Local Impact of Proposition 64 Final Evaluation Report

Contra Costa County
Behavioral Health
Alcohol and Other Drugs Services

Proposition 64 Grant Cohort 1 BSCC Grant Award: 934-20 October 1, 2020 - September 30, 2023

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Executive Summary

In November 2020, Contra Costa County Health Services' Alcohol and other Drugs Services (AODS) received the Prop 64 grant funding from the California Board of State and Community Corrections (BSCC) for a three-year project focusing on implementation of a youth-led peer-education prevention program and school-based Substance Use Disorder (SUD) treatment services. The goals of this project were to increase access to SUD treatment, reduce youth marijuana use, and reduce the number of illicit drug related suspensions in Antioch, California. Deer Valley High School (DVHS) and Black Diamond Midde School (BDMS) located in Antioch, CA, was the target population of the project. The purpose of the project was to increase students' awareness about the harms of cannabis use and provide SUD treatment at the two schools.

The project consisted of three cohorts of both high school and middle school students who participated in a peer-to-peer education prevention program. High school peer educators were recruited each year and trained by the program coordinator on subjects such as leadership, substance use curriculum, and social media advocacy where they utilized their new knowledge to educate and mentor middle school students. Due to the Covid-19 pandemic, access to in person communication with students and clearance on campus afterschool was a barrier in providing services, thus a one-day summit was held at BDMS for the first cohort of middle schoolers. The second aspect of the program focused on treatment for students. A Substance Abuse Counselor at East County Child and Adolescent Services Clinic was a resource for students and offered individual and group counseling services at the clinic and in person at both schools.

The goal of increasing access to SUD treatment was achieved as DVHS and BDMS students still have an opportunity to access a Substance Abuse Counselor. The goal of reducing marijuana use was partially met as there is insufficient data (due to Covid) to support a full reduction in the student population with regards to marijuana use. The majority of students who had used cannabis prior to participating in the program reported a decrease in their cannabis consumption by the time they completed the program. The final goal to reduce the number of drug related suspensions was not achieved. Due to the Covid-19 pandemic, no data was available for the academic year 2020-2021. Both district level data and individual school data had an overall increase in drug related suspensions, from 2021-2023, compared to 2018-2020 academic years. Still, the data is unreliable due to the extenuating and unprecedented historical circumstances that impacted our society.

Nonetheless, despite the challenges presented by the pandemic, the students, program coordinator, and substance abuse counselor demonstrated resilience and adaptability throughout the duration of the grant. They organized virtual classes when in-person classes were not feasible, conducted a one-day summit at BDMS when access to campus was challenging, ensured treatment services were available to students, and were successful in having DVHS students educate and mentor middle school students regarding cannabis. Although not all goals of the project were achieved and there was no significance in the project affecting the high school and middle school students in a larger scale, participants in the program reported an increase in cannabis knowledge and were directly impacted by the services provided.

Project Background

In November 2020, Contra Costa AODS received the Prop 64 grant funding from the California Board of State and Community Corrections (BSCC) for a three-year project focusing on implementation of a youth-led peer-education prevention program and school-based SUD treatment services.

Using the Peer-to-Peer (P2P) model, the youth-led peer-education program was conducted at Deer Valley High School (DVHS) and Black Diamond Middle School (BDMS) in Antioch, California. Antioch is the second largest populated city in Contra Costa County, which is California's ninth largest county within the San Francisco Bay Area. According to a report released from the City of Antioch in 2018, Antioch's estimated U.S Census had a population of 111,535 and a landmass of 30.12 square miles. In 2008, Antioch experienced a population boom when many people from the greater Bay Area migrated to Antioch for relatively affordable housing opportunities. As a result of this gentrification process, the southeast region of Antioch, in particular, experienced the largest urban development growth and demographic changes in the city. In 2015, when the housing market crashed, many homes were foreclosed in southeast Antioch. This severely impacted the City with the highest economic downturn and resulted with a higher concentration of Section 8 properties.²

In 2018, Antioch had an estimated median household income of \$71,422, with a poverty rate of 14.6%, which was concentrated in certain sections of the city and was higher than the State's rate.¹ Due to the economic decline along with an increase in the number of group homes, southeast Antioch became a home for many at-risk youths from Antioch and the greater Bay Area.² The majority of students residing within the southeast Antioch zip code of 94531 attend one of three comprehensive schools considered to be socioeconomically disadvantaged according to the School Accountability Report Cards.³

The target population for these services were youth ages 12-18 who attended DVHS and its "feeder" BDMS, along with any youth at East County Child and Adolescent Services Clinic.

The scope of the project consisted of implementing a P2P education model for substance use prevention and brought together middle school and high school youth as leaders and resources in their community. The P2P model involved developing core competencies among the high school peer educators through leadership training, and as a result, the high school students served as mentors and educators to the middle school students. High school peer educators were recruited each year and trained on subjects such as leadership, substance use curriculum and social media advocacy. During the first two years of the program, due to Covid-19 pandemic restrictions, the first cohort of DVHS

¹ U.S Census Bureau, 2018, www.census.gov

² "Deer Valley High School Mid-Cycle Report", Western Association of Schools and Colleges, 2017

³ School Accountability Report Cards , California Department of Education 2018-2019 https://www.cde.ca.gov/ta/ac/sa/

students met once a week during an 8-week cycle (Fall 2021) to be trained and then participated in a one-day summit at Black Diamond Middle School the following semester.

The second and third cohort of DVHS students met twice a week for an 8-week period. Each class was approximately an hour and a half long. The classes included development of leadership skills and utilizing their knew knowledge to serve as mentors and educators for the middle school students. Two cycles of the 8-week after school program for the BDMS students were facilitated in the Fall of 2022 and Spring of 2023 along with the *One-Day Summit* in the Spring of 2022. To increase protective factors, the curriculum had topics that were age appropriate, culturally relevant and youth driven.

A media campaign "Cannabis Decoded" was also launched and aimed at increasing understanding about underage marijuana use. An Instagram account for the afterschool program, also known as Elevate Youth, was created. Below are examples of posts that were developed by the program coordinator and youth participating in the program, the posts were also utilized to outreach and disseminate the program.



Graphic 1: Examples of Instagram (elevateyouth.antioch) posts

Moreover, the program coordinator worked closely with school principals and staff to recruit peer educators and middle school students into the program. High school students were recruited by word of mouth and outreach such as tabling events at the school site by the program coordinator. Middle school students were primarily recruited through the school as they mandated students struggling with behavior issues to attend the program. Peer educators committed to the 8-week leadership training and mentorship training (met afterschool twice a week for cohorts 2 and 3; cohort one had a mix of virtual classes due to the pandemic) and middle school students committed to the whole 8-week after school program.

In addition to the P2P education model for substance use prevention, a substance abuse counselor based at the East County Child and Adolescent Services Clinic provided SUD

treatment services to students referred by the Elevate Youth program to both schools. The counselor offered individual and group counseling services at the clinic whenever the school was closed due to quarantine and on campus any time the school was accessible. Youth referred to treatment services received a Screening and Brief Intervention (SBI) and treatment service. After engagement, if medical necessity was established through the American Society of Addiction Medicine (ASAM) Criteria assessment, students diagnosed with an SUD participated in a strengths-based treatment aimed at promoting positive outcomes, increasing protective factors, and healthy social interactions.

Objectives and Goals:

Objectives and Goals:		
Goal Objectives		
Increase access to SUD treatment.	A. By January 1, 2021, begin offering SUD treatment for youth who are on probation and reside in the 94531-zip code at East County Child and Adolescent Mental Health Services. B. By April 1, 2021, establish school-based treatment services at middle	
	school and high school.	
	C. By April 1, 2022, certify both schools as Drug Medi-Cal sites.	
	D. By September 30, 2023, provide SUD treatment to 170 students at the middle and high school.	
E. By September 30, 2023, 40 students who receive school-based treatment will also be offered additional treatment services at East Co Child and Adolescent East County Child and Adolescent Mental Heal Services Clinic.		
F. By September 30, 2023, receive 200 referrals for treatment from		
	schools and Juvenile Probation Department.	
Reduce youth	A. By September 1, 2021, establish Peer to Peer after-school program at	
marijuana use.	middle school.	
	B. By September 30, 2023, conduct 170 Screening and Brief Interventions (SBI).	
	C. By September 30, 2023, collect 150 pre- and post-surveys to	
	determine change in behavior before and after 90-day treatment episode.	
	D. By September 30, 2023, collect 100 pre- and post-surveys from	
	participants in after-school program.	
E. By September 30, 2023, conduct three focus groups to measure		
	effectiveness of social media campaign.	
Reduce the number	A. By September 30, 2021, demonstrate a 5% reduction in in illicit drug-	
of illicit drug related	related suspensions.	
suspensions in the	B. By September 30, 2022, demonstrate a 10% reduction in illicit drug-	
area.	related suspensions.	
	C. By September 30, 2023, demonstrate a 15% reduction in illicit drug- related suspensions.	
	D. By September 30, 2023, will attend 10 School Attendance Review Board (SARB) meetings for the Antioch Unified School District to identify and advocate for truant youth to receive SUD treatment if applicable.	

Process Evaluation Design and Method

Research Design

Contra Costa AODS utilized an internal planner/evaluator (project evaluator) to conduct the evaluation of this project. A mixed combination of process evaluation was conducted before, during, and after project activities to collect and analyze both quantitative and qualitative data to better understand the implementation of the project. The project evaluator worked with the program coordinator, staff, faculty, and other partners throughout the implementation of the grant, to ensure that all essential data was collected and documented for analysis.

Project Oversight and Responsibilities

The AODS Program Chief oversaw the implementation of all Prop 64 activities to ensure that milestones were met, and that fiscal and programmatic reports were submitted in a timely manner and consistent with the stipulated in the project. An AODS Program Manager was responsible for the day-to-day program logistics and provided supervision to the counselor who provided treatment at the schools and at the East County Child and Adolescent Services Clinic. The counselor and the project coordinator were instrumental in enrolling students needing assistance, referring clients to various resources, and assisting with data collection. The project coordinator was employed by Community Health for Asian Americans (CHAA) a subcontractor of AODS. The project coordinator was directly responsible for implementation of the P2P education program and acted as a liaison for DVHS and BDMS. Consistent with our project proposal, the coordinator's responsibilities included training the high school peer educators, recruiting program participants⁴, and implementing the after-school program for the middle school students. The project coordinator also assisted with student and project data collection which was submitted to the project evaluator on a regular basis. Likewise, the project evaluator was responsible for submitting the local evaluation plan and quarterly progress reports, etc. Other responsibilities of the planner evaluator included data collection, progress evaluation and data analysis. Although, the AODS Program Chief was ultimately responsible for making the final decisions about the direction of the program, all staff and partners were involved in a collaborative decision-making process including youth participants. For example, youth were instrumental in the decision to implement the One Day Summit⁵ as an effort to outreach to many youths whom at the time were isolated due to COVID. Any changes or program recommendations would generally be submitted by the program coordinator to the Program Manager and Project Evaluator. Depending on the type of change, the group would collectively make a decision without the involvement of the AOD Chief.

<u>Data Collection</u> Quantitative Data

Activities and services within the project were documented via sign in sheets, activity workplans and excel tracking spreadsheets. For each individual involved in the project, demographics such as student's age, sex, gender, ethnicity, and education status, was

⁴ See Appendix A and B for recruitment flyers

⁵ See Appendix C for One Day Summit Agenda

collected and self-reported by each student. For the peer education program, sign-in sheets were utilized to document student attendance. The program coordinator conducted and monitored each training session and after school class for both the middle and high school students and provided curriculum topics each week.⁶ Anonymous pre and post surveys provided to each student at the beginning and end of the program allowed AODS project evaluator to analyze impact of the project and understand whether or not knowledge acquisition and awareness of cannabis had changed or not as a result from program participation.

For the social media component of the project, media analytics were tracked online and then provided to the AODS project evaluator. AODS also required that the program coordinator submit monthly demands which incorporated a program narrative for the month and was reviewed by AODS to ensure fidelity of services being rendered. The project evaluator would meet with the program coordinator monthly to monitor and track the P2P activities, to provide technical assistance and to determine if the project was on track. Similarly, during these monthly check-ins necessary adjustments were made to guarantee the success of the project as needed.

The AODS project evaluator collected all documentation from the program coordinator and Substance Abuse Counselor every month to ensure timely data collection which included students involved in the project, services provided, training sessions held after school, and the completion of each cycle. Monthly meetings were facilitated between the project evaluator, program coordinator, AODS prevention coordinator and AODS program manager to monitor, receive updates and ensure fidelity.

For the treatment component of the project, the Substance Abuse Counselor utilized an excel tracking spreadsheet to document all students referred to treatment services which included information such as the enrollment date, evaluation results, exit date and types of services provided. This spreadsheet allowed AODS to monitor and track students' progress. Sharecare, the billing system, was also utilized to track student participation in treatment. The Substance Abuse Counselor offered both group and individual sessions to the students. As explained earlier, the first two and a half years of the project were challenging as there was no access to students, school personnel or school grounds. The COVID years, presented a multitude of issues to schools ranging from personnel on medical leave, relocation of faculty, retirements, etc., Despite the fact that the services offered by this program were essential to respond to the isolation experienced by youth, there were understandably some limitations that prevented full access to youth and their families.

Qualitative Data

The project evaluator utilized qualitative data for process evaluation, which included a focus group with the students and key informant interviews with individuals directly involved throughout the grant period. The student focus group focused on feedback from the students regarding what went well in the program, what could have been improved,

⁶ See appendix D-H for program outline and curriculum examples.

any challenges experienced, and program logistics. Key informant interviews were utilized to evaluate the implementation of the peer education and treatment services with the schools. The program evaluator interviewed the project coordinator, Substance Abuse Counselor and AODS prevention coordinator to discuss the challenges and lessons learned during the project implementation along with identifying any adjustments needed to improve the effectiveness of the program for the future. The program evaluator maintained a database for both quantitative and qualitative data as well as reviewed all documentation monthly to ensure proper data collection to identify any needs of adjustment for the project as challenges arose.

Data Analysis

Both quantitative and qualitative process data were analyzed by the program evaluator. Excel was utilized to track, clean, and analyze quantitative data to provide descriptive statistics of students in treatment, students after school program attendance rate, and mentors involved. Content analysis was used to analyze qualitative data.

Outcome Evaluation Method and Design

Research Design

A mixed method outcome evaluation was utilized using a pre and post-test design. Data collection was conducted before and after the project implementation. Similar to process evaluation, the project evaluator collaborated with the program coordinator to ensure all essential data was collected and documented data analysis.

Evaluation Questions

Evaluation Questions		
Questions	Outcome measurement	
Did we improve the Substance Use disorder Treatment services?	A. Have we start offering SUD treatment for youth who are on probation and reside in the zip code 94531 at East County Child and Adolescent Mental Health Services Clinic? B. Have we certified both schools as Drug Medi-Cal sites? C. The number of students provided SUD treatment at Black Diamond middle and Deer Valley high school. D. The number of students who received school-based treatment also receive treatment services East County Child and Adolescent Services Clinic. E. The number of referrals received for treatment from the schools and Juvenile Probation Department.	
How is the marijuana use in youth?	 A. The number of students who participate in Peer to Peer after-school program at middle school. B. The number of Screening and Brief Interventions (SBI) conducted. C. Data of pre- and post-surveys to determine change in behavior before and after 90-day treatment episode. D. Data of at least 100 pre- and post-surveys from participants in after-school program. E. Focus groups to measure effectiveness of social media campaign. 	
What is the number	A. The number and reduction in illicit drug-related suspensions.	
of illicit drug related	B. Number of School Attendance Review Board (SARB) meetings for the	
suspensions in the	Antioch Unified School District to identify and advocate for truant youths to	
area?	receive SUD treatment, if applicable.	

Project components

In total there were 141 students who received services from the program. 65 students received treatment services and 76 students participated in the afterschool program. To be considered as a success in the afterschool program, DVHS peer educators had to attend all training curriculum⁷ and attend at least 85% of the after-school classes. Middle school students were considered a success in the project if they attended more than 85% of the after-school class. For treatment services, a success was determined if students referred to SUD treatment services completed the assessment and were able to complete the course of services as indicated by ASAM and the youth.

There were 126 activities accomplished during the duration of the grant. The peer education program was considered a success if 95% of planned training sessions and after-school classes were held.

Data collection Quantitative Data

For all students involved in the peer education program, a pre- and post- survey⁸ was conducted to determine change in behavior. The program coordinator and project evaluator worked together to conduct the survey using a similar questionnaire used in the California's Healthy Kids Survey (CHKS). The data was collected immediately after students entered the program and after the completion of program (this was completed at an after-school class). School District-Level data collected by the California Department of Education through the California Longitudinal Pupil Achievement Data System was also utilized as part of the data collection. Data regarding youth on probation and youth on probation referred to treatment services were also collected during the intake. In addition to the peer education and treatment data, data for the social media campaign was reviewed monthly and collected quarterly.

Qualitative Data

The project evaluator used qualitative data for outcome evaluation, which includes a student focus group⁹ and key informant interviews. The focus group was conducted to gather information from peer educators regarding their experience, overall satisfaction, and recommendations for the future.

Key informant interviews were utilized to evaluate the success of the peer education and treatment services with the schools. The program evaluator interviewed the project coordinator, school Substance Abuse Counselor and Contra Costa County's Prevention Coordinator and focused on their experience with the project and suggestions on ways to improve for future planning. The focus group and key informant interviews were conducted at the end of the project.

⁷ Utilized aspects of the Stanford Cannabis Awareness and Prevention Toolkit. https://med.stanford.edu/cannabispreventiontoolkit.html

⁸ See Appendix I and J for pre and post survey examples

⁹ See Appendix K for student focus group questions and responses

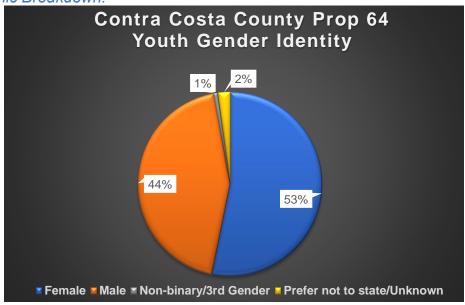
Data Analysis

The program evaluator utilized Excel to track and clean data and conduct quantitative analyses. Descriptive statistics were utilized to show the project success. Chi-square was conducted to examine the difference between the pre- and post-survey results in all participants. Initially, School District or county level data from CHKS was going to be utilized as a comparison group to determine if the changes we see are related to our project or other factors as well but due to the pandemic and effects it had on the data, we are unable to obtain accurate data to quantify if the project did indeed create change compared to previous years. Qualitative data was analyzed using content analysis.

Evaluation Results

In total there were 150 youth referred to this project. Out of the 150 youth, 141 students received services from the program. 65 youth were referred to treatment services and 76 youth participated in the afterschool program. 58 youth successfully completed the afterschool program, and 49 youth were actively engaged in treatment. Please note, due to the Substance Abuse Counselor staff change during the middle of the grant, not all data is captured in these numbers as the EHR's changed and the youth received early engagement/intervention, not necessarily treatment which is all captured in the billing system. The labor intense but highly successful outreach in the local schools, was also not reported by the counselor. The majority of youth served self-identified as African American/Black, Hispanic/Latino, followed by those who identified as multiple races, and Caucasian/White. The majority of youth (123 individuals) who participated in the project, ranged from 13-17 years old. Of the 141 youth who received services, 74 were mandated to do so whereas 67 voluntarily participated. 75 youth self-identified as female, 62 youth self-identified as male 1 youth self-identified as non-binary and 3 youth preferred not to state their gender identity. The data is consistent and supports the intent of the proposal which was geared at serving youth 13-17 and populations most impacted by health disparities, COVID and the war on drugs: 38% Black and 27% Hispanic/Latino.

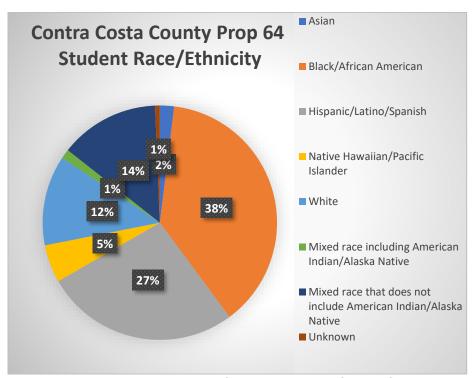




Graphic 2: Percentage breakdown of participants self-identified gender

Age Groups	# of Youth
12 Years or Younger	7
13-17 Years	123
18-20 Years	11
Total	141

Graphic 3: Participant self-identified ages



Graphic 4: Percentage breakdown of participants self-identified race/ethnicity

Youth Diversion	
No contact with law enforcement	124
Informal contact with law enforcement	6
Pre-adjudication	0
Post-adjudication	7
Unknown	4
Total	141

Graphic 5: Breakdown of Youth Diversion

Peer to Peer (P2P) Education Program and Survey Results:

In total, there were 14 DVHS students and 62 BDMS students who participated in the program from Fall of 2021 to Spring of 2023. 8 DVHS students successfully completed the mentorship and leadership portion of the program. 50 BDMS students successfully completed the mentorship component including the *One-Day Summit* at BDMS in the Spring of 2022. See image below for program layout.

Po	Peer to Peer After School Program Summary Fall 2021-Spring 2023		
Year	Black Diamond Middle School	Deer Valley High School	
Fall 2021	Challenges: Covid-19 Pandemic	Leadership and Mentorship Training Participants: 5 Success: 3 Note: Five individuals completed the leadership training but only three individuals completed the mentorship portion of the program.	
Spring 2022	Unable to receive clearance for school in a timely manner, due to Pandemic delays, so conducted a Peer to Peer Education One Day Summit Participants: 35 Success: 34	Mentorship at BDMS One Day Summit	
Fall 2022	Peer to Peer Education Training Participants: 12 Success: 6	Leadership and Mentorship Training Participants: 5 Success: 2 Note: Three individuals completed the leadership training. One individual did not finish the mentorship portion of the program.	
Spring 2023	Peer to Peer Education Training Participants: 15 Success: 10	Leadership and Mentorship Training Participants: 5 Success: 3 Note: One duplicate individual from Fall 2022 to Spring 2023. They completed program again but was not calculated as a success as they were accounted as a success in the previous year.	

Graphic 6: Peer to Peer DVHS and BDMS After School Program Participant Summary

Pre-Survey Results- Note: Not all students answered all questions or received the same survey due to different circumstances of cohorts. When filling out the pre-survey 79% (n= 48 students) reported being school lunch eligible. Students reported most popular method of cannabis use were from vaping, edibles, and joints. 64% of students (n=76) reported never using cannabis before but those who have used reported they did so due to the following reasons: used to relax, have fun with friends, deal with problems to get high and because they felt lonely and isolated. When asked if a student could find help from school staff or other adult in regard to cannabis use, only 40% (n=50) reported they felt they could. 58% (n=50) reported they believe they would be suspended or in trouble for getting caught using cannabis. Majority of students never had any other program focus on substance use. N=50; 70% of students disapproved the use of smoking cigarettes regularly, 44% disapproved trying to vape/e-cigarettes, 40% disapproved using cannabis regularly, 24% disapproved trying cannabis once or twice, 58% disapproved using alcohol regularly and 52% believed that cannabis will have a negative impact on people using it.

Post Survey Results- Note: Not all students answered all questions or received the same survey due to different circumstances of cohorts. The majority of students reported being more aware of cannabis use due to the program. After the program, 70% (n=44) of students reported thinking that cannabis will have a negative impact on those utilizing it. Students reported methods of obtaining cannabis were at school, parties, friends/other students, dispensaries, adult friends and from their own house. 72% (n=39) thought they could find help at school from staff or other adult in regard to cannabis use. 87% (n=45) reported they believe they would be suspended or in trouble for getting caught using cannabis. N=45; 67% of students disapproved the use of smoking cigarettes regularly, 33% disapproved trying to vape/e-cigarettes, 36% disapproved using cannabis regularly, 22% disapproved trying cannabis once or twice, and 53% disapproved using alcohol regularly. The majority of students reported never using cannabis before but for those that wanted to go on record, 7 individuals reported the reduction of cannabis use by the end of the program. Students also reported academic improvement and improved mental health.

When comparing survey questions mentioned above using the Chi Square test, there is no significant difference between the pre and post surveys. However, due to the small sample size of students, the results may be skewed. In the Fall of 2022 and Spring of 2023, the question "Do you have an increased perception of the harms of cannabis use" was added to the post survey. 100% of students (n=23) reported that they did indeed have increased perception of cannabis harms. This shows that by the end of the program, students had better knowledge about cannabis than when they first started the program. We are unable to compare specific survey questions to CHKS data as the most recent CHKS Public Dashboard data, which display those questions, is from 2019-21. ¹⁰

Treatment Results:

Overall, we improved treatment services to youth residing in the zip code 94531, as prior to the implementation of the project there was no counselor available. Students in treatment did not complete a pre and post survey, as many relocated or graduated; therefore, not available. All students received a screening or an assessment depending on need. Two students received brief intervention. Of the 49 students who were actively engaged in treatment, 28 received academic support, 9 received career counseling, 4 received leadership training, 48 received individual /group counseling, 15 received individual/group mentoring, 21 received individual/family support services, 15 life skill training, 17 were referred to community-based support services, 28 referred to mental health services, and 48 received substance use education. There were 9 referrals from probation to treatment services. It is important to mention that the idea of utilizing a youth development framework, facilitated access to treatment, as youth were engaged and met wherever they felt they could use the services. By design, the project focused on prevention as a starting point to revert the reason for substance use. Because services were offered at school campuses and at the clinic, youth had a choice to decide what was more convenient.

¹⁰ CalSCHLS. The Californial School Climate, Health, and Learning Survey (CalSCHLS) System. (n.d.). https://calschls.org/reports-data/public-dashboards/f882f1e2-dfc0-4448-b90b-f49cef6e6d3f/

Progress toward goals:

There were 126 activities accomplished during the duration of the grant. Due to various factors that arose during the three-year grant, there were many changes to the objectives and their timelines due to the circumstances below.

During the duration of the grant, there were many challenges faced that impacted the project and ultimately impeded the intended results. The Covid-19 pandemic was the number one challenge preventing achievement of our goals. The pandemic resulted in school closures repeatedly, and delays in obtaining school security clearance once schools reopened was also a major obstacle because school personnel was short due to infections and relocation which ultimately hindered achieving our goals. In addition to the pandemic, staff turnover with SUD school counselors, contracted provider program coordinator impacted progress of project goals at the pace we had envisioned.

Although the pandemic had a significant impact on the full implementation of the project, staff and students were able to find ways to connect and make progress through the virtual platform Zoom. Classes were held on Zoom whenever in person communication with the students was not permitted. The resilience of students during a very difficult time, proved its best when it was difficult to obtain security clearance for the program coordinator to be on campus with the students, they recommended to hold a *One-Day Summit* at BDMS. The *Summit* allowed the program to reach more middle school students. Even though the Antioch Unified School District was 100% supportive of this project, due to both middle and high school administration changes, there were often times difficulties in obtaining administration support and buy-in. This did not stop the program coordinator as they continued their outreach efforts and program courses. During the life of the project, a relatively mild staff turnover was experienced which created delays nevertheless, replacements were found in a timely manner namely for substance abuse counselor and the program coordinator.

Goals and Objectives Summary

Goal one was to increase access to SUD treatment. This goal was met as there is now increased access to SUD treatment for youth. School-based treatment services were provided at both the middle and high school along with East County Child and Adolescent Services Clinic. Toward the end of the grant, treatment services were only provided at East County Child and Adolescent Services Clinic due to school administration and staff changes. A referral process between the SUD counselor, program coordinator and school were established to ensure appropriate access to care for students. Both the middle and high school did not need to be certified as Drug Medi-Cal sites in order for services to be provided. The requirement to certify school sites was eliminated in mid-2020. Due to the impact of the pandemic and staff turnover, we did not meet the objective goals of receiving 200 referrals for treatment from schools and the Juvenile Probation Department. The majority of youth were confined at home under the supervision of their parents, the rates of youth on Probation also declined exponentially. The majority of referrals came from the schools but there were 13 referrals from the Probation Department.

Goal two aimed at reducing youth marijuana use. This goal was partially met as there is insufficient data (due to Covid) to support the reduction in the rates for cannabis consumption. Overall State and National data also reported that during the Covid period, underage drinking and cannabis use dropped significantly. Students who participated in the peer-to-peer program, and had stated using cannabis in the past, reported a decrease in cannabis use after the program. Many students reported not ever consuming cannabis but reported an increase in cannabis knowledge by the end of the program. To achieve this goal, the P2P after school program was established in 2022. The first cohort of high school students started in the fall of 2021 but due to delays in middle school campus clearance, 2022 was when both middle and high school students participated. A total of 77 pre-surveys and 62 post anonymous surveys were collected. A focus group of 4 DVHS students was conducted at the end of the grant.

Goal three, to reduce the number of illicit drug related suspensions in the area, was unmet. According to EdData who collects their data from the California Department of Education (CDE) through the California Longitudinal Pupil Achievement Data System (CALPADS), there was no data in school year 2020-2021 due to the Covid-19 pandemic and both district level data and individual school data had an overall increase in drug related suspensions compared to the 2018-2020 school years. In school years 2021-2023, Antioch Unified School District¹¹ had an increase in drug related suspensions or an increase in drug related suspensions compared to school years 2018-2020. BDMS¹³ had a decrease in drug related suspensions in school year 2021-2022 compared to the 2019-2020 school year data but had an increase in drug related suspensions in 2022-2023. AODS representatives attended 10 School Attendance Review Board (SARB) meetings for the Antioch Unified School District during the duration of the grant to identify and advocate for truant youth to receive SUD treatment.

Social Media Evaluation Results

Cannabis Decoded is a Youth Marijuana Education Initiative led by the County of San Mateo to educate youth and young adults about the facts on cannabis use. Contra Costa County partnered with The Social Changery to launch their own Cannabis Decoded 14 for youth. Cannabis Decoded has their own website with resources to Contra Costa County educating on substance use. The prevention P2P youth utilized this resource and were able to learn how to post and communicate about substance use effectively over social media. In September 2023, at the end of the grant, The Social Changery presented to 12 youth peer to peer educators regarding social media and content development 15. In addition to Cannabis Decoded, Elevate Youth (P2P), had its own Instagram account where they would post content, as seen below. Through this Instagram, 10,152

¹¹ ED Data Education Data Partnership, www.ed-data.org/district/Contra-Costa/Antioch-Unified.

¹² ED Data Education Data Partnership, www.ed-data.org/district/Contra-Costa/Antioch-Unified/Deer-Valley-High.

¹³ ED Data Education Data Partnership, www.ed-data.org/district/Contra-Costa/Antioch-Unified/Black-Diamond-Middle

¹⁴ See Appendix L for Cannabis Decoded website

¹⁵ See Appendix M for Cannabis Decoded presentation to youth

individuals were potentially reached during the campaign and there was a total of 8,415 social media hits that were captured.



Graphic 7: Elevate Youth Instagram content examples (elevateyouth.antioch)

Qualitative Results

Focus Group/Key Informant Interview Results

At the end of the grant, a focus group consisting of DVHS students was conducted. Upon reflection, the students reported on what went well, what did not go well, program logistic set up and ways to improve the project. The students communicated incentives, such as snacks, gift cards, and mentorship stipends, worked well during the duration of the program and they enjoyed group work which included teamwork activities. They reported an increased knowledge of cannabis risks and harms along with the association between mental health and cannabis and improved their leadership skills. Overall, the students enjoyed mentoring the middle school students (BDMS) but observed that the BDMS students were placed in the program via the principle which in turn made some of the BDMS students not as engaged as being there voluntarily. The DVHS students enjoyed the program being after school and reported cannabis knowledge was presented in a fun and interactive way with infographics which made learning easier.

Ways to improve the program consisted of having middle school students be there voluntarily instead of mandated, limiting the number of middle school students to 10, have reliable transportation from high school to middle school as some students do not have access to consistent transportation, more public speaking training, and communicate with club recruitment week personnel to be able to have a table to recruit middle school students. The DVHS students reported the logistics of the program went overall smoothly as they enjoyed the length of trainings, Tuesday and Thursday schedule, and classroom space. They recommended for future cohorts, to have a classroom that is located closer to the entrance of the school to be easier for students to locate. In conclusion, the students increased their cannabis knowledge and leadership skills but would add more off-site activities like community service events and team building exercises to the program.

In addition to the DVHS student focus group, three separate staff interviews were conducted. The first interview was with the Substance Abuse Counselor who provided services at East County Child and Adolescent Services Clinic. This counselor provided

both individual and group sessions to students. The interactions with the students were overall successful and the counselor would like to continue building rapport with school administration to continue receiving referrals to help students in need. The second interview was with the AODS Prevention Coordinator who is responsible for all prevention related work. During this interview the coordinator stated that in her view, the youth leadership training was successful and that the program coordinator did a great job building rapport with the students. She did note that the relationship with school staff changed over the grant as there was school administration staff changes and communication with schools was impacted.

Lastly, the final interview was with the program coordinator. This individual provided all after school trainings to the youth and parent education nights. From her experience, challenges with the program included the recruitment process of students (many students are already involved with afterschool activities such as sports or clubs and cannot participate in both), support from school administration (depending on administration) with program and parent education nights, youth being inconsistent, and timing of program as high school students were released from school a half hour after middle school students were released. Despite the challenges that arose, the program coordinator greatly enjoyed working with the students, saw progress with the student's leadership skills and cannabis knowledge, and acknowledged how the high school students appreciated doing peer to peer education with the middle school students as it was easier to present to middle schoolers since they do not know them or see each other every day at school. In conclusion, due to Covid and administration turnover, there were many challenges in getting into the schools to provide in person services, but once all clearance was allowed, students were able to participate in person treatment and the afterschool peer to peer program.

Discussion of Results:

Due to Covid-19 and the restrictions at schools along with the small sample size of students, it is difficult to truly discuss the effectiveness of the various strategies implemented in the project. For those who received treatment services, the majority of students stayed engaged and received substance use education training. For those involved with the afterschool P2P mentor program, students reported an increase in knowledge and understanding of harm resulting from cannabis use. Although the survey results showed no significant difference after the project, we believe many youths' lives were impacted and can have increased protective factors to delay, reduce or eliminate cannabis use.

In the future, the P2P model will be recommended to replicate as there was success in students obtaining and disseminating information regarding cannabis to one another. In an ideal world, the peer-to-peer program curriculum would be given in an elective course at the high school to reach more students, as many students are already engaged in other after school activities. The use of stipends and snacks was popular among the students and is a good way to recruit future cohorts. When recruiting students, school administration buy in is very important and having a good rapport with the administration goes a long way. It is recommended for future cohorts, students who join the afterschool

program sign up voluntarily as those mandated to attend the program might not take the program seriously and disrupt the academic environment for those who are there to make a difference in their community.

With regards to treatment, it is recommended to continue working with the schools to have a referral process in place for students in need. Also, the presence of a counselor on site is useful as they are able to get to know the students in their school environment and build rapport with them. It is recommended to expand on outreach to the school to ensure all students and families are aware of treatment services available. Transportation logistics to and from treatment along with high school to middle school is a factor to consider. Lastly, it is recommended to expand and elaborate on the utilization of social media to generate creative ways to educate youth about cannabis and reach a broader audience.

Project Logic Model

Planned Work

Logic Model

Project Goals: Goal 1: Increase access to Substance Use Disorder treatment. Goal 2: Reduce youth marijuana use Goal 3: Reduce the number of illicit drug related suspensions in the area. Inputs Activities Outputs Outcomes **Impacts** - Project planning - Substance Use Disorder - Provide Substance Use Students received timelier Reduce the use of marijuana Substance Use Disorder or other substance abuse in the and development treatment services available Disorder treatment to 64 to Deer Valley High School students at BDMS, DVHS, evaluation, screening, and youth population in the area by AODS (DVHS) and Black Diamond and at East County Child Change the behavior and Middle School (BDMS) and Adolescent Services Coordination and perception of marijuana in Students received treatment Clinic. students collaboration with Deer at East County Child and more general population in Adolescent Services Clinic to Refer students in need 100 individuals Black Diamond Middle ensure long-term needs to East County Child and referred by schools and School Adolescent Services Clinic Juvenile Probation The change of perception, Substance Use Disorder Proposition 64 grant Department to treatment Conduct peer educator or afterschool program regarding marijuana and funding other substance abuse Reduce the number of illicit training with Deer Valley among peer educators. drug related suspensions in 10 high school peer New hire of program High School students. participants in after-school focusing on leadership educators complete coordinator, project class and their peers as well skills, substance use training; peer educators evaluator and Substance as the population affected by Decrease the dropout rate in Abuse Counselor curriculum and social media facilitated 2 cycles of the social media campaign the area advocacv after-school class and one Improve the health of the all day summit at BDMS Individuals at schools and Existing and new Behavior Juvenile Probation department community and protect higher-Youth-led social media Health Services providers risk youth and population campaign regarding 62 BDMS students who are in need of substance substance abuse mentored and participated referred and receive the in the after-school class services they need Black Diamond Middle program school students participate in youth-led after-school class

Intended Result

Project Highlights

Throughout the course of the grant there have been many success stories in both the treatment and prevention components of the project. We would be remiss to disregard the hard work, dedication, and resiliency of staff and key players. School personnel especially must be acknowledged for their adaptability and creativity to carry on functions to further learning for the children at both schools despite the impact of Covid among families and society.

On the treatment side, there have been a few outstanding stories whereby students reported to the Substance Abuse Counselor smoking, vaping, poor grade performance, etc. and by the end of treatment, they had improved their grades, were abstinent from substances and have gotten their life back on track. The Substance Abuse Counselor at East County Child and Adolescent Services Clinic who worked with the students stated: "It is a process and not a quick fix" and by being committed to getting healthier, working toward developing new skills and by being supportive and consistent, that can change the trajectory of a young individual's life.

The Elevate Youth prevention component provided cannabis education to high and middle schoolers, school staff, and parents. Whether it was through virtual classes due to the pandemic, having a *One-Day Summit* at BDMS, creating a social media campaign, the students and program coordinator trailblazed their way into making a positive mark in their community. In the Spring of 2023, the students at DVHS who mentored the middle school students were recognized and awarded with the "People Who Make a Difference Youth Group Award 2023" from the Contra Costa County Alcohol and Other Drugs Advisory Board for their outstanding work and positive influence on the students at BDMS. This award is only given to individuals making a difference in their communities. The award highlighted DVHS student's efforts in leadership and dissemination of the harms associated with cannabis underage use. This provided the students with something to be proud of and increased their sense of contribution in the community.



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Appendix A: Elevate Youth- Deer Valley High School Recruitment Flyer

JELEVATE Youth JOUTH LEADERSHIP PROGRAM JOUTH CANNABIS





DO YOU ATTEND HIGH SCHOOL AT DEER VALLEY?



ARE YOU INTERESTED IN GROWING YOUR LEADERSHIP SKILLS?



WANT TO MAKE A POSITIVE DIFFERENCE IN YOUR COMMUNITY?



ARE YOU LOOKING TO DECREASE UNDERAGE USE OF CANNABIS?

WHAT WE OFFER

- Community Service Hours
- Opportunity to conduct a social media campaign
- Public Speaking opportunities
- Team Building Activities
- Snacks
- A \$200 stipend*
 For those that are selected to be peer mentors.

WHO: THE PROGRAM IS FREE TO ALL DEER VALLEY STUDENTS

WHERE:

WHEN:

WHO WE ARE

Our 8-session Leadership Training is part of our Youth Cannabis Peer Prevention program with Contra Costa County AODS, Community Health for Asian Americans (CHAA), and Deer Valley High School. The program is funded through Proposition 64 and aims to empower and educate students while reducing the use of underage cannabis use. Once the Leadership Training is completed, students will be given the opportunity to apply to be a peer mentor with middle school students at local schools.



QUESTIONS?

Contact the Program Coordinator

SCAN THE QR CODE TO APPLY!









Appendix B: Elevate Youth- Black Diamond Middle School Recruitment Flyer



Appendix C: Black Diamond Middle School Spring 2022

One Day Summit Agenda (Youth Developed-Youth Led)

9:00am- 9:15am	Youth arrive and complete Pre-Program Survey
9:15am-9:40am	Introduction to the program + Weeding through Opinions
9:40am-10:00am	Spaghetti Tower + Discussion
10:00am-10:15am	Cannabis the Basics
10:15am-10:25am	Snack and Restroom Break
10:25am-10:30am	Methods of Use
10:30am-10:45am	Methods of Use Breakout Groups
10:45am-11:10am	Methods of Use Recap
11:10am-11:30am	Cannabis: The Developing Brain + Dopamine
11:30am-12:00pm	Lunch
12:00pm-12:15pm	Drawing Game
12:15pm-12:30pm	Harms and Risks Associated with Cannabis
12:30pm-12:50pm	Reducing Stigma
12:50pm-1:15pm	Mental Health and Coping
1:15pm-1:25pm	Bathroom Break
1:25pm-2:05pm	Speak Up, Create, Develop
2:05pm-2:25pm	Everyone Shares their Creation!
2:25pm-2:35pm	Post Program Survey
2:35pm-2:55pm	Rewards!
2:55pm-3:00pm	Wrap Up and Farewells!

Appendix D: Elevate Youth- Black Diamond Middle School Peer Prevention Program Outline

Week One: Introduction and Basics

Lesson Plan

Students will take a pre-program survey to assess prior knowledge entering the program. Students will receive a brief introduction of the program's goals and expectations. Students will be briefed on ground rules for nonjudgmental conversations. Students will gain knowledge of incentives the program offers to not only come and participate but assignments outside of the program meeting times as well.

Week Two: Cannabis Basics

Learning Objective

Students will learn the basic facts of cannabis including names, uses, and policy. Students will play an interactive game of jeopardy to encourage learning as well as cement knowledge learned thus far.

Week Three: Methods of Use

Learning Objective

Students will learn the various methods of use and the potential harms associated with each. Students will peer educate one another after breaking into small groups to learn about a specific method of use alongside high school peer mentor.

Week Four: Potential Harms of Use

Learning Objective

Students will learn about the potential harms of cannabis and the impact it can have on the youth's life

Week Five: Understanding Dopamine

Learning Objective

Students will learn the importance of dopamine, how it is produced, what it impacts, and how cannabis may affect this process.

Week Six: Mental Health and Coping

Learning Objective

Students will learn methods other than using drugs that can be used to manage stress. Students will gain the understanding of the importance of getting rid of the stigma attached to drug use and mental health. Students will identify resources to help them deal with stress and other mental health issues.

Week Seven: Restorative Justice, and Zero Tolerance

Learning Objective

Students will understand the differences in restorative justice policies vs zero tolerance policies. Students will be able to discuss their current campus policies surrounding cannabis use as well as the local policies.

Week Eight: Wrap Up, Evaluation, and Graduation

Learning Objective

Students will reflect on what they've learned throughout the unit and will take a post-survey to assess their understanding of the content covered in the unit. Students will reflect on what they have learned by writing a letter to their future selves about drugs and drug use. Students receive their certificates and awards at the completion of the day.

Appendix E: Deer Valley High School Leadership Training and Program Outline

Week One: Orientation and Leadership 101

Week Two: Communication and Cannabis Basics

Week Three: Teamwork/Collaboration and Methods of Use

Week Four: Methods of Use, Stigma, and Flexibility/Adaptivity

Week Five: Understanding Dopamine and Passions/Values

Week Six: Mental Health

Week Seven: Mental Health Continued and Cannabis Policy Types

Week Eight: Community Group Presentations, Reflections, and Evaluations

Appendix F: 2023 Leadership Reflection Questions Activity Example

I Elevate Youth

LEADERSHIP WEEK 1-5 REFLECTION QUESTIONS

WEEK 1 - LEADERSHIP

- THINK ABOUT AND WRITE DOWN 10+ IMPORTANT QUALITIES OF A LEADER.
- DO SOME OF THE SAME IDEAS COME UP OVER AND OVER AGAIN? WHERE DOES THIS IDEA
 OF LEADERSHIP COME FROM?
- ARE SOME LEADERSHIP QUALITIES MORE IMPORTANT THAN OTHERS?
- THINK ABOUT THE LEADERS AROUND YOU. WRITE DOWN ONE PERSON (IN YOUR LIFE OR IN PUBLIC LIFE) THAT DISPLAYS THE PRACTICE OF EXEMPLARY LEADERSHIP FOR EACH OF THE FIVE PRACTICES BY KOUZES & POZNER.
- WHAT PRACTICE OF EXEMPLARY LEADERSHIP DO YOU FEEL IS THE MOST IMPORTANT AND CRUCIAL FOR LEADERS?
- · WHAT ARE THE LEADERSHIP QUALITIES YOU HAVE?
- WHAT "EXEMPLARY PRACTICES" OF LEADERSHIP DO YOU ALREADY ENGAGE IN? WHAT CAN I WORK ON INCORPORATING MORE?
- IF LEADERSHIP IS A LEARNED SKILL, WHAT CAN I DO IN MY LIFE TO PRACTICE AND IMPROVE MY LEADERSHIP SKILLS?

WEEK 2 - COMMUNICATION

- . THINK ABOUT WHEN YOU ARE HAVING A DISCUSSION WITH SOMEONE.
- · AS A LISTENER, WHAT DO YOU DO TO SHOW THE SPEAKER THAT YOU'RE LISTENING?
- DO YOU PUT AWAY DISTRACTIONS, LIKE USING YOUR PHONE?
- DO YOU USE VERBAL AND NONVERBAL CUES THAT MATCH THE SPEAKER'S AFFECT (E.G., RESPONDING EXCITEDLY IF THE SPEAKER IS EXCITED) SHOW INTEREST AND EMPATHY. FOR EXAMPLE: VERBAL: "UH-HUH", "THAT'S INTERESTING" NONVERBAL: NODDING, EYE CONTACT.
- DO YOU AVOID FORMING OPINIONS AND MAKING JUDGMENTS UNTIL YOU FULLY UNDERSTAND THEIR PERSPECTIVE?
- WHY IS COMMUNICATION IMPORTANT AS A LEADER?

WEEK 3 - COLLABORATION/TEAMWORK

- THINK ABOUT A TIME YOU HAD TO WORK IN A TEAM.
- WERE YOU ALL ABLE TO WORK TOGETHER TO ACCOMPLISH A SHARED GOAL?
- WERE YOU ALL ABLE TO SUPPORT AND ENCOURAGE EACH OTHER TO ACCOMPLISH A TASK?
- WAS THE WORK SHARED EQUALLY?

WEEK 4 - FLEXIBILITY/ADAPTABILITY

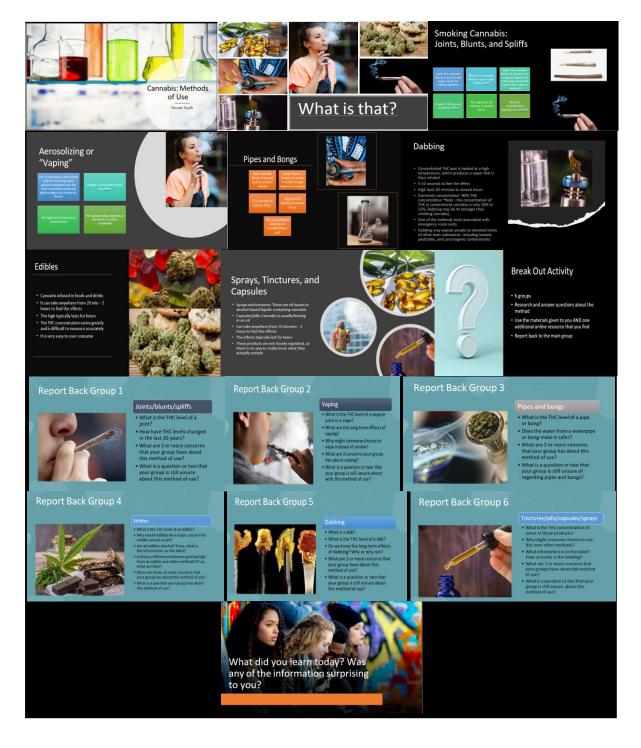
- THINK ABOUT THREE INSTANCES WHEN LIFE DEMANDS A PERSON TO BE FLEXIBLE AND ADAPT TO THE ENVIRONMENT AROUND THEM. THIS CAN BE PERSONAL STORIES OR CIRCUMSTANCES THAT YOU HAVE HEARD OF.
- WHAT ARE SOME AREAS IN YOUR LIFE YOU COULD IMPROVE YOUR FLEXIBILITY?
- HOW DO YOU CURRENTLY RESPOND TO CHANGE?
- HOW WOULD YOU LIKE TO RESPOND TO CHANGE?

WEEK 5 - PASSIONS/VALUES & CHANGEMAKING

- WRITE DOWN 10 THINGS YOU ENJOY DOING. THINK NOT ONLY OF HOBBIES (MUSICAL INSTRUMENTS, SPORTS, ...) OR THINGS THEY DO, BUT ALSO AREAS OF INTEREST (HISTORY, MATH, ...).
- WHY DO YOU ENJOY DOING THESE 10 THINGS OVER OTHER THINGS?
- WRITE DOWN SOME IMPORTANT ISSUES (EXAMPLE. YOUTH SUBSTANCE USE, INCREASE IN VIOLENCE, FOOD INSECURITY) FACING YOUR COMMUNITY THAT YOU WOULD LIKE TO CHANGE?
- WHAT TYPES OF ACTION (EXAMPLE. VOLUNTEER WORK, PROJECTS, SERVICE INITIATIVES)
 CAN BE DONE TO INITIATE THE CHANGE?

Appendix G: DVHS Curriculum Example

Methods of Use PowerPoint Presented in November 2022



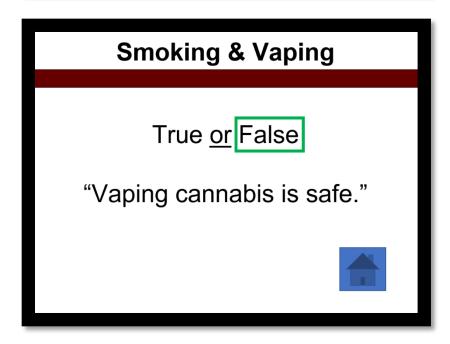
Appendix H:

Elevate Youth After School Curriculum Additional Information and Examples

The after-school program curriculum included aspects from the Stanford Cannabis Awareness and Prevention Toolkit. Leadership lesson plans and skill building activities were also adapted from resources located at powerfulyouth.com. https://powerfulyouth.com/lesson-plan-pdf-download-page/.

Images below display the Standford Cannabis Awareness and Prevention Toolkit Cannabis Jeopardy game that was utilized with students to encourage an interactive learning environment.





Appendix I: Spring 2022 Elevate Youth Pre-Program Survey Example

Welcome to the Pre-Program Survey!

PLEASE NOTE: THIS SURVEY IS CONFIDENTIAL

- Your name is not included, and there is nothing that will associate your answers on this survey to your name.
- Your honest responses to this survey are critical to an accurate understanding of whether YOU THINK the new Contra Costa drug education curriculum is having a positive effect on your attitudes, thoughts, and behaviors in response to substance use.
- This survey is meant to be NON-JUDGEMENTAL. YOU ARE THE BEST JUDGE about what works for you. The developers of the curriculum need an accurate understanding of your experience with these classes to know how to make it better for YOU.
- Please read each item carefully and respond honestly.
- ASK IF YOU HAVE ANY QUESTIONS ABOUT ANY ITEMS.
- YOUR HONESTY IS MUCH APPRECIATED.

Class Location/Date:

Questions about your experiences:

(Please mark YES or NO)

- 1) Have you ever in any other programs focused on substance use? YES NO
- 2) Have you ever gotten into a physical fight with another youth? YES NO
- 3) Have you ever been stopped by the police? YES NO
- 4) Have you ever been arrested? YES NO
- 5) Have you ever been suspended? YES NO
- 6) Have you ever volunteered (e.g. providing a service like working at a soup kitchen)? YES NO
- 7) Have you ever stood up for a cause (e.g. speaking publicly about an issue, attending a protest)? YES NO

Questions about drug response and drug policy:

adoctions about any responds and aray policy.	
Check all the answers that apply.	
What is harm reduction?	
□ Not using drugs	
□ Knowledge of set and setting	
□ Knowledge of dose and dosage	
□ All of the above	
□ I don't know	

What is abs	stinence?
☐ Knowled	ge of dose and dosage
☐ Not using	g drugs
☐ Knowled	ge of set and setting
☐ All of the	
☐ I don't kn	OW
What are o	utcomes of zero tolerance drug policies?
☐ Counselii	ng
☐ Expelled	from school
☐ Suspende	ed from school
☐ All of the	above
☐ I don't kn	OW
What are o	utcomes of restorative justice drug policies?
☐ Counselii	ng
☐ Expelled	from school
☐ Suspende	ed from school
☐ All of the	above
□ I don't kn	OW
How would	lyou advocate for drug policies at your school or in your community?
☐ Start a pe	etition on social media
☐ Put up po	osters
☐ Meet with	n administration or local politicians
\square All of the	above
□ I don't kn	ow
Have you e	ever used cannabis before?YESNO
	old were you the first time you used cannabis?
	ever used cannabis in the past 12 months?YESNO
_	cannabis, how often do you use?
	e times per day
	e times per week
	e times per month
☐ Every 3 to	
	e marijuana
	t percent (%) of the students in your grade do you think use
cannabis/n	narijuana <i>?</i> guess is fine.
□ 100%	
□ 100% □ 80%	□ 70%
□ 60%	□ 50%
□ 40%	□ 30%
□ 40 % □ 20%	□ 10%
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

	Losing friendship
	Unable to keep up with schoolwork
	Problem with anger/emotion or mental health
	Physically hurt
	Other health-related issues
	Driving with friends who are intoxicated
	Problems at home/ argument with parents
	No problems due to the use of marijuana
3.	Do you think a student could find help at your school from a counselor, teacher, or other adult to stop or reduce using marijuana?
	Very Likely Likely Not Likely Don't know
4.	Do you think a student will be suspended, expelled, or in trouble if caught using marijuana?
	Very Likely Likely Not Likely Don't know
5.	Do you think marijuana will have negative impact on people using it? Very Likely Not Likely Don't know
6.	How do students at your school who use marijuana usually get it? (check all
	that apply) At school
	At Parties
	From friends/other students
	From marijuana dispensary
	From adult friends
	From bars
	From their own house
	Home delivery?
	Don't know

7. Ho	ow do you feel about someone y Approv	your age doing the following? e Neither Approve nor Disapprove	Disapprove
Use n	narijuana regularly		
Tried	marijuana once or twice		
	Alcohol regularly		
			
Smok	ce cigarette regularly		
Tried	vaping device/ e-cigarette		
	OGRAPHICS: e tell us about yourself:		
How	old are you?		
。 。 。 。 。 。 What	is your race/ethnicity? Check a Black/African American Hispanic / Latino Native American Asian Hawaiian/Pacific Islander Middle Eastern White Other is your gender? Female Male	III that apply.	
_	Nonbinary ou school lunch eligible? Yes		
0	No		
What	is your religion? Check all that Christian Muslim Buddhist Jewish Agnostic Atheist Other I don't know	apply.	
0	I have no religion		

Do you identify as ...?

- Gay
- Bisexual
- Lesbian
- Straight
- o Other

What grades do you get in school? (Mark one)

- o Mostly A's
- o Mostly B's
- o Mostly C's
- o Mostly D's
- o Mostly F's

What is the highest level of school you plan to finish? (Mark one)

- o I may not finish high school
- o I plan to finish high school
- o I plan to go to vocational or trade school after high school graduation
- o I plan to go to college
- o I plan to go to graduate school or professional school (law, medicine)

Appendix J: Spring 2023 Post Program Survey Questions

Greetings, Deer Valley High School! Welcome to the Post-Program Survey - Spring 2023!

THIS SURVEY IS CONFIDENTIAL. Your name is not included, and there is nothing that will associate your answers on this survey to your name. The purpose of this survey is to get an honest and accurate understanding of whether you think the new Contra Costa drug education curriculum is having a positive effect on your attitudes, thoughts, and behaviors in response to substance use.

This survey is meant to be NON- JUDGEMENTAL. YOU ARE THE BEST JUDGE about what works for you. The developers of the curriculum need an accurate understanding of your experience with these classes to know how to make it better for you.

- 1. Have you ever, in any other programs, focused on substance use?
- 2. Have you ever gotten into a physical fight with another youth?
- 3. Have you ever been stopped by the police?
- 4. Have you ever been stopped by the police?
- 5. Have you ever been arrested?
- 6. Have you ever been suspended?
- 7. Have you ever volunteered (e.g. providing a service like working at a soup kitchen)?
- 8. Have you ever stood up for a cause (e.g. speaking publicly about an issue, attending a protest)?
- 9. What is harm reduction?
- 10. What is abstinence?
- 11. How would you advocate for drug policies at your school or in your community?
- 12. Have you ever used cannabis before?
- 13. If yes, how old were you the first time you used cannabis?
- 14. Have you used cannabis in the past 12 months?
- 15. If you use cannabis, how often do you use?
- 16. About what percent (%) of the students in your grade do you think use cannabis?
- 17. Do you think a student could find help at your school from a counselor, teacher, or other adult to stop or reduce using cannabis?
- 18. What can you do to make substance use safer for yourself and the people in your life?
- 19. What is the reason you use cannabis?
- 20. How do you feel about someone your age doing the following? (Approve, Neither Approve nor Disapprove, Disapprove)
 - a. Use cannabis regularly
 - b. Tried cannabis once or twice
 - c. Use alcohol regularly
 - d. Smoke cigarettes regularly
 - e. Tried vaping device/e-cigarette

- 21. Have you ever had problems due to the use of cannabis?
- 22. Do you think a student will be suspended, expelled, or in trouble if cause using cannabis?
- 23. Do you think cannabis will have negative impacts on people using it?
- 24. How do students at your school who use cannabis usually get it?

Demographics

- I. How old are you?
- II. What is your race/ethnicity?
- III. What is your gender?
- IV. Are you school lunch eligible?
- V. What is your religion?
- VI. Do you identify as gay, bisexual, lesbian, straight, other?
- VII. What grades do you get in school?
- VIII. What is the highest level of school you plan to finish?
- IX. Have you reduced the quantity or frequency of your cannabis use?
- X. Do you have an increased perception of the harms of cannabis use?
- XI. Has your academic performance improved?

Appendix K: Youth Focus Group Questions and Responses

1. What worked during the program? What did not work during the program? Worked:

- Incentives snacks, gift cards, mentorship stipends
- Mindfulness moments at the beginning of every session helps.
- Time Something fun and educational after school. Tuesdays and Thursdays also worked.
- Group work talking things out, teamwork activities.
- Cannabis knowledge- Presented in a good way. Fun and interactive. Infographics were helpful and better than PowerPoints.
- Mentorship fun but middle school students do not listen.
- Recruitment Fun passing out flyers

Did not work:

- Travel some students do not have reliable transportation from middle school to high school and ride shares are sometimes not preferred by parents.
- Social Media Training was ok. Indifferent Do not love or hate posting.
- Middle School students were placed there by principal for cannabis use. Students were not happy being there. Seemed like they were forced to be there.
- Club week recruitment They did not give the youth a table like the other clubs.

2. Did you grow or learn from the program? If so, what did you learn?

 Yes, cannabis risks and harms, the association between mental health and cannabis, leadership skills like communication and teamwork.

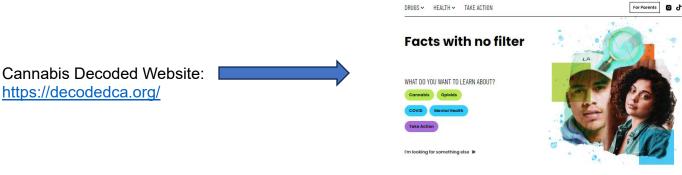
3. Program Logistics: How was the setup of the program? Think of scheduling, sessions, classroom space, etc.

- Scheduling was good. Tuesdays and Thursdays worked for the high school. Wednesdays could work better for Middle School. Most after school programs are on Tuesdays and Thursdays though. Some are every day of the week.
- Session length of time was good. 3:40pm 5pm at the high school. Welcome and mindfulness moment for the first 5 10 minutes, skill building and cannabis training one hour and reflections at the end for 5-10 minutes.
- Classroom space was good. For 22-23 and 23-24 both rooms were big. However, in 22-23, the room was too far from the entrance and parking lot, but it had program materials such as poster board, paper, and pens. For 23-24 the room was also big and spacious, but it was convenient that it was very close to the entrance, office, and parking lot. However, this room did not provide us with program materials for activities. Program should be capped at 10 students for focus.

4. What would you change about the program?

- Limit the program to 10 students. In the beginning we had too many.
- All day presence in a wellness center on some days.
- Add more off-site activities like community service events and team building events like bowling. Once a month.
- Add more to public speaking training. More practice on public speaking to build confidence.
- Add more teamwork activities.

Appendix L: Cannabis Decoded Website



III DECODED





DRUGS ~

HEALTH → TAKE ACTION

Articles Get Help Search

For Parents



Contra Costa County Resources

Crisis/Suicide Prevention

Contra Costa Crisis Center

Provides a wealth of resources throughout Contra Costa County.

- @ Phone: 211 or (800) 833-2900
- Website

Contra Costa Health A3 (Anyone, Anywhere, Anytime)

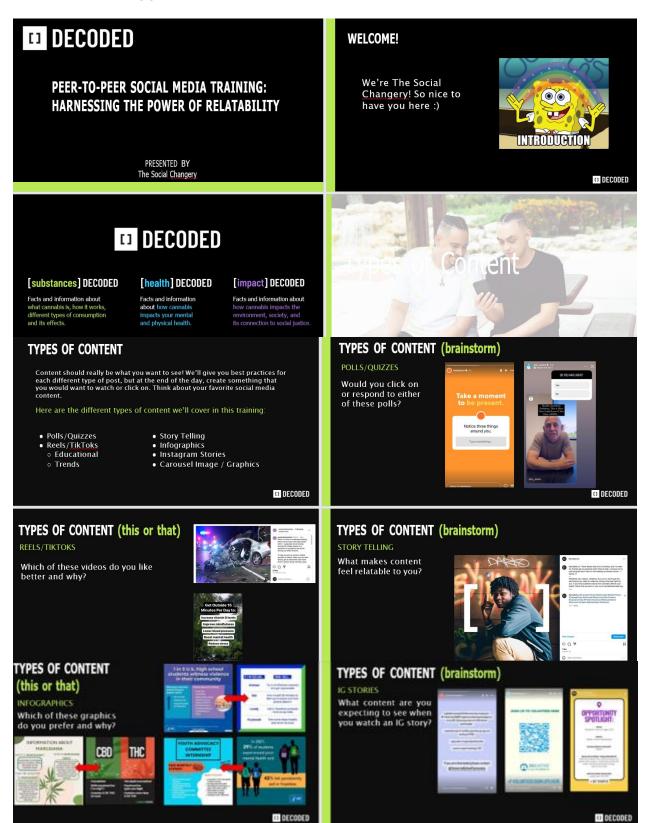
Mobile crisis response team that provides timely and appropriate mental and behavioral health crisis services to anyone, anywhere, at any time in the county

- **Thone:** (844) 844-5544
- The Call Center operates 8 a.m. 12:30 a.m. daily.
- For support outside these hours: Call 911 in an emergency | Adults: Call 988 or Text 'HOPE' to 20121 | Under 18: call 877-441-1089
- Website

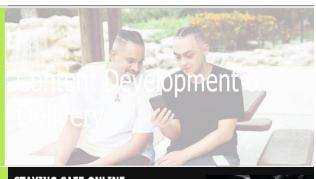
Example of the Contra Costa
County Resources Page on
Cannabis Decoded Website:

https://decodedca.org/contra-costacounty-resources

Appendix M: Cannabis Decoded Youth Presentation







STAYING SAFE ONLINE

When discussing sensitive topics like substance use or telling a personal story, it's important to protect yourself on the internet. Try this:

- Share it as a friend's experience, even if it's yours.
- Use "anonymous" as the source or the storyteller.



13 DECODED

CONTENT DELIVERY



1. EDUCATING THROUGH INFORMATIVE POSTS, VIDEOS, & INFOGRAPHICS



2. INSPIRING THROUGH MOTIVATIONAL MESSAGES & SUCCESS STORIES



3. ENGAGING THROUGH INTERACTIVE QUIZZES, POLLS, & CHALLENGES

13 DECODED

RESOURCES

- · GOOD REFERENCE ACCOUNTS TO GET IDEAS FROM
- o LGBT SONOMA https://www.instagram.com/lgbtgsonoma/
- Truth Initiative https://www.instagram.com/truthinitiative/
- o YLI https://www.instagram.com/ylinstitute/
- o Mental Health Coalition -

https://www.instagram.com/mentalhealthcoalition/

Unbiased Science Podcast –

 $\underline{https://www.instagram.com/unbiasedscipod/}$

13 DECODED

Thank you.

13 DECODED