



A grayscale photograph of a person wearing a plaid shirt, with their hand pressed against their chest in a gesture of sincerity or emotional connection. The image is faded and serves as a background for the text.

## **OUR MISSION**

**To carry the message of hope to individuals, families, and communities affected by the disease of addiction.**

In this session participants will learn about the  
Overdose Lifeline (ODL), socio-ecological  
approach to prevention of substance (opioids)  
misuse amongst adolescents.

Overdose Lifeline acknowledges the entanglement of personal, interpersonal, institutional, and community relationships have on finding solutions to the public health crisis.

ODL's approach facilitates the opportunity to create equal understanding of the issues generated with substance misuse across individuals, organizations, and community stakeholders.

So that this understanding can fuel honest and candid conversations to reduce stigma, barriers, and facilitate opportunities for recovery.

# Approach: Socio-Ecological Model



A socio-ecological model (SEM) allows us to approach prevention education using a lens that looks at the complex interplay between individuals and their environment.

This model highlights the importance of working with parents, communities, and beyond to confront the opioid public health crisis.



Learn how to implement the ODL approach and  
the research and evidence behind the  
program's effectiveness.



The ODL program provides education,  
programming, tools and resources to three levels;  
Individual – Youth Level, School  
Staff/Organizational, and Parents &  
Caregivers/Interpersonal

A black and white photograph showing the profile of a young woman with long, light-colored hair. She is looking down and to the right, with her face partially obscured by her hair. The background is dark and out of focus.

# Youth / Young Adults





Photo by Alexis Brown on Unsplash

The Center of Disease Control recognizes young adults, ages 18-24, as **the most at-risk group**, reporting heroin use has more than doubled among this age group in the past decade. Between 1999 and 2020, 78,388 (aged 15-24) youth have lost their lives to a drug overdose.

## Ages 18-24 the Most At-Risk Group

Source: "Vital Signs." Centers for Disease Control and Prevention. 7 July 2015, [www.cdc.gov/vitalsigns/heroin/index.html](http://www.cdc.gov/vitalsigns/heroin/index.html).



With a reported 80% of heroin users beginning with the nonmedical use of opioids, there is a significant need to enhance our youth's knowledge of substance use and misuse.

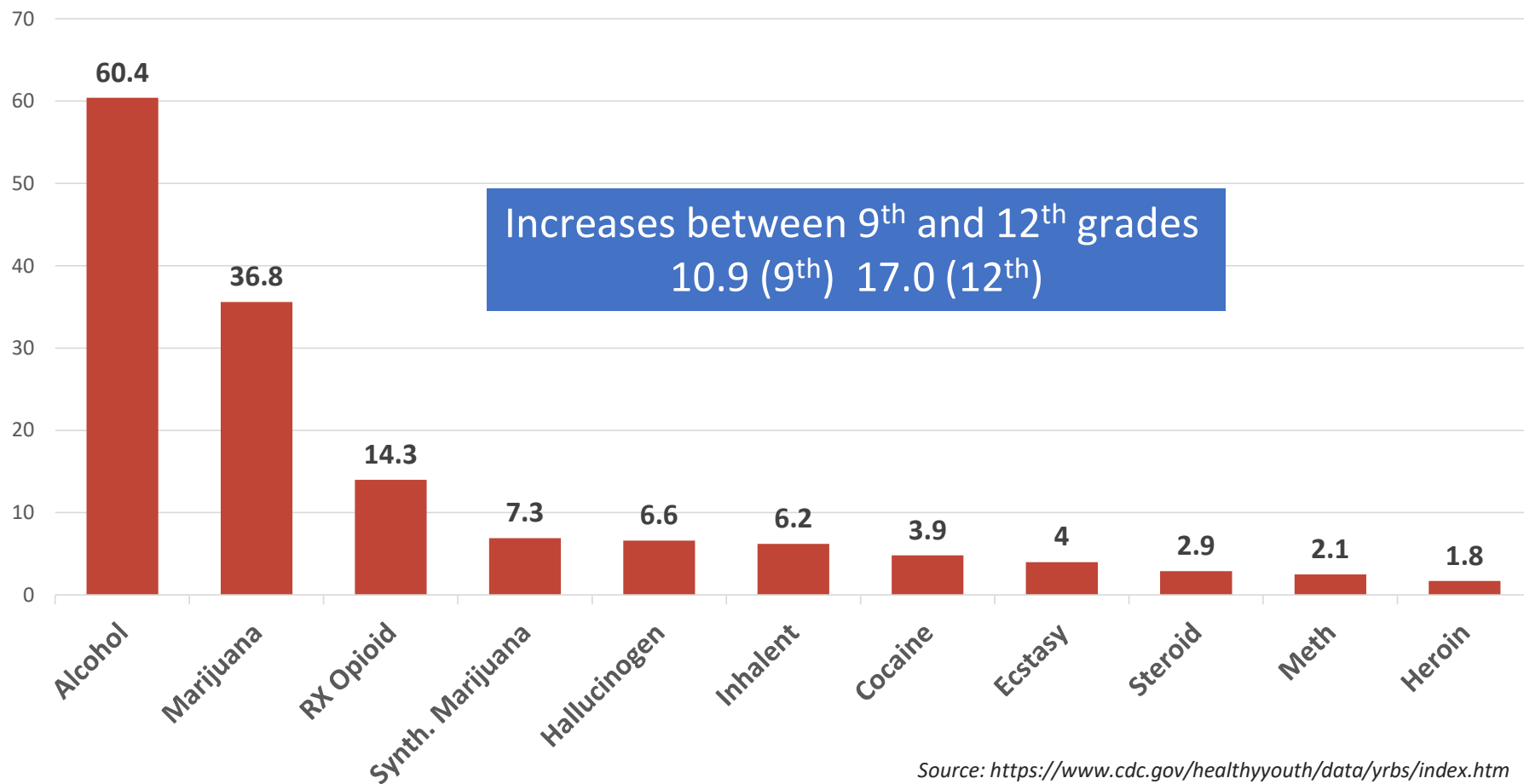
**Early intervention strategies are imperative in turning the tide of this epidemic.**



*Source: Jones CM. Heroin use and heroin use risk behaviors among nonmedical users of prescription opioid pain relievers - United States, 2002-2004 and 2008-2010. Drug Alcohol Depend. 2013;132(1-2):95-100.*



# 2019 Youth Risk Behavior Surveillance System (YRBSS)



Source: <https://www.cdc.gov/healthyyouth/data/yrbs/index.htm>





# Young adults / youth

**15**

**Age of First  
Misuse**

**Perception: Low Risk  
Misuse of RX Pills - Socially  
Accepted w/ Peers  
Get from Family/ Friends  
Medicine Cabinets**

*Source CDC Drug Overdose Death Data - Opioids*



## **Why is it important to talk to youth about opioid risks?**

*Opioids are highly addictive. Unlike other substances, there is an immediate risk of an overdose with opioid misuse. Few students are aware of this risk and 14% report use of nonprescribed pain medication.*

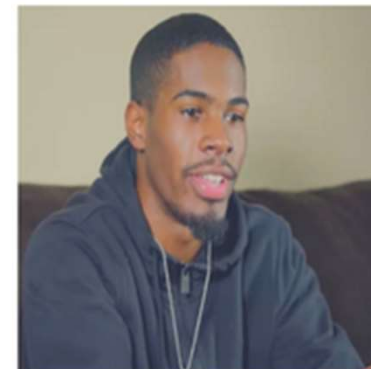
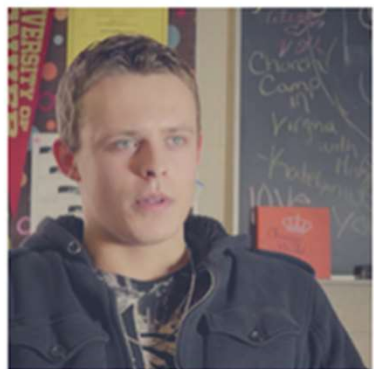
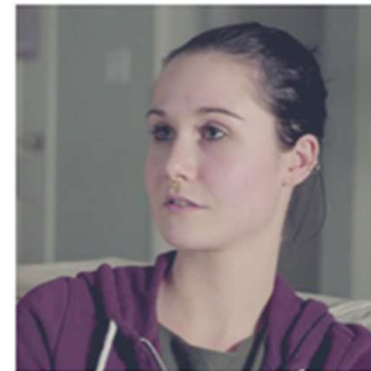
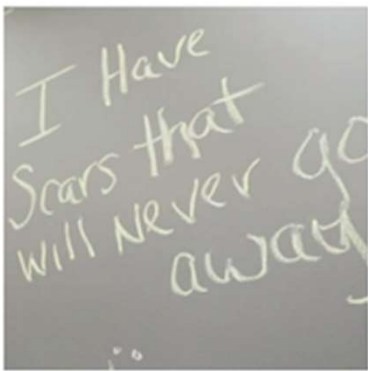
*This education is critical — it's lifesaving.*

*Source CDC YRBSS 2017 Survey*





# OverdoseLifeline





# This is (Not) About Drugs

An outcome-driven, science-based program designed to raise awareness to substance misuse, with a special emphasis on prescription opioids. The program incorporates NIDA principles, risk and protective factors and is designed to fit within school time constraints and aligns with the most common health curriculums.

The program follows an efficacy-based model of design with continuous measurement and improvement.



# This is (Not) About Drugs

Takes a peer-to-peer approach and makes use of personal stories to educate and influence the decisions – or choices – someone makes about their own body and health.

Choices are the theme of the program and behind the program title – This is (Not) About Drugs.



# Learning Objectives

After completing the lesson, youth will...

1. The risks of prescription pain drug misuse.
2. How misuse can lead to addiction, heroin use, overdose, and death.
3. Recognize opioid overdose symptoms, availability of naloxone, and necessity to call 911.
4. Understand the disease of addiction and the impact on the individual and the family and friends.
5. Alternatives to using substances in dealing with life stresses.
6. The many ways to ask for help and available information and resources.



# Quasi-Experimental Evaluation

The program completed a quasi-experimental evaluation by researchers from the Indiana University Public Policy Institute.

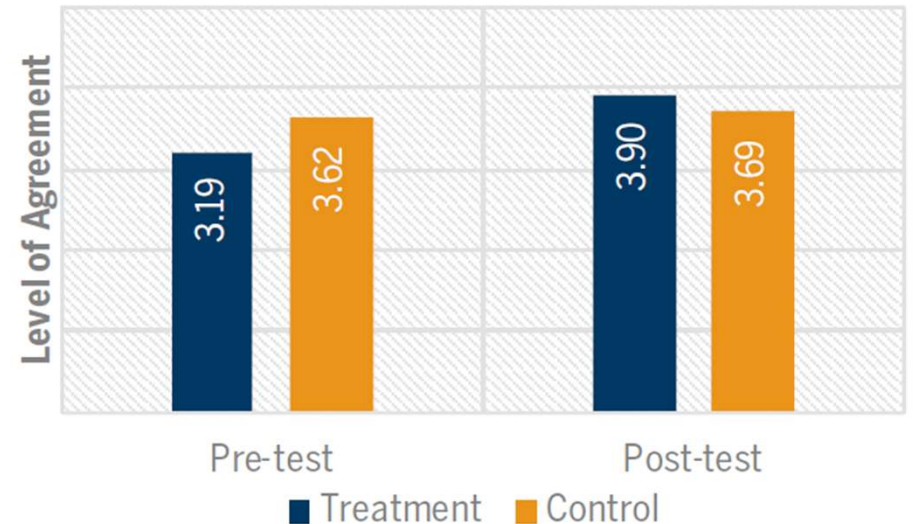
Students in treatment schools completed a survey before program implementation (pre-test) and post-program (post-test). The post-test was conducted 90-days after the program delivery. In control schools, the program was delivered following the post-test.



# Evaluation - Key Findings

Students in the treatment group were ***significantly*** more likely to understand the similarity between heroin and prescription pain pills

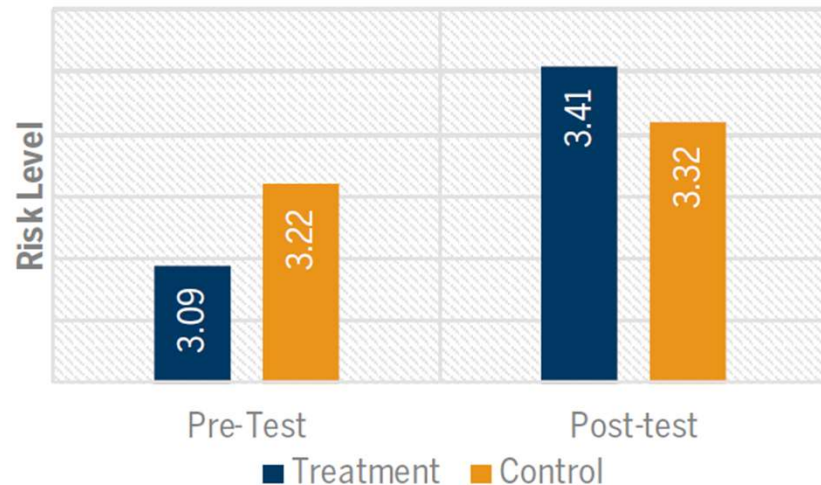
**FIGURE 2.** Prescription pain pills are the same type of drug as heroin\*



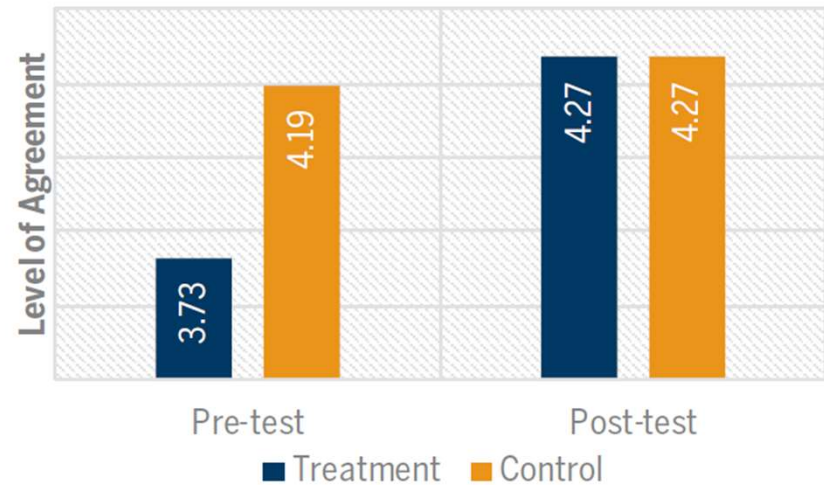
# Evaluation - Key Findings

Students in the treatment group acknowledged *significantly* more risk associated with the **use of unprescribed pain pills** and that it is as **risky as using heroin**

**FIGURE 3. Risks Associated with Unprescribed Prescription Pain Pills\***



**FIGURE 4. Using heroin is just as risky as using unprescribed pain pills\***

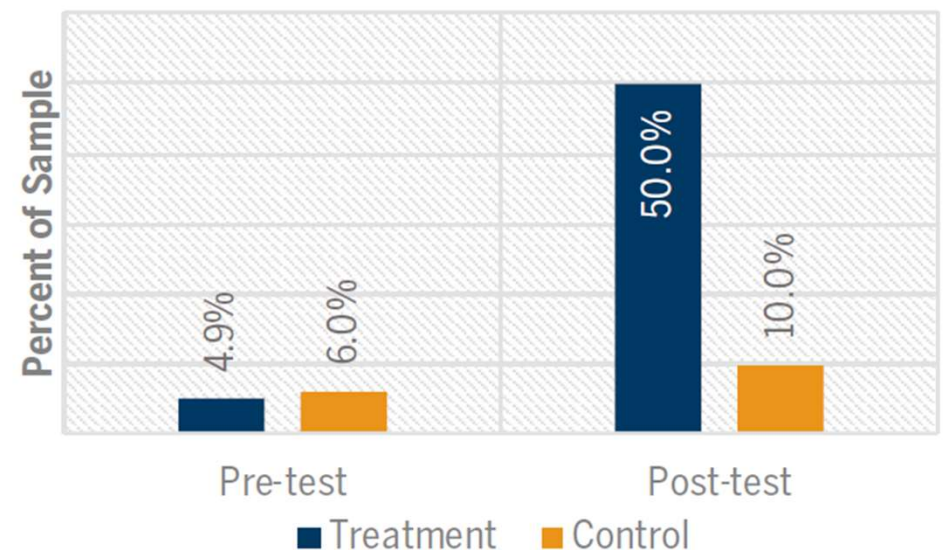


## Evaluation - Key Findings

Students in treatment group were ***significantly*** more knowledgeable about naloxone and its purpose

Students in the treatment group demonstrated a ***slight, non-significant*** ability to recognize an overdose

**FIGURE 5.** Understands the Purpose of Naloxone\*

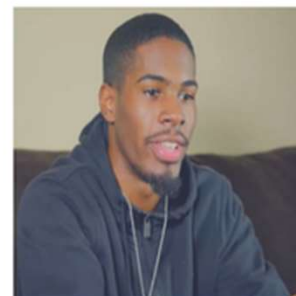
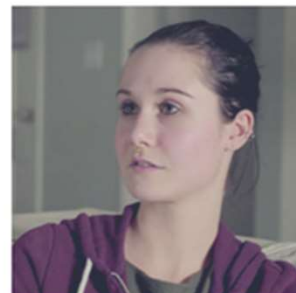
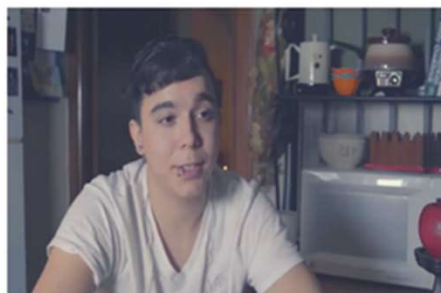
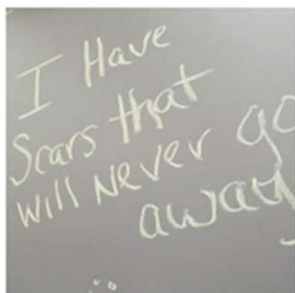






## The “This is (Not) About Drugs” film

Watch the film: [Overdose-Lifeline.org/choice](https://Overdose-Lifeline.org/choice)





**Specifically Addresses the National Opioid Health Crisis**

**Designed to Prevent the First Misuse**

**Complements EBP Programs | Does NOT Replace**

**Targets Grades 6 – 12, Prioritize Transitional Years**

**Schools | Youth Groups | Scout Programs | Athletic Teams**



# Universal Program

**Fits 45 Minutes Classroom Schedule | Ability to Expand**

**Classroom/Small Group Recommended**

**Pre-Post Student Survey } 3<sup>rd</sup> Party Study**

**Companion Parent | Educator | Adult Programs**





# Selective Youth Prevention Program

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[OverdoseLifeline.org](https://OverdoseLifeline.org)



PART 4  
**weighing your options**

You can make the right choices for yourself by considering the pros and cons and short- and long-term consequences of a particular behavior.

***With no pre-existing condition, there is a low risk of addiction/substance use disorder; therefore investment is best in programs that identify & serve at-risk youth***

**decision box**

A decision box is a helpful tool to make good decisions. There are four squares to be filled in. You may tend to focus on what you think will be positive results in the short term. But there are 3 other squares to consider.

	SHORT TERM
positive CONSEQUENCES	
negative CONSEQUENCES	



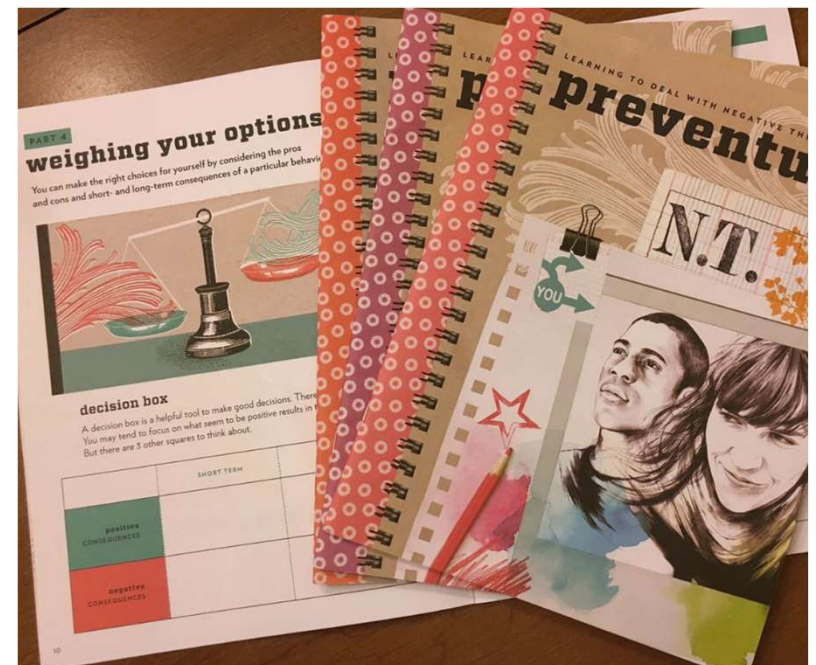
# Preventure Personality Targeted - Selective EBP

Developed by Patricia Conrod, PhD, University of Montreal

An evidence-based program which takes a personality-targeted approach to adolescent substance use prevention.

The program content was developed to target personality types found to be at highest risk for substance misuse.

Preventure includes a Substance Use Risk Profile Scale (SURPS) assessment and two, 90-minutes workshops for students with high SURPS indicators across four (4) personality types.



Information: [overdose-lifeline.org/preventure](https://overdose-lifeline.org/preventure)





# Four (4) Key Personalities Target



**Sensation Seeking  
(SS)**



**Impulsivity  
Anti-sociality  
(IMP)**



**Anxiety Sensitivity  
(AS)**



**Negative Thinking  
Hopelessness  
Depression Proneness  
(NT)**



*"Three of the four personality traits identified by Preventure are linked to mental health issues, a critical risk factor for addiction."*

— Szalavitz, M. (2016 Sept 29). The 4 Traits That Put Kids at Risk for Addiction. [nytimes.com](https://www.nytimes.com)

*"Personality testing can identify 90 percent of the highest risk children before their risky traits cause problems." — Wagele, E. (2016 Nov 15). "Preventure"*

— A Program for Fighting Teen Addiction. [psychologytoday.com](https://www.psychologytoday.com)



# **Brief, coping skills interventions targeting personality risk factors have been tested in randomized controlled trials, showing benefits that last for up to two years.**

This drug and alcohol prevention program has been shown to

- Reduce drinking rates by 40-60 %
- Reduce binge drinking rates alcohol use by 50 %
- Delay onset of drinking and binge drinking
- Reduce illicit drug use rates by 30-80 %
- Reduce risk for alcohol-related problems
- Reduce risk for other mental health problems such as Anxiety, Depression and Conduct Problems





# Implementation – Screening

Screen all grade-level students - Substance Use Risk Profile Scale (SURPS)

- 23 questions
- Developed using a myriad of personality or symptom inventories
- Validated in substance users and adolescents/adults from US, Canada and UK
- Translated: French, German, Spanish, Czech, Dutch, Cantonese, Japanese, Sri Lankan



# Implementation – Group Session

Students are identified for risk personality they scored highest in

Attend 2-4 group sessions, depending on time constraints

- Facilitate through personality workbook, at least one week apart once at halfway point
- In total, 4 different groups, specific to one of the four personality types



# Group Sessions



Lead by formally  
trained facilitator

Background in social work,  
psychology, or working with at  
risk youth  
Found still effective using school  
staff



Small groups of peers, typically ~4-10  
students



Structured using  
student workbook

Special facilitator guide  
Every student receives a  
workbook to take home and  
keep



Utilize Cognitive Behavioral Therapy (CBT)  
and Motivational Interviewing (MI)  
techniques

# Process Evaluation Findings

- Preliminary process evaluation report completed December 2018
- Facilitators report high confidence in ability to deliver program, and all met high-fidelity standards in delivery
- Schools preferred the brief nature of the program, and believe the program is feasible to incorporate into school prevention
- High uptake of the program may be an indicator of program's feasibility
- Posed challenges to school implementation include time + school staff for program, prefer community partner delivering

# Training Process

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# This is (Not) About Drugs

**Presenter Registration:** Access to program materials

**STEP 1: Prerequisite online courses:** *The Brain and the Disease of Addiction* – 1.5 hours and *The Opioid Public Health Crisis* – 1.5 hours

**STEP 2: Program Training:** 90 minutes online. Review key points from prerequisite training, Program Training (design, objectives and measures, toolset, and materials)

**STEP 3:** Presenter Self-Study and Practice

**STEP 4:** Coaching and Post-Training Technical Support

**STEP 5:** Trainee submission of two (2) implementations for review/feedback

# Preventure

**Presenter Registration:** Access to program materials

**STEP 1:** Program on-site training. Day one and two classroom instruction.

**STEP 2:** Fidelity supervision (optional)

Trainees implementing Preventure with youth with ODL supervision.

**Recommended:** High fidelity supervision (highest certification)



# Adult Populations







# Opioid Training and Continuing Education

Level up your prevention efforts with our online courses

Laypersons, Clinicians, and Law Enforcement



# Overdose Lifeline Training Courses & Programs

Overdose Lifeline has worked with subject matter experts to develop effective, evidence-informed adult training courses and programs addressing the opioid health crisis and addiction / substance use disorder.

Available for **individual learning and continuing education** or as **trainer programs** that allow a trainer to deliver within their local community(ies).

**Visit:** [OverdoseLifeline.org/Training](https://OverdoseLifeline.org/Training)

Continuing Education

OPTIONS

Trainer Programs



These training courses and programs are designed for individuals, educators, employers, healthcare professionals, parents and caregivers and groups and organizations who are working to prevent and reduce the effects of the opioid public health crisis and educate and raise awareness of addiction/substance use disorder.

When deployed across a community, or state, it results in all key stakeholders carrying the same awareness and knowledge level and improves cross-channel collaboration and results.



# Overdose Lifeline Continuing Education Training Options

The Overdose Lifeline courses are accessible via three options: Online self-paced courses, on-site training, and live web training settings. Participants will receive a certificate of completion for continuing education credit.



Self-Paced Online Courses



On-Site Training



Live Web Training

# Trainer Programs

Trainer programs are available for each of the Overdose Lifeline courses. To earn trainer designation, individuals complete one or more pre-requisite(s) courses and program training via the web.

Trainer Resource Centers include: Presentation, Full Script, Resources, Attendee Surveys, Hand-outs, Certificates and more.

Materials provided via the Trainer Resource Center allows program delivery via on-site or webinar settings.

**See Individual Program Information and Pricing:**

[OverdoseLifeline.org/Training](https://OverdoseLifeline.org/Training)

# Opioid Training and Continuing Education

- Online courses and 20-Credit Certificate program on Addiction/Substance Use Disorder with an Opioid Specialization
- Nursing, Pharmacy, and Physician CE accreditation through Purdue University
- Meets annual in-service training requirements for Indiana Law Enforcement Officers and support personnel

## Course examples:

- The Opioid Public Health Crisis
- Layperson/First Responder Naloxone Administration
- The Brain and the Disease of Addiction
- Removing the Shame and Stigma of Substance Use Disorder/Addiction
- Guide to Harm Reduction
- Guide to Substance Use Disorder Treatment and Recovery



"This course allowed me to truly understand the science behind the disease, which allowed me to really grasp addiction in terms of a disease rather than a moral failing."

"I developed a better understanding of how illicit drugs affect the brain and why it is so difficult to actually recover."

"I now have a better understanding of efforts the community and I personally can take to help with the opioid and overdose epidemic."





# Educators and Parent Training Solutions

Opportunity to customize the training based upon the needs of the organization, group (parent/caregiver), or community.

Create an active learning opportunity:

Pre- and post-surveys

Practical learning through breakout discussions, connect and shares

Create an action plan with objectives and measures

# Join the 420+ Overdose Lifeline Trainers/Delivery Partners

ACROSS 20 U.S. STATES TRAINED TO DELIVER OVERDOSE LIFELINE PROGRAMS



**Cameron McNeely**  
**Manager of Education**

**[cameron@overdoselifeline.org](mailto:cameron@overdoselifeline.org)**

**[overdoselifeline.org](https://overdoselifeline.org)**





# Questions

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