This training was developed under the Substance Abuse and Mental Health Services Administration’s Prevention Technology Transfer Center task order. Reference # 1H79SP081018.

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Funding for this presentation was made possible by SAMHSA grant no. 1H79SP081018. The views expressed by speakers and moderators do not necessarily reflect the official policies of HHS; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.
Welcome

Central East PTTC Webinar

Preventing Youth Vaping, Cannabis, and Tobacco Use Part 2: Strategies and Recommendations for the Field of Prevention

The Central East PTTC is housed at the Danya Institute in Silver Spring, MD

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SAMHSA REGION 3
The use of affirming language inspires hope.

**LANGUAGE MATTERS.**

**Words have power.**

**PEOPLE FIRST.**

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.
PTTC Mission

1. To Strengthen the Capacity of the Workforce

2. To Deliver Evidence-Based Prevention Strategies

3. Facilitate Opportunities for Preventionists to Pursue New Collaboration Opportunities, which include Developing Prevention Partnerships and Alliances
Services Available

- Online Courses
- Technical Assistance
- Skill Based Training
- Webinar
- Toolkits
- Facilitate Prevention Partnership & Alliances
- Research Learning Collaborative
- Newsletter
- Technology Driven Models
- Literature Searches
- Virtual Meeting
- Research Publication

Central East (HHS Region 3)
Other Resources in SAMHSA Region 3

Central East (HHS Region 3)

ATTC
Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Central East (HHS Region 3)

MHTTC
Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Central East (HHS Region 3)

PTTC
Preventing Youth Vaping, Cannabis, and Tobacco Use Part 2: Strategies and Recommendations for the Field of Prevention

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May 30, 2024
Presenters

Josh Esrick

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Mentimeter Activity

How to participate:
• Scan the QR code from a mobile device  OR
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Learning Objectives

- Recognize the importance of providing evidence-based culturally responsive youth vaping, cannabis, and tobacco use prevention strategies
- Describe evidence-based behavioral strategies for preventing youth vaping, cannabis, and tobacco use
- Describe evidence-based environmental strategies for addressing social determinants of health relevant to youth vaping, cannabis, and tobacco use
- Explain how to ensure cultural responsiveness in youth substance use prevention programs
The Importance of Using a Culturally Responsive Evidence Base
Why Evidence is Important in Prevention

• Part I discussed the continued need for youth vaping, cannabis, and tobacco use prevention services
• Ensure that the interventions we implement have the greatest likelihood of success
• Strength of evidence varies significantly
• Many EBPs for youth substance use prevention exist
• EBPs be designed/adapted to ensure cultural relevance
Why Cultural Responsivity is Important in Prevention

• Culture shapes every interaction we have, intentionally or not

• Prevention professionals work in different settings with individuals from diverse cultures in many capacities

• Demographics are shifting and we are becoming more culturally diverse

• Significant disparities remain in substance misuse and substance use disorder prevalence across a variety of factors
Substance Use and Inequity

• Structural racism and discrimination has been linked to an increased risk of substance use and overdose

• This contributes to SUD disparities through:
  • Biases and stigma deeply-rooted in institutions that impact lived experiences
  • Effects of racism-related stressors on wellbeing and functioning
  • Conscious and unconscious behaviors directed at people of color
  • A lack of culturally competent care
Mentimeter Activity

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Past-Month Vaping (12+)

- American Indian/Alaska Native: 34.0%
- Asian: 10.0%
- Black or African American: 23.6%
- White: 24.7%
- Two or More Races: 32.4%
- Hispanic or Latino: 17.7%

NSDUH, 2022
Evidence-Based Behavioral Strategies for Vaping, Tobacco, and Marijuana
Environmental vs. Behavioral Strategies

• Environmental strategies seek to change the environment and context away from supporting use
  • E.g., Requiring valid identification for online retailers to ensure they are not selling to youth
• Behavioral strategies seek to impact individuals’ knowledge, skills, and behaviors related to their risk of substance use
  • E.g., A course that teaches life skills to high school students to reduce substance use
LifeSkills Training (LST)

• Classroom-based universal prevention program for ages 12-14
• Intended to reduce alcohol, tobacco, and cannabis use, & reduce violence
• Primary implementers are teachers; should attend a 15-hour training and obtain program materials
• Among other outcomes, found to:
  • Significantly reduce cigarette smoking and cannabis use at 3-year follow-up
  • Slow growth rates in cigarette initiation in 5-year follow-up
  • Significantly reduce lifetime cannabis use
Blues Program

• Designed to engage high school-aged youth with symptoms of depression/those at risk of developing major depression

• 6 weekly 1-hour group sessions with 4-8 teens plus home practice assignments

• Focuses on increasing teen’s involvement in prosocial activities, practicing cognitive restructuring techniques, and building resiliency to life stressors

• In addition to reductions in depressive symptoms at follow-up, teens also report reductions in substance use, including tobacco and cannabis use
Positive Action

• School-based social emotional learning program for grades K-6 and 7-8
• Implemented by teachers, along with school administration and other school stakeholders
• Among other outcomes, found to significantly reduce rates of a combined measure of all forms of substance use, including cannabis
  • Students in schools that implemented Positive Action in Chicago were 20-39% less likely to use tobacco, alcohol, or cannabis
Project Towards No Drug Abuse

- Classroom-based program for high school students at risk of drug use and violent behavior
- Includes 12 40-minute interactive sessions over a 3-week period taught by teachers or health educators
- Focuses on motivation activities to not use drugs, exercise self control, improve communication, and strategies for effective decision-making
- Evaluation studies found significant reductions in tobacco use and hard drug use, as well as problem behaviors (e.g., weapon carrying, victimization)
smokeSCREEN

• Video game geared towards adolescents aged 10-16

• Can be implemented in schools, youth programs, or at home

• Evidence demonstrated:
  • Improved beliefs about nicotine vaping and cigarette smoking
  • Improved knowledge about nicotine vaping and cigarette smoking
CATCH My Breath

- School-based program developed to prevent nicotine vaping and tobacco use among students in 5th-12th grades

- Program resulted in:
  - Reductions in nicotine vaping use (both lifetime and within the past 30 days)
  - Increases in nicotine vaping knowledge
  - Increases in positive perceptions of a vape-free lifestyle
  - Reductions in overall tobacco use
This Is Quitting

• Text message program developed by the Truth Initiative
• Designed for teens and young adults (13-24) to quit nicotine vaping
• 61% of participants said they had reduced their use of vaping devices or quit altogether at 2-weeks after enrollment
• At three months:
  • 25% said they had not vaped in the past seven days
  • 16% said they had not vaped in the past 30 days
Evidence-Informed and Promising Programs

- A Stop Smoking in Schools Trial (ASSIST)
- Communities That Care
- Coping Power
- Good Behavior Game
- Healthy Futures
- KEEP SAFE
- Learning Together
- Not-On-Tobacco (NOT)
- PROSPER
- Raising healthy Children
- RealTeen
- SPORT Prevention Plus Wellness
- Strengthening Families 10-14
- Strong African American Families (Teen) Program
- You and Me, Together Vape Free
Mentimeter Activity

Which of the strategies we covered are you interested in learning more about or have already implemented?

- LifeSkills Training
- Blues Program
- Positive Action
- Project Towards No D
- smokeSCREEN
- CATCH My Breath
- This is Quitting

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Promising Program for NHOPi Youth

Ho’ouna Pono Drug Prevention Curriculum

• Classroom-based substance misuse prevention program for NHOPi adolescents in rural Hawai‘i
• Curriculum developed within the socio-cultural context of substance use among NHOPi youth
• Video vignettes of Hawaiian youth were shown in realistic substance-related situations for their community
• Prevalence of recent cigarette/e-cigarette use dropped from 4.3% to 3.5%
Environmental Strategies for Vaping, Tobacco, and Marijuana
Environmental Strategies

Policy change

Public education

Media campaigns
Environmental Strategies, I

• Target both societal and community level influences to reduce substance use
• Seek to restrict access to substances, can mandate tracking/training/data collection activities, and work to limit distribution and promotion
• Under the SDOH framework, it’s important to understand how the environment around us influencing risk of substance use
• Developing environmental strategies can require a diverse network of stakeholders
Environmental Strategies, II

- Studies estimate that clinical care impacts only 20 percent of county-level variation in health outcomes, while SDOH affect as much as 50 percent.
- Interventions at the environmental level can be effective at reducing substance use.
Examples of “Big Picture” Strategies

- Supportive housing to individuals with chronic health conditions
- Public benefit programs such as providing food assistance to families in need
- Non-emergency medical transportation (NEMT) to improve access to preventative services

Research on direct impacts of these strategies is still being developed, but it is known that they can help reduce factors that are associated with many forms of substance use.
Using Policy as an Environmental Strategy

• Zoning policies
  • Reduces youth access to products and decreases outlet density

• Price policies
  • Increasing the price of tobacco products is known to be one of the most effective tobacco control interventions
    • 22 states have imposed a tax on e-cigarettes
Using Policy as an Environmental Strategy, II

• Regulatory policies
  • Requiring health warnings, child-resistant packaging
  • Restricting internet sales; requiring ID/proof of age
  • Prohibiting self-service and vending machine sales in places where youth frequent
  • Requiring FDA authorization of new or changed products
  • 5 states and over 375 localities have passed restrictions on the sale of flavored tobacco products
Mentimeter Activity

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Public Education and Media Campaigns

• Can reach a large audience
• CDC estimates that they need to reach 75% of their target audience to create changes in behavior and attitude

Example: truth® Campaign

• National mass media campaign focused on the prevention of youth and young adult tobacco use
• Greater exposure to the campaign is associated with reduced intentions and likelihood of smoking.
Real Cost Campaign

• Run by the FDA for youth aged 12-17
• Uses TV and streaming video ads, digital ads, social media, and a youth-targeted website
• Educates at-risk youth about the harmful effects of tobacco use
• “High exposure” to campaign advertisements associated with a 30% decrease in risk of beginning smoking among youth
Flavors Hook Kids

• Public education campaign website ran by the California Department of Public Health
• Includes:
  • Fast facts about vaping
  • California vaping policy map
  • Opportunities to engage in advocacy
  • Comprehensive guide for parents
  • Other resources

THE TOBACCO INDUSTRY HAS A KIDS MENU

Youth and young adult vaping is associated with 5–7x greater risk of testing positive for COVID-19. [Journal of Adolescent Health]

In the last 2 years, vaping has increased by 218% among middle schoolers and 135% among high schoolers. [Journal of the American Medical Association]
Other Examples of Public Education

- Escape the Vape
- Vanish the Vape
- Generation FREE
- Health Canada
- E-Cigarettes and Teens: A Guide for Parents and Educators
- What You Need to Know and How to Talk to Your Kids About Vaping
Having a Comprehensive Approach

- Socio-Economic Factors
- Environmental Context
- Long-Lasting Protective Interventions
- Clinical Interventions
- Counseling and Education

Greater Population Impact
Greater Individual Effort Needed
Case Study: Tobacco Prevention (Frieden, 2010)

- **Socio-Economic Factors**
  - High poverty rates associated with higher smoking rates

- **Environmental Context**
  - Excise taxes; smoke-free workplaces

- **Long-Lasting Protective Interventions**
  - Graphic anti-smoking ad campaigns created a “social immunization” against the idea of smoking

- **Clinical Interventions**
  - Smoking cessation medications; encourage healthy diet and exercise to reduce stress

- **Counseling and Education**
  - Education about the risks of smoking
Cultural Responsivity
Applying the Core Tenets of Cultural Humility to Prevention

1. Life-long commitment to self-reflection

2. Actively seek to address power imbalances

3. Develop non-paternalistic, mutually beneficial partnerships with communities
6 Principles for Increasing Prevention’s Cultural Responsiveness (SAMHSA)

1. Sustain community partnerships and involvement

2. Let the community define themselves

3. Prioritize culturally appropriate prevention approaches (and adaptations)

4. Employ evaluators who are culturally competent

5. Ensure program staff reflect the communities they serve

6. Include people in the target population in prevention planning ("nothing about us, without us")
Mentimeter Activity

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Adapting Programs to be Culturally Responsive

Look inwards

Work outwards

Solicit the expertise of those with the lived experience

Follow the principles of cultural competence
Example of an Adapted Program – Keepin’ it REAL

**EBP**
- Classroom-based, video-enhanced prevention program originally designed for urban settings in the Southwest US
- Six core components
  - Communication competence
  - Narrative-based knowledge
  - Social norms education
  - Social learning of life skills
  - Drug-resistance strategies
  - Local social context

**ADAPTATION**
- Adapted to Rural Schools in OH & PA
- Hired community liaisons to build relationships, manage logistics, and work with program designers throughout
- Six step iteration process
  - Formative interviews with youth
  - Focus groups with teachers
  - Teen Advisory Group (TAG) created
  - New video development
  - Lesson development and adaptation
  - Feedback and revision
Conclusion

• Many potential EBPs to address youth vaping, cannabis, and tobacco use
• Need to use strategic planning to determine which are best fit for your needs
• And select EBPs that can fit together into a comprehensive approach
• This involves weighing the evidence behind strategies, understanding your own capacity, and analyzing the needs of the community
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