

**A Summary of Evaluations of the Impact of
PRIME For Life**
For Young People



*Lifetime
Risk Reduction
That WorksSM*

Table of Contents

IOWA, 2006	1
ALASKA, 2006.....	2
KENTUCKY DEPARTMENT OF JUVENILE JUSTICE PROGRAMS, 2002-2003	3
ANCHORAGE, ALASKA SCHOOL DISTRICT, 2002-2003.....	4
ANCHORAGE, ALASKA SCHOOL DISTRICT, 2001-2002.....	5
KENTUCKY EARLY INTERVENTION PROGRAM, 2001-2002	6
KENTUCKY EARLY INTERVENTION PROGRAM; SPALDING UNIVERSITY, 1997-2000.....	7
WINNEBAGO COUNTY DEPARTMENT OF COMMUNITY PROGRAMS (OSHKOSH, WI), 1995.....	8
KENTUCKY AND OHIO SCHOOLS, 1986-1988.....	9
ABOUT PREVENTION RESEARCH INSTITUTE.....	10

Iowa, 2006

POPULATION:

696 youth under age 21 who attended PRIME For Life between January and June, 2006, in a court mandated program in Iowa. Twenty-four percent had one or more arrests for impaired driving.

EVALUATION DESIGN:

One survey (pre-test) was completed before attending the PFL class and a second survey (post-test) was completed immediately after class. Matched pre-test and post-test data was available for 612 students.

EVALUATOR:

Prevention Research Institute, in consultation with REACH of Louisville, Inc.

REFERENCE

PRIME For Life Under 21 Iowa 2006 Youth Evaluation Report, Prevention Research Institute, Inc.

FINDINGS:

◆ *Changes in Attitudes, Beliefs, Perceptions of Risk, and Motivation to Reduce Use*

High-risk drinking and drug use choices are supported by common attitudes, beliefs, and risk perceptions on several dimensions, as well as low motivation to reduce use. After attending PFL, participants who were 17 years old and younger and those 18-20 years old each indicated significantly greater:

- agreement with attitudes and beliefs that are supportive of making low-risk choices;
- perception of risk associated with high-risk drinking and drug choices;
- perception of personal risk for developing alcoholism;
- motivation to reduce their use.

The beliefs “If I drink as much as in the past, I could develop alcoholism,” and “If I use drugs as much as in the past, I could become addicted,” changed significantly more for participants who designated having three or more indicators of possible dependence than for those who with no indicators.

◆ *Behavioral Intentions and Detailed Plans*

☞ 42% of those who had been making high-risk drinking choices in the 30 days before the program indicated they intend to make low-risk drinking choices in the 30 days following the program.

☞ 34% of those who used marijuana or other drugs in the 30 days before the program indicated intentions to not use in the following month.

☞ Nearly 70% of participants also indicated that they had made detailed plans to avoid high-risk drinking and drug use and to substitute other activities.

◆ *Response to the Course*

At the end of the course, most participants agreed that PRIME For Life helped them to decide to abstain or drink and/or use drugs less, helped them feel confident in being able to abstain or drink less or use drugs less, and helped them to develop skills to be able to abstain or drink less or use drugs less. These findings are consistent with the participants’ reported intentions to make less risky choices in the future.

Alaska, 2006

POPULATION:

86 youth under age 21 with alcohol-related offenses who attended *PRIME For Life* between January and June, 2006, under the jurisdiction of the Alaska Department of Health and Human Services Division of Behavior Health. Twenty-four percent had one or more arrests for impaired driving.

EVALUATION DESIGN:

One survey (pre-test) was completed before attending the PFL class and a second survey (post-test) was completed immediately after class. Matched pre-test and post-test data was available for 63 students.

EVALUATOR:

Prevention Research Institute, in consultation with REACH of Louisville, Inc.

REFERENCE

PRIME For Life Alaska 2006 Evaluation Report, Prevention Research Institute, Inc.

FINDINGS:

◆ *Changes in Attitudes, Beliefs, Perceptions of Risk, and Motivation to Reduce Use*

High-risk drinking and drug use choices are supported by common attitudes, beliefs, and risk perceptions on several dimensions, as well as low motivation to reduce use. Though not all changes were statistically significant, after attending *PRIME For Life*, participants indicated greater:

- agreement with attitudes and beliefs that are supportive of making low-risk choices;
- perception of risk associated with drinking 6-7 drinks once or twice a week and marijuana use;
- perception of personal risk for developing alcoholism;
- motivation to reduce their use (by those with three or more indicators of possible alcohol dependence).

The beliefs, “My current drinking and drug choices could interfere with keeping the things I value” and “If I drink as much as in the past, I could develop alcoholism,” changed significantly more for participants who designated having three or more symptoms of possible dependence than for those who with no symptoms.

◆ *Behavioral Intentions and Detailed Plans*

- ☞ 65% of those who had been making high-risk drinking choices indicated they intend to make low-risk drinking choices in the 30 days following the program—one-third of which intend to abstain.
- ☞ One third of those who used marijuana or other drugs in the 30 days before the program indicated intentions to not use in the following month.
- ☞ Over 60% of participants also indicated that they had made detailed plans to avoid high-risk drinking and drug use and to substitute other activities.

◆ *Response to the Course*

At the end of the course, most participants agreed that *PRIME For Life* helped them to decide to abstain or drink and/or use drugs less, helped them feel confident in being able to abstain or drink less or use drugs less, and helped them to develop skills to be able to abstain or drink less or use drugs less. These findings are consistent with the participants’ reported intentions to make less risky choices in the future.

Kentucky Department of Juvenile Justice Programs, 2002-2003

POPULATION:

At least one survey was received from 381 youth in group homes, day treatment, residential and other Kentucky Department of Juvenile Justice programs. The youth received either the 12-hour or 20-hour PRIME For Life Under 21 (PFL); most received the 20-hour version. About 55% of the youth were in day treatment and a third in residential programs.

EVALUATION DESIGN:

One survey (pre-test) was completed before attending the PFL class and a second survey (post-test) was completed immediately after class. Matched pre-test and post-test data was available for 216 students (57% of those that provided at least one survey).

EVALUATOR:

Norman Van Tubergen, Ph.D., Associate Professor, Department of Communications, University of Kentucky.

REFERENCE

Van Tubergen, N. (2004). *PRIME For Life Under 21 Program Evaluation for the Kentucky Department of Juvenile Justice*. Prevention Research Institute, Inc.

FINDINGS:

- ◆ Statistically significant and desired changes on measures of perception of risk were found. After completing the PFL program, young people:
 - ☞ Showed positive changes in attitudes about drinking and about the use of marijuana;
 - ☞ Increased their perception of risks on all three marijuana items, for trying 1 or 2 drinks, and for consuming 4 or 5 drinks daily (probabilities ranged from 0.05 to 0.001); while the other two drinking items approaching significance (probability level of 0.10);
 - ☞ Showed reductions in the numbers of drinks they believe poses risk for themselves and others;
 - ☞ Rated their personal risk for developing alcoholism from their past choices higher.

- ◆ In addition, following PFL:
 - ☞ The youth indicated intentions to make high-risk drinking choices less often;
 - ☞ Nearly two-fifths felt at least 80% committed to their low-risk guidelines (average: approximately 60%);
 - ☞ Nearly three-fifths were very sure or somewhat sure they would follow their guidelines (average 3.6 on a 5-point scale);
 - ☞ Nearly two-thirds agreed that the guidelines will work in the real world (average 3.8 on a 5-point scale);
 - ☞ Among the 71.2% who reported using drugs in the past two years, more than three-fifths said they planned not to use drugs in the future; less than 11% indicated they did not plan to change their drug use behavior.

Anchorage, Alaska School District, 2002-2003

POPULATION:

266 youth mandated to attend PRIME For Life Under 21 (PFL) for violation of alcohol and/or drug policy. The delivery of the *PRIME for Life* program is a collaborative effort between AKEELA, Volunteers of America of Alaska, and the Anchorage School District.

EVALUATION DESIGN:

One survey (pre-test) was completed before attending the 20-hour PFL class and a second survey (post-test) was completed immediately after class. The third survey (follow-up) was mailed to students three months after program completion. Matched pre-test and post-test data was available for 94% of students; matched follow-up survey data was available for 19% of the students.

EVALUATOR:

Wendy Kallina, Ph.D., Prevention Research Institute.

REFERENCE

Kallina, W. (2003) *PRIME For Life Alaska*. Prevention Research Institute, Inc.

FINDINGS:

- ◆ Statistically significant and desired changes on measures of perception of risk were found. After completing the PFL program, young people:
 - ☞ Agreed that their current level of drinking posed a risk for developing alcoholism;
 - ☞ Agreed that their current level of drug use posed a risk for developing an addiction;
 - ☞ Increased their perception of the risks of heavy episodic drinking for themselves and others;
 - ☞ Increased their perception of the risks of regular marijuana use for themselves and others.

- ◆ At the three-month follow-up:
 - ☞ 56% of students reported abstaining from alcohol after completing PFL;
 - ☞ 55% of students reported abstaining from drugs after completing PFL;
 - ☞ 23% of students reported decreasing their drug use after completing PFL;
 - ☞ 22% reported making no changes in their drug use.

Anchorage, Alaska School District, 2001-2002

POPULATION:

209 youth mandated to attend PRIME For Life Under 21 (PFL) for violation of alcohol and/or drug policy.

EVALUATION DESIGN:

One survey (pre-test) was completed before attending the 20-hour PFL class and a second survey (post-test) was completed immediately after class. The third survey (follow-up) was mailed to students three months after program completion. Students mailed the follow-up surveys directly to PRI and received a free movie pass for completing the survey. 253 youth attended the PFL program between September 2001 and May 2002, of which 209 (83%) provided pre- and post-tests that could be matched. Follow-up surveys were returned by 85 participants (34% of all students; 41% of the 209 with matched pre/post data).

EVALUATOR:

Wendy Kallina, Ph.D., Prevention Research Institute.

REFERENCE

Kallina, W. (2002) *PRIME For Life Alaska*. Prevention Research Institute, Inc.

FINDINGS:

- ◆ Statistically significant and desired changes on measures of perception of risk were found. After completing the PFL program, young people:
 - ☞ Reported more accurate understanding of who is at risk for alcoholism;
 - ☞ Held fewer risky beliefs regarding alcohol and drugs;
 - ☞ Increased their perception of risk of heavy episodic drinking;
 - ☞ Increased perception of risk regarding regular use of marijuana.

- ◆ At the end of the program (post-test):
 - ☞ 52% of drinking youth intended to never or rarely make high-risk choices in the future;
 - ☞ 48% intended not to use drugs in the future;
 - ☞ 46% intended to decrease their drug use in the future.

- ◆ At the three-month follow-up:
 - ☞ 65% reported making no high-risk drinking choices since completing PFL;
 - ☞ 43% reported no drug use since completing PFL;
 - ☞ 41% intended to decrease their drug use since completing PFL.

Kentucky Early Intervention Program, 2001-2002

POPULATION:

Kentucky youth between the ages of 13-18 who had first or second time substance abuse-related charges and after screening were determined to be appropriate for an educational intervention program. This report is on 474 participants in the Early Intervention Program who completed the PRIME For Life program between October 2001 and March 2002, and for whom PRI pre-tests and post-tests and Spalding University intake information for the students were available.

EVALUATION DESIGN:

Data for this report were gathered by researchers at Spalding University and at Prevention Research Institute (PRI). Students referred to the Early Intervention Program and their parent(s) completed surveys, developed by Spalding researchers, during the intake process for the program (for further information see Cummings, Johnson & Linfield, 2002). This information was matched to two PRI surveys completed by the students. One survey (pre-test) was completed before attending the 12-hour PFL class and another survey (post-test) was completed immediately after class. To measure short-term changes in perception of risk, pre-intervention and post-intervention views were compared.

EVALUATOR:

Wendy Kallina, Ph.D., Prevention Research Institute; Data collection: Spalding University School of Social Work and PRI.

REFERENCE

Kallina, W. (2002) *PRIME For Life: Preliminary Results for the Early Intervention Program*. Prevention Research Institute, Inc.

FINDINGS:

- ◆ Analyses revealed statistically significant and desired changes on measures of perception of risk. After completing the PRIME for Life program, youth:
 - ☞ Evidenced a more accurate understanding of who is at risk for alcoholism;
 - ☞ Increased their perception of risk of heavy daily drinking and heavy episodic drinking;
 - ☞ Assessed the risks associated with occasional and regular marijuana use significantly higher.

- ◆ At the conclusion of the PFL program participants were able to examine their past drinking choices and drug choices and state their future intentions:
 - ☞ 48% of youth intended never to make high-risk drinking choices in the future;
 - ☞ 31% of youth intended rarely to make high-risk drinking choices in the future;
 - ☞ 58% of youth intended never to use drugs in the future;
 - ☞ 36% of youth intended to decrease their drug use in the future.

- ◆ Students' perceptions of PFL were as follows:
 - ☞ 76% agreed the class changed their thinking about how much and how often they should drink;
 - ☞ 71% of youth agreed that the class changed their thinking about drug use.

Kentucky Early Intervention Program; Spalding University, 1997-2000

POPULATION:

2296 Kentucky youth between the ages of 13-18 who had first or second time substance abuse-related charges, and after screening were determined to be appropriate for an educational intervention program.

EVALUATION DESIGN:

From November 1997 to February 2000, the youth and their parents received pre-tests at the onset of the intensive education program and post-tests at the end of their diversion agreements, approximately six months later. There was an additional follow-up at 18 months, which showed very positive results; however, those findings are not included below because they are based on less than 4% of the original sample.

EVALUATOR:

Spalding University School of Social Work.

REFERENCE

Cummings, P., Johnson, J. and Linfield, K. (2002). *Kentucky Division of Substance Abuse Evaluation of the Early Intervention Program: Final Report.*

FINDINGS:

- ◆ In the six months prior to participation in the educational program, 31.7% reported abstaining from beer, 78.3% from wine, 50.1% from liquor and 48.6% from marijuana.
- ◆ At the end of the diversion program, 21% more (52.7%) reported abstaining from beer, 8.2% more (86.5%) from wine, 20.7% more (70.8%) reported abstaining from liquor, and 17.9% more (66.5%) reported abstaining from marijuana; all highly statistically significant increases in abstinence.
- ◆ Before the program, there was a strong, statistically significant relationship between the youth's perception of harmfulness of alcohol and marijuana and their report of use in the past six months, with the youth reporting infrequent use of alcohol and drugs having much higher perception of harmfulness than those reporting more frequent use.
- ◆ At the six-month follow-up, the youth reported statistically significant increases on several perceptions of the harmfulness of alcohol and on the perceptions that marijuana can affect school performance and can be addictive. The youth who had increases in these perceptions of harmfulness were the most likely to report reduced use of these substances.

COMMENTARY:

While the above results are very positive, it is important to note that only about 18% of the youth had matched data at the six-month follow-up. Unfortunately, the researchers did not provide information on how similar or dissimilar the youth with matched follow-up data were to the youth with unmatched data or who were not successfully followed up. In addition, due to the lack of a control group, it is unknown as to what extent other factors, such as the parents' reaction to the arrest, had on the youth's substance use. Nonetheless, the study found significant increases in perceptions of harmfulness, such as increases in the belief that marijuana can be addictive. Most of these changes in perceptions logically seem to be due to a large extent to the experience of the PRIME For Life Under 21 curriculum. This, along with the analyses conducted by PRI in 2002 (see above), suggest that the curriculum played a major role in the significant decrease in use and increase in abstinence among the young people in the study.

Winnebago County Department of Community Programs (Oshkosh, WI), 1995

POPULATION:

130 students who received an underage drinking citation completed the 12-hour Talking About Alcohol in a Youth Diversion Program curriculum (an earlier version of PRIME For Life Under 21) were compared to 246 students who had the same offense but did not attend the program.

EVALUATION DESIGN:

The recidivism rate for those who chose to attend the program and pay the \$50 enrollment fee was compared to the recidivism rate for those who opted to go to court, pay a fine and have their license suspended, with the possibility of their insurance rate increasing.

EVALUATORS:

Dan Hinton, Prevention Services Coordinator, Winnebago County Department of Community Programs and Brian Fuchs, Student Intern; University of Wisconsin Oshkosh.

REFERENCE

Fuchs, B. (1995) *Option! Juvenile Alcohol Diversion Program*. Department of Social Work, University of Wisconsin Oshkosh.

FINDING:

- ◆ Youth who received the Talking About Alcohol in a Youth Diversion Program curriculum as part of their court diversion agreement had a lower recidivism rate (6.2%) than those who did not receive the program during the diversion period (17.3%).

Kentucky and Ohio Schools, 1986-1988

POPULATION:

475 seventh and ninth grade students in seven districts (urban, suburban & rural) in Kentucky and Ohio.

EVALUATION DESIGN:

Pre and post written surveys were given to students in ten schools who had completed PRI's first curriculum for youth, *Talking With Your Students About Alcohol* (TWYSAA), and to a control group who did not receive the program. Students attended the program in one grade (either seventh or ninth). Post-tests were given for one, two, and three-year follow-ups. For students who received TWYSAA in the fall semester of the seventh grade, matched-pair data were secured for 475 at end of the seventh grade (49% retained), 251 in the eighth, and 30 in the ninth. For students who received TWYSAA in the fall semester of the ninth grade, data were available for 341 at one year follow-up, 73 in the second, and 99 in the third year.

EVALUATOR:

Norman Van Tubergen, Ph.D., Associate Professor, Department of Communications, University of Kentucky, designed the evaluation and collected the data. PRI analyzed the data, with Dr. Van Tubergen as consultant.

REFERENCE

Daugherty, R. and O'Bryan, T. (1988). *Second Report: Talking With Your Students About Alcohol*. Submitted to the Kentucky Cabinet for Human Resources. Prevention Research Institute. Inc.

FINDINGS:

- ◆ Significant differences in abstinence rates of seventh graders who completed TWYSAA, at one and two-year post-tests:
 - ☞ Seventh graders who drank prior to receiving TWYSAA showed a nearly five times greater abstinence rate than controls (33% vs. 7%) by the end of seventh grade.
 - ☞ Of 88.8% seventh graders who abstained at pretest, 83% abstained at end of seventh grade. At the eighth grade post-test, 80% of TWYSAA students abstained, vs. 60% of controls.
- ◆ A small but nonsignificant difference in abstinence rate at third year post-test was found for students receiving TWYSAA in the seventh grade. *[This finding is in keeping with outcomes from other programs, regarding the fade-out effect in high school when booster sessions are absent or inadequate. PRI recommends booster sessions in subsequent grades.]*
- ◆ Significant, desirable differences in attitudes that are associated with low-risk choices were found for TWYSAA students (from the seventh-grade group) at one and two-year post-tests.
- ◆ Ninth graders receiving TWYSAA had more than a two times greater increase in abstinence by the end of the tenth grade compared to controls (43% vs. 17%).
- ◆ Of ninth graders who reported drinking four or more drinks on an occasion prior to receiving TWYSAA, only 56% still did so at the end of the ninth grade, compared to 79% of the control group.

About Prevention Research Institute

Prevention Research Institute is a private not-for-profit organization that pioneered the Risk Reduction approach to alcohol and drug problems in 1983. Ray Daugherty and Terry O'Bryan, co-founders of Prevention Research Institute and co-authors of the Risk Reduction series, bring years of experience and strong commitment to their work of reducing the incidence of alcohol- and drug-related problems. Additionally, the professional staff has extensive experience in the prevention, early intervention, and treatment of alcohol and drug problems. The Prevention Research Institute regularly provides workshops in the Lifestyle Risk Reduction programs throughout the country.

PRI's PRIME For Life program is used for people of all ages. The curriculum does more than simply give information about alcohol and drugs. It has been carefully designed to function as "therapeutic education" for people who make high-risk drinking and drug-using choices. The program does not moralize or dictate, but instead uses its unique content and process in a delivery that avoids the emotional land mines and defense mechanisms so often utilized by participants in impaired driving programs. The program serves people who do not have alcoholism through its prevention message, while still reaching participants with alcoholism with its non-threatening pretreatment content.

Prevention Research Institute's impaired driving curriculum is used statewide in Georgia, Hawaii, Indiana, Iowa, Maine, North Dakota, Rhode Island, and South Carolina, and is one of two programs mandated in Kentucky. The program is used statewide for young people in Alaska and South Dakota.

For additional information, contact Mark Nason, research analyst, at mark@askpri.org or 859-296-5048. Other evaluation information can be found at www.askpri.org. or phone 888-2ASK PRI (888-227-5774) or regular mail 841 Corporate Drive, #300, Lexington, Kentucky

