

Curriculum Based Support Group Program Brief FY 2018-2019



Livingston COMMUNITY PREVENTION Project
"Supporting community health and wellness"

Logistics:

The Livingston Community Prevention Project (LCPP)

consists of three partner agencies that collaborate to provide substance abuse prevention services in Livingston County. The collaborative partners are Karen Bergbower & Associates, Key Development Center, Inc., and Livingston County Catholic Charities. The LCPP provides prevention services to students, parents, schools and the community. The primary focus areas the LCPP targets are: (1) lack of perceived risk of alcohol, (2) lack of perceived risk of prescription medication, and (3) reducing illicit drug use.

In agreement with the Livingston County Community Alliance (LCCA) and other prevention partners, the LCPP selected schools in Pinckney, Howell, Whitmore Lake and Hartland Districts to launch prevention services in the early grades with the national, evidence-based Curriculum Based Support Group (CBSG) model.

Additional partners included parents and school administrators who enthusiastically embraced the concept of early intervention services in the lower grades and the LCCA recognized this model as a pivotal accomplishment in their prevention agenda.

Primary Problem, and Associated Intervening Variables:

Offering prevention programming to the vulnerable children in grades 4, 5 and 6 was possible only by identifying an evidence-based model designed to reach these younger children. The current model, Project SUCCESS, was not validated for use with the younger grades. After several years of discussion and investigating appropriate models, the CBSG model was selected and national training acquired.

The CMHPSM Priority Areas, Problems and Intervening Variables are:

CMHPSM Priority Area 1: Reducing Childhood and Underage Drinking

- a) Primary Problem: Early aggression, academic failure, school dropout
- b) Intervening Variables: Lack of perceived risk of alcohol

CMHPSM Priority Area 2: Reducing Prescription and Over the Counter Abuse/Misuse

- a) Primary Problem: Early aggression, academic failure. School dropout
- b) Intervening Variables: Lack of perceived risk of prescription medication

CMHPSM Priority Area 3: Reducing Illicit Drug Use

- a) Primary Problem: Early aggression, academic failure, school dropout
- b) Intervening Variables: Lack of perceived risks of illicit drugs

Evidence Based Intervention and CSAP Strategies:

The CBSG (Curriculum Based Support Groups) program has been implemented in Livingston County's elementary schools since 2015.

The CBSG facilitators primarily work with elementary level students, grade levels fourth, fifth and sixth in small group settings within the school. CBSG facilitators work collaboratively with school staff to refer students who need additional services to school counselors, or can provide them with additional resources that may be helpful. The CBSG program is a support group intervention designed to increase resiliency and reduce risk factors among children and youth ages 4-17 who are identified as being at elevated risk for early substance use and future delinquency and violence (e.g., they are living in adverse family situations, displaying observable gaps in coping and social skills, or displaying early indicators of antisocial attitudes and behaviors).

Based on cognitive-behavioral and competence-enhancement models of prevention, the CBSG Program teaches essential life skills and offers emotional support to help children and youth cope with difficult family situations; resist peer pressure; set and achieve goals; refuse alcohol, tobacco, and other drugs; and reduce antisocial attitudes and rebellious behavior. Delivered in 12 weekly, 1-hour support group sessions, the curriculum addresses topics such as self-concept, anger and other feelings, dreams and goal setting, healthy choices, friends, peer pressure, life challenges, family chemical dependency, and making a public commitment to staying drug free and true to life goals. Lesson content and objectives are essentially the same for all participants but are tailored for age and developmental status.



CBSG trained implementers use information disbursement, prevention and intervention education, and problem identification as the Center for Substance Abuse Prevention (CSAP) intervention strategies.

Outcomes/Results:

NREPP measured outcomes for CBSG included antisocial attitudes, rebellious behavior, attitudes and intentions about substance us, and substance use. An overall rating of 3.7 on a scale of 4 applied to each of the four outcomes criteria in the research.

In accordance with the evidence-based CBSG model, the LCPP slated as its single outcome an increased pre/post test score or a 32 on a 10 item scale extracted from the Individual Protective Factors Index (IPFI, Springer & Phillips, 1977). Participants will demonstrate they maintain or improve their anti-substance-abuse attitudes and intentions via improved scores between pre and post tests or a minimum score of 32 on both tests. The improved score meets the criteria for the model's inclusion on SAMHSA's National Registry of Evidence-based Programs and Practices.

In 2018-19, CBSG was offered in Navigator (Pinckney), Hutchings, Three Fires, Southwest and Voyager (Howell), Farms, Creekside and Village (Hartland) and Whitmore Lake School District. Two

hundred and twenty-three students were referred to the groups and one hundred seventy-three completed the 12-week group. One hundred fifty-nine students completed both pre and post tests. The projected and achieved outcomes in Priority Areas are:

Priority Area 1: Lack of Perceived Risk of Alcohol

- Eighty-seven percent of students who completed the program maintained or improved their “non-use attitudes toward alcohol and other drugs” as indicated by comparison of their post-survey scores against their pre-survey scores or a minimum score of 32 on both pre and post surveys. (ACTUAL ACHIEVED OUTCOME: 90%)

Priority Area 2: Lack of Perceived Risk of Prescription Medication

- Eighty-seven percent of students who completed the program maintained or improved their “non-use attitudes toward alcohol and other drugs” as indicated by comparison of their post-survey score against their pre-survey scores or a minimum score of 32 on both pre and post surveys. (ACTUAL ACHIEVED OUTCOME: 90%)

Priority Area 3: Reducing Illicit Drug Use

- Eighty-seven percent of students who completed the program maintained or improved their “non-use attitudes toward alcohol and other drugs” as indicated by comparison of their post-survey score against their pre-survey scores or a minimum score of 32 on both pre and post surveys. (ACTUAL ACHIEVED OUTCOME: 90%)

Following is a Victory Story shared by a CBSG Group Facilitator:

“The Kid’s Connection’s Curriculum Based Support Group has been proven to be evidence-based as well as effective. To read that in the book is one thing and to experience it is another. At one of my schools I had a group comprised of several students suffering from trauma that affects their emotional regulation skills. One child in particular stood out to me, this child was one that the principle educated me on prior to group. On the first day of group he shared with me in his own words, his difficulty understanding and processing his emotions; yet, this child was so eager to learn and participate. After our session topics of emotions and handling anger, this same 4th grade boy shared with me how he had tried to practice the things we learned and talked about when he was upset or angry. I thought to myself, how awesome is it that this child is practicing the skills that I am teaching. The really cool thing is that he had also extended these lessons to another student in need. The principle pulled me aside one day to show me a short video clip he had recorded in secrecy. A new student of the school was having a very difficult time adjusting, throwing tantrums, and acting out with anger. The student in my group had found the new student during one of these episodes and took it upon himself to console him. In this video you could see their 2 sets of feet and only hear what was being said. While sitting there against the wall my student was teaching the new student that it was okay for him to feel the way he did but there were different ways that he could be expressing these feelings. He shared with him some of the tools his group had come up with to help ourselves when we are feeling sad, drawing, taking a walk, deep breathing, writing letters, etc. and went on to teach him the acronym SIT, that he learned the previous week. To stop when we feel like we are getting angry, then to identify what is it we are actually feeling, and lastly to take action in a healthy positive way. It was so

powerful to hear this 9-year-old boy who was struggling himself, teach another child the skills that CBSG had taught him."

The LCPP intends to continue offering CBSG in the lower grade levels. Facilitators, students, school administrators, and prevention advocates throughout the county are delighted with the CBSG curriculum and the students' reaction to it. We look forward to continued use of the model in Livingston County's and Whitmore Lake's prevention efforts.

