

Intervention: Interventions that are appropriate for students' age and level of substance use

Finding: Sufficient evidence for effectiveness

Potential partners to undertake the intervention:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Nonprofits or local coalitions | <input type="checkbox"/> Businesses or labor organizations |
| <input checked="" type="checkbox"/> Schools or universities | <input type="checkbox"/> Media |
| <input type="checkbox"/> Health care providers | <input checked="" type="checkbox"/> Local public health departments |
| <input type="checkbox"/> State public health departments | <input type="checkbox"/> Policymakers |
| <input type="checkbox"/> Hospitals, clinics or managed care organizations | <input type="checkbox"/> Other: |

Background on the intervention:

Since many interventions for youth are performed in schools, it is often possible for practitioners to target programs by age and likely stage of substance abuse for the greatest effectiveness.

Findings from the systematic reviews:

This topic addresses three issues:

- 1) **Developmental appropriateness** - A number of reviewers mention the importance of using programs that are appropriate for the developmental stage of the youth.
- 2) **Stage of substance use** - Once again, it is important to consider the stage of your audience. As youth grow older, there is likely to have been more experimentation, more use, and more abuse of drugs within the cohort. This is important to take into account when designing an age-targeted program.
- 3) **'Best' age and stage of use** - A few researchers have attempted to discern the ages and stages of use at which interventions are the most effective. Tobler, et al., estimate that interactive programs taught in junior high may be the best choice. However, the reviewers did not find the data adequate to strongly recommend junior high programs over programs aimed at other age groups.

Limitations/Comments:

Surprisingly, few researchers have focused their efforts on determining at which ages or stages of use interventions might be the most appropriate. It is hoped that, in time, evidence will emerge about which are the most important target groups.

References:

Hawkins EH, Cummins LH, Marlatt GA. Preventing substance abuse in American Indian and Alaska native youth: promising strategies for healthier communities. *Psychol. Bull.* 2004 Mar; 130(2):304-323

McBride N. A systematic review of school drug education. *Health Educ. Res.* 2003 Dec; 18(6):729-742.

Midford R, Munro G, McBride N, Snow P, Ladzinski U. Principles that underpin effective school-based drug education. *J. Drug Educ.* 2002; 32(4):363-386.

Tobler NS, Roona MR, Ochshorn P, Marshall DG, Streke AV, Stackpole KM. School-based adolescent drug prevention programs: 1998 meta-analysis. *Journal of Primary Prevention* 2000; 20(4):275-336.