

# Thriving Youth and Community (TYC) Program

LOCAL EVALUATION PLAN

COUNTY OF SANTA CRUZ

October 1, 2020- March 31, 2024

**County of Santa Cruz, Health Services Agency,**

**Substance Use Disorder Prevention**

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Funded by: Proposition 64 Board of State and Community Corrections (BSCC) Youth Reinvestment Grant

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## 2. Project Background

The County of Santa Cruz Health Services Agency Substance Use Disorder Services (SUDs) Prevention unit was awarded one million dollars, over three years, through a Proposition 64 Board of State and Community Corrections (BSCC), Youth Reinvestment Grant to decrease cannabis use among youth.

**2a. Project Need and Information.** Vaping of cannabis has increased in Santa Cruz County over the past several years along with vaping-related disciplinary referrals from schools, juvenile probation and law enforcement. In addition, cannabis adolescent arrests increased in 2018 to 76.5% of all juvenile drug arrests, up from 32.5% in 2017.<sup>1</sup>

Youth also report a lack of connectedness to school and community. Between '16/'17 and '18/'19, CHKS data indicates that more youth are *not* feeling connected to their schools.<sup>2</sup> Sixty-one percent of The Seven Challenges participants reported using cannabis and other drugs to relieve boredom or have something to do, indicating a lack of community connectedness.<sup>3</sup> The juvenile justice and education systems recognize that criminalization of youth use of cannabis is an ineffective strategy, yet they lack resources, infrastructure, and capacity to effectively intervene, leaving youth to navigate peer and societal pressures of cannabis use on their own. Santa Cruz County Juvenile Probation Department and local schools have requested Health Services Agency support to address the increasing volume of youth referrals for cannabis vaping.

SUDs Prevention has begun utilizing Prop 64 funding to partner with Pajaro Valley Prevention and Student Assistance, Inc. (PVPSA), Santa Cruz City Schools (SCCS), California Institute for Invincible Youth (CIY), and Friday Night Live (FNL) to launch the Thriving Youth & Community (TYC) program. Guided by the core values of dignity and wellbeing, TYC will address the individual and systemic impacts of legalization. TYC provides an avenue to support youth's academic, social, and emotional wellbeing, connect to school and community, and reduce disciplinary incidents through a trauma-informed culturally and developmentally responsive model that will: decrease cannabis use among youth; prevent and divert youth from the criminalization of adolescent behavior; and increase youth and adult connectedness. TYC provides youth with the opportunity to build on their strengths, enhance decision-making and resiliency skills, foster positive relationships and meaningful connections that provide the support needed to thrive. Evidence-based strategies will be utilized to prevent youth substance use, misuse, and potential substance use disorder, and promote healthy behaviors and supportive systems and environments. Leadership and advocacy skills, job training, and

<sup>1</sup> "Open Justice." California Department of Justice. (2019) 2013-2019.

<sup>2</sup> WestEd and California Department of Education. California Healthy Kids Survey: Santa Cruz Secondary 2016-2017, Main Report & 2018-2019 Main Report.

<sup>3</sup> Applied Survey Research. The Seven Challenges: Santa Cruz County Program Results 2016-2017.

peer mentorship will engage and connect youth to school and community as well as increase school and community protective factors.

**2b. Target Population.** Middle and High School age youth were selected as the target population based on data indicating that age of onset for cannabis use occurs during the middle school years and increases over the high school period. Students at Santa Cruz City Schools (SCCS) and the County Office of Education (COE) Alternative Sites are given priority to TYC services based on data that showed that these school districts had the highest percentage of 30-day cannabis use in the county. However, TYC services are available to all middle and high school youth at risk for substance use or using substances and will be utilized instead of school suspension and law enforcement adjudications. Youth currently engaged with probation will be served to meet probation goals. Participation is voluntary and minor consent services are available. TYC provides services at three levels of care including prevention, intervention, and cessation. Therefore, prior involvement with the Juvenile Justice System/Probation or explicit youth substance use is not required for program eligibility. Anyone concerned about the health and wellbeing of a student can make a referral to the TYC program. Student self-referrals are encouraged. Youth will be referred to TYC by the following sources:

- Parents
- Teachers
- Student self-referral
- School Counselors
- Coaches/Extra-Curricular Program Staff
- School Admin
- Probation Officers/Law Enforcement Agencies

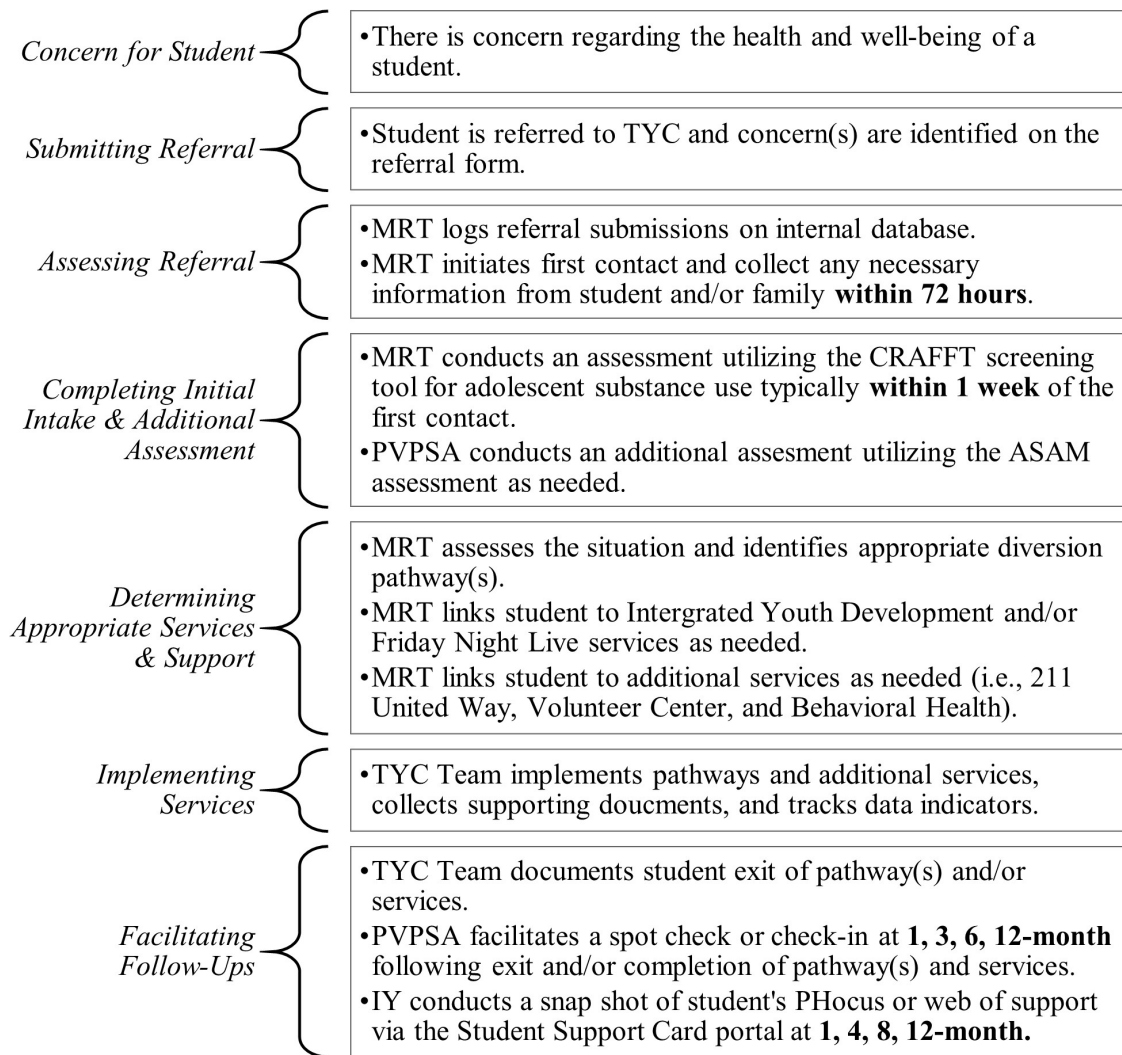
**2c. Criteria for Participant Eligibility:**

1. Youth ages 12-20 are eligible for TYC services.
2. Priority will be given to students in the Santa Cruz City Schools and County Office of Education Districts. However, services are available to all Santa Cruz County Middle & High School Students not eligible to be served by other programs.

**2d. Process Determining Interventions.** Upon referral, the TYC Mobile Response Team (MRT), made up of trained program specialists from PVPSA, will conduct an intake utilizing the CRAFFT assessment, a validated health screening tool designed to identify substance use disorder among youth ages 12-21. CRAFFT (Car, Relax, Alone, Family/Friends, Trouble- identifies a keyword in each question of Part B of the assessment). The CRAFFT will help identify the appropriate diversion pathway. For a score of 0-1 youth will be referred to Pathway 1 Prevention unless findings during the assessment determine a higher level of services is needed. Based on this determination of a score of 2 or more during the CRAFFT assessment, a full American Society for

Addiction Medicine (ASAM) assessment is conducted. The ASAM assessment is conducted to determine an appropriate pathway. This data is stored in PVPSA’s Avatar database. Youth may participate simultaneously in Pathways 2 and 3. The Invincible Youth-Integrative Youth Development model will be integrated into Pathway 1 and 3 and encouraged for all youth in Pathway 2. Pathway 3 - Cessation is open to all youth currently smoking or vaping cannabis and/or tobacco. Detailed pathway information will be provided to youth during the CRAFFT assessment. Individual sessions will be provided until a group of 2 or more youth are identified. Groups will be determined based on an appropriate fit for each youth. Group size is limited to 8 participants. Rolling sessions will allow youth to join a Pathway (1-3) at any point.

**Chart 1: Intervention Process**

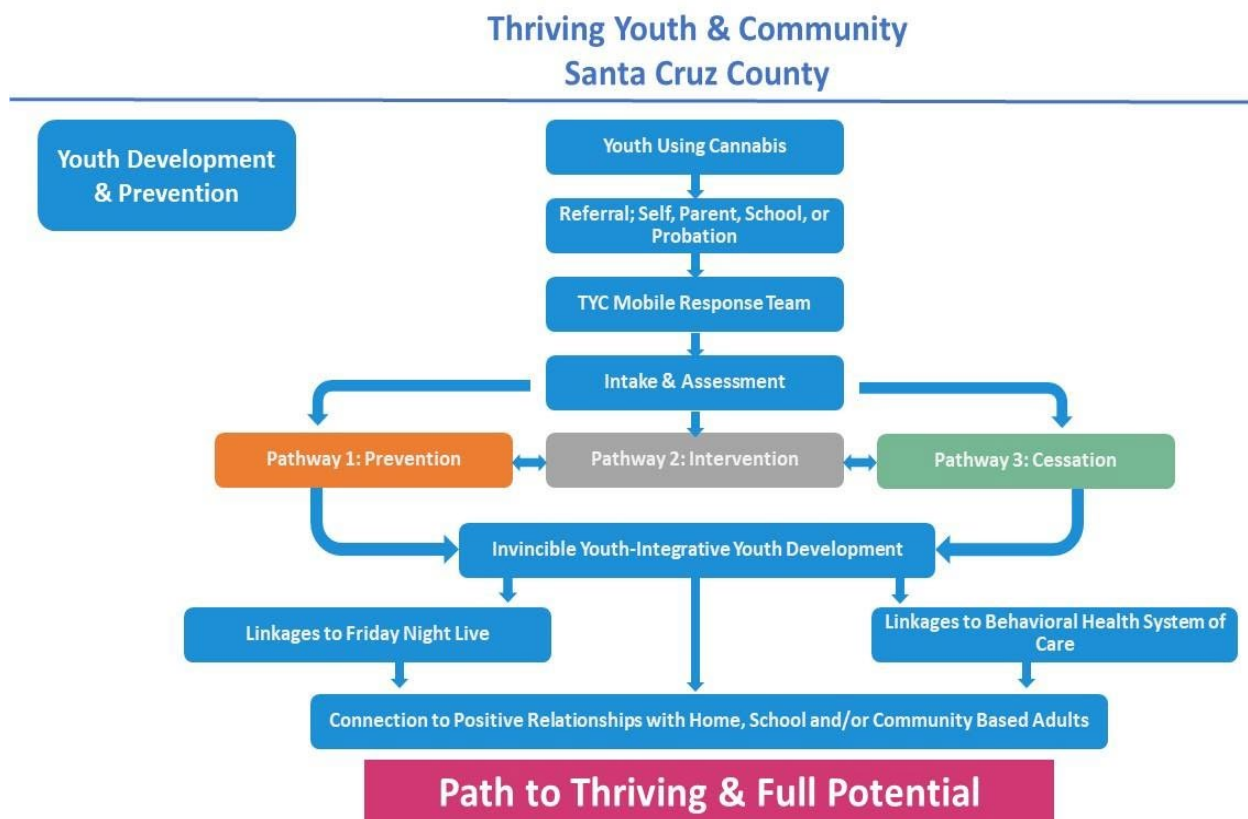


See appendix A: *TYC Program Procedures* document which includes a detailed overview of the *Referral Process and Timeline* as well as *TYC Staff Roles and Responsibilities*.

**2e. Process for Determining Service Area Activities.** In looking at the data in our service area, the TYC team was created by identifying local partners with the experience, past success, and growth capacity to meet the goals of the project. The TYC team set out to select evidence-based programs that would address the problems related to cannabis use, lack of connectedness and best meet the identified needs of the youth in our community. Requests for support to find alternatives to juvenile justice engagement and school suspension led to the identification of school-based interventions that could address the largest number of student needs. A deeper look into the reasons behind youth cannabis use led us to create a menu of services with a broad range of activities that would increase the likelihood of TYC services meeting the needs of the greatest number of youth. Evidence-based and evidence-supported practices were selected for each service area Pathway: Prevention, Intervention, and Cessation. Pathway 1, Prevention utilizes Stanford Cannabis Toolkit and Invincible Youth- Integrative Youth Development. These were selected to provide cannabis vaping education, build adult support systems for youth, and connections to the school. Pathway 2, Intervention services utilize the Seven Challenges treatment program which supports youth to evaluate their lives, consider changes they may wish to make, and then succeed in implementing their desired changes. Pathway 3, Cessation utilizes Project EX to help youth cease cannabis and tobacco smoking and vaping. **The chart on page 7 identifies the three pathways and the services selected for each service area.**

Chart 2: TYC Pathways

## TYC Pathway Flowchart



**Pathway 1- Prevention:** Includes an eight-week, 1.5-hour program consisting of four weeks of Stanford Cannabis Awareness and Prevention Toolkit that incorporates Integrative Youth Development (IYD) into the sessions. This is followed by four weeks of IYD group sessions. The program specialist will continuously monitor the youths’ needs throughout the eight-week program and will determine with the youth if they should move into a different pathway.

**Pathway 2-Intervention:** Consists of The Seven Challenges groups that will occur once a week for 90-minute sessions lasting a period of four to five months depending on the needs of the youth. Upon entering this pathway, youth will complete the ASAM (American Society of Addiction Medicine) assessment, a validated tool that provides a holistic approach for determining individualized and outcome-driven treatment plans. ASAM assessments conducted every four weeks will ensure youth are in the appropriate level of care.

**Pathway 3-Cessation:** Consists of Project EX, a smoking/vaping cessation program and IYD. Project EX consists of eight 45-minute sessions emphasizing coping with stress, dealing with nicotine withdrawal, relaxation techniques, and how to avoid relapse. It aims to teach self-control, anger management, mood management, and goal-setting techniques, and it provides self-esteem enhancement. Each Project EX session will be followed by a 45-minute IYD session for a total of 90 minutes per session.

Due to COVID-19 safety guidelines, the initial implementation of all services has been modified to a virtual platform using Zoom. Programming will resume small group sessions in-person as it becomes safe to do so. In-person programming will resume at school and community sites after school, during the school day, evenings, and weekends as needed to meet the needs of participants.

**2f. Project Goals and Objectives.** TYC has two primary goals, each supported by a related set of objectives as indicated in the chart below.

**Table 1: TYC Goals and Objectives**

<b>Goal 1:</b>	<b>Improve youth wellbeing and positive youth development by increasing protective factors and decreasing risk factors.</b>
Objectives:	
A.	85% of program participants demonstrate an increased understanding of the impacts of cannabis and gain refusal skills as measured by Cannabis Toolkit pre/post-tests (Pathway 1).
B.	50% of The Seven challenges program participants will report a decrease in cannabis vaping as measured by The Seven challenges post-survey (Pathway 2).
C.	30% of cessation therapy participants report quitting vaping as measured by program data (Pathway 3).
D.	80% of program participants will increase school, community, and adult connectedness as measured by IYD Student Support Card (integrated into all pathways).
<b>Goal 2:</b>	<b>Prevent youth involvement in the juvenile justice system</b>
Objectives:	
A.	By September 2023, there will be a 40% decrease in cannabis and/or vaping-related suspensions among participating school sites as measured by school site data (baseline will be established at the start of the project).
B.	By September 2023, there will be a 25% decrease (from 48-36) in youth referred to juvenile probation for cannabis-related incidents as measured by juvenile probation and law enforcement data.
C.	By September 2023, there will be a 90% increase in participating school sites identifying and diverting youth to TYC for cannabis-related disciplinary incidents as measured by school suspension rates.



### 3. Process Evaluation Method and Design

**3a. Research Design Used for Process Evaluation.** ASR will provide a mixed-method design of both qualitative and quantitative data analysis for Process evaluations by primarily utilizing sign-up sheets, tracking tools, and data retrieved from the Avatar system. Pre/Post tests for each pathway will include process questions to collect data on each youth's experience. Qualitative data will be collected through program specialist notes, key staff program meetings, key stakeholder program meetings, and feedback from individuals providing referrals, participants, and parents/caregivers on ease of navigation of the process and experience during program engagement. These results will inform accomplishment of identified activities, quality improvement; fidelity compliance; target audience reached; and how external factors influenced program delivery.

**3b. Documentation of Services.** Activities will be documented in specifically designed tracking tools, the **Pathway Data Collection Tracker** and **Case Log Tracker**. Sign-up sheets, case log notes entered in Avatar, and intake assessment notes will provide the data necessary to complete the trackers.

**3c. Participant Progress Tracking.** TYC youth will be logged into a monthly **Case Log Tracker** upon referral to the program which will continue to be used to track: Start dates, attendance, dropouts, successful completions, and progress milestones (See Appendix B for template). This system will track youth's progress and involvement within their referred pathway/s along with contact calls, meetings with parents, school attendance, grade level, pathway attendance, discipline violations, total days in the program, student grades, and reason for program exit. PVPSA program specialists will be responsible for updating and submitting the **Case Log Tracker** along with redacted case records to evaluator ASR every month. A case study will be submitted quarterly to the evaluator. Additionally, the **Pathway Data Collection Tool: Pathways 1-3**, will be used to track participants' progress (See Appendix C for Template). Pathway 1-Prevention data will be tracked on the **Case Log Tracker**. The **Referral Tracker** will be logged into a referral system managed by PVPSA and ASR (See Appendix D for template). The referral system will track the intake data such as demographic and background information, and participation records. This includes referrals to external providers, program specialist meetings, counseling sessions, contact with parents, school disciplinary incidents, and encounters with law enforcement that results in a citation. PVPSA program specialists will be responsible for updating and submitting their deidentified program specialist records to the evaluator ASR monthly. All unique participant information and services provided including participant progress for Pathway 2- Intervention and Pathway 3- Cessation will be collected through the Avatar Patient database system and shared via referral and monthly case log data trackers. Some unique data points only available in the Avatar database will be provided in excel file form from PVPSA's staff. Data trackers were designed to be hosted on the google drive cloud service, allowing data to be uploaded in a transparent and fast manner. Pre and post-test surveys from all pathways will provide a context of participant's perception, behavior, and/or impact regarding

substance use and services offered. Students will complete pre-post surveys online via Survey Monkey. ASR will receive these responses directly.

- Pathway 1 (Cannabis Awareness & Prevention Toolkit) includes items on participant's experiences with tobacco and cannabis use and opinions about tobacco and cannabis products.
- Pathway 2 (The Seven Challenges) includes items on participant's experiences with substance use, perception of harm, experiences with a caring adult, and perception of strengths, and experience in the program.
- Pathway 3 (Project EX) includes items on participant's decision to come to the group, tobacco-use behavior, and perception of the quality of the program.
- Invincible Youth-Integrative Youth Development identifies and measures the developmental ecology (web of support) experienced by each participant. The measurable factors that create the web of support being tracked include the depth of connection to caring adults, tangible and intangible supports, innate resiliency, experiences that erode resiliency, strengths and multiple intelligences, attitude & behaviors that are barriers to connection, support for connected adults and social norms impacting the youth. All participant data will be tracked on the **Student Support Card Portal**.

**3d. Components Tracking for Non-participant Activities.** Components and activities of the project that do not directly involve participants will be tracked on the **Outreach, Education, Training & Meeting Tracker** which are entered and maintained by the TYC team weekly and then collected by ASR for quarterly reporting (See Appendix E for template). This data tracker collects all program promotion, outreach, presentation, and education efforts performed by TYC staff including what materials are being distributed, the intended audience, expected numbers reached, modality used, and event information if available. Training information including the dates, types of training, and number trained will be documented here. Additionally, monthly TYC Staff meetings, which are documented through meeting materials (agendas/meeting minutes, PowerPoint slides, other resources to reference, etc.), and Bi-Weekly Service Implementation Check-ins with Student Support Services Director (school) and PVPSA, will be documented in this tracker. The Fidelity process for each program will be tracked utilizing **Fidelity Checklists** (See Appendix F) for Stanford Cannabis Toolkit, The Seven Challenges, Project Ex, and Invincible Youth-Integrative Youth Development to monitor program fidelity annually. Checklists will be submitted to ASR quarterly.

**3e. Process Measures.** The process measures identified below will be collected monthly utilizing the data tools described in 3c and submitted to ASR for analysis and quarterly reporting.

**Goal 1: Improve youth wellbeing and positive youth development by increasing protective factors and decreasing risk factors for youth.**

**Process Measures Participants (Who)**

1. Total youth referred into TYC (PVPSA).
2. Number of youth participating in the TYC program (PVPSA).
3. Number of youth intakes with CRAFFT assessment completed (PVPSA).
4. Number of youth given ASAM assessment (PVPSA).
5. Number of youth in Pathway 1-Stanford Cannabis Toolkit (PVPSA).
6. Number of youth in Pathway 2 -The Seven Challenges (PVPSA).
7. Number of youth in Pathway 3-Project EX Cessation Therapy (PVPSA).
8. Number of youth in Integrative Youth Development (CIY).
9. Number of youth in program specialist sessions (PVPSA).
10. Number of youth connected to FNL leadership/skill-building opportunities (FNL).
11. Number of youth connected to behavioral health and/or other resources (PVPSA).
12. Number of youth who completed their pathway/s (PVPSA).
13. Number of youth intervention sessions held (PVPSA).
14. Average number of case management sessions held (PVPSA).
15. Number of case management sessions held per student (PVPSA).
16. Identify the strengths and needs of referred participants using standardized assessments, CRAFFT and ASAM (PVPSA).
17. Number of youth who participated in spot checks after completion of the pathway(s).
18. Number of youth after pathway completion who met their overall pathway goal(s).
19. Number of youth who re-engage with the program after initial completion.

**Process Measure Non-Participant (Who)**

1. Number of individuals stating there was a clear and efficient referral protocol to route eligible youth into the TYC program (TYC Staff/Contractors).
2. Number of staff trained to implement evidenced-based curriculums and research-based promising practices (TYC Staff/Contractors).
3. Number of program specialists trained in assessment tools (TYC Staff/Contractors).
4. Number of outreach contacts with system partners. (TYC Staff/Contractors).
5. Number of trainings completed with system partners to identify and divert youth to alternative resources for cannabis-related incidents, including school educators and administration, parents/caregivers, adults, nonprofits, and other relevant stakeholders (TYC Staff/Contractors).
6. Percent of system and cannabis industry partners with increased knowledge of TYC protocol, process, and services.
7. Percent of system partners making referrals.
8. Percent of suspensions due to cannabis-related offenses.
9. Number of cannabis-related suspensions before TYC program implementation.

**Goal 2: Prevent youth involvement in the juvenile justice system.**

**Process Measures Participants (Who)**

1. The number of youth diverted from local law enforcement adjudication (PVPSA).

2. The number of youth diverted from the juvenile justice system (PVPSA).
3. The number of youth participants who are re-engaged to identify if further pathway referral is needed to mitigate a more serious involvement with the juvenile justice system (PVPSA).
4. The number of youth who avoided a cannabis-related suspension due to TYC diversion.

#### **Process Measures Non-Participant (Who)**

1. The number of outreach materials disseminated to law enforcement and probation partners (TYC Staff/Contractors).
2. The number of presentations to Juvenile Probation, law enforcement, school resource officers (TYC Staff/Contractors).
3. Percent of law enforcement system partners making referrals (PVPSA).
4. Percent of youth on probation due to cannabis-related offenses (PVPSA).
5. The number of cannabis-related suspensions before TYC program implementation.

**3f. Process Data Collection and Data Sources.** Pathway 1-Prevention data will be tracked and collected through PVPSA's internal database. All unique participant information and services provided including participant tracking for Pathway 2- Intervention and Pathway 3- Cessation will be collected through the Avatar Patient database system and shared via referral and monthly case log data trackers. Some unique data points only available in the Avatar database will be provided in excel file form from PVPSA's staff. Data trackers were designed to be hosted on the google drive cloud service, allowing data to be uploaded in a transparent and fast manner. Students will complete pre/post surveys online with a direct link to ASR's survey database as described in 3c.

**3g. Project Oversight Structure and Decision Making.** The County of Santa Cruz Health Services Agency Substance Use Disorder Prevention Unit is the lead agency responsible for project oversight of the TYC project. SUDS prevention has contracted with PVPSA to provide services at all three pathways including Prevention (Stanford Cannabis Toolkit), Intervention (Seven Challenges Curriculum), and Cessation (Project EX). The California Institute for Invincible Youth is contracted to provide the Integrative Youth Development Curriculum. ASR is contracted to develop tracking tools, collect and analyze data, provide data and assist in preparing all reports. The Project Director will oversee project development and management; monitor and evaluate staff and contractors effectiveness, accountability, and alignment with project goals and objectives, delivery of services and program quality; train and support staff and key stakeholders, coordinate, monitor and evaluate the implementation of the work plan; monitor fidelity to evidence-based strategies; manage grant budget and track expenditures, accounts payable and receivable, ensure compliance with grant fiscal requirements, and negotiate and prepare contract agreements; provide project and program implementation oversight and track

and monitor staff and contractor reporting. A Health Educator will interface with the Community Prevention Partners Coalition, to support the development of community cannabis prevention education, and TYC message development. Program Specialists will build the capacity of FNL youth leaders to identify, assess, plan, implement and evaluate their projects and provide peer-to-peer and community education. Support outreach, coordination, and implementation of grant deliverables; TYC quarterly meeting coordination, agenda and minutes compilation and distribution; and quarterly reporting and coordination and development of required project materials. The TYC decision-making team will consist of County project staff, contractors PVPSA, ASR, CIY, FNL, and Student Support Services Directors from each school district engaged. Project planning and decision-making will be based on a team approach and utilize consensus or majority rules to finalize decisions. Monthly TYC Team meetings will review service implementation, completion of activities, and participant referrals and serve as a platform for decision making to report out on process successes and barriers and identify solutions.

**3h. Project Component Monitoring.** Project component implementation will be monitored and determined effective by ASR and the TYC team utilizing strategies that include mechanisms to immediately address any gaps and adjustments needed. Strategies include:

**Bi-weekly:**

- Bi-weekly service implementation check-in meetings with PVPSA and Student Support Services Director (and CIY as needed) to ensure adequate staff and student support and to ensure student needs are met through program engagement and additional identified resources.

**Monthly:**

- Monthly county, contractor, and school district, TYC All Staff Meetings to review project successes, challenges, and barriers. Identifying needed modifications to enhance accessibility and stakeholder/participant experience.
- Monthly review of tracking logs to ensure all project components are addressed.
- Monthly review of stakeholder and participant feedback on the process, and program procedures to identify strategies for process improvements.

**Quarterly:**

- Quarterly review and monitoring of all data collection processes for the quarterly data reports. Gathering data from referral and case log and entering into SPSS to manage data for quarterly reports.
- Quarterly review of participant evaluation data collected through program-specific pre-post surveys, to determine if desired outcomes are being achieved. Enter into SPSS to inform reporting and decision making for identification of

strategies for program improvement and adherence to the evidence-based curriculum.

- Quarterly check-in with law enforcement, juvenile probation, and cannabis dispensary partners to determine ease of accessibility to information, ability to distribute information and provide referrals, gather feedback on process and TYC team will identify and make necessary adjustments to meet stakeholder needs to increase community knowledge of program and referrals.
- Quarterly program site visits by county and cross-program observation utilizing fidelity checklists to support program fidelity, enhance service delivery, and identify areas and strategies for improvement.

**3i. Documentation of Activities Performed by Staff.** Activities performed by staff and contractors will be aligned with funded grant deliverables and contracted scopes of work through contracts or purchase order agreements. They will be monitored using timecards, calendars, and the activities captured on the Outreach & Education/Training Tracker (See Appendix E). This data will be compared to contracted roles and responsibilities and assessed for needed changes quarterly.

**3j. Procedures to Ensure the Project will be Implemented to Fidelity.** Project implementation fidelity will be monitored through documentation of staff certification by curriculum developer-approved trainers, quarterly submission of program-specific fidelity checklists, and cross-program observation.

**3k. Quantitative and Qualitative Process Data Analysis.** TYC data analysis of both quantitative and qualitative data is a rigorous process that ensures both anonymity and integrity. Quantitative data is collected through various methods; pre/post surveys, and program data trackers. To analyze the data, descriptive statistics will inform outcomes of all project goals and objectives. Qualitative data is collected through various methods; pre/post survey free response, case notes, and the PVPSA/IYD check-in notes. Qualitative data will be analyzed for themes in participant's perception, behavior, and/or impact regarding substance use and services offered.

## 4. Outcome Evaluation

**4a. Research Design.** ASR will provide a mixed-method design of both qualitative and quantitative data analysis for a sequential pre-post survey collection through service implementation. All evaluation questions will be addressed by the data markers the program has established in all data trackers and check-ins. The analysis will be conducted to assess progress towards outcome short and long-term goals from baseline to project completions to identify success in achieving short and long-term outcome goals.

### 4b. Evaluation Questions.

**Goal 1: Improve youth wellbeing and positive youth development by increasing protective factors and decreasing risk factors.**

Evaluation questions:

1. Is there a clear and efficient referral protocol to route eligible youth into the TYC program?
2. Were the strengths and needs of participants identified using standardized assessments (CRAFFT, ASAM)?
3. Were appropriate pathway plans established with each participant?
4. Was the program pathway effective in supporting changes in youth behavior and engagement in prosocial activities?
5. Did participants meet their overall pathway goal (Prevention, Intervention, Cessation)?
6. What progress towards other established goals were met by participants?
7. Were the estimated number of participants expected to receive each type of intervention/service served?
8. Were programs implemented with fidelity to the model?
9. Were referrals provided for participants needing additional behavioral health or other services/activities to enhance protective factors?
10. What successful outcome measures did participants improve?
11. Did participants experience an increase in protective factors and/or decrease in risk factors?

**Objective A: 85% of program participants demonstrate an increased understanding of the impacts of cannabis and gain refusal skills as measured by Cannabis Toolkit pre/post-tests (Pathway 1).**

1. Was there an increase in participants' understanding of the health impacts of cannabis use?
2. Did youth gain cannabis refusal skills?

**Objective B: 50% of The Seven challenges program participants will report a decrease in cannabis vaping as measured by The Seven challenges post-survey (Pathway 2).**

1. Did participants report a decrease in cannabis vaping/use?
2. Did participants report a decrease in other substance use?
3. Did participants report an increase in prosocial behaviors?

**Objective C: 30% of cessation therapy participants report quitting vaping as measured by program data (Pathway 3).**

1. Did participants report they quit vaping/smoking cannabis and/or tobacco?
2. Did participants report an increase in prosocial behaviors?

**Objective D: 80% of program participants will increase school, community, and adult connectedness as measured by IYD Student Support Card (integrated into all pathways).**

1. Did participants report an increase in caring adults they are or could be connected with?
2. Were participants able to identify their specific protective factors?
3. Did participants report an increase in protective factors?
4. Did participants report an increased understanding of their resilience?
5. Did participants report an increased understanding of how to increase their resilience?
6. Did participants report an increase in their ability to identify the attitudes and behaviors that erode connection to caring adults?
7. Were participants able to identify adverse childhood experiences that may create barriers to connection?
8. Did participants report an increase in gratitude and empathy for caring adults?
9. Did participants report an increase in the ability to identify the social norms that impact their decision-making?

**Goal 2. Prevent youth involvement in the juvenile justice system**

1. Were spot checks of data markers including GPA, school attendance, disciplinary incidents effective in re-engaging participants?
2. Were individual participant check-ins effective in deferring youth adjudications?

**Objective A: By September 2023, there will be a 40% decrease in cannabis and/or vaping-related suspensions among participating school sites as measured by school site data (baseline will be established at the start of the project).**

1. Did the TYC training of key stakeholders increase referrals in place of suspension?
2. Did schools utilize the TYC referral process to decrease suspensions?



**Objective B: By September 2023, there will be a 25% decrease (from 48-36) in youth referred to juvenile probation for cannabis-related incidents as measured by juvenile probation and law enforcement data.**

1. Did training in law enforcement and juvenile probation increase TYC referrals?
2. Did law enforcement/juvenile probation utilize the TYC referral process to decrease youth justice system engagement?

**Objective C: By September 2023, there will be a 90% increase in participating school sites identifying and diverting youth to TYC for cannabis-related disciplinary incidents as measured by school suspension rates.**

1. Did cannabis-related suspensions decrease as a result of schools identifying and diverting students to TYC?

**4c. Estimated Number of Participants to Receive Services.** Some alterations had to be made to the estimated number of participants served due to the impact of COVID-19 resulting in school distance learning which has slowed down the referral process and implementation start dates impacting the overall number of students served in year one. TYC originally planned to address cannabis use among 125 youth in pathway 1- Prevention, 50 youth in pathway 2- Intervention, and 30 youth in pathway 3- Cessation annually. The number below represents a more realistic number, due to COVID impacts, of participants the program is able to serve annually:

**Year One:** Pathway 1 Prevention -30 youth; Pathway 2 Intervention - 10 youth; Pathway 3 Cessation- 5 youth.

**Year Two:** Pathway 1 Prevention -65 youth; Pathway 2 Intervention - 25 youth; Pathway 3 Cessation - 10 youth.

**Year Three:** Pathway 1 Prevention - 90 youth; Pathway 2 Intervention - 40 youth; Pathway 3 Cessation - 20 youth.

This is a total of 45 participants in year one, 100 participants in year two and 150 participants in year three.

**4d. Criteria for Success:** By the end of the program, TYC may be deemed a success if the following criteria are met:

1. *85% of program participants demonstrate an increased understanding of the impacts of cannabis and gain refusal skills as measured by Cannabis Toolkit pre/post-tests (Pathway 1)*

To determine this outcome ASR will analyze the pre/post models designed in Pathway 1 to determine positive participant change while in the TYC program. Additionally, the PVPSA 1 month spot check, 3-month check-in, 6-month spot check, 1-year check-in will help determine life outcomes for longer effects.

2. *50% of The Seven challenges program participants will report a decrease in cannabis vaping as measured by The Seven challenges post-survey (Pathway 2)*

To determine this outcome ASR will analyze the pre/post models designed in Pathway 2 to determine positive participant change while in the TYC program. Additionally, the PVPSA 1 month spot check, 3-month check-in, 6-month spot check, 1-year check-in will help determine life outcomes for longer effects.

3. *30% of cessation therapy participants report quitting vaping as measured by program data (Pathway 3)*

To determine this outcome ASR will analyze the pre/post models designed in Pathway 3 to determine positive participant change while in the TYC program. Additionally, the PVPSA 1 month spot check, 3-month check-in, 6-month spot check, 1-year check-in will help determine life outcomes for longer effects.

4. *80% of program participants will increase school, community, and/or adult connectedness as measured by IYD student support card (integrated into pathway-1 and 3).*

To determine this outcome ASR will analyze the IYD student support card data to analyze trends in protective factors, resilience, and connection to caring adults developed in IYD.

5. *By September 2023, there will be a 40% decrease in cannabis and/or vaping-related suspensions among participating school sites as measured by school site data (baseline will be established at the start of the project).*

To determine this outcome ASR will analyze the baseline suspension rate of the participants and compare it to the check-in/spot-check data collected after program exit.

6. *By September 2023, there will be a 25% decrease (from 48-36) in youth referred to juvenile probation for cannabis-related incidents as measured by juvenile probation and law enforcement data.*

To determine this outcome ASR will analyze juvenile probation data and law enforcement data before TYC program implementation and after the program is implemented. This allows TYC to compare how many participants are still in the probation system and compare that to those who have been admitted into TYC as opposed to probation.

7. *90% increase in participating school sites identifying and diverting youth to TYC for cannabis-related disciplinary incidents as measured by school suspension rates.*

To determine this outcome ASR will analyze the data on youth diverted to the TYC programming and the overall outcomes and program engagement the participants have with TYC. Additionally, ASR will compare cannabis-related suspensions before TYC programming to set a baseline of cannabis-related suspension rates.

**4e. Estimated Number of Activities/Services Accomplished.** The estimated number of prevention, intervention, and cessation services anticipated for groups of participants are as follows (See 4c as needed):

**Year One:** Pathway 1 Prevention-32 sessions (4 groups); Pathway 2 Intervention- up to 40 sessions (2 groups); Pathway 3 Cessation-8 sessions (1 group)

**Year Two:** Pathway 1 Prevention-64 sessions (8 groups); Pathway 2 Intervention- up to 60 sessions (3 groups); Pathway 3 Cessation-16 sessions (2 groups)

**Year Three:** Pathway 1 Prevention-88 sessions (11 groups); Pathway 2 Intervention-up to 100 sessions (5 groups); Pathway 2 Cessation-24 sessions (3 groups)

**Pathway 1**-8 sessions (90-minute weekly sessions including 4 sessions of 10 interactive activities utilizing the Toolkit and 4 sessions of IYD; **Pathway 2**-longevity is determined by youth (90-minute weekly sessions including opportunities to work through a set of 9 Seven Challenges Journals, 3) **Pathway 3**-8 sessions (90-minute weekly sessions including 45-minutes of Project EX and 45-minutes of IYD for all 8 sessions).

**4f. Criteria for Determining Activity/Service Completion and Project Success.** The completion of services will be determined by the following criteria:

- Completion of a CRAFFT assessment and ASAM assessment/s as needed.
- Completion of a pre/post-survey before the start of the first session and immediately following the final session as designed (*Pathway 1, 2, and 3.*).
- Completion of a Student Support Card (*Pathway 1 and 3.*)
- Completion of up to a set of 9 Seven Challenges Journals as needed (*Pathway 2.*)
- Adherence to all 8 sessions delivered over 8 weeks (*Pathway 1 and 3.*)
- Adherence to appropriate topic areas delivered in compliance with the Fidelity Checklists (*Pathway 1, 2, and 3. See Appendix F.*)
- Completion of suspension/deferment requirements.

**4g. Description of Outcome Variables and how they are Defined and Measured.** The following outcome variables are defined by a positive change in youth's knowledge, attitudes, behaviors, and/or intentions related to cannabis/tobacco use; a positive change in youth's web of support; and participant engagement in the TYC program. This is

measured by pre/post-surveys, student support cards, data trackers, and follow-ups as described in 4d.

1. *Percent of youth demonstrating increased understanding of the impacts of cannabis and increased refusal skills (Pathway 1).* Measured by the Stanford Cannabis Awareness & Prevention Toolkit pre/post-survey and participant follow-up. Frequency: Immediately following the final session of the toolkit. Participant follow-up at 1, 3, 6, 12-month upon exit.
2. *Percent of youth participating in Seven Challenges reporting a decrease in cannabis vaping (Pathway 2).* Measured by the Seven Challenges pre/post-survey. Frequency: Immediately following the final session.
3. *Percent of Cessation Therapy participants reporting quitting vaping (Pathway 3).* Measured by the Project EX pre/post-survey and participant follow-up. Frequency: Immediately following the final session. Participant follow-up at 1, 3, 6, 12-month upon exit.
4. *Percent of youth reporting increased adult connectedness (Pathway 1 & 3).* Measured by the Student Support Card. Frequency: After the IYD sessions and at the 4, 8, and 12-month check-ins.
5. *Percent of youth receiving services and support through case management (Pathway 1, 2, and 3).* Measured by Monthly Case Log tracking services received and case management hours. Frequency: Monthly.
6. *Percent of youth engaging in leadership and skill-building opportunities through FNL participation.* Measured by Pathway Data Collection tool tracking number of meetings attended and hours of participation. Frequency: Quarterly.
7. *Percent of youth referred to behavioral health services.* Measured by Pathway Data Collection tool. Frequency: Monthly.

**4h. Outcome Data Collection, Timing, and Sources.** Quantitative and Qualitative outcome data will be collected as follows:

**Pre/Post Surveys:** Pre/post surveys from all pathways will provide a context of participant's perception, behavior, and/or impact regarding substance use and services offered. Students will complete pre-post surveys online before the start of the first session and immediately following the final session. ASR will receive these responses directly.

**Case Notes:** Through a behavioral health care management system, Notable, and the Monthly Case Log, case notes will be logged by PVPSA to track participant case management and collateral contact as needed. The documentation of case management notes includes observations of participant engagement through pathways 1, 2, and/or 3, communication with participants (including meetings, emails, phone calls, texts), and

other supporting information as needed. Communication with a collateral contact, a reliable source who is knowledgeable about a participant's situation, may provide information regarding a participant's needs, goals, and progress. Monthly, case notes will be provided to ASR in a narrative format with all identifying information removed before sharing.

### **Student Support Card© for Invincible Youth-Integrative Youth Development:**

The Student Support Card assesses and measures seven key impact areas that influence young people's positive development. Each measurable factor is identified by one of seven colors. Each student responds to statements on 10 surveys (self-reporting). The Student Support Card™ measures and records a student's mixture and strength of these colors at any given time. The resulting kaleidoscope snapshot is presented in an easy-to-understand visual representation. The summary provides meaningful clarity and insight to improve the strength of positive factors, and reduce negative factors. Data collection occurs via Brightways server and is encrypted over a secure HTTPS connection to protect user passwords and data. This data is logged monthly in the Pathway Data Tracker.

**FNL (Friday Night Live):** This data is logged quarterly in the Pathway Data and Referral Tracker which supplies the number of youth from TYC referred to FNL, how many meetings youth attended, and the length of time (hours) of participation. Annual Youth Development survey data is collected from all FNL participants county-wide to gather qualitative data about how youth experience a safe environment, opportunities for community engagement, opportunities for leadership and advocacy, opportunities to build caring and meaningful relationships with adults and peers, and opportunities to build interesting and relevant skills-building activities. TYC youth who participate in FNL will be included in this county-wide survey data in years two and three of program implementation.

**Behavioral Health:** This data is logged monthly in the Referral Data Tracker and only supplies the number of youth from TYC referred to BH.

#### **4i. Quantitative and Qualitative Outcome Data Analysis and Statistical Tools.**

**Quantitative Data Outcome.** Outcome data analysis will be reported by analyzing descriptive statistics changes in pre/post survey results. All three pathway outcomes of participant change in behavior, knowledge of substance use risk, and decrease in substance use. Statistical tools used will include IBM SPSS statistics software and data visualization tools to produce reports for the TYC team.

**Qualitative Data Analysis** Outcome data analysis will be reported by using 1-month spot check, 3-month check-in, 6-month spot check, 1-year check-in, program specialist notes, and open-ended-response portions of the pre/post pathway survey data will be aggregated and analyzed for common thematic elements in responses and presented using descriptive analysis. Follow Up Snapshots will be taken on the Student Support Card portal at 4, 8, and 12 months. The Follow Up Snapshots are maintained chronologically

and students can reflect on what “PHactors” in their lives have shifted their developmental ecologies at different times in their growth. The data can help the students, counselors, parents, and school staff/administrators have more meaningful conversations to better support the youth for immediate and lifelong success.

#### **4j. Strategies for Determining if Outcomes are Related to a Project and not Other Factors.**

Outcome strategies that ensure no other factors impact the participant population include a fidelity checklist for all program components that ensures all data collected is done with the intent of reflecting an outcome associated with the TYC program. Additionally, the TYC program is built so that all Pathways 1-3 are a Pre/Post data structure, this allows ASR and the TYC team to set a baseline for later comparison. When looking at data collected after program exit with spot-checks/check-ins the baseline data markers of the participant before joining TYC are then compared against those after program exit. There is an inability to control for exposure outside of the specific program when evaluating outcomes. It is unclear how much certain exposures outside of the controlled program may impact each respondent and therefore how much impact certain outside exposures may have had on measured outcomes.

#### **4k. Effects on Outcome Variables for each Intervention.**

Pathway 1 (Cannabis Awareness & Prevention Toolkit) includes items on participant’s experiences with tobacco and cannabis use and opinions about tobacco and cannabis products. The outcome variables for Pathway 1 will measure the change in the participants, perception of harm, refusal skills, and negative effects associated with the use of nicotine/cannabis products.

Pathway 2 (Seven Challenges) includes items on participant’s experiences with substance use, perception of harm, experiences with a caring adult, and perception of strengths, and experience in the program. The outcome variables for Pathway 2 will measure the change in the participant’s decision-making related to substance use, self-regulation, future goals, and the lived environment that creates support networks for the participant. The Seven Challenges program includes substance use of alcohol, nicotine, cannabis, prescription drugs, and illicit drugs.

Pathway 3 (Project EX) includes items on participant’s decision to come to the group, tobacco/cannabis-use behavior, and perception of the quality of the program. The outcome variables for Pathway 3 will measure the change in the participant’s substance use habits, self-regulation, and effort to cease. Project EX includes substance use reduction and addiction education.

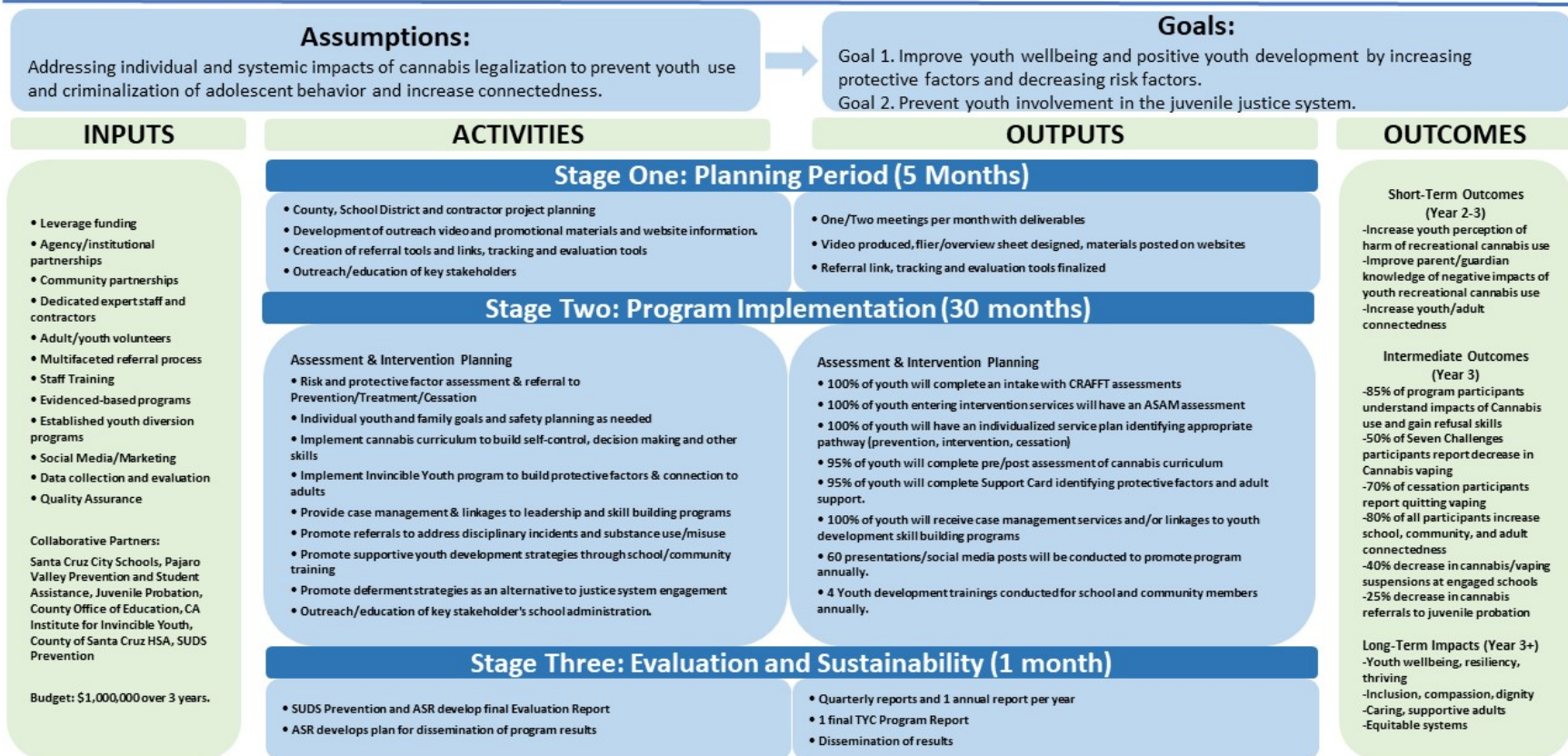
Integrative Youth Development (IYD) identifies and measures the developmental ecology (web of support) experienced by each participant. The measurable factors that create the web of support being tracked include the depth of connection to caring adults,

tangible and intangible supports, innate resiliency, experiences that erode resiliency, strengths and multiple intelligences, attitude & behaviors that are barriers to connection, support for connected adults and social norms impacting the youth.

## 5. Logic Model 5a-5c.



# Santa Cruz County Thriving Youth & Community Logic Model





## APPENDICES:

### Appendix A) Santa Cruz County Thriving Youth & Community (TYC) Program Program Procedures

#### Overview of Referral Process and Timeline

- The student is referred to the Thriving Youth & Community (TYC) program through the online referral link (<https://www.pvpsa.org/tyc-referral>) and concerns are identified on the referral form.

#### Within 72 Hours:

- The Mobile Response Team (MRT), which consists of trained Program Specialists, will document referral forms received utilizing a data tracking tool.
- MRT will initiate the first contact with the referred students and collect any necessary information (following guidelines of confidentiality).
- MRT will complete the initial intake utilizing the CRAFFT assessment, a validated health screening tool, within one week of the first contact.
- MRT will connect the student to PVPSA Drug & Alcohol Counselors who will conduct the American Society of Addiction Medicine (ASAM) assessment as needed based on the scoring of the CRAFFT assessment.
- MRT will use data collected to assess the situation and determine the appropriate pathway(s) and/or services. Pathways include Pathway 1-Prevention, Pathway 2-Intervention, and Pathway 3-Cessation.
- MRT will connect students to additional services as needed (including California Institute for Invincible Youth, Santa Cruz County Friday Night Live, 211 United Way, Volunteer Center, Behavioral Health, and additional linkages).
- MRT and CIYY will conduct follow-ups with the student after the exit or completion of services (see timeline requirements below).

- At the 1-month follow-up, MRT will conduct a spot check of the student's school records (including a review of academic progress, truancy, disciplinary, and other student records) from the date of completion of services.
- At the 3-month follow-up, MRT will conduct a check-in (via telehealth or in-person) from the date of completion of services.
- At the 4-month follow-up, IY will conduct a snapshot of the student's web of support utilizing the Student Support Card portal.
- At the 6-month follow-up, MRT will conduct a spot check of the student's school records from the date of completion of services.
- At the 8-month follow-up, IY will conduct a snapshot of the student's web of support utilizing the Student Support Card portal.
- At the 12-month follow-up, MRT will conduct a check-in from the date of completion of services.
- At the 12-month follow-up, IY will conduct a snapshot of the student's web of support utilizing the Student Support Card portal.
- Santa Cruz City Schools/California Office of Education and PVPSA/IY team providing direct services will meet monthly to discuss program development and coordination of services as needed.
- The TYC team consisting of PVPSA, ASR, IY, SCCS, and Santa Cruz County will meet monthly to address logistics, program process, tracking, fidelity, and ongoing evaluation.

## Roles and Responsibilities

Pajaro Valley Prevention and Student Assistance, Inc. (PVPSA)

Program Manager:

- The Program Manager will oversee Program Specialists receiving referrals from any of the following entry points:
  - Parents
  - Teachers
  - Student self-referrals
  - School Counselors
  - Coaches/Extra-Curricular Program Staff
  - School Administration
  - Probation Officers/Law Enforcement Agencies
- The Program Manager will monitor the accuracy in tracking referrals for use by Applied Survey Research (ASR) in quarterly progress reports.

TYC Mobile Response Team (MRT):

- MRT will consist of trained PVPSA Program Specialists.
- Program Specialists will process incoming TYC referral submissions.
- Within 72 Hours: Program Specialists will document referral forms received and collect any necessary information from youth and family while adhering to guidelines regarding confidentiality.
- Program Specialists will contact the youth and/or parent/caregiver within 72 hours of receiving the referral to schedule the initial intake appointment.
- Program Specialists will conduct the initial intake within one week of the first contact.
  - Program Specialists will notify the program manager via email if the first meeting/intake needs to be extended past the first week.

- Program Specialists will notify the program manager during weekly meetings if they are unable to reach the youth and/or parent/caregiver within two weeks, (if not sooner) after receiving the referral.
- Program Specialists will complete initial intake utilizing the CRAFFT assessment, a validated health screening tool, within one week of the first contact.
- Program Specialists will use data collected to assess the situation and determine the appropriate services on the student's behalf.
- Program Specialists will divert students to pathways one, two, and/or three and document the status of the student and other information as needed using data tracking tools.
- Every week, Program Specialists will implement services in Pathway 1 and/or Pathway 3, and assist with Pathway 2 as needed.
- Program Specialists will facilitate follow-ups with students after completion of services which include: a spot check (i.e., review student academic progress, truancy, disciplinary and other student records) at 1-month and 6-month and a check-in at 3-month and 12-month as appropriate.
  - PVPSA staff will connect students to appropriate services as needed (i.e., 211 United Way, Volunteer Center, Behavioral Health services).
- Program Specialists will communicate with the youth weekly or as needed to ensure that the youth are engaged in services.
- Program Specialists will collect all supporting documents noting what services the youth received. Documents include pre and post-tests, sign-in sheets and other data tracking tools, case notes, linkages to any resources, and additional services from Invincible Youth, Friday Night Live, and Behavioral Health.
- Program Specialists will provide monthly reports to the Program Manager.

#### PVPSA Substance Use Counselors

- Counselors will conduct an additional assessment, ASAM (American Society of Addiction Medicine), as needed.
- Counselors will implement group sessions for Seven Challenges.
- Counselors will ensure students complete pre and post-tests.

- Counselors will collect and provide PVPSA Program Specialists with student attendance, student progress and/or needs, and the date of completion of services.

#### California Institute for Invincible Youth (CIYY)

- Participate in Toolkit sessions with PVPSA Program Specialists as appropriate.
  - Facilitate Integrative Youth Development (IYD) sessions with participants.
  - Set up, monitor, and conduct the Student Support Card.
  - Check-in with participants at 1, 4, 8, and 12 months to take a Snap-Shot of their PHocus or web of support through the Student Support Card portal.
  - Provide IYD training to adults and parents as indicated to support the youth participants learning and Pathway success.
  - Assist in creating a promotion, outreach, and distribution plan including social and print media, direct mail, school/organizational contacts, and local listservs.
  - Analyze and evaluate the IYD program process and outcome measures.

#### **Appendix B) [Case Log Tracker](#)**

#### **Appendix C) [Pathway Data Collection Tool: Pathways 1-3](#)**

#### **Appendix D) [Referral Tracker](#)**

#### **Appendix E) [Outreach, Education, Training, and Meeting Tracker](#)**

## Appendix F) Fidelity Checklists for Pathways 1-3 & CIY

### Pathway 1 Cannabis Awareness & Prevention Toolkit (CAPT)

Cannabis Awareness & Prevention Toolkit (CAPT) Implementation Fidelity Checklist						
Facilitator's Name: _____		Quarter: _____		Date: _____		
Observer's Name: _____		Agency/Provider: _____		Session(s): _____		
<b>Implementation indicators evaluate fidelity and quality of services:</b> Adherence (Y=Yes, delivered; N=No, not delivered); Quality (1=Low quality, 2=Moderate quality, 3=High quality); Participant Engagement (1=Low engagement, 2=Moderate engagement, 3=High engagement)						
Unit	Purpose/Learning Objectives	Activities	Adherence (Y/N)	Quality (1-3)	Participant Engagement (1-3)	Comments/Observations
	Evaluation	Facilitator administers Pre-Test Survey				
		Facilitator administers Post-Test Survey				
<b>Cannabis: The Basics</b>	1. Obtain knowledge of various cannabinoids found in marijuana/cannabis, focusing on THC and CBD 2. Understand the potential health impacts of marijuana/cannabis use 3. Summarize marijuana/cannabis facts	Facilitator goes over introduction and ground rules				
		Facilitator initiates discussion utilizing the "Cannabis/ Marijuana 101" PowerPoint as an overview				

		Facilitator utilizes the "Opinions & Facts Activity" to review common misconceptions				
<b>Health Effects</b>	<ol style="list-style-type: none"> <li>1. Obtain knowledge of the potential harms associated with the various methods of use for cannabis</li> <li>2. Understand the harms especially relevant to youth, including the harms associated with edibles and THC concentrates</li> <li>3. Summarize potential harms related to various methods of use</li> </ol>	Facilitator initiates discussion utilizing the "Methods of Use" PowerPoint as an overview				
		Facilitator initiates discussion utilizing content from the E-Cigarettes/Vaping Module (Tobacco Toolkit)				
		Facilitator leads interactive "Harm Hill" activity if time permits				
<b>THC &amp; the Brain</b>	<ol style="list-style-type: none"> <li>1. Recognize the role of dopamine in adolescent brain development</li> <li>2. Provide examples of what can release dopamine naturally</li> <li>3. Discuss how marijuana/cannabis can negatively affect the adolescent brain in relation to dopamine</li> </ol>	Facilitator initiates discussion utilizing the "Finding Your Dopamine Option B" activity				
		Facilitator leads interactive "Synapses and Stress" activity				

<b>Refusal Skills &amp; Social Norms</b>	1. Explain the role dopamine has in the body	Facilitator gives quiz utilizing questions from "Kahoot: The Basics" and "Kahoot: Methods of Use"				
	2. Analyze how cannabis can interfere in brain development	Facilitator leads interactive "Defining Your Dopamine" activity				
	3. Identify potential challenges that may occur when cannabis interferes with brain development					

**Adapted from**

Stanford Medicine. (2021). Our Modules. Cannabis Awareness and Prevention Toolkit.

<https://med.stanford.edu/cannabispreventiontoolkit/Curriculum.html>

James Madison University Center for Assessment & Research Studies. <https://www.jmu.edu/assessment/sass/AC-step-four.shtml>



## Pathway 2 The Seven Challenges

### THE SEVEN CHALLENGES® FIDELITY COMPLIANCE CHECKLIST

ORGANIZATION: \_\_\_\_\_ DATE: \_\_\_\_\_

REVIEWED BY: \_\_\_\_\_

9/12/2014

*Compliance Indicators are evaluated as "yes" or "no" for program fidelity. They do not evaluate quality.*

#### QUALITY ASSURANCE DOCUMENTS

Y\_\_ N\_\_ All Quality Assurance documents completed and up to date. These documents verify staff orientation and counselor training is provided per fidelity, as well as other requirements.

Y\_\_ N\_\_ Weekly supervision of counselors is documented.

Y\_\_ N\_\_ Implementation procedures in the binder.

Y\_\_ N\_\_ Family involvement is evident. If not, efforts to involve the family are documented.

#### CONTINUING CARE FORMS

Y\_\_ N\_\_ The Moving On document is completed for all youth.

Y\_\_ N\_\_ The Continuing Care-Counselor Summary is completed for all youth.

Y\_\_ N\_\_ The above forms are consistently *requested from* other providers.

Y\_\_ N\_\_ The above forms are consistently *provided to* other Seven Challenges providers.

#### JOURNAL REVIEWS

Y\_\_ N\_\_ Counselor doesn't correct spelling, grammar, or punctuations, and does not use red ink.

Y\_\_ N\_\_ Every Journal page has a counselor comment/question with the expectation that counselors write extensive comments and questions on every page.

Y\_\_ N\_\_ Counselors consistently request youth to complete missing pages and/or sections.

Y\_\_ N\_\_ Youth consistently respond to counselor questions.

Y\_\_ N\_\_ Counselors consistently recognize youth responses to their questions.

Y\_\_ N\_\_ Counselors are not pushing an agenda, arguing, or being judgmental.

Y\_\_ N\_\_ Counselors maintain the focus of each Journal, not "jumping ahead" to later Challenges.

Y\_\_ N\_\_ Written dialogue is evident between counselor and youth. Extensive \_\_Y\_\_ N\_\_

Y\_\_ N\_\_ Journals pass back and forth several times.

Y\_\_ N\_\_ Certificates are provided to youth when they complete each Journal.

Y\_\_ N\_\_ A Leader reviews at least one Journal quarterly for each counselor.

### GROUP SESSIONS

- Y\_\_ N\_\_ Group size does not exceed 10 youth.
- Y\_\_ N\_\_ The Seven Challenges poster is in counseling room.
- Y\_\_ N\_\_ Working Sessions poster in counseling room.
- Y\_\_ N\_\_ Group rules posted.
- Y\_\_ N\_\_ Group structure followed:
  - Y\_\_ N\_\_ Session starts with a Seven Challenges welcoming statement: Welcome to this Seven Challenges session.....".
  - Y\_\_ N\_\_ Group rules appropriately reviewed.
  - Y\_\_ N\_\_ Youth "check-in"
    - Y\_\_ N\_\_ Rating selves 1-10 , Y\_\_ N\_\_ Brief
    - Y\_\_ N\_\_ In outpatient, Individualized Support questions are asked of youth who want to cut back or quit using drugs. "Yes" answer triggers work on this issue later in session, not during check in. No such questions for others.
    - Y\_\_ N\_\_ Each youth asked specifically "what do you want to work on today?"
- Y\_\_ N\_\_ *The Seven Challenges* book of readings is used during the session.
  - Y\_\_ N\_\_ Every youth has a book of readings.
  - Y\_\_ N\_\_ The reading is relevant to the group topic.
- Y\_\_ N\_\_ An appropriate balance of youth-initiated work and counselor-initiated work is evident. (If an entire session is only a counselor-initiated activity, there is an explanation as to why there is no youth-initiated work.).
- Y\_\_ N\_\_ Each issue a youth chooses to work on is clarified, a session goal established, possibilities considered, resolution attained, and ends with closure.
- Y\_\_ N\_\_ Youth and counselors make frequent connections to Seven Challenges.
- Y\_\_ N\_\_ Behavior Management maintained.
- Y\_\_ N\_\_ Journaling time is provided. – When \_\_\_\_\_
- Y\_\_ N\_\_ A Leader observes at least one group quarterly for each counselor

## INDIVIDUAL SESSIONS

Y\_\_ N\_\_ The Seven Challenges poster (or hand held size) is in counseling room.

Y\_\_ N\_\_ Working Sessions poster (or hand held size) is in counseling room.

Y\_\_ N\_\_ Session structure followed:

Y\_\_ N\_\_ Session starts with a Seven Challenges welcoming statement.

Y\_\_ N\_\_ Youth "check-in"

Y\_\_ N\_\_ Rating self, 1-10, with comments and any expansions...

Y\_\_ N\_\_ In outpatient, Individualized Support questions are asked of youth who want to cut back or quit using drugs. "Yes" answer triggers work on this issue later in session, not during check in.

Y\_\_ N\_\_ The youth is asked specifically "what do you want to work on today?"

Y\_\_ N\_\_ One or more issues a youth chooses to work on is clarified, a session goal established, possibilities considered, resolution attained, and ends with closure.

Y\_\_ N\_\_ *The Seven Challenges* book of readings is used during the session.

Y\_\_ N\_\_ The reading is relevant to the session topic.

Y\_\_ N\_\_ Youth initiate some of the work.

Y\_\_ N\_\_ Youth and counselors make frequent connections to Seven Challenges.

Y\_\_ N\_\_ Journaling time is provided. – When \_\_\_\_\_

Y\_\_ N\_\_ Leaders observe at least one session per quarter for each counselor.

## Pathway 3 Project EX

Project EX Implementation Fidelity Checklist						
Facilitator's Name: _____		Quarter: _____		Date: _____		
Observer's Name: _____		Agency/Provider: _____		Session(s): _____		
<b>Implementation indicators evaluate fidelity and quality of services:</b> Adherence (Y=Yes, delivered; N=No, not delivered); Quality (1=Low quality, 2=Moderate quality, 3=High quality); Participant Engagement (1=Low engagement, 2=Moderate engagement, 3=High engagement)						
Session	Purpose/Learning Objectives	Activities	Adherence (Y/N)	Quality (1-3)	Participant Engagement (1-3)	Comments/ Observations
<b>Session 1: Orientation</b>	Session 1 stresses the importance of keeping an open mind throughout the 8 sessions. The class discusses how habits can become addictions, how tobacco use actually causes stress, and how smoking can affect one's family and friends. Students are asked to do an experiment after class about their own experiences with tobacco as an addiction.	Pre-Test Survey				
		Warm-Up				
		Review Ground Rules				
		Project EX Student Guidebooks				
		Main Reasons For Using Tobacco				
		Is Tobacco A Pleasure, Coping Mechanism, Or Habit				
		Dealing with Life Without Tobacco				
		Experiment				

		Reasons to Quit Tobacco Use			
		Talk Show: "Family and Friends Confront Smokers About Their Habit"			
		Review Questions (if time permits)			
		Conclusion			
<b>Session 2: Tobacco Affects Your Life</b>	Students who tried their experiments share their real-life experiences. The class discusses how tobacco causes stress both physically and psychologically. Healthy breathing and coping skills are instructed to help promote relaxation and reduce withdrawal.	Warm-Up			
		Tobacco Use and Stress			
		Talk Show: "Tobacco Use May Be Stressing You Out"			
		How to Cope with Stress			
		Healthy Breathing Exercise			
		Conclusion			
<b>Session 3: Health Dangers of Tobacco Use</b>	Students learn three main ingredients of tobacco that can hurt the body (e.g., nicotine, carbon monoxide, and tar). Tobacco health statistics are discussed, including a "game" on the dangers of secondhand smoke.	Warm-Up			
		Physical Consequences			
		Game: "Is Smoking on the Menu"			
		Tobacco Statistics			
		Conclusion			
		Warm -Up			

<b>Session 4: Quitting- Step 1 Making a Commitment</b>	Students begin to learn about the stages of addiction including the physical and psychological symptoms of withdrawal. The session discusses strategies for breaking an addiction such as making a personal commitment.	Breaking an Addiction			
		Making a Personal Statement of Commitment			
		Withdrawal			
		Withdrawal Symptoms			
		Psychological Symptoms of Addiction: Having Doubts and Making Excuses			
		Talk Show: "Quitting Tobacco Use: I've Been There, And It Does Get Better"			
		Conclusion			
<b>Session 5: Quitting- Step 2 Managing Withdrawal Symptoms</b>	Discusses managing physical and psychological withdrawal experiences. This session teaches various coping techniques for withdrawal symptoms. Creating a quit pack, exercise, nutrition and relaxation all help to relieve physical symptoms. Skills such as self-forgiveness, avoiding unrealistic expectations and coping all help relieve psychological symptoms.	Warm-Up			
		Addiction			
		Nicotine			
		Strategies for Managing Physical Symptoms			
		Detox			
		Nutrition			
		Relaxation			

		Strategies for Managing Psychological Symptoms			
		Coping Worksheet			
		Conclusion			
<b>Session 6: Taking Care of a Healthy Body</b>	Session 6 instructs ways to avoid gaining weight after quitting and teaches some yoga-based movements which may help relieve withdrawal symptoms. Yoga also may help maintain a sense of focus after quitting tobacco use.	Warm-Up			
		Weight Gain			
		Yoga			
		Conclusion			
<b>Session 7: Taking Care of Your Peace of Mind</b>	Session 7 teaches the difference between passive, aggressive, and assertive communication. Instructs ways to handle anger and deal with arguments. Also teaches using meditation as a tool to cope with the challenge of quitting in an activity called "letting feelings pass."	Warm-Up			
		Assertiveness Training			
		Anger Management			
		"Letting Feelings Pass" Activity			
		Conclusion			
<b>Session 8:</b>	Session 8 stresses that quitting smoking when you are younger is	Warm-Up			
		Use of Withdrawal Strategies			

<b>Avoiding Relapse</b>	easier both physically and psychologically. The session teaches how to make changes in your life to avoid relapse.	Talk Show: "Warning: Waiting to Quit Tobacco Use May Be Hazardous to Your Peace of Mind"			
		Maintenance			
		Application to Other Drugs			
		Personal Re-Commitment			
		Conclusion			
		Post-Test Survey			

**Adapted from**  
 University of Southern California. (2021). Project EX Teacher Manual. <https://projectex.usc.edu/>  
 James Madison University Center for Assessment & Research Studies. Retrieved from <https://www.jmu.edu/assessment/sass/AC-step-four.shtml>



# IYD (Integrative Youth Development)

Instructor's Name: \_\_\_\_\_  
 Quarter: \_\_\_\_\_

Observer: \_\_\_\_\_

Observation Date: \_\_\_\_\_  
 Agency/Provider: \_\_\_\_\_

Unit	Purpose/Learning Objectives	Title	Activities	Adherence (Yes/No)	Participant Engagement (Scale 1-5) 1 highly engaged 5 highly disengaged	Comments on Facilitation	Comments/ Observations (Content)
Session 1: Intro to IYD	Youth have a greater understanding of themselves and why adults want to protect and support them.	Introductions/ Opening Connecting Activity. Getting to know ourselves and one another	What am I great at? Backup question: What have I heard others say that I am good at?		1 2 3 4 5		
		In this course we are searchers of strengths, rather than identifiers and labelers of weakness.	Arm Cross Activity		1 2 3 4 5		
		To protect, filter and Launch: Our Web of Support 101- Foundational overview of why we need it. To protect us enough to take risks, so that if things don't work out, we don't fall all the way to the floor. To Filter out the hurt and grime in the world, and to keep us moving higher, so we can see farther.	Mentimeter: What do all these crazy adults want to protect us from? Youth identify issues adults want to protect them from.		1 2 3 4 5		
			Mentimeter Survey: What do they want for us? Youth identify what adults want for them. Could also be "what do youth think that adults expect of them?" What do we (youth) expect of ourselves? Two lists? Is there a gap?		1 2 3 4 5		
			"The Napkin Talk" Overview of IYD framework, PHactors and measures.		1 2 3 4 5		
		Teaching What we've learned	Pair groups-Teaching the napkin talk		1 2 3 4 5		
Debrief Activity	Discussion		1 2 3 4 5				
Session 2: RED the Rule of 5: Identifying Anchors for our web of support	Youth have an practical knowledge and understanding of where and who protective factors and learning supports come from as well as the actions and characteristics of the adults they want as Anchors in their web of support	Connecting Activity			1 2 3 4 5		
		What is an anchor? Who are they and what do they do?	Silhouettes/Hand print		1 2 3 4 5		
		Where do I find Anchors?	Adults I know (Circle/Star) worksheet. Anchor Statement Cards		1 2 3 4 5		
		Characteristics of my Anchors	Using Silhouette and worksheet connect your anchors with their specific actions and characteristics that make them part of your web.		1 2 3 4 5		
Debrief Activity			1 2 3 4 5				
Session 3: Orange/Yellow Tangible & Intangible Strings we catch from our Anchors	Youth Gain a deeper understanding of the supports (strings) in our web, where/who we catch them from.	Connecting Activity			1 2 3 4 5		
		The strings of Our Web of Support	What do you already know you need to survive, strive, and thrive?		1 2 3 4 5		
			String Cards sorting small group		1 2 3 4 5		
		Who is throwing what strings?	catching Strings worksheet		1 2 3 4 5		
		Improving my Catch	Care for, there for, near to, tight with		1 2 3 4 5		
		String Phit	How do we know when to hold it, how long to hold it?		1 2 3 4 5		
Debrief Activity			1 2 3 4 5				



Session 4: Green-The talents and Strengths that help us connect to our Web	Youth gain a deeper understanding of their innate resiliency, factors that impact it and its influence our relationships, decision making and thriving	Connecting Activity		1 2 3 4 5		
				1 2 3 4 5		
		Why we struggle and recover differently than our friends	Mentimeter poll		1 2 3 4 5	
					1 2 3 4 5	
		Discovering our Balloons- How much stickiness (resiliency) do we have?	The Balloon Walk and discussion - bigger balloons are "stickier" more likely to stay on top of any web that they have.		1 2 3 4 5	
		Sinkers- What has happened to us that makes us feel heavy - doesn't change our size, but weighs us down.	Sinkers (ACE) survey and debrief		1 2 3 4 5	
	Debrief Activity			1 2 3 4 5		
Session 5: Blue: Scissors Cuts- What Actions & Attitudes that can erode our Web	Youth gain a deeper understanding of the actions and attitudes that create barriers to connection and cut the strings in our web.	Connecting Activity		1 2 3 4 5		
		Understanding what actions and attitudes cut the strings of our web	In my control/Out of my control worksheet		1 2 3 4 5	
					1 2 3 4 5	
		Creating Your Patch Kit - I have always wanted to talk about Kintsugi with kids...	What can we do to reweave after cuts have been made to our web?		1 2 3 4 5	
	Debrief Activity			1 2 3 4 5		
Session 6 : Indigo Caring for the Carers-The Web beneath your Anchors	Youth gain a deeper understanding of the existence and importance of the web of support under each of the adults in their life and how they can contribute to its vibrancy	Connecting Activity		1 2 3 4 5		
		Supporting the Webs under our Anchors	Gratitude Checklist - and the stresses that our Anchors feel and experience - empathy - using Holmes and Rahe scale.		1 2 3 4 5	
		Win-Win Work Our happiness increases together	Soul Pancake Video		1 2 3 4 5	
		Gratitude Practice	CHAT with your Anchors-		1 2 3 4 5	
			Gratefulness cards - Short notes -		1 2 3 4 5	
	Debrief Activity			1 2 3 4 5		
Session 7: Violet Social Norms-The Climate and Culture impacts on our Web	Youth gain a deeper understanding of the social norms that impact the entirety of their web of support , how it filters the negative influences of harmful social norms and their own power to influence social norms	Connecting Activity		1 2 3 4 5		
		Understanding Social Norms and how they influence our decisions and perceptions	Social Circles Activity -		1 2 3 4 5	
		The Power of my web to change and filter Social Norms	How to start a movement Ted Talk- Derek Sivers		1 2 3 4 5	
	Debrief Activity			1 2 3 4 5		
Session 8: Closing Activities and Practice	Youth have the opportunity to practice what they have learned, gain confidence in sharing it with caring adults (potential anchors) and set goals for growing their web of support	Connecting Activity		1 2 3 4 5		
		Sharing the Web Story with my Anchors	Napkin Talk revisit		1 2 3 4 5	
					1 2 3 4 5	
		Keep On Growing = thickening your web, growing your balloon, expanding your web, and rising higher, like the eskimo blanket toss, on top of your web. Using it as a launch pad.	Reviewing our next steps & staying connected, blanket toss video		1 2 3 4 5	
	Evaluation Survey			1 2 3 4 5		
	Closing Activity			1 2 3 4 5		