How Schools Can Help Prevent Adolescent Opioid Use Disorder

Christal Ramos, Lisa Clemans-Cope, Haley Samuel-Jakubos, and Luis Basurto

Opioid use disorder (OUD), a problematic pattern of opioid use involving harmful consequences, is a serious crisis in the United States. OUD often originates with substance use in adolescence. More than one-third of people ages 18 to 30 admitted to a facility for treatment of prescription opioid misuse or heroin had initiated that substance use before age 18 (SAMHSA 2014). Schools are a key part of prevention because they can provide a universally available avenue for preventing or delaying illicit drug use among adolescents, including misuse of prescription opioids or use of illicit opioids. What should schools and communities in Ohio know about these school-based prevention programs?

Schools interested in introducing evidence-based programs aimed at preventing OUD could consider four school-based prevention programs targeted at students of different ages. Blueprints for Healthy Youth Development recognizes these programs as having demonstrated success in opioid-related outcomes and meeting criteria for quality, impact, specificity, and dissemination readiness. Studies have demonstrated that each of these programs is associated with outcomes such as reductions in prescription opioid misuse and illicit drug use, particularly for boys and students at higher risk of illicit drug use. These programs are shown in the table below and described on the next page.

School-Based Prevention Programs

<table>
<thead>
<tr>
<th>Program name</th>
<th>Age group</th>
<th>Objectives</th>
<th>Blueprints rating</th>
<th>Program costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>LifeSkills Training</td>
<td>12–14</td>
<td>Cultivates skills in self-management, social behavior, drug awareness, and drug refusal related to substance use</td>
<td>Model plus</td>
<td>Teacher training, student materials, and instruction to 600 students costs $10,050; the cost per student is $17.</td>
</tr>
<tr>
<td>Project Toward No Drug Abuse</td>
<td>15–18</td>
<td>Focuses on self-control, social skills, and decisionmaking to effectively deter substance use</td>
<td>Model</td>
<td>Training for 25 teachers, materials, and workbooks for 2,159 students costs $33,800; the cost per student is $16.</td>
</tr>
<tr>
<td>Promoting School-Community-University Partnerships to Enhance Resilience</td>
<td>12–14</td>
<td>Leverages partnerships among universities, schools, and community teams to tackle substance-use issues</td>
<td>Promising</td>
<td>Implementation plan for three communities, staff training, director and coordinator salaries, data collection and reporting costs $148,960; the cost per participant is $123. Cost of the evidence-based program is not included.</td>
</tr>
<tr>
<td>Good Behavior Game</td>
<td>5–11</td>
<td>Reinforces positive behavior in the classroom by monitoring disruptive and aggressive behaviors associated with substance use</td>
<td>Promising</td>
<td>Training for 20 teachers, coach salary, booster session, and materials for 900 students costs $158,500; the cost per student is $176.</td>
</tr>
</tbody>
</table>

Source: Blueprints for Healthy Youth Development. The Blueprints ratings are as follows: Promising = one high-quality randomized control trial (RTC) or two high-quality quasi-experimental evaluations have indicated significant positive change on intended outcomes; Model = at least two high-quality RTCs or one high-quality RTC and one high-quality quasi-experimental evaluation found sustained impact for a minimum of 12 months after intervention ends; Model Plus = Model criteria as well as independent replication of at least one of the high-quality studies.

For more information, see Evidence-Based Interventions for Adolescent Opioid Use Disorder by Christal Ramos, Lisa Clemans-Cope, Haley Samuel-Jakubos, and Luis Basurto. The report provides more sources for the research summarized here.
The Governor’s Cabinet Opiate Action Team launched Ohio’s statewide drug prevention initiative, “Start Talking!” in 2014. Among other components, the initiative leverages local law enforcement, nurses, parents, and teachers to deliver school-based prevention and resiliency programming to at-risk high school students through “5 Minutes for Life Sessions.” Although these interventions have not been evaluated, they have been well received across the state and have reached nearly 132,000 students (Governor’s Cabinet Opiate Action Team 2017). This initiative also includes the creation of the Health and Opioid Abuse Prevention Education (HOPE) Curriculum, a K-12 curriculum including lessons, assessments and learning materials to develop student knowledge, attitudes and skills to prevent drug abuse. This curriculum was developed to meet the requirements of Ohio House Bill 367, which was passed in 2014 (Ohio Department of Education 2017).

Ohio schools may be able to incorporate these evidence-based prevention programs as part of the “Start Talking!” initiative (see box), and Ohio’s plan to use federal funds to address the opioid crisis identified the Good Behavior Game and LifeSkills as key approaches. School-based interventions should continue to be evaluated (particularly for students with diverse backgrounds), and these programs may be most effective integrated with multiple approaches including family-based prevention, screening and early intervention, and treatment.

CITATIONS
Governor’s Cabinet Opiate Action Team, “Combating the Opiate Crisis in Ohio” (Columbus, OH: Governor’s Cabinet Opiate Action Team, 2017).

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- **LifeSkills Training**: a classroom-based program that aims to reduce substance use among middle-school students. Teachers receive training on the LifeSkills curriculum and incorporate the 30-session program over three years to teach skills in self-management, social behavior, drug awareness, and drug refusal. This intervention has also been integrated with the Strengthening Families Program for Parents and Youth 10–14, a seven-session family-based intervention that teaches parenting and youth skills (Spoth 2013).

- **Project Toward No Drug Abuse**: a classroom-based program in high schools on the importance of self-control, social skills, and decisionmaking to effectively deter substance use through 12 40-minute sessions led by teachers or health educators over four weeks.

- **PROSPER, or Promoting School-community-university Partnerships to Enhance Resilience**: an intervention that uses community partnerships to offer evidence-based programs, such as the LifeSkills curriculum, through a cooperative coalition among schools, the community, and universities. Together, the partnership selects an evidence-based intervention to implement with middle-school youth and families to prevent adolescent substance-use problems.

- **Good Behavior Game**: a classroom-based intervention to reduce disruptive and aggressive behaviors in elementary-school students, which are a risk factor for adolescent substance use. Early in the intervention, the Good Behavior Game is played three times a week for 10 minutes; by the middle of a school year, it may be played every day for longer. Teachers first use the game to promote good behavior by rewarding students after each game; later, the game uses delayed reinforcement.

School-Based Interventions in Ohio

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