

The Prevention Panel

Sharing prevention perspectives on:

- What does and doesn't work in prevention programs
- Collaborative approaches
- Environmental approaches
- Awareness, Education

Prevention Research Center (PRC) Background

- Internationally recognized leader in advancing the field of prevention.
- PRC work focuses on:
 - **Building** prevention programs
 - **Evaluating** programs
 - **Spreading** the use of effective programs

Defining Prevention

- Delivery of programs and services BEFORE a problem occurs.
 - Not preventing overdose in the event of misuse
 - Not preventing abuse/death after heroin use

Establishing evidence of impact

- **It is challenging to prove with sufficient validity that a program prevented an outcome.**
- **To have confidence that a program prevents an outcome, tight evaluation protocol must be used. At minimum:**
 - A group who gets the program and a group who does not
 - Examining differences between these groups, before and after
 - Establishing that people who get the program improve on expected targets (attitudes, knowledge, skills)
 - Those improvements are shown to be sustained over time
- **Using these protocols we have built a body of knowledge about what does and doesn't work in prevention**

What doesn't work: Danger and deterrence

- **Focus on danger and deterrence; using fear to prevent risk**
 - Dramatic re-enactments of involvement with law enforcement, medical professionals, etc.
 - Gruesome and gory photos
 - Survival and recovery stories
- **Ineffective due to adolescent brain development**
 - Planning and understanding consequences (develops slowly) vs.
 - Sensation and reward seeking (develops rapidly)
- **Adults may think danger and deterrence programs are a good idea...because they are using an adult brain to think about it!**

What doesn't work: One time events

- One-time events
- Unlikely to provide enough time with the content to meaningfully process information and to build and integrate skills

Effective Program Approaches

- Positive and strengths-based approach
- Interactive and hands-on, opportunities for skill building; does not overly rely on knowledge, information, or group discussion
- Enough weeks and hours for program to have impact; plus booster lessons

Research on Evidence-based Programs

- Examples of two programs that use effective approaches and have been shown to prevent prescription opioid misuse
- **LifeSkills Training (LST) and Strengthening Families Program: For Parents and Youth Aged 10-14 (SFP 10-14)**
- LST and SFP 10-14 both have research that demonstrates their long-term effectiveness at preventing substance use.
- **Both programs are delivered in middle school ages, and have been shown to prevent Rx opioid misuse up to 12th grade and into early 20's**
- Protective effects are even more potent when youth attend both programs

Effective Programs: LST & SFP 10-14

- PCCD provides funding for both of these programs
- EPISCenter provides support for implementation of these programs
- Free informational materials on EPISCenter website to learn more about these programs, and others that prevent substance use

EPISCenter

- Free technical assistance and training for assistance in using evidence-based programs and practices
- We also support the Communities That Care prevention coalition model – can be used to deliver the prevention part of county strategies
- Developing community and agency capacity to use evidence-based approaches for maximum impact
- RESOURCES on table (prevention packet)
- STAFF on-site at symposium