



DEPARTMENT OF COMMUNITY, FAMILY, AND ADDICTION SCIENCES

# **PREVENTION: WHAT WORKS & WHAT DOESN'T**

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# Introduction and Overview

- Evidence-based Programs
- Innovation and Principles of Effectiveness
- Effective Strategies for Children/Adolescents/Families
- Counterproductive Strategies
- Tools we can use!



- Doing the work:
- Program identification/creation
  - Handout: Exercise Box



# Evidence-based Program Registries

- Many nationally recognized agencies host **searchable registries** of evidence-based programs online.
- Goal is to connect communities and agencies with the **programs most suitable for their specific needs:**
- <https://www.blueprintsprograms.org/>
- Challenge is...



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# Innovation and Principles of Effectiveness

- The **good news**—
- guides to help parents, educators, and community leaders:
  - **think about,**
  - **plan for,**
  - **deliver**
- research-based drug misuse prevention strategies, **even when WE cannot implement established evidence-based programs.**



# Effective Prevention: Children

- focus on **strategies and activities** that build social competence, self-regulation and academic skills. **Focus on developing these skills:**
  - self-control;
  - emotional awareness;
  - communication;
  - social problem-solving;
  - academic support, especially in reading





# Effective Prevention: Adolescents

Innovative **programs for middle and high school** students could focus on increasing academic and social competence by teaching the following skills:

- study habits and academic support;
- communication;
- peer relationships;
- self-efficacy and assertiveness;
- **drug refusal skills;**
- reinforcing anti-drug attitudes;
- **strengthening personal commitment against drug misuse.**





# Effective Prevention: Families

- **Enhance family bonding and positive relationships.** Focus on developing these skills:
- use of **effective parenting skills** – supportiveness, communication, involvement, monitoring and supervision;
- practice **developing, discussing and enforcing family policies on substance misuse**;
- **drug education and information for parents** to enhance opportunities for family discussion.







# Effective Prevention: within Programs

- Building Social and Personal Skills
  - may include information about the negative effects of substance use
  - effective programs **mindful to not cross the line by using fear arousal techniques**
- Cite Immediate Consequences
  - **Youth tend to be more concerned about social acceptance and the immediate rather than the long-term effects** of particular behaviors or choices.
  - Citing consequences such as stained teeth and bad breath
  - --- **shown by research to have more impact than**
  - distant threats of car crashes, lung cancer or death.



# Effective Prevention: within Programs

- Communicate Positive Peer Norms
  - Events and activities that **communicate peer norms**
  - **against the use of alcohol and other drugs**
  - --- act as community statements in support of no-use standards
- Involve Youth with Peer-led Components
  - **Drug units/activities that are peer-led**, or that include peer-led components,
  - more effective than adult-led
- Use Interactive Approaches
  - **opportunities to practice newly acquired skills**
  - through the use of interactive approaches.
  - cooperative learning/behavioral rehearsal/group exercises give students opportunities to practice newly acquired skills
  - **help to meaningfully engage them in prevention education programs**



# Basic Prevention Principles: Distillation of What Works

- What experience tells us.

- Handout: Remember





# Effective Prevention: Summary of What Works

- **Our time and scarce resources are best used to teach:**
- positive, healthy behavior,
- rather than trying to stop dangerous behavior through manipulation or strategies that contradict research.



# Effective Prevention: Summary of What Works

- **As a rule of thumb:**
  - focus on **healthy alternatives** to use;
  - **enhance connections** to, and bonding with, prosocial adults, peers and organizations;
  - use **structured interactive approaches** that include skill practice;
  - focus on **normative education** that portrays true use rates and corrects misperceptions.



# Pain Model of Addiction and Recovery

## THE PROCESS MODEL





# Disease argument (Kevin McCauley)

## Diabetes

Organ = Pancreas

+

Defect = Insulin Prod.

+

Symptoms = High Glucose Levels

## Addiction

Organ = **Brain (Mid-brain)**

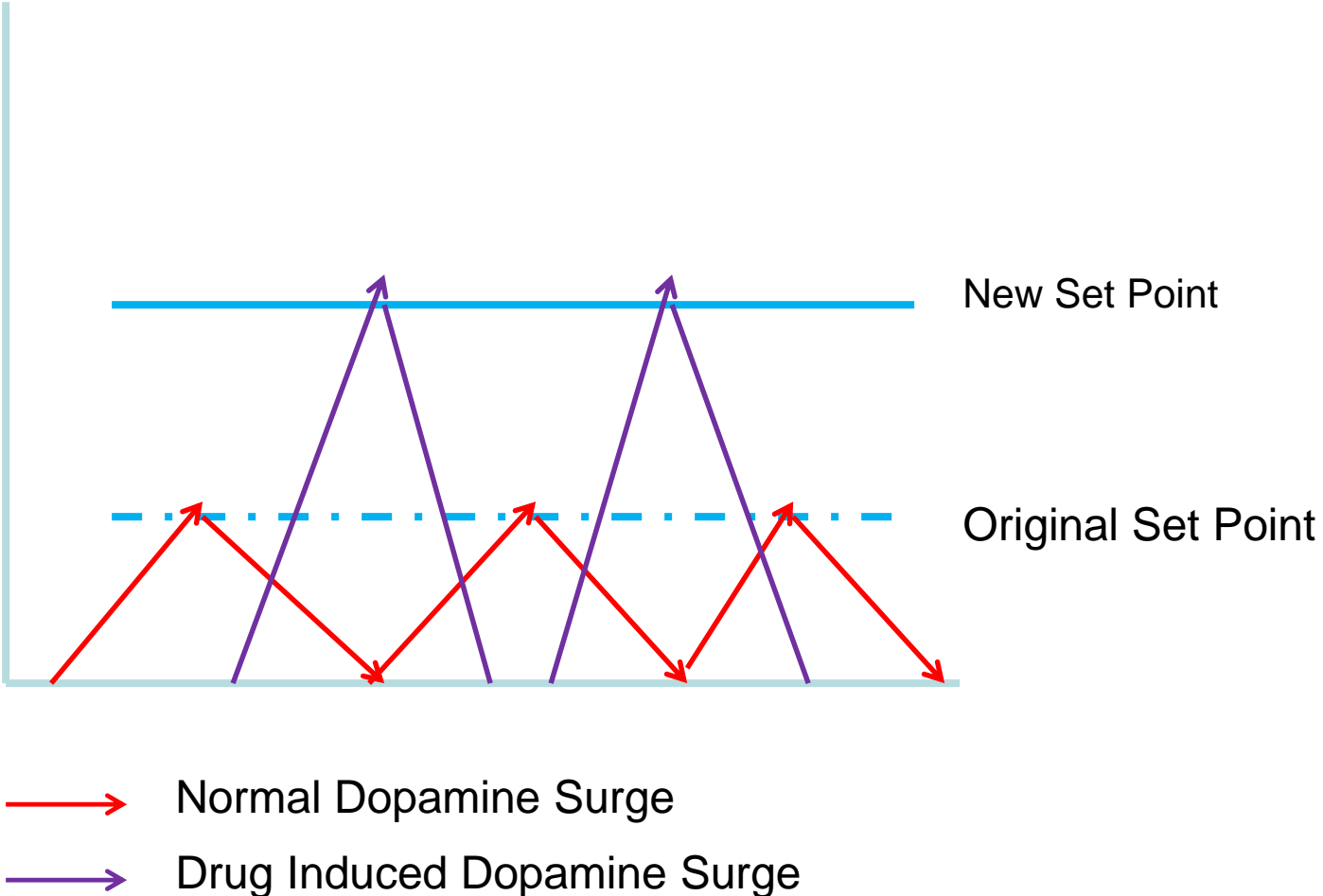
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Defect = **Physical & Cellular (+ or -)**  
**Hedonic Defect**

+

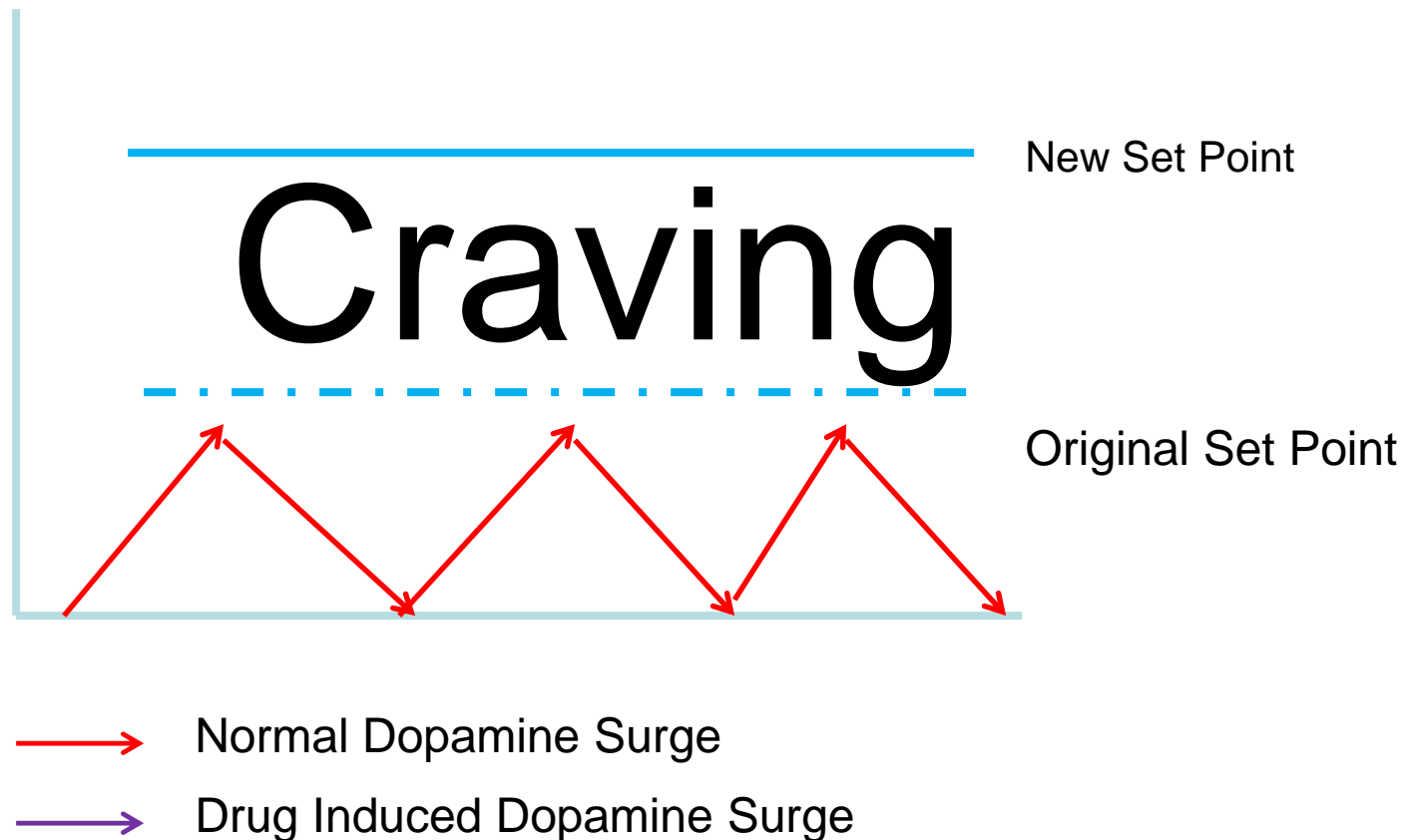
Symptoms = **Craving/Obsession**

# The Stress of Dopamine Surges (KM)





# CRAVING that results from ALLOstasis (KM)





## Educating on the bio/psycho/social

- Before you make a choice ask yourself.
  - Am I...
  - Hungry?
  - Angry?
  - Lonely?
  - Tired?
- These negative feeling impact our decision making. Take care of yourself before you make a choice.



# What DOESN'T WORK

- Fear Arousal – Scary Images and Scare Tactics
- **One-time Assemblies and Events**
- Personal Testimony from People in Recovery
- **Mock Car Crashes**
- Reinforcing Exaggerated Social Norms
- **The Illusion of Truth Effect: Myth Busting**



# What DOESN'T WORK

- Drug Fact Sheets and Knowledge-based Interventions
- **Role Play that Conditions Youth to be Drug Users or Dealers**
- Moralistic Appeals
- **Grouping At-Risk Youth Together**



# What our youth who use need...

- problem recognition
- self-efficacy (agency)
- peer support;
- alternative activities
- life skills
- purpose in life



# Remember...

- ... **relationships** are the key to creating sustainable change in your community,
  - so be gentle;
- move forward knowing that **we don't want to work against our goals** by supporting practices that reinforce trauma or the risk factors contributing to substance use.



# Conclusion





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