed by the State in an ongoing program.

The State of Florida Bureau of Criminal Justice authorized the reallocation of their project funds to support a "prevention" seminar.

The history of prevention in Florida is presented in the original grant narrative, which identifies prevention and treatment services that are and should be addressed to target populations of youth.

The Prevention Workshop *Proceedings* move beyond the narrow youth focus of study two years ago to suggest that prevention can only come about through personal commitment and systems change at all age levels.

The State of Florida Bureau of Drug Abuse Prevention is indebted to the initial and continuing commitment on the part of the Bureau of Criminal Justice planning and assistance (LEAA) to support innovative and progressive projects in the field of drug services.

PROCEEDINGS
of the
FIRST FLORIDA WORKSHOP
III
on
WORKING DEFINITIONS OF PREVENTION - *Proceedings,*
May 8-10, 1974

Sponsored by Grant No. 72-08-07, Regional Youth Coordinator
Project, State of Florida, Florida Drug Abuse Program

With technical assistance from the United States Office
of Education Regional Training Center, Miami, Florida.

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DEDICATION

This *Proceedings* represents the ideas, efforts and time of a special group of committed individuals who are actively involved on a day-to-day basis, each in his or her own way, in attempting to create a positive climate for change. To you, the participants of the First Florida Workshop on Working Definitions of Prevention, this *Proceedings* is dedicated.

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COMMENTS

FOREWORD

This workshop began out of a general concern on the part of the Florida Drug Abuse Program staff and Drug Abuse Treatment and Education program staff for the direction of prevention efforts in the state of Florida. With the emerging emphasis on the term "prevention" at a national, state, and local level, there seemed to be as many different meanings for the word as there were people using it. It became clear that if Florida were to develop a strategy for prevention in drug abuse, it would be necessary first to involve individuals in a grass roots effort to explore the varying, subtle differences between prevention as a concept and prevention as a reality.

All efforts which went into the planning of the First Florida Workshop on Working Definitions of Prevention were designed to stimulate an attitude of productivity. From the beginning, the message to all possible participants was clearly stated: The workshop was to be truly a task-oriented work effort. Participants were viewed as expert resources in the field of prevention; the final results of the workshop would depend upon the workshop efforts of the participants. Any future strategies at a state level for drug abuse prevention would rest primarily on the information gathered during the Prevention Workshop.

This *Proceedings* is representative of the quality of thinking and the professional commitment of the workshop participants. Every effort has been made to present with consistency and minimal editing each small group's perspective on prevention. As will be noted by the reader, group styles on presentation differ. The importance of the need to acknowledge and respect differences was a common theme throughout the workshop.

Participants at the Prevention Workshop represented the fields of criminal justice, education, treatment, medicine, religion, counselor training, community service, and community organization. Individually, participants reflected points of view ranging from theorists to practitioners.

The initial goal for the workshop was to provide a day of stimulation and interaction which hopefully would challenge participants' points of view, biases and beliefs concerning the human condition. Resource persons were utilized and every effort was made to frustrate attempts at closure. It was the conference planner's hope that this lack of closure would emphasize the wide variance of individual differences represented by the participants.

After working for a day as a total group, participants were placed in small groups, each led by a facilitator responsible for task accomplishment.

Each group was given the same charge. The manner in which they accomplished this charge was determined within each group.

Each group was charged with:

1. Defining a small group world-view of people, both people in groups and as individuals. In other words, identifying assumptions regarding individuals as a beginning step toward arriving at a working definition of prevention.
2. Arriving at a small group consensus on a working definition of prevention; and
3. Defining the process of prevention in terms consistent with the small group's working definition.

CONCLUSIONS

It is apparent from the results of the small group work and the issues raised from the final day of the workshop that any strategy of prevention developed at a state and/or national level must provide a mechanism for planning which continuously involves those at a grass roots level who have responsibility for implementation of that planning. There is without a doubt no greater distance than that distance between bureaucracy and persons in need, whether that need be for knowledge or for service.

The most critical issue raised during the workshop focused on the apparent lack of integrity at all levels of bureaucracy. From the beginning of the workshop, participants constantly challenged the integrity of decision-makers at the local, state and national levels. There seemed to be general participant agreement that decisions concerning the lives of people are most often made in a vacuum.

On the final day of the workshop, there seemed to be widespread agreement among participants that the workshop had been an individually meaningful experience. At the same time, participants indicated a "wait and see" attitude in terms of the effect the workshop would have on the development of a state strategy for prevention.

SMALL GROUP SESSIONS

INTRODUCTION

What follows reflects in most cases both the working efforts of each group during the second day of the workshop as recorded by them, and also their final presentation before all the workshop participants the following day.

Also included under each group's report are individual group member's definitions of prevention. The pre-workshop definition was required as part of the registration procedure. The post-workshop definition was gathered on the final day of the workshop prior to small group presentations. In some cases, only pre-workshop definitions were available. In other cases, only post-workshop definitions were available.

GROUP A - MEMBERS

Patty Torcoletti: Facilitator

Malachi Bessent
Elaine Peverell
Bill McCabe
Bill Harper
Barbara Ward
Denver Smoot
Norm Taylor

GROUP A – GROUP REPORT

Prevention is *people*.

Prevention problems are people problems.

Prevention is problem-solving.

Prevention involves methods, techniques and all that is necessary to help persons arrive at positive decisions and/or feelings about themselves.

Prevention involves recognizing the things one can control, the things one cannot control, realizing the difference and *doing* something constructive about it.

Norm Taylor was group representative chosen to give report.

GROUP A – PROCESS NOTES

People

Needy

primary needs – food, shelter, clothing, etc.
emotional needs

Powerlessness

can't control or limited in – physical, emotional, mental, social and spiritual health
recognize the things you can control and the things you can't and know the difference
have the power to change your own feelings

Get away from preaching the "American Dream" and deal with reality; develop the ability to cope with and accept reality

Collective power

Individually, we are limited; basically we are interdependent; sharing the dependencies brings more collective power

People get more out of life when they are sharing living

people are ultimately *alone*
everyone is ultimately *different*
people draw strengths from *other people*

Need more emphasis on ability to change the things you can control. Experiment to see if you can change – take a risk

Broaden self-centeredness

We need to deal with person's emotional needs

American dream is an American "nightmare" for Black community

nothing wrong with being a farmer or laborer – what *is* wrong is *dehumanizing* attitude to these people
not *everyone* will be executives
the system does not let the farmer know *his power*
we don't emphasize *pride* and self-worth in our basic human worth

We are all racists – *but* when we can master that we can spread our love throughout

We have different levels of awareness

nothing wrong with idealists

Identity with and within groups develop problems

people discriminate because of *color*, religion, economics – this is learned, *planned*, like the caste system in India

The institutions (power structures, persons) that control primary needs control the emotional needs and emotional growth

If prevention were like a tree – we need to deal with the root system, and not one leaf at a time

The problem is that people are not relating to people

Assumptions about people

People have needs

People have drives (hunger, sex, thirst, emotional)

People have wants (anything you think you need) – have to recognize limitations in these

People have wants and/or needs

People are finite as opposed to infinite

People must realistically understand their sense of power and its limitations

People, collectively, have more power than individually

People are deserving of a sense of dignity and self-worth
that dignity has to be re-enforced by external influences
other people should be able to provide that reinforcement

Prevention

Prevention is related to a person's external and internal needs

Effective problem-solving, singly or collectively

Helping persons to discover positive life styles or value systems that are meaningful and not harmful to another person

Helping people develop self-understanding, awareness

Helping people understand other sources of power

Therefore, problem-solving

People are prevention

Prevention problems are people problems

People should *be prevention*

Prevention is means, methods, techniques and all that is necessary to help persons arrive at positive decisions for or about themselves

Prevention should eliminate the negative and accentuate the positive
prevention should eliminate the negative *feelings* about oneself and destructive behavior patterns and accentuate the positive feelings

Prevention is feelings

Prevention is problem-solving

Providing for external and internal needs

Prevention is recognizing the things you can control and the things you can't, knowing the difference, and then *doing* something constructive about it.

GROUP A: PRE AND POST DEFINITIONS

PRE

Aiding people to discover their own potentialities for full life experiences.

All and barring none; that is positive; that is, that has and that will preserve human lives, speaking of methods, means and tangible things.

Only as effective as the approach.

A process of diverting individuals from pursuing any destructive behavior through the development of positive self concepts, values and goals.

The process involved in the task of well-informed, trained, and practical-minded professionals or paraprofessionals seeking to assist the client in his attempt to abstain from all personal abuse or to at best become intelligently selective.

Measures taken to forestall the use of drugs and its abuse.

Helping a person to discover the resources that bring a meaningful life style and value system.

A measure taken to forestall an anticipated or possible occurrence. In drug abuse, prevention embodies public and individual awareness about substances of abuse by humans. Drug education is a tool of prevention and it is probably more effective than "awareness campaigns." I believe each has a place as a tool of public information about drugs of abuse.

POST

Helping people to experience their full life potential. Prevention is people working with people. Prevention is people.

All positive means, methods, techniques and humanistic values that have, that will, and that are now preserving the dignity, pride and positive self-motivations of human beings.

Helping people to meet their needs to their satisfaction.

Helping others to care for at least their primary needs through the development of effective problem-solving techniques, singly or collectively.

Methods and techniques used to prevent negative actions as opposed by society. (A problem-solving.) (Worth and dignity of the individual.) Self-awareness.

Providing for external/internal needs and helping people discover meaningful-positive life styles and values to cope so that life can be beautiful.

1. A measure or measures taken to avoid the occurrence or re-occurrence of something.
2. Prevention involves people who perceive a problem existing which affects an individual or many individuals. They then attempt to solve the problem.
3. Prevention involves satisfaction of the individual's basic needs.
4. Prevention involves an awareness and/or realization of one's self, his limitations, powers, etc.

GROUP B – MEMBERS

Al Lombana: Facilitator
Mel Marshall
Jean Lindsley
Jo Newton
Mae Waters
Michael Wolford
Steve Safron
Charlie Lincoln

GROUP B – GROUP REPORT

We define the problem as a lack of a common understanding of prevention. Based on the problem, our goal was the establishment of a functional definition of prevention. Whereas, assuming people have needs, respond to these needs, and are responsible for the outcomes, we therefore define prevention to be an increased awareness of self and others, the ability to communicate this awareness; to make decisions based on internal and external data and to accept the consequences of one's own decisions. Essentially, prevention should address itself to consumer demands rather than attempting only to reduce the supply. The process of prevention consistent with this definition requires (1) identifying facilitating and restraining forces, (2) developing strategies to either increase the facilitating forces or to decrease the restraining forces, (3) to implement these strategies and (4) to make decisions based on the evaluation of these strategies. Due to time constraints, we suggest a follow-up workshop to generate prevention strategies.

Al Lombana was group representative chosen to give report.

GROUP B – PROCESS NOTES

People

People Desire

friends
appearance of independence
to be independent
leisure time

dignity
social status (caste)
to segregate for comfort and clarity
self-actualization

People Must Have (Do or Die)

Information (valid)
dignity

People Have:

difficulty accepting responsibility for their behavior
four basic life positions: --

--
-+
+-
++

dignity
physiological needs
their own biological timing
spiritual needs

People Respond:

to peer pressure
to environment according to their needs
to media influences
to pleasure

to dignity
to social status
more to negatives than positives

People Are:

exploitative
desensitized to reality of life
loving (un)
lovable (un)
in conflict with society and with self
confused by overstimulation
basically dependent
joyful
happy
risk-takers
apathetic
challenging
unique
biased/prejudiced
categorized
followers
untrusting
flexible
inhibited by others' dependent and
negative behavior

limited in trust level
deceitful
devious
conniving
glutinous
unpredictable
complex
fearful of unknown
segregated for comfort and clarity
not always rational
conditioned
not "here and now" oriented
uncomfortable in new situations
unaware of self
self-centered
money-oriented
political
punished for unique behavior
basically lazy
wasteful

People Need:

meaningfulness, usefulness — a purpose
to exploit
warmth
love
caring
respect
understanding
dignity
to communicate
to feel good about themselves
to be aware

sex
an identity
structure
to define mode of sexuality
motivation
own social distance
ownership of self
training for their life role
involvement in decision-making
affecting them
social status

People Use:

dignity
social status
little of their potential

segregation for comfort and clarity
more negative feedback than positive feedback

Prevention

Prevention is:

increased awareness of self.
increased awareness of others.
the ability to communicate this awareness; to make decisions based on this internal and external data; and to accept the consequences of own decisions (responsibility of one's behavior).

essentially, prevention should address itself to consumer demands rather than attempting only to reduce supply.

Movement of Group: Five Stages:

1. Definition of Problem — lack of a common understanding of prevention
2. Establishment of Goal — a functional definition of prevention
3. Basic Assumptions about People
4. Definition of Prevention
5. Strategies: includes identifying facilitating and restraining forces and ways of increasing and decreasing them

GROUP B: DEFINITIONS PRE AND POST

PRE

The creation, or existence, of a state of being on the part of an individual that facilitates the avoidance of a behavior or reaction that may not be desirable.

An effort directed toward community awareness and total understanding; to the point of causing one to look at himself, his environmental surroundings and the broader society so as to make decisions which are positive and productive for healthy living, without the use of detrimental substances and alternatives. Prevention is a three-level approach: (1) Primary, (2) Secondary, (3) Tertiary. Each level should be treated accordingly. There are many things prevention isn't: (1) Scare tactics of any nature; (2) Pharmacological verbalization and pure factual information alone.

Awareness of self and others (values, feelings, etc.), open communication of that awareness; and the use of that awareness and communication to make decisions.

The acquisition of knowledge development of strategies and dissemination of information that allows people to responsibly examine alternatives to actions that are detrimental to their well-being or well-being of others.

To keep from happening.

Prevention is, by definition, impossible.

POST

A process of heightening awareness of self and of others; the increasing of an ability to communicate and use this increased awareness (both internal and external) and the resultant increased ability to make decisions about our own life modality with the understanding of responsibility for these choices of action.

Providing an opportunity for one to become aware of life experiences in a manner whereby decisions are made that are positive, productive and rewarding. In order to accomplish the goal of prevention, prevention must be: sensitizing one to the realities of life and providing an opportunity to develop tools and coping skills to deal with those realities in a positive and advantageous way. I still feel that there are levels in the prevention process: (1) Primary, (2) Secondary, (3) Tertiary. Much more to be desired!

An increased awareness of self and others; the ability to communicate this awareness; and to utilize internal and external data in making one's own decisions. (Taking on the responsibility of one's own behavior.)

The combining of awareness of self and others, the relationship of internal and external factors on people, and the communication of this understanding so that people can make responsible decisions.

An awareness of self and others and the ability to communicate with others; to make decisions as well as the ability to accept the responsibility for one's decision.

A negative term to define a positive goal.

GROUP C – MEMBERS

Bryan Alterman: Facilitator
Bill Walden
Laurie Beach
Judy Lombana
Charles Wright
Al Bashaw
Earl Young
Cliff Shapiro

GROUP C – GROUP REPORT

PREVENTION

Is a process of providing opportunities and strategies for meeting peoples' needs to grow, expand, change and be fulfilled through the realization that they have the capacity to cope with self and environment.

STRATEGIES

1. Florida Drug Abuse Program should act as advocate of confidentiality law for counselors in order to protect personal and professional integrity.
2. Train the educators along the humanistic approach thru the affective domain.
 - a. train the teacher educators.
 - b. train school personnel
 - (1) administrators
 - (2) counselors
 - (3) teachers
3. Train peer counselors.

Earl Young and Charles Wright were group members chosen to give report.

GROUP C – PROCESS NOTES

People

People are living feelings.

Individuals have many different kinds of needs - spiritual, physical, psychological and emotional

Different types of drug-taking behaviors:

- experimental users
- seekers – active part of their life
- dysfunctional people
- social user

Emotional Characteristics

- insecure
- strong
- weak
- feelers
- lonely
- loving
- caring
- happy
- sad
- warm (between individuals)
- cold (between individuals)
- hating

- vain
- proud
- humble
- frustrated
- empathizers
- “not introspective”
- closed
- thoughtful
- scared
- mean
- tight
- kind

Social Characteristics

- interactive
- isolated
- vain

- imitators
- actors

Intellectual Characteristics

- thinkers
- educators

- rational and irrational
- can distinguish from their world and “the world”

Transcending Characteristics

- process
- impressable
- seekers
- avoiders
- prejudiced
- spiritual beings
- expressors of emotions
- political (manipulative)

- supportive
- introspective
- creative
- internal
- external
- insightful
- uninsightful
- have capacity to create own reality

When someone suggested the word “frustrated,” a long discussion ensued about “the ways” – how well do people understand or interact within their environment?

Attempting To Pull Together List of Characteristics

People are emotional, social, intellectual and motivational; always trying to transcend and/or alter themselves and their environment (to grow).

People are emotional, social and intellectual beings who are motivated to cope with themselves and their environment.

People are emotional, social, intellectual and spiritual beings who are constantly in need of self-expression, which sometimes causes them to alter, transcend or withdraw from their environment (reality).

People are emotional, social, intellectual and spiritual beings who have the capacity to cope with themselves and their environment either positively or negatively.

Cope

dealing with . . .
not running away from . . .
responding to stimuli . . .

Need to educate the public to the definition of "cope." This is not a realistic option because public we are addressing in reference to definition of cope (i.e., sheriffs, judges, politicians, educators, etc.) are not ready to accept or comprehend.

Not a consensus — suggestion was made that the word "react" replace "cope."

People Problems

behavior — anti-social, negative
encountering problems of unmet needs — prevention at this point meeting needs
attitudes
values
situations

People Needs

sexual
recognition
sustenance
self-esteem
self-actualization
love
causes

acceptance
Maslow's hierarchy
learning needs (lack of basic skills)
success
a problem is how one negotiates with environment

Prevention

Brainstorming

Alternatives

Variables for meeting peoples' needs

Accepting where people are "at"

Lack of choice — locked into particular behavior patterns which are self-defeating or anti-social

"There are as many different problems as there are people."

Problems are roadblocks to fulfilling needs.

Problems are *opportunities* — "a stimuli" to grow, expand, change, educate, be oneself, learn from others and mistakes.

Problems create anti-social negative targets, etc.

In order to have a problem, specific "stimuli" must occur.

in order to make a change or a decision, one must have the tools.

In order to make recognition of the problem, one must be in touch somehow, someway.

Problems occur by internal and external forces.

All problems are created by self-defeating behaviors.

"Prevention would be able to master themselves."

Moving Toward a Definition

Prevention — to provide *tools* so the person can make decisions so "individuals or groups, etc." can cope in a socially acceptable way.

If you are willing to be responsible for your own behavior, then you do not have a problem. However, you may create a problem for others.

Tentative Definitions of Prevention

Prevention is to maximize the opportunities for individuals to grow, expand, change and be fulfilled through the realization that they have the innate capacity to cope with self and environment.

A problem is the lack of opportunities for growth and expansion; change is minimized and the individual is unaware of more positive ways to cope with self and environment.

Anticipate and make ready.

Risk

could get a record
could get a long-term sentence
that's his problem

Avoid patterns that might or will occur again.

Society does not allow us to relate in any other way without those legal restrictions.

Prevention is a process of providing opportunities and strategies for meeting people's needs to grow, expand, change and be fulfilled through the realization that they have a capacity to cope with self and environment.

Final Strategies (Advocacy)

Florida Drug Abuse Program should act as advocate of confidentiality law for counselors in order to protect personal and professional integrity.

Train the educators along the humanistic approach thru the affective domain.

- a. train the teacher educators
- b. train school personnel (including administrators, counselors, teachers).

Train peer counselors

GROUP C: DEFINITIONS PRE AND POST

PRE

The opportunity to divert the prospective dysfunctional problems an individual, family or group etc. may fall into or "out of." It also has the connotation to help assemble, or reassemble present stressful issues by utilizing specific contractive alternatives.

Prevention is: simply stopping something from happening perhaps with an immovable object such as good sound values.

Helping people learn to cope with forces inside and outside of themselves, and learn to integrate these experiences, so that they can make life decisions based on a broader background of fact, emotional "seasoning" or weathering, and growing levels of consciousness. In other words, I suppose, to make us all more self-actualized so we won't need to get drunk or beat up people, or engage excessively in other non-productive or even harmful patterns of behavior or feel miserable and uptight all the time.

Intangible and frequently unsought and unrewarded; yet it appears to be the most constructive and productive alternative to coping with societal problems.

The utilization of those factors and institutions in society which aid in growth of individuals toward the eventual development of life coping skills.

To hinder or stop from happening. The sense of anticipation to thwart a happening.

The creative application of the knowledge of causation, which when positively directed will lessen trauma and abuse.

POST

A dynamic process of providing opportunities and strategies for meeting peoples' needs; to grow and be fulfilled thru the realization and recognition that they have the capacity, ability to survive and cope with self and environment.

A process of helping people realize their responsibility for their own actions, and understand the way their environment influences their actions, hoping to teach them more effective, rewarding coping mechanisms so that they can function in a more positive rewarding way. I will always feel that people need to learn how to make decisions based on a broader knowledge base than a lot of people now use. I will always feel that prevention will center around helping people function more positively within their environment.

A process which seeks to meet needs and maximize the human potential in ways that are satisfying and acceptable to both the individual and society at large.

The process of removing constraints so that people can realize their full potential.

Prevention is a process of providing opportunities and strategies for meeting peoples' needs; to grow, to expand, to change and be fulfilled through the realization that people have the capacity to cope with self and environment.

The process or strategy employed to enable or continue the legitimate strivings for self fulfillment to flow unimpeded.

A process of providing opportunities and strategies for meeting peoples' needs to grow, expand, change and be fulfilled through the realization that they have the capacity to cope with self and environment.

GROUP D - MEMBERS

Mike McAnaney: Facilitator
Chuck Huber
Sally Hewitt
Don Weathington
Grace Donovan
James Kenna

GROUP D – GROUP REPORT

PREVENTION

1. Promotion of the adequate person.
2. The capability for providing assistance for the neutralization of conditions within the environment which inhibit growth.
3. We do the same kinds of things with people either in treatment, intervention or prevention contexts, depending upon when or where programs come in contact with individuals.

STRATEGY (GOALS AND OBJECTIVES)

1. Generate money, manpower and ideology into the educational (preventive) aspect of Drug Abuse Training and Education programs.
 - a. Support the Drug Abuse Training and Education organization to consider prevention as a viable aspect of their programs.
 - b. Have an accessible, licensed D.A.T.E. education center available to every community statewide.
 - c. Identify and establish fluid communication between various sectors involved in drug education (prevention).
2. Bring into accord laws, strategies and goals (philosophy) in the drug abuse field and lobby for program implementation.

Create a research and consultation committee on state level to: Assess and suggest revision in current laws and departmental regulations which are counterproductive to the ideology of prevention; and propose new legislation.

3. Train and/or expose people (the public) to a process of personality development and communication skills.
Promote the availability of personal growth experiences thru organized community efforts, such as: (1) community mental health (prevention) centers, (2) churches, (3) schools, (4) civic organizations, etc.
4. Identify forces which inhibit personal growth within social institutions and neutralize them: criminal justice system, education system, medication, helping professions, industry, and military.
5. Organization of a body of people (comprehensive body) to scrutinize social institutions at a local level in order to determine if there are forces which promote substance abuse.

Report findings and proposed solutions to problems found to the institutions, Florida Drug Abuse Program, and other parties.

6. Correct the myth that there is a chemical solution to all problems. Utilize structures proposed above, (research and consultation committee) to influence the media, medical services, and other elements within the society which may be giving bad information to the public to curtail these practices.

Mike McAnaney was group representative chosen to give report.

GROUP D – PROCESS NOTES

Assumptions About People

people abuse drugs out of alienation and boredom
drug users have same needs as non-users
drug users are no different from everyone else except for how they gratify those needs
people use drugs for different reasons, to accomplish different things
the great majority of people use psychoactive drugs
society makes the decisions about acceptability of what drugs to what extent
people need people to interrelate with
for people to be happy, people need power
society views users as needing help; users don't want help (don't see a problem)
we do what we do to seek happiness
people use drugs to belong
many users do not need psychotherapeutic treatment
young people choose to be peer "grounds" rather than individuals

There will always be people who won't make it. There will be more if we don't do something.

The Adequate Person (Coping)

independent (knowing what he wants and how to get it)
capability to adjust (cope with stress non-destructively to person or property)
open and negotiable (not rigid)
makes decisions thru problem-solving processes and can gain access to power to implement decisions
makes attainable (realistic) goals
access to consciousness-changing devices
capacity to take care of basic needs
responds to social and legal structures of his/her society (non-apathy)
understanding of and communication with self (own feelings, wants, thoughts)

Prevention

There are 3 levels of prevention – past, present, future.

We need to prevent dependence on ways of coping which are negative

Prevent entrance of users into criminal justice system

Prevent social structures from prohibiting effective action by individuals

Preventing irresponsible drug (use) dysfunction

1. societal
2. individual
3. moral

Early on in school and family we need to raise the level of certain coping skills (communication skills)

Prevent open-ended maintenance without proper supervision

Prevent advertising/glamorizing of psychoactive drugs

Prevent existing family structures from disintegration

Prevent further dissemination of false drug information

Prevention enhanced if we curtailed emphasis on prohibition

GROUP D: DEFINITIONS PRE AND POST

PRE

A matrix of human events made available in an environment which enables individuals to enter into areas of personal enjoyment resulting in increased personal growth and contentment.

Work.

Programmatically, prevention is a process of building a system of responses and skill-building mechanisms whereby a person can grow to a level of independence. It focuses on intra-personal/inter-personal behaviors and the ability to be responsible relevant to accepting social codes.

1. An action or precaution taken to avert the development or occurrence of, or limit the progression of, a condition, disease, or problem.
2. An understanding of the natural history of a condition or disease.
3. Knowledge.

An attempt to deal with the rising substance dependencies in so many aspects of our macro-culture and many sub-cultures within it. To deal with this phenomena philosophically, didactically, ideologically and hopefully, effectively.

POST

The promotion of adequate functional persons at every age and in every area of society. This is not just drug abuse prevention but person abuse prevention.

Work and People

The capability of providing whatever necessary modalities in an effort to manifest "the adequate personality." I recognize that the inadequacies within personal development occur within the person and are sometimes (maybe always) dependent upon environmental factors. Prevention can occur: (1) before the fact (future); (2) during the facts (present); (3) after the fact (past).

Preparation to take action to avert and correct misuse of drug abuse.

The artful and (hopefully) scientific procedure of educating (in the broadest sense) the "totus popula" in the facts and circumstances of substance abuse. This should include a past, present and future indicative, meaning preventative measures of both honest and accurate propaganda and an enlightened criminal justice panoply, humane and reasonable treatment conducted in multi-modalities, and balanced intervention for "problem" people who are acting out their "not OK" and need input and love to help take charge of their lives efficiently, effectively and productively.

GROUP E - MEMBERS

Anne Griffin: Facilitator
Dave Schmeling
Don Samuels
Dutchie Johnson
Eileen Ochse
Bill Ochse
Ira Goldenberg
Xenia Wiggins

GROUP E – GROUP REPORT

Basic Group Givens:

All people have basic needs, i.e.,

- sense of well-being
- to be liked, loved, respected, accepted
- to control their lives and to be able to effect change

Our social institutions are not responding to these and other human needs.

Therefore, Prevention Is:

Helping people to identify their needs and find ways to meet them, and empowering individuals to collectively identify and examine institutional sources of alienation; to develop ways of intervening in and changing those institutions, and to guarantee their commitment to meeting human needs.

Dave Schmeling was group representative chosen to give report.

GROUP E – PROCESS NOTES

People

Assumptions about people:

- people are basically O.K.
- people can change; systems can't

(Long discussion about changing "systems" vs. manipulating and scheming within them.)

What the hell's this group for?!

Primary prevention:

- starts with: person (choices) and/or making it possible for something to happen (system)
- helping people see options and acknowledge availability
- helping person get alternatives

(At this point, Ira rapped about "goods and power" and who has access to them and who has not, using the symbol of the hour glass – essentially, his analysis of the "class" system we have in this country.)

Does the question of prevention depend on the specific class of people you're talking about? Are there similarities or not?

Prevention needs a negative and positive aspect.

People are programmed to believe various things (male-female; Judeo-Christian context; etc.). Success measured by degree to which we live with programming. Awareness of programming is crucial for choice, change – importance of developing skills to do this.

A person's individual experience has *value* to that person; i.e., pain is pain, regardless of class; therefore, individual is to be respected.

What are we trying to prevent? – substance abuse? – vs. goal of responsible substance use.

As a "social agent," can I comfortably limit myself to what I can handle? – and let go of the rest???

Primary prevention of drug abuse vs. primary empowering

Assumptions About People:

People need a sense of well-being, self-esteem; degree of self-esteem affects behavior.
People need to feel liked, accepted, by others.

How I feel about myself is affected by how others see me.

People need to feel a sense of self (personal, class, ethnic), identity and impact (control over conditions of life.)

People need a sense of transcendence – a sense of being a part of the flow of history – a sense of meaning, perspective – the why of it all.

Every man has "good" and "bad" potential or characteristics – which comes out depends on the "moment" (situational).

My self-concept (self-perception) affects how I deal with those around me.

People are neither good or bad; they are influenced by system-environment.

People have their own strengths, even when they are labelled by others as weak, corrupt, etc.

People can change – potential for change is inherent.

The individual is the best identifier of his needs.

I have a variety of needs which are shared with all people. (respect, love, honesty, praise, etc.) Ways of meeting these needs varies from one person to another.

Fulfillment is determined by the extent to which needs are met.

People Need:

Transcendence

A sense that they can change

A sense of self-worth/acceptance/identity

A sense of their strengths, that they are doing their best with what they've got

Individual is best judge of own needs.

Prevention

Prevention = restructuring institutions to meet basic human needs.

Institutions

- Education
- Mental Health
- Judiciary
- Welfare
- Employment
- Religion

How do I impact my institution in terms of getting human needs met?

Prior to restructuring institutions, use the system (institutions) to our own ends; i.e., be Machiavellian!

Education: (Changes Needed In . . .)

Need for affective development to have parallel importance with cognitive development

Need for teaching systems manipulation skills

(Both of the above imply changes in selection and training process of teachers and administrators; also changes in curriculum, etc.)

Make schools non-self-perpetuating -- take away some controls

Change values taught -- time for values other than goods and power

Schools should "say" as well as teach (architecture, etc.)

Take away controls, molding -- be more expansive

Get different classes (like groups -- kids, teachers, etc.) within schools analyzing contradictions; identifying common sources of oppression; and forming coalitions of oppressed, exploited groups for the purpose of going after the top oppressor!

Prevention

Empowering individuals to (1) identify their own needs and find ways to get them met (overall or short-range goal?) and (2) restructuring society's institutions to help meet those needs.

Prevention

Empowering individuals (people?) to identify their own needs and find ways to get them met (by restructuring social institutions?). This happens on 2 levels: individual -- short-term; and systems -- long-range

and

by empowering individuals to (better meet human needs and) accomplish change in social institutions.

Prevention

The process of helping and/or empowering oppressed individuals to collectively identify and examine the institutional sources of their victimization (oppression?) (alienation?) and to develop ways of intervening in and changing those institutions so as to guarantee their commitment to meeting human needs.

Prevention

Helping people to identify their needs and find ways to meet them, and empowering individuals to collectively identify and examine institutional sources of alienation and to develop ways of intervening in and changing those institutions so as to guarantee their commitment to meeting human needs.

GROUP E: DEFINITIONS PRE AND POST

PRE

Any activity which fosters or provides behavior which is socially acceptable or "healthy."

An act or manner of hindering or averting something. It is precautionary. It is an obstacle. In drug terms — prevention is the manner which we use to hinder or ward off the use of drugs and prevent its misuse. The methods to prevent the use and misuse of drugs include counseling, education, and rehabilitation. Drug abuse prevention is a method of curtailing the wide spread use and abuse of drugs.

Helping people avoid problems. This includes working with the general population before problems occur as well as working with people close to or in crisis to strengthen and build skills to help them deal with the crisis.

POST

Empowering individuals to deal with unmet needs by collective action with social institutions.

A concept which is very hard to define as to what it means regarding who, why, from what, for what and how to do whatever we decide to try and do. I feel prevention of any self destructive behavior, i.e., drugs, juvenile delinquency, lack of communication etc. depends on equipping people with skills — decision making, clarification of values, etc. which will afford them a process to handle those situations. We would also need to change the institutions which precipitate these situations.

Enabling people (individually or as a group) to identify their own needs and find ways to meet them based on close examination of the consequences of the "way" chores to themselves and to others. (1) Long range prevention — restructuring institutions through organizing the people alienated by the institution to make known their needs that are being blocked. (2) Immediate action — working with individuals while long term changes are taking place.

PRE

Prevention is an attitude which prescribes:

1. Resolving those human personal needs which
 - a. prompt noticeable socially unacceptable behavior;
 - b. produce an attitude in the person of total lack of control in determining his destiny;
 - c. promote in the person a sense of alienation to people or institutions who are "in control;"
 - d. promote premature labelling and/or mislabelling by societal agents which narrows that person's access to socially desirable and self-satisfying roles.
2. Promoting institutional change which will
 - a. more effectively resolve human needs;
 - b. decrease alienation of the person or people to that institution or its agents;
 - c. increase access to socially desirable or self-satisfying roles;
 - d. reduce that premature labelling and/or mislabelling of people which narrows a person's access to desirable and self-satisfying roles.
3. Promoting community awareness, interest, and active involvement in the resolution of personal needs and institutional change which will decrease alienation of the people to institutions and their agents, increase access to socially desirable and self-satisfying roles, and reduce premature labelling and/or mislabelling of people which narrows their access to socially desirable and self-satisfying roles.

Prevention is helping a person to realize that he/she is a separate individual capable of making sound decisions based on facts, his/her personal values; and be willing to accept the consequences (responsibility) of his/her behavior.

POST

A process undertaken by all institutions which provides for increasing the individual's access to desirable roles, increasing access to desirable experiences which enable exploration and awareness of self and environment and provides control by the grassroot in the decision-making of institutions (which decision directly and indirectly affects that grassroot people).

GROUP F – MEMBERS

Rob Howard: Facilitator
Dodie Edgecomb
Allen Pickel
Antonia Lawrence
Fred Forsyth
James Scott
Gerry Hess

GROUP F – GROUP REPORT

In developing our basic assumptions about people we felt that there were a group of basic needs and a group of wants. Needs are the things we need to survive happily. They are: food, clothing, shelter, and having a certain number of wants satisfied. Which wants are necessary, and how many, varies from time to time and from individual to individual, and as some are satisfied and others are frustrated.

In this society, people play games and fulfill roles that are expected of them. Most decisions they make are externally influenced (social acceptability). When people are labelled they tend to live up to their labels and accept them. As a result of this they get to know themselves as others see them and not as they really are. They become confused, defensive, willing to let others make decisions for them. They do not understand themselves. As a result of this misunderstanding, many people, though aware that something is missing, don't know what it is and are not able to find it within the restrictions of our systems. As a result they search in ways that are socially unacceptable and threatening to other people, many of whom are the system. Having the power provided by the system, they do not want to relinquish it. As a result they interfere with a person's right to make choices by limiting those choices to ones which are not threatening to the system.

To expand these limits imposed upon growth, we must unfortunately accept that expansion will take time; we must work within the system and gain the support of the power brokers to change it.

Prevention is helping people become aware of their own needs as opposed to those of others and those of the system, and to provide alternatives for their growth in the direction they desire. Prevention is also making them aware of how the system stunts this growth and, since people are the system, how this awareness can be used to change it.

There are numerous approaches which must be used together in order to prevent a person's growth from being stifled. Many skills must be provided to individuals. Some specific tools would be to educate people as to their rights and the means of assuring them that those rights are not violated.

Another point would be to make people aware of alternate styles of family living. This would open up new ways of dealing with novel situations which are occurring in our rapidly evolving society. T groups, sensitivity groups, etc., should be used to provide people with interpersonal skills, such as communication, caring, loving, expressing oneself. Also, since we are constantly communicating in a non-verbal manner, awareness of this would enhance communication and understanding. The opportunity to learn how to recognize this should be provided. Students could be taught behavior mod and communication techniques to deal with and change teacher behavior, which in turn will affect their own behavior. In the future, this would carry over into other institutions.

The mode by which these skills could be provided is through changes in the system and utilization of things already available. Some of the ways these changes could be implemented are:

1. Autonomous pilot programs within the system – programs within the institution where they have input but the control lies with the program and not the institution.
2. A living skills course, including communication skills, values, ethics, awareness of self and environment, problem-solving, and decision-making skills, should be provided from the first year up.
3. Provide on-going training in humanistic education for teachers in all subject areas. In this, teachers could share their skills and experiences with each other.
4. Provide courses in parenthood and family living for everyone.
5. Increasing access and exposure to programs already available, to include people who are not diagnosed as having problems, but want to grow.
6. Make institutions aware of strengths and weaknesses (i.e., gaps or duplications in services, policies, practices and procedures).

7. Provide creative outlets in school by providing non-graded, non-threatening courses in art, music, pottery, meditation, karate, etc.
8. Make aware, encourage, and pressure systems to utilize and cooperate with alternative programs already existing outside the system.
9. Change laws
 - a. decriminalize use of drugs
 - b. decriminalize Child in Need of Supervision laws (truancy, runaway, etc.).

Numerous free or scaled fee alternative centers should be established within easy access to all segments of the population; through the mass media, people should be made aware and encouraged to use these centers. If this were accomplished, communication and understanding among all segments would be increased.

Rob Howard, Allen Pickel and Gerry Hess were group representatives chosen to give report.

GROUP F – PROCESS NOTES

People

Assumptions

People have needs.

Needs constantly change.

Needs change as some are satisfied.

People seek out ways to satisfy their own needs.

It is natural for people to try to alter their consciousness.

There are many ways to satisfy one's needs.

This society thwarts many avenues of needs satisfaction.

Needs are as individual as people.

There are basic needs that are the same for all people.

Some people lack awareness of their real needs.

Basic needs are

to feel needed

to love and be loved

attention

security

recognition

companionship

feeling of self-worth

food, shelter, clothing

sex

control (over self and others – environment)

to escape

contact and withdrawal

to commune with nature

elimination

acceptance

People in power don't give up their power voluntarily.

One must have support of power brokers to change institutions.

People have the right to make choices.

People in power tend to place limits on other people's choices.

People play games.

People will go to any length to meet their needs.

People tend to want to make choices for other people.

People want to satisfy needs thru socially acceptable means if available.

People need understanding.

People need to communicate.

People are basically worriers.

People need means of providing food, shelter and clothing for self.

People must satisfy basic needs before higher needs can be considered.

People need relief from boredom.

People need pleasure.

People have need for competition.

People need self-esteem.

People need to create.

The system is people.

People have the capability of meeting their needs.

People need to be heard.

People are labelled.

People label others.

When people label others it frees them from getting to know the individual.

People do not like themselves.

People are defensive.

People do not understand themselves.

People can't be free without knowledge of self.

Knowledge of self will not necessarily free people.

Most decisions most people make are externally influenced (what is socially accepted).

People tend to defend themselves.

People tend to fulfill what is expected of them.

People feel a need for self-fulfillment.

People have a need for their own space.

People have a need for privacy.

People need humor.

People have expectations.

PEOPLE MAKE ASSUMPTIONS!!!!

People are different.

People are more alike than different.

People recognize differences more than similarities.

People have hope.

People want to have decisions made for them.

Needs vs. wants

People assume there is only one way to live.

People need to explore and experiment.

Ways to reach the people we want to provide skills for (the people that want them):

free or scaled alternative centers

alternative curriculum within school system

combining the above

mass media

How To Motivate People To Help Themselves and Others:

1. Education
 - a. educating the educators
 - b. emphasizing the affective
2. Actualization (utilization)
 - a. meditation
 - b. hypnosis
 - c. acupuncture
 - d. demonstration of alternate ways of living
 - e. karate
3. Change laws
4. Alternative centers accessible to *everyone*

Ways To Change Institutions:

Autonomous pilot programs within system

Grass root control over decision-making

Living skills course in school from first grade up (communicative, values, ethics, awareness of self and environment, problem-solving, decision-making)

Humanize teachers in all subjects (on-going teacher training)

Provide course in parenthood and family living

Increasing access to programs already available

Make institutions aware of strengths and weaknesses (gaps, duplications, etc.; policies, practices, procedures)

Provide creative outlets in school by providing non-graded courses in art, music, pottery, etc.

Alternatives with school system to suspension and expulsion

Alternative ways of dealing with people within all systems (court, police, etc.) Encourage (make aware and pressure) systems to utilize and cooperate with alternative programs already existing outside the system

Changes laws

a. decriminalize use of drugs

b. decriminalize Child in Need of Supervision laws (compulsory school attendance, runaway, etc.)

Skills to provide individuals:

Awareness of rights and tools available to assure those rights are not violated

Awareness of alternate styles of family living

T groups, sensitivity groups, etc., to provide inter-personal skills (loving, caring, communicating, etc.)

Recognizing and using non-verbal communication
Meditation
Teaching students behavior mod techniques to change teacher behavior

Prevention

Prevention of self-destructive behavior; of destructive behavior.
Who decides what destructive is?
Is prevention a process or a goal?
Is it both? At different stages?
Prevention is something within yourself.

Prevention is creating values and awareness

Basic information and skills
Providing opportunities for experimenting, exploring and experiencing
Providing people with communicative skills
Awareness of environment (feelings of other people and things)
Providing access to means of achieving needs and wants
Providing creative outlets
Reduction of premature, inappropriate or damaging labelling
Changing hostile environment (living conditions, powerlessness)

What are we preventing?

people from becoming so dysfunctional that society feels they must be cared for
self-destructive behavior
destructive behavior
stunted growth (mental, physical and spiritual)
acquisition of a harmful or undesirable behavior prior to its conception
restructuring an environment inimical to healthy growth to provide one enhancing it
preventing people from being processed thru the criminal justice system

GROUP F: DEFINITIONS PRE AND POST

PRE

POST

Stopping or thwarting the inception of either socially or personally undesirable behavior through: a variety of therapies to deal with the individual's inability to cope with himself and others in his environment; and a restructuring of the environment (behavioral engineering) to make it more conducive to "growing" people who are happy, responsible, and actualizing.

Prevention is a process of providing information and building skills. It also involves building attitudes and insights and promoting a sense of awareness which will allow the individual to develop constructive, meaningful and socially acceptable behavior.

Any effort to prevent or stop the destructive use of drugs, alcohol, or any other substance.

Getting to the cause of a problem before it becomes a problem and stopping it in this early stage.

Beautiful, ecstasy, love, concern, stopping the needle before it reaches, saving the children. Prevention is encouraging realistic attitudes which instill permanent concepts about the negativeness of drug use and counteract the fallacy about the harmlessness of non-narcotic psycho-active drugs. Prevention is almost the total solution to the growing need to deal with druggism.

A theoretical and practical concept that enables one to make a more mature and positive decision about its own entity.

GROUP G – MEMBERS

Phil Emenheiser: Facilitator

Dave Snyder

Beverly Geeslin

Tom Davis

Sarah Thomas

Bill Woolley

Susan Henry

GROUP G – GROUP REPORT

People

People are adaptive.
People have needs.
People can make choices based upon alternatives.
People communicate.

Individual, support, societal and universal systems are interdependent.

Prevention

A learning process designed to facilitate adaptive behavior; i.e., behavior acceptable to the person and to the society within which he/she lives.

In order that a person might realize his/her (adaptive) potential, the following process may be necessary: Recognition of needs and the development of skills which will empower individuals to meet their needs effectively. This could be accomplished through an awareness of choices based upon available alternatives. For individual, support, societal, and universal systems to be interdependent, communication is essential.

Bill Woolley, Bev Geeslin and Dave Snyder were group representatives chosen to give report.

GROUP G: DEFINITIONS PRE AND POST

PRE

Guidance in the decision-making process which will in some way contribute to productive life styles.

A secondary outcome of the promotion of high quality life experiences, i.e., growth, health, satisfactory living.

The development and acquisition of decision-making, intra- and inter-personal skills which enable an individual to make responsible decisions based upon clear values and effective life-skills.

Intervention of person, agencies, etc. into problem areas, i.e., delinquency, for the purpose of diversion into labeling institutions.

That precautionary action taken in effort to alter or disallow.

Not only understanding the "here and now" but deriving the gestalt of "here and now" as that can be related to probable effects in the future.

To relate to the truth of conditions and situations – beyond appearances.

POST

A learning process designed to facilitate adaptive behavior acceptable to the person and to the society within which he lives.

A myth. Human growth and development occurs within various forms of crisis and suffering. Alteration of this process is essentially counter-productive.

A learning process designed to facilitate adaptive behavior acceptable to the person and to the society within which he/she lives.

Equipping the individual with skills that will enable him to realize that in most life situations there are alternatives which he may adapt or adopt. (Prevention is never having to say you're sorry.)

A learning process by which people can become aware of existing, constructive alternatives to best utilize their constructive potential to enhance growth and maximize life.

GROUP H – MEMBERS

Pat Cruttenden. Facilitator

Linda Slote

Dutch Holland

Ron Smith

Richard Dolan

Miriam Scott

Joyce Wheeler

Don Jones

GROUP H – GROUP REPORT

Our goal is the development of mutually positive and fulfilling interaction between social systems and the individual; therefore, prevention includes the individual, the social systems in which the individual participates, and the interaction between the two.

For the *social systems*, prevention is the process of social intervention and its resultant institutional changes which include:

1. openness and flexibility,
2. responsiveness to individual needs, and
3. informing and educating individuals to alternative life styles.

For the *individual*, prevention is the process for the development of:

1. self-awareness,
2. social awareness, and
3. functional survival skills.

Within the *interaction* between individuals and social systems, prevention is the process of:

1. recognizing the need for both,
2. recognizing the needs of both, and
3. recognizing the responsibilities of each.

Don Jones was group representative chosen to give report.

GROUP H: DEFINITIONS PRE AND POST

PRE

An obligation of all concerned members of society, which may be best served through sincere concern for mankind, God, and country. The primary vehicle of which is informing and educating the citizenry.

A negative statement of a positive goal – human development.

The deprivation of opportunity for commission of a crime.

The process of making available data, training, awareness and experience that is objective, comprehensive, realistic and effective to the individual dealing with choices – such as drug use.

Very nebulous. Could mean different things for different groups. Could be education, alternatives or just plain avoidance!

The process of airing, expressing, venting, feeling, experiencing one's feelings, concerns, values, resources prior to or before these feelings etc., get thwarted, jammed up or diverted into negative channels of expression.

POST

The process of social systems and individuals working together in a manner mutually beneficial to both.

The negative label for the positive goal of human development and the accomodating growth of the social system.

Provision of acceptable modes of behavior to deter violations of criminal statutes.

The process of educating and preparing the individual to effectively and positively meet his needs within the social systems he must interact in – in addition to being a part of.

The process of airing, expressing, venting, feeling, experiencing one's feelings, concerns, values, resources, needs prior to or before these feelings, etc., get thwarted, jammed up or diverted into negative channels of expression – PLUS – making a distinction between individual-society-interface between the two - levels of personal and societal need and development. Prevention is primal scream – gut level – visceral response to life and its existential and biological given.

GROUP I - MEMBERS

Kathy Wersen: Facilitator
Pat Henderson
Ralph Glatfelter
Jim Coker
Shirley Stone
Jim Clark
Sylvia Miller
Hewitt Bruce
Arnold Stanberry

GROUP I – GROUP REPORT

Overview

Working Process of Group (Jim Coker)
Interaction Process of Group (Stan)
Product (Ralph and Pat)
Evaluation of how we accomplished task (Hewitt and Sylvia)

WHAT (definition of prevention)

Preparedness for functional use
Prevention almost synonymous with change

Affirmative response
Alternative
Reinforcement of positive functional goals
Competent Coping
Pre-problem perception
Elimination or moderation of negative societal responses to people problems; the long range goal being an affirmative response

WHY (are we preventing)

To develop and maintain a chemically free level of dignity for each human within a chemically oriented society.
To insure the rights of all individuals to pursue a realistic, knowledgeable choice for their life style.
To enhance the opportunities for obtaining human dignity.
To achieve human dignity in spite of societal and personal impairments.
To protect self from self and others; to protect the health and welfare of those unable to do so for whatever reason.

WHO (target for prevention)

Human beings (individuals and groups)

HOW

New approach of education and re-education in spheres of learning
Self-application; self-exploration
Re-examination of the criminal justice system, HRS, educational system
Re-organizing the entire system

Whole group gave report

GROUP I – PROCESS NOTES

Why here?

Functional objectives:

Ideal vs. what's real
Define beyond drugs
Got into process

What we will produce and why:

Used to enhance my awareness
Used to enhance my present job
Used to better define prevention at state and local level and for myself

Functional Drug Use

What

Assumption:
attitude, mores law

Why

Definition:
concepts, needs, supportive data,
philosophy, personal, societal, function,
physical concepts, amorphous?

Who

How

Prevention

Prevention is preparedness
Goal of redefinition of prevention
Target Population
A. Mobile model?
(1) family structure
(2) total society
a) systems groups
b) individuals
B. What are we preventing?

Definitions of Prevention (brainstorming)

Preparedness for functional use
Prevention almost synonymous with change
Affirmative response
Alternative
Reinforcement of positive functional goals
Competent coping
Pre-problem perception

Jim Clark's definition plus explanation: Prevention is: "the degree of penetration by function as function interfaces with the individual and the societal power structure."

Individuals have problems that vary in degree.

Observers who work with or upon individuals with problems perceive the problem, i.e., its significance, differently.

Observers can be grouped in terms of their relative power to change the definition of the problem and its subsequent impact on the individual.

Prevention can be viewed in terms of:

Preventing individual from increasing his degree of problem as viewed by:
(1) self, and (2) others.

Preventing power groups from
(1) confusing definition – standards, and (2) excessive – or – "labelling theory orientation that prematurely defines problems.

Re-statement of "whats" of prevention from each group member:

Elimination and intervention of those sociological and psychological barriers that prevent a human from obtaining his right of nurturement, development and happiness.

Alleviation of personal, interpersonal and situational dysfunctions of which drug abuse is a symptom.

Self and social alienation

Abuse of self-destruction:

socially
emotionally
psychologically

Eliminate unstable dependency (either psychological or physical) such as drugs.

Medical

Disease

Stopping — Exploring
Growth
Opening up rather than holding back

Elimination or moderation of negative societal responses to people problems — the long range goal being an affirmative response.

Affirmative development of personal responses to self and environment

Model Development

Model or eliminate *negative* response of individual and society, and develop *positive* individual response.

Prevention is the diverting of x from dysfunctional alternatives.

Prevention is the opening up and exploring of alternatives toward productive, self-satisfying degrees of happiness as individually defined.

Why we came to impasses — how we developed final flow:

Eliminating extraneous statements until working thru what, why, who, and how

Cleared heads and changed (raised) groups energy level with physical and breathing exercises (non-verbal and fun)

(Two members suggested exercises to clear the head. After break, stood in circle 10 minutes — each person demonstrated a movement or breathing exercise for group to follow. Hewitt suggested changing seats for fresh point of view.)

Decided to go for process instead of end product which took pressure to perform off group and met most individual needs.

Group listened more to each other as result of the above (competition factor diffused.)

Agenda for Friday Morning a.m. Presentation

What — does word "Prevention" mean?

What are we preventing?

What is a working definition of prevention?

Why — are we preventing?

Who — are we preventing with?

How — are we going to attempt to prevent?

Ending with a feeling of accomplishment.

GROUP I: PRE AND POST DEFINITIONS

PRE

Helping people to respond affirmatively to themselves and their environment.

Begins in the cradle.

Recognition of the difference in the social, physical, emotional development of a human, and construct or reconstruct a society and a life style that's believable and acceptable.

The initiation of structural alternative community-based services (prior to legal or formal intake) for persons identified as having a "high risk" for deeper penetration into the formal service system.

Awareness and response to those potentially dysfunctional factors either within the individual, in his relations with others, and/or his situation which, if unmitigated, unmet, or unaltered can lead to a variety of inappropriate coping mechanisms, including drug abuse.

Enlightenment or awareness of alternative paths to self fulfillment and solutions to future potential problematic situations.

POST

The elimination and moderation of negative societal responses to people problems, and the development of affirmative responses to self and the environment.

A preparedness and true ability to perceive the needs of all segments of the societal structure, combined with the willingness and resources to effectively meet the needs of the individual within that given format.

Structuring a society so that a human, regardless of age, may live his life as a nurtured, thinking individual capable of making choices and seeking and fulfilling himself according to his needs and goals.

Anticipation and elimination of possible dysfunctions by the enhancement of personal growth and development and the elimination of negative societal pressures.

A process by which a particular action is stopped before it happens. The cause being altered or turned from presenting itself in the state of happening or becoming existent.

GROUP J – MEMBERS

*Facilitator: Marshall Farkas
Sharleen Baker
Dee Donovan
Jonna Case
Jim Norris
Charles Pearce

*task leader unable to attend; leadership emerged from group

GROUP J - GROUP REPORT

1. Competition for money equals pay for slots
2. Filling slots equals prevention of losing jobs
3. New word of prevention is wellness
4. Maintenance of wellness vs. perpetuation of illness
5. Pay for empty slots

The goal of prevention is the maintenance of wellness as opposed to the perpetuation of illness. Why not substitute the concept of wellness for treatment and make our goal one of keeping people out of treatment?! We could do this by paying persons on the basis of empty slots (i.e., the number of persons kept out of a treatment system). Right now program funding is based on getting people in treatment. This must change.

Marshall Farkas was group member chosen to give report.

GROUP J: PRE AND POST DEFINITIONS

PRE

Prevention is a way of helping cope with the problem of life without certain crutches.

A method or process used to obstruct or stop an individual's behavior which might be destructive, through positive self concept, values and goals that best suit the lifestyle of the individual.

The preparation of individuals by instilling and teaching them techniques of dealing and coping with critical problems and the stress of daily life without that individual feeling the need to resort to the use and/or abuse of alcohol and drugs.

To make known and be aware of what may occur before a situation arises.

Any activity designed to assist individuals in controlling their desire to indulge in activities which may be deleterious to their well being, or designed to instill and enhance a desire to control these activities.

The opposite of crises.

POST

The definition that I first stated has not really changed, but has enlarged to a certain extent. First of all now I am not sure of what we are trying to prevent? The time taken for this was too limited. I still do feel that prevention should include a state of well being. And in order to do that we must change society. We must get rid of racism, oppression, etc. We have to eliminate these things that lead to not being in a state of well being.

A method or tool used at any given time to build self-worth and decision-making which is pertinent to an individual, which will redirect his life into a non-destructive manner.

The preparation of an individual (by the presentation of information and alternatives and steps and skills in the process of decision-making) to promote his well-being and foster his healthy attributes and to deal with the large crises and daily stress of life.

Making known information which will help an individual be aware of the consequences positive or negative in deciding or making a decision.

Maintenance of wellness.

GROUP K – MEMBERS

Jennie McAnaney: Facilitator

Laura Lee

Mildred Darville

Dennis Fitch

Willis Murray

Carol Levy

George Barnes

Barbara Sorrells

GROUP K – GROUP REPORT

Prevention should result in the following:

- Good communication skills
- Good interpersonal relationships
- Good intrapersonal relationships
- Capacity to accept responsibility
- Capacity to have control over one's life
- Good self-concept

These results can be accomplished by working on communication skills and human relationship skills through community programs, especially for parents and parents-to-be, including day care centers. Another area for implementation of prevention should be education. In this area, there should be a change of emphasis in present-day educational systems; i.e., schools should become interaction centers rather than information centers.

Barbara Sorrells and Willis Murray were group members chosen to give report

GROUP K – PROCESS NOTES

Assumptions About People:

People are physical, social, spiritual and emotional beings who need to interact constructively with each other, themselves and their environment.

The group started off by listing a great number of assumptions about people and tried to develop a definition of prevention from that list. They got bogged down and started talking about treatment, especially those qualities that would be desirable for a person to have after having undergone treatment. They then decided that these qualities would be their group goals for prevention.

Prevention

Prevention is a dynamic process whereby people are encouraged and given the opportunity to actualize all their individual potentialities.

Prevention takes place and relates to people in these ways: *Communication*: Giving people effective communication skills through parent training, human relations skills, training for teachers, student teachers and available to all groups in the community.

Provide: day care centers and school programs for parents at lower school level.

Change emphasis of present day educational system, making schools places for human interaction in place of information centers; i.e., a school based on the needs of its consumers.

GROUP K: PRE AND POST DEFINITIONS

PRE

POST

Depends upon which frame of reference is being considered.

The process whereby people are encouraged and given the opportunity to gain control and have power over their lives.

A dynamic process and concerted effort on the part of people (working together in different disciplines and contexts) to effect maximum functioning of human beings in their respective environments. The process has a positive connotation of promoting life, rather than of the preclusion of harmful substances in the environment.

Effective (and effort of) understanding of one's reasons for a given act.

Progressive ways to deal people through interaction, communication and a respect for cultural life style.

Any activity, either physical or mental, that provides some sort of positive growth and acts as a substitute to negative life styles.

To make citizens aware of the hazards of narcotics and dangerous drugs.

I don't know; for I'm too new to say.

1. Love of life and people. 2. Recognizing of peoples' needs.

Prevention is a process in which the individual is enabled to realize his own potentialities to their fullest. It's the gaining of a sense of meaning and validity for his own personal existence. In essence, it is the ability to find his source of happiness and stability in himself. He will then be enriched by all of his life experiences in all situations.

WRAP-UP

Following small group presentations, workshop participants were asked to react to the workshop experience, to raise critical issues and to suggest possible future directions for efforts in prevention.

The participants' responses at this time were:

1. Prevention in a sense is an individual responsibility and may occur most effectively on a one-to-one basis. Yet,
 2. to work individually without some collective system of support does not allow for a sense of direction. As a result,
 3. there needs to be an emphasis on sharing, with some direct and definite recognition at a local state and national level of a system of support for individuals involved in the grass roots efforts in prevention. Without this support, which the participants felt has been in the past weak at best and for the most part non-existent, prevention would continue to remain a theoretical concept and not a reality.
 4. Any strategy of prevention must recognize the strength of a united effort which would involve planners and service deliverers, with recognition given to those persons who deliver and receive services by providing them an opportunity to effect system plans for prevention.
 5. The concept of a power plant should be encouraged within regions and cities, a plant where individuals would continue to focus actively on issues revolving around the human condition and where the emphasis would be on vitality and support as opposed to the status quo and maintenance.
- Most of all, the participants reflected the attitude that prevention is *doing*, a doing that requires risking. As one participant put it: "*you can't lead where you don't go; you can't teach what you don't know.*"

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POSITION PAPERS

WHO IS THE PRIMARY PREVENTOR?

During the past two years, we have had the opportunity to work with over 4,000 adults and young people in 46 states and two territories — all of whom were either involved in implementing drug prevention programs or were the recipients of drug prevention programs. This exposure has provided us with a clear and realistic perspective of what is happening on the grass-roots level, far from the cloistered world of the bureaucracy and the ivory tower. The position which we are taking in this paper is the result of endless hours of discussion and clearly repeated patterns in the feedback which we have received from this network of concerned and involved people.

Much of the vagueness and confusion surrounding the term prevention is the result of the perspective from which the word is viewed. In very general terms, prevention (as translated into prevention programs), is viewed as any effort which will stop people from using or abusing drugs. The thrust of prevention efforts has been to tell people what *not* to do. The emphasis is consistently on the negative, focusing on ways to restrict or inhibit behaviors which people have chosen but which society has labeled inappropriate.

Prevention programs subtly, and sometimes not so subtly, define "right" and "wrong" behaviors in the light of prevailing societal values and laws. Drug education in the schools attempts to provide enough "facts" about drugs to convince young people that they should not use drugs because they are too dangerous. "Scare tactics" and threats are the predominant medium of communication between the establishment and the target groups, reinforcing the negative position that society has adopted concerning drug use. There are other types of programs which attempt to provide acceptable alternatives to drug use, but the underlying message is still "Turn off your way and turn onto my way, because my ways are better than yours." As a result of these attitudes, the primary criteria for measuring the success or failure of a prevention program is the number of people who stop using or abusing drugs, or who decide not to try drugs at all.

Prevention programs have been (and are being) designed and implemented on the basis of one specific definition of the word prevent: to hinder, forestall, frustrate, circumvent. The goal of programs is to *restrict, inhibit, or hinder* drug-taking behaviors. But the dictionary shows a second definition for the word *prevent*: to anticipate by being ready; to precede. It is an interesting bit of irony that this particular definition is labeled archaic — ironic, in that we believe that this archaic definition of the word is the one which offers a clear and positive approach to the whole issue of drug abuse prevention efforts.

To prevent is to "make ready." Who are we making ready? The answer to this question leads us directly to the crux of the issue. Are we "making ready" the *real primary preventor* — the individual himself? The final responsibility for the prevention of drug abuse, or any other abusive behaviors, must rest with each individual and the life choices which he makes. The federal government cannot be the primary preventor; neither can any other government agency. Schools and churches and drug abuse programs cannot be the primary preventor. Each of us — you or me or anyone else — must be his own primary preventor.

Emphasis in prevention programs must be redirected towards positive action, but action on the part of the individuals involved. We believe that the effective prevention program is one which *empowers* the individual, not limits or hinders him. It is a program which *gives* to the individual rather than taking from him, which enhances his growth rather than limits his growth, which meets his needs rather than denying them.

If one accepts the validity of this basic premise, does it also mean that one must say that there is no need for, or value to, primary prevention programs? Quite the contrary. There is a critical need for such programs, but it is our position that such programs must be based on a positive construct, making the "hindering" definition of prevention the archaic definition.

The drug user and the experimenter see prevention efforts as taking away something that the user perceives as exciting, pleasurable or supportive. Obviously, he is going to resist efforts to deprive him of something he has chosen. Instead of seeking to limit behaviors, programs must focus on increasing the individual's awareness of the infinite variety of life experiences which are available to him and helping him "become ready" to select and decide on the experiences which will most enrich his life.

The effective prevention program is one which involves the individual in the process of positivism, which brings the individual an awareness of his power to control his own life. The effective program is one which brings the individual an enhanced self-concept, a greater grasp of his real worth as a person. An individual who feels good about himself is better equipped to make the difficult value decisions which confront all of us. He is more likely to be more inner-directed. He is more likely to exercise conscious and thoughtful control over his life decisions. He is more likely to become more self-actualized. In effect, he is more likely to really become his own primary preventor.

We have had experiences with a variety of prevention programs across the country — from prison groups to parent groups, from traditional classrooms to open classrooms, from hot lines to police programs, from military installations to drop-in centers. We are convinced that regardless of the setting, the content or the format, the crucial element is the commitment on the part of the program's designers and implementors — the commitment to the overall goal of empowering the primary preventor — the individual — to make positive life choices which will enrich his life and bring him greater personal fulfillment.

The more the program involves all aspects of the individual — his thoughts, his feelings, his actions — the greater the likelihood that there will be behavioral change — change which will empower the individual to pursue his life in ways that will reward him, fulfill him and enable him to maximize his potential as a human being.

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DRUG ABUSE PREVENTION

Drug abuse prevention is a means of stopping or alleviating the use and misuse of drugs. Prevention alerts people to the dangers of drugs. Prevention educates people as to what drugs are. In prevention training, the counselor/trainer learns to deal with drug problems and to help the client deal with his problem. Prevention, therefore, is training qualified persons to work with people with drug problems. Most important, prevention brings about education and awareness. Prevention is an attempt to evaluate the how and the why of drug abuse and to develop a solution for dealing with drug use and misuse.

In my position as a counselor/trainer (and specifically as a trainer of a minority group), I stress awareness of biases that hamper counselor/client relationships. Training the Black counselor is different from training the White counselor. Counseling the Black client is different from counseling the White client. We should be aware of these differences. Very often there are similarities in the techniques used by the White counselor and the Black or minority counselor, but more often there are distinct differences. An awareness of oneself and an open acceptance of biases and prejudices are needed on the part of both the counselor and the client. The Black or minority client is different and must be treated accordingly; he must not necessarily be given special attention but should be dealt with in a manner unique to him and to his culture. If the counselor is not prepared to deal with the problem of prevention and drug use from this angle, he will almost always run into problems.

Three things which are most needed in working with Blacks or minorities are awareness of language or dialect and culture-subculture differences, and, most important, the need for outreach. The Black or minority counselor frequently will have to make home visits, while the White counselor sets up office hours and schedules visits. Very often the Black counselor has to go to the bar to see his client. The only time a Black counselor can make sure that his client shows up is after he (the counselor) withholds medication or makes some other threat. It is also important to the counselor and the client to know that biases exist and must be dealt with. There are still people who close up or freeze up with their counselor. Black people are not accustomed to telling people (outsiders) their problems. What isn't a problem to Whites is a definite problem to some Blacks or minorities.

I train counselors not to go into a situation with any preconceived ideas, because every person is different. No one can teach them a model counseling approach. There is no such model.

Prevention then, is a number of means compiled to deal with the problem of drug abuse. It is an awareness of the differences in dealing with Black and with White clients, and with their problems. Drug abuse itself is not a White or a Black problem but a problem which is universal, affecting all people. Prevention has not been clearly defined by anyone, but I do feel that there are commonalities from which a working definition of prevention can be established. To this end we are participating in this conference.

Robert Staples, Ph.D., sociologist and researcher; Joyce Ladner, Ph.D., sociologist and researcher; Robert Williams, Ph.D., psychologist; Charles Thomas, Ph.D., psychologist; Andrew Billingsley, Ph.D., sociologist and researcher; Pat Welsing, M.D., psychiatrist and researcher; William Wheeler, Ph.D., psychologist; Robert Hill, Ph.D., educator and researcher; Harry Edwards, Ph.D., educator and researcher; L. Wendell Rivers, Ph.D., educator and psychologist — these are doctors who have written about the need for a training of minority counselors different from that training of White counselors. They all have written that techniques at times may be similar, but there is and must be a difference between training the minority counselor and the White counselor. Similarly, there is a difference in dealing with the minority client.

We must be aware of our own biases and prejudices in order to successfully remedy the problems at hand. The fact that so many people question the differences in techniques used with the minority client demonstrates that unawareness exists. People are not being honest when they don't admit that they themselves use different techniques when dealing with minority clients. This problem in awareness was one of the themes brought out at the National Drug Abuse Conference by Dr. Lonnie Mitchell and Dr. Beny Primm, specifically in relating the need to develop a National Minority Training Center.

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PROPHECY AND PREVENTION:
A POSITION PAPER ON THE CAUSES AND CONSEQUENCES
OF DRUG ABUSE AND JUVENILE DELINQUENCY

Fortunately or unfortunately, it is always the case that the manner in which we define a phenomenon invariably dictates the range of options, programs or processes we utilize in trying to solve the problems associated with that phenomenon. Put somewhat differently, the assumptions we make about a particular event — assumptions concerning its causes, meanings, and implications — ultimately determine the direction of our responses to that event. Thus, we are ever fulfilling our own prophecies, molding the world in terms of our oftentimes unspoken assumptions about its origins, basic nature and final destiny.

This is particularly true about the problems of drug abuse and/or juvenile delinquency, two areas which are seen (often appropriately) as intimately related, if not joined, to each other. This being the case, the purpose of this position paper is to state our current assumptions about (and definitions of) these problems, challenge the validity of these assumptions, offer an alternative definition and outline some of the preventive planning and action consequences that this alternative conception logically mandates.

Our current approaches to the problem of drug abuse-juvenile delinquency are predicated on a view of the delinquent act as a particular and idiosyncratic response (variously labeled as "deviant," "pathological" or "anti-social") by the adolescent to the universal needs and problems that characterize the transitional and conflict-ridden period of life between late childhood and early adulthood. And, given this perspective, the overall function and goals of whatever programs (preventive or other) we develop to deal with drug abuse will be directed toward *containing* the "deviant" in the belief that controlling and/or otherwise limiting his or her behavior will facilitate the process by which existing social institutions can effectively remedy previously unsuccessful or incomplete socialization and adjustment process in the troubled adolescent. Thus, implicit in our current conception of the problems and needs confronting adolescents are the following assumptions:

First, that adolescence (presumably unlike either childhood or adulthood) is a particularly stressful period of time that is both universal in nature and predictable in onset;

Second, that delinquent acts (especially those which are repetitive and/or serious in nature) are both the result and concrete symptom of inadequate, incomplete or pathological socialization; and

Third, that existing societal values (particularly as embodied in the practices and orientations of the agencies and institutions charged with their protection, promulgation and perpetuation) are not only sound, but also conducive to and supportive of individual and collective self-determination and self-actualization.

As a whole, one can say that there is little or no unequivocal evidence to support the current assumptions which dictate the direction of planning and prevention in the area of drug abuse-juvenile delinquency.

To begin with, the assumption concerning the uniqueness, universality and predictability of adolescence as a period of intense stress is certainly open to question. Cross-cultural and anthropological data gathered over the past thirty years have clearly indicated the "culture-bound" nature of the phenomenon (Benedict, 1949; Firenberg, 1963). In essence, the data indicated that adolescence becomes a problem only in those cultures which, because of certain economic, social and/or sexual legacies, actively engage in specific practices aimed at excluding the adolescent from full societal participation.

The second assumption, that of the implicitly pathological character of most if not all delinquent acts, is similarly difficult to defend. If one accepts (even partially) a "colonialist interpretation" of the relationship that currently exists in our society between the "haves" and the "have nots," one is then also forced to redefine "deviance" and "deviant acts" like drug abuse and juvenile delinquency within a context which now focuses attention on the behavioral consequences of one or another form of systematic oppression. This "adaptive" (rather than pathological) interpretation is well-documented in the recent work of Brown (1965), Clark (1965) and the Kerner Commission (1968).

The final assumption — the assumption that existing institutions and agencies, especially those charged with the responsibility of socializing our citizens, both represent and practice values consistent with an ideology predicated on concepts of self-determination and self-actualization — is, unfortunately, perhaps the easiest to refute. Simply put, the assumption is untrue, and the current nature of our society — divided and fractured by what often seem to be irreparable racial, sexual and class antagonisms — is the clearest and

most damning evidence available.

With the above critique serving as a necessary point of departure, let me begin to develop an alternative conception of the drug abuser and/or juvenile delinquent by offering the following definition of such "deviance": *Drug abuse and/or juvenile delinquency, either as an isolated act or as a pattern of behavior, can be defined as a condition of being in which the "deviant" makes clear the marginality of his/her existence and serves notice on the world that he/she will no longer be contained or deluded by a social system which fails to take his/her needs seriously.*

Drug abuse and/or juvenile delinquency is basically, therefore, the result of inappropriate, malfunctioning and otherwise non-actualizing social institutions; it is related to broader issues of oppression and it can only be approached from a perspective that defines the "deviant" and his/her society as in a state of mutual and shared captivity.

If the concept of prevention is to begin to make any sense at all, it must, at the very minimum, stop "blaming the victim" and cease the self-deluding tendency to treat the problem of "deviance" as if the "deviant" (and his/her family) were the true authors of drug abuse and/or juvenile delinquency. The "author," as it were, is a social order where the pursuit of goods and power (with all the associated exploitative and competitive normative behaviors) has produced an essentially racist, sexist and elitist society. Consequently, meaningful efforts at prevention should begin to focus maximum attention and resources on the following issues:

1. Re-ordering both the ideology and priorities of the socializing institutions (i.e., the educational, law enforcement, judicial, welfare and employment subsystems);
2. Facilitating the sharing of powers and goods between existing institutions and those who both inhabit and are affected by them;
3. Encouraging the rapid enfranchisement of traditionally oppressed and excluded groups (i.e., the poor, the non-white, females, the young, the aged, etc.); and
4. Re-defining the obligations and responsibilities of a super-industrialized technocracy to the citizens whose labors built it.

Ira Goldenberg
Associate Professor of Education
and Clinical Psychology
Harvard University
Nichols House, 11 Farwell Place
Cambridge, Mass. 02138

ON PREVENTION

In the last decade drug abuse has become increasingly widespread. It has come out of the ghetto and reached middle-class and affluent America and spread throughout our campuses and schools, even to the elementary level. The drug problem is here to stay, and a concentrated effort is necessary in order to combat it.

But what type of effort can we make? Prevention is the key to reducing the incidence of drug abuse (Garfield, 1973). Defensive or reactive measures are not enough. The solution lies in education and community action. But how can we arrive at a successful means of prevention through education or community action? We must turn our attention not to the symptoms of deviant adolescent behavior, such as drug abuse, but to the underlying causes in society, family life and environment. Before we can prevent drug abuse we must know the causes that precipitate such behavior.

The National Institute on Drug Abuse is currently pursuing the idea of "alternatives" as a viable factor in prevention of drug abuse.

Research on the psycho-social causes of drug abuse increasingly points toward alternatives to drugs as a promising road to prevention. This approach is based on the theory that people use drugs to fill basic needs and legitimate aspirations which are not being adequately met in the context of today's society. The use of drugs is frequently a response to boredom, frustration, pain, powerlessness and lack of hope for change. Drugs are used in the search for new experience, exploration, personal potency, connections with others, self-esteem, identity, belongingness.

Obviously much of life today fails to provide opportunities for the kinds of experiences that nourish human beings. Our social structures and strategies have failed to keep pace with, or adapt to, the changes brought about by technological advances, population growth and new value systems.

As noted in the first report of the National Commission on Marihuana and Drug Abuse: "A society is stable, peaceful and happy . . . when a very high proportion of the people find fulfillment of some sort within the context society normally provides . . . The long-term problem now, for many, many people, not just young people, is that this condition is not being met."

None of us should be surprised that a large number of young people (not to mention adults) have turned to chemicals for escape or explorations.

The alternatives approach holds that drug use will diminish as other, more satisfying, means of fulfilling human needs become available. Logic, common sense and knowledge of human behavior suggest that, if drug use is a response to an experience deficiency, providing more satisfying options to meet developmental needs should have implications for drug prevention.

This rationale has of course been a strong motivation in programming against juvenile delinquency. But society is only now beginning to explore the alternatives approach as a shield against drug abuse. In the absence of such an effort, many young people — and a strong contingent of their adult advocates — driven by health instinct, have gone about the business of creating new environments. Many of these represent imaginative efforts to develop more stimulating, comfortable and relevant settings for living.

An encouraging array of alternatives is appearing on the social scene. Here and there new shoots are flowering. There is a lot of innovation. The current generation is imaginative, creative and motivated toward change. Young people are pushing toward new institutions, processes, settings, values, life styles, pursuits and programs which are helping to bridge today and tomorrow.

Not by the farthest stretch of the imagination could any but a very few of these objectives be described as having sprung from a conscious effort to provide alternatives to drugs. Nor would we want to pretend that no one involved in alternatives programs ever used a chemical to change mood or behavior. Few of these projects, probably, would qualify for support from drug funding agencies, which require some specific documentation and validation of a program's relevance to drug prevention.

Nonetheless, considerable evidence supports the view that (1) people are less likely to be recruited into drug abuse, (2) they are less likely to escalate to more dangerous drugs and (3) they are less likely to become persistent drug abusers when they are within an accommodating environment and are creatively involved in pursuits relevant to their needs and therefore interesting and rewarding. Self-fulfillment and commitment are not compatible with dangerous drug abuse, as many ex-drug users can attest.

The school is the place where most of the young people in this country come together each day on a regular basis; hence the school becomes a major place where youth may be recruited to the illegal use of drugs. It is this fact that makes it necessary for the school system not only to take a leadership role in development of programs to prevent the use of harmful drugs and other substances and to provide referral to community treatment agencies when needed, but also to prevent illegal activity in the sale and

transmission of drugs and to assist law enforcement agencies in the identification and detention of persons engaging in those illegal activities.

It has been demonstrated that information in and of itself is not a deterrent to drug abuse. Certain studies have indicated that information sometimes stimulates the amount of drug usage by students. Much of the present school curricula has little significant impact on drug abuse because the focus has always been on drug content rather than upon the individual's own (intrinsic) values and attitudes interwoven in the whole syndrome of drug use, abuse and addiction. Drug prevention should focus upon affective levels rather than cognitive levels and should be integrally woven into the educational process. The emphasis should be placed on values which surround a person's decision to use or to avoid drugs. The focus should be on interpersonal awareness and teacher-student interaction. The school, and especially the individual teacher, can involve students in effective anti-abuse programs which deal with the affective aspects of drug abuse.

It is incumbent upon the school system to disseminate accurate information for rational decision making; to provide an atmosphere for the interchange and ventilation of ideas, feelings and values; and to enable young people to become involved and explore opportunities which are alternatives to drug abuse.

The goal of education is to provide for the optimum physical, social, emotional and intellectual growth and development of the student in the light of his needs and interests. The aim of a drug prevention program should be to insure that each student has the opportunity to achieve that goal.

Don Samuels, Coordinator
Substance Education Program
Project PRIDE
Dade County Public Schools
1410 N.E. 2nd Avenue
Miami, Florida 33132

APPENDIX

Materials Mailed Prior to Workshop

March 8, 1974

M E M O R A N D U M

TO: Regional Coordinators and Prevention Specialists

FROM: Robert C. Griffin, Director of Training *RG*

Under cover of this memo, you will find information concerning the First Florida Workshop on Working Definitions of Prevention.

Plans have been made to cover cost for transportation and per diem for you at this workshop. However, it is necessary that you complete the registration form and that it reach my office on or before April 15th.

There is a possibility that some of you may be asked to facilitate small groups in the second-day task effort. In this case, I will be getting in touch with you personally.

Every attempt will be made to begin the workshop experience at 9:00 A.M. May 8. Therefore, depending upon plane schedules, you will need to make the necessary arrangements which will guarantee your being there at this time.

You will note that the role of workshop participants is defined in terms of thinker-learner-problem-solver. In this sense, you will be attending as your own unique individual resource, not as a spokesman for the FDAP.

Each region has been given the opportunity to offer invitations to 3 individuals, other than yourselves, from each region. Please forward all materials (including the invitation form) enclosed under cover of this memo to those individuals. Also, please keep in mind the focus on a working workshop and the thinker-learner-problem-solver particularly as you offer the invitation. Those you invite will be responsible for all expenses incurred as a result of this workshop. You will need to make this clear.

If you have any questions, please contact me.

RCG/dd

cc: Harry Moffett



OFFICE OF THE SECRETARY

DRUG ABUSE PROGRAM • 1323 WINEWOOD BOULEVARD • TALLAHASSEE, FLORIDA

Frank D. Nelson, Director

PHONE (904) 488-4306

March 8, 1974

Dear Workshop Invitees:

Enclosed you will find information concerning the First Florida Workshop on Working Definitions of Prevention. Please consider this a letter of invitation to attend the workshop May 8-10. If you accept, I strongly suggest you make plans to arrive the evening of May 7th since we intend to begin the workshop precisely at 9:00 A.M., May 8. I feel that much of the effectiveness of the experience will be dependent upon all participants sharing the total workshop.

Biscayne College is an ideal setting in that all conference needs can be met on one site. It is located in a relatively isolated spot near the Opa-Locka Airport just north of Miami proper. If you use taxi service from the airport, I suggest you request the driver to proceed by way of Lejeune Road and through the Opa-Locka Airport access since the other route is by way of a circuitous Miami by-pass (I know from experience) and will cost almost twice as much.

As you will note on the registration form, the cost of lodging includes meals. All expenses incurred as a result of this workshop are the responsibility of the participant. Lodging arrangements will be made based on the information provided on the registration form (i.e., if you indicate you're arriving the evening of May 7, lodging will be arranged and you will be billed accordingly. If you indicate you're arriving the morning of May 8, then there very well may be no space available if you later change your mind).

As you can tell from the enclosed material this workshop is for workers and I feel I cannot stress this point too strongly. The workshop proceedings will reflect the in-put and the activity of all participants. Prevention - its definition, its content, and its process - will be the focus of all our energies.

I feel excited as I anticipate spending this time with you.

Sincerely yours,

Bob

Robert C. Griffin
Director of Training

CONTINUED

1 OF 2

will be drawn from a broad base of human services with major selection in the areas of drug abuse response, education and criminal justice.

The actual Workshop will take place May 8-10 with May 7th scheduled as a day of pre-planning for consultants, small group facilitators and other resource persons. May 8th will be a day of stimulus, utilizing resource persons from education, law enforcement, human services, training, medical practice and clinical services delivery. The activities for this first day will be designed to stimulate free thinking on the part of the participants and resource persons. It is our hope that this first day will enable all of us to exchange our "professional hat" for that of a thinker, learner and problem solver, so that we may all bring to bear our individual, specific and unique skills as we attempt to arrive at working definitions of prevention. All first day activities will be a total group experience including the possibility for informal activities in the evening.

The second day, May 9th, will be a day involving a small group task directed at:

1. defining a small group world-view of people, both people in groups and as individuals. In other words, to identify assumptions regarding individuals as a beginning step to arrive at a working definition of prevention;
2. arriving at a small group consensus on a working definition of prevention; and
3. defining the process of prevention in terms consistent with each task group's working definition.

In summary the small group's final working production will say: Whereas, we assure these 1,2,3,4,....., concerning people, we define prevention to be

...., and the process of prevention consistent with this definition may take place and relate to people in these ways: 1,2,3,4,.....

Each task group will contain 8 - 10 members and a task facilitator whose job will be to clarify, summarize and focus group members activity as efforts are made to accomplish the small group tasks. Large pads of newsprint will be supplied to each group and each group will have the responsibility for keeping a running record of interactions and activities.

The final task of each small group will be to select a strategy for presenting the outcome of the days activity at Friday morning's general session.

The third day, May 10, will again involve the total group. At this time, each task group will present their results of the small group workshop. There will also be opportunities for feedback concerning the workshop with hopefully some "where do we go from here?" activity. The FDAP will compile all information related to the workshop and a written proceeding will be available through this office for interested persons and groups.

Every attempt has been made to define and design this total workshop as an intense working experience. In specifically outlining the agenda and tasks the intent has been to communicate to all persons who attend that personal, individual, unique resources are valued and that the resources of a thinker - learner - problem - solver are key to a successful workshop effort.

In keeping with the working concept, Biscayne College, was selected because; (1) lodging, food, meeting space, and recreational space are all available on campus and (2) the United States Office of Education Regional



Training Center resources are of highest quality.

I feel optimistic as I look forward to our workshop experiences and I feel that the proceedings which will result from the efforts of the participants will have deep and meaningful value for those of us who have as our first priority the enhancement of life experience(s).

Sincerely,
Bob
Robert C. Griffin
Director of Training

FIRST FLORIDA WORKSHOP ON WORKING DEFINITIONS OF PREVENTION
REGISTRATION FORM

This registration form must be completed and returned by April 15th to:

Bob Griffin, Director of Training
Florida Drug Abuse Program
1323 Winewood Blvd.
Tallahassee, Florida 32301
(904) 488-4306

NAME: _____
PREFERRED NAME TAG NAME: _____
ADDRESS: _____

PHONE NUMBER: _____
PLACE OF EMPLOYMENT: _____
JOB TITLE: _____

The workshop will begin at 9:00 A.M., May 8. In making plans concerning transportation, please make every reasonable effort to be on the campus of Biscayne College prior to this time since the unity and productivity of the experience will be greatly determined by the continuity of shared experiences.

Please check:

- *Single Occupancy @ \$20.00 _____
- *Double Occupancy @ \$15.50 per person _____
- *Room rates include meals.

Please reserve room May 7 _____, May 8 _____, May 9 _____.

A registration fee of \$5.00 will be necessary May 8th to cover incidental expenses. In order to register, please complete this sentence (s): Prevention is:

Note: use additional space if necessary

AGENDA

April 30, 1974

FIRST FLORIDA WORKSHOP ON WORKING DEFINITIONS OF PREVENTION

- MAY 7: 6:00PM - 8:00PM - Registration
Lobby, Biscayne College Continuing
Education Center
- MAY 8: 8:00AM - 9:30AM - Registration
Lobby, Biscayne College Continuing
Education Center
- 10:00AM - 11:45AM - Large Group Session with Resource
People - Large Group Room, Continuing
Education Center
- 1:00PM - 4:30PM - Large Group Session with Resource
People - Large Group Room, Continuing
Education Center
- 7:00PM - 9:00PM - Informal Get-Together
Room to be Announced
- MAY 9: 9:00AM - 11:45AM - Small Group Task Sessions
Rooms to be Assigned
- 1:00PM - 4:30PM - Small Group Task Sessions
Rooms to be Assigned
- Evening - Free Time
- MAY 10: 9:00AM - 11:00AM - Small Group Task Reports in Large Group
Large Group Room, Continuing Education
Center
- 11:00AM - 11:45AM - Large Group Wrap-Up Session and Work-
shop Feedback
Large Group Room, Continuing Education
Center

Dear Workshop Participant:

We are looking forward to seeing you in Miami at the First Florida Workshop on Working Definitions of Prevention. We have had a good response from all of you and anticipate an exciting, productive effort.

We have lined up what we feel to be excellent and dynamic resources whose input will be utilized May 8 to stimulate and challenge as we function in the role of thinker, learner and problem-solver.

For your information, these resource persons are:

- Dr. I. Ira Goldenberg - clinical specialist
- Commissioner Edward Hammock - criminal justice specialist
- Dutchie A. Johnson - counselor training specialist
- Bill and Eileen Ochse - human resource specialists
- Donald Samuels - educational specialist.

Some additional notes:

In all cases, where you have not specifically requested a single room, we may find it necessary to make use of doubles due to limited space. Rates include meals and you will be charged whether you make use of the cafeteria or not.

An informal, social get-together has been scheduled from seven to nine on the evening of May 8. Refreshments will be provided. Our hope is that all of us may make use of this time to relax and informally continue relationships begun earlier in the day.

Again, we expect to adhere closely to the time schedule and request that you support us in this.

Sincerely yours,

Robert C. Griffin,
Director of Training

RCG/amg

END