

Grant Results Topic Summary: **The Behavioral Approach to Preventing Substance Abuse**

by C. Suzanne Cole, M.A., M.S.

Between 1989 and 2006 the Robert Wood Johnson Foundation (RWJF) invested more than \$400 million in efforts to prevent substance abuse (including underage drinking). That work explored two basic approaches—behavioral, which focuses on individuals' behavior—and **environmental**, which focuses on communities and attempts to change the environment that supports substance abuse.

This report describes the results, findings and lessons learned from RWJF-supported programs and projects that used behavioral approaches to preventing substance abuse, especially by youth.

Route 1 and College Road East
P.O. Box 2316
Princeton, NJ 08543-2316
www.rwjf.org



Robert Wood Johnson Foundation

Table of Contents

- 3 Introduction**
- 4 Out-of-School-Time Prevention**
 - 4 Highlights
 - 5 Lessons Learned
- 6 School-Based Prevention**
 - 6 Highlights
 - 7 Lessons Learned
- 9 Using Media to Change Individual Behavior**
 - 9 Highlights
 - 9 Lessons Learned

Introduction

See also the **Topic Summary: The Environmental Approach to Preventing Substance Abuse.**

Nearly half of American high school students have tried an illicit drug by the time they graduate.¹ Drug and alcohol abuse costs the United States an estimated \$346 billion each year.²

Given recent scientific knowledge about the biological and neurological causes of addiction, the Robert Wood Johnson Foundation (RWJF) considers addiction to be a chronic health condition. As such, it should be treated like other chronic conditions with proven and accessible prevention and treatment methods.

Since 2001 RWJF's work related to substance abuse has focused on improving substance abuse treatment and expanding access to treatment.

Although in 2007 RWJF supports a number of programs to improve the quality of addiction treatment, Foundation program staff does not envision making new investments in the specific area of quality of addiction treatment once these programs are completed.

Substance abuse prevention usually follows one of two basic approaches—*behavioral*, which focuses on individuals' behavior, or **environmental**, which focuses on communities and attempts to change the environment that supports substance abuse.

This report describes the results, findings and lessons learned from RWJF-supported efforts that used behavioral approaches to preventing substance abuse, especially by youth.

Behavioral interventions include:

- Educating youth about the dangers of drugs, alcohol and other mind-altering substances.
- Providing safe, structured alternative activities such as sports or the arts.
- Connecting at-risk youth with an adult or peer mentor.
- Teaching youth self-confidence strategies and other social tools to help them make healthy choices.

This report covers all these interventions organized into three sections:

- Out-of-School-Time Prevention
- School-Based Prevention
- Using Media to Change Individual Behavior

1 National Institute on Drug Abuse, U.S. Department of Health and Human Services. *Monitoring the Future Survey, Overview of Key Findings: 2006*. Available at www.monitoringthefuture.org/pubs/monographs/overview2006.pdf.

2 National Institute on Drug Abuse, U.S. Department of Health and Human Services. *Drug Abuse and Addiction: One of America's Most Challenging Public Health Problems*. Available at www.nida.nih.gov/about/welcome/aboutdrugabuse/index.html.

Out-of-School-Time Prevention

OTHER RWJF-SUPPORTED OUT-OF-SCHOOL-TIME SUBSTANCE ABUSE PREVENTION EFFORTS

- Two after-school projects and a Native American youth development project. (See Grant Results on [ID# 038033](#) and [ID# 046405](#) and the National Youth Leadership Project [Web site](#) on ID# 053601.)
- A summer camp. (See Grant Results on [ID# 041757](#).)
- Three mentoring efforts. (See Grant Results on [ID# 021292](#), [ID# 038663](#) and [ID# 038971](#).)

At-risk youth need structured activities to fill the hours outside of school (weekday afternoons and evenings, weekends, vacations, etc.). Out-of-school-time projects, including mentoring and other youth development efforts, give kids strategies for making healthy choices, provide fun activities that distract kids from unhealthy behaviors and focus on the positive aspects of kids' development.

RWJF-supported research found that youth development projects hold promise for reducing risky behavior, including substance abuse. (See Grant Results on [ID# 035504](#).)

HIGHLIGHTS

The After School Project. A \$16.9-million national program that ran from 1998 to 2006, *The After School Project* provided funding and technical assistance to intermediary organizations in three cities (Boston, Chicago and Oakland, Calif.) that committed to following an organizational development model that included building programming capacity; developing a parent, youth and community advisory board; and strategic planning.

An evaluation found that intermediaries providing centralized planning for dispersed youth development projects could link community organizations, funding streams, facilities and players (schools, government agencies, service providers, parents) into a well-functioning delivery system that provided quality services to a substantial number of their cities' most vulnerable children.

The evaluation also found that many components of *The After School Project's* planning model are helpful to the success of urban after-school programs. (See the program's [Web site](#), which is no longer being updated.)

Healthy Nations: Reducing Substance Abuse Among Native Americans®. *Healthy Nations* was a \$13.5-million program to help Native American communities develop local solutions to substance abuse problems. (See Grant Results on [Healthy Nations](#).)

Each community's approach varied. Some developed out-of-school-time prevention programs, including:

- **Camp.** A "moving," substance-free camp in South Dakota introduced youth to their Lakota culture. Youth traveled on horseback from campsite to campsite and stayed in traditional teepees.
- **Youth Council.** In North Carolina, the Eastern Band of Cherokee re-invigorated a dormant youth tribal council. The youth received mentoring from the adult tribal council, which sets policy for the tribe. Youth held monthly meetings, organized reservation-wide activities and presented resolutions to the tribal council.

Best Friends. Between 1990 and 2003 more than 4,000 teenage girls participated in the Best Friends program that conveyed messages about abstinence from sex, drugs and alcohol, and taught girls how to make good decisions. Girls in the program participated in dance and music programs, developed leadership skills and met once a week with adult mentors.

An evaluator found that participants in the Best Friends program were less likely than a comparison group to have ever smoked, consumed alcohol, used drugs or had sex. (See Grant Results on [ID# 029684](#) for details on the development and replication of the program and Grant Results on [ID# 033000](#) for specifics on the program in Newark, N.J.)

Drug-Free Sports Leagues. A national effort to train coaches and establish drug-free sports leagues reached more than 300,000 coaches and more than 3.5 million kids. The league raised coaches' awareness of substance abuse problems. Five leagues formed, drawing 19,000 youths. (See Grant Results on [ID# 021206](#).)

Fencing. The Peter Westbrook Foundation uses the sport of fencing as a vehicle to develop life skills in young people from underserved communities. In 1999 staff of the fencing program in New York City enhanced the program with support from RWJF. In that year 98 percent of the participants went on to college. (See Grant Results on [ID# 035986](#).)

LESSONS LEARNED

- **Be creative!** Keep kids engaged and meet their varied needs at their different developmental stages with diverse and creative programming. (See Grant Results on [ID# 021292](#) and [ID# 035504](#).)
- **Mentoring helps.** Youth who had a mentor indicated that they enjoyed spending time with their mentors and found them supportive. (See Grant Results on [ID# 021292](#) and [ID# 035504](#).)
- **Think holistically.** Try to incorporate as many components of an adolescent's world as possible in a youth development program. Without paying attention to peer and social interactions, it is unlikely that there will be any behavior change. (See Grant Results on [ID# 029684](#).)
- **Start early, and invest for the long run.** Programs that reach kids early and provide continuity throughout high school are more successful. (See Grant Results on [ID# 035504](#).)
- **Sports are good, but they are not enough.** Participation in athletics does not protect youth from using alcohol and drugs. (See Grant Results on [ID# 042783](#).)
- **Invest in staff development.** Programs designed to educate youth about sensitive subjects require extensive training for adult leaders. Select adults who will be comfortable discussing substance abuse and related sensitive subjects, and be sure to give them adequate training. Studies by Jeanne Brooks-Gunn, Ph.D., of Columbia University, show that staff's commitment, caring and personal contact with youth are associated with program success. (See Grant Results on [ID# 035504](#) with additional evidence in Grant Results on [ID# 021206](#).)
- **Include the whole community.** Programs that aim to raise the standards of youth programs must also educate local communities about those efforts. Parents and others in the local communities need to be brought on board. (See Grant Results on [ID# 021206](#).)
- **Strike a balance between local solutions and national standards.** It's critical to find the right balance between solutions that are totally local, and those that should be non-negotiable on a national scale. The most effective intermediaries are embedded in the social fabric of the local community and capable of understanding its history, priorities, needs and ideas, and are attuned to opportunities. Support for such organizations goes a long way toward ensuring that a community is getting what it really wants and needs. (For an examination of cities with successful out-of-school-time intermediaries, see the After School Project's publication, *After-School Grows Up, How Four Large American Cities Approach Scale and Quality in After-School Programs*, www.theafterschoolproject.org/RepoProg-list0.html.)

School-Based Prevention

OTHER SCHOOL-BASED PREVENTION EFFORTS

- > Two pilot projects. (See Grant Results on [ID# 038725](#) and [ID# 021517](#).)
- > A meta-analysis of research studies. (See Grant Results on [ID# 034433](#).)
- > A study of the effect of federal “No Child Left Behind” legislation on school-based substance-abuse prevention efforts (ID# 049921).

School-based substance-abuse prevention efforts educate kids about the dangers of drugs and alcohol and teach kids how to make healthy choices. RWJF has supported research to determine which school-based substance-abuse prevention programs are most effective, as well as pilot projects that tested a variety of models.

HIGHLIGHTS

D.A.R.E. Drug Abuse Resistance Education is the nation’s most popular school-based substance-abuse prevention program. D.A.R.E. operates in 80 percent of U.S. school districts, reaching more than 25 million kids. Police officers teach children of all ages how to resist peer pressure and live productive drug- and violence-free lives. The original D.A.R.E. curriculum was not effective. RWJF funded the revision of the curriculum and an evaluation of it that found that kids in the program decide against using drugs at higher rates than kids in schools that do not use the revised curriculum. (See news release on [D.A.R.E. evaluation](#).)

Healthy Nations. In *Healthy Nations*, the \$13.5-million program to help Native American communities develop local solutions to substance abuse problems, some communities developed school-based prevention programs. (See Grant Results on [Healthy Nations](#).)

Programs included:

- **Partnering with public schools.** Since children learn much about culture in their schools, the United Indian Health Services project in Trinidad, Calif., trained teachers in local schools about Native American culture and issues. Healthy Nations staff and student Native American clubs collaborated to build a traditional village at a public school. The project established on-site counseling for Native American students that referred those at risk for substance abuse to early intervention programs. An evaluation of this project showed mixed results: high school graduation rates were up, while disciplinary referrals also increased.

- **School-based health promotion.** The Cherokee Nation instituted a school-based health promotion curriculum for fourth-graders that taught them how to make healthy choices and provided time to walk or run with *Healthy Nations* staff each week. Project staff taught the class to 1,000 students in 25 schools. (See Grant Results on [ID# 028250](#).)

Caring Schools Community™ Program. Findings from the National Longitudinal Study of Adolescent Health indicate: “Attachment to school and family serve as protective factors against drugs, alcohol use, and violence. The most powerful predictor of adolescent well-being is a feeling of connection to school.”³ The Caring Schools Community program helps schools create a feeling of connection for students that prevents adolescent substance abuse and other unhealthy behaviors.

Between 1991 and 1998 RWJF funded a pilot of the program, then known as the Child Development Project, in 12 elementary schools in Oakland, Calif. Participating schools involved students in setting classroom norms; clustered classes into small groups for academic studies; explored life problems relevant to students’ experiences; built schoolwide loyalties by linking older and younger students; and increased parent participation in school activities.

Fifth- and sixth-graders in schools that effectively implemented the model showed a higher sense of community and lower delinquency and alcohol and marijuana use, relative to students in comparison schools in the same districts. The pilot suggested that when students experience their schools as communities where they feel like valued, contributing members, their resiliency may be enhanced. (For more information on the pilot, see Grant Results on [ID# 027098](#).)

Between 2000 and 2005 RWJF funded an expansion of the program, by then renamed the Caring Schools Community program. The four key components were (1) class meetings to help teachers and students to get to know one another and make

³ Resnick MD, Beaman PS, Blum RW, et al. “Protecting Adolescents From Harm.” *Journal of the American Medical Association*, 278(10):823–832, 1997.

OTHER BEHAVIORAL SUBSTANCE ABUSE PREVENTION PROJECTS

- > A workplace prevention project targeted parents. (See Grant Results on [ID# 018789](#).)
- > Three projects helped kids explore how to make healthy, drug-free choices. One project developed a Web site, one developed a video game and a third held a conference. (See Grant Results on [ID# 031397](#), [ID# 033995](#) and [ID# 037770](#).)

decisions affecting the classroom environment; (2) a buddies program pairing older and younger students for academic and recreational activities; (3) short activities that students do at home with a parent then discuss back in their classroom; and (4) schoolwide, innovative, inclusive activities that link students, parents and school staff.

Under the expansion, nearly 400 schools with an estimated 200,000 students implemented Caring Schools Community. An evaluation in the St. Louis area found that schools that implemented the program showed a substantial increase in a sense of classroom as community compared with schools that did not. Evaluators also found a 19 percent drop in discipline referrals in the implementation schools between 2005 and 2006. In the non-implementation group, there was a 12 percent increase in student discipline referrals. (See Grant Results on [ID# 052119](#).)

The program has been designated a “model” drug-abuse prevention program by the Center for Substance Abuse Prevention; a “promising” violence-prevention program by the U.S. Safe and Drug-Free Schools Program; and a “select,” evidence-based, social and emotional learning program by the Collaborative for Academic, Social, and Emotional Learning. For more information, see the Caring Schools Community [Web site](#).

LESSONS LEARNED

- **Focus on what works.** CDP found the following four components were relatively easy and cheap to implement, and appeared to help with success:
 - School-wide activities.
 - Family-involvement activities with the school.
 - Pairing older elementary-school children with younger children.
 - Engaging students in planning classroom activities. (See Grant Results on [ID# 027098](#).)

- **Integrate prevention efforts with academic curricula,** stressing that prevention programs contribute to academic success. (See Grant Results on [ID# 039287](#).)
- **School change takes time.** Changes to teaching activities and school culture involve a demanding, complex process that requires years to implement effectively. It is difficult for most teachers to keep in mind the whole of a systematic pedagogic change. Thus, it may be necessary to review the overall theoretical framework frequently with teachers and administrators. (See Grant Results on [ID# 027098](#).)
- **Complex changes to schools may need to be staged.** Focus first on community-building aspects, and only later on collaborative learning, reading/language arts and classroom management approaches. (See Grant Results on [ID# 027098](#).)
- **Get buy-in from administrators.** School principals and other administrators play a key role in school change. (See Grant Results on [ID# 027098](#) and [ID# 029864](#).)
- **Get broad support.** Building broad-based support among district leaders as well as a substantial corps of teacher leaders likely to remain over time may address the problem of frequent staffing changes at the district level. Coordinate school-based and community prevention efforts. (See Grant Results on [ID# 027098](#) and [ID# 039287](#).)
- **Support teachers.** Working with districts to develop systems that support teacher leadership without increasing overall demands on teachers’ time might help to address the problem of general teacher burnout, which is a serious impediment to teachers’ assuming additional leadership responsibilities for systematic change. (See Grant Results on [ID# 027098](#).)
- **Social change efforts are difficult to implement in a climate of increasing pressure to raise academic standards.** As more schools focus on raising standardized test scores, there is less time and energy to focus on students’ social development. Communicating program

philosophy and goals to the public, to school boards, and to parents may help. (See Grant Results on [ID# 027098](#).)

- **Class and school size can have a large impact on any change effort.** It is difficult and exhausting for teachers to try to create a personal, nurturing environment with large classes, particularly if the children are not well socialized to school norms, mistrust authority or are from cultures unfamiliar to their teachers. (See Grant Results on [ID# 027098](#).)

Using Media to Change Individual Behavior

OTHER MEDIA CAMPAIGNS AIMED TO:

- > Target parents of college students. (See Grant Results on [ID# 036929](#).)
- > Educate children and parents about the dangers of inhalant abuse. (See Grant Results on [ID# 028635](#) and [ID# 021941](#).)
- > Reduce drinking and driving among teens. (See Grant Results on [ID# 032694](#).)
- > Promote youth development efforts. (See Grant Results on [ID# 038126](#).)

Research shows that social marketing and other media tools can effectively convince individuals to change their behavior.⁴

HIGHLIGHTS

Partnership for a Drug-Free America. Beginning in 1989 and continuing as of this report, with a total of \$13.5 million in seed and ongoing funding from RWJF, the Partnership for a Drug-Free America (PDFA) has been running a major national advertising campaign to change attitudes about illegal drugs and prevent further use and abuse of drugs.

The advertising campaign, begun in 1988, was built on the premise that “de-normalizing” the image of drug use—making it less glamorous and less acceptable—would help reverse public attitudes toward illicit drugs and ultimately result in decreased demand. In 1989 PDFA estimated that 90 percent of Americans were exposed to at least one of its anti-drug messages per day. (See Grant Results on [ID# 022753](#) for a description of activities from 1989 to 1997.)

MADD Targets Parents. Another national advertising campaign, sponsored by Mothers Against Drunk Driving (MADD), aimed to convince parents to talk to their kids about the dangers of alcohol.

In one television ad, a teenage boy arrives to pick up his date, telling the father, “We’ll probably have a couple of beers and... there’s a good chance I’ll date rape your daughter.” The ad continues, “Almost half of all teen rapes involve alcohol....Face the brutal truth about underage drinking.” (See Grant Results on [ID# 036616](#).)

LESSONS LEARNED

- **Use media to focus attention on social issues.** The media can be redirected to focus on a social issue. Media communications can play a cost-effective role in the national prevention of substance abuse. (See Grant Results on [ID# 022753](#).)
- **The personal touch helps.** Personal visits to national and local media representatives are the most effective methods of sustaining high levels of interest in a social cause. (See Grant Results on [ID# 022753](#).)
- **Use stimulating and dramatic messages to reach high-risk drug users.** High sensation-seekers, a widely recognized risk group for drug use, are likely to use a variety of substances and require much more novel, stimulating and dramatic media messages to attract their attention and persuade them not to use drugs. (See Grant Results on [ID# 042783](#).)

⁴ For a review of literature on the effectiveness of social marketing, see Gordon R, et al. “The Effectiveness of Social Marketing Interventions for Health Improvement: What’s the Evidence?” *Public Health*, 120(12):1133–1139, 2006.