Partners in Prevention

A **HEALTHCARE FOUNDATION OF LA PORTE** INITIATIVE

EVALUATION YEAR 3

FINAL REPORT

February 2023

HEALTHCARE
FOUNDATION
of LA PORTE

RTI
INTERNATIONAL

CONTENTS

EDC	Education Development Center
HFL	Healthcare Foundation of La Porte
IDOE	Indiana Department of Education
INYS	Indiana Youth Survey
IREAD	Indiana Reading Evaluation and Determination
MTSS	Multitiered system of supports
PiP	*Partners in Prevention*
RTI	RTI International
SEL	Social and emotional learning
TA	Technical assistance

Overview and Objectives

Substance use among youth is a significant public health concern with great opportunity for preventive interventions. According to the 2022 Indiana Youth Survey (INYS), 10.9% of seventh- to 12th-grade students in Indiana reported using alcohol in the past month, 9.4% reported using electronic vaping products, and 6.4% reported using marijuana.[1] A large body of research shows that evidence-based prevention programming, which includes social and emotional learning (SEL) programs, helps students avoid substance use and improve behavioral and academic outcomes. To prevent substance use among youth in La Porte County, Indiana, Healthcare Foundation of La Porte (HFL) launched *Partners in Prevention* in January 2019. This grant initiative helped La Porte County schools implement evidence-based prevention programs. Over the course of 3 years, 11 *Partners in Prevention* grantees provided evidence-based programming to students in pre-K through grade 12 across 38 public and private schools.

Evaluation Overview

HFL worked with RTI International to examine the nature and quality of program implementation and to evaluate the outcomes of *Partners in Prevention* programs for students, teachers, and schools. This work aimed to help improve implementation quality, help stakeholders understand trends in outcomes, and inform future initiatives.

Evaluation Methodology

To evaluate program implementation and outcomes, RTI conducted annual web-based surveys with grant directors (N = 11) and implementers (N = 298 in Year 1; N = 275 in Year 2, and N = 283 in Year 3.) We also conducted interviews with grant directors in Years 1 and 2. To assess trends in student outcomes, RTI analyzed school-level administrative data related to student behavior and achievement from the Indiana Department of Education (IDOE); grantee-collected administrative discipline data and student pretest and posttest data as available from grantees; and INYS student survey data. Finally, we also assessed school and implementer outcomes, including classroom climate and the extent to which *Partners in Prevention* programming was embedded in schools.

Summary of Key Findings and Recommendations

The following presents highlights of what we learned in Year 3 (the final year of implementation), conclusions, and recommendations.

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[1] Prevention Insights, Indiana University. (2022). Indiana Youth Survey 2022 interactive data explorer: Trends over time. https://inys.indiana.edu/data-explorer/trends.php

Implementation

Strengths and Growth

School leadership support stayed strong over the initiative. Leadership at schools continued to be highly supportive of SEL and prevention programming and implementers. Leaders were involved in planning, training, monitoring data, and observations across all 3 years. Strong administrator support is essential for the successful launch and sustainment of this type of initiative.

Overall, implementers reported high levels of enthusiasm for the programs, confidence in their ability to implement them effectively, and a strong belief that SEL and prevention programs benefited their students during all 3 years surveyed.

Program completion increased over time. The percentage of implementers who reported they completed lesson delivery with their students increased each year, indicating students received more programming.

Program oversight increased each year. In Year 3, for the first time, all grantees reported engaging in activities to monitor implementation progress via observations of lessons, implementer self-reports of implementation details, or both.

Positive parental feedback increased each year, and most programs tried to engage parents. In Year 3, 82% of grant directors (nine of 11) reported that parents provided positive feedback about program implementation, a notable increase from 64% in Year 2 and 36% in Year 1.

By the January 2022 survey (Year 3), 73% of grant directors (eight of 11) had communicated with their superintendents about *Partners in Prevention* **program benefits or outcomes** and 60% (six of 10 responding) had communicated with the school board and community agencies or planned to do so.

In Year 3, more grantees reported providing non-implementer school staff and stakeholders with program information than in prior years. Embedding program content into school culture by engaging non-implementing staff and stakeholders strengthens the program's messages and fosters buy-in and understanding among staff and students, which supports improved outcomes.

Partners in Prevention **built the capacity of school systems and schools to implement and monitor SEL and prevention programs.** In Year 1, only 21% of implementers reported having had any experience teaching any programs focused on SEL or the prevention of risk behaviors like substance use; 77% reported participating in training that year. As part of this initiative, HFL also funded technical assistance (TA) for grantees in a wide range of areas intended to build grantees' capacity.

Areas of Ongoing Implementation Challenges and Improvement

Although the participating school systems and their school leadership actively supported prevention programming, grant directors and implementers alike continued to report

challenges finding time to implement *Partners in Prevention* programs. **In Year 3, most implementers (59%) reported that lack of time was sometimes (49%) or often (10%), an issue but fewer implementers reported this as a challenge than in Year 1 (72%).**

In addition to limited time, lack of student engagement continued to be one of the top two barriers to implementation. Although overall student engagement remained strong in Year 3, 61% of implementers reported it was sometimes (47%) or often (14%) an issue. Student engagement was more of a challenge with secondary school students. However, in general, student engagement in school tends to decline from elementary to secondary school.[2] Implementers with more experience teaching the program or teaching in general did not report engagement as a challenge as often as newer implementers.

Staff training is a growing challenge due to implementer turnover. In Year 3, 31% of implementers reported not having received any training—an increase from 21% in Year 2. Nearly 20% of implementers were teaching the program for the first time in Year 3. **Training is important to maintain implementation quality, especially with staff turnover.**

Outcomes

In any evaluation, external factors can make it challenging to determine to what extent the program causes outcomes. During this initiative, the COVID-19 pandemic dramatically affected schools, students, and families. Since the start of the pandemic, children and adolescents have shown sharp increases in psychological distress, including symptoms of depression and anxiety and other mental health disorders, as well as modest increases in impulsivity and irritability.[3] The magnitude of pandemic-related disruptions may have blunted intervention effects. Nonetheless, the evaluation identified positive findings from several data sources.

Implementer and Classroom Outcomes

Many implementers reported that the program benefited them personally. In response to an open-ended survey question, **more than a third of the 148 responding implementers noted the program increased their knowledge of SEL or provided guidance and language for building SEL skills with their students. About one-quarter reported improved relationships with their students, with some commenting that this was the most significant impact of the program.**

Implementers reported improvements in classroom climate over the course of the initiative. Each year, the implementer survey asked teachers a series of questions covering three dimensions of classroom climate: peer relations, student satisfaction with

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[2] Mahatmya, D., Lohman, B. J., Matjasko, J. L., & Farb, A. F. (2012). Engagement across developmental periods. In S. L. Christenson, A. L. Reschly, & C. Wylie (Eds.), *Handbook of research on student engagement* (pp. 45–63). Springer.

[3] Office of the Surgeon General. (2021). *Protecting youth mental health: The U.S. Surgeon General's advisory*. U.S. Department of Health & Human Services. https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf

the class, and difficulty of coursework for students. **All three dimensions of classroom climate significantly improved during** *Partners in Prevention* **implementation.**

Student Outcomes

In Year 1, *Partners in Prevention* programs served 9,375 students; in Year 3, this increased by 40% to 13,099 students served. Implementers reported many positive program effects for their students.

Implementers were asked how strongly they agreed or disagreed with a series of statements about the program's impact on students. The highest percentage of implementers reported that they agreed or strongly agreed that *Partners in Prevention* programming had a positive impact on **students' self-management** (90% for elementary school and 63% for secondary school implementers), followed by **relationship skills** (86% for elementary and 55% for secondary), **social awareness** (83% for elementary and 54% for secondary), **responsible decision-making** (80% for elementary and 54% for secondary), and **understanding the dangers of substance use/misuse** (79% for elementary and 51% for secondary school implementers). In response to an open-ended question about the most significant impact of the program, implementers echoed many of these same outcomes.

Findings from student outcome data. The following summarizes findings for grantee-collected data, the INYS, and IDOE student administrative data.

Students' knowledge of the *Partners in Prevention* **program curriculum increased**. In Years 1 and 2, four or five schools provided data on pretest to posttest scores for curriculum knowledge; average scores increased 16 percentage points in Year 1 and 8 percentage points in Year 2—both marginally statistically significant increases. In Year 3, nine schools provided data, and average scores increased by 8 percentage points, a statistically significant difference ($p < .01$).

For social-emotional skills (e.g., emotional regulation), results were mixed. In Year 1, the five schools providing data showed a non-statistically significant increase in scores. In Years 2 and 3, about half the schools, which used one type of measure, showed a statistically significant increase in scores for social-emotional skills. The other half showed a small decline in scores (not significant in Year 2 and marginally significant in Year 3); this result was affected by one grantee whose schools showed a decrease in average scores pretest to posttest. Even in those schools where scores did not increase, given the increased mental health challenges of students during this time period, it is possible that the interventions helped to buffer further social-emotional declines.

In addition, in Years 1 to 3, three to seven schools provided pretest and posttest scores for students' favorable or unfavorable attitudes toward substance use, a correlate of substance use behavior. **In all 3 years, disapproval of substance use increased slightly at posttest. In Year 3, the difference was marginally statistically significant; students' attitudes about substance use became more negative.**

Grantees also provided non-suspension, non-expulsion discipline data (e.g., office referrals) for their schools for all 3 implementation years. **The overall rate of discipline incidents among high schools (seven schools) decreased between Year 1 and Year 3, which was marginally statistically significant (p < .10).**

During program implementation, 10 *Partners in Prevention* schools also participated in the INYS. **From 2020 to 2022, the percentage of students in grades 6–12 reporting that they consumed alcohol in the past 30 days decreased by about 4 percentage points (from 14.3% to 10.4%), a marginally statistically significant decrease (p < .10). There were non-statistically significant decreases in past-30-day use of unprescribed prescription pain killers, cigarettes, and vaping products.** Note that not all students included in these INYS data received *Partners in Prevention* programming, and we do not have survey data before the start of program implementation.

Analysis of IDOE student administrative data compared pre- to post-intervention outcomes for *Partners in Prevention* schools with those of schools in demographically similar Madison County, Indiana (for IDOE data only, we were able to obtain comparison data for a demographically similar county). *Partners in Prevention* **schools significantly improved on two outcomes in the post-intervention period: rate of excused absences (p < .01), and rate of unexcused absences (p < .10). In addition, comparing the pre- to post-intervention years, outcomes were significantly better for** *Partners in Prevention* **than for schools in Madison County for rate of excused absences (p < .01).** However, *Partners in Prevention* schools showed a significant increase (p < .05) in their retention rates pre- to post-intervention. Other favorable trends in the post-intervention period for the *Partners in Prevention* schools included overall decreases in rates of in-school and out-of-school suspensions, as well as of expulsions, though not statistically significant; these patterns did not significantly differ from trends for the Madison County schools. Trends in multiple outcomes for both *Partners in Prevention* and Madison County students were likely influenced by COVID-19 pandemic disruptions; we do not know what programs and supports students received in Madison County.

Sustainability

As of January 2022, grant directors reported plans to "definitely" continue implementing 12 of the current 19 programs and "maybe" continue with five of the same programs. Grantees planned to replace two programs with a different prevention/SEL program. **None of the grantees reported plans to discontinue providing prevention/SEL programming.**

Of the 12 programs that the grant directors said they would "definitely" continue implementing, **92% reported they would continue outcome data collection and 83% said they would continue program monitoring. For two-thirds of the programs that they definitely planned to continue, grant directors reported they would continue program training for new implementers.**

In the January 2022 survey, among grant directors who responded to an open-ended question about the greatest challenge to sustaining their *Partners in Prevention* program, finding adequate funding and time were the most common challenges listed.

In Year 3, although three grantees obtained additional funding from federal or state agencies, HFL was the sole source of funding for the implementation and administration of *Partners in Prevention* programs for eight grantees. As of January 2022, one grantee made the program(s) a line item in their school corporation, school, or other government entity's budget, and six had firm (one grantee) or tentative (five grantees) plans to do so. **According to HFL grantee reports, by the end of the school year, 10 of the 11 grantees reported having the resources to continue prevention/SEL programming for at least the next school year.**

Conclusions

Partners in Prevention filled a critical void in prevention/SEL programming for students in La Porte County. Although the COVID-19 pandemic disrupted program implementation, participating schools successfully implemented the programs and school leaders and staff reported high support for the programs and positive outcomes for their students and schools. Drawing on several data sources, the evaluation documented many positive findings during the initiative. Grantees have all obtained funding to continue prevention/SEL programs through at least the next school year; some grantees still need to secure longer-term financial support.

Recommendations

It takes time to establish and institutionalize a new program within an organization. **To sustain the strong progress achieved during this initiative, it is critical to have structures of support in place. To continue to build on their successes and further embed and sustain these programs in schools, we recommend that school administrators:**

- **Establish structures to train new implementers on the prevention program(s).** Training and coaching are especially important for new staff to gain program knowledge, master new skills, and feel confident teaching the programs. Continue to offer booster training and other professional development opportunities to further strengthen all implementers' knowledge and skill (e.g., create professional learning communities or other teacher collaboration during a dedicated planning time).

- **Provide structures of support to help teachers make time for lessons, especially because time is a top challenge to implementation.** For example, some grantees focused on integrating prevention/SEL programming with academic instruction. Instructional coaches can support teachers in identifying ways to integrate prevention/SEL programming into academic content areas. Additional options include having set times for the prevention/SEL programming for the whole school, such as during homeroom, study halls, and other non-academic times.

- **Provide teachers with strategies that enhance student engagement with the prevention programs.** For example, they can communicate the benefits of the program and ask students for their perspectives about the program.

- **Provide forums for teachers to share lessons learned and successes about the program with their colleagues, including strategies for engaging students and integrating lessons into content area.** One grantee reported establishing a

district-wide collaborative structure in which teachers worked together to write lessons to enhance daily classroom SEL engagement and growth mindsets.

- **Integrate the prevention/SEL program into schools' multitiered systems of supports (MTSS) to use as a universal approach for all students.** Having an evidence-based universal program and collecting student data on progress and outcomes can help inform targeted or focused interventions for students who may need additional SEL supports.

- **Dedicate the responsibility of ongoing program monitoring and evaluation to a role in the school to help maintain accountability and fidelity.** This role may be the current grant director or others who work directly with teachers, such as an assistant principal, academic coach, or SEL specialist.

- **Grantees should continue to examine implementation and outcome data at regular intervals** and refine their approaches as applicable to continually improve, learn, and share results and success stories with key stakeholders internal and external to the school system.

- **Create stable long-term budget supports.** Stable budget supports provide an important foundation for sustainment. Grantees that do not yet have long-term budget support in place should consider seeking other grants in the behavior/SEL area and integrating prevention/SEL into the current general education budget. Continuing to collect data to show impact and meeting with stakeholders will help position grantees to obtain funding.

Nationally, educators increasingly realize the importance of universal prevention/SEL programs for reducing problem behaviors like substance use and bullying, promoting mental health, fostering positive behavior and school climates, and improving academic outcomes. A 2021 nationally representative survey of educators showed that an overwhelming majority of educators (84%) believe that incorporating SEL programming into the school curriculum has become even more important since the pandemic.[4] An increasing number of secondary school leaders are joining elementary school leaders in focusing on SEL programming.[5]

The need for prevention/SEL programming for elementary through high school is great. This timely *Partners in Prevention* initiative enabled 11 school systems and their 38 schools to establish vital, evidence-based programs for current and future students in La Porte County, Indiana.

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[4] McGraw Hill. (2021). *Social emotional learning report*. https://www.mheducation.com/unitas/school/explore/sel-report-2021.pdf

[5] Prothero, A. (2021, October 22). Pandemic, racial justice fuel surge in demand for social-emotional learning. *Education Week*. https://www.edweek.org/leadership/pandemic-racial-justice-fuel-surge-in-demand-for-social-emotional-learning/2021/10

Over the past decade, the mortality rate in Indiana from drug- and alcohol-induced causes has more than doubled. It is the primary source of Indiana's decline in life expectancy since 2010.[6] Substance use among youth is also a great public health concern and opportunity for preventive interventions. According to the 2022 Indiana Youth Survey (INYS), 10.9% of seventh- to 12th-grade students in Indiana reported using alcohol in the past month, 9.4% reported used electronic vaping products, and 6.4% reported using marijuana.[7]

To prevent substance use and substance use disorders among youth in La Porte County, Indiana, in January 2019, Healthcare Foundation of La Porte (HFL) launched *Partners in Prevention*. **This innovative grant initiative helped La Porte County schools implement evidence-based programs to prevent substance use.**

A large body of research shows that evidence-based prevention programming, which includes social and emotional learning (SEL) programs, helps students avoid substance use and improve behavioral and academic outcomes.[8] Students' SEL competencies foster more positive and fewer negative social behaviors, promote their well-being, and improve their academic achievement and attainment.[9]

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[6] Kinghorn, M. (2021). Indiana's life expectancy falling further behind U.S. *Indiana Business Review, 96*, 2.

[7] Prevention Insights, Indiana University. (2022). Indiana Youth Survey 2022 interactive data explorer: Trends over time. https://inys.indiana.edu/data-explorer/trends.php

[8] Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development, 82*(1), 405–432. https://doi.org/10.1111/j.1467-8624.2010.01564.x

Weissberg, R. P., Durlak, J. A., Domitrovich, C. E., & Gullotta, T. P. (2015). Social and emotional learning: Past, present, and future. In J. A. Durlak, C. E. Domitrovich, R. P. Weissberg, & T. P. Gullotta (Eds.), *Handbook of social and emotional learning: Research and practice* (pp. 3–19). Guilford.

Sklad, M., Diekstra, R., De Ritter, M., Ben, J., & Gravesteijn, C. (2012). Effectiveness of school-based universal social, emotional, and behavioral programs: Do they enhance students' development in the area of skill, behavior, and adjustment? *Psychology in the Schools, 49*(9), 892–909. https://doi.org/10.1002/pits.21641

Taylor, R., Oberle, E., Durlak, J. A., & Weissberg, R. P. (2017). Promoting positive youth development through school-based social and emotional learning interventions: A meta-analysis of follow-up effects. *Child Development, 88*(4), 1156–1171. https://doi.org/10.1111/cdev.12864

[9] Guerra, N. G., & Bradshaw, C. P. (2008). Linking the prevention of problem behaviors and positive youth development: Core competencies for positive youth development and risk prevention. *New Directions for Child and Adolescent Development, 122*, 1–17. https://doi.org/10.1002/cd.225

Sklad, M., Diekstra, R., De Ritter, M., Ben, J., & Zins, J., Weissberg, R., Wang, M., & Walberg, H. (2004). *Building academic success on social and emotional learning: What does the research say?* Teachers College Press.

Students' SEL skills also support a more cooperative school climate, which is associated with increased student engagement in school, including decreased absenteeism.[10]

In January 2019, HFL awarded planning grants to six public school districts, four private schools, and one charter school (hereafter referred to as "grantees" in this report). These planning grants funded grantees to identify the most appropriate evidence-based programs for their students and develop plans for effective and sustainable implementation. **In spring 2020, HFL awarded implementation grants to the 11 planning grant recipients to support program implementation for the 2019–2020, 2020–2021, and 2021–2022 school years.** The table below displays each of the grantees, number of participating schools, grades served, and approximate number of students served during each of the 3 years of the initiative. On average, **the *Partners in Prevention* programs served about 12,000 students per year in grades pre-K through 12**. The number of students served grew each year. Second Step and Botvin LifeSkills Training were the programs most frequently implemented by grantees. Appendix 1 presents a complete list of all the programs implemented by each grantee and school.

Grantees, Number of Schools, Grades, and Students Served Each Year

Partners in Prevention Grantee (School System or School)	Number of Schools Served	Grades Served*	Students Served Each Year		
			Year 1	Year 2	Year 3
La Lumiere School	1	9	50	34	50
La Porte Community School Corporation	11	K–10	4,743	4,972	4,512
Metropolitan School District of New Durham Township	2	K–12	720	810	810
Michigan City Area Schools	11	K–12	2,076	4,075	4,225
New Prairie United School Corporation	5	K–4, 6–11	490	1,104	1,755
Notre Dame Catholic School	1	Pre-K–8	137	145	330
Queen of All Saints School	1	Pre-K–8	176	169	191
Renaissance Academy	1	1–8	146	184	290
St. John's Lutheran School	1	Pre-K–8	119	113	126

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[10] Farrington, C. A., Roderick, M., Allensworth, E., Nagaoka, J., Keyes, T. S., Johnson, D. W., & Beechum, N. O. (2012, June). *Teaching adolescents to become learners: The role of noncognitive factors in shaping school performance*. University of Chicago Consortium on Chicago School Research. https://consortium.uchicago.edu/publications/teaching-adolescents-become-learners-role-noncognitive-factors-shaping-school

Partners in Prevention Grantee (School System or School)	Number of Schools Served	Grades Served*	Students Served Each Year		
			Year 1	Year 2	Year 3
South Central Community School Corporation	2	Pre-K–6, 10	540	523	540
Tri-Township Consolidated School Corporation	2	3–10	178	175	270
Total	38	N/A	9,375	12,304	13,099

*Includes grades served during any of the 3 years of implementation.

RTI International is the contracted evaluator for the *Partners in Prevention* initiative. RTI's role has been to examine the nature and quality of program implementation and to evaluate the outcomes of *Partners in Prevention* programs for students, teachers, and schools. This work aims to help improve implementation quality, help stakeholders understand trends in outcomes, and inform future initiatives.

The logic model on the following page shows the anticipated results of *Partners in Prevention*. The model also shows how the initiative's components align with evaluation data sources.

In Years 1, 2, and 3 of *Partners in Prevention*, RTI collected data to help describe initiative implementation, including a web-based survey of grant directors and a web-based survey of program implementers. We also analyzed trends in student outcomes using administrative data from the Indiana Department of Education (IDOE) and grantee-collected data (e.g., pretests and posttests of curriculum knowledge) from each year of implementation. In addition, in Years 1 and 2 we conducted telephone interviews with grant directors. Those results are included in earlier reports. Year 3, instead, expanded the focus on outcomes.

The purpose of this final report is to share what RTI has learned in the final year of *Partners in Prevention* implementation. The Methodology section details the evaluation methods RTI used. Resources and Supporting Structures addresses leadership support, implementer characteristics and attitudes, grantee and school resources, and program oversight. In *Partners in Prevention* Program Implementation, we detail interventions conducted with students and teachers, including the successes and challenges schools encountered. In Monitoring Outcome Trends, we present findings for student, teacher, and school outcomes. Finally, in Lessons Learned, we summarize findings that can be used to inform and structure future school-based prevention initiatives.

Partners in Prevention Evaluation Logic Model

INPUTS

Partners in Prevention funding

Funding from outside organizations[G]

Technical assistance from EDC[G]

Training from curriculum developer, vendor, or trainer[G,I]

Implementation oversight from grant leadership[G,I]

Grantee and school resources (e.g., classroom space)[I]

OUTPUTS

Trained implementers deliver evidence-based programming with fidelity to pre-k through 12th grade students at funded schools[I]

Grant leadership undertakes activities to improve teachers' social-emotional competence[G,I]

SHORT-TERM OUTCOMES
Theorized to change by the time students complete a program

Students

Increase in perceived risk of substance use[Y]

Decrease in favorable attitudes toward substance use[Y]

Increased commitment to school (absences)[A,Y]

Teachers

Increased modeling of social-emotional competence in the classroom[I]

Improved competence in responding to negative student behavior[I]

INTERMEDIATE OUTCOMES
Theorized to change by the end of Partners in Prevention

Increase in healthy interactions and decrease in violent and other unhealthy interactions with parents[Y]

Reduced initiation of substance use among students[Y]

Cessation of substance use among students already using[Y]

Improved academic outcomes (grades, graduation rates, standardized test scores)[A,Y]

Reduced school disciplinary issues (suspensions, expulsions)[A]

Improved classroom/school climate[I,Y]

Program(s) are embedded in schools, part of school culture (includes sustainability)[G,I]

LONG-TERM OUTCOMES
Theorized to change in the years after Partners in Prevention concludes

Reduced rates of substance use, dependence, and overdose in La Porte County

CONTEXTUAL FACTORS

Leader support of program(s)[G,I]

Alignment of program(s) with state standards, school policy, and school mission[G,I]

Staff and student voices in program planning and implementation[G,I]

Implementer characteristics[I]

Implementers have favorable attitudes about program(s)[I]

Parental and peer attitudes about substance use[Y]

Peer substance use[Y]

Measures: G = Grant director survey   I = Implementer survey   A = School administrative data (PiP & comparison schools)   Y = Indiana Youth Survey

This section describes the methodology of the evaluation. Each grantee had one grant director, while the number of schools, implementers (school staff who taught the programs), and students served varied by grantee. To evaluate program implementation and outcomes, RTI conducted surveys with grant directors and implementers. To assess trends in student outcomes, RTI analyzed school-level IDOE administrative data; grantee-collected administrative discipline data and student pretest and posttest data as available from grantees; and student survey data from the Indiana Youth Survey (INYS).

Grant Director Surveys

RTI conducted annual web-based surveys of *Partners in Prevention* grant directors, with topics including training and oversight; implementation completion; implementation challenges, successes, and perceived outcomes; parental involvement; and sustainability. The survey in Year 3 consisted of 56 questions.

In January 2022, RTI e-mailed each grant director an invitation to participate in the survey. All 11 grant directors completed the survey. The grant directors also completed surveys in January 2020 and January 2021. (The grant director survey instruments are provided in a separate technical supplement.)

Implementer Surveys

RTI conducted annual web-based surveys of *Partners in Prevention* program implementers on topics including training, resources, implementer attitudes about programming, details of program implementation, implementation challenges, and parental engagement. The survey in Year 3 consisted of 55 questions.

The Year 3 implementer survey was open from March 7 through April 15, 2022. RTI sent survey invitations to 361 implementers whose contact information was provided by the 11 grant directors. Reminders were sent to non-responders. A total of 283 individuals submitted surveys contributing data to the analysis—a net response rate of 78%. Implementers did not always answer every question in the survey, thus the count of responses for each survey item varies and may not equal 283.

Implementers also completed surveys during the same early March to mid-April time period in 2020 (N = 298) and 2021 (N = 275). (The implementer survey instruments are provided in a separate technical supplement.)

School Administrative Data

As part of outcome monitoring, RTI compiled school-level administrative data from schools being served by *Partners in Prevention*, as well as for schools in Madison County,

Indiana, to compare what happened during the same time period in a demographically similar county that is not served by *Partners in Prevention*.

RTI obtained administrative data from the Indiana Department of Education (IDOE) for IREAD test scores, graduation rates, grade retention, excused and unexcused absences, in- and out-of-school suspensions data, and dropout data (annual and cohort). RTI obtained data, when available, for the 5 years preceding implementation (2014–2015 through 2018–2019) and the 3 years the intervention was implemented (2019–2020 through 2021–2022). The statistical analysis used interrupted time series regression models to assess the overall change in outcome level between the pre- and post-intervention years.

Grant Director Interviews

During the first 2 years of implementation, in the spring of 2020 and 2021, RTI conducted 60-minute telephone interviews with all grant directors. These interviews involved a deeper exploration of the topics covered in the grant director survey, including implementation approaches and timeline, financial and policy barriers and facilitators, key implementation barriers and facilitators, sustainability progress, and lessons learned to date. Detailed findings from those interviews are provided in the evaluation reports for Years 1 and 2. In Year 3, the evaluation focused more on outcome data. (Grant director interview guides are provided in a separate technical supplement.)

Grantee-Collected Data

As part of their *Partners in Prevention* grants, grantees collected one or more measures related to program outcomes. In Year 1, RTI reviewed each grantee's data collection plans and identified the topics—referred to as "domains" in the evaluation—that grantees most commonly measured. Then, RTI and HFL identified domains of grantee-collected data that would be used for the evaluation. HFL and RTI requested that grantees report on all domains for which they already collected or planned to collect data as part of their grant. Some measures were annual, while others were collected before and after implementation in a single school year (pretests and posttests).

Each year, RTI asked grantees that collected outcome data to submit a school-level summary statistic (i.e., mean and standard deviation, percentage, count) from each round of data they collected for that year. Ten grantees provided administrative discipline data (e.g., office referrals) that were used in the final analysis, and many provided pretest and posttest data related to outcomes, such as students' curriculum knowledge and social-emotional skills. In the Evaluation Year 2 Annual Report, we presented an analysis of Year 1 pretest and posttest data. This is the first year we are including analyses of grantees' discipline data. To conduct the analyses, RTI needed to have at least two points in time for students in the same grades.

RTI used meta-analysis to combine and analyze the summary statistics that grantees submitted. The meta-analysis framework treats each grantee as if they conducted a separate study of whether *Partners in Prevention* affected outcomes; this approach

allows for the analysis of evaluation measures even though they vary somewhat from grantee to grantee.

Indiana Youth Survey

This report also presents INYS findings for relevant student outcomes. The Institute for Research on Addictive Behavior at Indiana University-Bloomington conducts the INYS in participating Indiana schools every other spring. All eligible schools in Indiana are invited to participate. The survey asks students in grades 6–12 about mental health and risky behaviors (e.g., substance use) and correlates of risky behavior (e.g., students' attitudes toward substance use).

Six *Partners in Prevention* grantees, totaling 10 participating schools, provided results for at least 2 years of the 2020, 2021, and 2022 INYS administrations (seven schools in 2020; 10 schools in 2021 and 10 in 2022). Data were not available for these schools prior to start of *Partners in Prevention*, so we cannot compare pre- and post-implementation changes; rather, these data provide trends during program implementation.

The evaluation used meta-analysis to examine changes over time for the following self-reported student outcomes: past-30-day substance use, including alcohol, marijuana, prescription painkillers, cigarettes, and electronic vapor products; perceived risk of harm from substances; favorable or unfavorable attitudes toward substance use; and depressive symptoms.

Although the INYS data provide valuable information on trends, findings should not be interpreted as reflecting initiative effectiveness. First, not all students included in these INYS data received *Partners in Prevention* programming. Some schools sharing their INYS data only offered *Partners in Prevention*-funded lessons to certain grade levels or classrooms, though they may have provided INYS results for all eligible students in grades 6–12. Second, fewer than one-third of the 38 *Partners in Prevention* schools participated in the INYS, so results may not be representative of all *Partners in Prevention* grantees. Third, we do not have baseline data from before implementation. Fourth, we do not have comparison schools that did not receive the *Partners in Prevention* programming and thus cannot compare trends.

Limitations

The *Partners in Prevention* evaluation, like other research and evaluations, had limitations.

- **Potential program effect confounders.** In any evaluation, external factors can make it challenging to determine to what extent outcomes are caused by the program. Having the Madison County comparison students helps address this for the student outcomes from IDOE administrative data. In addition, although Madison County students showed similar patterns of achievement and behavior in the administrative data before *Partners in Prevention*, there may still be other important factors affecting changes in the two counties over time. We also do not

have detailed information about the SEL programs or COVID-19 policies and practices in Madison County schools.

- **COVID-19 pandemic.** Since the start of the pandemic, children and adolescents have shown sharp increases in psychological distress, including symptoms of depression and anxiety and other mental health disorders, as well as modest increases in impulsivity and irritability.[11] The COVID-19 pandemic dramatically affected schools and students and their families. Although the pandemic may have had a similar effect on students in *Partners in Prevention* and Madison County schools, the magnitude of pandemic-related disruptions could have blunted intervention effects. In addition, the pandemic greatly disrupted program implementation and grantee data collection in Year 1 and into Year 2. Finally, the local Indiana school systems changed many policies and practices during COVID-19—for example, how attendance was measured and student behavior was managed during remote learning in La Porte and Madison counties. These changes also affected the patterns of outcomes.

- **Statistical power to detect changes over time.** For the grantee-collected data, the ability to detect differences over time was also limited by the number of schools providing data for the different outcome domains. More schools reporting data would allow for greater statistical power to detect changes over time.

- **Representativeness of grantee-collected data.** The representativeness of this data depended on grantees' ability to obtain high student participation rates for each round of data collection (e.g., for pretest and posttest of curriculum knowledge or repeated INYS administrations) and the number of grantees providing data.

- **The influence of large school systems.** Because large school systems contributed more schools to the analysis than small school systems, results may better resemble large school systems. The results, however, do account for differences between individual schools.

- **Survey self-reported data.** The implementer, grant director, and student survey data are self-reported and can be influenced by limitations of memory and social desirability. However, the overall validity and reliability should be sufficiently high.

In spite of these limitations, the rich evaluation data provide valuable information for program monitoring and quality improvement and for building our understanding of patterns of outcomes over time, which, in turn, will enable HFL and its community partners to better serve La Porte County students.

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[11] See Office of the Surgeon General, 2021 (footnote 3).

Previous studies of prevention programs have identified **school contextual factors,** including resources and supporting structures, that influence implementation success.[12] In this section, we examine these factors: mission alignment, leadership support, and implementer characteristics and attitudes.

Mission Alignment

Grant directors and implementers responded to survey items about whether substance use prevention programming and programming to promote SEL were consistent with their organizations' missions.[13] Across Years 1 and 2, on average, 72% of implementers agreed that substance use programming was consistent with their school's mission, and 92% agreed that SEL programs were consistent with their mission. (This question was not repeated in the Year 3 survey.)

As in Years 1 and 2, most grant directors reported that their organization had policies consistent with requirements of the *Partners in Prevention* model. In Year 3, 55% (six of 11) reported that their organization had policies requiring substance use prevention programming for students; 64% (seven of 11 grant directors) reported policies requiring the use of evidence-based programming or practices with students, and 46% (five of 11) reported policies requiring social-emotional programming for students.

Grant directors also provided information about any organizational policies that hindered *Partners in Prevention* implementation. Consistent with findings from Years 1 and 2, **about half of grant directors reported that policies limiting the time available for prevention were barriers to *Partners in Prevention* implementation.** (See Implementation Challenges for complete information on policy challenges.)

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[12] See, for example:

Domitrovich, C. E., Bradshaw, C. P., Poduska, J. M., Hoagwood, K., Buckley, J. A., Olin, S.,… Ialongo, N. S. (2008). Maximizing the implementation quality of evidence-based preventive interventions in schools: A conceptual framework. *Advances in School Mental Health Promotion, 1*(3), 6–28. https://doi.org/10.1080/1754730x.2008.9715730

Forman, S. G., Olin, S. S., Hoagwood, K. E., Crowe, M., & Saka, N. (2009). Evidence-based interventions in schools: Developers' views of implementation barriers and facilitators. *School Mental Health, 1,* 26–36. https://doi.org/10.1007/s12310-008-9002-5

Tibbits, M. K., Bumbarger, B. K., Kyler, S. J., & Perkins, D. F. (2010). Sustaining evidence-based interventions under real-world conditions: Results from a large-scale diffusion project. *Prevention Science, 11*, 252–262. https://doi.org/10.1007/s11121-010-0170-9

[13] Throughout this report, "organization" refers to school (for single-school grantees) or school district (for multi-school grantees).

Leadership Support

As shown below, implementers reported about the same high level of principal advocacy and support to promote SEL and substance use prevention in Year 3 as in Year 2. Implementers reported about the same levels of principal support whether they were serving elementary, middle, or high school students. In addition, **72% of implementers reported that their principal prioritized SEL programming as highly as they did academic instruction, while 52% reported the same for substance use prevention programming** (only asked in Year 3).

Implementer Perceptions of Principal Support

During the current school year, our school's principal has been...	Percentage of Implementers Who Agreed with Statements		
	Year 1 (N = 289)	Year 2 (N = 264)	Year 3 (N = 272)
a strong advocate for promotion of SEL	86%	88%	89%
motivated to ensure that efforts to promote SEL are a success	85%	88%	86%
supportive of staff implementing SEL	89%	89%	89%
a strong advocate for substance use prevention	75%	67%	67%
motivated to ensure that substance use prevention efforts are a success	78%	66%	65%
supportive of staff implementing substance use prevention programming	79%	66%	67%
prioritizing SEL programming as highly as academic instruction	Not asked	74%	72%

Grant directors reported that their leaders were involved with a number of *Partners in Prevention* activities. The following graph shows the number of grant directors that reported organization leaders' involvement in various *Partners in Prevention* activities in Year 1 through Year 3. In Year 3, grant directors reported relatively consistent leadership involvement in planning, training, and monitoring data; however, slightly fewer grant directors reported leadership involvement in observations or program implementation than in prior years.

Number of Grantees Reporting Leadership Involvement
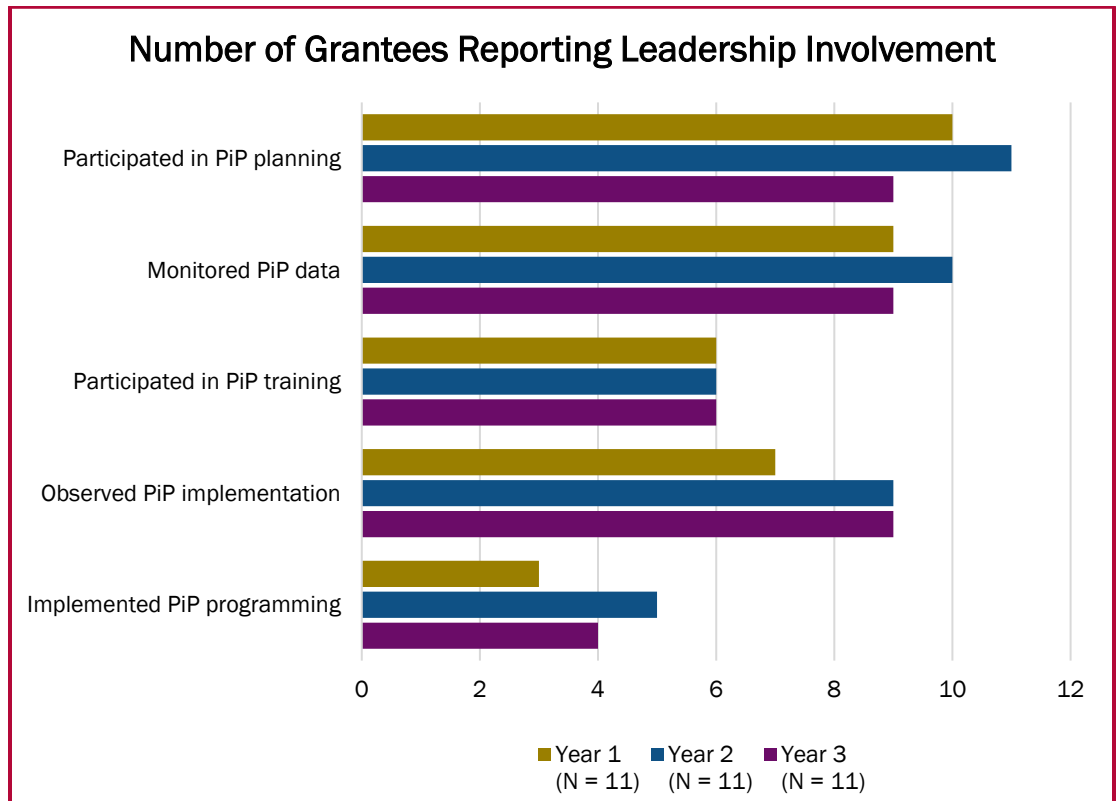

PiP = *Partners in Prevention*

Implementers

Throughout the *Partners in Prevention* project, most implementers have been general education teachers. In Year 3, 83% were general education teachers, either of multiple subjects (56%) or of a single subject other than physical education, health, or wellness (28%). Twelve percent were special education teachers, school counselors, or social workers.

In Year 1, most implementers were new to prevention/SEL programs. In Year 2, 73% of implementers had taught the *Partners in Prevention* program in previous years, and by Year 3, 81% of implementers had done so. In Year 3, on average, implementers had been teaching their current prevention/SEL programs for 1.8 years. In addition, 13% reported that they had also taught more than one SEL or substance use prevention program during the 2021–2022 school year.

In Year 3, a very high percentage of implementers reported that they were confident in their ability to implement the *Partners in Prevention* programs. Patterns were about the same as in Year 2. Implementers generally reported that they understood the program well enough to implement it effectively (89% agreed or strongly agreed). Most believed they could do a good job teaching students about substance use prevention (76% agreed or strongly agreed) and 93% agreed or strongly agreed they could do a good job teaching

students about social-emotional skills. In a modest decline from 54% in Year 2, 48% believed that they were better at teaching other subjects than at implementing the *Partners in Prevention* programs in Year 3.

On average, implementers had positive attitudes about the programs they delivered. As in Years 1 and 2, most implementers believed that if they did a good job teaching their *Partners in Prevention* program, their students would experience benefits, including improved social-emotional skills and academic outcomes, fewer school discipline issues, lower likelihood of substance misuse, and a healthy and productive future.

Percentage of Implementers Who Believe Their Students Will Benefit in These Ways
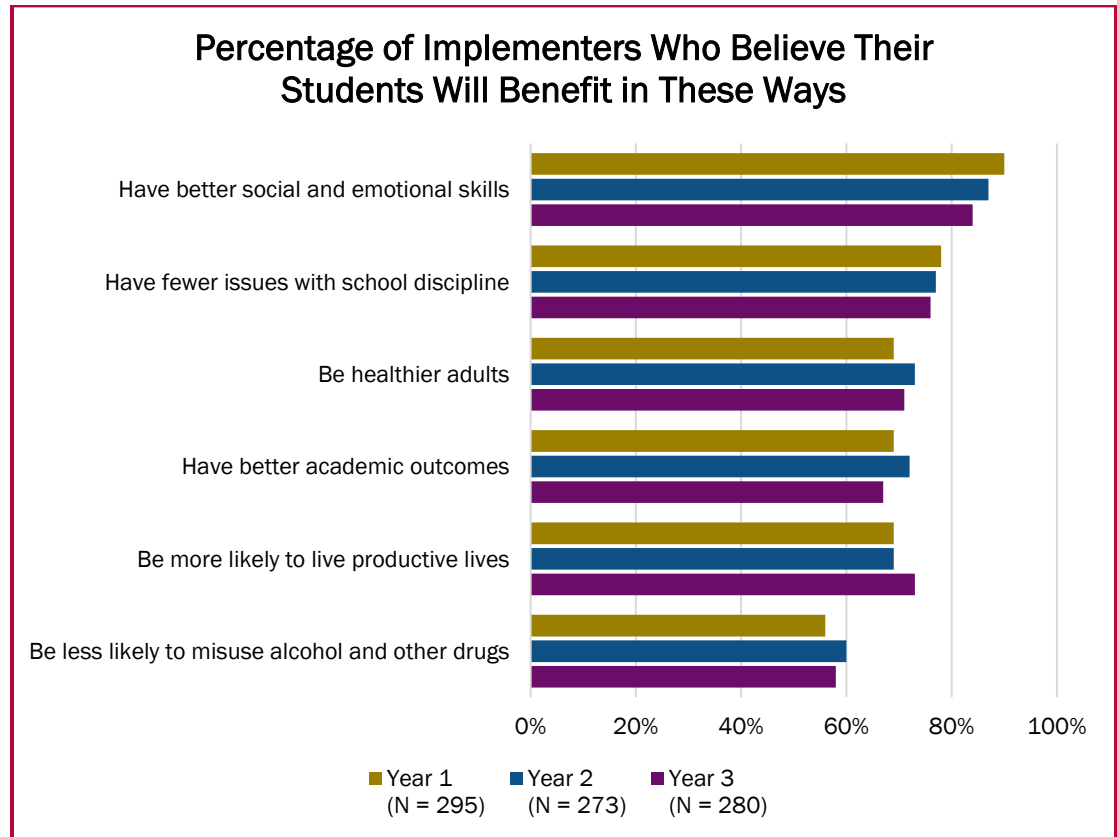
Implementers were also asked how likely it was that their students would benefit from any SEL or substance use prevention program. **On a scale of 0 (no benefit) to 100 (benefit a great deal), on average implementers rated the benefit of any SEL program at 85 and any substance use prevention program at 75—each 3 percentage points higher than the year prior.**
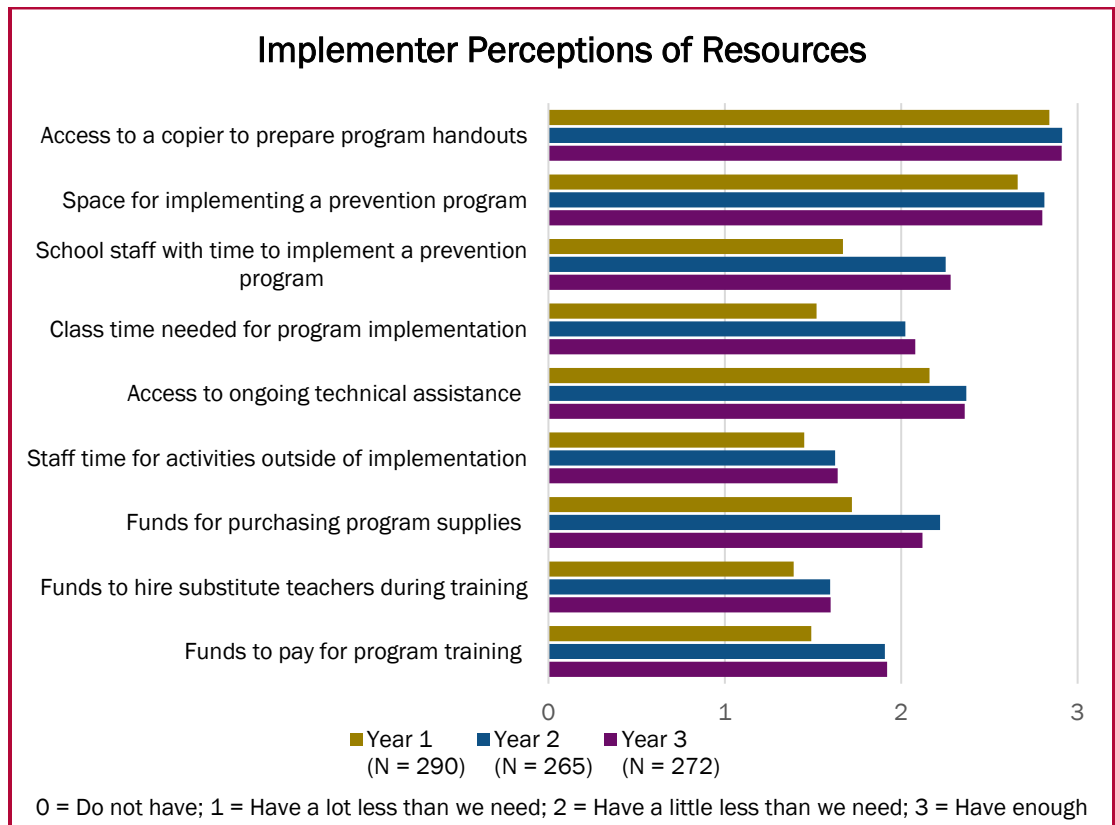
Implementers also reported about the same level of enthusiasm as in Years 1 and 2 for implementing their *Partners in Prevention* program, with a mean level of enthusiasm of 73 on a scale of 0 to 100.

Grantee and School Resources

Beyond HFL-provided funding, grantees contributed their own human and capital resources to their *Partners in Prevention* projects.

Implementers felt they had support in the form of guidance for program implementation and curriculum content. **In Year 3, 93% of implementers said that their school had someone they could turn to for guidance about the implementation of their *Partners in Prevention* program.** Eighty-one percent of implementers reported that there was someone who could provide general guidance about substance use prevention strategies, and 92% said that there was someone who could provide general guidance about SEL strategies. They did not specify who provided guidance.

In the implementer survey, we presented a list of nine resources that are needed to support program implementation and asked respondents to report whether their school currently had enough of each. The graph below shows the responses from Years 1, 2, and 3. **As in prior years, implementers reported some school resource shortfalls in the area of time; however, the figure below shows this improved in Years 2 and 3 compared to Year 1. In Year 3, implementers reported that they had adequate funds for program supplies and training but did not have enough funds to hire substitute teachers to cover time when implementers were participating in program training.**

Implementer Perceptions of Resources

Year 1 (N = 290) Year 2 (N = 265) Year 3 (N = 272)

0 = Do not have; 1 = Have a lot less than we need; 2 = Have a little less than we need; 3 = Have enough

In Year 3, we also asked implementers about resources specific to remote learning. Similar to Year 2, when asked if they had the *technology for staff to implement* prevention programming with students during remote learning, 61% of implementers stated that they had enough resources, while fewer than 10% of implementers said that they had a lot less than needed or none of this resource. Similarly, when asked if they had the *technology for students to participate* in prevention programming during remote learning, 62% of implementers stated that they had enough resources. Just under 10% of implementers said that they had a lot less than needed or did not have the resources.

Training

Grant directors reported on training for each of the 19 programs that their school systems were implementing for *Partners in Prevention*. **Training was provided for new implementers of 16 of the 19 programs.** Booster training for returning implementers was required for three programs—the most common reason for this was that the grantee wanted to provide supplemental or advanced information that built on the initial training. Grantees that conducted training used several different modalities, including in person (seven programs); self-study, which did not involve interaction with a trainer (five programs); and virtual (e.g., webinar, video conference) with a live trainer (one program). The remaining trainings were delivered through an unspecified, or "Other," format.

Among programs that used a live trainer model (either in person or virtually), grantees also employed various types of trainers. A certified trainer from within the grantee organization led new implementer training for three of the eight trainer-led trainings. An uncertified trainer from within the grantee organization led trainings for another three programs. Similar to Year 2, new implementer training was delivered by the program developer for just one program. The trainer type for the eighth trainer-led training was not specified. For returning implementer trainings, grantees were most likely to use an "Other" type of trainer. One training for returning implementers was delivered by a certified trainer from elsewhere in the grantee's community.

The percentage of implementers that reported receiving training for their prevention program during the school year or preceding summer declined in each year of the initiative. In Year 3, 34% of implementers reported participating in training just before the start of the year (summer 2021) or during the 2021–2022 school year, whereas 45% reported receiving training in Year 2, and 77% reported receiving training in Year 1. The declining rate of implementer training is partially due to implementers having already been trained in previous years. For example, in Year 3, 35% of respondents had not participated in training in the current school year but had participated in training before the current school year. However, training in previous years did not fully explain why some implementers did not participate in training during the current year. **In Year 3, 31% of implementers reported they had never participated in training. This was an increase from Year 2, during which only 21% reported not having participated in training at the time of the survey.**

Technical Assistance

HFL contracted the Education Development Center (EDC) to provide implementation technical assistance (TA) to *Partners in Prevention* grantees.

Ten of 11 grant directors reported receiving TA themselves, and about one-third reported that their implementers also received TA. A handful of grant directors reported that other staff had direct contact with EDC for this purpose, including data collectors (four) and the program trainer (one). At the time of their surveys (January 2022), grant directors reported having had an average of 8 hours (range: 3 to 30) of direct contact with their EDC TA provider during the 2021–2022 school year, compared with an average of 12 hours in Year 2 and 6 hours in Year 1.

The following table presents common areas of TA received by grantees each year. In Year 3, HFL prioritized sustainability, program monitoring, and engaging stakeholders. **In Year 3, the most common topic for EDC's TA was fostering sustainability, followed by process data collection tools and assessment and sharing of best practices.** The emphasis on sustainability was a shift in focus from Year 2, when the most common topic was addressing implementation challenges. **Other common TA topics in Year 3 were monitoring implementation against an implementation plan, using logic models, student outcome data collection tools and assessment, monitoring data collection quality, and engaging parents.** When grant directors reported not receiving TA on a specific topic, all or almost all also reported that they did not need TA in that area. Ten of the 11 (90%) grantees agreed or strongly agreed that the ongoing TA from EDC had been useful,

almost the same as in Year 2 (11 grantees or 100%), and a notable increase from Year 1 (seven grantees or 64%). In Year 3, the highest reported levels of TA satisfaction related to program monitoring: monitoring implementation quality, monitoring implementation against an implementation plan, and process data collection tools and assessment.

Areas of Technical Assistance Received Each Year

Technical Assistance Topic	Number of Grantees Receiving EDC Technical Assistance for This Topic (N = 11 grantees)		
	Year 1	Year 2	Year 3
Fostering sustainability	2	6	11
Monitoring implementation against implementation plan	2	8	9
Integrating curricula into schools	0	4	5
Securing training for implementers	0	2	4
Addressing implementation challenges	2	10	0
Developing a logic model	9	7	Not asked
Developing an implementation plan	7	6	Not asked
Selecting measurement tools for monitoring and evaluation	3	6	Not asked
Using measurement tools for monitoring and evaluation	3	5	Not asked
Process data collection tools and assessment	Not asked	Not asked	10
Sharing of best practices	Not asked	Not asked	10
Using logic models	Not asked	Not asked	9
Student outcome data collection tools and assessment	Not asked	Not asked	9
Monitoring implementation quality	Not asked	Not asked	8
Engaging parents	Not asked	Not asked	8
Engaging other stakeholders (aside from parents)	Not asked	Not asked	5
Education through webinars	Not asked	Not asked	5
Adapting to other COVID-19 challenges	Not asked	7	Not asked
Planning transition to online or hybrid learning because of COVID-19	Not asked	5	Not asked

Implementation Oversight

Unlike in previous years, in Year 3, all 11 grantees engaged in activities to monitor the progress of implementation, either via (1) observations, (2) implementer self-report of implementation details, or (3) both (see figure below).

Number of Grantees Engaged in Implementation Oversight Activities (N = 11 Grantees)
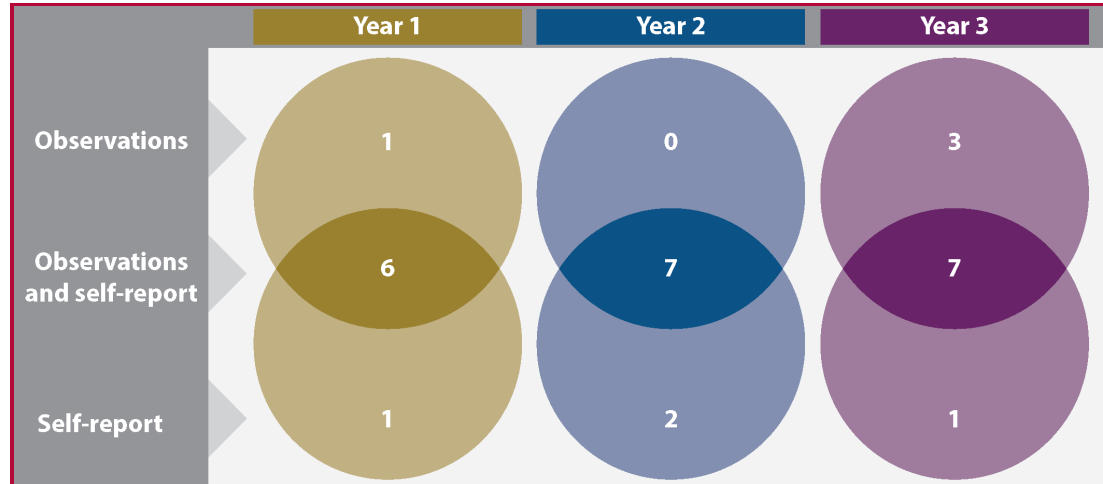
Note: Includes grantees that planned to do observations but had not yet done so at the time of the survey.

Observations

Grant directors reported on whether they observed their organization's implementers delivering *Partners in Prevention* programming during the 2021–2022 school year. At the time of survey completion (January and early February), 64% of grantees (seven out of 11) had already observed program sessions; 27% (three out of 11) had not yet observed but planned to do so. **The overall percentage of grantees completing or planning observations in Year 3 (91%) was substantially higher than in Year 1 and Year 2 (64% for each year). The percentage of those who had completed observations by the time of the grant director survey increased markedly across years, from 27% in Year 1 and 45% in Year 2 to 64% in Year 3.**

Among grantees conducting observations, three (30%) observed or planned to observe all of their implementers (compared with four in Year 2). On average, the remaining grantees observed or planned to observe 28% (range: 2% to 80%) of implementers. Grantees conducted or planned to conduct an average of three observations per implementer (range of one to eight). Seven of the 10 grantees conducting observations had or planned to have observers receive some type of training before conducting observations. There were multiple types of training, including:

- implementer training for the program (six grantees)

- general training on conducting classroom observations (three grantees)

- observer training for the program and other training (two grantees)

All grantees conducting observations had given or planned to give feedback about these observations to all or some implementers. Among grant directors who had already conducted observations, 86% had also already provided feedback to some or all implementers by the time of the grant director survey.

Implementers also reported on observations. Similar to Years 1 and 2, about one-quarter of implementers in Year 3 reported that they had been observed (22%) or there were plans for them to be observed (3%). These numbers are smaller than the percentage of grant directors saying they conducted observations, which may be explained by the fact that most grantees were observing only a sample of implementers. Sixty-nine percent of implementers reported receiving feedback from the observations, a marginally significant decrease from 85% in Year 2 ($p < .10$), but similar to the 67% who received feedback at the same time in Year 1.

Implementer Self-Report

Seven of 11 grant directors (64%) reported that they required all their implementers to self-report on implementation and one grant director (9%) reported requiring some implementers to do so (e.g., through an implementation checklist of session activities completed). This is a slight decrease from Year 2 (nine), but more than in Year 1 (seven). All eight of these grantees reported that they had provided, or planned to provide, feedback to implementers on these data.

More than two-thirds of implementers (70%) said that they had been asked to report information from their implementation, a similar figure to both Years 1 and 2 and also to the percentage of grant directors who said that such reporting is required of implementers. When asked how often they reported information on their implementation, the most common implementer response was monthly (39%), followed by quarterly (31%). Among implementers who reported implementation information, 36% received feedback—about the same as in prior years.

Follow-Up

Six of 11 grant directors (55%) reported providing or planning to provide follow-up for implementers with unsatisfactory implementation. Four grantees (36%) provided or planned to provide one-on-one mentoring or coaching to implementers with unsatisfactory implementation, two (18%) asked or planned to ask them to observe high-quality implementation by peers or mentors, and one collected or planned to collect additional data to monitor improvements. Some grant directors used more than one approach.

Programming for Students

Programs and Grades

HFL provided *Partners in Prevention* planning grantees with a list of 30 evidence-based substance use prevention programs, including SEL programs to prevent substance use, that grantees could implement for the initiative. Ultimately, grantees chose to implement nine *different* programs in Year 3.[14] The table below summarizes implementer and grant director survey data, showing the number of grantees, schools, and implementers implementing each program. **The most commonly implemented program continued to be Second Step.** Individual grantees implemented up to three programs (counting Second Step: Elementary and Second Step: Middle as separate programs), totaling **19 programs across grantees** (the sum of the "Grantees" column in the table below). Second Step also had the most implementers. Botvin LifeSkills Training was second in the number of grantees implementing the program; however, School Connect had the second highest count of implementers, although they were at a single school. Too Good for Violence and Too Good for Drugs had the fewest implementers. Appendix 1 presents a complete list of the programs implemented by grantee, school, grades served, and number of implementers. Appendix 2 provides a description of each program that grantees implemented.

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[14] Second Step: Elementary and Second Step: Middle were analyzed separately.

Number of Grantees, Implementers, and Schools by Program

Program	Number of Grantees	Total Implementers	Elementary		Secondary	
			Schools	Implementers	Schools	Implementers
Botvin LifeSkills Training	4	14	1	4	5	10
Conscious Discipline	1	13	1	13	0	0
Positive Action	1	11	1	11	0	0
Ripple Effects	1	1	1	1	0	0
Second Step: Elementary and Second Step: Middle*	4	280	21	182	4	98
School Connect	1	38	0	0	1	38
Too Good for Drugs	2	3	0	0	2	3
Too Good for Violence	2	3	2	3	0	0

*For Second Step, one school that serves fifth and sixth grades is counted in the elementary category. See Appendix 1 for details.

Grant directors and implementers both reported on whether any of their schools implemented any SEL or substance use prevention programs beyond their *Partners in Prevention* programs during the 2021–2022 school year. This provides context on whether any similar interventions were being implemented that could have also contributed to the desired outcomes of *Partners in Prevention*. Five grant directors reported their school system implemented one SEL or substance use prevention program beyond the *Partners in Prevention* program, an increase from three grant directors in Year 2. Six percent of implementers reported that they were implementing an additional program in Year 3. The programs included Positive Behavioral Interventions and Supports, 5 Star, Lil Fish, PATHS, Zones of Regulation, Character Strong, Digital Citizenship, Vape Educate, the *Red Ribbon Week* campaign for drug use prevention, a social skills class, and presentations by Boys and Girls Club and a nonprofit agency to prevent sexual abuse.

Kindergarten through eighth grade continued to be the grades most commonly served. In Year 3, the percentage of implementers who reported serving kindergarten and grades 10–12 increased, while the percentage serving grades seven and eight decreased from previous years. Grantee school configurations varied, with some grantees only including pre-kindergarten (pre-K) through eighth grade.

Percentage of Implementers Serving Each Grade

Year 1 (N = 297) Year 2 (N = 273) Year 3 (N = 281)
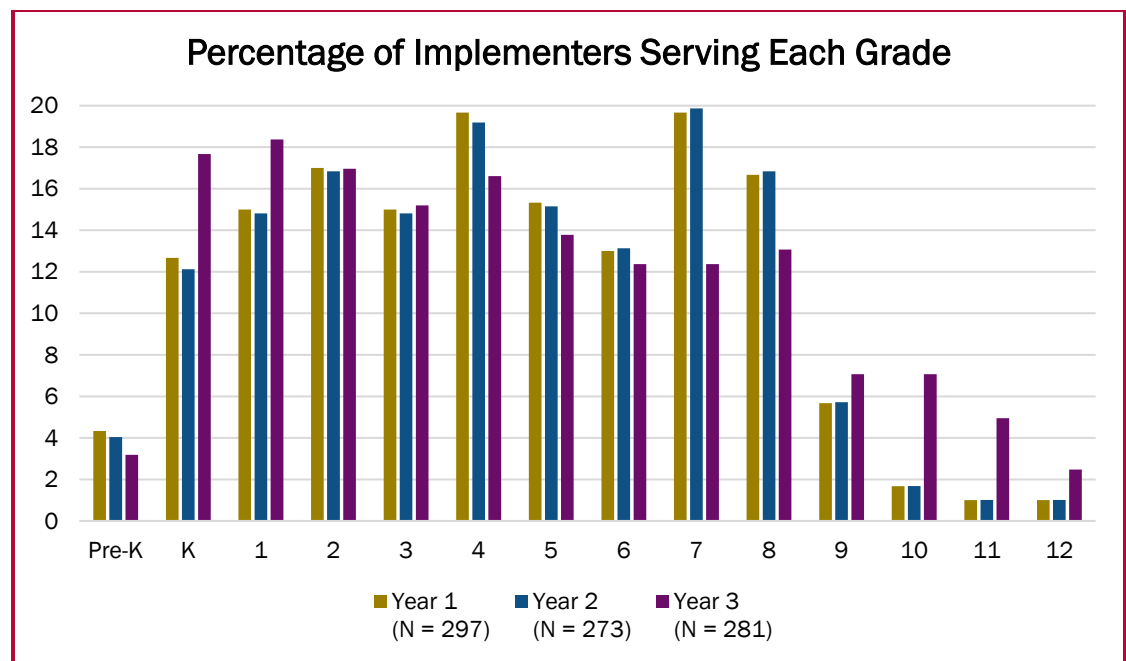
COVID-19 Effect on Programming

In the 2021–2022 school year, schools largely returned to traditional instructional methods as COVID-19-related school closures eased. Sixty-five percent of implementers reported that they never delivered fully virtual instruction to all students (i.e., school buildings were closed) at any point in the school year. About one-quarter (28%) of

implementers reported that their school delivered virtual instruction to all students for a short period (1 month or less), compared to about half in Year 2. More than half of implementers (52%) reported delivering the *Partners in Prevention* program while instruction was fully virtual. A small number of implementers (14, or 5%), reported that they provided fully virtual instruction for 9 months or more. Even so, most implementers (87%) reported that they were able to reach all students as intended.

A few implementers reported making other adaptations to lessons due to the pandemic. Nine percent of implementers who reported having skipped or shortened program activities or lessons attributed the change to COVID-19 disruptions. Likewise, there were numerous reports of COVID-19 disruptions necessitating changes to the format of program activities: 7% of the grant directors who repeated or reviewed program activities or lessons, 4% of implementers who changed the order of activities or lessons, and 2% of implementers who reported changing the format of program activities.

Program Delivery and Time Period

Grant directors reported providing 63% of *Partners in Prevention* programs in person only, compared to 22% in Year 2. Those provided both in person and virtually made up 26% of programs, compared to 61% last year. Last, 11% of programs were virtual only, compared to 17% last year.

The following graph shows 98% of implementer survey respondents reported delivering the program in person, 4% reported delivering the program in a synchronous virtual format, and 4% reported using recorded/asynchronous instruction. These percentages total to more than 100% because some implementers used multiple modes. (See Implementation Quality for a detailed discussion of lesson completion.)

Percentage of Implementers Delivering Programs in Virtual Settings

■Year 2 (N = 273)   ■Year 3 (N = 282)
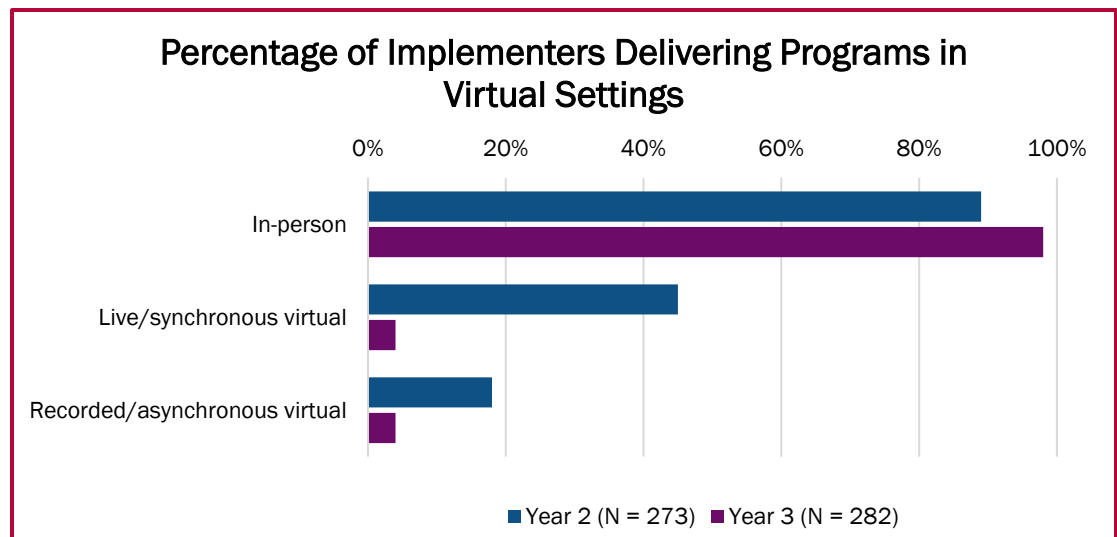
Whether they completed implementation or not, on average, implementers delivered programming over the course of 7.4 months—about the same as last year. Fifty percent of implementers delivered the program lessons over an 8- to 9-month period, 28% reported delivery over a 6- to 7-month period, and about 5% reported delivering lessons in just 2 months or less.

Implementation Quality

Implementation quality is a key determinant of program outcomes.[15] For the *Partners in Prevention* initiative, the concept of implementation quality includes such dimensions as adherence to a curriculum manual, delivery of all program lessons (dose), strong program delivery skills among implementers, and interest and engagement among students.

Lesson Completion (Dose)

At the time of the March–April 2022 implementer survey, 62% of implementers had completed program implementation with all their students; 10% had completed all sessions with some of their students but not with others; and 27% had not yet completed program implementing with any students. These numbers are consistent with Year 2. Finally, at the time of this survey, 7% of implementers had not yet started implementing the program.

Among the 62% of implementers who reported completing implementation with all their students at the time of the spring survey, over half (54%) had delivered all of the required sessions to their classes, and about one-third (34%) had delivered almost all the required sessions; and 8% had delivered about half of the required sessions. Among the 38% of implementers who had not yet finished implementing programming at the time of the survey, 91% expected to finish implementing all program sessions by the end of the school year. **Overall, expected completion in Year 3 increased by 16% compared with Year 2.**

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[15] See, for example:

Derzon, J. H., Sale, E., Springer, J. F., & Brounstein, P. (2005). Estimating intervention effectiveness: Synthetic projection of field evaluation results. *Journal of Primary Prevention, 26,* 321–343. https://doi.org/10.1007/s10935-005-5391-5

Durlak, J. A., & DuPre, E. P. (2008). Implementation matters: A review of research on the influence of implementation on program outcomes and the factors affecting implementation. *American Journal of Community Psychology, 41,* 327–350. https://doi.org/10.1007/s10464-008-9165-0

Adherence to the Curriculum

Grant directors reported that implementers followed the curriculum guide "very closely" for 16 of the 19 programs (68%). Among implementers surveyed, 42% reported that they followed the curriculum guide "very closely." Half the implementers reported following the curriculum guide "somewhat closely," sometimes adapting the material as appropriate. **In total, 92% followed the curriculum either very closely or somewhat closely in Year 3, compared with 89% in Year 2.** Six percent of implementers reported not following the guide very closely and frequently adapting the material, while 2% reported not using the curriculum guide. Overall, the mean level of reported adherence did not statistically differ between Years 2 and 3.

Student Engagement and Understanding

For in-person learning, just over half of the implementers (52%) reported strong student engagement in *Partners in Prevention* programming: 39% reported that students were "almost fully engaged" and about 13% reported students were "fully engaged." This is slightly lower than in Year 2, when nearly 60% of implementers reported that their students were either almost or fully engaged. As shown below, implementers reported higher levels of engagement among elementary school students than among secondary school students. In Year 3, more implementers reported serving high school students

than in prior years. For the limited delivery of virtual program lessons, 75% of applicable implementers reported that students were almost fully or fully engaged in Year 3.

Implementer-Reported Student Engagement, In-Person Programming, Year 3

Reported Level of Student Engagement	Percentage of Implementers (N = 256)		
	Elementary School (n = 157)	Middle School (n = 65)	High School (n = 34)
Not at all engaged/bored	1%	1%	3%
Barely engaged	3%	18%	26%
Somewhat engaged	32%	46%	47%
Almost fully engaged	47%	28%	24%
Fully engaged	18%	6%	0%

Because of rounding, numbers may not add up to 100%.

Most implementers (71%) believed that their students had good (62%) or excellent (9%) understanding of program lessons. In Year 2, 76% of implementers reported that students had good (59%) or excellent (18%) understanding of lessons.

Program Adaptation

Similar to previous years, two of 11 grant directors asked their implementers to make changes to one of their *Partners in Prevention* programs. One director requested changing the program language or examples and another requested delivering lessons at a frequency different from program recommendations. Three grant directors offered implementers the choice to change at least one of the following: repeat or review program activities or lessons; present additional activities, lessons, or content; change the order of activities or lessons; change the format of program activities; or deliver lessons at a frequency different from what the program recommends.

The implementer survey asked the implementers who reported that they followed their program's curriculum guide "somewhat closely" or "not very closely" to report what changes they made. **As shown in the following table, shortening program content was the most common change, attributed to either time constraints or the desire to increase student engagement. The percentage of implementers who reported shortening program content decreased from 58% in Year 2 to 44% in Year 3.** The next most frequent type of change was presenting additional activities, lessons, or content that were not part of the program. Implementers did this to increase student comprehension or engagement—the same reasons for most other changes made by implementers.

Percentage of Implementers Making Changes to Curriculum

Change Made	Year 1 (N = 126)	Year 2 (N = 119)	Year 3 (N = 178)	Top Reasons for Change in Year 3
Skipped or shortened program activities or lessons	48%	58%	44%	Did not have enough time, but not because of COVID-19 (47%). Wanted to increase student engagement (46%).
Presented additional activities, lessons, or content that were not part of the program	34%	35%	43%	Wanted to increase student engagement (83%). Wanted to increase student comprehension or retention (64%).
Repeated or reviewed program activities or lessons	40%	38%	31%	Wanted to increase student comprehension or retention (71%). Wanted to increase student engagement (57%).
Presented additional activities, lessons, or content that were not part of the program	34%	35%	43%	Wanted to increase student engagement (83%). Wanted to increase student comprehension or retention (64%).
Changed the format of program activities (e.g., substituted discussion for role play, modified worksheets or homework assignments)	30%	34%	33%	Wanted to increase student engagement (71%). Wanted to increase student comprehension or retention (53%).

Change Made	Year 1 (N = 126)	Year 2 (N = 119)	Year 3 (N = 178)	Top Reasons for Change in Year 3
Changed program language or examples	17%	15%	17%	Wanted to increase student comprehension or retention (80%). Wanted to increase student engagement (73%).
Changed the order of activities or lessons	15%	13%	13%	Wanted to increase student engagement (71%). Wanted to increase student comprehension or retention (42%).
Delivered lessons at a different frequency than program recommendations (e.g., implemented lessons on consecutive days instead of weekly)	10%	11%	12%	Did not have enough time (unrelated to COVID-19) (41%). Wanted to increase student comprehension or retention (25%).
Implemented with a different type of student (e.g., grade level, risk status) than what the program targets	Not asked	Not asked	5%	Wanted to increase student engagement (78%). Wanted to increase student comprehension or retention (56%).
Other	Not asked	Not asked	3%	Did not have enough time (unrelated to COVID-19) (40%). Wanted to increase student comprehension or retention (40%).

N = Number of implementers who answered survey question, excluding implementers who had not yet begun implementation, or did not use a curriculum guide, or skipped the question.

Implementation Challenges

Grant Director Reports

Challenges Related to COVID-19

The COVID-19 pandemic was a major challenge for grantees. In their surveys, grant directors were asked about the single greatest challenge their school system (or school) had faced in implementing *Partners in Prevention* throughout the entire initiative. Of the nine grant directors who responded to this question, **six directors reported issues related to COVID-19, including disruptions to staff training and program implementation, student and staff absences due to quarantine, and the strain the pandemic placed on the entire school system.** When asked about their school system or school's greatest challenge in sustaining their *Partners in Prevention* program(s), one grant director reported the continued elevated stress on staff, students, and their families related to the pandemic.

For each program their schools implemented, grant directors were asked to what extent certain issues posed barriers to implementation in the COVID-19 environment. The table below shows **that teacher or implementer stress, student quarantines, increased time demands placed on teachers and implementers, and student stress were the most commonly reported moderate or major barriers to implementation.** Of the seven programs reporting any virtual implementation, only one reported challenges related to the remote implementation; for example, the program did not fit well with remote learning.

Grant Director-Reported Implementation Barriers

Grant Director-Reported Implementation Barriers in Context of COVID-19	Not a Barrier/Minor Barrier	Moderate/Major Barrier
	Total Number of Programs (N = 19)	
Teacher/implementer stress	10	9
Student quarantines	11	8
Time demands placed on teachers/implementers	12	7
Student stress	12	7
Schools' prioritization of academic subjects	15	4
Periodic school closures	15	4
Lack of student engagement or interest in sessions	16	3
Lack of teacher/implementer buy-in and engagement with SEL/prevention programming	17	2
Only if at least some virtual implementation (n = 7 programs)		
Students' lack of at-home internet access	6	1
Difficulty implementing session activities in remote setting	6	1
The program did not fit well with online/remote learning	6	1
Students' absence from online/remote learning (unrelated to internet access)	6	1
Lack of online/remote lesson materials for their program	7	0
Implementers' lack of experience or confidence teaching program virtually	7	0

Other Implementation Challenges

Some grant directors also mentioned time-related obstacles as their greatest challenges; these were also challenges to sustainability. In their surveys, three grant directors referenced difficulties finding or creating time to implement the program. One noted that state mandates and required testing reduced time that might otherwise be available for programming. With limited instructional time, preparing students for required testing (the results of which can influence funding) often takes priority over other programs.

Financial Challenges

In response to an open-ended survey question about their greatest implementation challenge across all 3 years, no grant directors named financial challenges. **Although grant directors did not report financial limitations during the grant period, continued funding poses a challenge to sustainability for some grantees.** Of nine grant directors who responded to an open-ended question about the greatest challenges to their school system or school for sustaining their *Partners in Prevention* program, three identified the need to find funding sources. One specifically noted that although they had been able to purchase the curriculum and associated materials for the coming years, they still needed to secure funding for staffing related to the program. (For more on funding and sustainability, see the Sustainability section).

Policy Challenges

The surveys presented grant directors with a list of seven potential policy challenges and asked them to say whether and by how much those challenges limited their organization's ability to deliver prevention programming to students. As shown in the table below, grant directors did not frequently identify policies as challenges. Overall, fewer than half of grantees reported encountering any given policy barrier. Grant directors were more likely to report that policies were minor barriers, if at all.

Grant Director-Reported Policy Barriers

Policy Barrier	Number of Grantees (N = 11)		
	Major Barrier	Minor Barrier	No Barrier
Policies mandating academic activities/benchmarks that, in turn, limit the amount of time available for prevention programs	2	3	6
Policies mandating school schedules (e.g., start/end dates, start/end times) that limit the amount of time available for prevention programs	1	1	9
Policies that allow individual students (or their parents) to opt out of prevention programming	0	5	6
Policies that limit what prevention content can be taught in schools	0	2	9
Policies that limit administrator ability to require teacher involvement in prevention programs	0	1	10
Policies that restrict what data can be collected or used for program monitoring and evaluation*	0	0	10
Policies that limit ability to apply for, request, or use funding for prevention programming	0	0	11

*One respondent did not complete this survey item.

The three policy areas most commonly identified as either major or minor barriers include policies related to academic benchmarks and associated time requirements, policies that allow students to opt out of prevention programming, and policies mandating school schedules. Some similar issues (e.g., time constraints) were cited as more challenging in other parts of the survey. These results imply that, although directors acknowledge those issues as challenges, most do not attribute the cause of the challenge to policies.

Implementer Reports

When an open-ended survey question asked implementers to write about their *greatest* challenge, **implementers most often expressed that they had insufficient time to**

deliver curricula to students, particularly with competing academic priorities. Low student and teacher engagement were other frequently reported challenges.

These challenges were also reflected quantitatively in a closed-ended survey question, where implementers were asked how often specific issues interfered with their ability to implement program sessions. As shown in the graph below, in Year 3 **more than half of implementers at least sometimes experienced challenges with having students who were not engaged or interested in sessions, not having enough time, having other more pressing demands during session time, and needing to prioritize academic subjects**. The percentage of implementers reporting most of these issues remained relatively stable across years. However, those reporting not having enough time decreased from 72% in Year 1 to 59% in Year 3.

In Year 3, lack of time and student engagement continued to be the top two barriers to student engagement. In Year 3, 49% of implementers reported that lack of time was sometimes a challenge and 10% reported it was often a challenge. Although overall student engagement remained strong in Year 3, 61% of implementers reported it was sometimes (47%) or often (14%) an issue.

Among the 22 implementers who reported delivering lessons virtually synchronously or asynchronously, the most common challenges—reported by about half—were that they could not see how students reacted to session activities in the virtual setting, and students not attending virtual sessions. Other challenges included lack of program materials for remote implementation and difficulty implementing activities in a remote setting.

Percentage of Implementers Reporting Challenges to Implementation
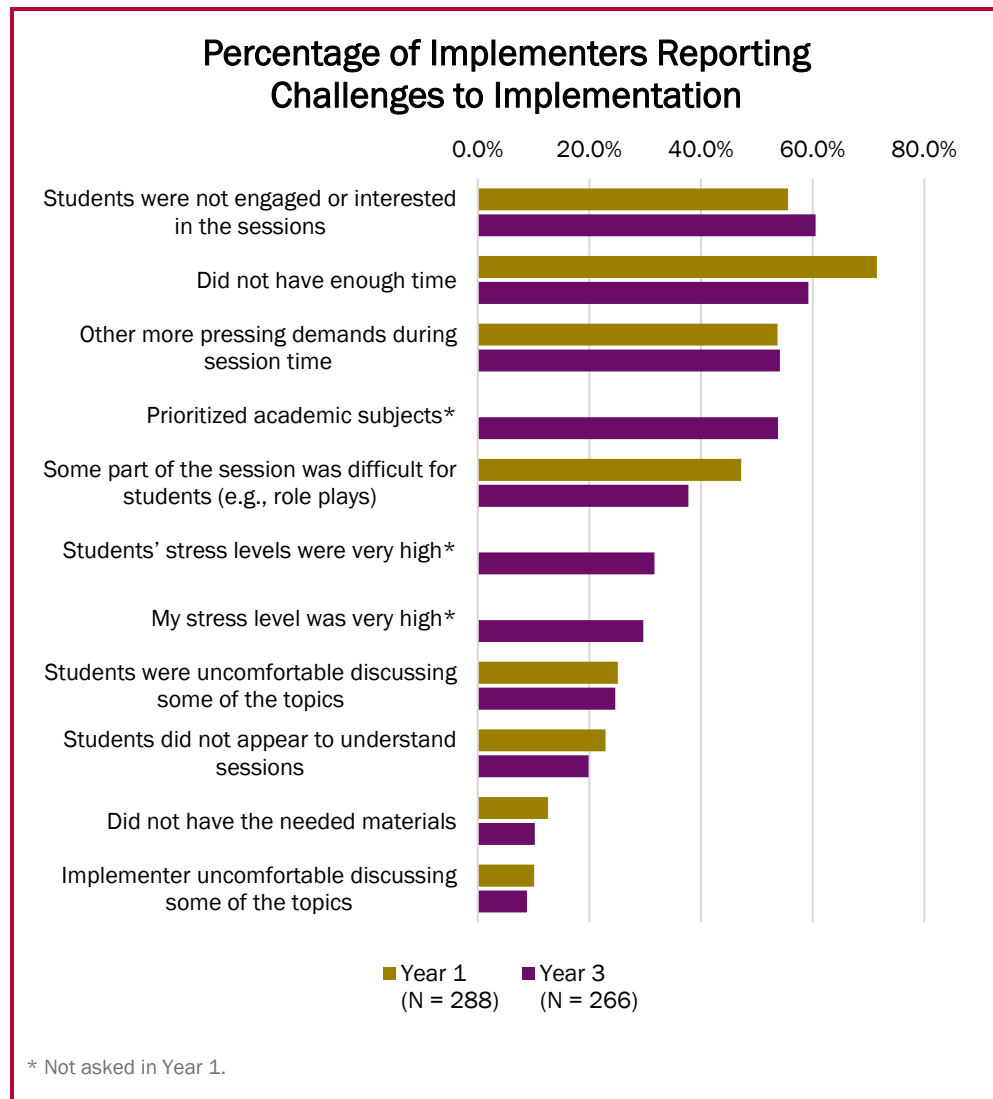
Grant Director Perspectives on Implementation Successes

In Year 3, grantees had moved through the peak of the COVID-19 pandemic and mostly returned to in-person instruction and program implementation. Although they continued to wrestle with mid- and long-term effects of COVID-19, grantees reported substantial accomplishments. In their surveys, nine grant directors listed what they considered to be the greatest accomplishment or success of their *Partners in Prevention* grant in Year 3, as well as the most significant impact of their school or school system's *Partners in Prevention* program to date, with similar responses to both questions:

- successful implementation of the program (five grant directors; 56%)

- students' increased SEL and skills; for example, how to make good decisions (five grant directors; 56%)

- increased student engagement (three grant directors; 33%)

- having created a coordinated SEL effort across grades that prioritizes social-emotional well-being and uses a common language (two grant directors; 22%)

- the use of student data to identify important areas of strength and growth (two grant directors; 22%)

- engaging parents and the community in the programming (one grant director; 11%)

- teachers' improved social-emotional competence (one grant director; 11%)

Student Outcomes

Implementer Perspectives on Student Outcomes

Implementers reported that that *Partners in Prevention* **programming has had positive impacts on their participating students.** Implementers were asked how effective they think their *Partners in Prevention* program has been in improving students' social and emotional skills over the 2 to 3 years of school implementation. **Using a scale from 0 (not at all effective) to 100 (extremely effective), on average, implementers rated the effectiveness at 70.**

Overall, most implementers reported that the program improved student outcomes in many areas. Implementers were asked how strongly they agreed or disagreed with a series of statements about the program's impact on students (results are displayed for elementary and secondary students in the table below). **The highest percentage of implementers reported that they agreed or strongly agreed that** *Partners in Prevention* **programming had a positive impact on students' self-management (90% for elementary school and 63% for secondary school implementers).** The next most highly rated areas of impact were **relationship skills** (86% for elementary and 55% for secondary), **social awareness** (83% for elementary and 54% for secondary), **responsible decision-making** (80% for elementary and 54% for secondary), **understanding the dangers of substance use/misuse** (79% for elementary and 51% for secondary school implementers), **and bullying** (62% for elementary and 45% for secondary school implementers).

For seven out of 10 outcomes, elementary school implementers rated the program's impact significantly higher than did secondary school implementers; nonetheless, most secondary school implementers also reported positive impacts. Additionally, some of the intended changes in outcomes among more mature students may be less visible in the classroom (e.g., high school students avoiding substance use).

Implementer Perceptions of Student Outcomes

The program has had a positive impact on...	Elementary school (N = 162) Secondary school (N = 108)	Percentage of Implementers					
		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable
student ability to cope with stressors related to COVID-19 pandemic	Elementary	7%	29%	50%	6%	1%	8%
	Secondary	6%	26%	57%	7%	2%	2%
reducing bullying at our school	Elementary	19%	43%	33%	5%	0%	0%
	Secondary	9%	36%	40%	10%	3%	2%
student self-awareness	Elementary	9%	44%	40%	7%	0%	1%
	Secondary	3%	21%	55%	18%	3%	1%
student self-management	Elementary	22%	68%	10%	0%	0%	0%
	Secondary	10%	53%	31%	5%	1%	0%
student social awareness	Elementary	20%	63%	16%	1%	0%	0%
	Secondary	7%	47%	39%	6%	1%	0%
student relationship skills with peers and teachers	Elementary	19%	67%	13%	1%	0%	0%
	Secondary	8%	47%	41%	3%	1%	0%
student responsible decision-making	Elementary	18%	62%	18%	2%	0%	0%
	Secondary	7%	47%	42%	4%	1%	0%
student understanding of the dangers of substance use/misuse	Elementary	19%	60%	19%	2%	0%	0%
	Secondary	7%	44%	44%	4%	1%	0%

The program has had a positive impact on...	Elementary school (N = 162) Secondary school (N = 108)	Percentage of Implementers					
		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable
student understanding the influences of peers and media on youth substance use/misuse	Elementary	7%	35%	44%	7%	1%	6%
	Secondary	6%	34%	52%	5%	1%	2%
preventing student substance use/misuse	Elementary	7%	35%	43%	8%	1%	6%
	Secondary	7%	38%	46%	6%	1%	2%

In an open-ended question about what they considered to be the most significant impact of *Partners in Prevention* programming since the project's beginning, **many implementers identified the program's positive impact on a range of student behaviors, including empathy, self-regulation, and problem-solving.** A number of implementers also commented that the program created time for student reflection and helped them learn about themselves and gain awareness of their emotions.

Grantee-Collected Data

This analysis of grantee-collected data includes data from all 3 years of implementation for the programs' pretest and posttest data and discipline data. As discussed in the Methodology section, the number of grantees and schools contributing data varied by year and outcome domain. The statistical power to detect differences is limited by the relatively small number of schools.

Pretest and Posttest Data

Within the same school year, some grantees assessed changes in knowledge, attitudes, skills, and other factors by administering pretests before students started the prevention curriculum and posttests after they finished the curriculum. The table below summarizes the number of schools and grantees that provided RTI program pretest and posttest summary statistics each year for each outcome domain. Note that although some students received the prevention programs in more than 1 year and may have contributed more than 1 year of pretest and posttest data, these data do not measure the same students over time.

Number of Grantees Submitting Sufficient Data for Final Analysis

Pretest and Posttest Domain	Number of Grantees and Schools Submitting Pretest and Posttest Data by Year					
	Grantees (N = 11 grantees)			Schools (N = 38 schools)		
	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Student curriculum knowledge	3	3	5	4	5	9
Social-emotional skills	3	5	7	5	16	20
Social and emotional well-being	N/A	1	3	N/A	10	12
Favorable/unfavorable attitudes toward substance use	3	3	5	3	3	7

STUDENT CURRICULUM KNOWLEDGE

For the domain of student curriculum knowledge, for each of the 3 implementation years, three to five grantees submitted pretest and posttest summary statistics on the average percentage of correct answers to curriculum knowledge questions across all students. (Note that not all programs have curriculum knowledge pretests and posttests, and some schools did not do this.) In Year 1, grantees provided data for five schools; however, one school was not included in this final analysis because students had been exposed to a similar curriculum shortly before this pretest, resulting in an unusually high pretest score. Five schools provided data for Year 2 and nine schools provided data for Year 3. **The programs included Botvin LifeSkills Training, Too Good for Drugs, and Too Good for Violence.**

The graph below displays the percentage change in student curriculum knowledge from pretest to posttest for each year. Note that the test scores are not for the same students each year. **For all 3 years, overall average test scores increased from pretest to posttest. In Year 1, scores increased by an average of 16 percentage points (p = .05); in Year 2 by 8 percentage points (p = .10); and in Year 3 by 8 percentage points (p < .01), The increases in curriculum knowledge were marginally statistically significant in Years 1 and 2, which had smaller sample sizes, and statistically significant in Year 3.**

Change in Student Curriculumn Knowledge Scores from Pretest to Posttest
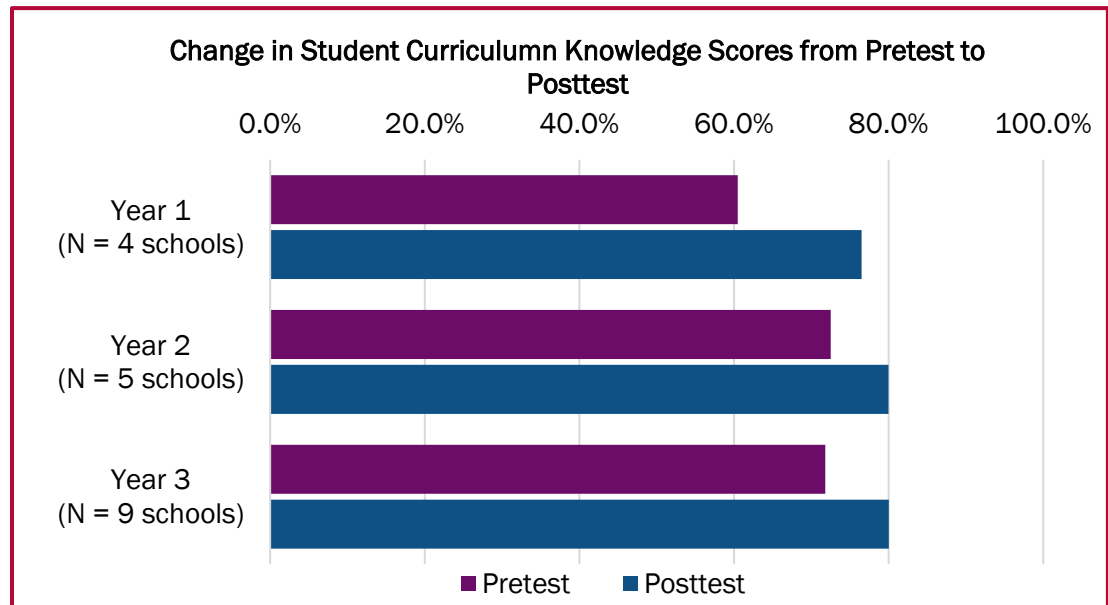
SOCIAL-EMOTIONAL SKILLS (AS TOOLS TO PREVENT SUBSTANCE USE)

The evaluation also examined the outcomes of social-emotional skills and social and emotional well-being, which relate to substance use outcomes. We examined changes in pretest and posttest scores for social-emotional skills in Years 1 through 3. We know that, nationally, students' social and emotional skills, psychological well-being, and behavior were negatively affected by the COVID-19 pandemic. **Although some of the measures varied by school, social-emotional skills tended to include such measures as self-management, emotional regulation, and social awareness.**

In Year 1, five schools reported pretest and posttest data for social-emotional skills. **The pretest and posttest scores for five schools showed an average increase of 0.7%, which was not statistically significant.**

In Year 2, 16 schools reported pretest and posttest data on social-emotional skills, but response types varied. Six schools reported this outcome as a school-level average score; however, one school used a different range of responses and was not included in the outcome model. Ten schools reported the outcome as a percentage, capturing the average percentage of positive responses for each of the categories of social-emotional skills that grantees measured. **A significant (p < .01) increase in social-emotional skills reported as an average score was found for the first group of schools. Schools that reported social-emotional skills as a percentage showed a small, nonsignificant decline at posttest.**

In Year 3, results were mixed. About half of the schools provided data that measured the scores as percentages and the other half as means; we analyzed these two groups separately. **For the 11 schools that provided outcome data in percentages, there was a small, marginally significant overall decrease in average scores (p = .05).** This result was affected by one grantee whose schools showed a small decrease in average scores pretest to posttest. **For the nine schools that provided outcome data in means, there was a significant improvement in mean scores for social-emotional skills (p < .001).**

SOCIAL AND EMOTIONAL WELL-BEING

We also examined changes in pretest and posttest scores related to social and emotional well-being, which grantees provided for Years 2 and 3 only. **Social and emotional well-being included measures like a sense of belonging and bonding with prosocial peers.**
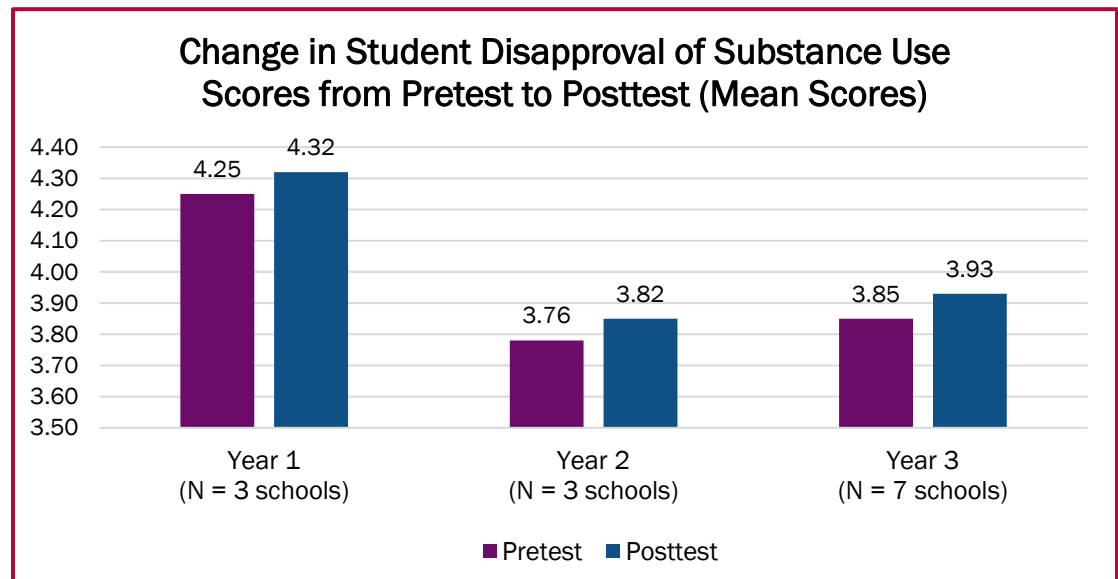
In Year 2, social and emotional well-being was reported by 10 schools and was measured as the school-level average percentage of students' positive responses to questions about their social and emotional well-being (e.g., sense of belonging). **In Year 2, the posttest reports indicated a significant (p < .05) decrease in the average social and emotional well-being scores (percentage of positive responses to social and emotional well-being questions)—a drop from 71% to 67% pretest to posttest. In Year 3, 12 schools provided data, and there was no significant difference in pretest and posttest scores.**

ATTITUDES TOWARD SUBSTANCE USE

We examined changes in survey pretest and posttest scores for students' favorable or unfavorable attitudes toward substance use. Attitudes toward substance use are correlates of substance use behavior. Although the specific survey questions varied depending on the instrument grantees used, we have provided below sample survey items from one grantee. **Students were asked to rate how much they agreed with a series of statements, including "It's wrong for someone my age to drink alcohol (beer, wine, liquor)" and "It's wrong for someone my age to use marijuana."** Student responses were aggregated by grantees to form overall means (i.e., one score per school per time period scaled as strongly disagree = 1, disagree = 2, neither agree nor disagree = 3,

agree = 4, and strongly agree = 5). Values of attitudes toward all surveyed substances were considered simultaneously in the evaluation model as a single representation of attitudes toward substance use.

The graph below presents the changes in mean scores for disapproval of substance use from pretest to posttest for each year. In Years 1 and 2, three schools reported pretest and posttest data. Disapproval of substance use increased slightly at posttest in both years, but this was not statistically significant. **In Year 3, from pretest to posttest across the seven schools that provided data, students' overall mean scale score increased by .07 (p = .05), which was marginally statistically significant. This means that in Year 3, on average, students' attitudes became more negative about substance use.**

Change in Student Disapproval of Substance Use Scores from Pretest to Posttest (Mean Scores)

Year	Pretest	Posttest
Year 1 (N = 3 schools)	4.25	4.32
Year 2 (N = 3 schools)	3.76	3.82
Year 3 (N = 7 schools)	3.85	3.93

School Discipline

Grantees also provided non-suspension, non-expulsion discipline data (e.g., office referrals) for their schools for all 3 implementation years: the 2019–2020, 2020–2021, and 2021–2022 school years. (Suspensions and expulsions are reported on later in this chapter as part of the analysis of IDOE administrative data.) **The results of our meta-analysis of grantee discipline data describe trends during** *Partners in Prevention* **implementation; we do not have pre-intervention data for this measure. Note that the COVID-19 pandemic, which led to school building closures from at least March to June 2020, affected discipline outcomes and data and should be considered when interpreting trends. In addition, in Year 2, many schools had a mix of remote, in-person, and hybrid learning, which may have affected disciplinary patterns.**

RTI analyzed data for which schools had at least 2 years of data with matching grades; to ensure a valid year over year comparison, schools that changed the grade levels from which they collected discipline data from one year to the next were not included in the analysis. The final analysis included data from 10 of the 11 grantees, including nine elementary schools, five middle schools, and seven high schools, totaling 21 schools out of the 38 schools in the initiative. Below are the findings by school level:

- For elementary schools (nine schools), the rate of discipline incidents did not significantly change over the 3-year period.

- For middle schools (five schools), the rate of discipline incidents decreased significantly from Year 1 to Year 2 (p < .01). Although the rate of discipline incidents increased from Year 2 to Year 3, this was not statistically significant (p = .11). Overall, the rate of discipline incidents decreased between Year 1 and Year 3, but this did not reach statistical significance (p = .15).

- For high schools (seven schools), the rate of discipline incidents declined significantly from Year 1 to Year 2 (p < .01), then increased slightly from Year 2 to Year 3 to a marginally statistically significant degree (p = .06); however, the overall rate decreased between Year 1 and Year 3, which was also marginally statistically significant (p = .06).

Taken together, the results show a trend of decreased office referrals in high schools.

Indiana Youth Survey

Substance use. To understand student substance use trends over time, the evaluation compiled INYS data from 10 participating *Partners in Prevention* schools on students' use of alcohol, marijuana, cigarettes, electronic vapor products, and unprescribed prescription painkillers. These past-30-day measures of substance use are based on self-reported use by students in sixth to 12th grade. Students in sixth grade were not asked about past-30-day electronic vapor product use. Although this analysis includes findings from 10 *Partners in Prevention* schools, not all of these schools participated in the INYS each year.

The graph below shows 2020, 2021, and 2022 rates of use: the percentage of students who reported using each of these substances in the 30 days prior to completing the INYS. These percentages reflect all students who attend these schools. For most substances, differences in rates of use by year were not statistically significant. **However, there was a marginally significant decrease (p < .10) in alcohol use from 2020 to 2022. Although prescription painkiller and marijuana use were relatively unchanged from 2020 to 2022, prescription painkiller use decreased from 1% to .5% (not statistically significant). Electronic vapor and cigarette use showed statistically nonsignificant decreases overall and from year to year.**

Percentage of Students in Grades 6–12 Reporting Past-30-Day Substance Use (N = 10 Schools)
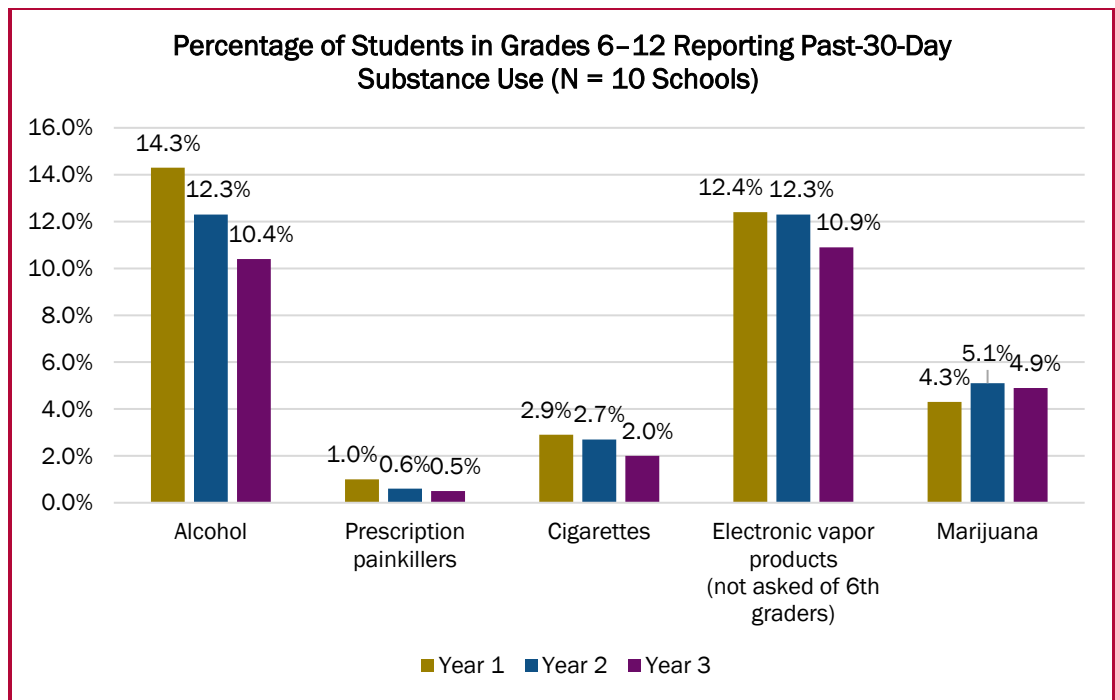
Source: Indiana Youth Survey (INYS)
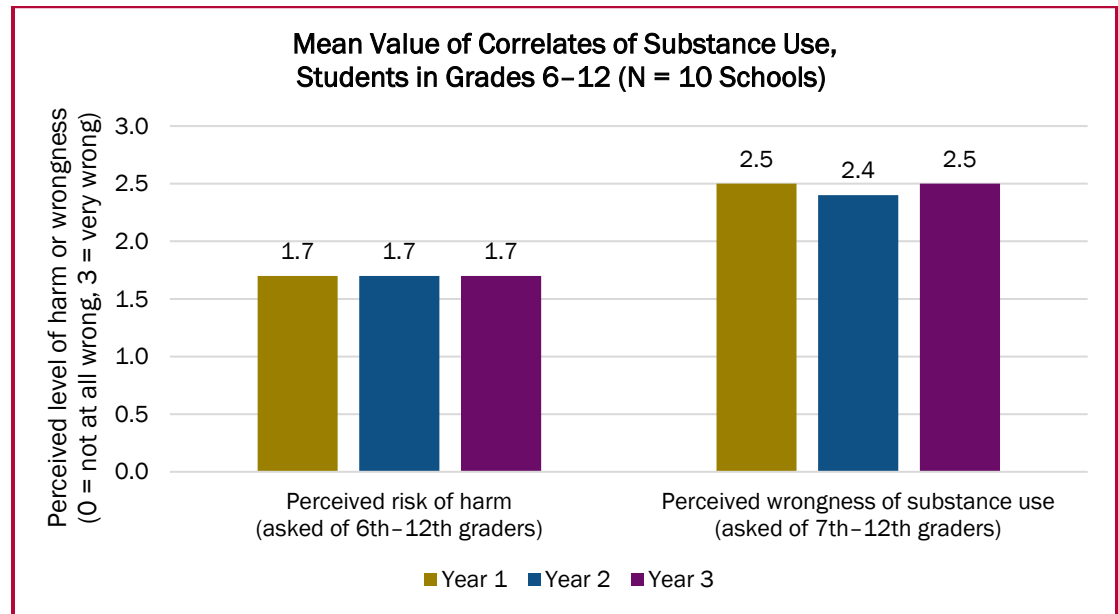Note: Sixth-grade students were not asked about past-30-day electronic vapor use.

Correlates of substance use. The evaluation also used INYS data to measure two correlates of substance use: perceived risk of harm from substance use and favorable or unfavorable attitudes toward substance use. Perceived risk of harm measures factors such as how likely a student thinks they or others are to experience negative outcomes if they engage in substance use or how much people risk harming themselves. Perceptions of substance use approval measure the extent to which a student believes it is wrong to use substances.

To measure perceived risk of harm, the INYS asked students:

"How much do you think people risk harming themselves (physically or in other ways) if they…? *Smoke one or more packs of cigarettes per day*, *Try marijuana once or twice*, *Smoke marijuana once or twice per week*, *Take one or two drinks of an alcoholic beverage (beer, wine, or liquor) nearly every day*, *Have five or more drinks of an alcoholic beverage once or twice a week*, and *Use prescription drugs not prescribed to them*." **For the purposes of this evaluation, students' responses to these items were considered simultaneously, effectively modeling a single perceived risk of harm measure (0 = no risk, 3 = great risk).**

To measure favorable or unfavorable attitudes toward substance use, the INYS asked students, "How wrong do you think it is for SOMEONE YOUR AGE to…? *Drink beer, wine, or hard liquor (for example, vodka, whiskey, or gin) regularly, that is, at least once or twice a month, Smoke cigarettes, and Smoke marijuana.*" **For the purposes of this evaluation, students' responses to these items were considered jointly as a combined approval metric (0 = not at all wrong, 3 = very wrong).**

Perceived risk of harm was relatively unchanged from 2020 to 2022, with no statistically significant differences. Attitudes about substance use were also relatively stable but showed marginally significant differences from 2020 to 2021, with disapproval of use slightly lower in 2021 but unchanged between 2020 and 2022. The graph below shows the yearly levels of each outcome.

Source: Indiana Youth Survey (INYS)
Note: Sixth-graders did not report on favorable attitudes toward substance use.

Depressive symptoms. To assess depressive symptoms, students were asked, "During the past 12 months, did you ever feel so sad and hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?" Rates of depression were largely unchanged across the three assessments. **From 2020 to 2021 the percentage of students who answered "yes" increased slightly (not statistically significant) from 34.7% to 37.7%. The percentage answering "yes" then decreased slightly to 35.1% in 2022. None of these changes were statistically significant.** The figure below shows the rates of depression symptoms in 2020, 2021, and 2022.
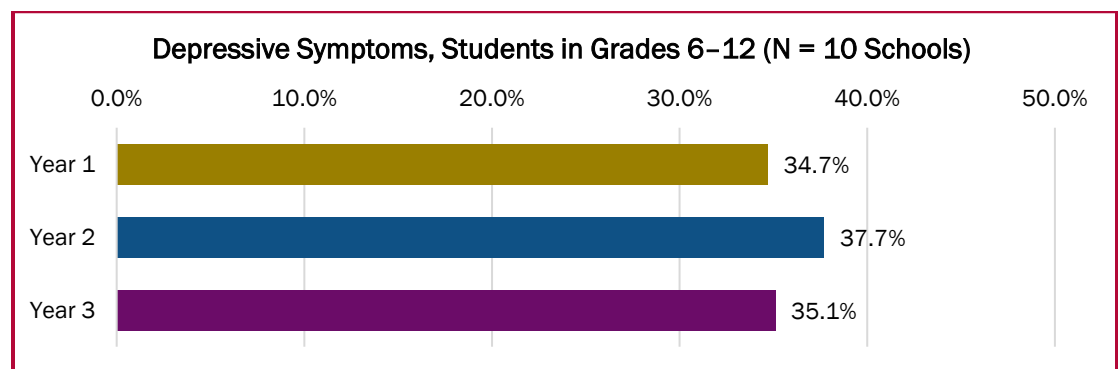
Source: Indiana Youth Survey (INYS)

Taken together, the INYS data show a notable, marginally statistically significant decline in past-30-day alcohol consumption, along with non-statistically significant decreases in

use of other substances except marijuana. Other outcomes remained generally flat over the 3-year period.

Some highlights from the statewide INYS data provide additional context for the INYS data for the *Partners in Prevention* schools.[16, 17] Bear in mind that the statewide survey has many more participating schools and thus more statistical power to detect small differences over time. Also, in 2020, because of the COVID-19 pandemic, data collection was shortened. A total of 281 schools statewide participated in the 2020 INYS, a decrease of 31% from 2018, during which 407 schools participated. For the 2022 INYS, data were collected from 323 schools.

For past-30-day substance use, the statewide INYS found a statistically significant decrease in use of alcohol. Among students in grades 7–12, use declined from 15.1% in 2020 to 10.9% in 2022; among students in sixth grade, it declined from 4.5% to 4%. From 2020 to 2022, there were also state-level decreases reaching statistical significance for use of electronic vapor, marijuana, and cigarettes, as well as for prescription drug misuse. During this period, among students in grades 7–12, state-level estimates of substance use norms—perceptions of how wrong it is for peers to use substances—stayed relatively flat, except for a slight increase in perceived wrongness of peer marijuana use. Finally, the percentage of students reporting depressive symptoms increased modestly among students in grades 7–12, from 34.7% in 2020 to 35.7% of students in 2022 reporting that during the past 12 months, they felt so sad and hopeless almost every day for 2 weeks or more in a row that they stopped doing some usual activities. The increase was sharper among sixth-graders, from 28.9% to 35.2%. Except for marijuana use, these patterns are overall similar to results from our analysis of the ten participating *Partners in Prevention* schools.

School-Level Administrative Data

For this report, RTI obtained and analyzed school-level administrative data for 10 variables related to student achievement, behavior, and standardized testing. These variables included the Indiana Reading Evaluation and Determination grade 3 (IREAD-3) test scores, graduation rates, grade retention, excused and unexcused absences, in- and out-of-school suspensions data, and dropout data (annual and cohort). We examined trends for schools served by *Partners in Prevention* and schools in comparison county Madison County, Indiana, for the 5 years before *Partners in Prevention* implementation through the 3 years that *Partners in Prevention* was implemented.

The statistical analysis of *Partners in Prevention* impact on the 10 outcomes was based on interrupted time series multilevel regression models. These models assessed the overall change in outcome level between the pre- and post-intervention years. The pre-intervention years include the 2014–2015 through the 2018–2019 school years; the

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[16] Jun, M., Gassman, R., Agley, J. D., Samuel, S., & Lee, J. (2022). Indiana Youth Survey—2022. Prevention Insights. https://inys.indiana.edu/docs/survey/indianaYouthSurvey_2022.pdf

[17] Prevention Insights, Indiana University. (2022). Indiana Youth Survey 2022 interactive data explorer: Trends over time. https://inys.indiana.edu/data-explorer/trends.php

post-intervention years include the 2019–2020 through the 2021–2022 school years. For the IREAD-3, graduation rates, retention, and dropout variables, the most recent data available were for the 2020–2021 school year.[18] For outcomes that spanned primary and secondary school grades, the models controlled for school level.

Note that the COVID-19 pandemic school closures in spring 2020 and pandemic-related disruptions since then likely influenced trends in multiple outcomes. However, the pandemic likely affected the *Partners in Prevention* and Madison County populations and schools in a similar way; for the outcomes analysis, having a comparison county helps to address this type of confounding influence.

The table below presents results for each outcome. The middle column of the table presents a summary of the results of the statistical model that assesses any differences in trends between *Partners in Prevention* and Madison County schools, comparing the pre- and post-intervention periods. The text also provides a very brief descriptive summary of the trends of IDOE raw data (not statistically modeled). The column on the far right displays small line graphs of the descriptive trends in outcome data from the 2014–2015 to the 2020–2021 or 2021–2022 school years, depending on the most recent data available. Schools served by *Partners in Prevention* are represented by a solid line; Madison County schools are represented by a dashed line. The red portion of each line represents the post-intervention years, from the start of implementation during the 2019–2020 school year through the most recent school year for which data were available. **As shown in the table,** *Partners in Prevention* **schools improved on two outcomes in the post-intervention period:**

- rate of excused absences (p < .01, statistically significant)

- rate of unexcused absences (p < .10, marginally statistically significant)

In addition, pre- to post-intervention, outcomes were significantly better for *Partners in Prevention* than comparison schools for rate of excused absences (p < .01, statistically significant).

On the other hand, *Partners in Prevention* schools showed a significant increase (p < .05) in their retention rates pre- to post-intervention. Although they had been significantly lower on this outcome than comparison schools in the pre-intervention time frame (p < .01), this difference between the two groups was no longer significant. Other outcomes did not statistically differ between the *Partners in Prevention* and comparison schools.

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[18] The regression models included the year of the outcome data (used to estimate the overall linear change in the outcome across all timepoints), an indicator of intervention status (1 for *Partners in Prevention* or 0 for comparison schools; used to capture pre-existing differences in the two groups), and an indicator of implementation of *Partners in Prevention* for treatment schools during the program period. This last effect was the estimate of the "treatment effect" of *Partners in Prevention* across multiple years of implementation and represents the deviation of those schools from the overall trend beyond the differences associated with pre-existing (i.e., baseline) differences.

There were still many favorable trends in the post-intervention period for the *Partners in Prevention* schools, including overall decreases in rates of in-school and out-of-school suspensions, and expulsions, though not statistically significant. These patterns did not significantly differ from trends for the Madison County schools.

School-Level Administrative Data Outcomes for *Partners in Prevention* Schools and Comparison County Schools

Outcome	Change from Pre-intervention Years to Post-intervention Years	Mini Graph, 2014–2015 to 2021–2022 School Years* Solid line = *Partners in Prevention* schools Dashed line = Madison County Schools Red line = post-intervention years)
Achievement		
IREAD-3 (grade 3 reading test scores)	Comparing pre- and post-intervention years, *Partners in Prevention* and comparison schools did not statistically differ. Following the COVID-19 pandemic, IREAD scores decreased for both intervention and comparison schools—slightly more for comparison schools. (Data were not available for the 2019–2020 and 2021–2022 school years.)	
Graduation	The overall rate of graduation in the post-implementation period did not statistically differ between groups. In the post-intervention period, graduation rates slightly increased among *Partners in Prevention* schools, then decreased modestly in the 2020–2021 school year, when the two groups showed the same graduation rates. (Data were not available for the 2021–2022 school year.)	

Outcome	Change from Pre-intervention Years to Post-intervention Years	Mini Graph, 2014–2015 to 2021–2022 School Years* Solid line = *Partners in Prevention* schools Dashed line = Madison County Schools Red line = post-intervention years)
Grade retention (students having to repeat the same grade)	*Partners in Prevention* schools began significantly (p < .01) lower in retention rates than comparison schools, but in the post-implementation period, *Partners in Prevention* schools increased significantly (p < .05) and the difference between the two groups of schools was no longer significant. In the pre-pandemic post-intervention period (2019–2020), both groups showed decreased retention rates, followed by increased rates after the pandemic. (Data were not available for the 2021–2022 school year.)	 2015 2021
Behavior		
Excused absences	Schools served by *Partners in Prevention* showed significantly lower rates of excused absences in the post-intervention years than the comparison schools (p < .01). These schools showed a significant decrease in excused absences in the post-intervention period relative to their pre-intervention period (p < .01). In the 2021–2022 year, both groups showed increased rates.	 2015 2022

Outcome	Change from Pre-intervention Years to Post-intervention Years	Mini Graph, 2014–2015 to 2021–2022 School Years* Solid line = *Partners in Prevention* schools Dashed line = Madison County Schools Red line = post-intervention years)
Unexcused absences	Schools served by *Partners in Prevention* showed marginally significantly lower rates of unexcused absences post-intervention compared to their rates pre-intervention (p < .10), but there were no significant differences between the groups in either the pre- or post-intervention period. Raw rates increased for both groups toward the end of the post-intervention period, with a larger increase for comparison schools.	2015 2022
In-school suspension	No significant difference between groups post-implementation. Both showed overall declines in the rates of in-school suspension during the post-intervention years.	2015 2022
Out-of-school suspension	No significant difference between groups post-implementation. Both showed overall declines in the post-intervention years.	2015 2022

Outcome	Change from Pre-intervention Years to Post-intervention Years	Mini Graph, 2014–2015 to 2021–2022 School Years* Solid line = *Partners in Prevention* schools Dashed line = Madison County Schools Red line = post-intervention years)
Expulsion	No significant difference between groups post-implementation. Overall, expulsion rates declined for both groups in the post-intervention years.	
School dropout – cohort (percentage of the 4-year high school cohort, based on when they entered high school, that stopped pursuing a high school diploma)	No significant difference between groups post-implementation. Overall, cohort dropout rates increased for both groups in the post-intervention year, 2020–2021. (Data were not available for the 2018–2019, 2019–2020, and 2021–2022 school years.)	
School dropout – annual (percentage of students enrolled in grades 9–12 that dropped out in a single year without completing high school)	*Partners in Prevention* schools were significantly higher pre-intervention (p < .05) and this difference became larger post-intervention (p < .01). In the post-intervention year, 2020–2021, rates increased for *Partners in Prevention* schools and the comparison schools. (Data were not available for the 2018–2019, 2019–2020, and 2021–2022 school years.)	

Note: Pre-intervention school years are the 2014–2015 through 2018–2019 school years. Post-intervention years are the 2019–2020 through 2021–2022 school years.

School and Teacher Outcomes

Programs Embedded in Schools

The evaluation examined multiple facets of how *Partners in Prevention* programs were embedded in schools. These included education and involvement of non-implementing staff in programming. In their surveys, grant directors reported on non-implementer school staff and stakeholders who participated in program training or who were provided information about program content or messages outside of formal trainings.

As shown in the table below, in all 3 years, grantees were most likely to train and share program content or messages with school administrators. **In Year 3, fewer grantees trained non-implementing teachers and librarians than in previous years, but more grantees provided these and other stakeholders with program information.** Across all years, food service staff, custodial staff, and parents were sometimes trained or provided with program information.

Number of Grantees That Trained or Shared Program Content with Non-implementing Staff or Community Members

| Non-implementing Staff or Community Members | Number of Grantees (N = 11) | | | | | |
| | Training | | | Sharing Program Content or Messages | | |
	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
School administrators (e.g., principal, head of school)	6	3	3	4	5	6
Guidance counselors, school psychologists	4	0	2	0	0	4
Teachers not implementing program, school librarians	6	4	1	6	4	7
School board members, trustees, superintendents	1	2	1	0	1	1
Clerical or secretarial staff, school aides	3	1	1	3	1	2
Food service staff	1	0	1	1	0	1
Custodial staff	0	0	1	0	0	1
Parents	2	1	0	2	2	3
Bus drivers	0	1	0	0	0	1
School caseworkers or social workers	2	0	1	1	1	2
Service providers for students with disabilities (e.g., speech or physical therapist)	2	0	0	1	0	0

Non-implementing Staff or Community Members	Number of Grantees (N = 11)					
	Training			Sharing Program Content or Messages		
	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
Coaches	0	0	0	0	0	0
School nurses or nurses in school-based clinic	0	0	0	0	0	1

Grant directors also reported on parental involvement in the program. **As shown in the table below, 82% of grant directors (nine of 11) reported that parents provided positive feedback about program implementation in Year 3, a notable increase from 64% in Year 2 and 36% in Year 1. For 58% of programs being implemented, grantees reported that their schools had provided parents with information and activities at least twice to reinforce the program at home; for 16% of programs, they did so at least once.** For another 16% of programs, grant directors said that schools have not yet provided this information to parents but will do so at least once during the program this year. For only one program, a grant director reported no plans to provide parents with information. In addition, one-quarter of implementers reported that parents had completed program activities sent home with students.

Number of Grantees Reporting Parental Involvement

Parental Involvement	Number of Grantees		
	Year 1 (N = 11)	Year 2 (N = 11)	Year 3 (N = 11)
Provided positive feedback on how they felt program implementation was going	4	7	9
Participated in planning for *Partners in Prevention* project	2	3	1
Provided negative feedback on how they felt program implementation was going	1	1	1
Provided resources (e.g., money, time, materials) to support program implementation	0	1	0
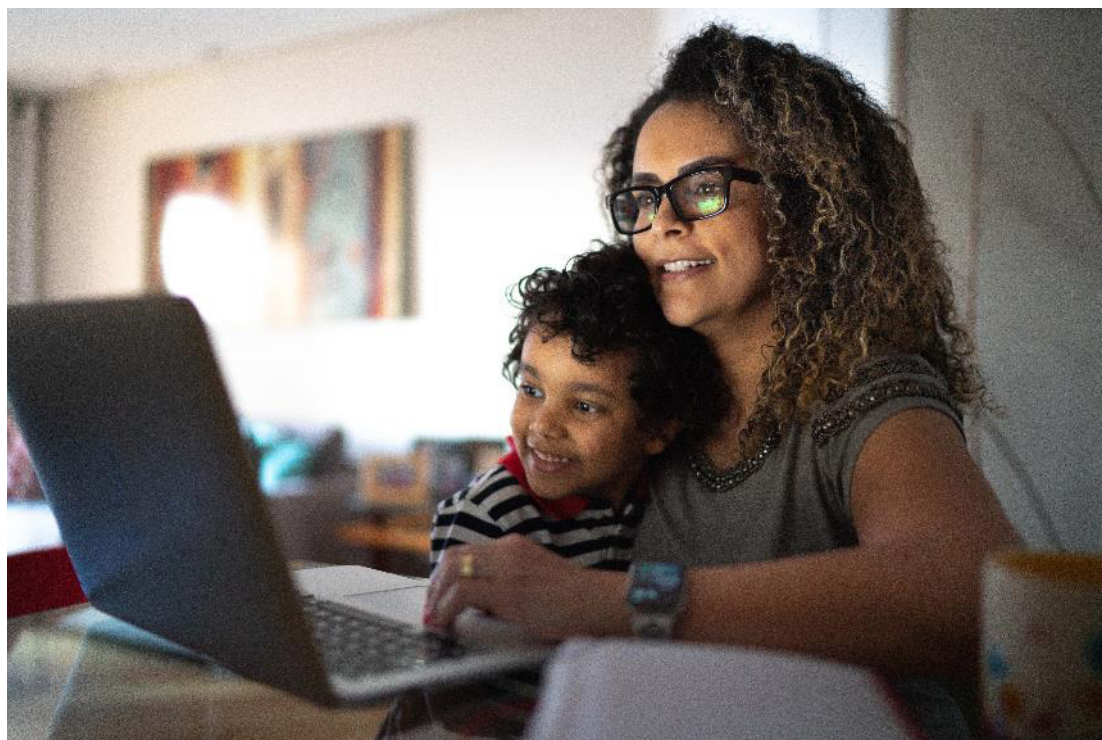
In Year 3, grantees were asked about modes of communication with families at home. **The table below shows that just under half the programs used or planned to use newsletters to communicate information and activities that reinforced program messages and lessons at home.** Grantees reported that programs most often sent newsletters either monthly or two or three times during the year. The second-most popular mode of communication was social media, followed by events at school and discussions with families after specific incidents. Grant directors reported making social media posts weekly for two programs, monthly for two programs, and less frequently (two to three times) for other programs. In addition, for about one-quarter of the programs, grantees reported that communications addressed why they were conducting prevention/SEL programs.

Frequencies of Modes of Communication with Parents

Mode of Communication Reported by Grant Directors	Frequency (N = 19 programs)	Percentage (out of 19 programs)
Newsletters	9	47%
Social media	7	37%
Parent/guardian events at school	5	26%
Discussion with parent/guardian after an incident	4	21%
Parent and teacher conferences	3	16%
Family-oriented SEL assignments	2	11%

Implementers were also asked about their communications with parents. **Fifty-eight percent of implementers reported using newsletters, while 19% of implementers said they used social media to reinforce the program's messages and lessons.** In addition, about one-fifth of implementers reported communicating with parents about how the school is integrating the prevention/SEL program with academics.

Implementers also responded to a series of questions about the degree to which *Partners in Prevention* programming was embedded in their schools.

- Fifty-seven percent of implementers reported that program materials or messages were often (27%) or occasionally (30%) incorporated into the school environment, such as in posters or morning announcements—almost identical to last year.

- Consistent with the last 2 years, almost two-thirds of implementers (62%) reported that program concepts or messages had been incorporated into their school's schoolwide expectations. Just over one-quarter of implementers (29%) said that they did not know whether this had happened.

- Also consistent across all 3 years, three-quarters of implementers reported often (31%) or occasionally (44%) referencing program content or messages when interacting with students outside of the program implementation setting.

- Over half (56%) of implementers reported mentioning school mental health or counseling services, 31% reported mentioning school health services, and 15% reported mentioning drug and alcohol counseling services at school. These are all consistent with last year.

Impact on Implementers

In addition to student impact, implementers were asked about the effect *Partners in Prevention* programming had on them. About half the implementers surveyed (148) provided details in answers to the open-ended question "How has implementing this program affected you personally?" Three times as many implementers felt the program impacted them positively as those who perceived a negative or neutral impact. **About one-third of those responding positively said the program improved their own self-awareness or that they had applied techniques to themselves or family members. More than a third noted the program increased their knowledge of SEL or provided structure, guidance, and language for building SEL skills with their students. About one-quarter reported improved connections with their students.** Several implementers noted that the program improved their awareness of students' emotional states or mental health needs. A handful of implementers described the program as "fun" and conveyed that they enjoyed teaching the lessons.

Fifteen out of the 148 responding implementers reported that the program had no effect on them personally; the same number of implementers said the program created personal stress, usually due to having to find time for implementation or working with students who were not engaged in the program.

When implementers were asked in an open-ended question what they considered to be the most significant impact of *Partners in Prevention* programming since the start of the initiative, **some implementers described improved communication, openness, and connection between students and their teachers**; a few linked this to the common language introduced by the program. **Some implementers also highlighted the program's positive impact on teacher behavior, as it provided them constructive approaches to dealing with student behavior issues and other situations.**

Classroom Climate

The implementer survey presented implementers with a series of statements about the general climate of their classrooms (not just during *Partners in Prevention* programming). Implementers responded on a scale from 1 (strongly disagree) to 5 (strongly agree). The items cover the constructs of peer relations, student satisfaction with the class, and difficulty of the coursework for students. Almost three-quarters agreed or strongly agreed that students in their class got along well with each other and 86% agreed or strongly agreed that students seem to like their class. Just over 70% agreed or strongly agreed that most students knew how to do their work very well.

The table below presents scores for each year for the items comprising the implementers' perceived student satisfaction, peer relations, and classroom difficulty subscales. **Comparing scores from Year 1 to Year 3, all three subscales significantly improved: perceived student satisfaction with class increased ($p < .05$), perceived peer relations improved ($p < .05$), and perceived classroom difficulty decreased ($p < .01$).**

Implementer-Rated Classroom Climate

Classroom Climate Dimension (Subscale)	Sample Item	Mean Score			Year 1 vs. Year 3 Difference
		Year 1	Year 2	Year 3	
Student satisfaction	Students are happy with the class.	3.80	3.86	3.91	Increased (p < .05)
Peer relations	All students in the class get along well with each other.	3.01	3.38	3.33	Increased (p < .05)
Classroom difficulty	Only the brightest students can do all the work.	2.33	2.30	2.16	Decreased (p < .01)

Scores: 1 = strongly disagree; 2 = disagree; 3 = neither agree nor disagree; 4 = agree; 5 = strongly agree

As the *Partners in Prevention* initiative entered its third and final year, many grantees turned their attention to planning for sustainability of their prevention/SEL programs after funding ended. The following section describes sustainability plans, challenges, and successes reported in the grant director surveys. **Because surveys were completed midway through Year 3 (January 2022) results do not include any progress toward program sustainability in the second half of the year.** HFL provided RTI with brief updates on grantee funding at the end of the year, summarized in this section.

Continuing Implementation

Nineteen programs were implemented across all grantees in Year 3. **Grant directors reported plans to continue implementing 12 of the programs (63%) after funding for *Partners in Prevention* ends, and another five (26%) said they would "maybe" continue implementing the same prevention/SEL program. The final two (11%) reported that they would not continue the current program but planned to implement another prevention/SEL program.** None of the grant directors reported plans to discontinue providing prevention/SEL programming.

Among programs that relied exclusively on HFL funding, about half reported "definitely" continuing program implementation and half reported "maybe" continuing. Sixteen (84%) of the programs receiving funding from sources outside of the Foundation planned to "definitely" continue implementation. Among programs that relied exclusively on the Foundation for funding, about half reported "definitely" continuing program implementation and half reported "maybe" continuing.

Grant directors were also asked about plans to continue implementation of specific activities after HFL funding for *Partners in Prevention* ends. Of the 12 programs for which grant directors said they would "definitely" continue program implementation, grant directors reported they will continue outcome data collection for 11 (92%) programs. Grant directors reported that program monitoring will continue for 10 programs (83%). Program training for new implementers will continue for eight of the programs (67%) and training for current implementers will continue for one program (8%). Grant directors did not provide explanations for these plans in the survey.

Among the grant directors who reported they would not continue implementing the same program after *Partners in Prevention* funding ends, one said the program was not a good fit because program materials were costly, and some topics are already a part of the school curriculum. The other director reported that they are seeking a program that offers more interactive SEL experiences.

Sustainability Planning Across All Years

Grant directors were asked to describe the greatest challenge for sustaining their *Partners in Prevention* program. **Three directors cited accessing sources of funding to**

continue programming. Two directors reported competing priorities (e.g., academic performance and student attendance). Two directors reported challenges with finding time for training and program implementation. Only one director cited ongoing pandemic-related challenges as the greatest challenge to continued programming.

In their annual survey, conducted in January, grant directors responded to questions about the extent to which their school system (or school) engaged in various planning activities during the current school year to sustain the *Partners in Prevention* programming after the end of their grant. The survey asked about nine different areas of sustainability planning, as shown in the table below. For each planning area, grant directors were asked about which activities they undertook, with these response options: No discussion (0); Limited discussion with no clear plan (1); Discussion with tentative plan (2); Discussion with firm plan (3); Executed plan (4). We converted the response options to a 0–4 scale and produced mean scores. The overall mean sustainability planning score was 1.3. The mean score for each activity is shown in the table below. Grant directors' sustainability planning often fell between the stages of "limited discussion with no clear plan" (1) and "discussion with tentative plan" (2). **On average, by January, grantees had discussions in six areas of sustainability planning in Year 3, shown in the table by activities with scores above 1**.

Average Level of Grantees' Sustainability Planning Activities through January 2022

Sustainability Planning Activity (Did your school system make plans to...)	Mean Score Across Grantees		
	Year 1	Year 2	Year 3
determine the funds needed to sustain *Partners in Prevention* programs	2.00	2.09	2.45
make the program a line item in the budget of your organization, schools, or community	2.00	1.60	1.90
determine how the program aligns with the mission and goals of potential future stakeholders	1.88	2.30	1.36
present outcome data to potential stakeholders (e.g., school board members, principals, parents)	1.88	1.40	1.27
secure funds from sources other than grants	1.56	0.56	1.00
secure funds by applying for additional grants	1.56	1.50	1.00
identify key stakeholders who might support the program	1.38	2.00	0.73
discuss with local leaders how the program relates to the community's overall prevention needs	1.13	1.30	0.45

Note. The number of grant directors responding to these items ranged from nine to 11; the averages are among those responding to each item.

Score range 0–4; 0 = No discussion; 1 = Limited discussion with no clear plan; 2 = Discussion with tentative plan; 3 = Discussion with firm plan; 4 = Executed plan

Although determining the funds needed to sustain programs was a focus of planning across all 3 years, grantee activities around sustainability planning shifted focus over the

course of the grant, with no clear overarching trend. For example, the mean for determining the funds necessary for continued program implementation increased every year, whereas presenting outcome data to potential stakeholders scored lower each year. Two areas that peaked in Year 2 were related to engaging key stakeholders (determining how the program aligns with the mission and goals of potential future stakeholders; identifying key stakeholders who might support the program), while securing funds from sources other than grants was lower in Year 2 compared to the first and third years.

Grant directors did not provide explanations for their responses in the survey. The following sections focus on Year 3 and include other survey items about funding that provide more context for reported planning activities.

Funding in Year 3 and the Future

In Year 3, HFL was the sole source of funding for the implementation and administration of *Partners in Prevention* programs for most (eight) grantees. In their surveys, three grant directors reported receiving support from other sources, including the federal government (Title I and Title IV funds) and the Indiana Division of Mental Health and Addiction. The average amount of external funding received was just over $3,700; however, funds varied from $1,700 to $7,500. Grantees need funding to pay for expenses such as staff support, program fees, and materials.

The table below shows how many grant directors in Year 3 were at each of the four stages of sustainability planning described in the previous section (see Sustainability Planning Across All Years). At the time of the survey in January 2022, five directors had held discussions and made tentative plans to determine the funds needed to sustain the *Partners in Prevention* programs, four made firm plans, and one had already executed their plan. Six grantees made tentative (five) or firm (one) plans related to making the programs a line item in their school corporation, school, or other government entity's budget, one executed this plan, and two grantees held discussions but made no clear plan. Six grantees held discussions but had no clear plans (five) or tentative plans (one), and one had executed a plan to secure funds by applying for additional grants. Finally, six grantees held discussions and made a tentative plan (four) or no clear plan (two) to secure funds from sources other than grants.

Year 3 Grantee Level of Sustainability Planning Activities through January 2022

Sustainability Planning Activity in Year 3 (N = 11)	Number of Grant Directors Reporting Each Activity				
	No discussion	Limited discussion with no clear plan	Discussion with tentative plan	Discussion with firm plan	Executed plan
Determine funds needed to sustain PiP programs	0	1	5	4	1
Make programs a line item in budget	1	2	5	1	1
Apply for additional grants	4	5	1	0	1
Secure funds from sources other than grants	4	2	4	0	0
Identify key stakeholders who might support the programs	4	6	1	0	0
Determine how the programs align with mission of potential future stakeholders	3	2	5	1	0
Discuss with local leaders how the program relates to the community's overall prevention needs	7	3	1	0	0
Present student outcome data to potential stakeholders	3	4	3	0	1

PiP = *Partners in Prevention*

In the survey, five grant directors reported plans to replace *Partners in Prevention* funding with funds from the school corporation or the individual school for the 2022–2023 school year. Three directors planned to replace current funding with funds from the federal government, while two directors planned to use local government funding. Two directors planned to source funds from faith-based organizations and one director planned to use funds from corporate or individual donations.

HFL provided an update for 10 of 11 grantees at the end of Year 3. Nine grant directors reported that they were continuing with one of the *Partners in Prevention* programs and/or had embedded the program into academic instruction, implying that funds were available for their plans. Six directors specifically said they had secured funding for the coming years, though they did not consistently identify the final source. One director had applied for funding from different sources but did not say whether those funds were secured. This update suggests that "limited" discussions about funding sources in January were realized by the end of the year and that even some of the directors who had not had any discussions about securing funds from specific sources in January 2022 were able to do so by the end of Year 3.

Year 3 Stakeholder Engagement

Sustaining a new initiative such as *Partners in Prevention* requires dedicated resources and the support of diverse stakeholders, such as school principals and staff, the school board, parents, local—and possibly state—government entities, and community organizations. Although survey results show that stakeholder engagement activities peaked in Year 2 (see Funding in Year 3 and the Future), stakeholder buy-in is a key driver of program implementation.[19] The following summarizes grantees' reported planning activities related to engaging key stakeholders in Year 3:

- Seven grantees held discussions about identifying key stakeholders who might support the programs; one grantee's discussions resulted in the development of a tentative plan and six held discussions with no clear plan made.

- Six grantees held discussions that resulted in plans (five tentative and one firm) to determine how the programs align with the mission and goals of potential future stakeholders, while two grantees held discussions but had no clear plans.

- Four grantees held discussions with local leaders, with no clear plans (three) or tentative (one) plans as to how the programs relate to the community's overall prevention needs.

- One grantee had executed a plan to present student outcome data to potential stakeholders, while seven grantees held discussions, with tentative (three) or no clear (four) plans to present to stakeholders.

Grantees also reported on the specific type of stakeholders with whom they had communicated or planned to communicate. **At the time of the survey (January 2022), most grant directors (eight of 11) had already communicated with their respective superintendents. Three grantees had communicated with the school board, while another three planned to do so. Three grant directors had communicated with community agencies; two other grant directors planned to do so.** One grant director had communicated with the chamber of commerce and two planned to do so later in the year, while three planned to communicate with other local businesses.

Grant directors also described their strategies for stakeholder engagement. A few reported some discussion about presenting student data to school boards and staff to show positive program outcomes, though this activity was more prevalent in Year 1. Grantees communicated information via newsletters and social media. They also held in-person meetings and school events to engage administrators, the school board, staff, and families.

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[19] Dariotis, J. K., Mirabal-Beltran, R., Cluxton-Keller, F., Gould, L. F., Greenberg, M. T., & Mendelson, T. (2017). A qualitative exploration of implementation factors in a school-based mindfulness and yoga program: Lessons learned from students and teachers. *Psychology in the Schools, 54*(1), 53–69. https://doi.org/10.1002/pits.21979

Marchant, M., Heath, M. A., & Miramontes, N. Y. (2013). Merging empiricism and humanism: Role of social validity in the school-wide positive behavior support model. *Journal of Positive Behavior Interventions, 15*(4), 221–230. https://doi.org/10.1177/1098300712459356

The following presents highlights of what we learned in Year 3 (the final year of implementation), conclusions, and recommendations.

Implementation

Strengths and Growth

School leadership support stayed strong over the initiative. Leadership at schools continued to be highly supportive of SEL and prevention programming and implementers. Leaders were involved in planning, training, monitoring data, and observations across all 3 years. Strong administrator support is essential for the successful launch and sustainment of this type of initiative.

Overall, implementers reported high levels of enthusiasm for the programs, confidence in their ability to implement them effectively, and a strong belief that SEL and prevention programs benefited their students during all 3 years surveyed. Analysis conducted with implementer survey data in the Year 2 evaluation report found that positive implementer attitudes were statistically significantly positively related to multiple dimensions of implementation quality, including their reports of student engagement and understanding. Implementers' perception of strong principal support for SEL and prevention programming were also statistically related to higher levels of implementer-reported student engagement.

Program completion increased over time. Similar to Year 2, 62% of implementers in Year 3 finished implementing the program by the time of the March–April survey (compared to 8% in Year 1) and 88% had delivered all or almost all the lessons. Among the implementers who had not yet finished implementing, a higher proportion (91%) expected to complete all the lessons by the end of the school year compared to prior years. Overall, expected completion in Year 3 increased by 16% compared with Year 2, indicating students received more programming.

Program oversight increased each year. In Year 3, for the first time, all grantees reported engaging in activities to monitor implementation progress via observations of lessons, implementer self-reports of implementation details, or both. Three more grantees reported conducting program observations than in prior years. However, the percentage of implementers who reported receiving feedback from their reports (36%) or observations (69%) did not increase over time. This indicates that provision of feedback should be increased.

Positive parental feedback increased each year, and, in Year 3 grantees worked toward engaging parents as part of their work plan. In Year 3, 82% of grant directors (nine of 11) reported that parents provided positive feedback about program implementation, a notable increase from 64% in Year 2 and 36% in Year 1. In Year 3, for about three-

quarters of programs being implemented (14 of 19 programs), grant directors reported that their schools had provided parents with information and activities to reinforce the program at home. One-quarter of implementers reported that parents had completed program activities sent home with students. Grant directors and implementers commonly reported using newsletters to reinforce program messages at home. In addition, about one-fifth of implementers reported communicating with parents about how the school was integrating the prevention/SEL program with academics. **Grantees should continue to build on this momentum to encourage parental reinforcement of the programs at home.**

By the January 2022 survey (Year 3), 73% of grant directors (eight of 11) had communicated with their superintendents about *Partners in Prevention* program benefits or outcomes and 60% (six of 10 responding) had communicated with the school board and community agencies or planned to do so. One grant director had communicated with the local chamber of commerce and several others had plans to reach out to the chamber or local businesses.

In Year 3, more grantees reported providing non-implementer school staff and stakeholders with program information than in prior years. Consistent with the last 2 years, almost two-thirds of implementers (62%) reported that program concepts or messages had been incorporated into their school's schoolwide expectations. Embedding program content into school culture strengthens the messages and fosters buy-in and understanding among staff and students, which supports improved outcomes.

Partners in Prevention **built the capacity of school systems and schools to implement and monitor SEL and prevention programs.** In Year 1, only 21% of implementers reported having had any experience teaching any programs focused on SEL or the prevention of risk behaviors like substance use; 77% reported participating in training that year. As part of this initiative, HFL funded TA for grantees for all 3 years. The TA covered a wide range of areas and helped to build grantees' capacity. In addition, EDC conducted webinars on Data Collection and Data Analyzing, Implementation Science, Monitoring Program Implementation, and Integration of Prevention and SEL in Academics. Finally, grantees designed work plans focusing on areas of capacity building that required further TA support. **In Year 3, 10 out of 11 (91%) grant directors reported that the TA was useful, with the highest reported levels of satisfaction related to monitoring program implementation progress and quality.** HFL also encouraged grantees to collect program monitoring and outcome data, which likely increased grantees' oversight.

Areas of Ongoing Implementation Challenges and Improvement

Although the participating school systems and their school leadership actively supported prevention programming, grant directors and implementers alike continued to report challenges finding time to implement *Partners in Prevention* programs. Many school systems required substance use prevention (six grantees) or SEL programming (five grantees). **Almost three-quarters (72%) of implementers reported that their principal prioritized SEL programming as highly as they did academic instruction, while 52% reported the same for substance use prevention programming.** However, three grant

directors reported as major barriers the limited time available for prevention/SEL programs due to policies mandating academic activities and benchmarks (two) or school schedules (one). **In Year 3, most implementers (59%) reported that lack of time was sometimes (49%) or often (10%) an issue, but fewer implementers reported this as a challenge than in Year 1 (72%).**

In addition to limited time, lack of student engagement continued to be one of the top two barriers to implementation. Although overall student engagement remained strong in Year 3, 61% of implementers reported it was sometimes (47%) or often (14%) an issue. Student engagement was more of a challenge with secondary school students. A couple of factors may have contributed to that difference. First, student engagement overall declines from elementary to secondary school.[20] Second, for some secondary school educators, especially at the high school level, teaching prevention/SEL programs may involve steeper learning curves and cultural shifts than for staff in elementary schools, which tend to emphasize both the behavioral and academic development dimensions of student education.[21]

Implementer experience may help with student engagement. Year 3 implementer survey data showed that implementers with at least 1 year of experience teaching the prevention/SEL were less likely to report challenges with student engagement than new implementers.[22] In addition, analysis of implementer survey data in Year 2 found that implementers' years of teaching or facilitating experience in their career, not specific to prevention/SEL programs, significantly positively related to student engagement in the prevention/SEL program.

Staff training is a growing challenge due to implementer turnover. In Year 3, 31% of implementers reported not having received any training—an increase from 21% in Year 2. Nearly 20% of implementers were teaching the program for the first time in Year 3. Training is important to maintain implementation quality, especially with staff turnover.

Outcomes

In any evaluation, external factors can make it challenging to determine to what extent the program causes outcomes. During this initiative, the COVID-19 pandemic dramatically affected schools, students, and families. Since the start of the pandemic, children and adolescents have shown sharp increases in psychological distress, including symptoms of depression and anxiety and other mental health disorders, as well as modest increases in impulsivity and irritability.[23] The magnitude of pandemic-related

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[20] Mahatmya, D., Lohman, B. J., Matjasko, J. L., & Farb, A. F. (2012). Engagement across developmental periods. In S. L. Christenson, A. L. Reschly, & C. Wylie (Eds.), *Handbook of research on student engagement* (pp. 45–63). Springer.

[21] Flannery, K. B., Hershfeldt, P., & Freeman, J. (2018). *Lessons learned on implementation of PBIS in high schools: Current trends and future directions*. Center for Positive Behavioral Interventions and Supports (funded by the Office of Special Education Programs, U.S. Department of Education). University of Oregon Press.

[22] Differences did not reach statistical significance because of the small sample of implementers with no experience teaching the program by Year 3.

[23] See Office of the Surgeon General, 2021 (footnote 3).

disruptions may have blunted intervention effects. Nonetheless, the evaluation identified positive findings from several data sources.

Implementer and Classroom Outcomes

Perceived effects on implementers. The final survey asked implementers how the *Partners in Prevention* programming affected them personally. Of the 148 responses to the open-ended question, the vast majority of implementers reported that the program(s) benefited them. **More than a third noted the program increased their knowledge of SEL or provided structure, guidance, and language for building SEL skills with their students. About one-third of those who responded positively said the program improved their own self-awareness or that they had applied techniques to themselves or family members. About one-quarter reported improved relationships with their students, with some commenting that this was the most significant impact of the program.** About 15 implementers reported that the program created stress for them, due to the challenge of finding time for implementation or working with students who were not engaged.

Perceived effects on classroom climate. Each year, the implementer survey asked teachers a series of questions about the general climate of their classrooms (not just during *Partners in Prevention* programming), covering three dimensions of classroom climate: peer relations, student satisfaction with the class, and difficulty of coursework for students. **All three dimensions of classroom climate significantly improved during *Partners in Prevention* implementation.**

Student Prevention Outcomes

In Year 1, *Partners in Prevention* programs served 9,375 students; in Year 3, this increased by 40% to 13,099 students served.

Implementers' perceptions of program effects on students. In Year 3, implementers were asked how strongly they agreed or disagreed with a series of statements about the program's impact on students. **The highest percentage of implementers reported that they agreed or strongly agreed that *Partners in Prevention* programming had a positive impact on students' self-management (90% for elementary school and 63% for secondary school implementers),** followed by **relationship skills** (86% for elementary and 55% for secondary), **social awareness** (83% for elementary and 54% for secondary), **responsible decision-making** (80% for elementary and 54% for secondary), and **understanding the dangers of substance use/misuse** (79% for elementary and 51% for secondary school implementers). For most of these outcomes, implementers serving elementary school students rated the program's impact higher than did implementers serving secondary school students. Finally, in an open-ended question about the most significant impact of the program, implementers echoed many of these same outcomes.

Findings from student outcome data. As part of the evaluation, grantees provided RTI with data on student outcomes. The following summarizes findings for grantee-collected data, the INYS, and IDOE student administrative data.

Students' knowledge of the *Partners in Prevention* program curriculum increased. In Years 1 and 2, four or five schools provided data on pretest to posttest scores for curriculum knowledge; average scores increased 16 percentage points in Year 1 and 8 percentage points in Year 2—both marginally statistically significant increases. In Year 3, nine schools provided data, and average scores increased by 8 percentage points, a statistically significant difference (p < .01).

For social-emotional skills (e.g., emotional regulation), results were mixed. In Year 1, the five schools providing data showed a non-statistically significant increase in scores. In Years 2 and 3, about half the schools, which used one type of measure, showed a statistically significant increase in scores for social-emotional skills. The other half showed a small decline in scores (not significant in Year 2 and marginally significant in Year 3); this result was affected by one grantee whose schools showed a decrease in average scores pretest to posttest. Even in those schools where scores did not increase, given the increased mental health challenges of students during this time period, it is possible that the interventions helped to buffer further social-emotional declines; we do not have comparison students to test this. National data indicate that a longer-term trend of mental health declines among youth was exacerbated by the pandemic and other social issues.[24]

In addition, in Years 1 to 3, three to seven schools provided pretest and posttest scores for students' favorable or unfavorable attitudes toward substance use, a correlate of substance use behavior. **All 3 years, disapproval of substance use increased slightly at posttest. In Years 1 and 2, these changes were not statistically significant. In Year 3, the difference was marginally statistically significant; students' attitudes about substance use became more negative.**

Grantees also provided non-suspension, non-expulsion discipline data (e.g., office referrals) for their schools for all 3 implementation years. **The overall rate of discipline incidents among high schools (seven schools) decreased between Year 1 and Year 3, which was marginally statistically significant (p < .10).**

During program implementation, 10 *Partners in Prevention* schools also participated in the INYS. **From 2020 to 2022, the percentage of students in grades six to 12 reporting that they consumed alcohol in the past 30 days decreased by about 4 percentage points (from 14.3% to 10.4%), a marginally statistically significant decrease (p < .10). There were non-statistically significant decreases in past-30-day use of unprescribed prescription pain killers, cigarettes, and vaping products.** Comparing 2020 and 2022, there were no statistically significant changes in student attitudes toward substance use (risk of harm or unfavorable attitudes). Note that not all students included in these INYS data received *Partners in Prevention* programming and that we do not have survey data before the start of program implementation.

Analysis of IDOE student administrative data compared pre- to post-intervention outcomes for *Partners in Prevention* students with those of students in demographically

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[24] See Office of the Surgeon General, 2021 (footnote 3).

similar Madison County, Indiana. *Partners in Prevention* schools significantly improved on two outcomes in the post-intervention period: rate of excused absences (p < .01), and rate of unexcused absences (p < .10). In addition, comparing the pre- to post-intervention years, outcomes were significantly better for *Partners in Prevention* than for schools in Madison County for rate of excused absences (p < .01). Other favorable trends in the post-intervention period for the *Partners in Prevention* schools included overall decreases in rates of in-school and out-of-school suspensions and expulsions, though not statistically significant; these patterns did not significantly differ from trends for the Madison County schools.

Partners in Prevention schools showed a significant increase (p < .05) in their retention rates pre- to post-intervention. Although they had been significantly lower on this outcome than comparison schools in the pre-intervention time frame, this difference between the two groups was no longer significant. Trends in multiple outcomes for both *Partners in Prevention* and Madison County students were likely influenced by COVID-19 pandemic disruptions; we do not know what programs and supports students received in Madison County.

Sustainability

As of January 2022, grant directors reported plans to "definitely" continue implementing 12 of the current 19 programs and "maybe" continue five of the same programs; grantees planned to replace two programs with a different prevention/SEL program. **None of the grantees reported plans to discontinue providing prevention/SEL programming.**

Of the 12 programs that the grant directors said they would "definitely" continue implementing, **92% reported they would continue outcome data collection and 83% said they would continue program monitoring. For two-thirds of the programs that they definitely planned to continue, grant directors reported they would continue program training for new implementers.**

In the January 2022 survey, among grant directors who responded to an open-ended question about the greatest challenge to sustaining their *Partners in Prevention* program, finding adequate funding and time were the most common challenges listed. Three grant directors identified the need to find additional funding sources. One specifically noted that although they had been able to purchase the curriculum and associated materials for the coming years, they still needed to secure funding for staffing related to the program. Two grant directors reported competing priorities as the greatest challenge (e.g., academic performance and student attendance). Two directors reported challenges with finding time for training and program implementation. Only one grantee cited ongoing pandemic-related challenges as the greatest challenge to continued programming.

In Year 3, although three grantees obtained additional funding from federal or state agencies, HFL was the sole source of funding for the implementation and administration of *Partners in Prevention* programs for eight grantees. **As of January 2022, one grantee made the program(s) a line item in their school corporation, school, or other government**

entity's budget, and six had firm (one grantee) or tentative (five grantees) plans to do so. According to HFL grantee reports, by the end of the school year, 10 of the 11 grantees reported having the resources to continue prevention/SEL programming for at least the next school year; the grantee that did not provide funding-related information indicated that they planned to continue implementing the prevention program.

Conclusions

Partners in Prevention filled a critical void in prevention/SEL programming for students in La Porte County. Although the COVID-19 pandemic disrupted program implementation, participating schools successfully implemented the programs, and school leaders and staff reported high support for the programs and positive outcomes for their students and schools. Drawing on several data sources, the evaluation documented many positive findings during the initiative. All grantees have obtained funding to continue prevention/SEL programs through at least the next school year; some grantees still need to secure longer-term financial support.

It takes time to establish and institutionalize a new program within an organization. A systematic review of research on sustainability of programs in health and mental or behavioral health showed that after initial implementation efforts or funding ended, slightly more than half of programs maintained or increased levels of implementation, while just under half reported lower levels of implementation.[25] If the prevention/SEL programs become fully institutionalized, benefits for students, implementers, and schools can continue to grow over time.

Recommendations

To sustain the strong progress achieved during this initiative, it is critical to have structures of support in place. To continue to build on their successes and further embed and sustain these programs in schools, we recommend that school administrators:

- **Establish structures to train new implementers on the prevention program(s).** Training and coaching are especially important for new staff to gain program knowledge, master new skills, and feel confident teaching the programs. Continue to offer booster training and other professional development opportunities to further strengthen all implementers' knowledge and skills. For example, create professional learning communities or other teacher collaboration during a dedicated planning time.

- **Provide structures of support to help teachers make time for lessons, especially because time is a top challenge to implementation.** For example, some grantees focused on integrating prevention/SEL programming with academic instruction; in their final report to HFL, one grantee described embedding SEL into their K–8 reading curriculum. Instructional coaches can support teachers in identifying

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[25] Wiltsey Stirman, S., Kimberly, J., Cook, N., Calloway, A., Castro, F., & Charns, M. (2012). The sustainability of new programs and innovations: A review of the empirical literature and recommendations for future research. *Implementation Science, 7*, Article 17. https://doi.org/10.1186/1748-5908-7-17

ways to integrate prevention/SEL programming into content areas. Additional options include having set times for the prevention/SEL programming for the whole school, such as during homeroom, study halls, and other non-academic times. In their final report to HFL, another grantee reported developing lesson-pacing guides coordinated across grade levels.

- **Provide teachers with strategies that enhance student engagement with the prevention programs.** For example, they can communicate the benefits of the program and ask students for their perspectives about the program. In addition, promoting teacher buy-in will enhance their enthusiasm, which helps to increase student engagement.

- **Provide forums for teachers to share lessons learned and successes about the program with their colleagues, including strategies for engaging students and integrating lessons into academic content areas.** In their final report to HFL, one grantee reported establishing a district-wide collaborative structure in which teachers worked together to write lessons to enhance daily classroom SEL engagement and growth mindsets.

- **Integrate the prevention/SEL program into schools' multitiered systems of support (MTSS) to use as a universal approach for all students.** Having an evidence-based universal program and collecting student data on progress and outcomes can help inform targeted or focused interventions for students who may need additional SEL supports. In their final report to HFL, one grantee reported that they made the *Partners in Prevention* programs part of the K–8 core curriculum within MTSS.

- **Dedicate the responsibility of ongoing program monitoring and evaluation to a role in the school to help maintain accountability and fidelity.** This role may be the current grant director or others who work directly with teachers, such as an assistant principal, academic coach, or SEL specialist. In their final report to HFL, one grantee reported that they are in the process of hiring a district-level Director of Prevention and Intervention. Another grantee reported working to establish data reporting and analysis protocols and is seeking to integrate universal screening data to further enhance their ability to provide appropriate student supports.

- **Grantees should continue to examine implementation and outcome data at regular intervals** and refine their approaches as applicable to continually improve, learn, and share results and success stories with key stakeholders internal and external to the school system.

- **Create stable long-term budget supports.** Stable budget supports provide an important foundation for sustainment. Grantees that do not yet have long-term budget support in place should consider seeking other grants in the behavior/SEL area and integrating prevention/SEL into the current general education budget. In addition to making this a line item in their school corporation's budget, some grantees obtained funding from the federal government (Title I and Title IV funds) and the state division of mental health and addiction. Continuing to collect data to show impact and meeting with stakeholders will help position grantees to obtain funding.

Key Recommendations from Grant Directors

During interviews in Years 1 and 2, grant directors shared advice they would give to other school systems embarking on this type of initiative. Grant directors emphasized the importance of:

- the planning phase of *Partners in Prevention* for successful and timely implementation of programming;

- identifying staff and implementers who are committed to the programs and involving key staff in initial decision-making; and

- getting buy-in from school leadership, teachers, and other stakeholders to facilitate program uptake, participation, and sustainability.

Nationally, educators increasingly realize the importance of universal prevention/SEL programs for reducing problem behaviors like substance use and bullying, fostering positive behavior and school climates, promoting mental health, and improving academic outcomes. A 2021 nationally representative survey of educators showed that an overwhelming majority of educators (84%) believe that incorporating SEL programming into the school curriculum has become even more important since the pandemic.[26] Nationwide, school district spending for SEL programs increased 45% between the 2019–2020 and 2020–2021 school years.[27] An increasing number of secondary school leaders are joining elementary school leaders in focusing on SEL programming.[28]

The need for prevention/SEL programming for elementary through high school is great. **This timely *Partners in Prevention* initiative enabled 11 school systems and their 38 schools to establish vital, evidence-based programs for current and future students in La Porte County, Indiana.**

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[26] See McGraw Hill, 2021 (footnote 4).
[27] Crowley, S., & Mainelli, A. (2021, October 21). *Finding your place 2021: Social emotional learning takes center stage in K–12*. Tyton Partners.
[28] See Prothero, 2021 (footnote 5).

Programs Implemented by Grantee, School, Grades Served, and Number of Implementers

Program	Grantee (School System or School)	School	Grades	Implementers (Year 3)	Total Implementers by Program (Year 3)
Botvin LifeSkills Training	La Porte Community School Corporation	La Porte High School	9–10	5	14
	Metropolitan School District of New Durham Township	Westville Middle/High School	7–9	2	
	Michigan City Area Schools	Michigan City High School	9–12	Not available	
		Barker Middle School	7–8	1	
		Krueger Middle School	7–8	1	
	Tri-Township Consolidated School Corporation	LaCrosse High School	9–10	1	
		Wanatah School	3–8	4	
Conscious Discipline	Queen of All Saints School	Queen of All Saints School	Pre-K–8	13	13
Positive Action	Notre Dame Catholic School	Notre Dame Catholic School	Pre-K–8	11	11
Ripple Effects	Renaissance Academy	Renaissance Academy	K–8	1	1
Second Step Elementary	La Porte Community School Corporation	Crichfield Elementary School	K–4	20	182
		Hailmann Elementary School	K–4	15	
		Handley Elementary School	K-4	16	
		Indian Trail Elementary School	K–4	14	
		Kesling Intermediate School	5	28*	

Program	Grantee (School System or School)	School	Grades	Implementers (Year 3)	Total Implementers by Program (Year 3)
Second Step Elementary (continued)		Kingsbury Elementary School	K–4	12	
		Kingsford Heights Elementary	K–4	9	
		Lincoln Elementary School	K–4	13	
		Riley Elementary School	K–4	16	
	Michigan City Area Schools	Coolspring Elementary School	2–5	1	
		Edgewood Elementary School	2–5	1	
		Joy Elementary School	2–5	1	
		Knapp Elementary School	2–5	1	
		Lake Hills Elementary School	4–5	1	
		Marsh Elementary	4–5	1	
		Pine Elementary	4–5	1	
		Springfield Elementary	4–5	1	
	New Prairie United School Corporation	Olive Township Elementary	K–2	9	
		Prairie View Elementary	K–2	6	
		Rolling Prairie Elementary	K–2	9	
	St. John's Lutheran School	St. John's Lutheran School	Pre-K–5	7	
Second Step Middle	New Prairie United School Corporation	New Prairie Middle School	6–8	6	
	La Porte Community School Corporation	Kesling Intermediate School*	6	28*	98
	La Porte Community School Corporation	La Porte Middle School	7–8	62	
	St. John's Lutheran School	St. John's Lutheran School	6–8	2	

Program	Grantee (School System or School)	School	Grades	Implementers (Year 3)	Total Implementers by Program (Year 3)
School Connect	New Prairie United School Corporation	New Prairie High School	9–11	38	38
Too Good for Drugs	La Lumiere School	La Lumiere School	9	2	3
	South Central Community School Corporation	South Central Jr-Sr High	10	1	
Too Good for Violence	MSD of New Durham Township	Westville Elementary School	K–6	2	3
	South Central Community School Corporation	South Central Elementary	K–6	1	

* For Kesling Intermediate School, the count by grade is estimated. The school reported a total of 56 implementers for fifth and sixth grades but did not report implementer counts by grade.

Descriptions of Programs Implemented by *Partners in Prevention* Grantees

The following provides a brief description of each of the programs implemented *by Partners in Prevention* grantees, along with a link to information about some of the research conducted on the programs.[29]

Botvin LifeSkills Training (http://blueprintsprograms.com/factsheet/lifeskills-training-lst)

LifeSkills Training is a classroom-based universal prevention program designed to prevent adolescent tobacco, alcohol, marijuana use, and violence. Three major program components teach students: (1) personal self-management skills, (2) social skills, and (3) information and resistance skills specifically related to drug use. Skills are taught using instruction, demonstration, feedback, reinforcement, and practice.

Conscious Discipline (https://consciousdiscipline.com/methodology/research/)

The Conscious Discipline program is a multiyear, multicomponent, school-based intervention that teaches administrators, teachers, and other staff the SEL skills to change the school culture, including discipline strategies and self-regulation skills for children, parents, and other adults. The program includes seven sections that correspond with an SEL behavior; one section is taught per month. Each section aligns with one of the core Conscious Discipline skills and is taught through associated activities (called Structures, Rituals, or Routines).

Positive Action (https://www.blueprintsprograms.org/programs/182999999/positive-action/)
Positive Action is a school-based program that includes schoolwide climate change and a detailed curriculum. Lessons for each grade level are scripted and age-appropriate. The content of the program is included in six units that form the foundation for the whole program. The first unit teaches the philosophy of the program and the Thoughts-Actions-Feelings about Self Circle and provides an introduction to the nature and relevancy of positive and negative actions/behaviors.

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[29] Sources:

Indiana Prevention Resource Center. (2020, March). *Prevention Matters: Proven programs to help schools address substance use.* Evidence-Based-Program-Guide-Updated-March-2020.pdf (rmff.org)

Program websites for School Connect (https://school-connect.net/) and Too Good for Drugs/Too Good for Violence (https://toogoodprograms.org/pages/what-is-too-good)

Ripple Effects (https://rippleeffects.com/impacts/)

Ripple Effects Whole Spectrum Intervention System (Ripple Effects) is an interactive, software-based adaptive intervention for students that is designed to enhance social-emotional competencies and ultimately improve outcomes related to school achievement and failure, delinquency, substance abuse, and mental health. The software presents students with peer-narrated tutorials that address social-emotional competencies (e.g., self-understanding, empathy, impulse control, emotional regulation, assertiveness, decision-making, connection to community), present science-based information about group-level risk factors, and give each student personalized guidance to address risk and protective factors specific to the student's environment and personal goals.

Second Step: Elementary (https://www.secondstep.org/research)

Second Step–Elementary is a universal, classroom-based program for children in kindergarten through fifth grade, which is designed to increase school success and decrease problem behaviors by promoting social-emotional competence and self-regulation. The Second Step program consists of a skills-focused, SEL curriculum that emphasizes skills that strengthen students' ability to learn, have empathy, manage emotions, and solve problems.

Second Step: Middle (https://www.secondstep.org/research)

The Second Step Middle School program is a universal, classroom-based intervention for children in grades six through eight, which is designed to increase school success and decrease problem behaviors by promoting social-emotional competence. The Second Step program consists of a skills-focused, social-emotional learning (SEL) curriculum that emphasizes directly teaching students how to strengthen their ability to learn, have empathy, manage emotions, and solve problems.

School Connect (https://school-connect.net; https://pg.casel.org/school-connect/)

School Connect provides SEL programming for grades 9–12 focusing on social skills, emotional skills, self-management, and a sense of purpose of future. School Connect seeks to foster academic engagement, enhance social and emotional competencies, reduce risk behaviors, and facilitate supportive relationships within middle and high school communities. The program's ultimate goal is to prepare adolescents for adulthood, both personally and professionally.

Too Good for Drugs/Too Good for Violence
(https://toogoodprograms.org/pages/evidence-base)

Too Good is a comprehensive family of K–12 evidence-based substance use and violence prevention interventions designed to mitigate the risk factors linked to problem behaviors and build protection within the child to resist problem behaviors. *Too Good* develops and reinforces a comprehensive skills framework including setting reachable goals, making responsible decisions, identifying and managing emotions, and effective communication in addition to peer-pressure refusal, prosocial peer bonding, and peaceful conflict resolution skills.