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ABSTRACT

The "Alcohol: The Gateway Drug" program and curriculum was developed in response to the prevalent use of alcohol by young people today and the difficulty of incorporating alcohol prevention into other substance abuse prevention programs. The main objective of the program was to provide alcohol prevention education services to fourth-graders in three particularly needy neighborhoods in New York City. This was to be achieved through a comprehensive approach, including teacher training in alcohol prevention education, alcohol-specific classroom prevention lessons, small group counseling for high-risk students, and parent workshops. An evaluation of the program indicated that: (1) classroom lessons seem to be effective in teaching students about the effects of alcohol and identifying children of alcoholics (COAs) and students at risk for alcohol use; (2) teacher training had the greatest visible impact when it was conducted in separate training sessions, rather than simply through teacher observations of classroom alcohol prevention lessons given by a substance abuse specialist; and (3) participation in parent workshops was low. Recommendations indicated that new strategies need to be found in order to increase parental participation in this program and these may include focusing parents on their children's activities, rather than on their own problems, and maintaining ongoing and intensive communication between school staff and parents regarding particular group meetings. (ABL)

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OREA Report

"ALCOHOL: THE GATEWAY DRUG" EVALUATION REPORT

December, 1991

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**"ALCOHOL: THE GATEWAY DRUG"
EVALUATION REPORT**

December, 1991



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EXECUTIVE SUMMARY

"Alcohol: The Gateway Drug" program and curriculum was developed in response to the prevalent use of alcohol by young people today and the difficulty of incorporating alcohol prevention into other substance abuse prevention programs. The main objective of the program was to provide alcohol prevention education services to fourth graders in three particularly needy neighborhoods in New York City. This was to be achieved through a comprehensive approach, including teacher training in alcohol prevention education, alcohol-specific classroom prevention lessons, small group counseling for high-risk students, and parent workshops.

Findings

- Classroom lessons seem to be effective in teaching students about the effects of alcohol and identifying children of alcoholics (COAs) and students at risk for alcohol use.
- Teacher training had the greatest visible impact when it was conducted in separate training sessions, rather than simply through teacher observations of classroom alcohol prevention lessons given by a substance abuse specialist. Teacher training seemed to be helpful in increasing the ability of teachers to identify COAs.
- Although two of the three districts offered parent workshops, participation was low. District substance abuse directors and staff blamed the lack of participation on the pervasiveness of alcohol use in the communities and denial on the part of the parents.

Recommendations

All of the staff agreed that providing services through "Alcohol: The Gateway Drug" was important for their students. While the program seemed effective when implemented, the implementation fell short of what was needed. New strategies need to be found in order to increase parental participation in this program; these may include focusing parents on their children's activities, rather than on their own problems, and maintaining ongoing and intensive communication between school staff and parents regarding particular group meetings. More can be done to strengthen the links between communities and "Alcohol: The Gateway Drug" through the use of public relations, parent workshops, and more extensive networking. Opportunities for those involved in "Alcohol-Gateway Drug" to share their experiences, information, materials, problems, and solutions may be beneficial for the "Alcohol-Gateway Drug" staff as well as the students, teachers, and parents.

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I. INTRODUCTION

Background

Alcohol is the most widely used drug among young people today. Use of alcoholic beverages, particularly beer and wine, is initiated at an earlier age than any of the illicit drugs (Kandel, 1989). Most students first begin experimenting with alcohol well before high school; among students in New York State who have used alcohol, over half (58%) first used alcohol by age 12 and 75 percent had used it by age 13 (Barnes, 1984). There is substantial evidence that alcohol is the gateway to the use of other drugs. While not all youngsters who use alcohol necessarily go on to use other drugs, the use of illicit drugs is preceded by the regular use of alcohol (Kandel, 1989; Mills & Noyes, 1984; Donovan & Jessor, 1983). Students who have not used alcohol are unlikely to use other drugs. There is also evidence that those students who get involved in cocaine and crack started using alcohol at an earlier age than students who have not used crack (Kandel, 1989).

Although most school systems in this country have substance abuse prevention programs, few are effective in preventing alcohol use (Pentz et al., 1989). Equating prevention programs for alcohol and other drugs is difficult because of the legal status of alcohol for those who are over 21 years of age. It is difficult for children to internalize warnings about alcohol when they see it being used around them by adults and glamorized in media advertisements. A 1983 Weekly Reader survey found that

fourth graders were influenced by advertisements that portrayed alcohol usage as attractive more often than children of other ages. "Alcohol: The Gateway Drug" curriculum was developed by the New York State Education Department in response to these concerns. One aim of "Alcohol: the Gateway Drug" program, which targets fourth graders, is to delay the onset of alcohol consumption, thereby reducing not only alcohol use but also the use of other drugs.

Program Objectives

The main objective of "Alcohol: The Gateway Drug" was to provide alcohol prevention education services to fourth graders in particularly needy neighborhoods in New York City. This was to be achieved through a comprehensive approach, bringing together the domains of school, community and home through the implementation of four specific program components: 1) teacher training would provide information about alcohol and approaches to alcohol and drug education and opportunities for teachers to discuss their own attitudes about alcohol; 2) Substance Abuse Prevention and Intervention Specialists (SAPIS), along with classroom teachers, were to provide classroom prevention lessons specific to alcohol; 3) small group counseling, provided by the SAPIS, would be targeted at high-risk students with the aim of strengthening their ability to avoid alcohol use; and 4) parent workshops would provide parents with information about alcohol and about community resources, thereby strengthening linkages

among the home, school, and community. Two schools in each of three districts with large numbers of high-risk youngsters were chosen to pilot "Alcohol: The Gateway Drug." Starting in September 1990, each district was scheduled to have one full-time SAPIS to implement this program in participating schools.

Methodology of Evaluation

During April and May, 1991, face-to-face interviews were conducted by OREA researchers with the district Directors who had implemented "Alcohol: The Gateway Drug" and with the SAPIS who were involved in the implementation. In District 12, where many schools and many SAPIS were involved in the program, only one SAPIS was interviewed. Although observations of the Alcohol-Gateway services (i.e., classroom lessons, teacher training, and parent workshops) were planned, this was only possible in District 12; Districts 4 and 19 had ended all of the Alcohol-Gateway activities when the funding year ended in April, 1991. They claimed that they had completed all the required components and were going to start the program again in fall, 1991.

The district Directors were also contacted in July, 1991 for clarification of the details of their implementation strategies and how they may have changed over time. A short questionnaire was sent to each Director, including the former Director for District 4, who had transferred to another district. The following information was gleaned from the interviews,

questionnaires, and the observation of a classroom lesson in District 12.

Current Status of the Program

Each of the three districts which piloted "Alcohol: The Gateway Drug" attempted to meet the intended objectives in different ways. While one of the districts (C.S.D.4) changed the way in which it implemented "Alcohol: The Gateway Drug" over the 1990-91 school year, the other two districts were consistent in their implementation of the program over time. These two districts (12 and 19) reported that they implemented all of the proposed components, including alcohol-specific classroom lessons, group counseling, teacher training, and parent workshops. In District 19, these components were implemented in one school only. District 12 had all of the components in place in one school and some of these components in five additional schools. District 4 was only providing district-wide teacher training in spring, 1991.

II. MEETING THE OBJECTIVES

District 4

District 4 substantially altered the way in which it implemented "Alcohol: The Gateway Drug" over time. In Fall, 1990 (the first semester of implementation) classroom lessons, teacher training, and small group counseling were provided in two schools (P.S. 57 and P.S. 121). Parent workshops were given in P.S. 121 only. Four "Alcohol-Gateway Drug" classroom lessons were incorporated into the eight mandated classroom substance abuse prevention lessons for 7 fourth grade classes in both schools by the regular SAPIS, in collaboration with a SAPIS who was trained for "Alcohol- Gateway Drug." The SAPIS also provided teacher training to the 5 fourth grade teachers in both schools. The training took place during intensive all-day sessions -- substitute teachers were hired to release teachers for the training. This SAPIS also gave "Alcohol-Gateway Drug" parent workshops at P.S. 121. Two additional SAPIS who were assigned to the two schools reportedly provided small group "Alcohol-Gateway Drug" counseling for students.

During the second semester of implementation (spring, 1991), district-wide, rather than school-based, teacher training was provided. One part-time SAPIS trained seven teachers representing five schools to provide alcohol prevention lessons to their students. Fourth grade teachers were chosen to participate in the training by their Principals. The Director and SAPIS reported that teachers received new information,

curriculum materials, skills for educating students on issues related to alcohol, and were better prepared to identify children with problems related to alcohol. It was unclear whether the purpose of the training was simply to have classroom teachers educate their own students about alcohol or also to prepare them to be part of a system where alcohol-related issues were dealt with through either "Alcohol: The Gateway Drug" or other substance abuse services; three teachers were from schools where there was no SAPIS and therefore no adequate support system for children identified as children of alcoholics (COAs). The SAPIS who conducted the teacher training visited most of the teachers in their classrooms to observe an alcohol-related classroom lesson and provide feedback to the teachers. Both the SAPIS providing the teacher training and the district Director felt that this training was successful. No other Alcohol-Gateway components were implemented during spring, 1991 in District 4.

The implementation strategies of this district may be better understood by examining the relationship between "Alcohol: the Gateway Drug" and other substance abuse services provided in the schools. In District 4 two schools had been targeted for the "Alcohol-Gateway Drug" project. In one of these schools, alcohol issues were being covered under the auspices of Project COPE, which targets Hispanic students. It may be that the potential duplication of services between Project COPE and Alcohol Gateway was a factor in the decision not to implement other school-based alcohol-related services.

District 12

District 12 reportedly implemented all of the components of "Alcohol: The Gateway Drug" in one school and some components in five other schools. The Director indicated that the schools were chosen on the basis on geographic location (distributed throughout the district), SAPIS knowledge about alcohol, and the receptivity of the schools to the program. The SAPIS who were already assigned to the schools in which "Alcohol-Gateway Drug" was to be implemented assumed the responsibilities for the program. They attended workshops, seminars and conferences about alcohol in preparation for their roles. A SAPIS who does staff development in District 12 also worked with the other SAPIS. The particular components offered in the various schools depended on the types of expertise possessed by the SAPIS in those schools.

The way in which the program was delivered did not change over the 1990-91 school year. In the one school providing all of the "Alcohol-Gateway Drug" services, 3 fourth grade classes received 8 Alcohol-Gateway classroom lessons, taught by a SAPIS, in addition to receiving 8 regular classroom prevention lessons. This SAPIS also trained 3 fourth grade teachers through the presentation of the classroom lessons, provided small group counseling, and gave parent workshops. This SAPIS also provided some "Alcohol-Gateway Drug" services in another school and non-Alcohol-Gateway services in both schools.

Three additional schools in this district provided "Alcohol-Gateway Drug" classroom lessons; two provided teacher training

(in the same manner as described above); three provided small group and/or individual counseling; and one provided parent workshops. None of the SAPIS involved in the Alcohol-Gateway Drug" program provided those services exclusively.

Feedback from the students participating in a classroom lesson in District 12 and from the researcher observing the lesson indicated that the children were interested by the content of the lesson and, in most cases, learned something about alcohol from it. However, the lesson may not have had the impact it could have; when the students were asked what they had learned many reported that they had learned to spell new words like "alcohol."

District 19

District 19 reported implementing all components on the "Alcohol-Gateway Drug" program in one school (P.S. 158). This school was chosen for participation in "Alcohol: The Gateway Drug" because it had a high number of intervention cases as well as a high number of COAs. The SAPIS who had been working in this school took on the responsibilities for providing "Alcohol-Gateway Drug" services as well as the other services offered in the school. The delivery of the program has not changed since it was first implemented in spring, 1990, although the Director reported that more students now receive small group counseling. Four fourth grade classes received eight "Alcohol-Gateway Drug" classroom lessons in addition to receiving regular prevention

lessons. The information offered by the Director in the face-to-face interview regarding teacher training was substantially different from the written answers to the questionnaire.

However, it seems that all (four) fourth grade teachers attended one introductory session for the "Alcohol-Gateway Drug" program; subsequent training took place during the classroom lesson presentations given by the SAPIS. The training was perceived by the SAPIS and Director as being somewhat successful. The SAPIS also provided small group counseling.

Parent workshops were reportedly offered since spring, 1990. Initially, there was a very poor turnout at the workshops, but it improved somewhat over time. Both the Director and SAPIS asserted that problems with parental participation in "Alcohol: The Gateway Drug" stemmed from the fact that many parents in the community were indulging in alcohol and found talking about the topic threatening. The level of participation in "Alcohol: The Gateway Drug" was lower than for other substance abuse-related parental activities in the school because of the sensitivity to this particular issue. Those parents who did participate in the workshop were reported as being reluctant to express their feelings and denied that a problem existed. The one positive outcome of these workshops seemed to be that parents in the community became aware that the SAPIS was available for them as well as their children, should they choose to get help.

Problems in Implementation

The district Directors and the SAPIS involved in "Alcohol: The Gateway Drug" experienced several problems with the implementation of the program. Problems cited by the SAPIS involved in "Alcohol-Gateway Drug" included dealing with uncooperative teachers who did not agree that alcohol is a drug and uncooperative principals who did not want to allow teachers to attend all-day training sessions. Finding an appropriate space for teacher training sessions was also a problem in one district.

The Directors cited a need for more intensive training of SAPIS in preparation for the "Alcohol-Gateway Drug" program. One Director felt that the starting time for the program (April) was awkward because it was too close to the end of the year to start things. One Director also noted that conflicting demands and a relatively inflexible school schedule made it difficult to meet all the needs of the students. Those who needed alcohol counseling were often in other mandated pull-out programs and did not have more time for counseling. Students with personal or family alcohol problems often did not have an opportunity to discuss them when the need arose. Another problem cited by one Director was that the SAPIS were somewhat overwhelmed, since they had to see students, parents, and train teachers as well as prepare lessons and complete paperwork. The numbers of children and families in need of services was sometimes greater than the ability of the districts to provide services due to staffing

level. It should be noted that in spring, 1991, only District 4 had a SAPIS whose time was entirely devoted to "Alcohol-Gateway Drug." In the other districts, no new SAPIS were hired specifically to implement the program, as proposed. The Directors felt that although school and community support was present, more resources for public relations were needed in order to strengthen links between the school and community resources.

Positive Outcomes of the Program

In two districts, (19 and 4) more students have been identified as COAs since "Alcohol-Gateway Drug" has been implemented. These increases in identification were due to both classroom presentations and the increased ability of teachers to identify COAs and at-risk students because of the teacher training. One Director noted that teachers were introduced to the concept of children being prenatally exposed to the effects of alcohol; that knowledge made teachers see certain students' behaviors in a different light. In general, teacher training was seen as successful. However, in District 4, the only district which had intensive training sessions for teachers, the SAPIS was more enthusiastic; she felt that the training provided teachers with new knowledge and a greater ability to pass that knowledge along to their students. It was noted that "the training is good at clearing up myths." The Directors and SAPIS also reported that students were more aware of the dangers of alcohol as a result of the classroom lessons.

Future Plans

For 1991-92 the three districts plan to have a SAPIS who will be in charge of "Alcohol: The Gateway Drug" and will implement it exclusively. District 4 was uncertain at the time of our interview about the specifics of their implementation strategy for the 1991-92 school year. In District 19, parent workshops will be district-wide or divided into three geographic areas. Two schools in this district will be served by the program in the next academic year.

III. CONCLUSIONS AND RECOMMENDATIONS

All of the staff agreed that providing services through "Alcohol: The Gateway Drug" was important for their students.

One Director noted:

"kids here buy it at age 9 and 10. They see alcohol as a daily part of life to cope with their situations. That is a big wall to knock down. We must change their whole perception -- that this is not a rite of passage."

Each of the three districts attempted to meet the challenge of changing the perceptions of students, teachers, and parents in very different ways, despite the specific guidelines offered in the "Alcohol: The Gateway Drug" proposal. While no district stands out as having been totally successful in its goals, there were clearly positive outcomes of the program in each district. Classroom lessons seem to be effective in teaching students about the effects of alcohol and identifying COAs and students at risk for alcohol use. Teacher training had the greatest visible impact when it was conducted in intensive training sessions. In the two districts providing only training by observation of classroom lessons given by a SAPIS, teachers were never reported as being involved in the actual presentations of "Alcohol-Gateway Drug" material to their classes. While their own knowledge may have increased, it is difficult to ascertain whether they used that information to help their students.

Parent workshops were consistently problematic. Participation was low due to the pervasiveness of alcohol use in the communities and denial of a problem by parents.

Based on both the program accomplishments and problems, several recommendations can be made. Prior approval of the "Alcohol-Gateway Drug" program from principals and teachers would facilitate a smoother implementation of the program in schools. Assigning a single SAPIS to implement the "Alcohol-Gateway Drug" without his/her taking on the more general responsibilities of a school-based SAPIS would allow for more time and attention to students' full range of needs. The SAPIS would be able to deal with the risk factors a child might present and not focus on alcohol issues alone. Other SAPIS assigned to the same school might assist a child with alcohol-related problems as well, if these arise within their intervention treatments. The purpose of assigning one SAPIS to "Alcohol: The Gateway Drug" is not to fragment services, but to allow one person the time to coordinate all services -- to students, parents, and community groups -- offered through the program. The SAPIS should receive extensive training, not only in the content of the "Alcohol-Gateway Drug" curriculum, but also in how to work with both teachers and parents. New strategies need to be found in order to increase parental participation in this program. Feedback from substance abuse prevention programs in other districts indicates that focusing parents around their children's activities may be more effective than attempting to draw them in to deal with their own problems. Another technique used effectively to increase parent participation in activities is to initiate intensive communication with the parents about particular group meetings.

Both SAPIS and guidance counselors are involved in maintaining contact with parents.

All of the Directors agreed that more can be done to strengthen links between community and "Alcohol: The Gateway Drug" through the use of public relations, parent workshops, and more extensive networking. "Alcohol: The Gateway Drug" might also be strengthened through increased centralized support of Directors' efforts, and by better communication among the three districts. There seems to be a lack of clarity about the goals of this particular funded program in relation to regular substance abuse services. Opportunities for all those involved in "Alcohol-Gateway Drug" to share their experiences, information, materials, problems, and solutions may be beneficial for the "Alcohol-Gateway Drug" staff as well as the students, teachers, and parents they serve.

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