

Reed Hruby

Heroin Prevention Initiative

Project Evaluation



THE IOWA CONSORTIUM FOR SUBSTANCE ABUSE RESEARCH AND EVALUATION

EXECUTIVE SUMMARY

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**Reed Hruby Foundation
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Executive Summary

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EXECUTIVE SUMMARY

Project Background/Overview

A formative and summative evaluation conducted by the Iowa Consortium for Substance Abuse Research and Evaluation examined the pilot implementation and effectiveness of a new heroin prevention initiative developed by the Robert Crown Center for Health Education. The pilot program and evaluation were conducted in four communities representing Cook, DuPage, Will and Lake Counties in the greater Chicago area. The evaluation was designed to determine the integrity of implementation of the program and to assess outcomes for students, parents and educators.

Background Information

The heroin prevention initiative began in 2010 when Roger and Nadeane Hruby awarded a grant to the Robert Crown Center to develop a prevention program in memory of their grandson, Reed Hruby, who died from a heroin overdose in 2008. During the first year of the initiative, the Robert Crown Center commissioned the Illinois Consortium on Drug Policy (ICDP) at Roosevelt University to conduct research on the alarming increase in heroin use among suburban teens in the Chicago area. Research showed that heroin use among teens had increased by 46% and heroin deaths had increased by 130% to 150% in collar counties surrounding Chicago. In interviews conducted with teens and young adults with a history of heroin use, researchers learned that an effective prevention program needed to emphasize: (a) the neuroscience behind heroin dependence and addiction; (b) the rapid progression from heroin experimentation to dependence to addiction; (c) the relationship between prescription pain medication abuse and heroin use; (d) the transition years from middle school to high school as vulnerable periods for substance abuse and addiction; (e) inclusion of effective messengers to communicate information; and (6) opportunities for teens to observe the impact of heroin addiction through social media and other technology avenues.

Using the results of the research findings from Roosevelt University and input from stakeholders that included youth, parents, educators, addiction specialists and community members, the Robert Crown Center identified four major goals for the heroin prevention program they would develop:

1. Increase knowledge and understanding among youth, parents and school personnel about heroin – how heroin affects the body; the rapid progression from experimentation to dependence; and how heroin use today differs from the past.
2. Increase knowledge and understanding by youth, parents and school personnel about the relationship between prescription pain medication abuse and heroin use.
3. Increase understanding among youth, parents and school personnel about the reasons why youth use heroin.
4. Increase knowledge of parents and school personnel about how to communicate effectively with teens and youth about heroin.

The resulting program addresses these goals through a comprehensive, whole-school, educational framework that integrates distinct knowledge-building strategies for middle school and high school students, parents and school personnel. The program is implemented in school clusters with each cluster comprised of a high school and its feeder middle schools. This delivery model ensures that students receive age-appropriate information about heroin during the vulnerable transition years in teen development. The delivery of the student program is flexible so that individual schools can use a delivery method that works best for them such as during specific academic classes or advisory periods.



During the 2012-2013 school year Robert Crown Center’s new heroin prevention program was piloted and evaluated in 11 high schools and middle schools in Cook, DuPage, Will and Lake counties. The following sections describe the methodology used for the evaluation and the evaluation results.

Methodology

Participants

Pilot Communities and Schools		
County	Community	School
DuPage	Naperville	Neuqua Valley High School
		Scullen Middle School
		Crone Middle School
Cook	Palos Park	Palos South Middle School
	Palos Hills	Stagg High School
Will	Joliet	Joliet Central High School
		Joliet West High School
	Plainfield	Troy Middle School
Lake	Vernon Hills	Vernon Hills High School
		Hawthorn Middle School North
		Hawthorn Middle School South

Illinois School Report Card data were used to ensure that the participating communities and schools were demographically diverse. More than 7,000 students participated in the heroin prevention program with grade level distribution as follows: Grade 8 – 23%; Grade 9 – 40% and Grade 10 – 37%. Over 400 parents attended heroin information sessions and over 1,500 staff completed the school staff trainings.

Evaluation Measures

Semi-structured process interviews were conducted to assess: (a) barriers/challenges to program development and implementation; (b) fidelity of program design and curriculum content to ICDP recommendations; and (c) alignment with input from stakeholders. The following stakeholders participated in process interviews:

- Fourteen Advisory Board and Committee members
- Eight school administrators
- Nine pilot program teachers (teachers who taught the heroin prevention lessons).

Lesson fidelity forms, completed by pilot teachers and RCC facilitators, were used to assess adherence of actual implementation to student and parent program designs.

Supplemental information on project implementation was obtained from the Project Director through verbal reports and electronic documentation.

A census surveying method was used to collect outcomes data on students, parents, and school staff. A pre-post survey design was implemented with students and school staff receiving heroin prevention programming. Baseline and follow-up survey data were collected from parents with children in the participating schools, regardless of whether they attended a heroin education session.



Results/Key Findings

Students

Student survey data show the RCC model was highly effective in changing attitudes and increasing knowledge in the key areas assessed. The programmatic goals for students were met. Notable areas of improvement include:

- 89% of students after the program correctly identified that some teens may use heroin because of sad, empty, or anxious feelings.
- 93% expressed confidence in their knowledge of how heroin affects the user's body, thinking, and behavior (up from 66% at pre-test).
- 87% identified that snorting heroin can lead to addiction (up from 65% at pre-test).
- 90% could identify at least three areas of their lives that will be better if they do not use heroin.
- 89% indicated the classes provided good information they did not previously know.

Results showed that students were particularly responsive to the social media case study that was part of the curriculum:

- 83% liked the interactive format.
- 89% found the story believable.
- 87% indicated it was an interesting way to learn.

Parents

Parent follow-up survey data show that parents who attended a heroin education session, compared to those who did not attend*:

- Had more accurate knowledge of drug addiction: 75% vs. 55% correct.
- Had more accurate knowledge of risk and protective factors for drug abuse: 75% vs. 52% correct.

Of those attending a heroin education session:

- 97% indicated the heroin session provided them with new information.
- 100% indicated the heroin session provided them with the kind of information most important for them to know and that they will use with their children.

Among all parents completing the survey (those who did and did not attend a heroin education session), at follow-up:

- 98% indicated they were somewhat or very confident in their ability to discuss alcohol, prescription drug use, and illegal substances with their children.

School Staff

School staff survey data show the RCC model was highly effective in changing attitudes and increasing knowledge and confidence levels in all key areas assessed. The programmatic goals for school staff were met. Notable areas of improvement include:

- 92% of participants indicated after the training that they were confident or very confident in their knowledge of heroin's effects on one's body, thinking, and behaviors, whereas 28% indicated so before the training.

*The sample size of parents attending a session was small, and many parent sessions were shortened from the intended model. Parent outcomes may improve as modifications are made to parent program implementation.



- 98% correctly identified that opioids activate the same reward pathway in the brain as do necessities like food and water (up from 52% before the training).
- 87% indicated they could name three risk and protective factors that may influence whether a teen uses drugs (up from 32% before the training).
- 83% reported feeling confident or very confident in their ability to discuss and answer questions about heroin with students, whereas 28% indicated so before the training.

Regarding the heroin training:

- 97% of staff indicated the heroin training provided them with new knowledge.
- 81% indicated it included information they will use in their interactions with students.

Recommendations

The following key recommendations are proposed for future implementation of the model, both within the pilot communities and elsewhere:

- Expand upon the current use of the following by incorporating them into more of the lessons: technology; online resources; activities that allow students to interact with each other and the material; and activities that allow students to research information and find answers themselves.
- Allow ample time to plan, coordinate, and schedule program sessions.
- Provide additional training and background information for teachers to support lessons involving brain chemistry, if these lessons are not taught by Health teachers.
- Implement the parent program in full 60-minute sessions and evaluate outcomes.
- To reach more parents, hold parent information sessions multiple times for each school and community, varying the time, day, and location, and use a variety of methods for program dissemination (e.g., webinars, videos, printed media).

