

Awareness courses on the dangers of drug and alcohol use

A review of the implementation of the measure four years after its creation.

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Since the French “delinquency prevention act” of 5 March 2007, which mainly aimed to “increase the efficacy of the legal system’s handling of drug addiction”¹, people arrested for narcotics possession and use can now be ordered by the courts to undergo an “awareness course on the dangers of drug and alcohol use”. Inspired by similar training programmes to improve road safety awareness, this monetary sanction, which is meant to have an educational dimension and is paid for by the offender, is intended for occasional, non-addicted narcotics users. It seeks to alter the users’ behaviour to avoid recidivism. This can be achieved by raising offenders’ awareness of the consequences of their use. Designed to provide public prosecutors with an alternative to issuing warnings, which are deemed insufficiently dissuasive, awareness courses on the dangers of drug and alcohol use are likely to become a systematic, expedited penal response to narcotics use, especially in the case of first-time offenders, to reinforce “the central role of the courts in responding to what the law clearly defines as an offence”².

To facilitate the implementation of such training courses in all French jurisdictions, lawmakers have set forth various flexible application conditions (see box on page 3). Furthermore, the French Ministry of Justice and Liberties and the *Mission interministérielle de lutte contre la drogue et la toxicomanie* (MILDT, or the French Interministerial Mission for the Fight Against Drugs and Drug Addiction) have developed actions to support the implementation of awareness raising programmes³, such as distributing a methodological guide to all jurisdictions in 2009. The Ministry of Justice entrusted the OFDT with the task of outlining available awareness courses on the dangers of drug and alcohol use and determining the population actually undergoing such programmes (see box on page 6).

The initial representative assessment of the measure showed that, since the 2007 law, 1,800 to 1,900 group awareness-building training courses on the dangers of using drugs had been implemented in mainland France and in French overseas departments by 101 registered asso-

ciations in 35 “*cour d’appel*” (court of appeal) jurisdictions. With an average of ten trainees per class, 18,000 to 19,000 people, or 4,500 trainees per year, have been through these drug awareness training courses since 2008 (96% of these people were cannabis users). This number has been increasing steadily.

This issue of *Tendances* provides a summary of the primary results of the assessment of this measure.

Conditions for implementing training courses

Satisfactory territorial coverage

Although there is at least one structure providing such a training course in each *cour d’appel* jurisdiction, not all superior court jurisdictions are covered: when this assessment was performed, two out of every ten jurisdictions did not have any training courses that were offered by a local association. Although the territorial coverage of the measure proved to be satisfactory, the available training courses were geographically concentrated: half of the courses that have been organized since 2007 took place in 25% of the *cour d’appel* jurisdictions (Paris, Aix-en-Provence, Bordeaux, Amiens, Pau, Caen, Poitiers and Grenoble).

An increase in the number of registered training courses since 2009

From the second half of 2009 onwards, the implementation of the measure accelerated following the distribution of the methodological guide within jurisdictions. Nearly 80% of the associations providing these training courses

1. See the 9 May 2008 penal strategy circular regarding action against drugs and other addictions.

2. Editorial by Jean-Marie Huet, Director of Criminal Matters and Pardons at the French Ministry of Justice in *La Lettre de la MILDT*, May 2009, issue no. 25 (<http://www.lalettredelamildt.fr/archives.php?lettre=35>).

3. Several meetings attended by French public prosecutors and judges specialised in narcotics cases were organized within *cour d’appel* jurisdictions by the MILDT. The *Direction des affaires criminelles et des grâces* (DACG, or Criminal Matters and Pardons Directorate) of the French Ministry of Justice also implemented a day of training for court judges who work on narcotics cases.

were registered with the French health care scheme in 2008 and 2009, and a similar percentage organized their first drug awareness course in 2009 or 2010. Once authorised, structures established their first training course an average of three and a half months later. This timeframe corresponded to the preparation phase (e.g., making contacts with different partners, drafting of a convention, designing the content of the course and mobilising trainers); they then organize six to seven training courses per year.

A service dominated by medico-social and socio-legal associations

The structures providing training courses were medico-social (31% associative CSAPAs⁴ and 30% ANPAA departmental committees⁵) and socio-legal (31%) associations. Fewer than 10% had a different profile: CIRDD⁶, CODES⁷, rehabilitation associations, housing associations or humanitarian associations.

The majority of the associations (86%) that provided training courses did so alone, ensuring multiple activities when establishing such programmes (administration, technical implementation, teaching), while 14% worked with one or two other organizations to conduct the training. CSAPAs, which are more numerous than other types of structures, more often delegated the administrative organization of training courses to other structures, thereby limiting their contribution to providing health information.

Training courses that primarily target adults

Nearly 73% of the associations offering drug awareness courses did so only for adults, while 25% targeted adults and minors and only 2% specialised in training courses for minors (these are only offered by socio-legal associations). Subsequently, nearly half (16 out of 35) of *cour d'appel* jurisdictions did not have training courses accessible to, or suitable for minors. This focus on adults continued throughout the registration of these training courses.

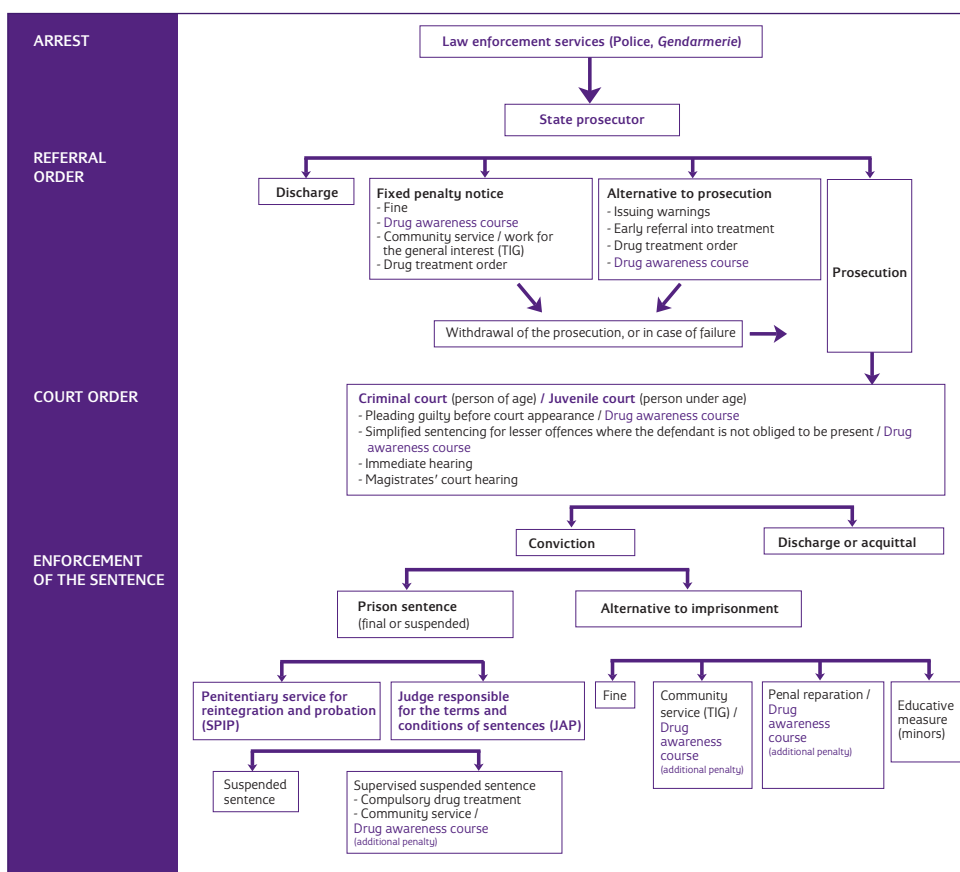
CSAPA drug awareness courses stood out for having a more diversified trainee population: 39% of them were open to adults and minors vs. 28% of ANPAA departmental committees and 13% of socio-legal associations. With some exceptions, different drug awareness courses were organized for adults and minors.

Significant differences in the duration, price and organization of drug awareness courses

Nearly half of all structures offered two-day long training courses covering three thematic modules, as recommended by the MILDT's specifications. The other half generally organized shorter-term training courses (usually one-day long) or, in rare cases, longer ones that may even include a follow-up appointment one month after programme completion.

Although the average cost for a training course was about €190, these prices varied with jurisdiction: one third of the structures invoiced

Figure 1 - Penal routes for French narcotics users



Source: OFDT

€50 to €150 per training course, one third €160 to €230 and one third €240 to €300. In certain appeal court jurisdictions (Paris, Grenoble and Limoges, for example), some training course cost four times as much as others.

Seldom did structures offer free training courses. None of the structures charged the maximum, legally authorised cost (€450).

The majority of the structures (93%) charged a flat price with the training course costs being occasionally reduced for minors. The payment modalities varied as well: 80% of the structures authorised a payment plan while fewer than 60% offered the possibility of waiving payment.

Usually, the drug awareness courses took place on-site at the service-providing organization (one third of the cases). The training course may also take place at a public site (usually a municipal or departmental site) or, at times, in rooms rented by the training structure (fewer than 3% of the cases).

The training course costs covered 90% of the cost of organization, but one quarter of the associations reported having several sources of funding, including, in general, a portion of the operating budget for the association.

Training course content varies depending on the type of structure offering it

Nearly all of the 440 training courses organized during the survey period covered the three thematic modules recommended by the MILDT specifications (health, legal and social). All included at least a health model, which

took up the lion's share of the training time (three hours on average vs. two and a half hours for each of the other modules).

Approximately 1,500 health professionals with varied profiles taught in drug awareness courses. Nearly two thirds of the instructors were one of the following: psychologists, physicians (75% of whom specialised in addictions), educators or court representatives (prosecutors, deputy prosecutors or judges). The other instructors worked in a wide range of other areas (they were police officers or gendarmes, social workers, lawyers or jurists, SPIP⁸ or PJJ personnel⁹, prevention educators, instructors, hospital practitioners, etc.).

The training courses utilised four instructors (internal or external) on average, and the choice of instructors varied with the modules. The health module was usually taught by

4. Centres de soins, d'accompagnement et de prévention en addictologie, or National treatment and prevention centres for addiction

5. Association nationale de prévention en alcoologie et addictologie, or National Association for the prevention of alcoholism and addiction.

6. Centre d'information régional sur les drogues et les dépendances, or Regional information centres on drugs and drug addiction.

7. Comité départemental d'éducation à la santé, or Departmental health education centre.

8. Service pénitentiaire d'insertion et de probation, or Penitentiary service for reintegration and probation

9. Protection judiciaire de la jeunesse, or Judicial youth protection services.

caregivers: physicians (addiction specialists, alcohol specialists, psychiatrists or general practitioners), psychologists or nurses; the legal module mainly used court representatives, police officers or gendarmes, lawyers and jurists - a group representing 70% of the instructors for this module; the social module generally employed social workers (mainly educators), psychologists, and prevention instructors. Police or gendarme educators (FRAD¹⁰ and PFAD¹¹) represented fewer than 10% of the instructors for this module.

The preparation for such training courses is based on a variety of information sources. The majority were organized using institutional information sites, such as those of the MILDT and the OFDT. An average of four different prevention and information tools was used to prepare the training courses. The media mainly used were the “*Drogues et dépendance*” (Drugs and addiction) information booklet (INPES-MILDT), the brochures issued by the MILDT during the 2005 information campaign (“*Le cannabis est une réalité*”, or “Cannabis is a reality”) and the “*Les drogues, la loi*” (“Drugs and the law”) booklet.

Nearly seven out of every ten awareness courses incorporated a section on drug-use self-assessment tools. By far, the most frequently presented rating scales for detecting harmful drug use (see box on page 4) were the CAST (36%), the AUDIT, DETA and FACE for detecting problematic alcohol consumption (13%) and DETC-CAGE for detecting cannabis use (12%), far ahead of other types of tests. Usually, at the end of the training course, participants received information documents (prevention brochures, lists of treatment structures, self-assessment tests, a brochure for the nearest CSAPA).

Variable numbers of participants and a substantial proportion of “lost to follow-ups”

Although training courses had an average of 10 participants, as stipulated in the specifications, there was significant variation from one structure to the next. Nearly 14% of the sessions organized during the survey period had lower participant numbers (fewer than six participants) or, in contrast, much higher participant numbers (more than 15 participants).

The average rate of absenteeism during the first day was approximately 20%. This was two times higher for adults-only training courses (21.5% vs. 12.4%). In training courses lasting two days or more, the withdrawal rate between day one and day two was 14%.

This significant portion of “lost-to-follow-ups” failing to present to their awareness-building training course despite the court order, or failing to complete the training course, are subsequently unable to present the public prosecutor with the programme completion certificate indicating that the court order has been executed.

A fairly uniform scope of penal application

Nine out of every ten training courses were ordered as an alternative to legal proceedings (50% as “traditional” alternatives to legal proceedings and 39% as fixed penalty notices (*composition pénale*), approximately 5% within the scope of an *ordonnance pénale délictuelle* (criminal order)¹², and about 6% equally distributed between additional sanctions and other penal measures (*comparution sur reconnaissance préalable de culpabilité*, or pleading guilty)¹³,

réparation pénale (penal reparations)¹⁴, supervised suspended sentences, etc.

The choice of procedural framework in which the drug awareness course is carried out varies with the *cour d’appel* jurisdiction. In two French jurisdictions (Basse-Terre and Colmar), the participants were present solely as an alternative to proceedings, while in Metz, all registered participants were executing a fixed penalty notice. Although in the majority of *cour d’appel* jurisdictions the scope of application of training courses was diversified, some seemed to favour a method of procedural recourse similar to fixed penalty notices, such as in the *cour d’appel* jurisdictions of Rennes or Angers, or alternatives to proceedings, such as in the *cour d’appel* jurisdiction of Bordeaux (more than 80%).

Designed as a method of expedited penal response, the awareness course on the dangers of drug and alcohol use was carried out on average within nine months of the arrest; half of the participants began their training course within seven months of their arrest.

Profile of the population undergoing awareness courses on the dangers of drug and alcohol use

A target population that is reached in general

The largely male (93%) participant population was 25 years old on average. There was an overwhelming majority of adults (97%), and

Scope of application of the measure

Since the 5 March 2007 “delinquency prevention act” and its application texts, narcotics users do not only risk the maximum sentence of one year imprisonment and a 3,750 Euro fine, as had been stipulated by the 31 December 1970 act; such users may also be required to undergo an awareness course on the dangers of drug and alcohol use.

To enable jurisdictions to adapt the measure to their local needs, lawmakers provided very flexible implementation conditions (Vicentini, Clément, 2009): intended for adults and minors over the age of 13, awareness courses on the dangers of drug and alcohol use may be ordered at various stages of the penal procedure (see figure 1) by a public prosecutor within the scope of an alternative to legal proceedings (which does not go on a person’s criminal record) or a fixed penalty notice, or by a court within the scope of a criminal order or as an additional sanction (particularly when it comes to punishing driving a vehicle under the influence of narcotics).

Legislation, the most recent of which is the 16 February 2012 application circular of the French Ministry of Justice, emphasizes that the choice of procedural scope in which the awareness course on the dangers of drug and alcohol use takes place should depend on the existence of precedents and the social and familial situation of the user. Legislation recommends ordering such a training course for first-time cannabis use offenders within the scope of an alternative to proceedings or a fixed penalty notice in order to systematise the response to use offences while avoiding the use of warnings, which are not persuasive enough. In contrast, addicted users requiring medical treatment or who have already been arrested or convicted for use should be subject to other penal responses (health referrals, drug treatment order, pleading guilty before a court appearance, or correctional hearings).

Awareness courses on the dangers of drug and alcohol use should be carried out according to the methods stipulated in article 131-35-1 of the French Penal Code, which applies to all awareness-raising courses (such as road safety and parental responsibility). It should be organized by an association (of a socio-legal or anti-drug addiction nature) approved by the Prefect and the public prosecutor. Training courses should last two days and be carried out within six months of being ordered.

Legislation stipulates that the cost of said training courses should be borne by the offender (or by the parents when the offender is a minor) whenever possible, and that the costs should not exceed €450 (corresponds to the amount of a fine for a third class offence). Payment can, however, be waived for offenders taking part in a training course outside the scope of an alternative to legal proceedings: in such cases, it is the responsibility of departmental project managers in cooperation with public prosecutors to ensure that agreements with the service-providing association encompass the possibility of having a quota for admitting a few users free of charge.

Once the training course has been completed, participants must provide the public prosecutor with the certificate received as proof that they underwent their training.

The role of the public prosecutors is therefore pivotal for implementing training measures. In addition to their responsibility in implementing this new kind of penal response, public prosecutors are required to contact associations likely to provide such training courses and then work with the prefects to certify these associations. The general public prosecutor must ensure that the costs and duration of the training courses in their jurisdiction are consistent. The public prosecutor’s office must also ensure that there are different awareness-building courses for minors and adults.

10. The 575 *formateurs relais antidrogue* (FRAD, or Anti-drug liaison trainers) in France are *gendarmes* who themselves were specially trained to inform and help prevent psychoactive substance use in educational establishments.

11. The 250 *policiers formateurs antidrogue* (PFAD, Anti-drug police trainers) in France are police officers specialised in preventing drug use. They take part in informative sessions to help prevent drug use in educational establishments.

12. Implemented to relieve the court system of simple criminal cases, the “*ordonnance pénale*”, or criminal order, is a quick, simplified judgement procedure without hearing both parties. It mainly targets people who have no prior records. Initially limited to fines, the 9 September 2002 law widened the scope of application of “*ordonnances pénales*” to include offences, such as narcotics use (since the 5 March 2007 act). An *ordonnance pénale* may lead to an acquittal or a conviction (a fine that may be accompanied by additional sanctions, such as an awareness-building training course).

13. Introduced in France by the Perben II law of 9 March 2004, *comparution sur reconnaissance préalable de culpabilité* (to plead guilty before appearing in court) enables public prosecutors to directly suggest, without a trial, one or more sanctions to an adult who admits to having committed an offence.

14. *Réparation pénale* (penal reparations to the victim or society) is an educational sanction for minors. It can be handed down at any stage of proceedings (as an alternative to proceedings when requested by the public prosecutor, as an educational measure or a criminal conviction when ordered by a judge).

young adults in particular: 64% of the population was aged 18 to 25 years, 33% were over 25 and 3% were minors.

Nine out of every ten participants had been arrested for cannabis possession or use. More specifically, nearly seven out of every ten participants had been arrested for cannabis use without any other related offence (68%). For two-thirds of these users, it was their first arrest. Furthermore, 11% of the people enrolled in the training course had been arrested for a driving offence (e.g., driving under the influence of narcotics or alcohol, or a speeding offence).

The majority of participants use cannabis occasionally, i.e., less than 10 times per month (41%), 30% use it regularly (but not every day) and 29% are daily smokers. Nearly six out of every ten participants regularly smoked in a festive or recreational setting (62%) and eight out of every ten smoked at their home or a friend's home (see table 1).

More than three quarters of the participants had already discussed the effects of cannabis with people close to them, but nearly 20% had never had a discussion on the subject before being arrested, usually because they had not felt that the dangers of cannabis pertained to them. Furthermore, half of the participants stated having felt at least one negative effect of their use in the last year, and this effect was usually related to financial issues (30%), physical health (18%), family life, work, studies, job opportunities and relationships.

Certain categories of users are over-represented

The general profile of participants (primarily occasional or regular cannabis users who had been arrested for the first time) did indeed correspond to the target population, but the measure also brought in a population to which such training courses do not pertain – a population that would be better served by health treatment. Approximately 20% of participants were daily cannabis users, have been using for more than five years and considered themselves addicted. Moreover, over one third of people ordered to follow an awareness-building course had already been arrested for narcotics use, and 12% of these had received drug treatment order.

Furthermore, the socio-economic situation of participants proved to be more disadvantaged than the population targeted by the measure, which is intended for a better-integrated

population. Nearly 60% of participants were employed and 18% in school or in training, but 20% were unemployed and 4% were inactive (see table 1). The participant population was also characterised by a low level of education (70% had no degree or had not completed secondary-level studies) and there was a preponderance of workmen, particularly amongst those arrested for use (42% vs. 21%).

Users who went through drug awareness courses differed from the general population in some clear ways. They were more often single (particularly in the 26-to-34-year-old age range, for men and women, 90% vs. 69% and 97% vs. 58%) and tended to drink regularly: nearly 30% drank alcohol regularly (vs. 17% in the general population¹⁵) and one quarter had experienced at least three episodes of drunkenness in the last month. They also stood out due to their high prevalence of at-risk behaviour: three quarters had already driven a car, motorcycle or scooter after smoking cannabis, and of these, 56% repeated this behaviour after the arrest that led them to undergo the drug awareness course. This may be evidence of the low persuasiveness of police involvement in this offence for this subpopulation. Moreover, nearly one third had used cocaine, hallucinogenic mushrooms or poppers at least once in their life. This proportion was three to seven times more frequent (depending on the substance) in this population than in the general population: between the ages of 18 and 25, for example, 38% of participants had tried cocaine (vs. 6% of the general population), 34% had tried mushrooms (vs. 5%) and 34% poppers (vs. 11%). This tendency to frequently indulge in risky behaviour undoubtedly translates in a propensity to adopt transgressive thrill-seeking lifestyles, as well as a tendency to distance one's self from the law.

The objective of the awareness-building courses was satisfactory overall, since one of its purposes is to address a non-addicted public that is socially integrated and non-recidivist. Participant demographics revealed a population that is active or in school for the most part, with recidivists only representing one third and occasional cannabis users one half. In addition to the different profiles between reported users and arrested users before entering the penal system (Peretti-Watel et al., 2004), awareness training courses seemed to mainly capture certain user categories, such as cannabis smokers (cannabis was involved in 96% of the cases and in

91% of use arrests), of modest socio-economic status (43% workmen vs. 21% among those arrested for use) and characterised by a specific attitude towards risk.

Furthermore, the population that underwent these training courses was not easily distinguishable from the population within the legal system being admitted to the *Consultations jeunes consommateurs* (CJC, or Youth Addiction Outpatient Clinics), with the exception of the over-representation of adults (97% vs. 83%), men (93% vs. 81%), regular-but-not-daily-users (30% vs. 19%) and socially integrated people (59% active employed persons vs. 33% in CJCs) (Obradovic, 2008).

Different levels of impact

“Beneficial and instructive”: a training course appreciated for the quality of the instructors

At the end of the training course, nearly all participants stated having appreciated the instructors (91%) and praised them for being able to conduct a training course that was not too “moralising” (over 60%). Likewise, the content of the training courses received nearly 80% favourable opinions. Two out of every three participants deemed the awareness courses on the dangers of drug and alcohol use a “good measure”, particularly as a penal alternative to conviction.

The majority (85%) of the participants stated having “learned things” during the course, particularly if they were occasional cannabis users, had been smoking for less than two years and had been arrested for the first time: many of them had never discussed the effects of cannabis with those close to them for they “did not know how to approach the subject”. In this fringe population, over 80% of participants deemed the course “beneficial”, while this proportion was less than 40% amongst daily users who had already been arrested and were not interested in discussing the dangers of cannabis.

Different levels of knowledge acquisition

The main knowledge gained during the training course pertained to the gain in perceived awareness especially of anti-drug legislation and the health risks of drug use. The legal and health modules, particularly those portions that discuss possible treatments on the one hand and the effects of cannabis on memory and alertness while driving on the other hand were deemed useful.

This general feeling among the trainees should be qualified, however. Assessed using a few questions to test awareness, the actual level of knowledge acquired seems to be lower than the perceived level. Although the participants seemed to have a relatively good grasp of health risk knowledge at the end of the course, awa-

15. Drank at least ten times in the last month (Beck et al., 2011).

Screening tests for psychoactive substance use

CAST (Cannabis Abuse Screening Test), was designed by the OFDT to screen for problem users through a six-question questionnaire (three positive responses should lead users to question the consequences of their use; four or more positive responses should lead users to consult with a specialist).

AUDIT (Alcohol Use Disorders Identification Test), designed by the World Health Organization (WHO) in 1990, uses 10 questions to help identify subjects with alcohol problems by highlighting situations of abuse or excessive drinking on the one hand and addiction on the other hand.

FACE (*Formule pour Apprécier la Consommation par Entretien*, or Fast Alcohol Consumption Evaluation) was elaborated to offset the shortcomings of AUDIT for French general practitioners (“*Boire moins, c'est mieux*”, or the “Drinking less is better” programme). FACE uses five questions to identify three drinking behaviour types: low risk (drinking is under the risk threshold), high risk (abuse without addiction) and alcohol addiction.

CAGE (Cut, Annoyed, Guilty, Eye-opener); the French version is called DETA. CAGE was developed in the United States in 1968 to identify “hidden alcoholics” in a hospital setting. It helps identify alcohol abuse and addiction through the use of four questions. DETC (*Diminuer, Entourage, Trop, Cannabis*, or Reduce, Family circle, Too much, Cannabis) was a French adaptation of CAGE/DETA to cannabis.

renew regarding the legal risks was less conclusive: more than one third of the participants still had a poor understanding of the risks run by driving under the influence of drugs and the majority had not assimilated knowledge about the risks leading to minimal sanctions. Although the learning was not fully consolidated, the training courses nevertheless enabled a number of participants to begin questioning their behavior habits.

A capacity to assimilate information that varies with the profile of the participant

The ability to glean something from the awareness course on the dangers of drug and alcohol use was apparently connected with the ability to minimise its disadvantages and the feeling that it was an obligation. Subsequently, for example, the proportion of trainees who deemed the training course "beneficial" decreased, in correlation with the rising of the number of perceived disadvantages. In contrast, the participants who least resisted the principle and content of the training course were also those who were the most likely to reflect upon the consequences of their use and even modify their use behaviours.

The benefits of the training course were even more evident when the negative effects of cannabis use had already been perceived and personal reflection on use had already begun. Different attitude groups could be identified among the participants, and the most significant of these was composed of users who planned to change their use behaviour (six out of ten participants). Of these involved trainees, who were particularly interested in receiving practical advice, some regret the lack of information on "techniques for stopping cannabis use".

A limited impact on use behaviours

Even when it was judged useful and "interesting" by the participants, the drug awareness course on the dangers of drug and alcohol use did not trigger the desire to change use behaviours. Amongst those participants who were positive about the course's content, two out of every three planned to "stop" or "diminish" their use after the course, while nearly one out of every five stated that they did not wish to change their use practices, except to be more discreet in order to minimise the risk of being caught again in the future.

Of the participants who stated wanting to stop all use after completing the training course, the majority indicated having felt, before the course, at least one negative effect of their cannabis use and having discussed the effects of cannabis use with those close to them since the arrest (approximately 60%). These results suggested that becoming aware of the risks related to cannabis use correlated more with being legally warned (perception of adverse effects, discussion with friends and family, arrest) than the effects of the training course: only one half of the participants stated that they would have used the substance differently if they had known what they learned in the training course.

Table 1 - Trainee profile, by age range, column %

	< 18 y.o. (n=132)	18-25 y.o. (n=2,563)	> 25 y.o. (n=1,309)	Total (n=4,004)
Gender				
Male	90.9	92.9	91.8	92.5
Female	9.1	7.1	8.2	7.5
Marital Status				
Singles	80.3	82.5	56.3	73.9
Living with a partner	16.4	16.4	28.8	20.5
Married	0.8	0.6	9.7	3.6
Divorced	-	0.2	5.0	1.7
Other	2.5	0.2	0.2	0.3
Current situation				
Working	18.3	53.3	74.1	58.9
At school, studying or in training	66.4	24.1	0.8	17.9
Unemployed	9.2	20.1	19.8	19.6
Inactive	6.1	2.6	5.3	3.6
Education level				
No diploma or degree	82.4	27.0	21.4	26.9
Did not complete secondary school	15.2	39.6	42.2	43.0
Completed secondary school	2.4	23.2	19.2	18.6
Two-years of university level studies	-	6.6	9.6	7.1
More than two years of university level studies	-	3.6	7.6	4.4
Occupations and socio-professional categories				
Farmer	1.6	2.0	2.5	2.1
Self-employed craftsman, merchant, company manager	7.3	7.9	11.9	9.2
High-level executive, professor, liberal profession	0.8	1.5	5.3	2.7
Mid-level profession, technician	1.6	5.4	10.5	6.9
Administrative or sales employee	4.0	7.6	10.6	8.5
Workmen	15.3	41.9	46.5	42.5
Student	59.7	20.2	0.4	15.0
Unemployed or inactive	9.7	12.9	12.0	12.5
Artist	-	0.3	0.3	0.3
Other (e.g. military, volunteer, retired)	-	0.2	0.1	0.2
History of arrests for use				
First arrest	71.3	62.8	64.3	63.5
Recidivist	27.9	35.8	34.7	35.2
'I don't know'	0.8	1.5	1.0	1.3
Offenses leading the participants to take the training course				
Narcotics use	66.7	65.6	63.7	65.0
Narcotics possession	53.5	45.1	40.8	44.0
Narcotics dealing	3.9	3.1	1.6	2.6
Driving offence	1.6	10.5	12.7	10.9
Substance leading to the arrest				
Cannabis	98.4	97.2	92.3	95.6
Cocaine	1.6	3.0	7.1	4.3
Heroin	0.8	2.3	5.5	3.3
Other	2.3	2.9	4.7	3.4
Cannabis: use in the month prior to the arrest				
Fewer than 10 times (occasional)	39.7	36.1	49.5	40.5
10 to 29 times (regular)	36.5	32.1	26.4	30.4
≥ 30 times (daily)	23.8	31.8	24.0	29.1
Cannabis: reasons for using				
« To reduce anxiety and stress, to sleep better or to cope » (self-therapy)	33.9	39.6	38.2	37.3
« To seek pleasure, social interaction, sharing » (hedonism)	81.9	67.3	59.1	62.4
« Out of habit, with a sensation of addiction to the product » (feeling of dependency)	16.5	22.9	24.9	22.4
Cannabis: places of use before the arrest				
In the street, in public, outside	70.2	56.3	37.5	51.2
At school or after school	56.0	33.1	10.0	27.4
At home	66.4	79.3	85.2	80.7
At a friend's home	78.4	85.6	78.8	83.3
At work	9.5	17.8	16.6	17.2
Another site (festive venue, outdoors...)	40.0	53.2	57.1	54.2
Alcohol: use in the month prior to the training course				
In the last month: ≥ 1 time	83.3	84.5	80.2	93.0
≥ 10 times (regular)	24.6	26.5	31.1	27.9
≥ 30 times (daily)	6.1	4.0	6.7	4.9
Alcohol: episodes of drunkenness in the month prior to the training course				
≥ 1 time	68.1	63.8	47.8	58.7
≥ 3 times	40.5	29.3	17.5	25.8
≥ 10 times	10.3	6.2	4.1	5.7
Illegal Drugs: lifetime use (at least once in a lifetime)				
Cocaine	15.8	38.4	53.3	42.6
Heroin	4.6	15.4	27.5	19.0
Amphetamines	14.3	25.1	34.6	27.8
Ecstasy	10.9	25.5	41.0	30.1
Hallucinogenic mushrooms	21.9	34.2	45.6	37.5
Poppers	16.4	33.7	37.1	34.3
Crack	2.8	9.2	15.9	11.2
Total	3.3	64.0	32.7	100.0

Source: OFDT

N.B.: The sum of the column percentage is over 100 when several responses were given.

The users who planned to change their behaviour (i.e., who did not reject the idea of reducing their use) seemed however little convinced of their ability to do so in the short-term. Hence, more than 40% of the trainees who thought they would “completely stop using” after the training course admitted that they would more likely progressively reduce their use and try to be more discreet to avoid being caught in the act. At the same time, more than one quarter of those who planned to diminish their use planned first “to be more careful if they ever used again”. Fewer than 10% of the participants who planned to diminish or stop their cannabis use planned to consult a health professional for support in their efforts.

Conclusion

Although the number of awareness courses on the dangers of drug and alcohol use implemented since the measure was launched may seem modest compared with the extent of arrests for narcotics use (4,500 trainees per year vs. nearly 136,000 arrests for use in 2010, of which 122,439 were due to cannabis), the number of training courses available has been rising since 2009. Today, all courts d’appel jurisdictions have at least one structure that provides such training courses.

Drug awareness courses on the dangers of narcotics use remain a minority choice among the range of penal responses available to public prosecutors, but its use as a response seems to be spreading thanks to the growth in expedited procedures for offences (mainly within the scope of fixed penalty notices, criminal orders, and guilty pleas).

Implementing awareness-raising courses with uniform content throughout France, as was the wish of the authorities, seems difficult to perform. The jurisdictions and the structures offering these training courses have adapted the objectives of the measure according to their local problems and needs, but the differences in the conditions under which the training courses are carried out (duration, costs, format, time to execution) undermine the notion of equality between citizens.

Nevertheless, the survey has shown that the basic principles of the measure have been respected and the objectives sought have been attained. The measure does reach the target population, even though the population attending awareness courses on the dangers of drug and alcohol use is not very different from the population in the legal system (individually admitted to Consultations jeunes consommateurs (CJCs or Youth Addiction Outpatient Clinics)).

However, despite generally positive feedback on the training course content and format, a significant proportion of the participant population believed that the course would have a limited impact on use behaviours, particularly because it was “not personalised enough”. A part of the population planned to make greater efforts after the course “to avoid getting caught again”. Thus, the results of the assessment of the measure led to questions regarding the effectiveness of the awareness course on the dangers of drug and alcohol use as a lever to effect changes in use behaviour. From the participants’ point of view, these training courses remained, above all, a penal sanction incapable of deterring users from consuming if they did not plan, prior to the training course, to stop their use.

Commissioned in 2010 by the French Ministry of Justice and Liberties, the OFDT-conducted assessment of drug awareness courses on the dangers of drug and alcohol use aimed to provide information to the authorities on two aspects of the implementation of this new measure: the number of courses available in France (mainland and overseas departments) and the conditions for implementing these training courses on the one hand, and the participant population profile on the other hand, and in particular the number of recidivists. To fulfill these objectives, the OFDT conducted a survey by a self-administered questionnaire with two sections. The questionnaire was conducted over a six-month period (from 1 December 2010 to 31 May 2011) within all structures that had implemented such training courses. The first survey section questioned certified structures offering training courses (questionnaire A “service provider”); the second addressed drug users following these courses (questionnaire B “participant”).

All the structures identified as providing training courses received both of these types of questionnaires before the survey with a memorandum from the General Secretariat of the French Ministry of Justice. The memo set forth the objectives and scope of the assessment. This memorandum was accompanied by a batch of unmarked white envelopes that served to preserve the anonymity of participants answering the survey questionnaire. At the same time as this mailing, all the structures were contacted by mail by the OFDT to reiterate the objectives of the study and provide recommendations for distributing the questionnaires to participants to ensure that the conditions under which the survey was administered were homogeneous.

After two waves of telephone follow-ups followed by a series of consistency and recoding controls, the sample contained **99 service-providing structures** (out of 101 active structures) and **4,004 trainees** (of the over 4,300 present), indicating that the survey had a good response rate. The usable response rates were 98% for the “service provider” section and 93% for the “participant” section (in the 89% of structures that distributed the questionnaire to participants).

The conditions for conducting the survey were also satisfactory. The response rate for the service providing structures varied from 94% to 100%, depending on the question (allowing for exceptions). Moreover, after the consistency and recoding controls, fewer than 3% of the 4,107 “participant” questionnaires that were initially received by the Sous-direction de la statistique et des études (SDSE, or Sub-directorate for statistics and studies of the French Ministry of Justice) were eliminated: only those for which the socio-demographic questions (gender, age, marital status, current situation) were not fully answered and those with a lot of missing information were excluded from the analysis. Furthermore, nearly all (94%) trainees stated that they felt comfortable answering the questionnaire, leading to the belief that there was a satisfactory level of sincerity in the responses collected despite the restricted legal context.

To successfully complete this assessment, the OFDT received specific funding from the French Ministry of Justice and logistics support from the SDSE for printing, mailing and the data capture of the questionnaires and also some help for follow-up telephone calls to non-responder structures.

Legislative and regulatory references

- Law no. 2007-297 of 5 March 2007, the “delinquency prevention act”.
- Decree no. 2007-1388 of 26 September 2007 for the application of the law no. 2007-297 of 5 March 2007, the delinquency prevention act, amending the French Penal Code and the French Code of Criminal Procedure.
- CRIM Circular of 9 May 2008 regarding action against drugs and other addictions.
- CRIM Circular of 16 February 2012 regarding the improvement of the legal processing of narcotics use.

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