



# **Substance Use Disorder (SUD) Prevention 101**

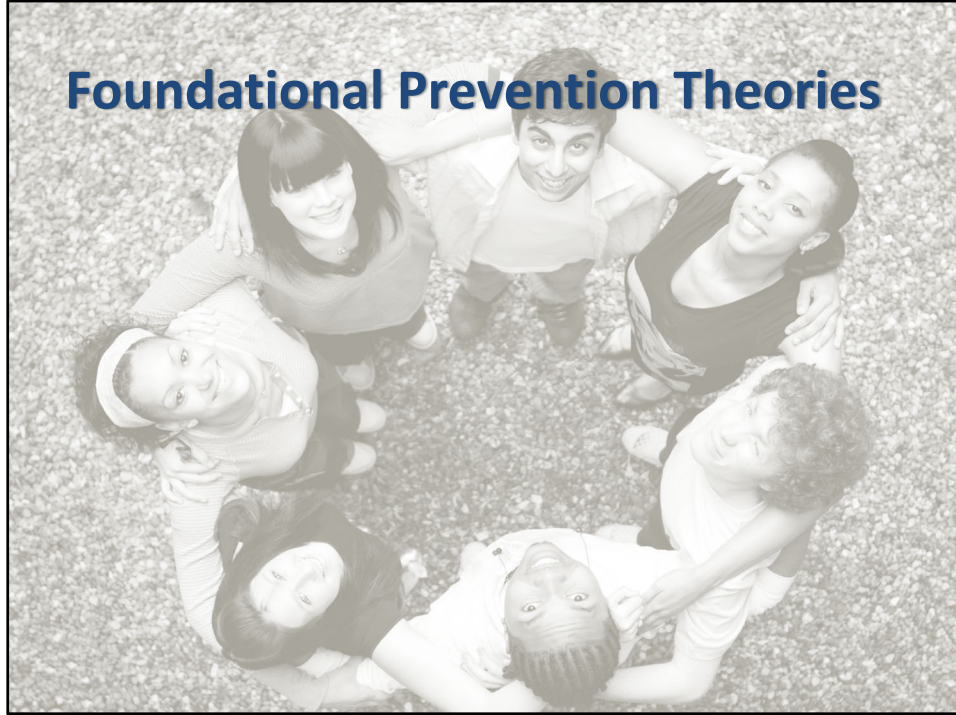
## **Key Concepts in Prevention**



Welcome to the Prevention 101 training.

This training is brought to you by the Center for Applied Research Solutions, or CARS. CARS is the contractor implementing the Community Prevention Initiative for the California Department of Health Care Services.

The Community Prevention Initiative offers training and technical assistance to the substance abuse prevention field free of charge.



Substance use disorder prevention is grounded in multiple theories that inform why and how prevention strategies are effective in addressing and preventing substance use.

Prevention theories for discussion in this section include:

Risk and Protective Factor Theory

Resiliency Theory

Public Health Approach

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# Risk and Protective Factor Theory



Substance Abuse and Mental Health Services Administration (SAMHSA), 2013

There are many contexts and environments that influence an individual's beliefs and behaviors. They include the broad society, the community to which an individual belongs, their family, and the individual themselves.

In 1992, Doctors David Hawkins and Richard Catalano developed the Risk and Protective Factor Theory as a foundational approach to determine the causes and solutions to substance use that assist in the design, selection, and implementation of prevention strategies and programs. Let's define these terms.

The Risk and Protective Factor Theory is seen as a foundational concept when creating substance abuse prevention strategies and programs.

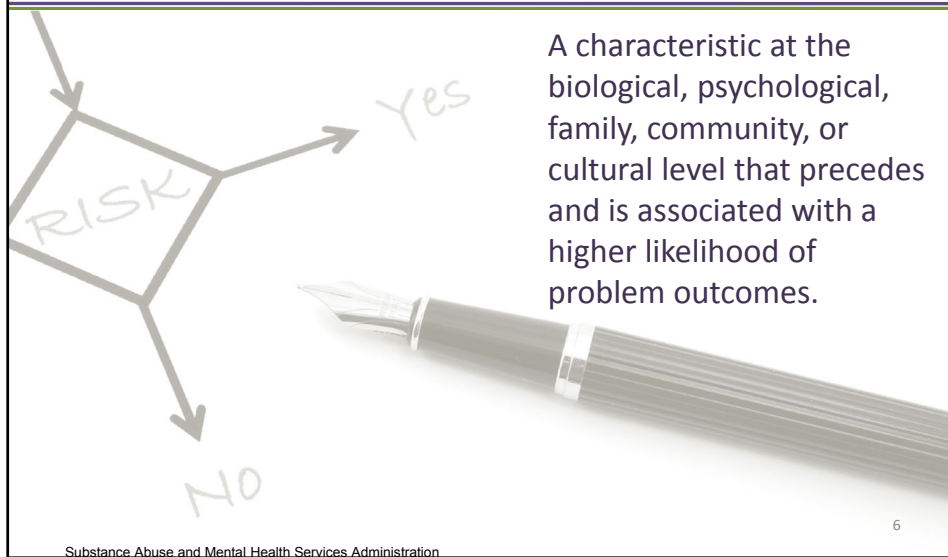
## Risk & Protective Factor Theory

- Risk factors predict substance abuse
- Protective factors provide buffer to risk factors
- Influenced by individual, family, school, and environmental change strategies



The Risk and Protective Factor Theory drives all SUD prevention strategies. Developed by Hawkins & Catalano, the Risk and Protective Factor Theory draws connections between the risk and protective factors that influence individual behaviors. The more the protective factors in a young person's life, the higher the chance for preventing negative behaviors such as drug use.


## Risk Factors Defined



The definition of a risk factor as defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) is a characteristic at the biological, psychological, family, community, or cultural level that precedes and is associated with a higher likelihood of problem outcomes.

Assessing risk and protective factors is vital because **you cannot change a substance abuse problem directly**. Instead you need to work through the underlying risk and protective factors.

## Protective Factors Defined

A glass dome on a black base containing text.

Protective factors  
are characteristics at the  
individual, family or community  
level that is associated with a lower  
likelihood of problem outcomes.

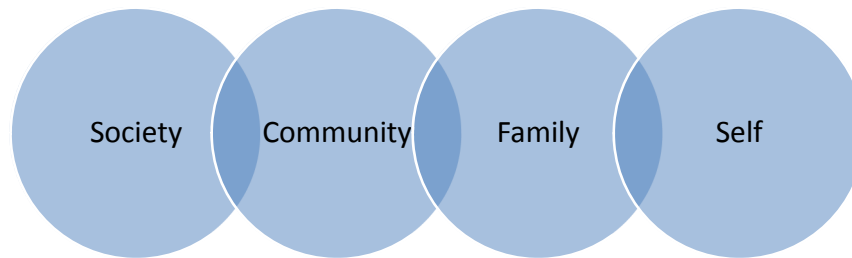
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The definition of a protective factor from SAMHSA is a characteristic at the individual, family or community level that is associated with a lower likelihood of problem outcomes. Protective factors are areas to enhance in prevention programming while decreasing risk factors.

It is again important to note that protective factors are not always the opposite of identified risk factors, as you will see in the following slide.

## Contexts (Domains)



Decades of research have helped to identify several patterns of risk and protective factors contributing to alcohol and drug use in adolescence and in later life. The presence and impact of these factors and their interactions with one another can vary depending on the population for which prevention interventions are planned. Limiting risk factors while strengthening and increasing the availability of protective resources will help to reduce substance abuse and create healthier individuals and communities.

Contexts, or domains, refer to the areas that influence individual behavior, and reflect the complete sphere of influence in a person's life.

They are: society, community, family and self.

Societal protective factors are broad and include social and cultural norms, as well as policies addressing economics, education, and health.

The following slides will share specific factors related to each domain or context, but please note that it does not reflect an exhaustive list.



## Society Factors



### Risk

- Norms and laws favorable to substance use
- Lack of economic opportunity

### Protective

- Policies limiting availability of substances
- Resources (housing, healthcare, childcare, jobs, recreation, etc.) are available

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Individuals are members of a larger society, which has risk and protective factors that influence behavior. Within our society, risk factors include:

- Norms and laws favorable to substance use
- Lack of economic opportunity

A protective factor within the society context includes policies limiting the availability of substances, and available resources such as housing, healthcare, childcare, jobs, recreation, etc.

## Community Factors - Schools

### **Risk**

- Lack of clear expectations, both academic and behavioral
- High numbers of students who fail academically at school



### **Protective**

- Communicates high academic and behavioral expectations
- School is responsive to students' needs

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Schools and peers are both representative of community factors that can influence substance use. Specific school risk factors include:

- Lack of clear expectations, both academic and behavioral, and
- High numbers of students who fail academically at school

Protective factors within the school environment include:

- Communicates high academic and behavioral expectations
- School is responsive to students' needs

## Community Factors - Peers

### **Risk**

- Peer rejection
- Friends who use drugs

### **Protective**

- Involved in substance-free activities
- Friends disapprove of alcohol and other drug use

Relationships with peers and peer groups can be especially influential, some factors include:

- Rejection by peers
- Friends who use drugs

Protective factors include:

- Peers that are involved in substance-free activities
- Friends that disapprove of alcohol and other drug use

# Family Factors

## **Risk**

- Family history of substance abuse
- Poor family management

## **Protective**

- Close family relationships
- Consistency of parenting



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Families are an important factor in risk for substance abuse. Some family factors that may increase the likelihood of substance abuse are:

- A family history of substance abuse
- Poor family management practices

There are also family protective factors that can prevent substance use including close family relationships and consistency of parenting.

# Individual Factors



## **Risk**

- Early, persistent problem behavior
- Academic failure

## **Protective**

- Personal refusal skills
- Healthy decision making

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An individual's particular psychosocial makeup can influence drug use. Risk factors include:

- Early, persistent problem behavior
- Academic failure

Protective factors include:

- Personal refusal skills
- Healthy decision making

## Adolescent Problem Behaviors

- Substance Abuse
- Depression & Anxiety
- Delinquency
- Teen Pregnancy
- School Drop-Out
- Violence

The risk and protective factor theory asserts that risk factors not only describe potential risk for substance use, but are also associated with other adolescent problem behaviors. This is an important concept for prevention, as it promotes the potential effectiveness of prevention activities across multiple disciplines.

Adolescent problem behaviors identified in this theory are:

- Substance Abuse
- Depression & Anxiety
- Delinquency
- Teen Pregnancy
- School Drop-Out
- Violence

## Transitions = Time of Greater Risk

- Entering School
- Changing Schools
- Leaving Home



In order to understand when AOD prevention activities will be most impactful, it helps to understand the times in a young person's life that include the greatest risk.

Research has shown that the key risk periods for drug use are during major transitions in children's lives. The first big transition for children is when they leave the security of the family and enter school. When they advance from elementary school to middle school, they often experience new academic and social situations, such as learning to get along with a wider group of peers. It is at this stage—early adolescence—that children are likely to encounter drugs for the first time.

When they enter high school, adolescents face additional social, emotional, and educational challenges. At the same time, they may be exposed to greater availability of drugs, drug abusers, and social activities involving drugs. These challenges can increase the risk that they will use alcohol, tobacco, and other substances.

When young adults leave home for college or work and are on their own for the first time, their risk for drug and alcohol abuse is very high. Consequently, young adult interventions are needed as well

Source: <http://www.drugabuse.gov/publications/preventing-drug-abuse-among-children-adolescents/chapter-1-risk-factors-protective-factors>

## Some Common Risk & Protective Factors

Risk Factors	Protective Factors
Early age of onset	Later age of onset
Perception of parental approval of substance use	Parental monitoring
Peers engaging in social activities involving alcohol consumption	Strong family cohesion and relationships
Parent or older sibling substance use	Success in academics
Low perception of harm	Strong bonds with pro social institutions
Availability of and easy access to substances	Community service or civic leadership
Poor school achievement and low school bonding	Healthy peer groups
Persistent problem behaviors and high risk-taking	Clear expectations for behaviors & rules

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These are just SOME common risk and protective factors - based on decades of research patterns on the risk and protective factors that contribute to alcohol and drug use in adolescence and in later life. The presence and impact of these factors and their interactions with one another can vary depending on the population for which prevention interventions are planned. Limiting risk factors while strengthening and increasing the availability of protective resources will help to reduce substance abuse and create healthier individuals and communities.

Research-based prevention programs focus on intervening early in a child's development to strengthen protective factors before problem behaviors develop. When children are outside the family setting, the most salient protective factors are:

- age-appropriate parental monitoring of social behavior, including establishing curfews, ensuring adult supervision of activities outside the home, knowing the child's friends, and enforcing household rules;
- success in academics and involvement in extracurricular activities;
- strong bonds with prosocial institutions, such as school and religious institutions; and
- acceptance of conventional norms against drug abuse

Also important is strong parent and adolescent relationship and family cohesion. As young people enter into adolescence, those with close relationship with their parent(s) are less likely to become alcohol involved (Birckmayer et al, 2004).

Source:

<http://captus.samhsa.gov/access-resources/common-risk-and-protective-factors-alcohol-and-drug-use>

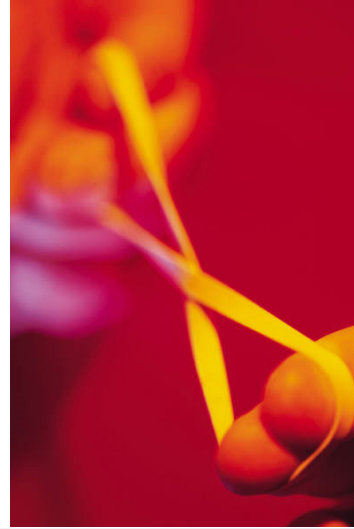
<http://www.drugabuse.gov/sites/default/files/preventingdruguse.pdf>

NIDA Preventing Drug Use Among Children & Adolescents – A Research Based Guide for Parents, Educators & Community Leaders



## Resiliency Theory

- Research dates back to the 1950s
- Strengths and assets buffer youth against negative health behavior
- Results of research led to risk & protective factor theory



Resiliency theory was developed by Emmy Werner and is one of the earliest research studies related to prevention. The study focused on identifying the strengths and assets of youth that can buffer against negative behavior.

## Significance of Resiliency

- Kauai longitudinal study that followed 700 participants for up to 32 years (Werner and Smith).
- Cohort of children exposed to perinatal stress, chronic poverty, and a troubled family environment.

The Kauai longitudinal study by Werner and Smith traced the developmental paths of a cohort of children who had been exposed to perinatal stress, chronic poverty, and a family environment troubled by chronic discord and parental psychopathology.

The study followed 700 children born in 1955 on a Hawaiian island from the perinatal period to ages 1, 2, 10, 18, and 32 years. It has proven that the overwhelming majority of high-risk youth “make it” as adults.

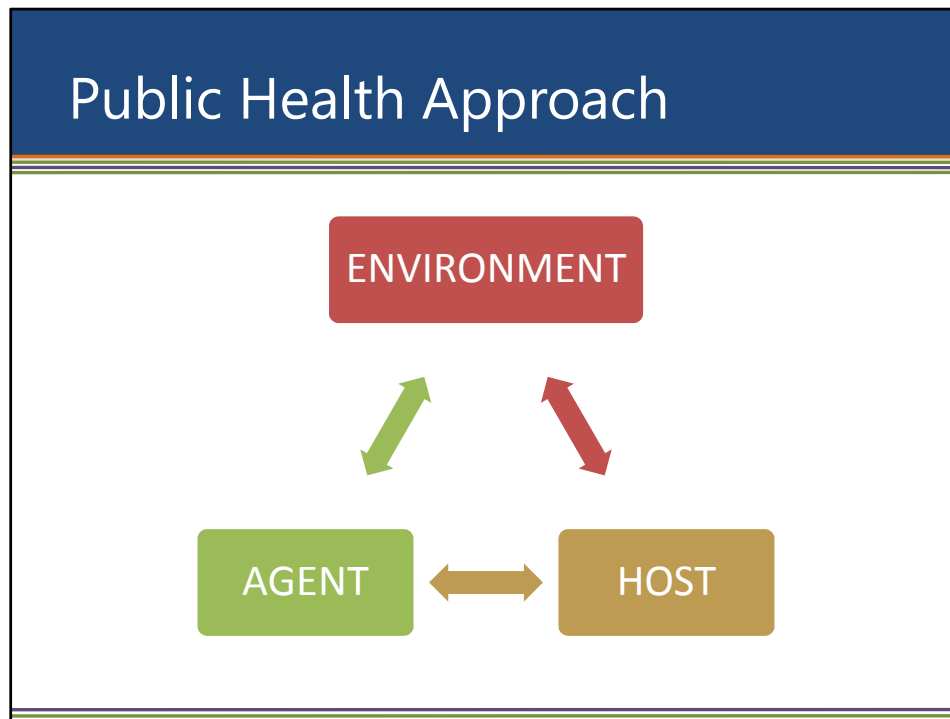
Several clusters of protective factors and processes were identified that enabled most of these high-risk individuals to become competent and caring adults.

## Study Results Showed...

**Risk** factors are predictive for only about 20% to 49% of a given high risk population whereas **protective** factors predict positive outcomes in anywhere from 50% to 80% of a high risk population.

The study results showed that risk factors are predictive for only about 20 to 49 percent of a given high-risk population (Rutter, 1987, 2000; Werner, 2001). In contrast, “protective factors,” the supports and opportunities that buffer the effect of adversity and enable development to proceed, appear to predict positive outcomes in anywhere from 50 to 80 percent of a high-risk population. According to Werner and Smith, “Our findings and those by other American and European investigators with a life-span perspective suggest that these buffers [i.e., protective factors] make a more profound impact on the life course of children who grow up under adverse conditions than do specific risk factors or stressful life events. They (protective factors) [also] appear to transcend ethnic, social class, geographical, and historical boundaries. Most of all, they offer us a more optimistic outlook than the perspective that can be gleaned from the literature on the negative consequences of perinatal trauma, caregiving deficits, and chronic poverty” (1992, p. 202).

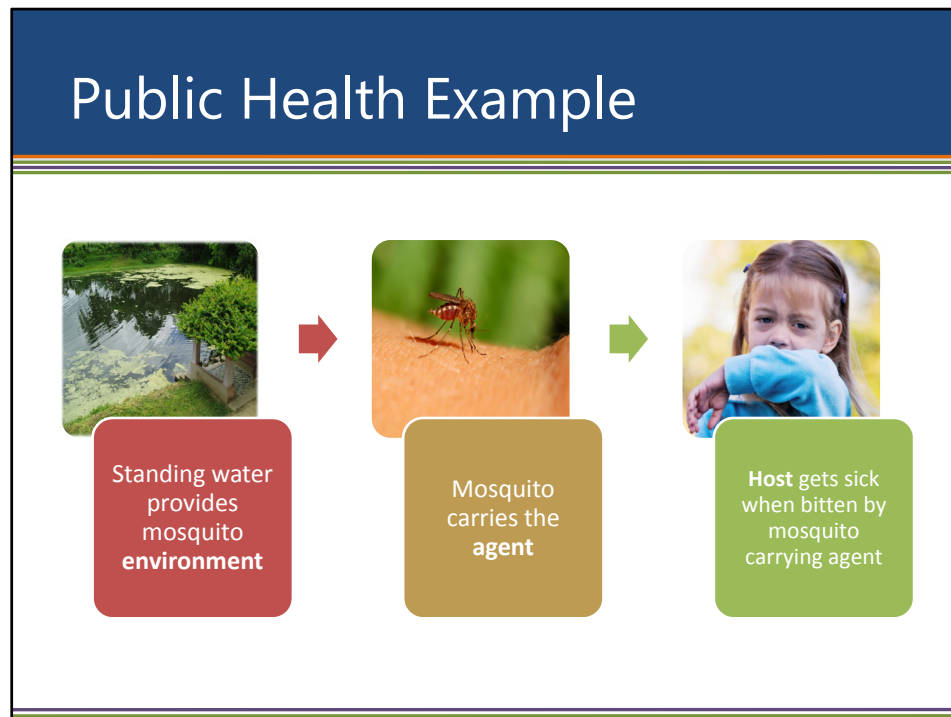
## Public Health Approach



The focus of the public health approach is a broad approach to improve individual and community health through the prevention and treatment of disease and other physical and mental health conditions by promoting healthy behaviors. Some examples include promotion of hand washing and breastfeeding, providing vaccinations, and distributing condoms to prevent the spread of sexually transmitted diseases.

The public health model seeks to not only change an individual's behavior, but to UNDERSTAND the impact the environmental context has in relation to encouraging or precipitating behavior. Using a disease prevention analogy, the public health model approaches an issue by understanding the interrelationship between the host (person) the agent or vector (substance) and the environment (place, situation, circumstances, relationships).

## Public Health Example



To exemplify the public health model, let's take a look at the steps of contagion related to disease.

Standing water provides the mosquito an environment to breed and thrive, and develop the West Nile Virus. The mosquito, then carrying the disease, transfers the disease when biting the host, which in turn gets the host (human) sick. A public health issue emerges when multiple mosquitos who breed in standing water carry the agent and bite hundreds or thousands of hosts, infecting the population.

As we discussed earlier, public health initiatives emerge when the broader population is impacted by disease. The same can be true for prevention.

# Public Health Approach

## Key Characteristics

- ✓ Promotion and Prevention
- ✓ Population Based
- ✓ Risk and Protective Factors
- ✓ Multiple Contexts
- ✓ Developmental Perspective
- ✓ Planning Process

The public health approach influences prevention.

The key characteristics of the approach are:

1. Promotion and prevention – which focuses on promoting wellness and preventing problems;
2. Population based – meaning that the focus is not on one individual but on the population that is affected or is at risk;
3. Risk and protective factors (which we have just discussed);
4. Multiple contexts – that is, embracing the understanding that individuals are influenced by different environments (or as defined in prevention – domains), such as family, neighborhood, school, community and culture.
5. Takes into consideration the developmental stages of the population at risk, and engages in deliberate, active & ongoing planning.

By analyzing the environment and its particular characteristics, and by understanding the relationship an environment, agent, and host have on each other – we can better plan for effective prevention strategies to impact substance use disorders.

More is available for you!

Visit the CPI website for more  
no-cost resources, webinars, and  
trainings on prevention topics:

<http://www.ca-cpi.org/>



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