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#### **UPCOMING WEBINARS**



MAY 19, 2015: 2PM AEST

Drug and alcohol use among young people. What can parents and schools do to prevent the harms?

DR NICOLA NEWTON AND DR LEXINE STAPINSKI



JULY, 2015

Co-occurring mental health and substance use disorders: how do they affect young people?

DR CATH CHAPMAN



SEPTEMBER, 2015

Early intervention for depression and problematic alcohol use in young people

MR MARK DEADY



NOVEMBER, 2015

Locating free resources to support evidence-based practice

DR ERICA CROME



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#### What is CREMS?

NHMRC Centre of Research Excellence in Mental Health and Substance Use (CREMS)

Directed by Prof Maree Teesson

# CREMS aims to significantly improve

- understanding
- prevention
- treatment



of comorbid mental health disorders and substance use



# Drug and alcohol use among young people. What can parents and schools do to prevent the harms?

Dr Nicola Newton & Dr Lexine Stapinski









#### **Prevention Team & Contributors**

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Funding: NHMRC, Australian Government Department of Health



#### Outline

1. Who gets into trouble with drugs and alcohol, and why does it matter?

2. Can we prevent the problems?



3. How do we help schools and parents access evidence-based resources?

# Alcohol and drugs in Australia

- 80% of Australians (aged 14 & over) drink alcohol
- •More than 1 in 3 (38%) consumed alcohol at a level that put themselves at risk of harm or injury, (26% did this monthly)
- 35% have tried cannabis
- 11% have tried ecstasy
- 1.2% had used synthetic cannabis
- 0.4% other emerging psychoactive substances

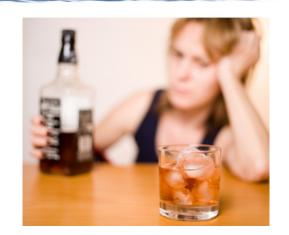


National Drug Strategy Household Survey detailed report

#### Who is most likely to have an alcohol disorder?



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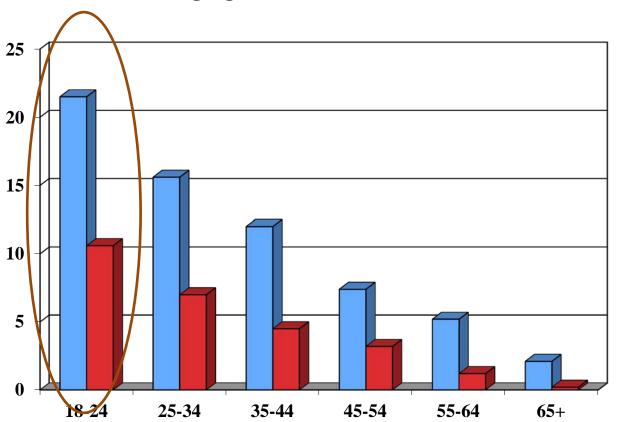


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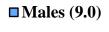


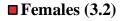
#### Who has a substance use disorder?

- Contrary to common perception, young males are the group most likely to have an alcohol use disorder
- Males are twice as likely to experience problems with alcohol and other drugs
   BUT this is changing





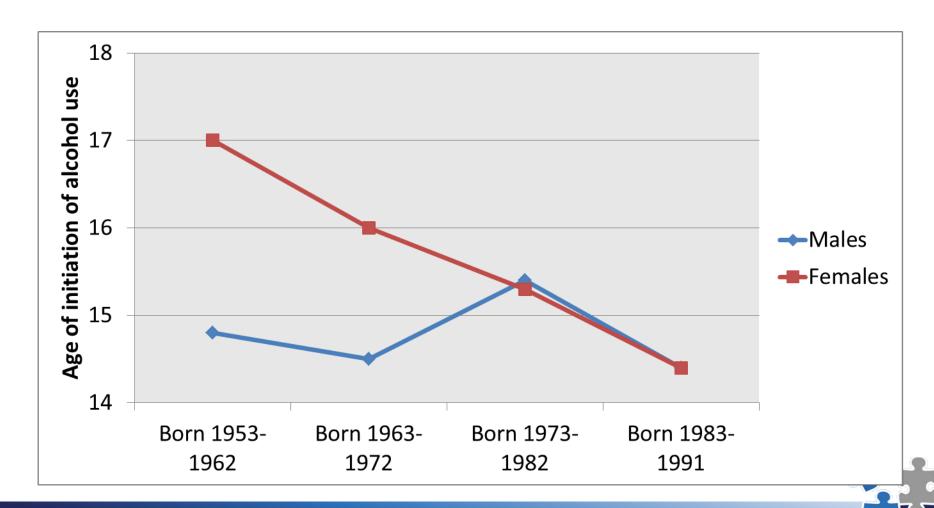






#### At what age do Australians start drinking?

The gender gap is closing...



# Some good news on the horizon....

- More 12–17 year olds are abstaining from alcohol
  - (increased significantly between 2010 and 2013 from 64% to 72%)



- Daily smoking declined significantly between 2010 and 2013 (from 15.1% to 12.8%)
  - Daily smoking rates have almost halved since 1991 (24.3%).
- Younger people are delaying uptake of smoking
  - age at first cigarette increased from 14.2 in 1995 to 15.9 years in 2013.





# Teenagers and Drugs & Alcohol

#### Why it's so important..

- The <u>peak onset</u> of drug and alcohol use in during teenage years
- Associated harms are considerable: peak impact is ages 15-24, alcohol and drug use contribute to the top 3 causes of death
- ★ Earlier initiation → greater risk of adulthood problems (dependence, delinquency, mental health problems, poorer education outcomes

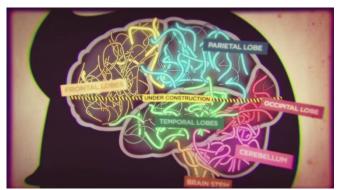
#### Effect on the developing adolescent brain

- Adolescence is a critical period for brain development and maturation
- Alcohol and cannabis impact the brain and functions:
  - Immediate short-term effects
  - Affect how the brain develops: longer term impact
- Recommended video series for young people: "Under Construction" by Turning Point

Alcohol and the Teenage Brain

Cannabis and the Teenage Brain







#### Risk Factors for Teenage drinking

- Many!
- Recent study by Mattick et al (2014) examined a range of individual, family and peer factors on teenage drinking
- Parental factors: rule-setting around alcohol, monitoring of teenagers and consistent rule enforcement protected against teen drinking

The most important risk factors when all were considered were:

- Peer use of alcohol
- The perception of alcohol use as normative ("everyone is doing it")
- Behavioural problems
- Parental supply of alcohol



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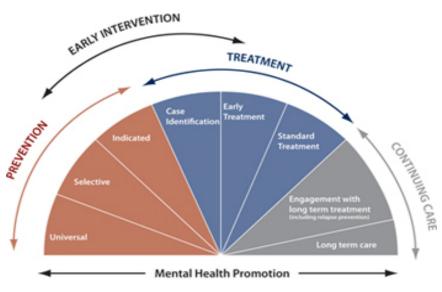


#### Types of prevention

- 1. <u>Universal</u>: delivered to an entire population regardless of level of risk
- 2. <u>Selective:</u> targeted to groups at greatest risk of developing problems

3. <u>Indicated:</u> targeted to those experiencing early symptoms of a

disorder

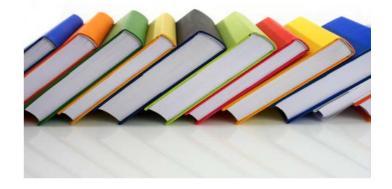






#### Prevention needs to occur early

- School is the ideal location
  - Practical spend > 25% waking lives
  - Time when first start to experiment
  - Tailor messages at developmental levels
  - Educate prior to harmful exposure





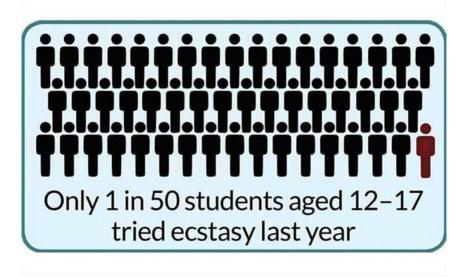
#### Effective principles of school-based drug prevention

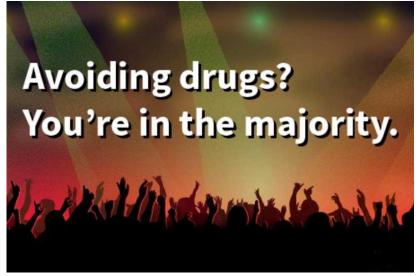
- Evidence-based and theory driven
- Developmentally appropriate & immediately relevant to students
- Implemented prior to harmful patterns of use
- Be part of a comprehensive health education curriculum
- Use peer leadership but keep teacher as the central role
- Employ interactive teaching approaches
- Adopt a social influence or comprehensive approach



# Social Influence: Flip the numbers

- Information facts and harms
- 2. Provide resistance skills training, and
- Incorporate normative education challenge view that "EVERYONE is doing it.." – no they're not!







#### Universal school-based drug prevention

- Evidence-based programs do exist:
  - Life Skills Training program (Botvin et al)
  - School Health and Alcohol Harm Reduction Project (SHAHRP) (Midford & McBride)
  - EU-DAP Study 'Unplugged' program (Faggiano et al)
  - Get Ready program (DEVS Study) (Cahill & Midford)
- Dissemination of evidence-based programs is low
  - 14% schools use programs with correct content and delivery
  - Due to barriers & obstacles that arise when implementing programs in the school environment



#### Universal school-based drug prevention

- Common obstacles to effective implementation
  - Insufficient resources materials, time and money
  - Adaptation
  - Lack of training
  - Commercially based packing
  - Sustainability

Poor implementation poor outcomes



# Innovative new prevention model

- Clearly a new approach was needed that was:
  - 1. Evidence-based: adheres to effective principles of drug prevention
  - Overcame barriers to implementation to increase fidelity & outcomes





# Climate Schools programs

# Universal prevention programs which aim to prevent substance use and related harms in adolescents

- ✓ Social influence approach
- ✓ Harm-minimisation goal
- ✓ Internet-based
- ✓ Easy to implement
- ✓ Embedded in curriculum
- ✓ Age and context appropriate
- ✓ Interactive cartoons & activities
- ✓ Reinforcement booster



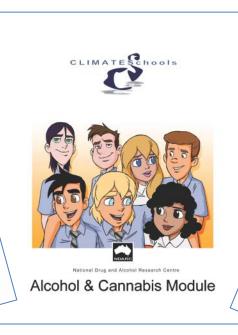


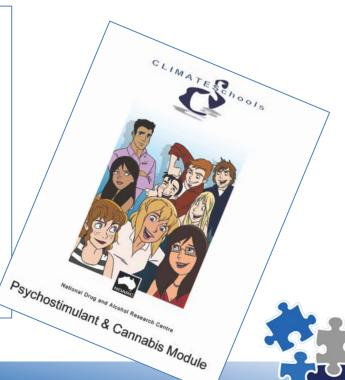
# Climate Schools programs

#### Three modules for Australian high school students

- 1. Alcohol module (Yr 8: 13-14yr olds)
- 2. Alcohol & Cannabis module (Yr 8/9: 13-15yr olds)
- 3. Cannabis & Psychostimulant module (Yr 9/10: 14-16yr olds)







# Climate Schools components

#### Extensive development process

- Focus groups & interviews teachers, students and health prof.
- Developed by the 'user group' for the 'user group'

#### Module = 6 lessons of...

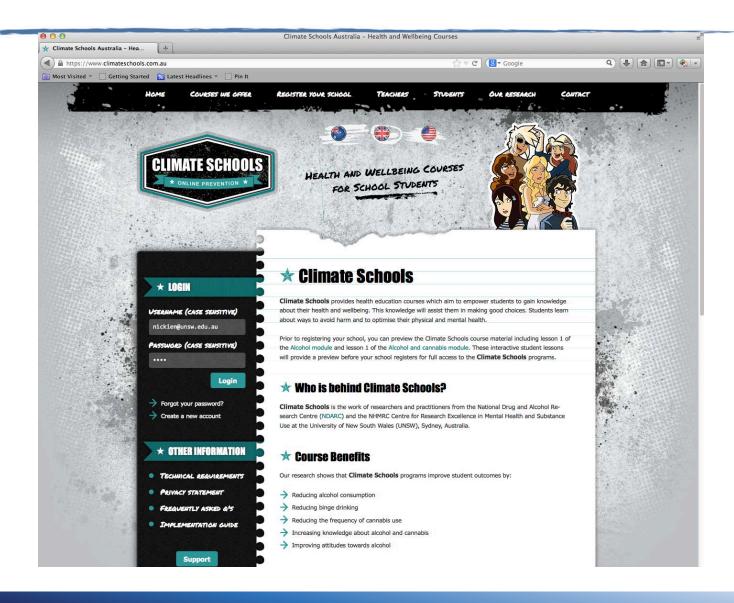
- Part 1: 15 min online
- Part 2: 25 min class activities
  - Assertion skills
  - Calling for assistance
  - Recovery position
  - Decision making
  - Group discussions

#### Covering...

- Alcohol guidelines and laws
- Normative use
- Short & long term risks
- Influences of media & peers
- Drug refusal & harm minimisation skills
- Staying safe & first aid



#### www.climateschools.com.au





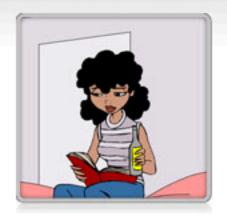


#### Part 1: Online component



#### 🖈 Lessons

#### Alcohol - Lesson 1



This lesson will teach you about:

- Alcohol, the law and underage drinking.
- Standard Drinks.
- Australian Guidelines to reduce health risks from drinking alcohol.
- Identifying the number of standard drinks in alcoholic beverages.
- Societal pressures and expectations to drink alcohol.

Cartoon

Teacher summary



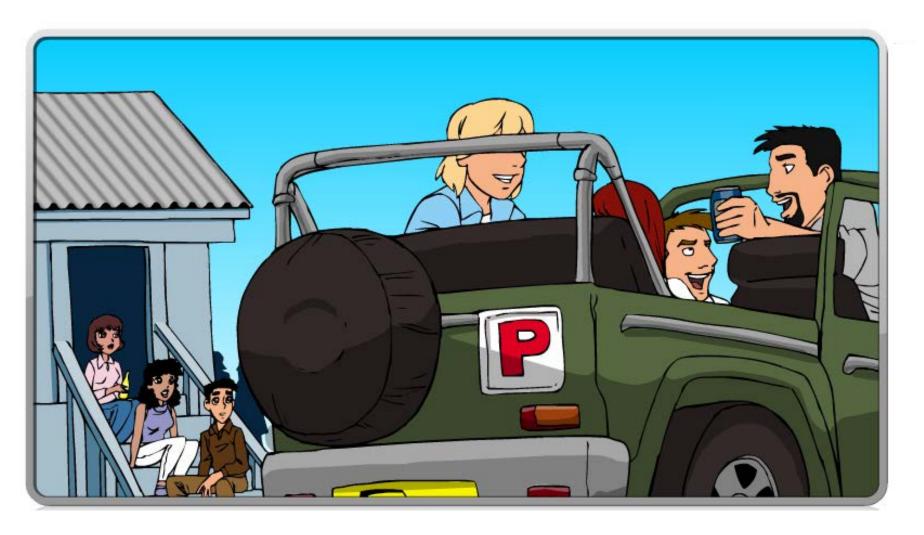




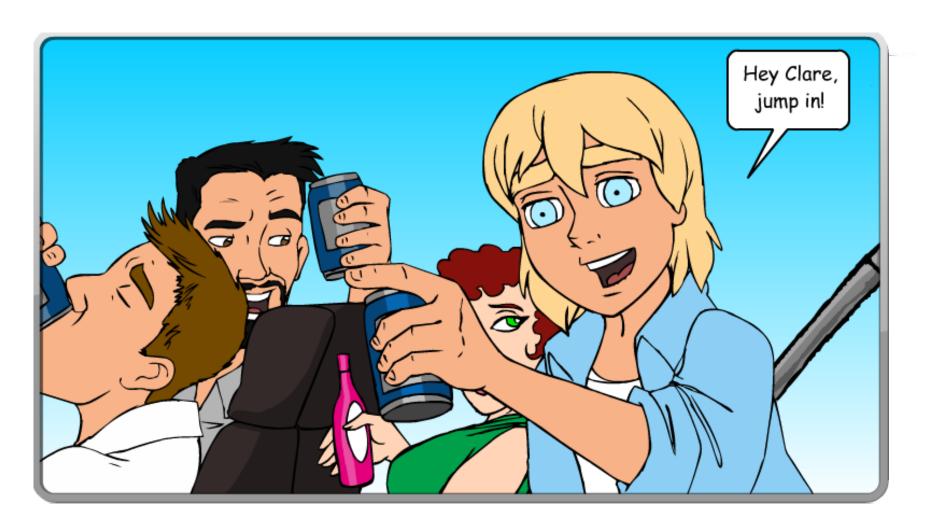












































































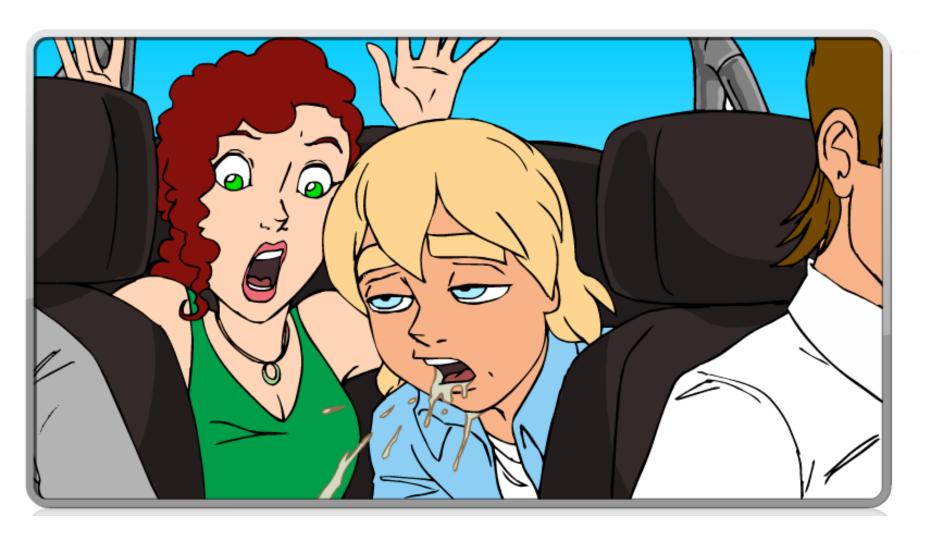
















To be continued....

