

INTRODUCTION

Prevention efforts that utilize the expertise of youth can be structured in a variety of ways allowing youth to play a key role in fostering change within their schools and communities. (Washington Coalition of Sexual Assault Programs, 2011). In Ohio, youth-led programs (YLP) are defined by a particular form of youth engagement. In YLP, young people engage in a planning process where they determine a problem of practice, identify the root causes of the problem, and select and implement evidence-based strategies to address those root causes (Talbert, 2017). Prevention education may be one of the strategies youth choose once they have gone through this planning process. The purpose of this white paper is to describe prevention education and examine its relationship to youth-led programs in Ohio.

DEFINING PREVENTION EDUCATION

Prevention education is a strategy that focuses on the delivery of services to target audiences with the intent of influencing attitude and/or behavior (OhioMHAS, 2016). The goal is to teach participants important social skills which can include resisting pressure to use drugs or developing other skills needed to make healthy choices (Ohio SPF-PFS, n.d.). Prevention education involves two-way communication and is distinguished from information dissemination by the fact that interaction between educator and participants is the basis of the activities. The aim of information dissemination is to educate the public without directing behavior change. Information dissemination may utilize a two-way, interactive approach, but its primary purpose serves to ensure that information, knowledge and opinions are spread widely (OhioMHAS, 2016). For this reason, when two-way communication is used as the core criteria to define prevention education, it becomes challenging to

For more information on youth-led programs, please see the following white papers:

Community-Based Process: This paper explains the foundational role of community-based processes in prevention and youth-led programs.

Media Campaigns: Media campaigns are one strategy young people may choose to implement as a result of their strategic planning process. This paper provides an overview of types of media campaigns and messages.

Policy and Advocacy: Young people have a right to be heard on matters affecting their lives. This white paper provides an overview of how young people can engage in policy and advocacy.

Social Norms: Social norms influence behavioral health. This paper explains how social norm campaigns can be developed and implemented by youth-led programs to create community change.

distinguish it from information dissemination. With this in mind, the traditional definition of prevention education needs to be expanded to include core criteria beyond only “two-way communication.”

ADDITIONAL CRITERIA FOR PREVENTION EDUCATION

Evidence shows that in order for prevention education to delay onset and/or change behavior, attitudes, or beliefs the program must include a skill-building component, be outcome driven, evidence-based and be culturally relevant (NIDA, 2003; WHO, 2003).

Participants in prevention education should come away with the mastery of new ways of solving problems as well as new methods of thinking (skill-building) (NIDA, 2003). NIDA suggests that, for those youth in elementary grades, education programs should focus on: self-control, emotional awareness, and communication, social problem-solving and academic support. For youth in 6th-12th grades, prevention education should focus on increasing study habit skills, communication, peer relationships, self-efficacy, and drug resistance skills, reinforcement of anti-drug attitudes and strengthening of personal commitments against drug abuse (NIDA, 2003).

Prevention education programs should be long-term with repeated interactions over time and are most effective when they employ interactive techniques. The World Health Organization (2002) also states that skill-based education “relies on relevant and effective content and participatory or interactive teaching and learning methods” (p.6). Interactive teaching and learning methods may include peer to peer learning, and/or peer discussion, but most certainly should include time for young people to observe and actively practice the skills they are trying to increase. “Teaching children resistance skills is more effective for reducing problem behaviours than just providing information or provoking fear of the results of the behaviour” (World Health Organization, 2002, p. 22).

Prevention education should be outcome-driven and evidence-based to allow a community to assess the results and impact of the strategy and determine if and to what extent the strategy was effective in achieving the desired objectives. It is important to understand that evidence-based means it is theoretically-driven, has been peer reviewed by a panel of certified experts (often academics), and has been evaluated with demonstrated outcomes for a specific population. These outcomes are at the individual level, as opposed to environmental strategies which are at the community-level. Developers of prevention education curriculum need to have more than just comprehension of a particular subject; developers should have a balance between the informational content and the application of child and adolescent development, cognitive problem solving, and/or critical literacy.

Prevention education must also be culturally relevant and appropriate. Curriculum should be selected with audience characteristics in mind. To reach the intended outcomes, the

curriculum needs to be selected based upon the gender, age, developmental stage, and ethnicity of participants. Curricula that are not selected based on audience characteristics will not achieve the desired outcomes.

Since prevention education must have a skill-building component, be evidence-based and have demonstrated outcomes it is unlikely that homegrown curriculum would be considered prevention education. Homegrown curriculum is content created by young people and/or adults in the community and is typically delivered in brief, and in some cases, one-time presentation. Homegrown curriculum should be viewed as information dissemination. Information dissemination is still an important part of comprehensive prevention efforts, which utilize several strategies across individual and environmental approaches. Creating presentations can be valuable for those young people pulling together the content and can be an important engagement tool for youth-led programs, but these presentations, by themselves, will not create changes in behavior, attitudes or knowledge nor delay onset of alcohol, tobacco, and other drugs misuse.

PREVENTION EDUCATION AND YOUTH-LED PROGRAMS

Given that prevention education should be evidence-based, curriculum developers might indicate who should or should not facilitate the curriculum. The curriculum may indicate that young people may serve as facilitators. In other cases, there may be no evidence to support youth as facilitators. Young people should only facilitate prevention education if the evidence supports them doing so. Regardless, young people can and should be instrumental in selecting prevention education curriculum, especially if the audience for the strategy is youth. Who better to address questions about cultural appropriateness or relevancy than the youth themselves?

One example of prevention education that meets the criteria outlined in this paper, and that many of us are familiar with, is Botvin LifeSkills Training. In order for this curriculum to fit as a prevention education strategy within youth-led programs in Ohio, young people would have engaged in a data-driven planning process where they ultimately selected this curriculum and advocated for it to be implemented in their local setting. The following case study provides another example of how prevention education relates to youth-led programs in Ohio.

CASE STUDY: CLEVELAND RAPE CRISIS CENTER YOUTH 360 PROGRAM

Through their education and social change department the Rape Crisis Center has traditionally provided prevention education over the course of a few weeks through in-classroom presentations with youth about sexual dating violence. The model uses two-way communication and it works as evidenced by their outcomes. However, it follows a typical

classroom/teacher format, and after decades of implementation the Crisis Center also wanted to expand their efforts.

While the organization still provides classroom-based prevention education, they expanded their efforts through the development of a new group, Youth 360. Up to 30 young leaders from high schools throughout Cuyahoga County participate in the group each year and learn how to become effective leaders in the movement to end rape and sexual abuse. Members discuss the dynamics of sexual assault, healthy relationships and a variety of other topics. Over the course of the year they choose, plan, and implement community prevention projects. Young people in the program have an opportunity to design things themselves and take ownership of their work (Washington Coalition of Sexual Assault Programs, 2011). In this sense they began by delivering prevention education, but have expanded to also facilitate a youth-led program.

CONCLUSION

Prevention education is one of the six CSAP strategies. As part of a data-driven strategic planning process, young people in YLP may select prevention education be implemented in their local community. Expanding the definition of prevention education and allowing youth to play a pivotal role in identifying evidenced-based and culturally relevant curriculum affords them the opportunity to positively influence others in their lives. Additionally, placing youth in leadership roles now in which they have an active voice helps them to develop into strong leaders for the future and create more potential for community change.

AUTHORS



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Ohio University's Voinovich School and Leadership and Public Affairs and Prevention Action Alliance collaborated with the Ohio Department of Mental Health and Addition Services (OhioMHAS) to host a series of training and technical assistance (T/TA) activities for adult allies of youth-led programs. This series of white papers was developed by adult allies to support their peers who work with young people to use local data and evidence-based prevention strategies to create meaningful change within Ohio's communities. Dr. Jessica Collura, Ms. Aimee Collins, Dr. Holly Raffle and Mr. Zach Gheen of the Voinovich School of Leadership and Public Affairs supported Ohio's adult allies as they developed the white paper series. Ohio Department of Mental Health and Addiction Services Grant# 1900157 provided funding for the Youth-Led Training and Technical Assistance Project.