Overdose Lifeline & PreVenture: Personality Targeted Interventions for Adolescent Substance Misuse

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Overview

• Introduction to Overdose Lifeline, Inc.
• Current state of prevention education in Indiana
• Theoretical background of prevention programming
• PreVenture and how it works
• ODL’s pilot of PreVenture in Indiana
• Closing remarks with Q&A
Overdose Lifeline

• slides and key remarks about the establishment of the organization, programs offered
Current State of Prevention Education in Indiana

• some points about the programs we know that are being implemented
THEORETICAL BACKGROUND OF PREVENTION PROGRAMMING
Trends in Youth Substance Misuse

- Stable rates of drinking in adolescents
- Earlier age of onset
- Increasing rates of binge drinking
Scientific Review
Why we should care

• Substance use among high school students not diminishing
• Most substance use disorders have their symptomatic onset in adolescence
• Hightened risk of developing SUD and other internalizing/externalizing disorders
• More severe, complex course of disorders with significant health and social consequences
Scientific Review
What to do to prevent SUD

• Classes of Public Health Intervention Strategies
  – Treatment
  – Indicated
  – Selective
  – Universal
Efficacy of Youth Substance Use Prevention Programming

• Universal Prevention Programs
  – Ex] DARE: Drug Abuse Resistance Education
  – Limited evidence for efficacy and universal school-based approaches
  – Universal programs are less effective for those who have already started using or are more severe users and those most at risk
Efficacy of Youth Substance Use Prevention Programming

• Evidence-Based Universal Prevention Programs
  – Life Skills Training Program
  – Strengthening Families Programs
    – Effective in European context
    – Mild effects on drinking and drug use
    – Recent findings are negative
    – Trial in college students failed to show effects
    – LARGE ENDEAVOUR- significant rate of drop-out from trials
Efficacy of Youth Substance Use Prevention Programming

• Selective/Targeted Prevention Programs
  – Focused on targeting at risk groups
  – Relatively uncommon due to lack of understanding of risk
  – More effective
  – Even more effective when interactive with peer involvement

• Indicated Prevention Programs
  – Motivational Interviewing (MI), Brief Interventions with substance users
  – Time-limited effect
  – Effective for problematic substance users
With no pre-existing condition, there is a low risk of addiction; therefore investment is best in programs that identify & serve at-risk youth
PREVENTURE AND HOW IT WORKS
A Selective Intervention Approach

• Personality targeted
  – Utilizing strong CBT literature on effective therapies for emotional and behavioral problems that are relevant to personality

• Risk Factors
  – Predicts vulnerability to alcohol dependence
  – Predicts vulnerability to other mental disorders
  – Mediates relationship between genetic factors and substance misuse
A Selective Intervention Approach

• Informs on motives for substance use, typology
  – Risky motives for drinking
  – Drug of choice
  – Different patterns of coping
  – Sensitivity to drug effects and drug reinforcement

• 4 Key personalities target
  – Sensation Seeking (SS)
  – Impulsivity/Antisociality (IMP)
  – Anxiety Sensitivity (AS)
  – Negative Thinking/Hopelessness/Depression Proneness (NT)
A Selective Intervention Approach

• 4 key personalities targeted
  – Sensation Seeking (SS)
    • Seeking out behavior – why not attitude
  – Impulsivity/Antisociality (IMP)
    • Illadjusted, not seeking out but will pick up with exposure
  – Anxiety Sensitivity (AS)
    • Interpersonal dependence, not as exposed but once they try they find it useful in addressing their anxiety
  – Negative Thinking/Hopelessness/Depression Proneness (NT)
    • Become involved quickly, may use alone
Implementation

• Screen all grade-level students using SURPS
  — SURPS: Substance Use Risk Profile Scale
  • 23 questions
  • Developed using a myriad of personality or symptom inventories
  • Validated in substance users and adolescents/adults from US, Canada and UK
  • Translated: French, German, Spanish, Czech, Dutch, Cantonese, Japanese, Sri Lankan
Implementation

• Students are identified for risk personality they scored highest in

• Attend two 90-minute group sessions of peers with facilitator
  – At least one week apart from one another
  – 4 different group sessions, specific to one of the four personality types
  – Students participate in a single group, the one they scored highest in during SURPS
Group Sessions

• Lead by formally trained facilitator
  – Background in social work, psychology, or working with at risk youth
  – Found still effective using school staff
• Small groups of peers, typically ~8-14 students
• Structured using student workbook
  – Special facilitator guide
  – Every student receives a workbook to take hope and keep
• Utilize Cognitive Behavioral Therapy (CBT) and Motivational Interviewing (MI) techniques
CBT Basics

• CBT assumes: our thoughts cause our feelings and behaviors, not external events
• Unwanted thinking, emotional and behavioral reactions are learned over a long period of time
• Aim to identify the thinking/underlying schema that causes unwanted feelings/behaviors
• Groups sessions assume patterns are less ingrained and habitual at earlier ages
CBT in PreVenture

- Personality-targeted approach assumes that personality reflects/captures a particular system of automatic thoughts, assumptions and underlying schema, which are determined by interaction with genetic and environmental factors
- Uses scenarios and exercises that examine students’ reactions in situations that specifically trigger such thinking
- Seek to develop alternative viewpoints, identify signs of maladaptive thinking, and student exposure to shaping subjective construction of reality
MI Essential to PreVenture

• Transtheoretical Model of Change
  – Change is a series of stages which we pass when addressing problematic behavior
  – Motivation is a state of readiness to change that fluctuates with time and situations

• Facilitator creates focused and client-centered counseling to elicit behavior change through exploring and resolving student ambivalence
MI Essential to PreVenture

• MI is the way the facilitator interacts with students, rather than a set of techniques or activities

• Allows students to:
  – Self-identify with the personality profile being targets
  – Identify personal goals
  – Consider whether their current behavior is in line with their goals
THE EFFECTS OF PREVENTURE
Research Process

• Continuing 5 Phase Clinical Tr
  – Phase I: Proof of Concept, Matched Literature Review
  – **Phase II: Efficacy (PreVenture)**
  – Phase III: Effectiveness (Adventure)
  – Phase IV: Process, Secondary Outcomes, Pathways, Delivery Models (Coventure)
  – Phase V: Special Populations, Contexts, Generalizability, Optimization (Intervention)
PreVenture Trial

• Need to collect graphs
PreVenture 2-Year Trial Outcomes

• Need to collect graphs
PREVENTURE PILOT IN INDIANA
Overview

• First implementation of PreVenture in the United States
• Examining the American context of substance use, particularly concerns with opioid misuse
• Made possible through Division of Mental Health and Addiction
• Process began Summer 2017 and continues through December 2018
Overview

• 7 counties across Indiana
  – Jackson, Jennings, Laporte, Starke, Pulaski, Howard, and Grant

• Estimated reach of 2,500 students

• All 9th graders in every public high school in each county

• Include process and outcomes evaluations by third-part evaluator
Process Evaluation

- Determine fidelity of program implementation
- Examines strengths and challenges in implementing in schools
- Draw considerations for sustainability
- Includes group discussion observations
- Follow-up with facilitators and schools to develop best practices
Outcomes Evaluation

• Quasi-experimental design with controls-test groups
  – Controls consist of remaining students not participating in group sessions
• Mixed methods to include quantitative and qualitative evidence
• Includes pre-test questionnaire at time of SURPS evaluation
• 6-month, 12-month and 18-month follow-up at schools of all 9th graders using questionnaire
Outcomes Evaluation

• Questionnaire examines overall student mental health experiences, onset of problematic substance misuse, and overall substance use
• Expands PreVenture evidence to include considerations of prescription drug and opioid misuse, not yet done
• Participating students will provide additional qualitative follow-up using focus groups and individual interviews
Final Goal

• Expand Indiana’s evidence-based program options
• Improve overall student mental health and reduce substance misuse among Indiana youth
• Develop life-long coping skills among Indiana’s most at-risk youth
• Provide schools the opportunity to offer more targeted approaches to addressing student mental health
QUESTIONS AND DISCUSSION