

## What Does *Getting Results* Say About Effective Prevention Strategies for High School Youths?

Although effective prevention strategies remain constant across all grade levels,<sup>1</sup> the emphasis of the strategies changes as students mature. High school prevention programs should focus on providing (1) a *consistent and clear prevention message* that aligns with middle school messages during the first year of high school; (2) *credible information* about alcohol, tobacco, and other drugs (ATOD) that matches students' real-life observations; (3) opportunities for students to *practice decision-making skills* through interactive teaching techniques; (4) extra attention and support for *high-risk students*; and (5) *links to community* prevention resources.

### Consistent Prevention Message

The transition from junior high/middle school to high school is often stressful for students. They may experience new or increased opportunities to experiment with alcohol, tobacco, or other drugs, and they may use these substances to handle the stress of the transition to a new school environment. For these reasons, it is important for high schools to work closely with feeder middle schools to align their prevention curriculum during students' first year in high school. Ideally, prevention lessons for all students throughout their high school years should be derived from an effective, science-based program that was presented to students in their middle school years so that a consistent message is conveyed. The Botvin LifeSkills Training program is one example of a prevention curriculum that targets the middle school years but also includes booster sessions appropriate for ninth grade (*Getting Results*, Part I, pp. 102–103; Part II, pp. 66–67; Update 3, pp. 43–45, 50–55).

### Credible Information and Skills Practice

In high school, students become increasingly aware of the world outside school and any discrepancies between what they are taught in school and what they observe firsthand. As they make the transition from dependent children to independent adults, they are also longing to make their own health-related decisions. Research shows that students' dissatisfaction with drug education programs increases with each grade level, suggesting that dissatisfaction is highest during the high school years. In one study (*Getting Results*, Part I, pp. 96–98), students complained that they were not getting honest information in school. They observed people outside school using a variety of substances with a range of perceived consequences. Researchers recommended that schools implement programs that provide credible information and emphasize youths' decision-making capabilities.

This recommendation is consistent with findings that interactive teaching approaches (role playing, discussions, small-group activities, and peer-to-peer strategies) in which all students practice decision-making and interpersonal skills have the best success rate for reducing drug use (*Getting Results*, Part I, pp. 104–106). For example, Project Northland's comprehensive high school intervention included an eleventh grade curriculum based on a mock-trial program during which students argued cases that involved alcohol-related themes (*Getting Results*, Update 3, p. 40).

There are other science-based curricula that are not reviewed in *Getting Results* that high schools should consider using. Such sources as the California Healthy Kids Resource Center ([www.californiahealthykids.org](http://www.californiahealthykids.org)) can provide information about these programs.

Note: The *Getting Results* documents may be downloaded at <http://www.gettingresults.org>.

<sup>1</sup> Effective prevention strategies require that schools use science-based classroom curricula that have been demonstrated to be effective; provide a caring environment in which students are expected to meet high expectations; and reinforce the prevention message about alcohol, other drugs, tobacco and violence at school, at home, and in the community.

## Students at Highest Risk

During high school, students may begin to participate in high-risk behaviors, such as using drugs and tobacco, engaging in acts of violence, or getting pregnant. A 1996 review of drug-use prevention research suggests that current “universal” (i.e., for all students) prevention approaches are unlikely to be effective with the most vulnerable groups of young people (*Getting Results*, Part I, pp. 100–101). Intensive interventions for high-risk students in high school are needed; such programs may be lengthy and require significant commitment, but they can have a far-reaching impact on both academic and psychosocial outcomes. An example cited in *Getting Results* (Update 3, pp. 46–49) is the Personal Growth class, a regularly scheduled school course that is part of the Reconnecting At-Risk Youth program. The class deals with issues such as group support, development of friendship, positive teacher-student relationships, decision making, personal control, and interpersonal communication.

Project PATHE (Positive Action Through Holistic Education) also uses an environmental approach to increase students’ bonding to school and student success in middle and high schools. Teams of students and staff design classroom and school rules and ways to improve the school climate; teach study skills; adopt cooperative learning approaches; and provide specific services to high-risk students. As a result high-risk youths in high school showed significant improvement in school attendance and academic achievement and reduced drug involvement. For the general population of high school students, Project PATHE reduced delinquency and drug involvement (*Getting Results*, Part I, pp. 132–134).

### High School Programs with a Focus on High-Risk Youths

Program Title	Program Approach and Focus	Outcomes and Effectiveness	<i>Getting Results</i> Reference
<b>Project PATHE (Positive Action Through Holistic Education)</b>	Delinquency and AOD use (grades 6–12) through school organization and management, tutoring, and counseling	Significant reductions in serious delinquency, drug involvement, and suspensions; significant increases in attachment (bonding) to school.	Part I, pp. 132–134
<b>Reconnecting At-Risk Youth</b>	Dropouts/suicide/AOD use (grades 9–12)	Significant declines in suicide risk behaviors and deviant peer bonding; improved grade point averages, self-esteem, and school bonding levels.	Update 3, pp. 46–49

Offering smoking cessation services in high school is another important intervention for high-risk students as nearly 6 percent of California high school students smoke.<sup>2</sup> Although it can be a challenge to recruit students to participate in cessation, a 1999 study reported success when one curriculum (Tobacco Education Group/TEG) was used to motivate tobacco users to quit, and another (Tobacco Awareness Program/TAP) helped students who were ready to quit (*Getting Results*, Part II, p. 28).

## Links with the Community

As high school students increasingly hold jobs, drive cars, and engage in volunteer advocacy projects, their expanding role in the community reinforces the need for more attention to school-community involvement in high schools. Project Northland is a school-community program to delay and reduce adolescent alcohol behaviors. The high school phase of the project consisted of community organizing to reduce the availability of alcohol, parent education, youth development activities, media advocacy, and an eleventh grade school curriculum (*Getting Results*, Update 3, pp. 39–42). Youth development strategies in which students learn skills, contribute to their community, and receive positive feedback from community members are critical to an effective high school prevention program (*Getting Results*, Update 1).

<sup>2</sup> “Youth Smoking,” Tobacco Control Section, California Department of Health Services, 2002 (fact sheet).