RESEARCH SUMMARY

EVALUATION OF THE
TOO GOOD FOR DRUGS--ELEMENTARY SCHOOL
PREVENTION PROGRAM 2006-2007: 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 (TGFD) prevention program for elementary students during the 2006-2007 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 TGFD prevention program in comparison to teachers of students in the control group observe: 1) more frequent student use of personal skills, 2) more frequent student use of social skills, 3) more frequent student engagement in positive social behaviors, and 4) less frequent student engagement in inappropriate social behaviors in the classroom? Second, do students receiving the TGFD 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-four classroom teachers participated in the study--27 in the treatment group and 27 in the control group. One thousand and eleven (1011) students participated in the study. Fifty-three percent of the students were third graders and 47% fourth graders. Forty-nine percent of the students were female, approximately 60% White, 18% African American, 16% Hispanic, and 6% Other (Asian, American Indian and Multiracial). Forty-eight percent of the students receive free or reduced lunch services, 14% exceptional education services, and 11% English language services.

Teachers in the treatment and control group completed checklists assessing student behaviors prior to delivery of the TGFD prevention program, following program delivery, and again 3-months after program delivery. Students in the treatment and control group completed a survey questionnaire prior to delivery of the TGFD prevention program, following program delivery, and 3-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: Personal and Social Skills; 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 3-months after program delivery.

Student responses to protective survey items at the end of program and again at the 3-month follow-up suggest the following:

(a) Students participating in the TGFD program had statistically greater gains or higher levels of emotional competency skills in comparison to students in the control group. Positive effects in emotional competency skills were observed three months later. 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 greater gains or higher levels of social and resistance skills in comparison to students in the control group. Positive effects in social and resistance skills were observed three months later. 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 greater gains or higher levels of goal setting and decision making skills in comparison to students in the control group. Positive effects in goal and decision-making skills were observed three 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 greater gains or higher levels of perceptions of harmful effects of drug use in comparison to students in the control group. Positive effects for perceptions of harmful effects of drugs were observed three months later. 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 4.66 to 4.84 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 felt it was wrong to use substances and were not inclined to suggest any interest in the use of tobacco, alcohol or marijuana. A sample of item content that represents attitudes in this category includes: 1) If I have a chance, I might try drinking alcohol, 2) It is wrong for kids to use marijuana, and 3) I might smoke when I get older.

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 skills, social skills, prosocial behaviors, and inappropriate social behaviors across the three testing periods. If teacher responses are 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 3-month follow-up suggest the following:

(a) Based on teachers’ judgments, students participating in the TGFD program had statistically greater gains or higher levels of personal skills in comparison to students in the control group. Positive effects for gains in personal skills were observed three months later. 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) calms him/herself down when upset.

(b) Based on teachers’ judgments, students participating in the TGFD program had statistically greater gains or higher levels of social skills in comparison to students in the control group. Positive effects for gains in social skills were observed three months later. A sample of item content that represents skills in this category includes: 1) treats other students with respect, 2) uses positive peer refusal strategies, and 3) interacts well with other students.

(c) Based on teachers’ judgments, students participating in the TGFD program had statistically greater gains or engaged in more prosocial behaviors in comparison to students in the control group. Positive effects for gains in prosocial behaviors were observed three months later. A sample of item content that represents behaviors 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.

(d) Based on teachers’ judgments, students participating in the TGFD program had statistically significant greater gains or engaged in fewer inappropriate social behaviors in comparison to students in the control group. Significant differences were not observed at the 3-month follow-up between students in the treatment and the control group for in inappropriate behaviors. A sample of item content that represents behaviors 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 or reduced lunch services), and ethnic background. These results offer evidence of the TGFD program’s usefulness 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) Girls and boys experienced significant improvements in their scores on the Teacher Checklist of Student Behavior after participating in the TGFD prevention program and 3-months later.

(b) Economically disadvantaged and non-economically disadvantaged students experienced significant improvements in their scores on the Teacher Checklist of Student Behavior after participating in the TGFD prevention program and 3-months later.

(c) White, African American, and Hispanic students experienced significant improvements in their scores on the Teacher Checklist of Student Behavior after participating in the TGFD prevention program and 3-months later.

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

(a) Girls and boys experienced significant improvements in their scores on the Student Survey Questionnaire after participating in the TGFD prevention program and 3-months later.

(b) Economically disadvantaged and non-economically disadvantaged students experienced significant improvements in their scores on the Student Survey Questionnaire after participating in the TGFD prevention program and 3-months later.

(c) White, African American, and Hispanic students experienced significant improvements in their scores on the Student Survey Questionnaire after participating in the TGFD prevention program and 3-months later.

In summary, the TGFD prevention program evidenced a positive effect on third and fourth graders' behaviors in the classroom up to three 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. The TGFD program was effective for students regardless of gender, socioeconomic status, and ethnic background.