

## RESEARCH SUMMARY

### EVALUATION OF THE *TOO GOOD FOR DRUGS--ELEMENTARY SCHOOL* PREVENTION PROGRAM 2002-2003: LAKE COUNTY, FLORIDA

This report is a summary of an evaluation of the *Too Good for Drugs-Elementary School* prevention program. The School District of Lake County was awarded 'Safe and Drug-Free Schools' funds from the Florida Department of Education to supplement the district's ongoing substance and violence prevention efforts. One component of the entitlement grant focused on implementing the *Too Good for Drugs* (TGF<sup>D</sup>) prevention program for elementary students during the 2002-2003 school year.

The purpose of the evaluation was to examine the effectiveness of the *Too Good for Drugs-Elementary School* program in impacting children's classroom behaviors, attitudes toward drugs, perceptions of the harmful effects of drugs, emotional competency skills, social and resistance skills, and goal setting and decision making skills.

The evaluation examined the following questions. First, do *teachers* of students receiving the TGF<sup>D</sup> prevention program in comparison to teachers of students in the control group observe: 1) more frequent student use of personal and social skills, 2) more frequent student engagement in positive social behaviors, and 3) less frequent student engagement in inappropriate social behaviors in the classroom? Second, do *students* receiving the TGF<sup>D</sup> prevention program in comparison to students in the control group indicate: 1) higher levels of emotional competency skills, 2) higher levels of social and peer resistance skills, 3) higher levels of goal setting and decision making skills, 4) more positive attitudes regarding the inappropriateness of drug use, and 5) greater awareness of the harmful effects of drugs?

#### **Method**

Six of the district's 22 elementary schools were randomly selected and recruited for participation. Fifty-two classroom teachers participated in the study--26 in the treatment group and 26 in the control group. One thousand one hundred and forty-two (1142) students participated in the study. Forty-nine percent of the students were third graders and 51% fourth graders. Forty-nine percent of the students were female, approximately 71% White, 17% African American, 10% Hispanic, and 2% Other (Asian, American Indian and Multiracial). Forty-five percent of the student sample was categorized as economically disadvantaged based on receipt of reduced or free lunch services.

Teachers in the treatment and control group completed checklists assessing student behaviors prior to delivery of the TGF<sup>D</sup> prevention program, following program delivery, and again 4-months after program delivery. Students in the treatment and control group completed a survey questionnaire prior to delivery of the TGF<sup>D</sup> prevention program, following program delivery, and 4-months later.

## Results

Prevention research has identified certain risk factors that increase the likelihood of children and youth engaging in substance use behaviors and certain protective factors that decrease the impact of risk factors. The *TGFD* program incorporates curricula and instructional activities aimed at reducing risk factors and building protective factors. The following risk and protective factors were examined in the study: Socially Appropriate and Inappropriate Behaviors; Emotional Competency Skills; Social and Resistance Skills; Goal Setting and Decision Making Skills; Perceptions of the Harmful Effects of Drugs; and Attitudes Toward Drugs.

1. Students in the treatment and the control group responded to a survey questionnaire before, following and 4-months after program delivery.

### **Student responses to protective survey items at the end of program suggest the following:**

- (a) Students participating in the *TGFD* program had statistically significant higher scores or higher levels of **emotional competency skills** in comparison to students in the control group. A sample of item content that represents skills in this category includes: 1) I know many different words to describe what I feel inside, 2) I am responsible for choosing to live a safe and healthy life, and 3) I can do almost anything I put my mind to.
- (b) Students participating in the *TGFD* program had statistically significant higher scores or higher levels of **social and resistance skills** in comparison to students in the control group. A sample of item content that represents skills in this category includes: 1) If someone tried to hand me a can of beer, I would just walk away, 2) If a group of kids called me over to try some marijuana, I would just ignore them, and 3) I know many peer refusal strategies to help me avoid pressure to smoke, drink or use marijuana.
- (c) Students participating in the *TGFD* program had statistically significant higher scores or higher levels of **goal setting and decision making skills** in comparison to students in the control group. Positive effects on goal and decision-making skills were present 4 months later. A sample of item content that represents skills in this category includes: 1) Setting a goal helps me figure out what I want to do, 2) When I set a goal, I think about what I need to do to reach my goal, and 3) I make good decision because I stop and think.
- (d) Students participating in the *TGFD* program had statistically significant higher scores or higher **perceptions of the harmful effects of drug use** in comparison to students in the control group. A sample of item content that represents skills in this category includes: 1) Drinking alcohol can make it hard to see, walk and talk, 2) People who smoke cigarettes can quit whenever they want to, and 3) Smoking marijuana improves a person's coordination.

- (e) Students in both the treatment and the control group had very positive attitudes about the inappropriateness of drug use. The average scores across groups ranged from 4.62 to 4.67 on a 5.00-point scale, suggesting a ceiling on the potential effects of program treatment. Considering the students in this sample were served in general education settings, the vast majority of third and fourth graders would not be engaging in tobacco, alcohol and other drug use.
2. In an effort to triangulate data, teacher judgment concerning student behavior was also examined. Classroom teachers were asked to rate each student's behavior related to personal and social skills, prosocial behaviors, and inappropriate social behaviors across the three testing periods. If teacher responses were consistent with student responses or vice versa, the study's findings could be interpreted with greater confidence.

**Teachers' observations of students at the end of program and again at the 4-month follow up suggest the following:**

- (a) Based on teachers' judgments, students participating in the *TGFD* program had statistically significant higher scores or higher levels of **personal and social skills** in comparison to students in the control group. A sample of item content that represents skills in this category includes: 1) uses a variety of verbal labels for emotions, 2) stops and thinks before acting, and 3) uses positive peer refusal strategies.
  - (b) Based on teachers' judgments, students participating in the *TGFD* program had statistically significant higher scores or engaged in more **prosocial behaviors** in comparison to students in the control group. A sample of item content that represents skills in this category includes: 1) helps other students, 2) asks other students to play if they don't have someone to play with, and 3) takes turns, plays fair, and follows rules of the game.
  - (c) Based on teachers' judgments, students participating in the *TGFD* program had statistically significant higher scores or engaged in fewer **inappropriate social behaviors** in comparison to students in the control group. A sample of item content that represents skills in this category includes: 1) yells at other students, 2) gets into a lot of fights at school, and 3) disrupts instruction and/or procedures.
3. Treatment effects were examined for teachers and students participating in the *TGFD* program across gender, socioeconomic status (free/reduced lunch), and ethnic background. These results offer evidence of the *TGFD* program's utility in serving and meeting the needs of diverse student populations.

**Teachers' observations of students in the treatment group at the end of program suggest the following:**

- (a) The *TGFD* program was effective for participating students **regardless of gender**. Both girls and boys experienced positive improvements in Personal and Social Skills, Prosocial Behaviors, and Inappropriate Social Behaviors.

- (b) The *TGFD* program was effective for participating students **regardless of socioeconomic status**. Economically disadvantaged and non-economically challenged students experienced positive improvements in Personal and Social Skills, Prosocial Behaviors, and Inappropriate Social Behaviors.
- (c) The *TGFD* program was effective for participating students **regardless of ethnic background**. White, African American and Hispanic students experienced positive improvements in Personal and Social Skills, Prosocial Behaviors, and Inappropriate Social Behaviors. Sample sizes for students from other ethnic backgrounds were too small to include in the analyses.

**Treatment student responses to protective survey items at the end of program suggest the following:**

- (a) The *TGFD* program was effective for participating students **regardless of gender**. Both girls and boys experienced positive improvements in Emotional Competency Skills, Social and Resistance Skills, Goal Setting and Decision Making Skills, Perceptions of Harmful Effects, and Attitudes Toward Drugs.
- (b) The *TGFD* program was effective for participating students **regardless of socioeconomic status** in four of five protective factors. Economically disadvantaged students experienced improvement across all five protective areas. Students not economically challenged experienced improvements in all protective areas with the exception of Attitudes Toward Drugs.
- (c) The *TGFD* program was effective for participating students **regardless of ethnic background** in three of the five protective areas. White and African American students experienced improvement across all five protective areas. Hispanic students experienced improvement in Social and Resistance Skills, Goal Setting and Decision Making Skills, and Attitudes Toward Drugs. No changes were observed in the areas of Emotional Competency Skills or Perceptions of Harmful Effects of Drugs.

In summary, the *TGFD* prevention program evidenced a positive effect on third and fourth graders' behaviors in the classroom up to four months following program delivery. The prevention program was also successful in impacting four of the five protective factors associated with strengthening children's abilities to make positive, healthy decisions—emotional competency skills; social and resistance skills; goal setting and decision making skills; and perceptions of harmful effects of drug use. Treatment effects measured using student surveys tended to degrade over time, stressing the importance of ongoing review and practice of intrapersonal and interpersonal skills in the classroom setting. The *TGFD* program was effective for students regardless of gender, socioeconomic status, and ethnic background.