

Prevention Works If...

By Crystal Collier, LPC-S

Crystal Collier, PhD, herself a person in long-term recovery, is a therapist, prevention researcher, and educator whose comprehensive prevention model, which teaches the neurodevelopmental effects of risky behavior to students, school staff, and families, was selected for the Prevention and Education Commendation from the National Council on Alcoholism and Drug Dependence. Dr. Collier wrote and created The NeuroWhereAbouts Guide and www.knowyourneuro.org to assist school and families prevent and treat youth high-risk behavior.

Over sixty years of prevention science literature informs us that prevention works. However, the formula for long-term effectiveness seems to elude many school systems. Program costs, training resources, and the attrition of trained staff stand as obstacles in the way of sustaining program effects.

Creating a prevention message and embedding it into a school's culture will transcend these obstacles, but the message must be simple, adopted by everyone who teaches in the system, and consistently repeated. The message: Engaging in high-risk behavior harms brain development. The formula: consistent, comprehensive, system-wide programming. Preventing students from engaging in substance use or other high-risk behavior involves a consistent, systemic approach that teaches the neurodevelopmental effects of high-risk behavior.

The first component is consistency. No matter what the message is or what the program does, it must be consistent. Children's brains develop and change every few months as they learn and develop. To be absorbed and adopted into a child's worldview, prevention messaging needs to keep up with neurodevelopment. The effects of even the most wonderful, impactful prevention program will wane if the underlying message and call to action go unrepeated.

After participating in a prevention activity, if it resonates with them, students may talk about, adopt new ideas, and try on healthy behaviors for about sixty to ninety days after the event. If the message and behavior change go unreinforced by school staff and family, the impact will subside. Thus, programming must, at minimum, be delivered at least every other month. For the strongest prevention effect, weekly delivery is best.

The second component is a systemic approach. This means framing the school system as the target audience, not just the students. Imagine a child surrounded by their teachers, family, school administrators, and community. Those components make up a

school system. Prevention messaging must be delivered to, heard, and seen by all. It is wonderful when a child hears an impactful prevention message that they agree with.

However, if that message is different from what they hear their peers, family, friend's parents, billboard ads, and media images say, the impact wanes or goes unheeded. The truth is that seventy percent of the global population does not drink alcohol, but in the US, that number is fifty percent.

The message that it is okay to use a toxin like alcohol is widely heard and approved of in our culture, as are many other high-risk substances and behaviors. The impact of these competing messages loses significance and appeal if youth hear prevention messaging from multiple sources within their sphere of life, such as from teachers, parents, and peers.

The last component of effective prevention programming is comprehensiveness. This means that prevention programming must target everyone in a system including the individuals who make poor choices. Up to fifteen percent of students in US high schools meet criteria for substance dependence before leaving high school. Schools spend most of their counseling and discipline support budget on this group.

Regardless of this group's protective or risk factors, they are a part of the greater system, including most students who do not engage in high-risk behavior. Unfortunately, that majority is usually silent. Thus, a comprehensive approach giving voice to the majority of students who make healthy choices and targeting all tiers (universal, selective, indicated) is vital to yielding large changes and prosocial norm establishment.

The days of watching confusing public service announcements likening fried eggs to brains are over, replaced with innovative, state-of-the-art fMRI research depicting exactly how high-risk behavior affects the brain. Seeing these images is meaningful to children, but the effect will most certainly fade unless they see it consistently in a way that developmentally fits.

Most people believe students are too young to hear information about high-risk behavior or to understand the neurodevelopment effects of it. Even kindergartners understand and love learning about their brain. If schools commit to teaching them how to protect and grow strong brains every school year, students will make healthier, long-term choices.

Today, the need for programming that spans a child's brain development is an essential priority as the internet allows unrestricted access and exposure to drugs, unhealthy images, pro-substance messages, high-risk behavior marketing campaigns, and

influencers who push products that damage neurodevelopment, mental health, and well-being.

For more information regarding creating effective prevention, please contact Dr. Collier at crystal@drcrystalcollier.com.