Prevention Plus Wellness Programs Logic Model

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SPORT Prevention Plus Wellness



High School Adolescents: Substance Use Prevention Program Promoting Wellness

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SPORT Prevention Plus Wellness (PPW) Programs

- 1. Evidence-based, proven to prevent alcohol, tobacco & cannabis & increase physical activity among non-using & substance using youth
- 2. Targets PA, healthy eating, sleep & stress control
- 3. Single-session (< 50 minutes) Screening and Brief Interventions (HS, MS & ES versions)
- 4. Scripted implementation with slides or booklets
- 5. Individual/one-on-one or in a group
- 6. Marketing theory targeting positive images
- 7. Optional parent materials (SPORT PPW)

InShape Prevention Plus Wellness



Substance Use Prevention Promoting Wellness for Young Adults

Prevention Plus Wellness, LLC

904-472-5022

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InShape Prevention Plus Wellness (PPW) Program

- 1. Evidence-based, proven to prevent alcohol, cannabis & drinking driving & increase physical activity, sleep & health quality of life among young adults
- 2. Targets PA, healthy eating, sleep & stress control
- 3. Single-session (< 60 minutes) Screening and Brief Intervention
- 4. Scripted implementation with slides or booklets
- 5. Individual/one-on-one or in a group
- 6. Marketing theory targeting positive images

Opioid Prevention Plus Wellness



Opioid Use Disorder Prevention Program Promoting Wellness for Adolescents

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Opioid Prevention Plus Wellness (PPW) Program

- 1. Evidence-based SBI practice & based on the InShape Prevention Plus Wellness program
- 2. Targets PA, healthy eating, sleep & stress control
- Single-session (< 60 minutes) Screening and Brief Intervention (HR young men, women & adolescent versions)
- 4. Scripted implementation with slides
- 5. Individual/one-on-one or in a group
- 6. Marketing theory targeting positive images

Vaping Prevention Plus Wellness



E-cigarette Prevention Program Promoting Wellness Lifestyles

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Vaping Prevention Plus Wellness (PPW) Programs

- 1. Evidence-based SBI practice & based on the SPORT PPW program
- 2. Targets PA, healthy eating, sleep & stress control
- 3. Single-session (< 50 minutes) Screening and Brief Interventions (HS & MS versions)
- 4. Scripted implementation with slides
- 5. Individual/one-on-one or in a group
- 6. Marketing theory targeting positive images
- 7. Targets e-cigarette use risks & prevention

Marijuana Prevention Plus Wellness



Cannabis Use Prevention Program Promoting Wellness for High School Adolescents

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Marijuana Prevention Plus Wellness (PPW) Programs

- 1. Evidence-based SBI practice & based on the SPORT PPW program
- 2. Targets PA, healthy eating, sleep & stress control
- 3. Single-session (< 50 minutes) Screening and Brief Interventions (HS & MS versions)
- 4. Scripted implementation with slides
- 5. Individual/one-on-one or in a group
- 6. Marketing theory targeting positive images
- 7. Targets cannabis use risks & prevention

Inputs	Out Activities	puts Participation	Short	Outcomes Impact Medium	Long
 Program manuals or optional booklets. Digital downloads of PP slides & reproducible program materials. Online or onsite program implementer training workshop (optional TOT and youth leadership training). Program implementation support via email and phone. Scannable surveys and program fidelity and effectiveness evaluation support. Program tailoring and promotion support and materials. 	 Screening of current substance use (SU) & protective healthy behaviors. Feedback & advice on SU & healthy behavior interactions, images & personal risk & responsibility. Recommended menu of multiple health behaviors to set & monitor goals to avoid SU & increase health- promoting habits. Follow-up strategies (i.e., repeating the PPW SBI, revisiting & revising goals set, providing parent flyers, web-based resources & offering additional lessons). 	 Youth ages 8-18. Young adults ages 18-25. High-risk adolescents and young adults. High-risk adults. 	 Increased awareness of positive images & other benefits of wellness behaviors. Increased awareness of how SU behaviors interfere with positive image & behavior achievement. Increased peer & future self- comparisons. Increased peer & future self- comparisons. Increased awareness of discrepancy between current habits & peer & desired future images. Increased multiple health behavior goal setting. Increased parent positive behavior- image communication. 	 Increased intentions to avoid or reduce SU and increase wellness habits. Continued multiple behavior goal setting and monitoring. Increased self- efficacy and capability to avoid or reduce SU and increase wellness behaviors. Increased similarity to peers practicing wellness habits and decreased similarity to peers using substances. Decreased peer influenceability to initiate or use substances and increase wellness behaviors. Decreased peer influenceability to increase wellness behaviors. Decreased peer prevalence of SU and increased peer prevalence of wellness behaviors. Increased peer prevalence of wellness behaviors. Increased perceived risk of SU behaviors to health & healthy behaviors. 	 Reduced onset and use of alcohol and problems. Reduced onset and use of tobacco and e-cigarettes. Reduced onset and use of marijuana. Reduced onset and use of other illegal substances. Increased physical activity. Increased sheep 8. Increased sheep 8. Increased stress control. Increased body image satisfaction. Increased health-related quality of life. Increased spiritual practices (IGI).

Prevention Plus Wellness (PPW) Screening & Brief Intervention (SBI) Logic Model (5.8.19)

Assumptions:

- 1. Positive images can be triggered with vivid key words and illustrations
 2. Triggered positive peer and desired future images can motivate multiple behavior goal
 setting and behavior change via changes in risk and protective factors
 3. The PPW SBI Practice Model can be adopted to effectively influence various SU
- behaviors among diverse populations

External Factors:

Access to youth/young adult/adult population(s)
 Time availability of participants and implementers
 Space and equipment availability to provide SBI to participants
 Time and staff availability to monitor program fidelity and effectiveness

SBI Inputs

1. Program manuals or optional booklets.

2. Digital downloads of PP slides & reproducible program materials.

3. Online or onsite program implementer training workshop (optional TOT and youth leadership training).

4. Program implementation support via email and phone.

5. Scannable surveys and program fidelity and effectiveness evaluation support.

6. Program tailoring and promotion support and materials.

SBI Outputs: Activities

1. Screening of current substance use (SU) & protective healthy behaviors. 2. Feedback & advice on SU & healthy behavior interactions, images & personal risk & responsibility. 3. Recommended menu of multiple health behaviors to set & monitor goals to avoid SU & increase health-promoting habits. 4. Follow-up strategies (i.e., repeating the PPW SBI, revisiting & revising goals set, providing parent flyers, web-based resources & offering additional lessons).

SBI Outputs: Participation

Youth ages 8-18.
 Young adults ages 18-25.
 High-risk adolescents and young adults.
 High-risk adults.



Outcomes-Impact: Short

1. Increased awareness of positive images & other benefits of wellness behaviors.

2. Increased awareness of how SU behaviors interfere with positive image & behavior achievement.

- 3. Increased peer & future self-comparisons.
- 4. Increased awareness of discrepancy between current habits & peer & desired future images.

5. Increased multiple health behavior goal setting.

6. Increased parent positive behavior-image communication.

Outcomes-Impact: Medium

- 1. Increased intentions to avoid or reduce SU and increase wellness habits.
- 2. Continued multiple behavior goal setting and monitoring.
- 3. Increased self-efficacy and capability to avoid or reduce SU and increase wellness behaviors.
- 4. Increased similarity to peers practicing wellness habits and decreased similarity to peers using substances.
- 5. Decreased peer influenceability to initiate or use substances and increased influenceability to increase wellness behaviors.
- 6. Decreased peer prevalence of SU and increased peer prevalence of wellness behaviors.
- 7. Increased perceived risk of SU behaviors to health & healthy behaviors.

Outcomes-Impact: Long

- 1. Reduced onset and use of alcohol and problems.
- 2. Reduced onset and use of tobacco and ecigarettes.
- 3. Reduced onset and use of marijuana.
- 4. Reduced onset and use of other illegal substances.
- 5. Increased physical activity.
- 6. Increased healthy eating.
- 7. Increased sleep.
- 8. Increased stress control.
 - 9. Increased body image satisfaction.
 - 10. Increased health-related quality of life.
 - 11. Increased spiritual practices (IGI).

Model Assumptions

1. Positive images can be triggered with vivid key words and illustrations

2. Triggered positive peer and desired future images can motivate multiple behavior goal setting and behavior change via changes in risk and protective factors

3. The PPW SBI Practice Model can be adopted to effectively influence various SU behaviors among diverse populations

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Access to youth/young adult/adult population(s) 02

Time availability of participants and implementers 03

Space and equipment availability to provide SBI to participants

04

Time and staff availability to monitor program fidelity and effectiveness

Model External Factors



Identified by SAMHSA as an evidencebased practice: <u>https://www.integration.samhsa.gov/cli</u> <u>nical-practice/sbirt/brief-interventions</u>

Screening & Brief Intervention (SBI)



Includes SAMHSA's Screening, Brief Intervention and Referral to Treatment (SBIRT):<u>https://www.integration.samhsa.</u> gov/clinical-practice/sbirt



CDC's alcohol screening & brief intervention in primary care: <u>https://www.cdc.gov/ncbddd/fasd/alcoh</u> <u>ol-screening.html</u>



WHO supports alcohol SBI: https://www.who.int/substance_abuse/ activities/sbi/en/



NIAAA alcohol SBI for youth: https://pubs.niaaa.nih.gov/publicati ons/Practitioner/YouthGuide/Youth Guide.pdf

More SBI



American Academy of Pediatrics (AAP) SU SBIRT for youth: <u>https://www.aap.org/en-</u> <u>us/advocacy-and-policy/aap-</u> <u>healthinitiatives/Pages/Substance-Use-</u> <u>Screening.aspx</u>



NIDA adolescent SU screening for SBI: <u>https://www.drugabuse.gov/nidamed-</u> <u>medical-health-professionals/screening-</u> <u>tools-resources/screening-tools-for-</u> adolescent-substance-use

SBIRT vs. PPW SBI Model

<u>SBIRT</u>

- 1. Screen to identify risky SU
- 2. Provide feedback & advice on SU behaviors
- 3. Refer high risk individuals to treatment

- 1. Screen to increase awareness of SU and healthy behaviors
- Provide feedback & advice on SU & healthy behaviors and how they interact
- Conduct multi-health behavior goal setting for all participants & recommend continued goal setting

PPW Screening and Brief Intervention Steps Step 1

Step 2

Screen participants current health habits using screening survey

Provide feedback and positive image messages using script & PowerPoint slides or booklet

Step 3

Assist participants to set and monitor goals to avoid substance use and increase healthy behaviors



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