

DRUG & ALCOHOL PREVENTION - Awareness at the Elementary Level



11/11/25
Parent Education Series

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Leslie Shaud, Supervisor of Counseling & Wellness

Agenda



Why Now

Current research findings and recommendations supporting early, multi- component prevention



National and District Data

Key trends identified in National Survey on Drug Use and Health (2024) and Pennsylvania Youth Survey (2023)



WSSD Behavioral Health, PBIS

Review of supports delivered through PBIS framework and connect to drug and Alcohol Prevention



Botvin *LifeSkills* Program

Overview of Botvin *LifeSkills* curriculum and connection to social emotional learning. Focus on early prevention and future parent engagement opportunities.

Why Now?

Recent research shows that substance use and misuse are closely connected to:

- students' mental health
- stress levels
- New level of access to new high-potency or synthetic substances.



Summary of Cannabis Studies (Handout)

- Cannabis use during adolescence is consistently linked with increased risk of depression and suicidality
- Functional and structural brain changes are observed in heavy users
- Early and chronic use poses higher risk, especially for those with existing mental health conditions
- Importance of prevention efforts and informed behavioral health interventions
 - Improved outcomes when prevention efforts occur prior to initiation
 - Recommendations for multi-component prevention work

Brain Function Outcomes of Recent and Lifetime Cannabis Use – 2025

The study included 1,003 young adults (age 22-36)

Included MRI brain imaging, functional assessments and urine toxicology (for recent cannabis use)

Conducted over a three year period

Diverse demographics

Participants were grouped by lifetime cannabis-use:

- Nonusers: fewer than 10 lifetime uses
- Moderate users: 10-999 uses
- Heavy users: 1,000+ lifetime uses or a diagnosis of cannabis dependence

Brain Function Outcomes of Recent and Lifetime Cannabis Use - 2025 Cont.

Key Findings:

- Heavy lifetime cannabis use in young adults is associated with reduced brain activation in working-memory networks.
 - Working memory is critical for children in school: following instructions, solving problems, retaining new information.
 -
- The brain regions affected are those still developing in childhood/adolescence — so prevention and protective behaviors matter early
- Educating children about habits, substance use, choices, and helping them build strong cognitive supports (sleep, nutrition, attention games) are sensible strategies
- The study doesn't show that *every* cannabis use will cause major brain damage in kids, but it adds to the evidence that frequent/heavy use may carry cognitive/brain-activation costs that could map onto real-world skills
- Parents can use the findings as a basis for age-appropriate conversations



National Survey on Drug Use and Health - 2024

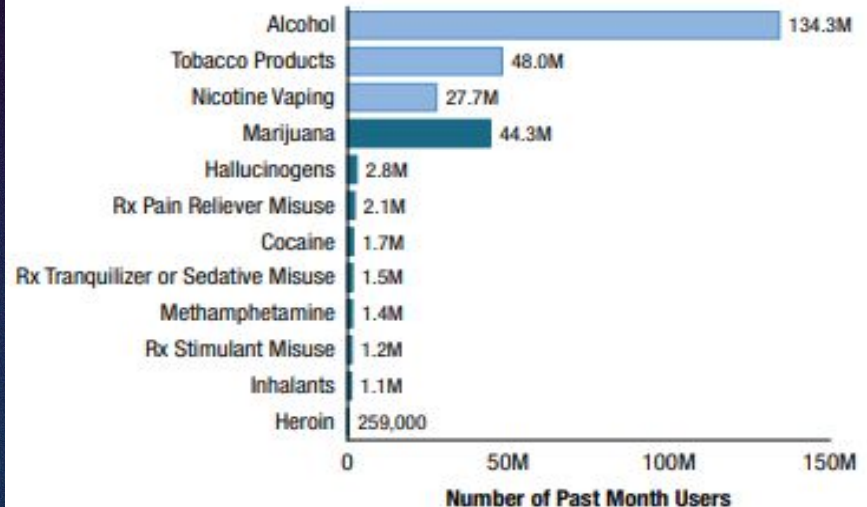
The survey included: 14,013 adolescents
56, 228 adults



National Survey on Drug Use and Health - 2024 Cont.

Key Substance Use and Mental Health Indicators in the United States:

Figure 1. Past Month Substance Use: Among People Aged 12 or Older; 2024



Rx = prescription.

Note: The estimated numbers of current users of different substances are not mutually exclusive because people could have used more than one type of substance in the past month.

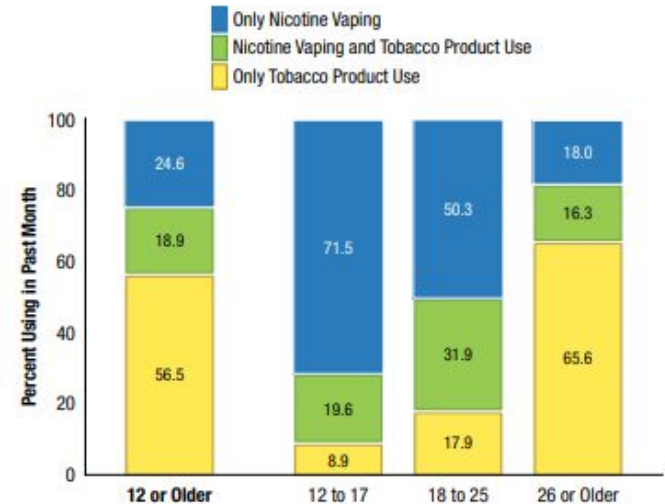
National Survey on Drug Use and Health - 2024 Cont.

Table A.4B Use of Selected Substances in the Past Month: Among Adolescents Aged 12 to 17; 2021-2024

Substance	2021	2022	2023	2024	Trend
TOBACCO PRODUCTS	2.9 (0.29)	2.0 (0.18)	1.9 (0.17)	1.9 (0.17)	Decreased
Cigarettes	1.7 (0.22)	1.2 (0.15)	1.3 (0.15)	1.2 (0.14)	No Change
Daily Cigarette Smoking ¹	* (*)	3.1 (1.30)	* (*)	3.8 (1.37)	Not Tested
Smoked 1+ Packs of Cigarettes per Day ²	* (*)	* (*)	* (*)	* (*)	Not Tested
Smokeless Tobacco	0.6 (0.12)	0.2 (0.05)	0.3 (0.06)	0.5 (0.08)	No Change
Cigars	0.8 (0.16)	0.7 (0.10)	0.4 (0.07)	0.5 (0.09)	No Change
Pipe Tobacco	0.3 (0.08)	0.2 (0.07)	0.2 (0.05)	0.1 (0.03)	No Change
ALCOHOL	7.2 (0.44)	6.8 (0.32)	6.9 (0.37)	6.6 (0.36)	No Change
Binge Alcohol Use	4.0 (0.33)	3.2 (0.22)	3.9 (0.29)	3.5 (0.22)	No Change
Heavy Alcohol Use	0.4 (0.11)	0.2 (0.05)	0.5 (0.10)	0.4 (0.06)	No Change
MARIJUANA	6.1 (0.39)	6.4 (0.32)	6.0 (0.32)	6.0 (0.32)	No Change

* Low precision; no estimate reported.

Figure 3. Type of Past Month Tobacco Product Use or Nicotine Vaping: Among Past Month Nicotine Product Users Aged 12 or Older; 2024



Note: The percentages may not add to 100 percent due to rounding.

National Survey on Drug Use and Health - 2024 Cont.

A-8

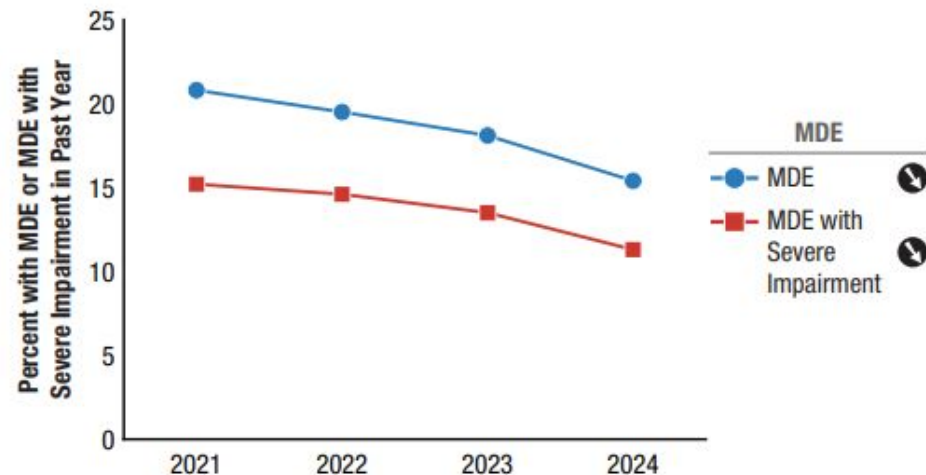
Table A.8B Alcohol or Marijuana Use in the Past Month: Among People Aged 12 to 20; 2021-2024

Substance	2021		2022		2023		2024		Trend
ALCOHOL	15.6	(0.50)	15.1	(0.45)	14.6	(0.49)	13.3	(0.44)	Decreased
Binge Alcohol Use	8.6	(0.40)	8.2	(0.36)	8.6	(0.38)	7.6	(0.33)	No Change
Heavy Alcohol Use	1.6	(0.17)	1.7	(0.18)	1.7	(0.17)	1.5	(0.14)	No Change
MARIJUANA	10.8	(0.44)	11.8	(0.39)	11.3	(0.40)	10.5	(0.36)	No Change



National Survey on Drug Use and Health - 2024 Cont.

Figure 48. Major Depressive Episode (MDE) and MDE with Severe Impairment in the Past Year: Among Adolescents Aged 12 to 17; 2021-2024



Note: Estimates for 2021 may differ from previously published estimates because the 2021 analysis weights were updated to facilitate between-year comparisons.

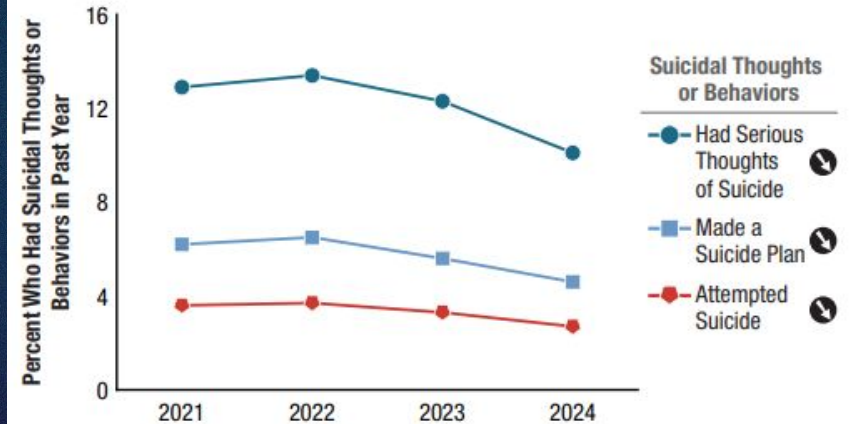
Figure 48 Table. Major Depressive Episode (MDE) or MDE with Severe Impairment in the Past Year: Among Adolescents Aged 12 to 17; Percentages, 2021-2024

MDE	2021	2022	2023	2024	Trend
MDE	20.8	19.5	18.1	15.4	Decreased
MDE with Severe Impairment	15.2	14.6	13.5	11.3	Decreased

National Survey on Drug Use and Health - 2024 Cont.



Figure 68. Had Serious Thoughts of Suicide, Made a Suicide Plan, or Attempted Suicide in the Past Year: Among Adolescents Aged 12 to 17; 2021-2024



Note: Estimates for 2021 may differ from previously published estimates because the 2021 analysis weights were updated to facilitate between-year comparisons.

Figure 68 Table. Had Serious Thoughts of Suicide, Made a Suicide Plan, or Attempted Suicide in the Past Year: Among Adolescents Aged 12 to 17; Percentages, 2021-2024

Suicidal Thoughts or Behaviors	2021	2022	2023	2024	Trend
Had Serious Thoughts of Suicide	12.9	13.4	12.3	10.1	Decreased
Made a Suicide Plan	6.2	6.5	5.6	4.6	Decreased
Attempted Suicide	3.6	3.7	3.3	2.7	Decreased

Note: Estimates for 2021 may differ from previously published estimates because the 2021 analysis weights were updated to facilitate between-year comparisons.

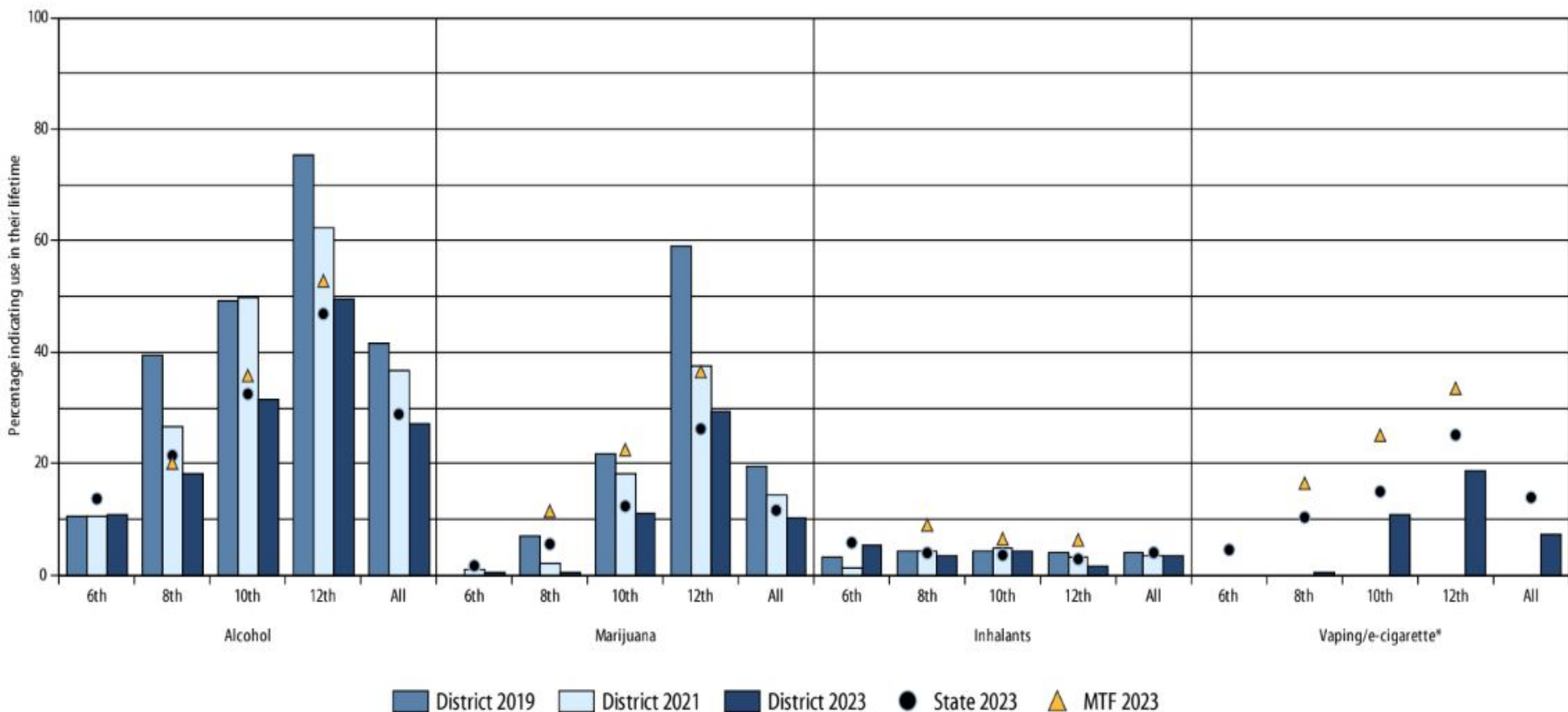
The Pennsylvania Youth Survey, or PAYS, is sponsored and conducted every two years by the Pennsylvania Commission on Crime and Delinquency. The data gathered in PAYS serve two primary needs.

- The results provide school administrators, state agency directors, legislators and others with critical information concerning the changes in patterns of the use and abuse of these harmful substances and behaviors.
- The survey assesses risk factors that are related to these behaviors and the protective factors that help guard against them. This information allows community leaders to direct prevention resources to areas where they are likely to have the greatest impact.



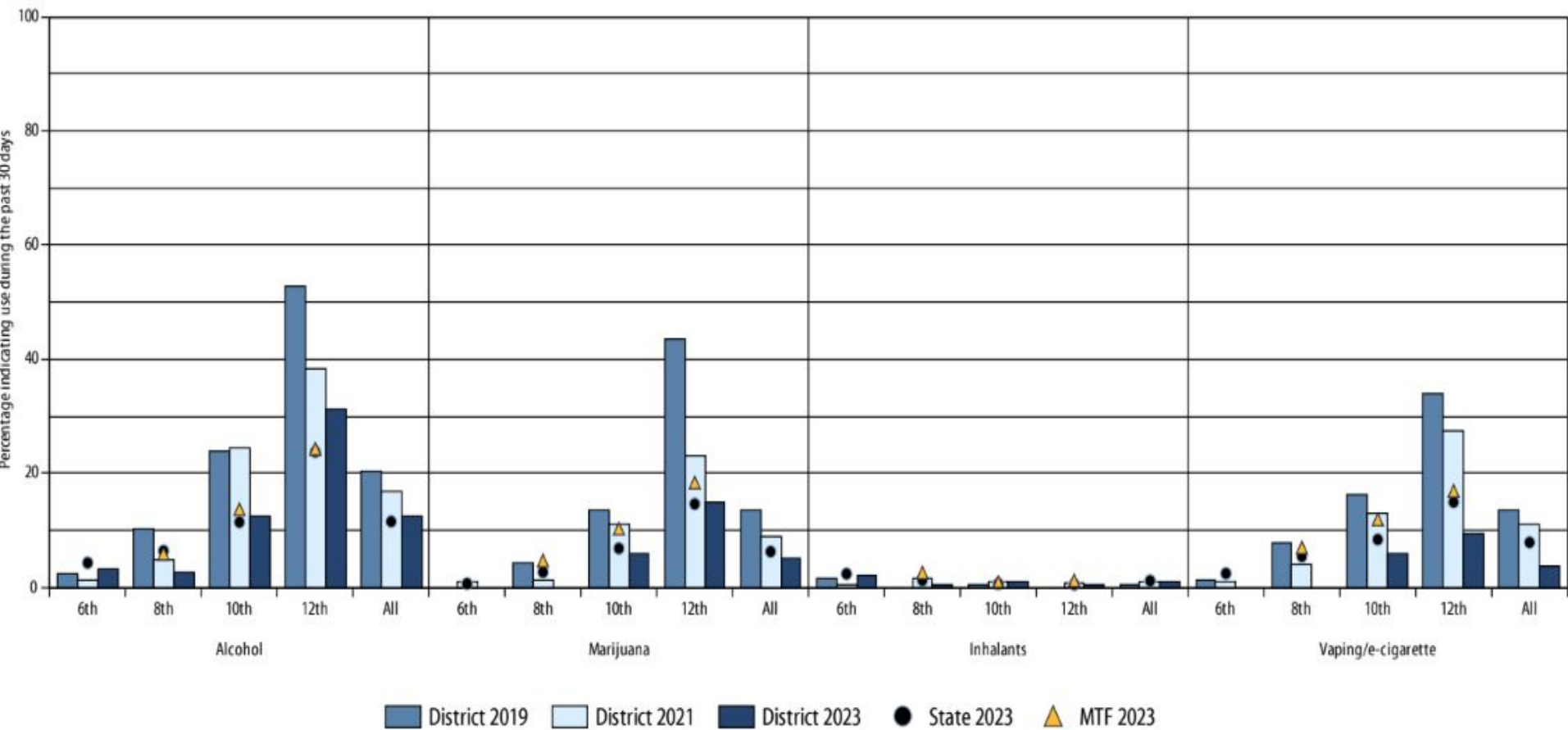
Early initiation and higher prevalence drugs - Lifetime use

Wallingford-Swarthmore School District 2023 Pennsylvania Youth Survey



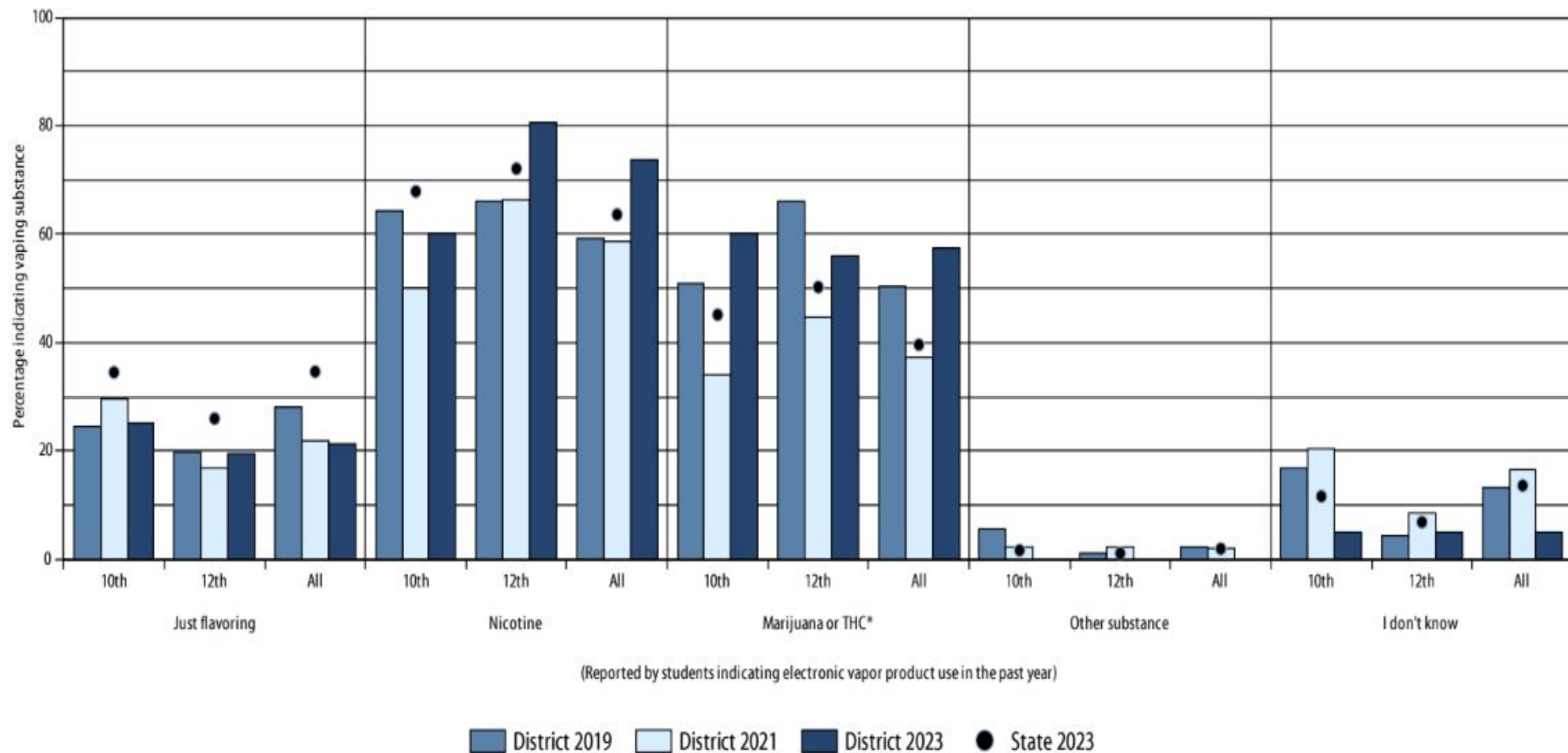
Early initiation and higher prevalence drugs - 30-day use

Wallingford-Swarthmore School District 2023 Pennsylvania Youth Survey



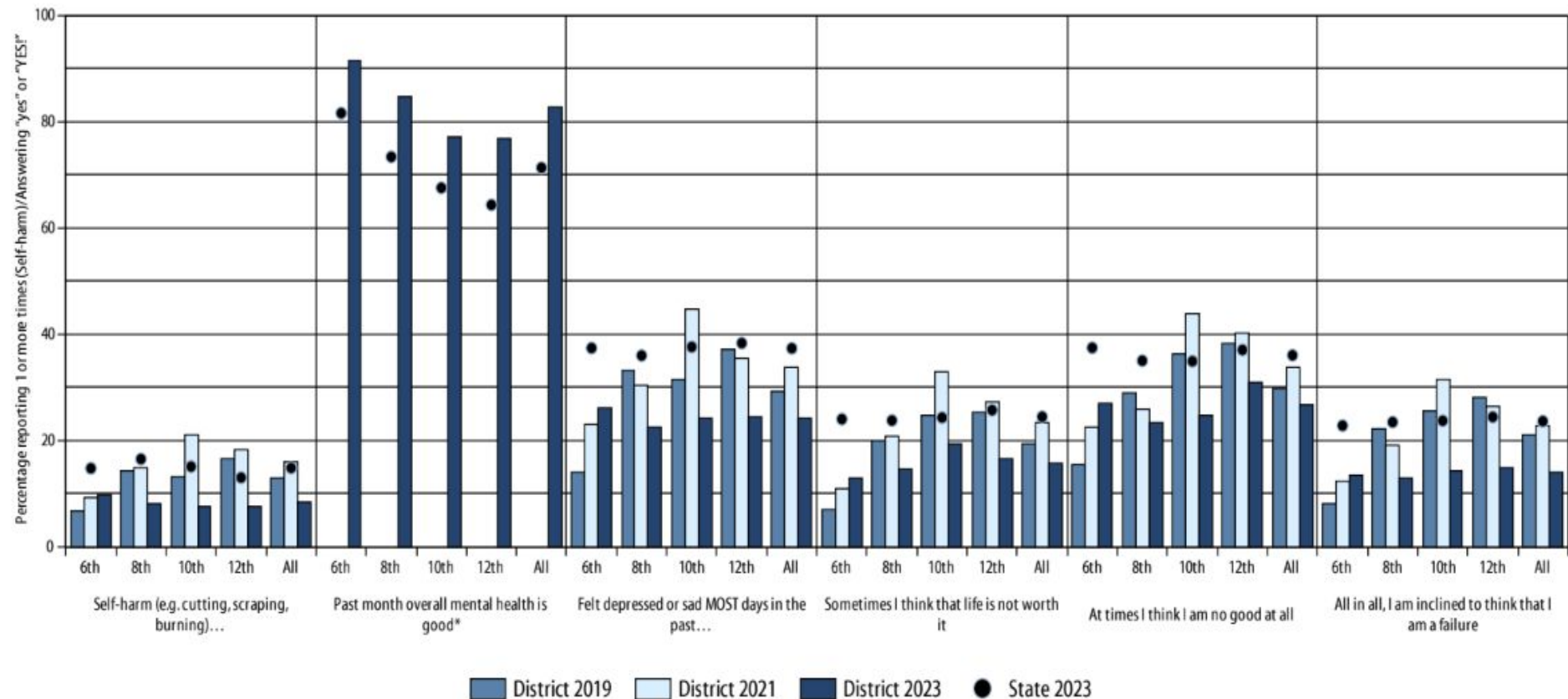
Vaping substances used by students indicating electronic vaping product use in the past year

Wallingford-Swarthmore School District 2023 Pennsylvania Youth Survey



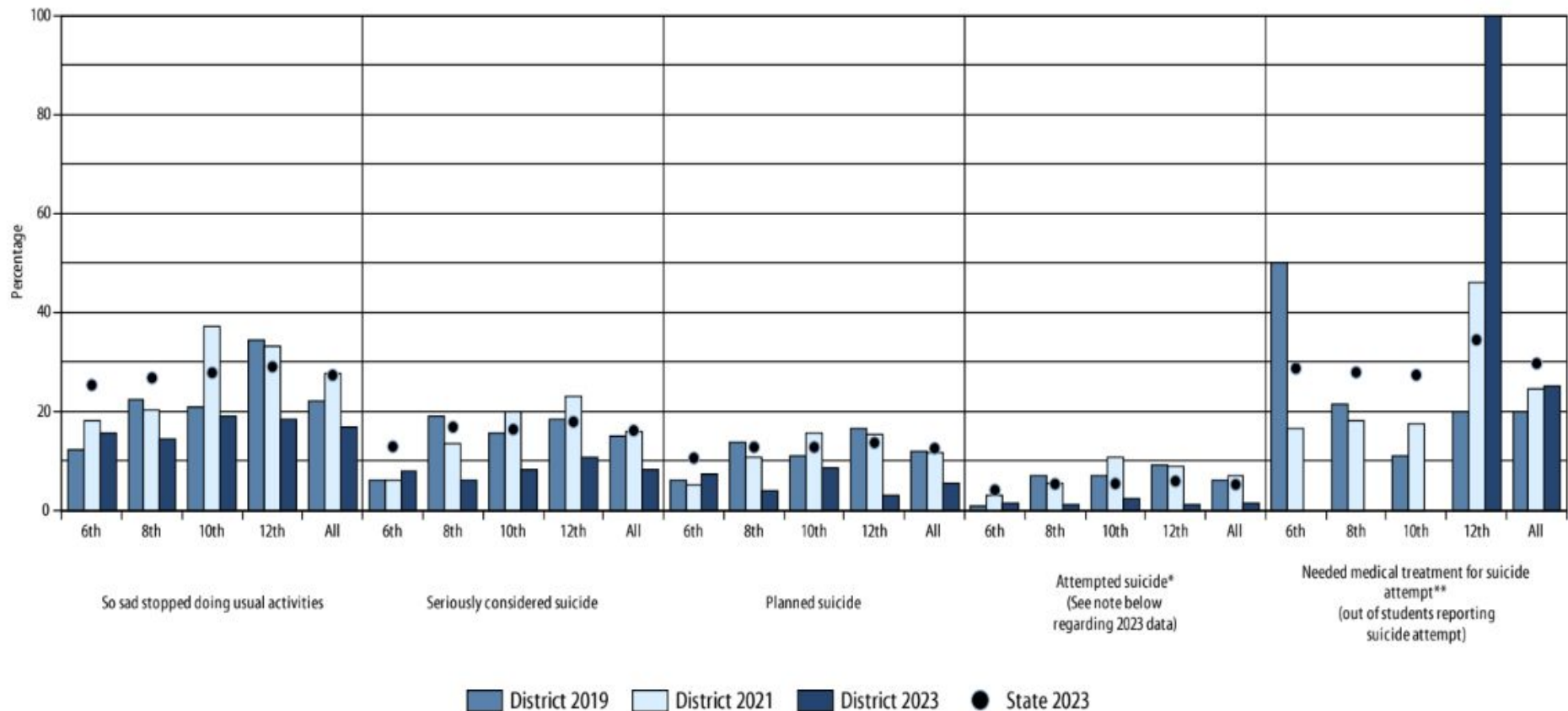
Mental Health Concerns

Wallingford-Swarthmore School District 2023 Pennsylvania Youth Survey



Suicide risk

Wallingford-Swarthmore School District 2023 Pennsylvania Youth Survey

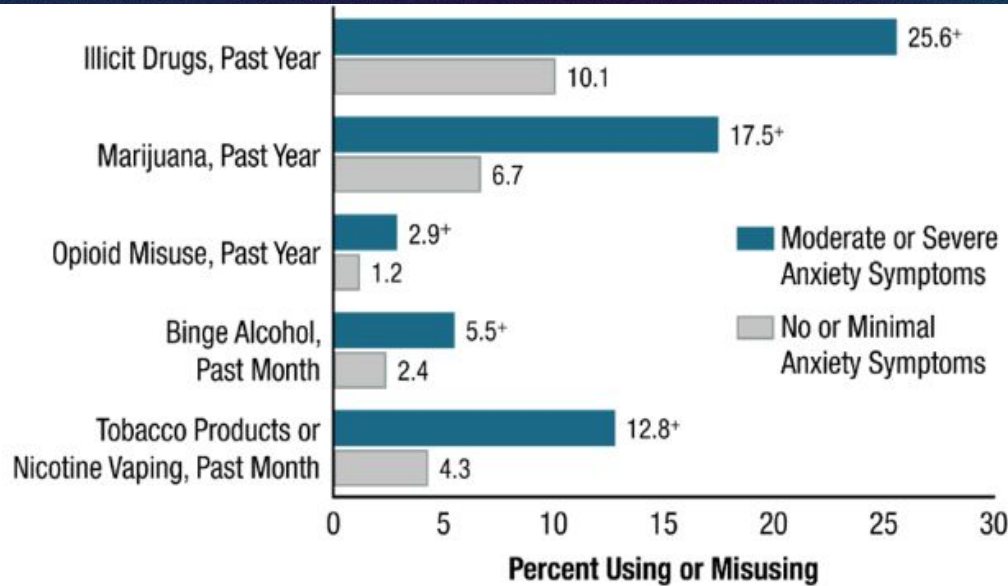


The Pennsylvania Youth Survey (PAYS) Jr. is an age-appropriate version of the PAYS designed for elementary students(grade 4)

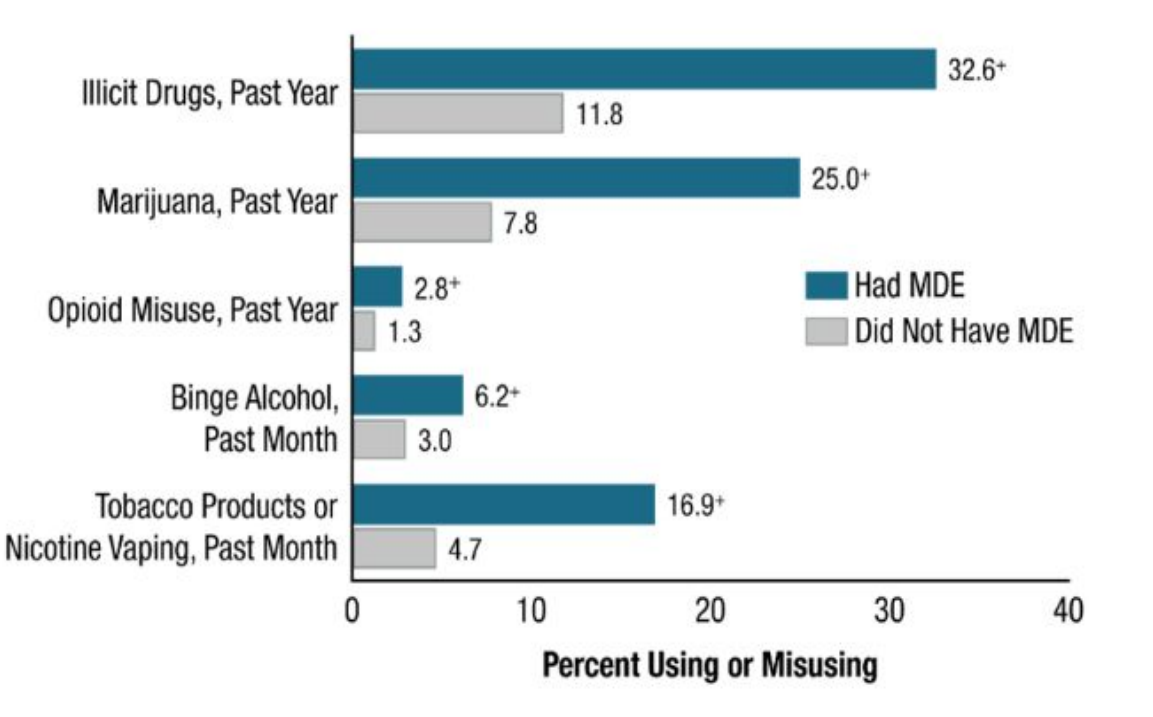
- Implementation
 - Piloted in 2023
 - Implemented 2025
- Help schools and communities understand early attitudes/behaviors and risk/protective factors *before* students reach adolescence
 - substance use
 - bullying, mental health
 - school climate



National Survey on Drug Use and Health - 2024 Cont.



National Survey on Drug Use and Health -
2024 Cont.



Programs for Children and Youth - 2022

critical review of 22 empirical studies published 2017–2021 that evaluated alcohol-prevention programs for children and youth (up to age 19).

KEY FINDING: School programs produced reliable improvements in attitudes, intentions, perceived norms, and knowledge about alcohol, and several trials reported reductions in intoxication or the *amount* consumed even when frequency effects were small. These proximal changes (attitudes/skills) are important because they lower the chance that children will start or escalate use later.



Programs for Children and Youth - 2022

Cont.

- Most effective programs are **school-based** and are deliberately delivered *before* initiation of drinking (universal prevention), because intervening early targets risk and protective factors while kids are still forming attitudes and social norms
- Programs grounded in theory (e.g., Theory of Planned Behavior, Motivational Interviewing, social norms approaches, life-skills curricula) and those that teach refusal/ coping skills showed the clearest benefits, highlighting that *age-appropriate skills training* matters
- Family, community, and web-based interventions have potential but currently have **less consistent evidence** than school-based programs — so combining school efforts with family/community approaches is recommended but needs more research



Effective prevention efforts focus on:

- building coping skills
- Developing and maintaining strong relationships
- early support/education in schools
- consistent communication structures



National Institute on Drug Abuse (NIDA) states that “evidence-based prevention strategies can have long-term, cost saving benefits ... particularly when they are implemented during childhood and adolescence.

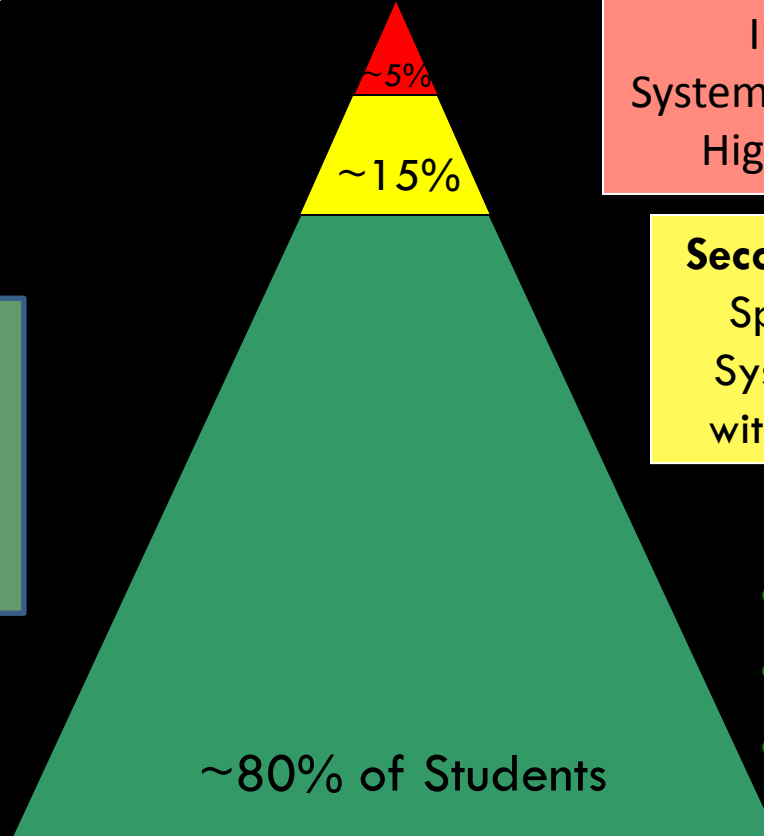
Meta -analyses Review

- Prior to 2019 found small but statistically significant positive effects for prevention interventions.
- After 2019 suggest that universal school-based programs alone may have small or minimal short-term effects on actual substance use outcomes
- elementary programs benefit from:
 - implementing multi-component programs (skills training, social/emotional learning, classroom curriculum, media literacy, parent/family engagement)
 - Ensuring long-term follow up

SCHOOL-WIDE POSITIVE BEHAVIOR SUPPORT

FRAMEWORK:

Primary Prevention:
School-/Classroom-
Wide Systems for
All Students,
Staff, & Settings



Tertiary Prevention:
Specialized
Individualized
Systems for Students with
High-Risk Behavior

Secondary Prevention:
Specialized Group
Systems for Students
with At-Risk Behavior

- **Students**
- **Staff**
- **Parents/Families**

PBIS Offerings- Secondary

Tier I

UNIVERSAL

Evidence -Based Instruction

Assemblies

Incentives

School Store

Wellness
Wednesday

Character
Recognition

PBIS & SEL
Lessons

Clubs & Extra
Curriculars

Connection
Building

Student
Leadership

Building
Themes

Access to Counseling &
Nursing Services

Tier II

SMALL GROUP, TARGETED

SAP & Referrals

Adult
Mentoring

Classroom
Consult

Peer
Mentoring

Emotional
Regulation

Targeted
Re-Teach

Social Skills
Group

Friendship
Group

Coping Skills
Group

Affinity Groups

ExQ

Tier III

HIGHLY INDIVIDUALIZED

Individual
Counseling

PTR

BCBA Consult

Grief Counseling

IPT-AST

Check & Check
& Connect

PBIS Offerings - Elementary

Tier I

UNIVERSAL

Evidence -Based
Instruction

Access to Counselor & Nursing
Services

Student
Ambassadors

Speedy Squad

Safety Patrol

Newsletters
Assemblies

Collaboration with
CPETL

Guidance
Instruction as a
special

Universal Signs
(ASL)

Building
Incentives

SEL Lessons

Nurtured Heart

Tier II

SMALL GROUP, TARGETED

Referrals to
Community-Based Services

Breaks R Better

Affinity Groups

Mentoring

Friendship Group

CICO

CICUCO

Social Skill
Groups

Executive
Functioning Group

Behavior
Contracting

Emotional
Regulation Group

Coping Skills
Group

BCBA Classroom
Consult

Targeted
Re-Teach

Targeted
meetings with

Tier III

HIGHLY INDIVIDUALIZED

BCBA
Consult

Intensive
CICO

Individual
Counseling

Process
Groups (grief)



Botvin *LifeSkills*

Botvin *LifeSkills*: Overview

- Evidence-based substance abuse program that is proven to reduced the risks of alcohol, tobacco, drug abuse, and violence by targeting the major social/psychological factors that promote the initiation of substance abuse and other risky behaviors
- Rather than teach information about dangers, Botvin promotes healthy alternatives to risky behavior:
 - Skills to resist peer pressures
 - Help students develop greater self-esteem and self-confidence
 - Enable students to effectively cope with anxiety
 - Increase their knowledge of consequences
 - Enhance cognitive and behavioral competency to reduce and prevent a variety of health risk behaviors

Botvin *LifeSkills*: Global Reach

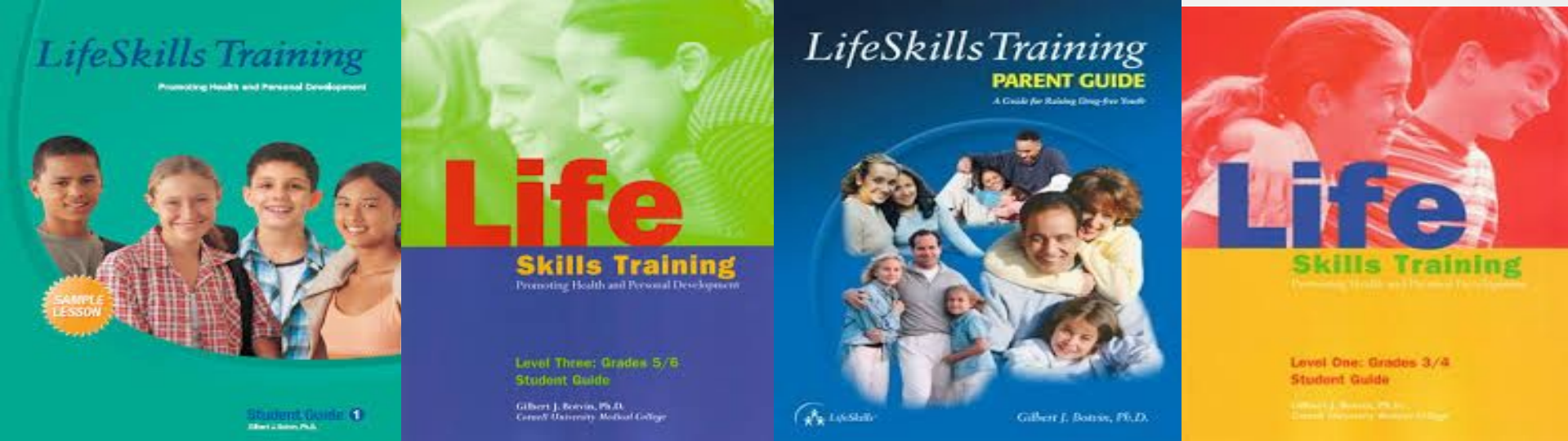
📌 LST has been used with youth in all 50 states in the United States as well as in the District of Columbia, Puerto Rico, and the Virgin Islands. Outside the United States, it has been used in 39 countries including:

- | | | | |
|--------------|-------------|----------------|------------------------|
| › Australia | › Germany | › Mexico | › Scotland |
| › Barbados | › Greece | › New Zealand | › South Africa |
| › Bermuda | › Honduras | › Nicaragua | › South Korea |
| › Canada | › Hong Kong | › Norway | › Spain |
| › Colombia | › Ireland | › Panama | › Sweden |
| › Croatia | › Italy | › Peru | › Taiwan |
| › Costa Rica | › Japan | › Portugal | › Thailand |
| › Denmark | › Kenya | › Qatar | › Turkey |
| › England | › Malaysia | › Russia | › United Arab Emirates |
| › France | › Mexico | › Saudi Arabia | › Venezuela |

Botvin Recognition:

- Office of National Drug Control Policy
- U.S Department of Education
- American Medical Association
- American Psychological Association
- US. Department of Justice, Office of Juvenile Justice and Delinquency Prevention
- Early Intervention Foundation





- Comprehensive, dynamic, and developmentally appropriate substance abuse and violence prevention program designed for students in grades 3-5
- Highly effective curriculum has been proven to help increase self-esteem, develop healthy attitudes, and improve their knowledge of essential life skills—promoting healthy positive personal development and mental health

Botvin *LifeSkills* & CASEL

Self-Awareness &
Self-Management
Units:
Self-Esteem
Dealing with Stress

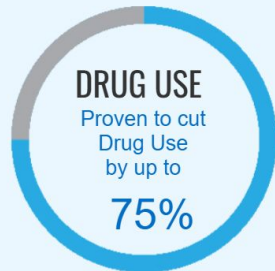


Social Awareness &
Relationship Skills
Units:
Advertising
Social Awareness
Communication Skills
Assertiveness

Decision Making
Skills Units:
Decision Making
Smoking Information
Advertising

Botvin *LifeSkills*: Why Now?

- *Personal Self-Management Skills*
 - Students develop skills that enhance self-esteem, develop problem-solving skills, help them reduce stress and anxiety, and manage anger
- *General Social Skills*
 - Students gain skills to meet personal challenges such as overcoming shyness, communicating clearly, building relationships, and avoiding violence
- *Drug Resistance Skills*
 - Students build effective defenses against pressures to use tobacco, alcohol, and other drugs



Botvin: Communication and monitoring the connection to drug and alcohol prevention (K-5)

Date: 12/02/25

Time: 6:00 - 7:30

Location: NPE Library

Presenters: Rebecca Schwam, Guidance Instructor
Deborah Sweeney, School Nurse
Lauren DeSanctis, Counselor

Botvin: Modeling and Consistency and the connection to drug and alcohol prevention (K-5)

Date: 03/10/26

Time: 6:00 - 7:30

Location: WES Library

Presenter: Rebecca Schwam, Guidance Instructor
Erin Costa, School Nurse
Audrey Ennis, Behavioral Health Counselor

Botvin: Effects and Warning Signs of Drugs and Taking a Stand

Date: 04/22/26

Time: 6:00 - 7:30

Location: SRS

Presenter: Rebecca Schwam, Guidance Instructor
Linda Kealey, School Nurse
Ashley Yingst, Behavioral Health Counselor



THANK YOU

References:

Cho, M-K., & Cho, Y-H. (2021). Do alcohol prevention programs influence adolescents' drinking behaviors? A systematic review and meta-analysis. *International Journal of Environmental Research and Public Health*, 18(16), 8524. <https://doi.org/10.3390/ijerph18168524>

Gowin, J. L., Ellingson, J. M., Karoly, H. C., Manza, P., Ross, J. M., Sloan, M. E., Tanabe, J. L., & Volkow, N. D. (2025). *Brain Function Outcomes of Recent and Lifetime Cannabis Use*. *JAMA Network Open*, 8(1), e2457069. <https://doi.org/10.1001/jamanetworkopen.2024.57069>

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Substance Abuse and Mental Health Services Administration. (2025). Key substance use and mental health indicators in the United States: Results from the 2024 National Survey on Drug Use and Health (HHS Publication No. PEP25-07-007, NSDUH Series H-60). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. <https://www.samhsa.gov/data/data-we-collect/nsduh-national-surveydrug-use-and-health/national-releases>

Tinner, L., Palmer, J. C., Lloyd, E. C., et al. (2022). Individual-, family- and school-based interventions to prevent multiple risk behaviours relating to alcohol, tobacco and drug use in young people aged 8-25 years: A systematic review and meta-analysis. *BMC Public Health*, 22, 1111



References:

Sánchez-Puertas, L., Jiménez-Iglesias, A., & Moreno, C. (2022). *Prevention of alcohol consumption programs for children and youth: A narrative and critical review of recent research*. *Frontiers in Psychology*, 13, 838195.
<https://doi.org/10.3389/fpsyg.2022.838195>

Cannabis Studies (handout) https://docs.google.com/document/d/1HYI_CwFunl3yBWpjUP0NFj12C6ZdbaEI/edit