

CBSG Program Brief

FY 2016-2017



Livingston COMMUNITY PREVENTION Project
"Supporting community health and wellness"

Logistics:

The Livingston Community Prevention Project

(LCPP) consists of four partner agencies that

collaborate to provide substance use disorder prevention services in Livingston County. The

collaborative partners are LACASA, Karen Bergbower & Associates, Key Development Center, Inc.,

and Livingston County Catholic Charities. The LCPP provides prevention services to students, parents,

schools and the community. LCPP is focusing on the following CMHPSM priority areas: (1) reducing

childhood and underage drinking, (2) reducing prescription and over the counter drug abuse/misuse,

and (3) reducing illicit drug use.

In agreement with the Livingston County Community Alliance (LCCA) and other prevention

partners, the LCPP selected schools within the districts of Pinckney and Hartland to launch prevention

services in the early grades with the national, evidence-based Curriculum Based Support Group

(CBSG) model. This was made possible with blended funding from CMHPSM and the Livingston

County United Way.

Additional partners included parents and school administrators who enthusiastically embraced the

concept of early intervention services in the lower grades. The LCCA recognized this model as a

pivotal accomplishment in their prevention agenda.

Primary Problem, and Associated Intervening Variables:

Offering prevention programming to the vulnerable children in grades 4, 5 and 6 was possible only by

identifying an evidence-based model designed to reach these younger children. The current model,

Project SUCCESS, was not validated for use with the younger grades. After several years of discussion

and investigating appropriate models, the CBSG model was selected and national training acquired.

The CMHPSM Priority Areas, Problems and Intervening Variables are:

CMHPSM Priority Area 1: Reducing Childhood and Underage Drinking

a) Primary Problem: Early aggression, academic failure, school dropout

b) Intervening Variables: Lack of Perceived Risk, Peer Pressure, Prosocial Attitudes toward School, Norms that Support Use

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

a) Primary Problem: Early aggression, academic failure. School dropout

b) Intervening Variables: Lack of Perceived Risk, Peer Pressure, Prosocial Attitudes toward School, Norms that Support Use

CMHPSM Priority Area 3: Reducing Illicit Drug Use

- a) Primary Problem: Early aggression, academic failure, school dropout
- b) Intervening Variables: Lack of Perceived Risk, Peer Pressure, Prosocial Attitudes toward School, Norms that Support Use

Evidence Based Intervention and CSAP Strategies:

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

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

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



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

Outcomes/Results:

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

In accordance with the evidence-based CBSG model, the LCPP slated as its single outcome an increased pre/post test score or a 32 on a 10 item scale extracted from the Individual Protective Factors Index (IPFI, Springer & Phillips, 1977). Participants will demonstrate they maintain or improve their anti-substance-abuse attitudes and intentions via improved scores between pre and post

tests or a minimum score of 32 on both tests. The improved score meets the criteria for the model's inclusion on SAMHSA's National Registry of Evidence-based Programs and Practices.

In 2016-17, CBSG was offered in Navigator (Pinckney), Farms, Creekside and Village (Hartland) Schools. Twenty groups were offered with 191 participants. 165 youth completed the 12-week group, which is defined by the model as attending 10 or more sessions. Of the youth who completed the program, 140 maintained or improved their "non-use attitudes toward alcohol and other drugs" as indicated by comparison of their post-survey scores against their pre-survey scores or a minimum score of 32 on both pre and post surveys. It was projected that 80 percent of the youth who completed the program would maintain or improve their "non-use attitudes toward alcohol and other drugs"; **85 percent of youth who attended 10 of the 12 groups sessions actually maintained or improved their "non-use attitudes toward alcohol and other drugs"**. This outcome applies to all three Priority Areas.

Following is a victory story shared by a CBSG facilitator:

"A student (5th grade) began group in the spring and it was brought to my attention the nature of her referral to group. This student was abandoned by her parents (active addicts), separated from siblings, and currently in a foster home, awaiting possible adoption. The student was demonstrative and grandiose in her actions, often using her relationship with her boyfriend as the basis for her 'sunshine and cloud' (good and bad reports). Her pre-test score was 24, and her responses indicated she would smoke, try drugs, or drink when she gets older. She was also uncertain with her ability to have a life that didn't include using drugs or alcohol. As group progressed, her demeanor changed and she became less preoccupied with showing off. Her post-test score was a 37. Her responses indicated she was adamant about not using drugs or smoking. She did indicate she would use alcohol when she was old enough, but responses indicated she could exist and function normally in life without drugs and alcohol."

Additionally, nine professionals participated in a national CBSG training held in Livingston County in September of 2017. With newly trained staff and supervisors, the LCPP intends to continue expansion of CBSG in the lower grades. Facilitators, students, school administrators, and prevention advocates throughout the county are delighted with the CBSG curriculum and the students' reaction to it. We look forward to continued use of the model in Livingston County's prevention efforts.

