

THE COLOMBO PLAN DRUG ADVISORY PROGRAMME

Training Report

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| 1.1 | Training Name | TOT Training on UPC-Practitioners Series: Core Course | |
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| 1.2 | Location (Country & Region) | Uganda | |
| 1.3 | Education Provider Name | Uganda Youth Development Link and Colombo Plan Drug Advisory Programme. | |
| 1.4 | Start and End Date of the Training | Monday 10 th – Friday 14 th February 2025 | |
| 1.5 | Names of Resource Personnel/Trainers | Dr. Kasirye Rogers, Mr. Mutaawe Rogers, Mr. Bikumbi Grace, Ms. Kisakye Mastulah, Mr. Lubega Andrew and Ms. Nakijoba Barbara. | |

2. Introduction:

The training on UPC-Practitioner's Series core Course was conducted on Monday $10^{th} - 14^{th}$ February 2025 in Wakiso district, Uganda at UYDEL Masooli Rehabilitation centre. The Universal Prevention Curriculum for Substance Use for Practitioners (UPC-P) has been designed to provide knowledge, skills and competencies for prevention professionals to understand the key elements of evidence-based prevention (EBP) and the most effective prevention strategies currently available. The series provides practitioners with in- depth knowledge and skills related to the content, structure, effective delivery, and monitoring and evaluation of the short- and long-term impact of prevention interventions and policies.

- An overview of the basic processes underlying addiction and the brain, the basic pharmacology of psychoactive substances and preventive mechanisms that have been shown to be effective in more than 30 years of prevention science.
- Skill development in areas such as reviewing data necessary to assess the substance use problem; work with a prevention implementation planning approach; and develop logic models to aid in that planning.
- Completion of this course is a prerequisite for participation in any of the following seven specialization courses in monitoring and evaluation, prevention in school, prevention in the family, prevention in the workplace, prevention in the environment, prevention in the media and prevention program delivery systems.

3. Objective of the Training Programme:

The objectives of the Core Course are as follows:

- To show how prevention science concepts are the foundation for the prevention of substance use
- To provide the science-base for prevention intervention development and delivery

- To provide an overview of the physiology and pharmacology of psychoactive substances, and the levels of progression of psychoactive substance use.
- To provide an understanding about what theory is and how theory contributes to evidence-based intervention and policy development and implementation
- To present the background and approach of the International Standards on Drug Use Prevention, which serves as the basis for the Universal Prevention Curriculum series
- To present the Implementation Cycle as the effective approach to use when selecting and implementing evidencebased interventions
- To present the importance of training for prevention professionals, and the need for a variety of competencies and skills required by different levels of prevention professionals
- To introduce the code of ethics for prevention professionals

4. Description of the Training:

The first part of the training which is the Core Course comprises 10 modules representing different aspects of prevention science and its application to practice. The first module introduces learners to the course and the training goals. Module 2: Physiology and Pharmacology for Prevention Professionals provides some basic information on psychoactive substances and how they affect the brain and body, while Module 3: Critical Themes of the UPC Series serves as the basis for the Practitioners Series. The fourth module: Prevention Science: Definitions and Principles aims to enhance learners' understanding of the science that provides the foundation for evidence-based (EB) prevention interventions and policies. Module 5: Critical Theories in Prevention is an overview of the leading theories that provide an understanding of how prevention interventions are developed and work. Module 6: Evidence-based Prevention Interventions and Policies – The UNODC International Standards on Drug Use Prevention explains how EB prevention interventions and policies were identified by UNODC when they produced the International Standards on Drug Use Prevention. Module 7: The Implementation Cycle for Prevention Interventions, Module 8: Trained Prevention Professionals and Evidence-based Practice, and Module 9: Code of Ethics for Prevention Professionals focus on the skills and competencies for EB interventions in relation to the Implementation Cycle, specific skills needed for prevention work, and ethics underlying various aspects of prevention programming. At the end of the Core is Module 10: Application to Practice, where learners have the opportunity to plan how to apply what they have learned in practice, as well as develop their own professional development plan on strategies for the future.

The training methodology adopted was power point presentations of the material, integrated with experiential exercises, energizers, group and individual activities according to the trainer manual. Appropriate illustrations in the African and Ugandan context were used to support the participant's understanding of the concepts.

Opening ceremony

Remarks from George Murimi from Colombo Plan Drug Advisory Programme

George thanked UYDEL for organizing this important training and also thanked participants for showing the enthusiasm to attend this training programme. He urged the participants to learn as much as possible, acquire knowledge and skills to transfer the knowledge to other colleagues at workplaces and communities at large. He informed the participants that the Colombo Plan is available to support the prevention professionals in furthering their careers in this field. He noted that the UPC Core course is the foundation course and participants were welcome to specialize in other specialty tracks such as school, family, environment, among others. We wished them a successful training and he was eager to interact with them in the near future.

Remarks from Dr. Basangwa David, Mental Health consultant

Dr. David expressed his gratitude towards the organizers of the training, acknowledging the oversight of resources, while also commending the participants for their willingness to attend. He emphasized the escalating issue of addiction in homes, communities, and society at large, stressing the imperative to take proactive measures to mitigate this problem. Dr. David

highlighted that addiction is a preventable condition, and failure to address it will result in costly consequences, including the need for treatment and care. He also noted that social disruptions, crime, and violence are concomitant with addiction, leading to increased healthcare concerns. Recent scientific advancements have led to a greater understanding of the disease concept, enabling early intervention through brain illustration and analysis prior to disease onset. Dr. David encouraged practitioners to pursue certification through the International Consortium and drug use Demand Reduction Centre, a globally recognized institution that professionalizes addiction treatment internationally. To address the human resource requirements in this field, Dr. David recommended developing a database for training participants. He emphasized that personal satisfaction, area of expertise, and the potential to transform lives can be significant motivators, even in the absence of financial compensation. By making a concerted effort, even small contributions can culminate in achieving significant milestones.

Closing Ceremony on 14th February 2025

Remarks from the representative of the participants

Ms. Daisy Namboga spoke on behalf of the participants, expressing gratitude to the facilitators and organizers for the invaluable knowledge shared during the training. She highlighted key lessons learned throughout the five days and emphasized the importance of applying this knowledge in the real-world settings.

Remarks from the representative of Facilitators;

Mr. Mutaawe thanked everyone for their participation In the training. He noted that, despite a late advertisement for the training, over 90 people applied, but due to logistical constraints, only 43 participants were selected. He also reminded everyone about the WhatsApp group, encouraging participants to stay engaged, share experiences, and seek guidance when needed.

Remarks from Dr. Kasirye Rogers

Dr. Kasirye thanked the participants for their commitment to the training. He informed the Guest of Honor about the upcoming credentialling examination for Prevention due in June and assured participants that preparation for the exam would begin soon. He also encouraged participants to disseminate the knowledge gained, collaborate with colleagues, and apply the concepts learned in their work. Additionally, he introduced the participants from various organizations represented and invited them to stand for recognition.

Remarks from the Guest of Honor

Dr. Brian Sekayombya from the National Drug Authority expressed his appreciation for the opportunity to be part of the closing ceremony. He mentioned that he was representing Dr. Hellen, who had originally planned to attend but was unable to due to other commitments. In his remarks, he acknowledged the participants' newly acquired knowledge, as shared through Madam Daisy's speech. However, he pointed out that prevention work is still underappreciated globally and is not given the priority it deserves. He urged the participants to take action, emphasizing that the country urgently needs qualified prevention professionals to tackle substance use challenges. He further encouraged collaboration among NGOs, stressing the importance of working together under one platform to synergize efforts. He also called for advocacy for stronger prevention policies, noting that the participants now had the knowledge and capacity to contribute to policy development. Additionally, he urged participants to publish research and reports on prevention, as documented evidence is crucial in influencing policy decisions and gaining recognition for prevention work. His speech was a strong call to action, motivating participants to continue engaging in prevention initiatives and advocating for change.

| No. | Full Name | Organization/ Location | Designation |
|-----|-----------------|---------------------------|--------------|
| 1. | NABATANZI MISSA | UYDEL | PEER MENTOR |
| 2. | ALUKUDO EMILY | UYDEL | SOCIALWORKER |

5. List of Participants:

| 3. | NAMPEBWA JOVIA | UYDEL | SOCIALWORKER |
|-----|------------------------|----------------------------------|--------------------------|
| 4. | NAMWERO DAPHINE | UAPA | PROGRAM OFFICER |
| 5. | SSENGOOBA YUNUSU | BUTABIKA HOSPITAL | SOCIALWORKER |
| 6. | AHEBWA KEISA PATIENCE | THRIVE THERAPY AN WELLNESS | IDSOCIALWORKER |
| 7. | NAZIRI IMMACULATE | LIFE HOUSE UGANDA | SOCIALWORKER |
| 8. | NAGGITA JOELINE | LIFE HOUSE UGANDA | SOCIALWORKER |
| 9. | NANKYA ROSE | UYDEL | SOCIALWORKER |
| 10. | NANKANJA DEBORAH | PODGAL PRODUCTIC GROUP | NJOURNALIST |
| 11. | SSEBAGALA ISAAC | UYDEL | SOCIALWORKER |
| 12. | BOONABAANA MONECAH | UYDEL | PEER MENTOR |
| 13. | NAMAGALA MARIAM | | SOCIALWORKER |
| 14. | MBAZIIRA ROGERS | | PROJECT COORDINATOR |
| 15. | NAKANJAKO HAJARA | UYDEL | SOCIALWORKER |
| 16. | NAKASOLYA EDITH | UYDEL | SOCIALWORKER |
| 17. | NAMUYIGA STELLA | HEAVENLY BRENDS | GRAPHIC DESIGNER |
| 18. | OTAL MCBERNARD | KYDA | SOCIALWORKER |
| 19. | ALAYO ALICE GRACE | | SOCIAL WORKER |
| 20. | BWANIKA JOSEPHINE KATO | LIFE HOUSE UGANDA | SOCIAL WORKER |
| 21. | UNEZA ALLEN BARBRA | LIFE HOUSE UGANDA | SOCIAL WORKER |
| 22. | NAKISITU PROSSY | LIFE HOUSE UGANDA | SOCIAL WORKER |
| 23. | NALWOGA MARY | LIFE HOUSE UGANDA | SOCIAL WORKER |
| 24. | KULUME MARY | UGANDA GIRL GUIDI ASSOCIATION | ESPEER EDUCATOR |
| 25. | SCHOLASTIC KITUYI | UGANDA GIRL GUIDI ASSOCIATION | ESRECRUITMENT OFFICER |
| 26. | SSEBADUKA SOPHAN | LIFE HOUSE UGANDA | SOCIAL WORKER |
| 27. | OLUPOT CHARLES | UGANDA GIRL GUIDI ASSOCIATION | ESPEER EDUCATOR |
| 28. | NAMYALO SHARON JULIET | LIFE HOUSE UGANDA | SOCIAL WORKER |
| 29. | NAMBOGA DAISY | UYDEL | SOCIALWORKER |
| 30. | SSEWALI MARK CAVIN | UYDEL | SOCIALWORKER |
| 31. | NAMAJA ANNET | UYDEL | SOCIALWORKER |
| 32. | NAKKAZI GERTRUDE | UYDEL | SOCIALWORKER |
| 33. | ADIKINI JACQUELINE | UYDEL | SOCIALWORKER |

| 34. | KINOBI MOSES | UYDEL | SOCIALWORKER |
|-----|----------------------------|----------------------------|-------------------------|
| 35. | NAKIMERA DESTINY | UYDEL | SOCIALWORKER |
| 36. | KATO GERALD KAVUMA | UYDEL | LIVELIHOOD OFFICER |
| 37. | SSEKIBUULE SHAFIC | UYDEL | SOCIALWORKER |
| 38. | NAKASI MARIAM | UYDEL | SOCIALWORKER |
| 39. | SSEBUNYA VERONICA NAMBI | NATIONAL AUTHORITY | DRUGSOCIALWORKER |
| 40. | NAMAKULA CRYSTAL ELIZABETH | NATIONAL AUTHORITY | DRUGSOCIALWORKER |
| 41. | NABUNYA LYDIA | MORSBACH CHILDREN IN UG | FORSOCIALWORKER ANDA |
| 42. | TALIVAWO EFRANCE | UYDEL | PEER MENTOR |

Reflections of the Participants:

stage.

The content was relevant and applicable to the participants professional every work.

Community engagement is key to achieve evidence-based interventions and sustainability.

2Fs are important including fidelity and flexibility during planning and implementation of the program

Ethical considerations are key namely do no harm and confidentiality principle are key during implementation

Building synergies is crucial in attaining holistic approach for our target audiences and sustainability purposes.

Facts and having numbers (data) can inform evidence-based interventions.

Practitioners should recognize laws globally and nationally to be integrated in their professional work but also advocate for policy changes.

6. Challenges:

Limited time to share all the training modules - content was too much to comprehend in one week.

Training venue being far which limited participants to properly manage time.

The training modules required access to data/ internet connectivity which was not provided. This limited participants to actively participant in some modules.

7. Recommendations and Participants Comments on the Training:

Extend on the timeline duration of the UPC training.

Extend the venue closer to central place - Kampala city.

Should provide Wi-Fi or internet access to all participants during the training.



Figure 1: Group photo showing UPC TOT at Masooli Rehabilitation centre



Figure 2: Dr. Kasirye facilitating a session during the UPC Core Course training



Figure 3: Participants during the UPC Core Course training held at UYDEL Masooli centre in Kampala, Uganda



Figure 4: The Guest of Honor Dr. Brian Sekayombya handing over a certificate to one of the participants of the UPC training.

13. Prepared by (with Signatures)

Dr. Kasirye Rogers and Mr. Rogers Mutaawe

Submitted on: Friday, March 7, 2025