



Youth Prevention Education (Evidence Based Curricula)

Information Guide Series



**Division of Mental Health, Developmental
Disabilities, and Substance Abuse Services**
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Youth Prevention Education Information Guide

The Youth Prevention Education Resource Guide will assist your organization in meeting effective delivery of this prevention strategy. This guiding document aligns with the required, Division of MH/DD/SAS approved “Foundations of Youth Prevention Education” training.

This Youth Prevention Education Resource Guide will provide you with key points that can assist you in the implementation of your Youth Prevention Education (Evidence Based Curricula) program. This guide will also provide you with some general information, guidance, and websites that can be used as resources as you plan and implement your Youth Prevention Education program.

Thank you for your dedication to ensuring effective planning and delivery of prevention education programs. We believe your hard work in this area will improve the lives of children, youth and communities across the state. Your work is meaningful, important and necessary in the promotion of healthy, substance-free communities.

Comments and Suggestions

Prevention practitioners are encouraged to provide comments and suggestions on the information and guidance provided in this document to:

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**Research used to develop Standards of Effectiveness and Implementation Guidelines is available upon request.*



Youth Prevention Education Information Overview

This section will provide general information about evidence-based youth prevention education and references for appropriate tools, guides, books and websites that will serve as a starting point for planning and implementing this approach.

WHAT IS THIS APPROACH?

Youth prevention education is an ATOD curricula designed to increase enhance “protective” factors and reduce “risk” factors. These programs include components such as social skills development, peer and media pressure resistance, anti-drug attitudes and norms, and self- management skills to increase youth skills in dealing with high-risk situations and decrease potential motivations to use drugs.

Evidence-based programs are validated by research and feature a variety of strategies proven to be effective. Each program has undergone scientific evaluation and demonstrated positive outcomes over time for youth who participated in the program.

WHAT YOUTH PREVENTION EDUCATION PROGRAMS CAN BE USED?

Currently providers who are implementing Youth Prevention Education programs have the opportunity to select from the list of pre-approved evidence-based programs listed below. Programs should be selected based upon local needs assessment data, as described on pages 4-5. You may also consult with the North Carolina Training and Technical Assistance Center in selecting programs for your community by emailing nctta@drugfreenc.org.

PROGRAM	AGES	IOM PREVENTION CATEGORY
HALO (HEALTHY ALTERNATIVES FOR LITTLE ONES)	Preschool	Universal
TOO GOOD FOR DRUGS	K-12	Universal
MEDIA DETECTIVE	3 rd -5 th	Universal
MEDIA READY	6 th -8 th	Universal
UNIQUE YOU (FORMERLY KNOWN AS I'M SPECIAL)	3 rd -4 th	Universal, Selective
ALL STARS JR	4 th -5 th	Universal, Selective
ALL STARS	6 th -8 th	Universal, Selective
PROJECT ALERT	7 th -8 th	Universal, Selective
PROJECT TOWARDS NO DRUG ABUSE (TND)	9 th -12 th	Universal, Selective
PROJECT SUCCESS	7 th -12 th	Universal, Selective, Indicated
STORYTELLING FOR EMPOWERMENT	1 st -12 th	Selective
EARLY RISERS	1 st -5 th	Selective, Indicated
RECONNECTING YOUTH	9 th -12 th	Selective, Indicated

CAN PROGRAMS BE USED THAT ARE NOT ON THE PRE-APPROVED LIST?

Providers who do not select a program from the pre-approved list above have the opportunity to select a program that meets the needs of their community. These programs must:

- Target an area of high need identified in the most recent assessment (page 4-5).
- Be implemented according to the Implementation Guidelines below (pages 5-7);
- Meet the Standards of Effectiveness (pages 7-9)
- Be approved for use in writing by the NC DMH/DD/SAS Prevention Team.

A request form for programs that have not been pre-approved is attached.

Needs Assessment

To be most effective, youth prevention education programs should be selected to target the greatest needs identified in your local needs assessment. This is true for both programs that have been pre-approved and those for which you request approval.

HOW IS A LOCAL NEEDS ASSESSMENT USED TO PLAN FOR THIS APPROACH?

A needs assessment survey is a tool used to assess the needs of a group or a community. It is a method of asking groups or community members their opinion on what are the most important needs. The results of the survey guide future actions. Provider agencies implementing an evidence-based youth prevention education program must select curriculums supported by the result of a needs assessment conducted by your agency. **Generally, the highest rated needs are the ones that are addressed.** However other factors such as school and community readiness, cost, availability of staff should also be taken into consideration.

A need means something that specifically relates to the concerns of a particular group or community. Vandalism, trash on the streets, substance abuse, and chronic illness are examples of needs that might be perceived as a group or community issue or problem. Note that some surveys are very broad, and ask about any and all kinds of needs. Others are narrow, and limit themselves to learning more about one or two. Both kinds of surveys are common and helpful. The choice depends on what you want to find out. Focus first on determining substance abuse prevention needs, and if necessary, broaden the scope to other community issues that affect substance use.

Depending on your resources (time, money, and people) a needs assessment survey can take many different forms. It can be as informal as talking with key informants in your community or it could take the form of a professionally written survey that is distributed to hundreds of people. A needs assessment should have the following common characteristics:

- A pre-set list of questions to be answered.
- A pre-determined sample of the number and types of people to answer these questions chosen in advance.
- Done by personal interview, phone, or by written response.
- Results of the survey are tabulated, summarized, distributed, discussed, and (last, but not least) used.

For more information on why you should conduct a needs assessment and how to carry out a needs assessment visit the Community Toolbox website Chapter 3, Section 7 at <http://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/conducting-needs-assessment-surveys/main>. You may also consult the North Carolina Training and Technical Assistance Center by emailing nctta@drugfreenc.org.

Youth Prevention Education Implementation Standards

HOW DO YOU IMPLEMENT THIS APPROACH?

Below you will find the *minimum* requirements that should be demonstrated when implementing any youth prevention education program. This includes those on the pre-approved list, and also those for which approval is requested.

Staff Preparation

- Each staff member delivering the program must have completed the Division of MH/DD/SAS approved Youth Prevention Education training.
- Each staff member assigned to the program completes the appropriate training for the curriculum being implemented. This may include formal training provided by the selected model program developer or a combination of preparation through mentoring and on-the-job training provided by a staff person with documented experience delivering the program.

Core Curriculum Implementation: Program Setting

- The core curriculum is implemented in a setting recommended by the program developer.

Core Curriculum Implementation: Age Appropriateness

- The core program is age appropriate for all core curriculum participants.
- The age of the program participants adheres to the program developer recommendations.

Core Curriculum Implementation: Number of Sessions Offered

- All required sessions of the core curriculum are offered.

Core Curriculum Implementation: Session Frequency

- Core curriculum sessions are offered no more than twice per week to the majority (80%) of the core program participants.

Core Curriculum Implementation: Session Length

- Core curriculum sessions are offered at the prescribed length to the majority (80%) of core program participants.
- Sessions cannot be less than 30 minutes long (regardless of program developer recommendations).

Booster Curriculum Implementation: Program Setting

- Booster curriculum is implemented in setting recommended by the program developer.

Booster Curriculum Implementation: Age Appropriateness

- Booster curriculum is age appropriate for all participants.
- The age of the booster program participants adheres to the recommendations of the program developer.

Booster Curriculum Implementation: Numbers of Sessions Offered

- All booster sessions are offered.

Booster Curriculum Implementation: Session Frequency

- Booster curriculum sessions are offered no more than twice per week for the majority (80%) of the core program participants.

All Core and Booster Curriculum Implementation: Fidelity

- Sessions are implemented with fidelity, as document by a fidelity checklist (see below).

All Core and Booster Curriculum Implementation: Adequate Program Dosage

- Demonstrate that at least 80% of program participants receive at least 80% of the required program session, as documented by a participant tracking log.

WHY IS FIDELITY TO THE PROGRAM MODEL IMPORTANT?

Fidelity is defined as the degree to which a program is implemented according to its design. Rigorous evaluation studies of model programs indicate that implementing the program according to the program design will produce predictable outcomes. Delivering the program exactly as it is intended shows a high degree of fidelity. Implementing programs with a high degree of fidelity allows you to demonstrate accountability and predict the effectiveness of the program.

Evidence-based curriculums are like recipes; to get the best results, you need to do the following:

- Deliver the program for the age and population for which it was designed.
- Deliver all required lessons of the program.
- Teach lessons sequentially.
- Use interactive teaching strategies included in the lessons.
- Teach lessons the entire length of the time.
- Use all materials corresponding with the lessons.

Once providers have chosen a model program that meets the needs of their school and community they must commit to delivering the curriculum consistently and accurately. They also must document this using a fidelity checklist. Ideally this will be a fidelity checklist provided by the program developer, however, a generic fidelity checklist can be used if one is not provided by the developer.

CAN I MAKE ADAPTATIONS TO THE PROGRAM?

Adaptations are modifications to the aspects of a program, including the content, delivery, method, and length of program sessions. Sometimes it is necessary to make changes to the program to fit the needs of the target population. Changes that make the program more relevant to the culture can help create a better fit with the community. Note that adaptations can also deteriorate a program's effectiveness and should be made with caution.

Striking a balance that addresses both the need for fidelity to the original model program and adaptation to the culture of the community is important consideration for prevention professionals.

Strategies to balance fidelity and adaptation include:

- Understanding the theory behind the program.
- Consider how the sessions are set up and sequenced.
- Assess fidelity and adaptation concerns relative to the culture of the community.
- Consult with the program developer.
- Consult with the school or organization where the program will be used.

More information on how to balance fidelity and adaptation is included in the "Foundations of Youth Prevention Education" training. You may also consult the North Carolina Prevention Technical Assistance System for assistance adapting programs to meet the cultural needs of your community by emailing Jessica Dicken at jkdicke2@uncg.edu.

Youth Prevention Education Standards of Effectiveness

WHAT ARE STANDARDS OF EFFECTIVENESS FOR SELECTING UNIVERSAL PROGRAMS?

To select a program that has not been pre-approved you must do the following.

1. Develop or obtain a written, planned curriculum that:
 - Meets an identified high need in your community.
 - Has been identified as effective in preventing or reducing alcohol, tobacco, or other drug use, and/or its risk and protective factors by The National Registry of Evidence-Based Programs and Practices, Blue Prints for Healthy Youth Development, or peer reviewed literature (page 9).
 - Focuses the majority of program session time on interactive activities that include such techniques as role-plays, discussion, and cooperative learning.

- Includes a minimum of eight sessions in the core level. All required booster sessions must be completed, if booster sessions are included in the program model.
 - Schedules each session for a minimum of 30 minutes in length.
 - Implements both core and booster sessions no more often than two times a week (i.e. cannot deliver the core or booster portion of program in a severely condensed format).
 - If needed at all, only requires adaptations to be culturally sensitive/relevant.
 - Does not include scare tactics designed to “shock” participants (e.g., mock crashes).
 - Does not include testimonials by former/recovering addicts.
2. Completed the Youth Prevention Education Program Request Form and submit it to DMH.Prevention@dhhs.nc.gov for approval.

WHAT ARE STANDARDS OF EFFECTIVENESS FOR SELECTIVE / INDICATED PROGRAMS?

Programs that specifically target youth because they share a common risk (e.g. academic delay, developmental delay, behavioral disorders, etc.) are called “selective” programs. They target youth with the risk factor regardless of whether they are showing signs of substance use or other problem behaviors. Indicated programs that target youth experiencing early signs of substance abuse or problem behaviors associated with substance abuse. In addition to following the standards stated above for universal programs, Youth Prevention Education programs that target a selective or indicated populations must adhere to the following additional standards.

1. Risk factors that define the participants must match those factors addressed by the program design. If booster sessions are included in the program model, all must be completed in the following years.
2. Assure that staff who facilitate the program receive training in how to effectively work with youth that share the common risk factor(s) of the targeted population. For example, if the students are selected into the program because they have a behavior disorder, staff training should include strategies for encouraging effective learning in students with behavior disorders.
3. Demonstrate a plan for parent/guardian involvement that includes:
 - A minimum of one interactive communication (e.g. phone call, face-to-face conversation, email dialogue) with at least one parent/guardian of each child in the program to discuss the child’s strengths, challenges and progress.
 - At least two opportunities for parent/guardian to receive information, provide input into the program, and have their questions addressed (e.g., parent night, e-mail/mail/phone calls, newsletters).
 - A description of how the cultural styles of families have been acknowledged so that information and outreach is culturally sensitive and appropriate (e.g., information is available in the parent/guardians first language).

WHAT REFERENCE MATERIALS ARE AVAILABLE?

The National Registry of Evidence-Based Programs and Practices (NREPP) (<http://www.nrepp.samhsa.gov>) and Blue Prints for Healthy Youth Development (<http://www.blueprintsprograms.com/>) are rating and classification systems designed to provide reliable information on the scientific bases and practicality of interventions that prevent substance use. Descriptive information and quantitative ratings are provided across several key areas for all interventions reviewed by both NREPP and Blue Prints. NREPP and Blue Prints both publish intervention summaries for every intervention which includes:

- General information about the intervention
- A description of the research outcomes reviewed
- A list of studies and materials reviewed
- Contact information to obtain more information about the program

NREPP and Blue Prints differ in terms of which programs are included in the registry. NREPP rates a large number of programs and provides outcome ratings for each. Inclusion on the list is not assurance that a program is evidence-based. You must review individual program outcomes to determine if a program will meet the needs identified in your needs assessment. By contrast Blue Prints only includes programs that have meet standards for either being a model or promising program. Inclusion on the list is assurance that a program is evidence-based.

NREPP and Blue Prints can be a first step to promoting ***informed decision making*** and can help you begin to determine whether a particular Youth Prevention Education program will meet the needs of your school and community. You may also consult the North Carolina Prevention Technical Assistance System for guidance in identifying evidence-based prevention programs that meet your local needs by emailing Jessica Dicken at jkdicke2@uncg.edu.

The Importance of School and Community Collaboration

Collaboration is *a process of participation through which people, groups, and organizations work together to achieve desired results*. Collaborations accomplish shared vision, achieve positive outcomes for the audiences they serve, and build an interdependent system to address issues and opportunities. Collaborations also involve the sharing of resources and responsibilities to jointly plan, implement, and evaluate programs to achieve common goals.

Collaboration is vital to the success of your Youth Prevention Education program. Collaboration is essential because ideally you will need various levels of support to ensure a successful program. However, the key question is, “How does a Youth Prevention Education program collaborate effectively to ensure their message of prevention is supported and impactful?”

Listed below are some suggestions to help providers build strong and meaningful collaborations with the community and school.

- Invest fully in the time and effort it takes to negotiate a strong linkage agreement. A linkage agreement is a necessary component of successful collaboration and should be reviewed each year, renegotiated and updated when needed, and shared and revisited when new provider

staff, new school staff, or school administrators are hired. A linkage agreement allows for both the provider and the school to share expectations, define roles, and outline responsibilities. A linkage agreement should also provide:

- o Dates of services
 - o Name of the curriculum being implemented
 - o Resources needed
 - o A plan to make up missed sessions
 - o A commitment by both parties to adhere to best practices and substance abuse prevention program standards
- It is important that both the provider representative (typically a manager) and the school representative (typically the principal or superintendent) sign the linkage agreement and each retains a signed copy. Lastly, ensure all collaborators who have roles and responsibilities in the linkage agreement are given a copy of the linkage agreement so they are aware of the information contained within the linkage agreement and their respective roles and responsibilities.
 - Everything done in relation to our Youth Prevention Education program involves effective collaboration. Effective collaboration includes staying in contact with our collaborators, completing all assigned tasks, and conducting ourselves in a professional manner at all times.
 - When working with a school to collaborate, look at finding stakeholders in your Youth Prevention Education program beyond just the classroom teacher. While it is vital to have the support of the classroom teacher, you should also work to include the building principal, school nurse, school counselors and anyone else focused on achieving positive outcomes for young people.
 - Make the most of the time you set aside for meetings. Take the time to learn effective meeting facilitation skills and remember people are impressed more by actions than talk.
 - While meetings and check-ins are important, look for opportunities to provide substance abuse prevention education opportunities for the staff at the schools you are working with. Work with the principal to be included in a teacher/staff institute day or school improvement day for a few minutes to present information about your Youth Prevention Education program to the staff. This is also a great opportunity for you to get to know more of the staff at the school and for the school staff to know who you are, what you are teaching students during your time in the classroom, and your investment in their school and students.
 - When you have materials to send home with students look for opportunities to include both your signature and the signature from a representative of the school. This sends an endorsement from the school for prevention programming.
 - Aim to establish stable and sustainable working relationships with **all** collaborators within the school. While you want to nurture and develop the professional relationships you have with the classroom teacher and/or school administrator, personal connections are vulnerable to the mobility that characterizes school staff and administration. If you focus only on the classroom teacher or the principal and they leave the school, you may have to rebuild relationships to ensure the continued delivery of your Youth Prevention Education program.