

# Library Watch on prevention

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## **Family physicians and youth tobacco-free education: Outcomes of the Colorado Tar Wars Program.**

Cain JJ; Dickinson P; Fernald D; Bublitz C; Dickinson LM; West D. *Journal of the American Board of Family Medicine* 19(6): 579-589, 2006. (25 refs.)

**Background:** Tar Wars is a national school-based tobacco-free education program operated by the American Academy of Family Physicians. The Tar Wars lesson uses an interactive 45-min session taught by volunteer family physicians in 4th- and 5th-grade classrooms and focuses on the short-term image-based consequences of tobacco use. In this study, we evaluated the effectiveness of the Tar Wars program in Colorado with both quantitative and qualitative measures. **Methods:** Students participating in the quantitative evaluation were tested before and after a Tar Wars teaching session using a 14-question test covering the short-term and image-based consequences of tobacco use, cost of smoking, tobacco advertising, and social norms of tobacco use. Qualitative evaluation of the program included guided telephone interviews and focus groups with participating students, teachers, and presenters. **Results:** Quantitative evaluation showed statistically significant improvement in correct responses for the 14 questions measured with an average increase in correct responses from 8.95 to 10.23. Three areas recommended by the Centers for Disease Control (CDC) for youth tobacco prevention showed greater change in correct responses, including cost of smoking, truth of tobacco advertising, and peer norms of tobacco use. Qualitative evaluation found that the overall message of the session was well received, that previously known tobacco information was reinforced by its presentation in a novel format, and that new information learned included cost of smoking, truth of tobacco advertising, and peer norms of tobacco use. **Conclusions:** The Tar Wars lesson plan is effective in increasing students' understanding about the short-term consequences of tobacco use, cost of tobacco use, truth of tobacco advertising, and peer norms. Tar Wars meets the CDC guidelines as one component of effective comprehensive youth tobacco prevention. Copyright 2006, American Board of Family Medicine.

## **Parental rules and monitoring of children's movie viewing associated with children's risk for smoking and drinking.**

Dalton MA; Adachi-Mejia AM; Longacre MR; Titus-Ernstoff LT; Gibson JJ; Martin SK et al. *Pediatrics* 118(5): 1932-1942, 2006. (74 refs.)

**OBJECTIVES.** Evidence suggests that media portrayals of tobacco and alcohol use are important predictors of adolescent smoking and drinking. We examined the role of parents in monitoring and limiting children's movie exposure and whether or not this was associated with a lower risk of adolescent smoking and drinking. **DESIGN.** We surveyed 2606 child-parent dyads between 2002 and 2003. We asked children (9-12 years of age) how often their parents engaged in specific behaviors to monitor their movie viewing and if their parents allowed them to watch R-rated movies. We also surveyed children about parental monitoring of nonmedia-related behaviors. The primary outcomes were risk of smoking and drinking alcohol, defined by attitudinal susceptibility or early experimentation with either substance. **RESULTS.** Less than half (45.0%) the children were prohibited from watching R-rated movies. Of those who were allowed to watch R-rated movies, one third (34.7%) always viewed them with a parent and two thirds (65.3%) sometimes watched them without a parent. Less than 10% of the children reported that their parents consistently engaged in all 4 movie-monitoring behaviors. Even after controlling for parental monitoring of nonmedia-related behaviors and other covariates, children were at lower risk of smoking and drinking if their parents prohibited them from watching R-rated movies. Parental coviewing of R-rated movies was associated with a lower risk of child smoking but not drinking if parents consistently monitored what their children watched. **CONCLUSIONS.** Parental rules and monitoring of children's movie viewing may have a protective influence on children's risk for smoking and drinking, over and above parental monitoring of nonmedia related behaviors. This highlights a potential role for parents in preventing early initiation of tobacco and alcohol use among adolescents. Copyright 2006, American Academy of Pediatrics.

**Efficacy vs effectiveness trial results of an indicated "model" substance abuse program: Implications for public health.**

Hallfors D; Cho H; Sanchez V; Khatapoush S; Kim HM; Bauer D. *American Journal of Public Health* 96(12): 2254-2259, 2006. (22 refs.)

**Objectives.** The US Department of Education requires schools to choose substance abuse and violence prevention programs that meet standards of effectiveness. The Substance Abuse and Mental Health Services Agency certifies "model" programs that meet this standard. We compared findings from a large, multisite effectiveness trial of I model program to its efficacy trial findings, upon which the certification was based. **Methods.** 1370 high-risk youths were randomized to experimental or control groups across 9 high schools in 2 large urban school districts. We used intent-to-treat and on-treatment approaches to examine baseline equivalence, attrition, and group differences in outcomes at the end of the program and at a 6-month follow-up. **Results.** Positive efficacy trial findings were not replicated in the effectiveness trial. All main effects were either null or worse for the experimental than for the control group. **Conclusions.** These findings suggest that small efficacy trials conducted by developers provide insufficient evidence of effectiveness. Federal agencies and public health scientists must work together to raise the standards of evidence and ensure that data from new trials are incorporated into ongoing assessments of program effects. Copyright 2006, American Public Health Association.

**The Drug Resistance Strategies intervention: Program effects on substance use.**

Hecht ML; Graham JW; Elek E. *Health Education* 20(3): 267-276, 2006. (43 refs.)

This study evaluates the Drug Resistance Strategies (DRS) project, a culturally grounded, communication-based, substance use prevention program implemented in 35 middle schools in Phoenix, Arizona. The intervention consisted of 10 lessons taught by the classroom teacher that imparted the knowledge, motivation, and skills needed to resist drug offers. The evaluation used growth modeling to analyze significant differences in average postintervention substance use (alcohol, cigarettes, and marijuana) and growth of use over the course of the study. The study involved 6,298 seventh graders (65% Mexican/Mexican American) who responded to at least 1 of 4 questionnaires (1 pretest and 3 follow-up measures). When compared to a control group, the DRS intervention appeared to significantly limit the increase in the number of students reporting recent substance use, especially alcohol and marijuana use.

The multicultural version of the curriculum proved most broadly effective, followed by the version targeting Mexican American youth. The development of a culturally grounded prevention curriculum for Mexican American youth expands the population being served by interventions. Moreover, the success of the multicultural curriculum version, which has the broadest application, provides particular promise, and the article demonstrates how a growth modeling approach can be used to evaluate a communication-based intervention by analyzing changes over time rather than differences between the pretest and posttest scores. Copyright 2006, Lawrence Erlbaum Associates.

**Funding of North Carolina tobacco control programs through the master settlement agreement. (editorial).**

Jones AS; Austin WD; Beach RH; Altman DG. *American Journal of Public Health* 97(1): 36-44, 2007. (46 refs.)

Changing political and economic forces in 1 tobacco-dependent state, North Carolina, demonstrate how the interplay between these forces and public health priorities has shaped current allocation of Master Settlement Agreement funds. Allocation patterns demonstrate lawmakers' changing priorities in response to changes in the economic climate; some of the agreement's funds targeted to tobacco farmers appear to reflect objectives favored by tobacco manufacturers. Funds earmarked for health have underfunded youth tobacco prevention and tobacco control initiatives, and spending for tobacco farmers in North Carolina has not lived up to the rhetoric that accompanied the original agreement. We discuss the implications of these findings for future partnerships between public health advocates and workers as well as tobacco control strategies. Copyright 2007, American Public Health Association.

**Life skills training outcomes and potential mechanisms in a community implementation: A preliminary investigation.**

MacKillop J; Ryabchenko KA; Lisman SA. *Substance Use & Misuse* 41(14): 1921-1935, 2006. (30 refs.)

Within the context of a science-based dissemination initiative, this study sought to evaluate whether a community implementation of Life Skills Training (LST) would yield outcomes similar to previous clinical trials, to examine potential mechanisms of LST's effectiveness, and to explore potential gender-by-intervention effects. Life Skills Training was implemented with a high degree of fidelity to 263 (54% Male; 84% Caucasian) early adolescents in two

Upstate New York school districts during the 2002-2003 academic year. Performance on the Life Skills Training Questionnaire yielded outcomes that were highly similar to those reported by the program's development team. Significant reductions in alcohol tension-reduction expectancies were detected on the Alcohol Expectancies Questionnaire-Adolescent Version, providing preliminary evidence that expectancies may mediate/moderate LST's influence. Exploratory gender analyses revealed that female participants exhibited greater improvements in terms of drug knowledge and anxiety reduction skills than male participants in one school district. Unexpected results, design limitations and implications for dissemination initiatives as a platform for research are discussed. Copyright 2006, Taylor & Francis.

**It takes two: Reducing adolescent smoking uptake through sustainable adolescent-adult partnership.**

Nilsson M; Stenlund H; Bergstrom E; Weinehall L; Janlert U. *Journal of Adolescent Health* 39(6): 880-886, 2006. (27 refs.)

Purpose: To assess the effects of a long-term intervention for tobacco use prevention that targets adolescents (Tobacco Free Duo). Methods: School-based community intervention combined with repeated cross-sectional surveys over 7 years. The intervention was performed in the County of Vasterbotten, Sweden, where survey data were collected in grade seven to nine schools on an annual basis for 7 years. Data for comparison were collected in grade nine on the national level in Sweden. In the intervention area, the annual number of seventh to ninth grade students participating in the study varied between 1300 and 1650. In the reference data, the number of participating ninth grade students approximated 4500 annually. Results: A significant decrease of nearly 50% was seen in smoking prevalence in the intervention area. The decrease was evident in grades eight and nine (ages 14-15 years) in both boys and girls. At the start of the intervention, smoking prevalence in grade nine was 16.1% in the intervention area and 23% in the national reference group. Although the prevalence in the national sample remained stable, there was a decrease to 9.0% in the intervention area at the end of the study period. Conclusions: These results suggest that the Tobacco Free Duo program contributed to a reduction in adolescent smoking among both boys and girls. Using a multi-faceted intervention that includes adolescent-adult partnership can reduce adolescent smoking uptake, and the intervention has been proven to be sustainable within communities. Copyright 2006, Society for Adolescent Medicine.

**Effect of televised, tobacco company-funded smoking prevention advertising on youth smoking-related beliefs, intentions, and behavior.**

Wakefield M; Terry-McElrath Y; Emery S; Saffer H; Chaloupka FJ; Szczypka G et al. *American Journal of Public Health* 96(12): 2154-2160, 2006. (33 refs.)

Objective. To relate exposure to televised youth smoking prevention advertising to youths' smoking beliefs, intentions, and behaviors. Methods. We obtained commercial television ratings data from 75 US media markets to determine the average youth exposure to tobacco company youth-targeted and parent-targeted smoking prevention advertising. We merged these data with nationally representative school-based survey data (n=103172) gathered from 1999 to 2002. Multivariate regression models controlled for individual, geographic, and tobacco policy factors, and other televised antitobacco advertising. Results. There was little relation between exposure to tobacco company-sponsored, youth-targeted advertising and youth smoking outcomes. Among youths in grades 10 and 12, during the 4 months leading up to survey administration, each additional viewing of a tobacco company parent-targeted advertisement was, on average, associated with lower perceived harm of smoking (odds ratio [OR]=0.93; confidence interval [CI]=0.88, 0.98), stronger approval of smoking (OR= 1.11; CI=1.03,1.20), stronger intentions to smoke in the future (OR=1.12; CI=1.04,1.21), and greater likelihood of having smoked in the past 30 days (OR=1.12; CI=1.04,1.19). Conclusions. Exposure to tobacco company youth-targeted smoking prevention advertising generally had no beneficial outcomes for youths. Exposure to tobacco company parent-targeted advertising may have harmful effects on youth, especially among youths in grades 10 and 12. Copyright 2006, American Public Health Association.

**Update on adolescent drug use: What school counselors need to know.**

Watkins KE; Ellickson PL; Vaiana E; Hiromoto S. *Professional School Counseling* 10(2): 131-138, 2006. (21 refs.)

School counselors need to have accurate and, age appropriate prevention education information in order to counsel teens on drug use. This article presents developmentally specific prevention materials for the most important emerging substances of abuse: Ecstasy, methamphetamine, cough and cold medication, prescription opiates and stimulants, and the "date rape" drugs. Because developing appropriate materials requires understanding how adolescents develop, an expert panel approach was used, supplemented with a

literature review and teen focus groups. Copyright 2006, American School Counselor Association.

### **Tobacco control: Present and future.**

West R. *British Medical Bulletin* 77-78: 123-136, 2006. (47 refs.)

The history of tobacco control in the twentieth century can be summed up by the phrase 'too little, too late'. The century saw the proliferation of the most deadly form of tobacco use: cigarette smoking. Until the 1970s, no government took serious action to protect its citizens. In fact, probably the most effective global tobacco control 'strategies' to date have not been motivated by health concerns: they have been inaccessible or uneconomic markets for tobacco companies and a cultural taboo on women smoking. Economic development has led to massive increases in male cigarette smoking in developing countries but even now < 10% of women in non-Western countries such as China, Russia and India smoke. With 'westernization', this picture is changing. Without drastic action to get current smokers to stop, the annual rate of tobacco-related deaths will grow from 5 million in 2006 to 10 million in 2025. Without further action to prevent take up of smoking, the subsequent death toll will be even higher. The recently enacted World Health Organization (WHO)-initiated Framework Convention on Tobacco Control (FCTC) can mitigate this impending disaster but only if it is implemented according to the spirit and not just the letter of the articles contained therein. Specific tobacco levies in every country should be the primary means of kick-starting the process, with the proceeds being used exclusively to fund other tobacco control initiatives, including product regulation. Copyright 2006, Oxford Press.

### **Preventing youth violence and delinquency through a universal school-based prevention approach.**

Botvin GJ; Griffin KW; Nichols TD. *Prevention Science* 7(4): 403-408, 2006. (24 refs.)

Violence is an important public health problem among adolescents in the United States. Substance use and violence tend to co-occur among adolescents and appear to have similar etiologies. The present study examined the extent to which a comprehensive prevention approach targeting an array of individual-level risk and protective factors and previously found effective in preventing tobacco, alcohol, and illicit drug use is capable of decreasing violence and delinquency. Schools (N=41) were randomly assigned to intervention and control conditions. Participants in the 20 intervention schools received the Life Skills Training prevention program including material

focusing on violence and the media, anger management, and conflict resolution skills. Survey data were collected from 4,858 sixth grade students prior to the intervention and three months later after the intervention. Findings showed significant reductions in violence and delinquency for intervention participants relative to controls. Stronger prevention effects were found for students who received at least half of the preventive intervention. These effects include less verbal and physical aggression, fighting, and delinquency. The results of this study indicate that a school-based prevention approach previously found to prevent tobacco, alcohol, and illicit drug use can also prevent violence and delinquency. Copyright 2006, Springer.

### **Avoiding "truth": Tobacco industry promotion of life skills training.**

Mandel LL; Bialous SA; Glantz SA. *Journal of Adolescent Health* 39(6): 868-879, 2006. (72 refs.)

Purpose: To understand why and how two tobacco companies have been promoting the Life Skills Training program (LST), a school-based drug prevention program recommended by the Centers for Disease Control and Prevention to reduce youth smoking. Methods: We analyzed internal tobacco industry documents available online as of October 2005. Initial searches were conducted using the keywords "life skills training," "LST," and "positive youth development." Results: Tobacco industry documents reveal that since 1999, Philip Morris (PM) and Brown and Williamson (B&W) have worked to promote LST and to disseminate the LST program into schools across the country. As part of their effort, the companies hired a public relations firm to promote LST and a separate firm to evaluate the program. The evaluation conducted for the two companies did not show that LST was effective at reducing smoking after the first or second year of implementing the program. Even so, the tobacco companies continued to award grants to schools for the program. PM and B&W's role in promoting LST is part of a public relations strategy to shift the "youth smoking paradigm" away from programs that highlight the tobacco industry's behavior and toward programs in which the industry can be a partner. Conclusions: Individuals and organizations responsible for developing and implementing tobacco control and youth smoking prevention programs should be aware of PM and B&W's role and motivations to encourage the wide-spread adoption of LST in schools. Copyright 2006, Society for Adolescent Medicine.