

Lobby

What's your interest in substance misuse prevention among young adults (aged 18 – 25 years)?

- I design prevention programs for young adults.
- I implement prevention programs for/with young adults.
- I deliver direct prevention services to or treat young adults.
- I teach young adults.
- I fund programs for young adults.
- I conduct research that relates to young adults.
- I am the parent of a young adult.
- I am a young adult.
- Note of the above.



Pacific Southwest (HHS Region 9)

PTTC

Prevention Technology Transfer Center Network

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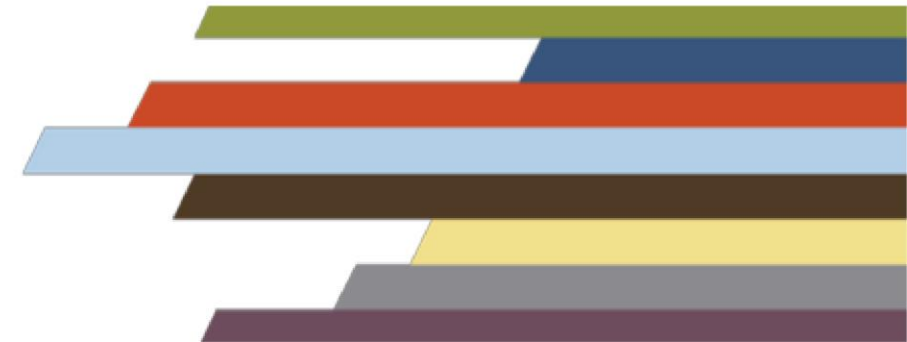


Selecting and Implementing Evidence-Based Practices to Address Substance Misuse Among Young Adults

Kim Dash, PhD, MPH

Senior Research Scientist, EDC

April 15, 2020



Disclaimer

The views expressed in this webinar do not necessarily represent the views, policies, and positions of the Substance Abuse and Mental Health Services Administration or the U.S. Department of Health and Human Services.

This webinar is being recorded and archived, and will be available for viewing after the webinar. Please contact the webinar facilitator if you have any concerns or questions.

Purpose of the PTTC

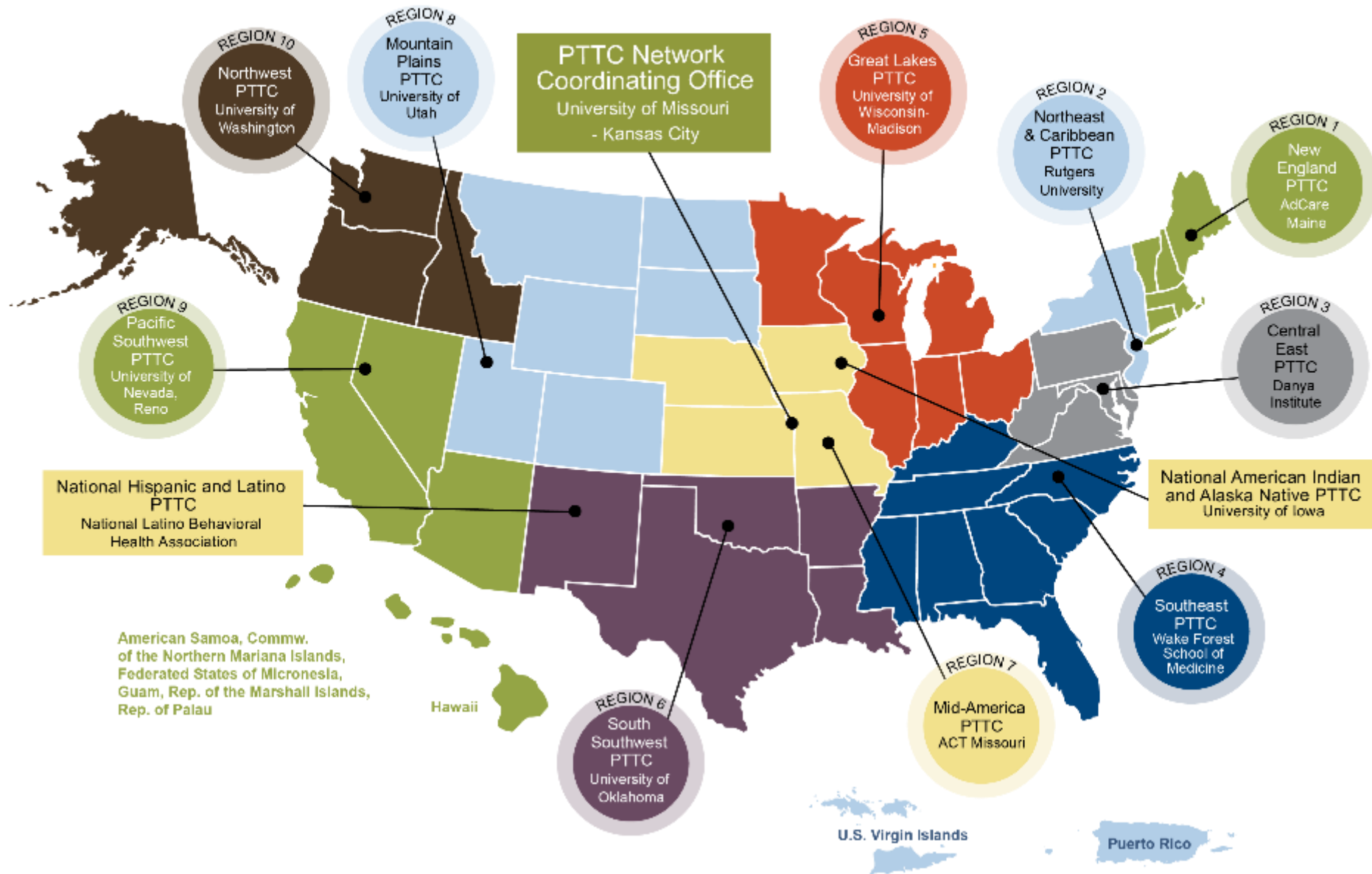
- Develop and disseminate tools and strategies needed to improve the quality of substance abuse prevention efforts
- Provide training and learning resources to prevention professionals
- Develop tools and resources to engage the next generation of prevention professionals



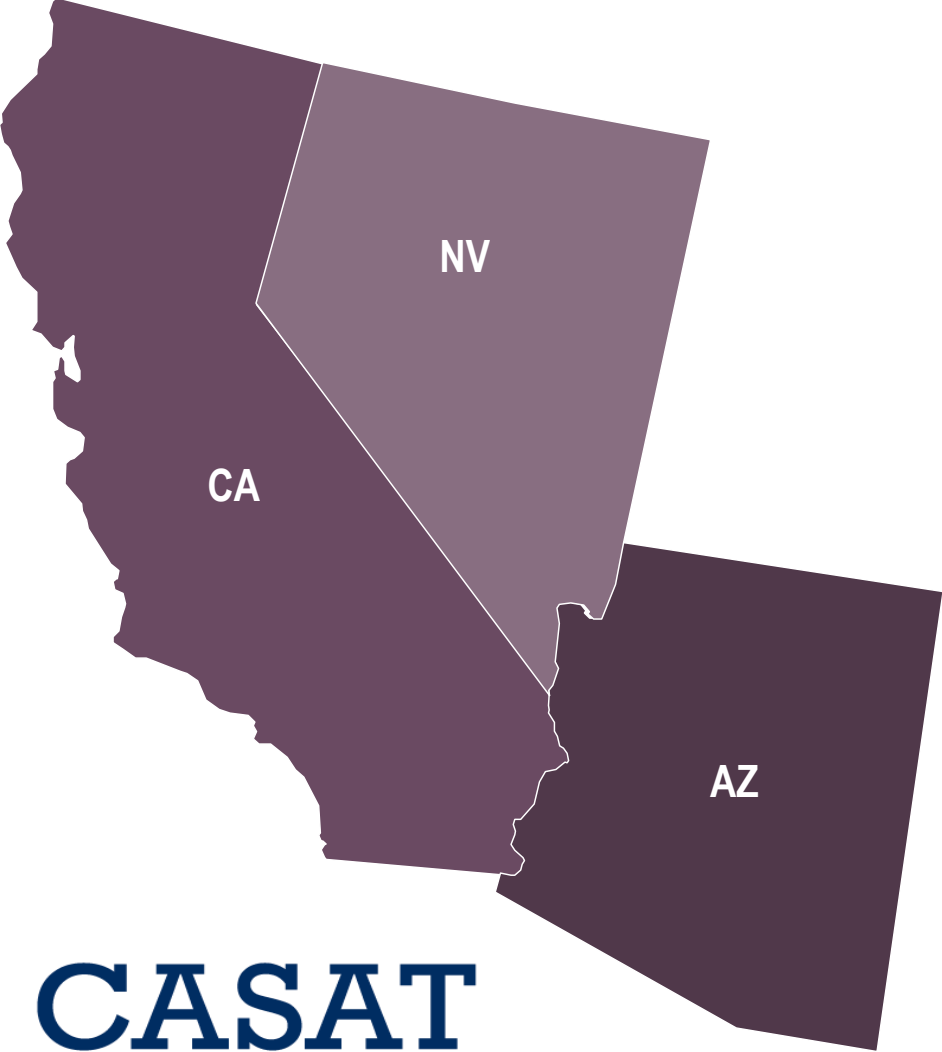
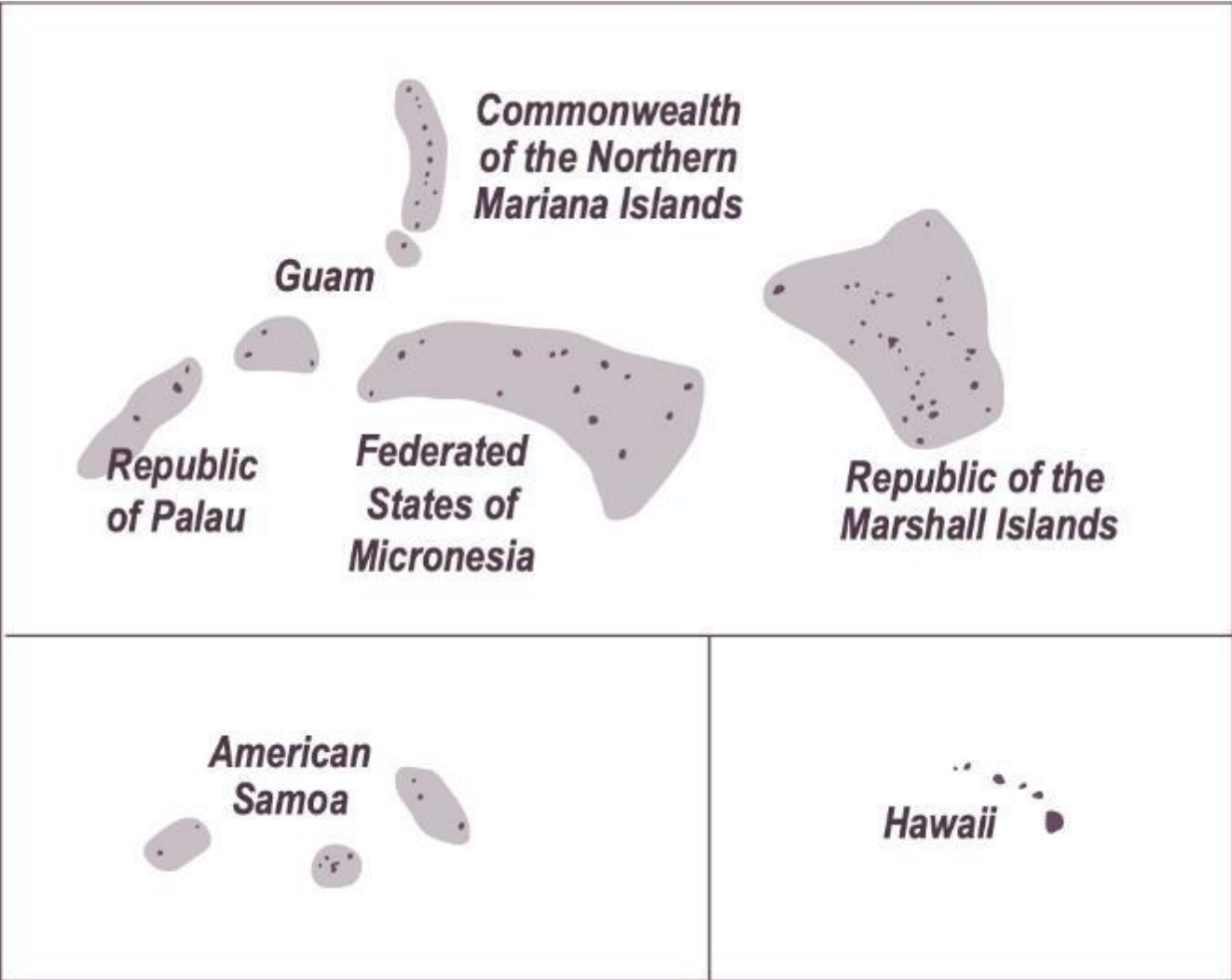
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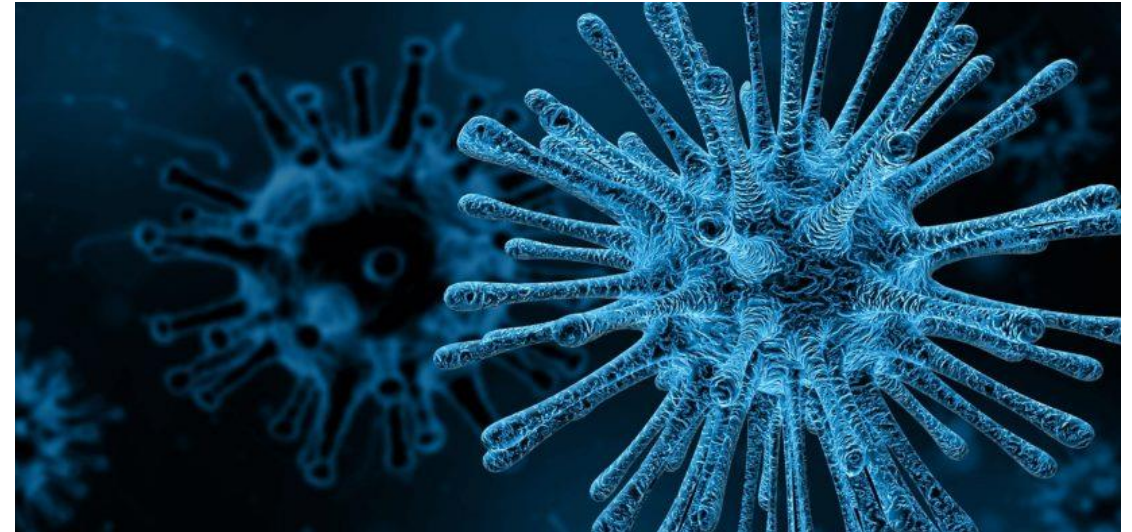
Mark Your Calendars!

COVID-19 Listening Sessions:

- April 15th 4:00 PM PACIFIC
- April 21st – 12:00 PM PACIFIC
- April 22nd – 4:00 PM PACIFIC

Register:

[Here](#)



Mark Your Calendars!

PS Southwest PTTC and MHTTC Webinar!

Navigating risk of suicide in the context of substance misuse: Best practices for supporting youth and young adults

May 14th, 2020

3:00 – 4:30 PM PACIFIC



Presenter



Kim Dash, PhD, MPH, is Senior Research Scientist with the Education Development Center (EDC). Dr. Dash develops, evaluates, and promotes the use of evidence-informed public health interventions. A thought leader in behavioral and social health and published author, she possesses expertise in prevention and implementation sciences and program and policy evaluation. Dr. Dash has led over 15 projects addressing mental health, substance misuse, violence, and trauma. She leads the evaluation of a citywide initiative that fosters community resilience to address stress and trauma and is creating a tool to help colleges reduce drug misuse.

Objectives

- Outline most recent data related to young adults and substance use
- Describe guidebook contents and how we got there
- Discuss evidence based practices that will make a difference for young adults



Evidence-Based Guidebook Series

*A Project of the National Mental Health and
Substance Use Policy Lab*



Guidebook Impetus

National Mental Health and Substance Use Policy Lab Guidebook Project

Response to the 21st Century Cures Act to disseminate evidence-based practices and service delivery models to prevent substance misuse and to help individuals with substance use disorders (SUD), serious mental illnesses (SMI), and serious emotional disturbances (SED) get the treatment and support that they need.

- ***Evidence is available*** on the types of services, treatment and supports that prevent and reduce substance use, lessen mental health symptoms and improve individuals' quality of life.
- ***Make the evidence accessible*** to service providers and systems of care.
- ***Provide practical guidance*** from experts to help communities adopt evidence-based practices and programs.

EBP Guidebook Series

1. Substance Misuse Prevention for Young Adults
2. Preventing the Use of Marijuana Among Pregnant Women
3. First-Episode Psychosis and Co-Occurring Substance Use Disorders
4. Use of Medication Assisted Treatment in Criminal Justice Settings
5. Use of Medication for Opioid Use Disorders in Emergency Departments
6. Substance Use Disorders with a Focus on Employment/Education

EBP Resource Center

**EVIDENCE-BASED
PRACTICES
RESOURCE CENTER**

<https://www.samhsa.gov/ebp-resource-center>

SAMHSA Strategic Plan

1. Combating the Opioid Crisis through the Expansion of Prevention, Treatment, and Recovery Support Services.
2. Addressing Serious Mental Illness and Serious Emotional Disturbances.
3. Advancing Prevention, Treatment, and Recovery Support Services for Substance Use.
4. Improving Data Collection, Analysis, Dissemination, and Program and Policy Evaluation.
5. Strengthening Health Practitioner Training and Education.

EBP Guidebook Team

Dr. Tom Clarke

Director, National Mental Health and Substance Use Policy Laboratory

Dr. Kim Dash

Subject Matter Expert, Education Development Center

Dr. Carol McHale

Social Scientist, Center for Substance Abuse Prevention

Shadia Garrison

Special Assistant, Center for Substance Abuse Prevention

Dr. Shoma Ghose

Project Director, Westat

EBP Guidebook Expert Panel

- **Trina Anglin, M.D., Ph.D.**, Health Resources and Services Administration
- **Diana Fishbein, Ph.D., M.S.**, Pennsylvania State University
- **Kevin Haggerty, Ph.D.**, Social Development Research Group
- **Ralph Hingson, Sc.D.**, National Institute on Alcohol Abuse and Alcoholism
- **Leslie Leve, Ph.D., M.S.**, University of Oregon
- **Sharon Levy, M.D., Ph.D.**, Boston Children's Hospital
- **Jacqueline Lloyd, Ph.D., M.S.W.**, National Institute on Drug Abuse
- **Richard Lucey, M.A.**, Drug Enforcement Administration
- **Charles Martinez, Ph.D.**, University of Texas at Austin
- **Sabrina Oesterle, Ph.D.**, University of Washington
- **Leah Robin, Ph.D.**, Centers for Disease Control and Prevention
- **Seth Schwartz, Ph.D.**, University of Miami
- **Richard Spoth, Ph.D.**, Iowa State University



Questions



What Do the Data Tell Us?

*A Summary of Recent Findings from the
National Survey on Drug Use and Health*



Knowledge Check

Which one of the following drugs are young adults most likely to misuse?

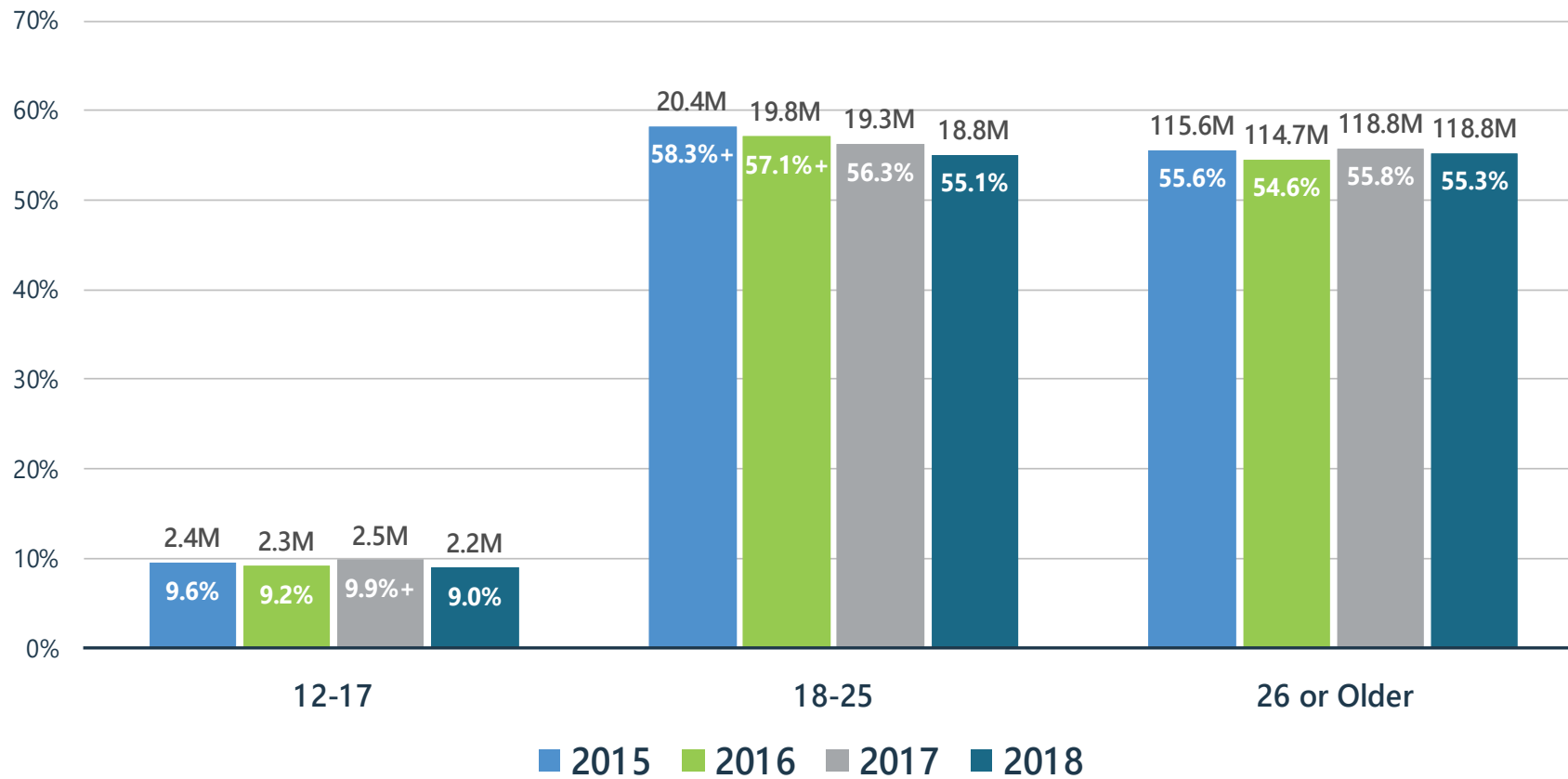
- Cocaine
- Marijuana
- Methamphetamine
- Heroin
- Prescription Pain Relievers
- Prescription Stimulants

NSDUH Overview

- Covers the civilian, noninstitutionalized population, aged 12 or older:
 - Includes: Households, college dorms, homeless in shelters, civilians on military bases
 - Excludes: Active military, long-term hospital residents, prison populations, homeless not in shelters
- Sample includes all 50 states and DC
- Approximately 67,500 persons are interviewed annually
- Data collected from January to December
- Designed to obtain accurate responses for substance use and mental health
 - Ensures survey responses are not linked to personally identifying information
 - Data collection techniques encourage accurate reporting of sensitive information

Alcohol Use

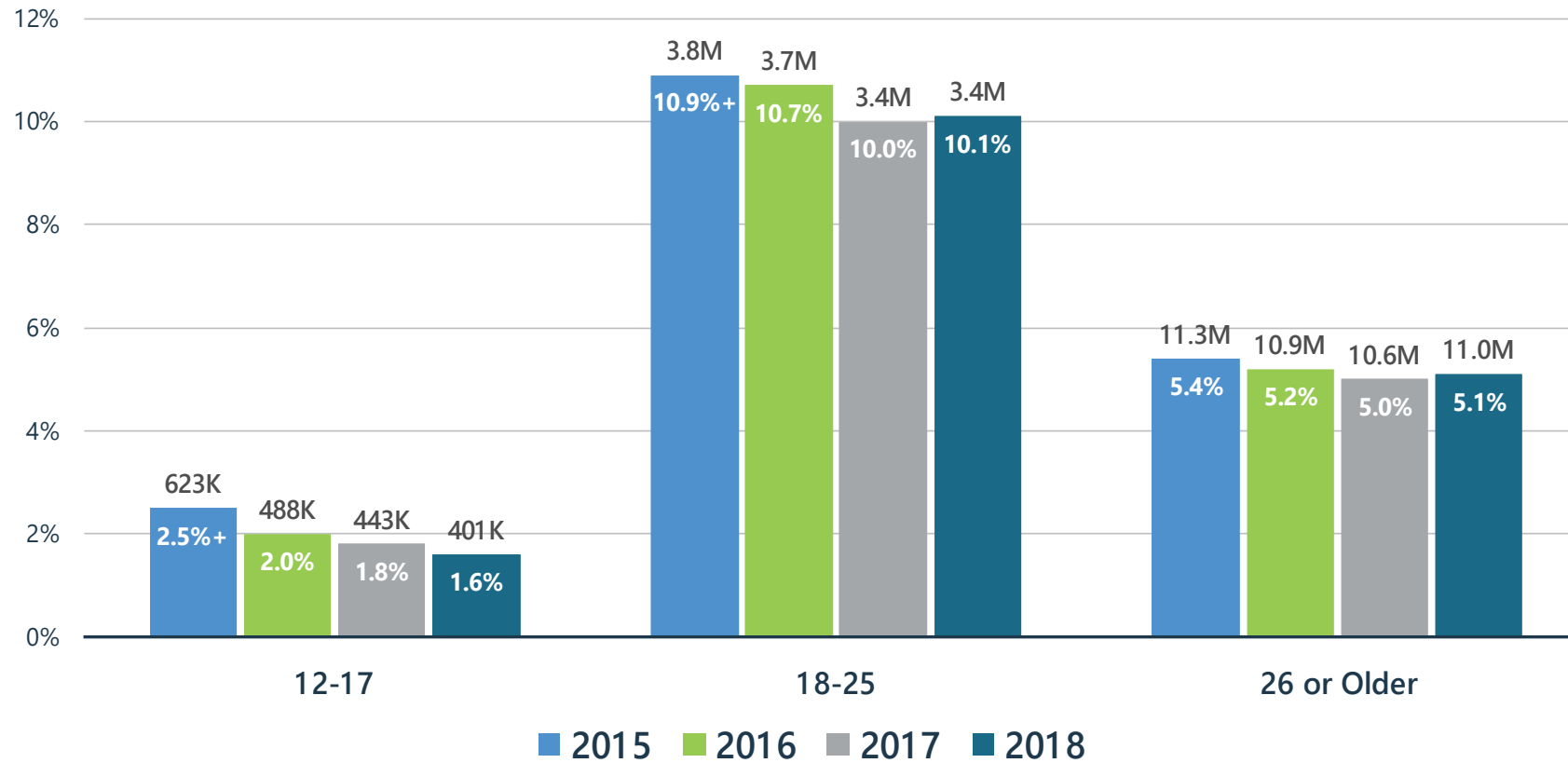
PAST MONTH, 2015-2018 NSDUH, 12+



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Alcohol Use Disorder

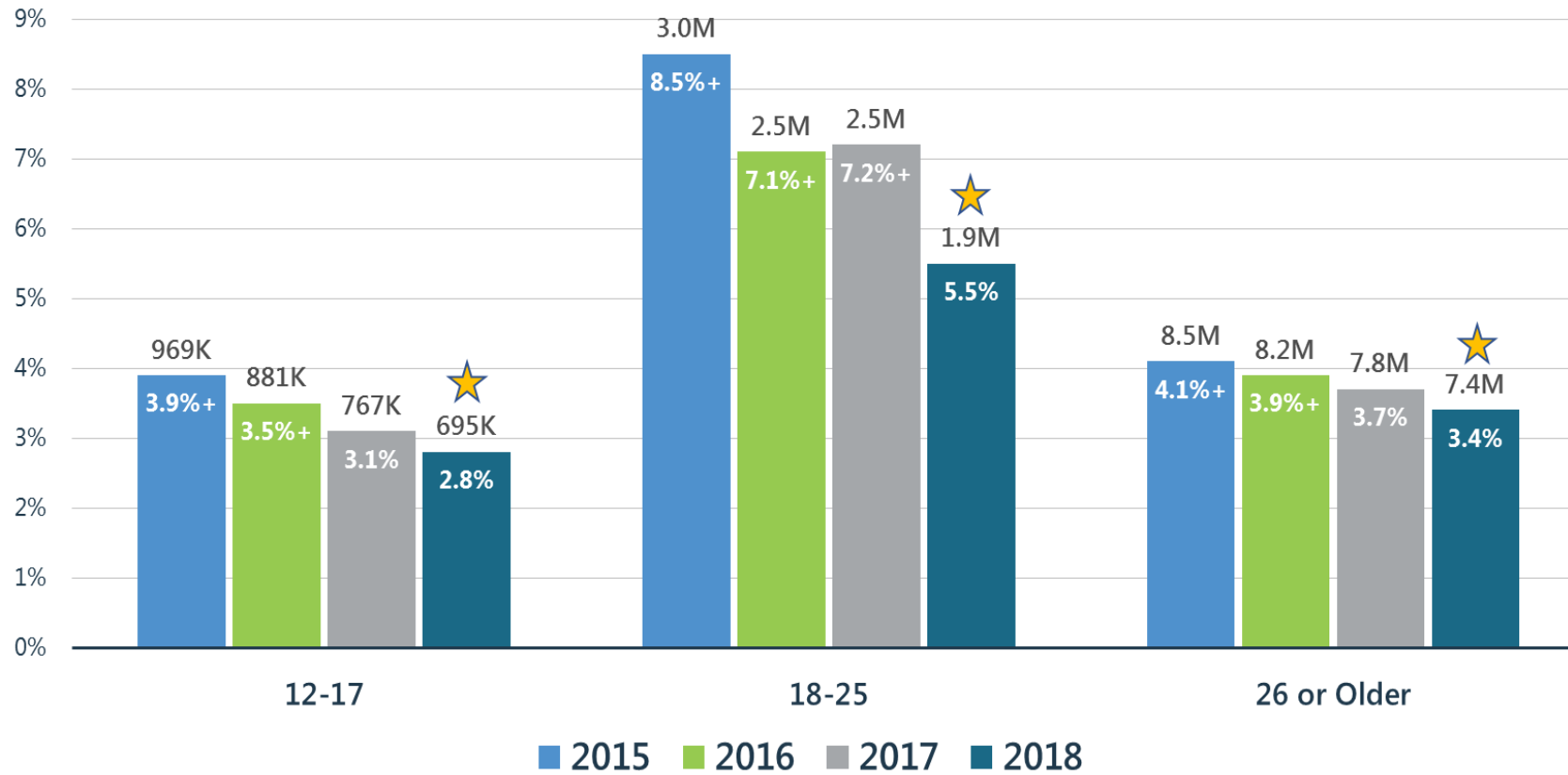
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Rx Pain Reliever Misuse

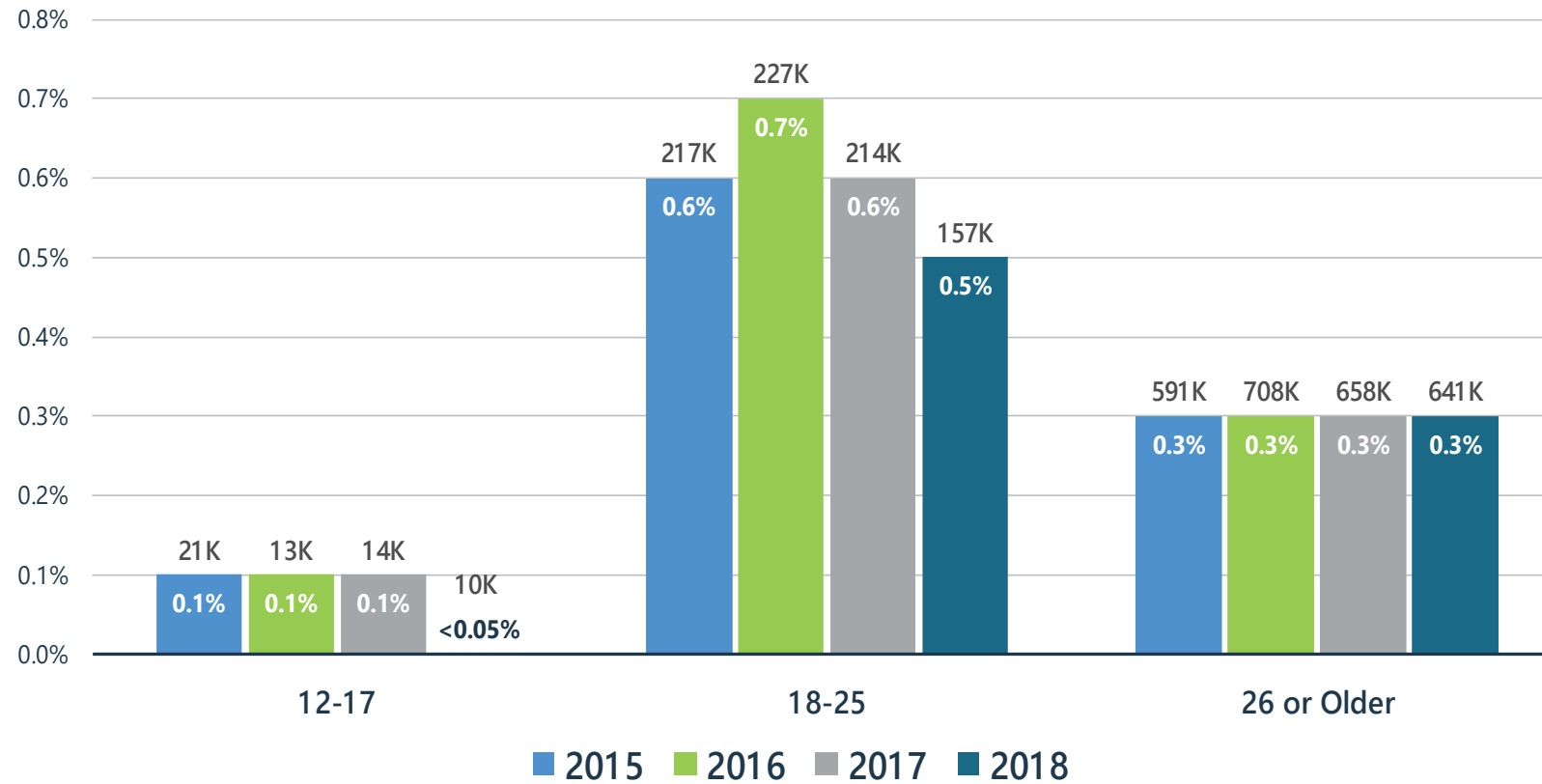
PAST YEAR, 2015-2018 NSDUH, 12+



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Heroin Use

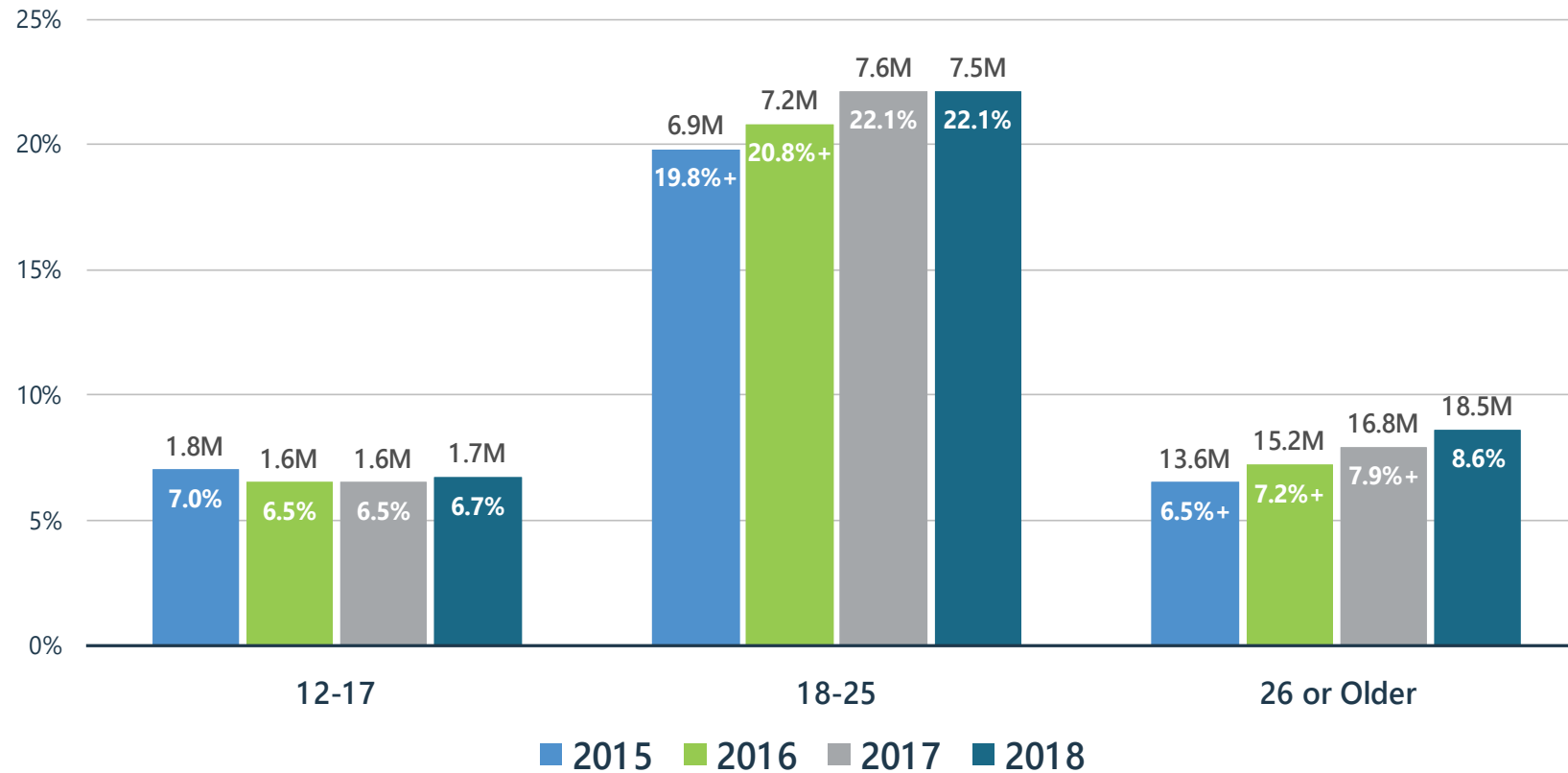
PAST YEAR, 2015-2018 NSDUH, 12+



No differences between prior year estimates and the 2018 estimates are statistically significant at the .05 level.

Marijuana Use

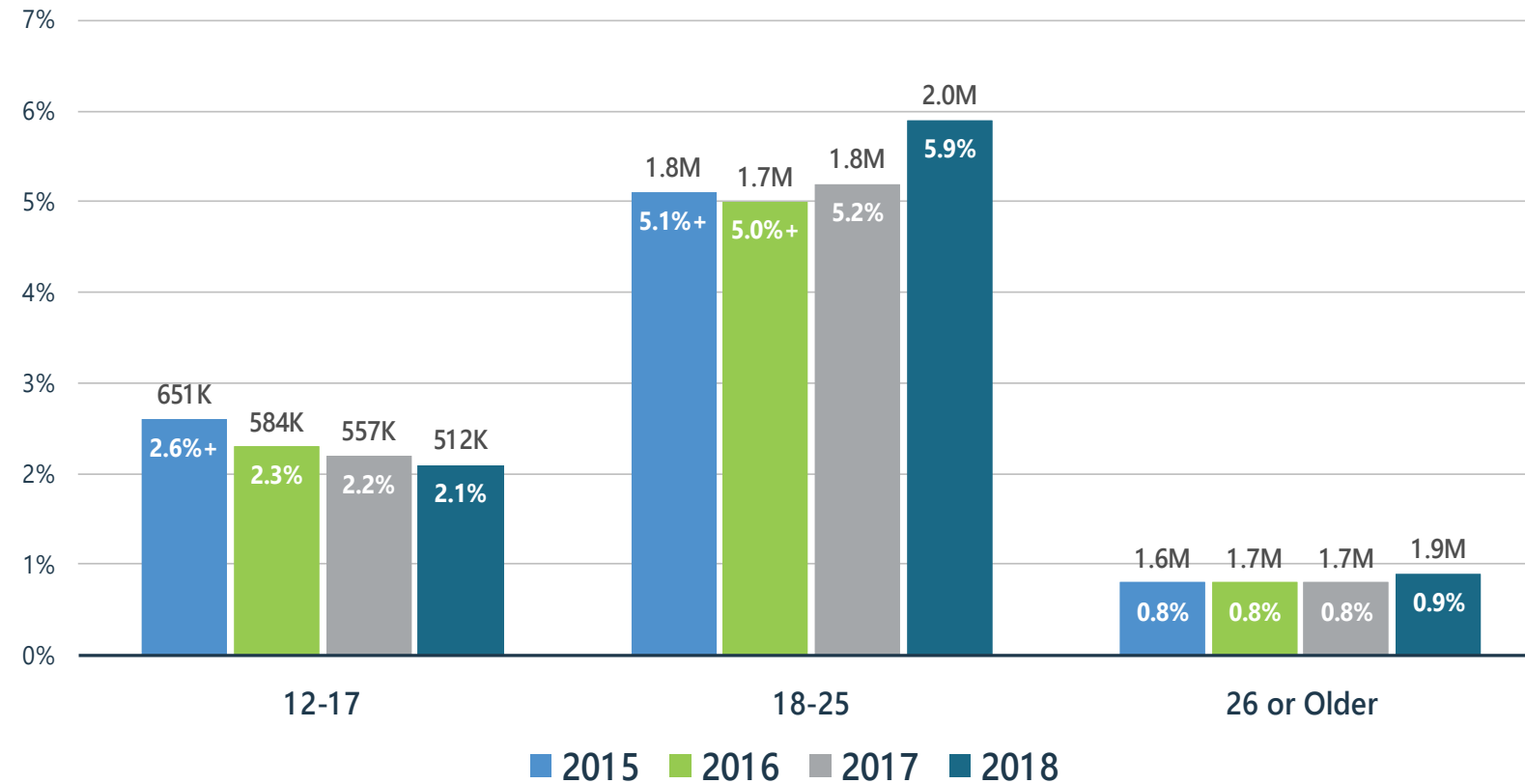
PAST MONTH, 2015-2018 NSDUH, 12+



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Marijuana Use Disorder

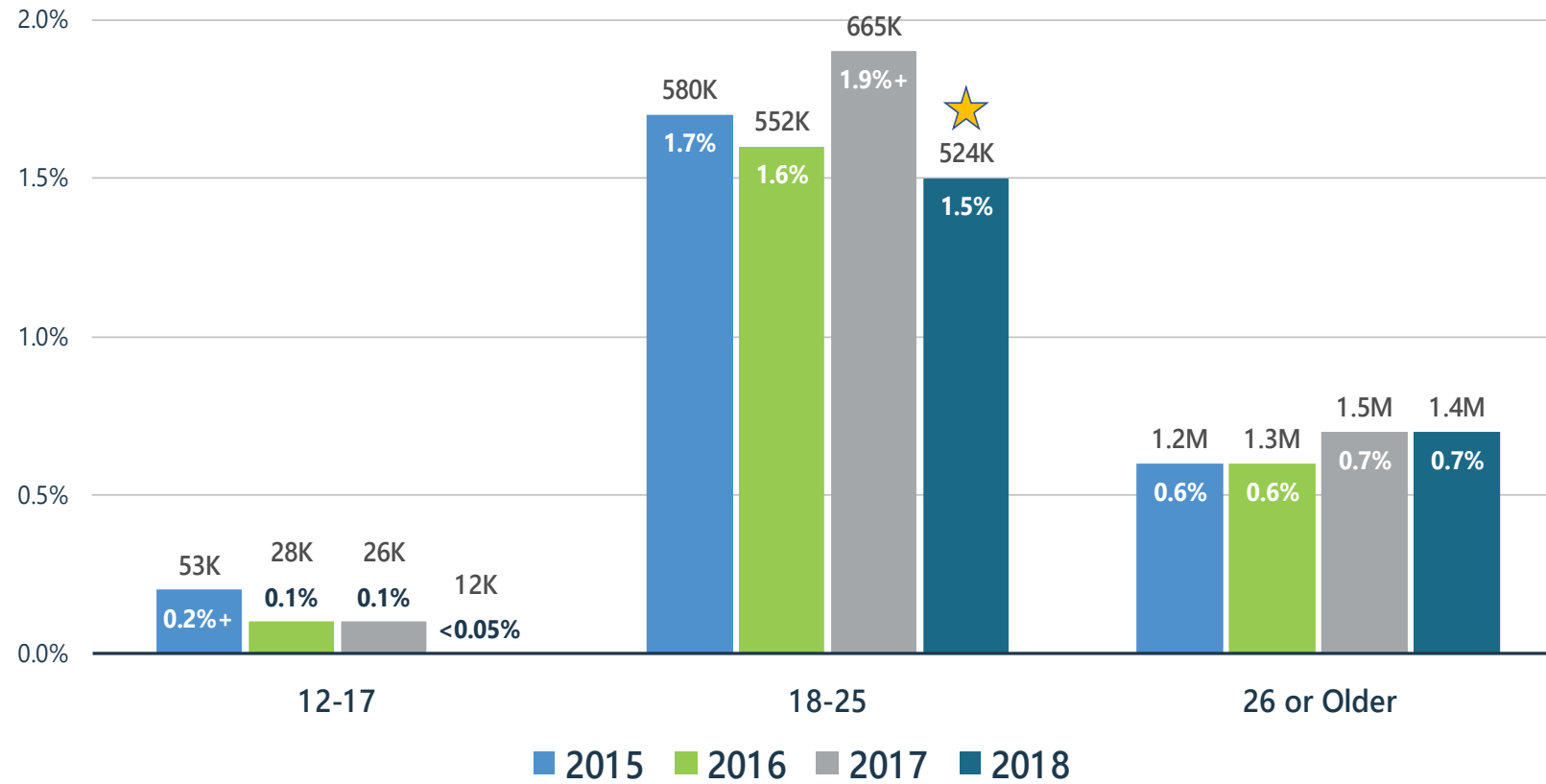
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Cocaine Use

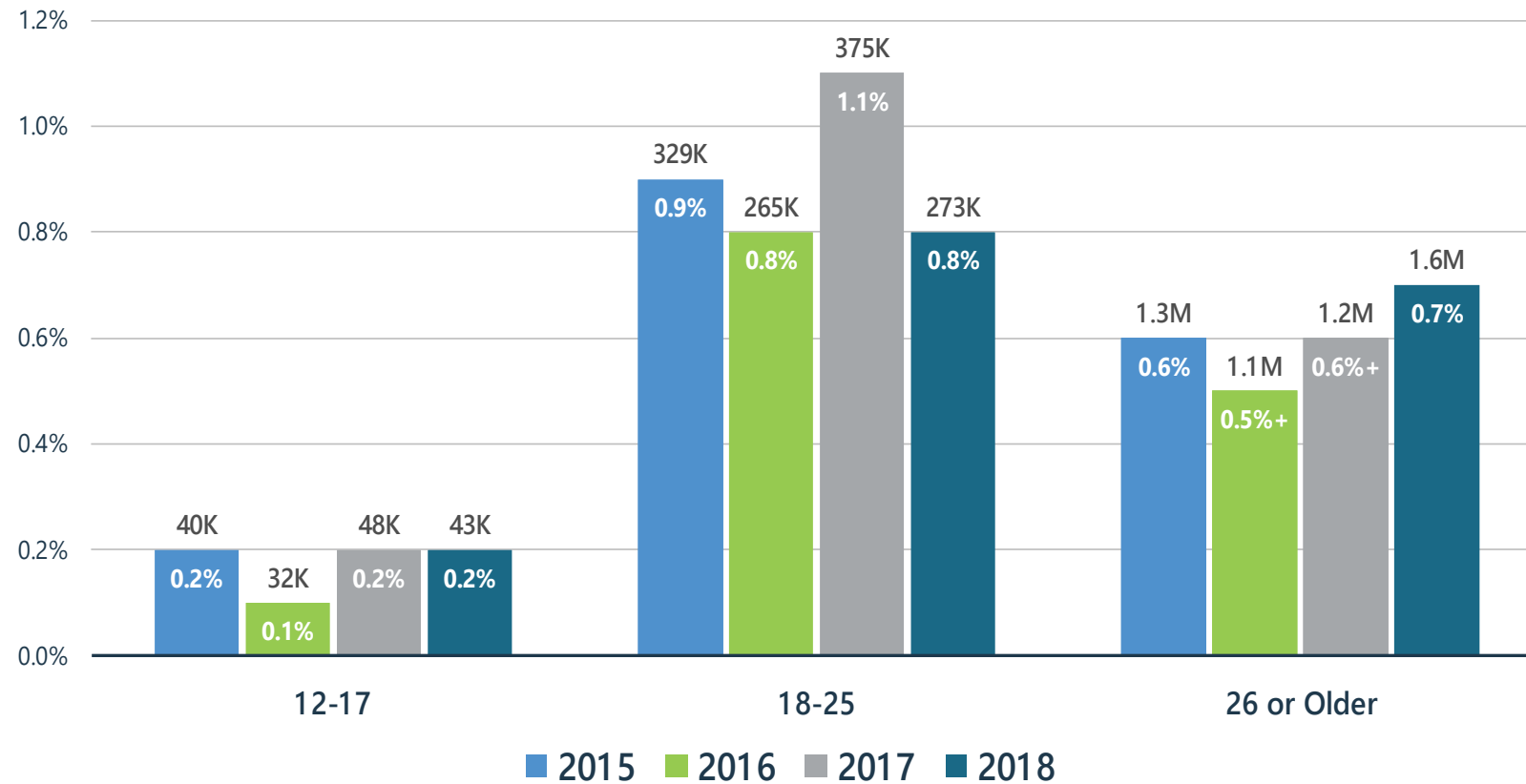
PAST MONTH, 2015-2018 NSDUH, 12+



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Methamphetamine Use

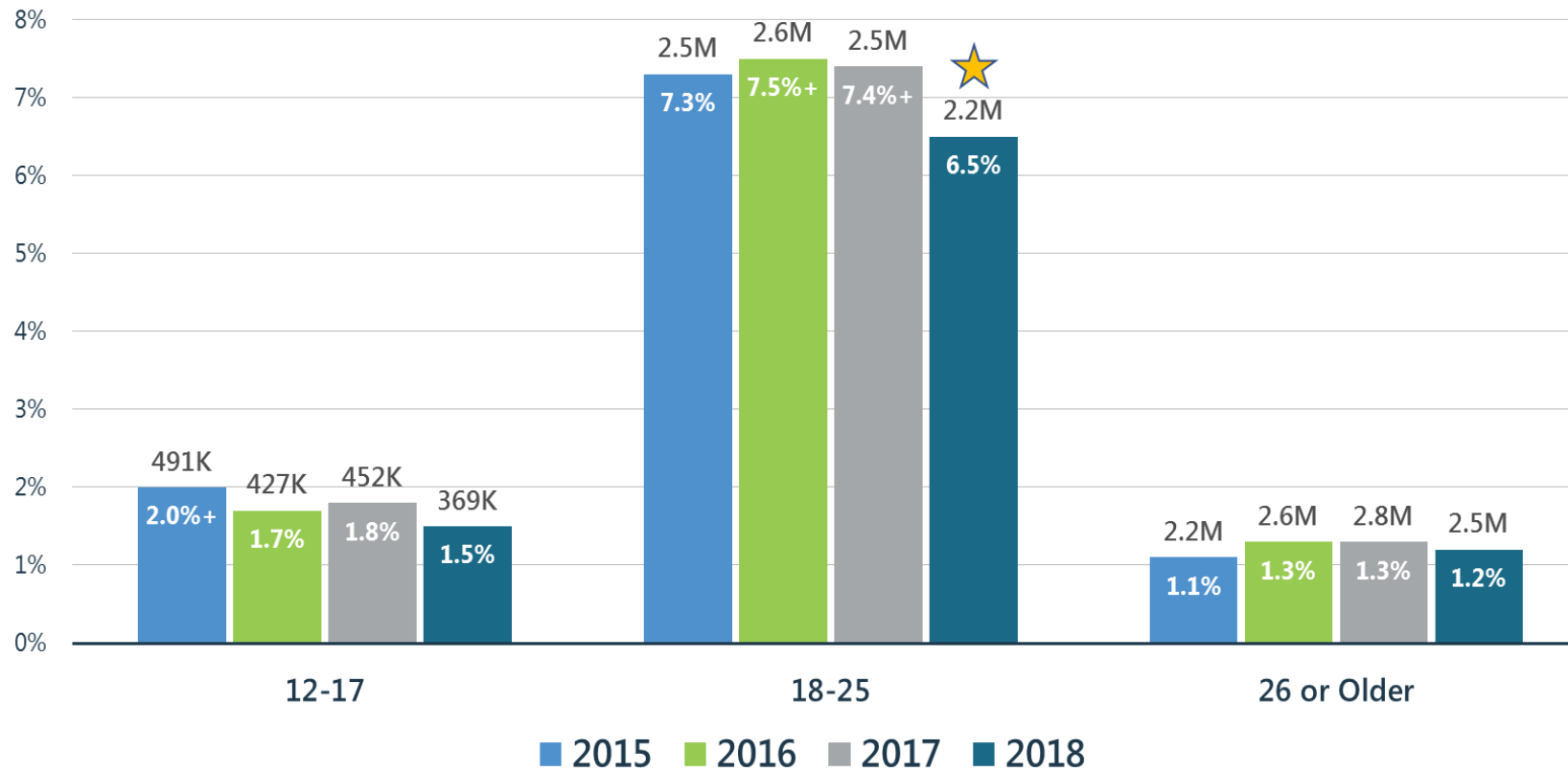
PAST YEAR, 2015-2018 NSDUH, 12+



+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Rx Stimulant Misuse

PAST YEAR, 2015-2018 NSDUH, 12+



SOURCE: See forthcoming 2018 Detailed Table 7.5, 7.11, and 7.14 for more information.

+ Difference between this estimate and the 2018 estimate is statistically significant at the .05 level.

Data Analysts: Take Note

NSDUH homepage: <https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health>

- National, state and substate reports and data tables

SAMHDA homepage: <https://datafiles.samhsa.gov/>

- Online analysis tool and downloadable public use datasets
- State Data Visualization page



Questions



Substance Misuse Prevention for Young Adults

An Evidence-Based Resource Guide



Five Chapter Format

Chapters	Notes
Introduction	Approx. 3-5 pages
1. Substance Misuse among Young Adults	Approx. 5-10 pages
2. Effectiveness of Prevention	Approx. 5-15 pages
3. Evidence-based Programs/Practices	Approx. 6-12 pages
4. Guidance for Selecting and Implementing Evidence-based Programs/Practices	Approx. 10-12 pages
5. Resources for Evaluation and Quality Improvement	Approx. 10 pages



A Guiding Theory

Social Ecological Model of Development: Multiple influences place young adults at risk for and protect against substance misuse.

Risk Factors for Misuse

Socio-Ecological Level

	Developmental Period		
	C	A	YA
Individual			
Adolescent substance use		X	
Constitutional factors	X		
Early and persistent antisocial behavior	X	X	X
Early initiation of substance use	X		
Internalizing behaviors (e.g., depression, anxiety)	X	X	
Relationships			
Family management problems	X	X	
Family history of substance use	X	X	
Family conflict	X	X	X
Favorable parental involvement in substance use	X	X	
Friends who engage in substance use		X	X

Risk Factors, continued

Socio-Ecological Level

	Developmental Period		
	C	A	YA
Community/School			
College attendance/environment			X
College fraternity/sorority membership			X
Academic failure	X	X	X
Lack of commitment to school		X	
Societal/Community			
Availability of substances			X
Laws/norms favoring substance use, firearms, and crime			X
Income and parental education	X		X

Help-Seeking as Protective

Barriers	Facilitators
Fear of being stigmatized	Positive experience with help seeking
Limited confidentiality and trust	Social support or encouragement from others
Difficulty identifying symptoms	Perceiving problem as serious
Concern about provider characteristics	Confidentiality and trust in provider
Self-reliance	Ease of expressing emotion and openness
Limited knowledge about mental health services	Education and awareness
Stress about help-seeking	Positive attitudes toward help-seeking

Groups at Increased Risk

- LGBTQIA+ young adults
- Young adults who are homeless
- Juvenile-justice involved young adults
- Young adults in the military
- Young adults in college fraternities
- Young adults with ADHD

Also, young adults with co-occurring mental illness

Consequences of Misuse



Effects on the brain



Chronic disease



MV collisions

Align Criteria with SG Report

Sources and Process

- A review of published research (PubMed, PsycINFO)
- Annotated bibliographies
- Government reports,
- Books and book chapters
- SAMHSA's NREPP
- CDC Community Guide

Evaluation Criteria

- Experimental or quasi-experimental design
- Sample specification
- Outcomes assessed at pretest, posttest, and follow-up
- Measurable difference in substance use or substance use-related outcomes between intervention and comparison groups based on statistical significance testing
- Quality research methods

Feature *Facing Addiction* Programs

The seal of the U.S. Department of Health & Human Services is faintly visible in the background. It features a central figure holding a staff with a snake, surrounded by the text "U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES" and "1798".

FACING ADDICTION IN AMERICA

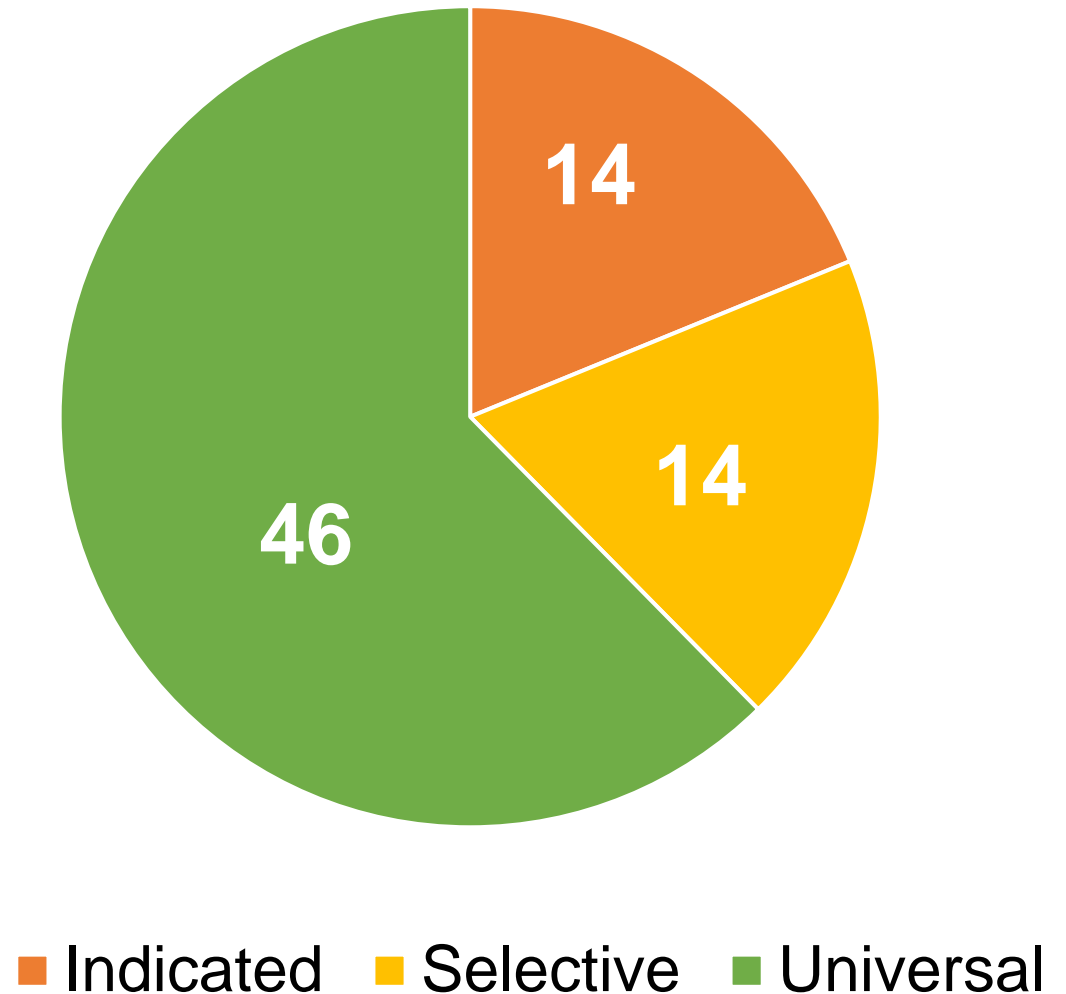
*The Surgeon General's Report on
Alcohol, Drugs, and Health*

U.S. Department of Health & Human Services

Populations Targeted

A total of **73 programs** were identified as evidence-based for preventing substance misuse among young adults.

In this chart, one program is counted in two categories since the approach is different depending on the age group targeted.



Distill Practices from Programs

Focus on Children and Adolescents

- Behavior Modification and Management
- Classroom Management
- Full Service Schools
- Home Visiting Services
- Parenting Skills Education
- Social and Emotional Skills Education

Focus on Young Adults

- Cognitive Restructuring
- Community Mobilization
- Environmental Changes
- Policy and Enforcement
- Social Norms Campaign and Education
- Screening and Brief Intervention
- Wraparound Services

Feature Seven Programs

Program	Practice	Target Population	Setting	Substance
Adults in the Making	Social and emotional education	Selective	High-poverty rural communities	Alcohol and other substances
Alcohol Taxes	Policy	Universal	State	Alcohol
BASICS	Screening and brief intervention	Selective and Indicated	Colleges and universities	Alcohol
CMCA	Environmental change	Universal (for underage youth)	Upper Midwestern communities	Alcohol
Family Check-up	Parenting skills	Selective	Public middle schools	Alcohol, tobacco, and marijuana
Safer CA Universities	Policy enforcement	Universal	Colleges and universities in CA	Alcohol
Team Awareness	Social norms education	Selective	Workplaces	Alcohol

Provide Key Information

Brief information on:

- Substances
- Population
- Factors
- Settings
- Duration
- Resources

Detailed information on:

- Description
- Mechanisms of change
- Implementation requirements
- Outcomes



Questions

SPF Guides Implementation

1. **Assessment:** What are the needs of your target audience? How does this inform program selection?
2. **Capacity:** What is your ability to implement a given program? How can you enhance capacity?
3. **Planning:** How do you select an effective program that addresses local community needs and fits organizational capacity?
4. **Implementation:** What do you need to put in place to make sure the program's core elements are implemented?
5. **Evaluation:** How will you monitor program implementation?



Assessment

Challenges

- **My organization is not ready to implement or is resistant to innovation.**
- No one sees substance misuse as a problem among young adults.
- We do not know where to obtain data on young adult populations, especially those not in college.
- We cannot access “real-time” data on new substances such as marijuana and opioids.
- We do not know what others are doing to address substance misuse among young adults and worry that we might duplicate efforts.

Solutions

- **My organization assessed staff perceptions of our collective efficacy and provided feedback.**
- We shared existing reports to show why substance misuse is a problem among young adults and involved stakeholders in planning.
- We identified available sources of data on young adult substance misuse in our community.
- We conducted focus groups and/or interviews with key stakeholders to obtain “real-time” information.
- We conducted an environmental scan to determine what other agencies are doing.

Capacity

Challenges

- Our staff have limited cultural humility.
- We do not know if we have the capacity to reach the population in greatest need.
- **Our staff do not have the appropriate skills or credentials required to implement the program.**
- Our organization does not function effectively.
- Our organization experiences erratic funding and high staff turnover.
- Organizational leadership is not on board with efforts to implement evidence-based programming.

Solutions

- Our organization provided cultural competency training to current staff and hired additional staff who represent the populations we serve.
- We engaged young adults in planning.
- **Organizational leadership supported professional development for staff.**
- A program champion leads our efforts, and she has identified staff who will facilitate implementation.
- Our program champion arranged for training of leadership/administration.
- .

Planning

Challenges

- We could not find any programs that address the problems or risk and protective factors that we identified.
- **We could not find any programs that address the populations we serve and for the settings where we work.**
- We know there are some new programs out there that are designed to address the priorities we have identified, but no one has evaluated them.

Solutions

- We collaborated with researchers at the local university to develop and rigorously evaluate a new program.
- **We created a new program based on a productive adaptation of an existing evidence-based one.**
- We implemented an evidence-based program that did not assess the types of substance misuse most prevalent in our community, but that did address risk and protective factors shown to be associated with this type of misuse.

Implementation

Challenges

- Over time, staff are drifting away from the core components of the program.
- Our current organizational structures do not support the program.
- **Staff have shown waning enthusiasm for the program given the lack of immediate visible results.**
- We are experiencing an influx of new staff who will be responsible for implementing program components.

Solutions

- We provide booster training sessions to support fidelity to the original program.
- We have made systematic changes, developing assisting processes and awareness building to support implementation.
- **We provide ongoing feedback to staff on implementation success and provide individual rewards, recognition, and incentives to staff.**
- In addition to ongoing training, we have set up learning communities for agency staff.

Evaluation

Challenges

- Our staff lack the capacity to conduct evaluation and performance monitoring.
- We are not sure how to identify and measure meaningful outcomes.
- **Why should we assess outcomes when we are implementing an evidence-based program?**
- Staff are wary of evaluation; they worry about failing and being punished for bad results.
- We are unsure about sharing results and providing accountability to stakeholders.

Solutions

- We are working with local researchers to train staff on continuous quality improvement.
- We are using standard measures that others have used to assess similar outcomes.
- **We have decided to focus on implementation evaluation and continuous quality improvement rather than outcome evaluation.**
- We are using appreciative inquiry to focus on what is working well (and doing more of that) rather than what is not working.

Limitations and Caveats

- Most programs implemented in college or school setting.
- Most programs (n = 64) target alcohol use.
- Programs employing social media and mobile health technology not adequately evaluated.
- Limited number of programs for young adults in workplace.
- Unknown effects of many programs on vulnerable populations.



Questions



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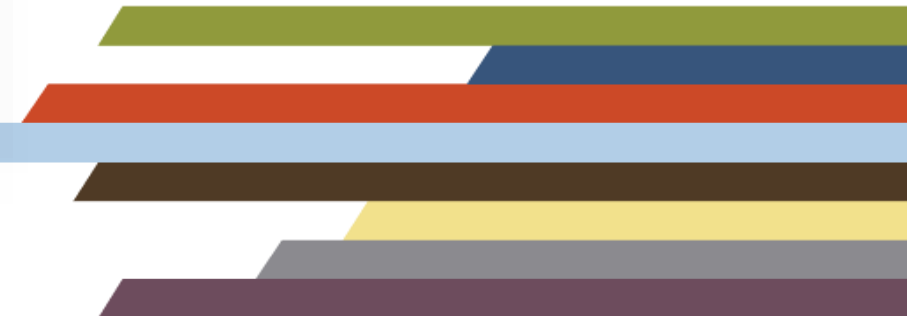
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Please provide your feedback!

<https://ttc-gpra.org/P?s=686910>

CASAT

N Center for the Application of
Substance Abuse Technologies
University of Nevada, Reno





Contact Information

Kim Dash
kdash@edc.org





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