



Substance Use Prevention

Promoting the Health and Well-Being of Young People and Communities

The consequences of substance use and misuse can be devastating for individuals, families, and communities. In the United States, nearly 2,800 drivers are arrested for driving under the influence,¹ there are about 5,500 admissions to drug treatment,² and nearly 200 people die from drug overdose (including about 130 from opioids)³ each day. Prevention strategies—classroom programs, media campaigns, policy changes, and health care provider education—can address substance use before it becomes a problem, and we can support your related evaluation and implementation efforts.

Use and misuse of alcohol, marijuana, opioids, and other substances severely impacts the health of young people and communities throughout the United States. Substance use and related consequences can be mitigated by implementing strong prevention programs, practices, and policies. RTI International provides the information you need to generate actionable insights for your community. By partnering with RTI, you will gain access to experts who can help with needs assessments and planning, study design, instrument development, data collection, qualitative and statistical analysis, and the implementation of new prevention strategies.

RTI has experience partnering with government, nonprofit, and corporate clients. Our work informs the prevention field through epidemiological studies to help with needs assessment and planning; research that informs the development of new prevention strategies; and community, state, and national cross-site evaluations that describe the implementation and impact of existing strategies. We develop community capacity, both through community-based participatory research and through our training and technical assistance in community-level evaluation. Our experts work on all phases of the research process from contracts and design to study reporting and presentation.



Project Highlights

Peer Health Exchange (PHE) Evaluation (Peer Health Exchange, 2019–2022). The PHE program trains college students to teach a 16-session, skills-based health curriculum in under-resourced high schools across the country. RTI's evaluation uses survey and archival data to compare students in PHE schools with those in propensity score-matched schools. We are examining outcomes including substance use, sexual behavior, social-emotional learning, academic achievement, mental and physical health, and accessing of related resources.

Evaluation of the Resilient Youth Initiative (North Central Health Services, 2019–2022). This study involves process and outcome evaluation of substance use prevention, social-emotional learning, and mental health promotion programs implemented in approximately 80 primary and secondary schools in 8 counties in Indiana. The evaluation includes collection and analysis of data from surveys with students and program implementers, program observations, and student-level administrative data.

Partners in Prevention Evaluation (Healthcare Foundation of La Porte, 2019–2022). *The Partners in Prevention* initiative supports the implementation of evidence-based substance use prevention programs in kindergarten through 12th grade in schools in La Porte County, Indiana. RTI is conducting a process and outcome evaluation that includes a longitudinal student survey, compilation and analysis of school administrative data, annual surveys and interviews with grant directors, and annual surveys with program implementers.

Prevention Matters Evaluation (Richard M. Fairbanks Foundation, 2018–2022). The Richard M. Fairbanks Foundation is funding the implementation of evidence-based drug prevention programming in approximately 180 Marion County, Indiana, schools. As the *Prevention Matters* evaluator, RTI is conducting a process and outcome evaluation to assess program implementation and impact on student outcomes. To address the challenge of grantees delivering different combinations of programming in different school settings, RTI is harmonizing the variety of grantee-collected evaluation data to yield conclusions about the overall initiative.

Georgia Alcohol Prevention Project and Alcohol and Substance Abuse Prevention Project Evaluations (2016–2022). RTI is the lead evaluator for these statewide initiatives, which fund community providers to implement prevention education and environmental strategies targeting alcohol and other substance use and misuse by Georgia youth and young adults (ages 9–25). To provide frequent, actionable feedback to the State, we conduct document reviews, provider site visits, data collection through scannable and online surveys, and analysis and reporting of both process and outcomes measures. We also hold webinar and in-person evaluation trainings to build community capacity.

Substance Use Screening and Prevention for Adolescents in Pediatric Primary Care (National Institute on Drug Abuse (NIDA), 2014–2020). This study tests a primary care screening and referral intervention designed to prevent or curb substance use before high school. Screening occurs during well-child check-ups among mostly African Americans, ages 9–13, who reside in low-resource communities. At-risk youths and their parents are referred to The Family Check-Up, a program that addresses child behavior by strengthening family functioning.



Program Evaluation for Prevention (Substance Abuse and Mental Health Services Administration (SAMHSA), 2013–2018).

This project encompassed five national cross-site evaluations for SAMHSA's Center for Substance Abuse Prevention: the Minority AIDS Initiative (MAI), Sober Truth on Preventing Underage Drinking (STOP) Act Program, Strategic Prevention Framework State Incentive Grant (SPF SIG), SPF Partnerships for Success (SPF-PFS), and SPF Prescription Drugs (SPF-Rx). Grantees of these initiatives funded a variety of programmatic and environmental prevention strategies, including school-based curricula, media campaigns, and prescription drug drop boxes and take-back programs. Each cross-site evaluation included the management of program implementation and outcomes data in large, complex data sets and data collection systems. For example, the SPF-PFS evaluation collected data from 70 states, tribes, and jurisdictions and more than 700 community subrecipients funded by those grantees.

Mindful Coping Power (NIDA, 2015–2017). This intervention development infused mindfulness practices into the school-based, evidence-based Coping Power preventive intervention, which is designed to prevent substance use and aggression among fifth graders.

National Evaluation of the Safe Schools/Healthy Students (SS/HS) Initiative (U.S. Departments of Justice, Education, and Health and Human Services; 1999–2017). SS/HS was a comprehensive, school-based approach designed to promote and improve the development of children and youth, reduce substance use and violence, and create safe learning environments in schools. RTI collected, analyzed, and reported data on the implementation and results of SS/HS.

State-Level Evaluations and Epidemiological Projects (2005–2019). RTI served as the lead local evaluator for the SPF SIG grants that SAMHSA awarded to the District of Columbia and the states of Arkansas, Georgia, Nebraska, and North Carolina. We continue to lead the evaluation and State Epidemiological Outcomes Workgroup for the District's SPF-PFS grant, as well as epidemiological work in Georgia. The evaluations addressed strategic plan development along with the implementation of the SPF process, including assessment, capacity building, planning, implementation, and evaluation at both the state and community levels. RTI worked with each grantee to collect and analyze process and outcome data and to share these evaluation results with the federal funder and other stakeholders. Our epidemiological work includes the consolidation of archival and survey data to develop Social Indicator Studies, online data dashboards, and county-level profiles of substance use, consequences, and risk and protective factors.



More Information

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¹ Federal Bureau of Investigation (FBI). Department of Justice (US). Crime in the United States 2016: Uniform Crime Reports. Washington (DC): FBI; 2017. Available at <https://ucr.fbi.gov/crime-in-the-u.s/2016/crime-in-the-u.s.-2016/tables/table-18>

² Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. Treatment Episode Data Set (TEDS): 2017. Admissions to and Discharges from Publicly-Funded Substance Use Treatment. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2019. Available at: <https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/TEDS-2017.pdf>

³ <https://www.drugabuse.gov/related-topics/trends-statistics/overdose-death-rates>

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RTI 13063 0819