

Health Risk and Protective Framework,
Health Belief Model, Alternate Smoking Devices (ASD),
Substance Abuse, Tobacco Prevention and Control

Duston Morris, MS, PhD, CHES

Emily Harris, MPH

University of Central Arkansas

College of Health and Behavioral Sciences

Health Risk and Protective Framework

Strategic Prevention Framework (SPF)

Prevention professionals use SAMHSA's Strategic Prevention Framework (SPF) as a comprehensive guide to plan, implement, and evaluate prevention practices and programs.

Distinctive Features:

- ✓ Data Driven
- ✓ Dynamic Assessment
- ✓ Focused on Population Level Change
- ✓ Intended to Guide Prevention Efforts for All Age Groups
- ✓ Reliant on a Team Approach



Arkansas Prevention Needs Assessment Survey

Prevention Services, Division of Behavioral Health Services.

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- Districts



Provided by: Prevention Services, Division of Behavioral Health Services, Arkansas Department of Human Services. Data assessment and analysis done by: International Survey Associates, LLC, dba Pride Surveys (800-279-6361)

Regions 2017

- | | | |
|-----------------|----------------------------------|--------------------------|
| Region1 | ■ Profile Report | ■ Tables |
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<https://arkansas.pridesurveys.com/>

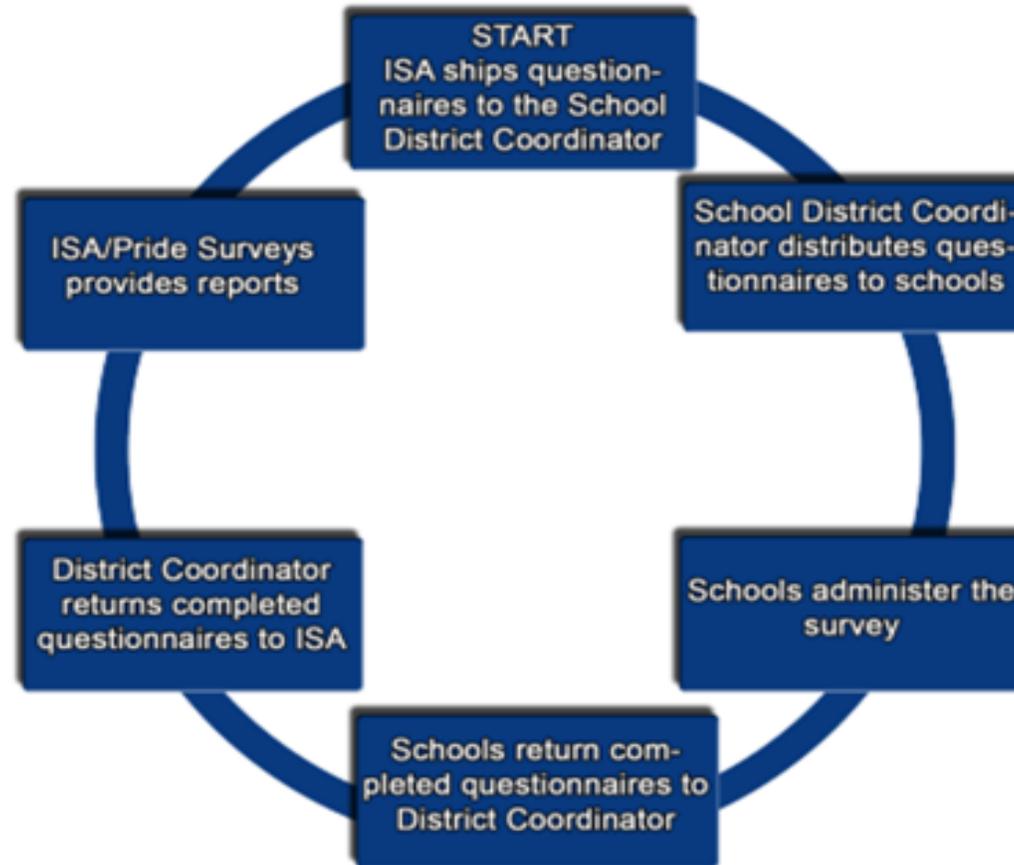
Arkansas Prevention Needs Assessment Survey (APNA)



2017-2018 Timeline

Arkansas Prevention Needs Assessment Survey

- September 15, 2017** – Deadline for school districts to complete the agreement form.
- October 20, 2017** – Deadline for International Survey Associates, ISA, to ship questionnaires or provide online codes to the school districts.
- November 1 - 17, 2017** – Schools administer the APNA Survey.
- By November 23, 2017** – School Coordinator removes APNA surveys from envelopes, puts them back into the school box, per school coordinator instructions, and sends them back to District Coordinator. For online surveys School Coordinators notify their District Coordinator that they have finished surveying.
- By November 30, 2017** – Deadline for District Coordinator to put school boxes back into district boxes and ship APNA questionnaires back to ISA. For online surveys District coordinator will let ISA know when they have confirmed all of their schools have finished surveying. **(Districts are encouraged to return questionnaires as soon as they are completed, before the November 30th deadline.)**
- December 1 – 22, 2017** – ISA processes and scans APNA questionnaires that have been returned.
- By February 28, 2018** – ISA generates and posts to the website, preliminary reports for PRC, school district, and school building (Assuming all school districts' surveys were sent back on time.)



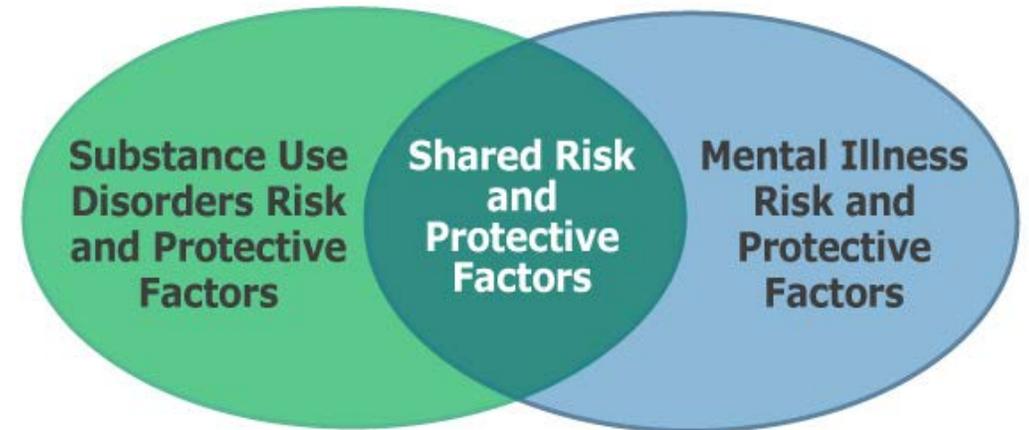
Health Risk and Protective Framework

Risk factors are characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes.

Protective factors are characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events.

Individual-level risk factors may include a person's genetic predisposition to addiction or exposure to alcohol prenatally.

Individual-level protective factors might include positive self-image, self-control, or social competence.



Health Risk and Preventive Framework

Individual –Peer Domain

Protective Factors : Religiosity

Risk Factors: Early and Persistent Anti-Social Behavior
Friends Who Engage In The Problem Behavior
Favorable Attitudes Towards The Problem Behavior
Gang Involvement
Constitutional Factors (Depressive Symptoms)

Family Domain

Risk Factors: Family Management Problems
Family Involvement in Problem Behavior
Favorable Parental Attitudes towards the Problem Behavior

School Domain

Protective Factors:
School opportunities for Pro-Social Involvement
School rewards for Pro-social Involvement

Risk Factors: Academic Failure
Lack of Commitment to School

Community Domain

Risk Factors: Community Disorganization
Transitions and Mobility
Availability of Drugs and Firearms
Laws and Norms Favorable to Drug Use,
Firearms and Crime

Health Risk and Preventive Framework

Individual –Peer Domain

Risk Factors:

Favorable Attitudes Towards The Problem Behavior

During the elementary school years most children express anti-drug, anti-crime and prosocial attitudes, and have difficulty imagining why people would use drugs. However in Middle school as more youth are exposed to others that use drugs, their attitudes often shift towards greater acceptance of these behaviors. Youth that express positive attitudes towards drug use, are more likely to engage in a variety of problem behaviors, including drug use.

Family Domain

Risk Factors: Family Management Problems

Family Involvement in Problem Behavior

Favorable Parental Attitudes towards the Problem Behavior

School Domain

Protective Factors:

School opportunities for Pro-Social Involvement

School rewards for Pro-social Involvement

Risk Factors: Academic Failure

Lack of Commitment to School

Community Domain

Risk Factors: Community Disorganization

Transitions and Mobility

Availability of Drugs and Firearms

Laws and Norms Favorable to Drug Use,

Firearms and Crime

Arkansas Prevention Needs Assessment Survey (APNA)

The Pride Questionnaire for Grades 6-12 asks students to report:

- Alcohol, tobacco & drug use incidence
- Age of onset of drug use
- Perceived risk of drugs
- Parents'/friends' approval of student use of drugs or threatening behavior
- Risk and protective factors
- Discipline problems at school and outside school
- Feeling of safety at school and in neighborhood
- Time of day/week for using drugs
- Ease of obtaining drugs
- Location of drug use
- Effect of using drugs
- Personal and family information
- Academic achievement
- Activities at school and in community
- Family life

Arkansas Prevention Needs Assessment Survey (APNA)

FIGURE I-1

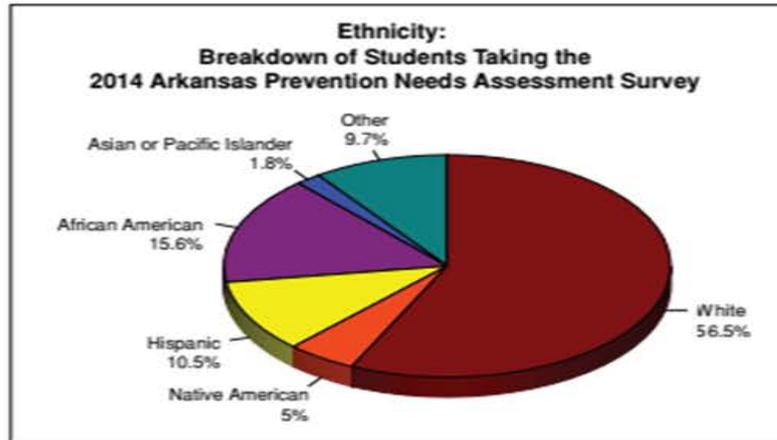


FIGURE I-2

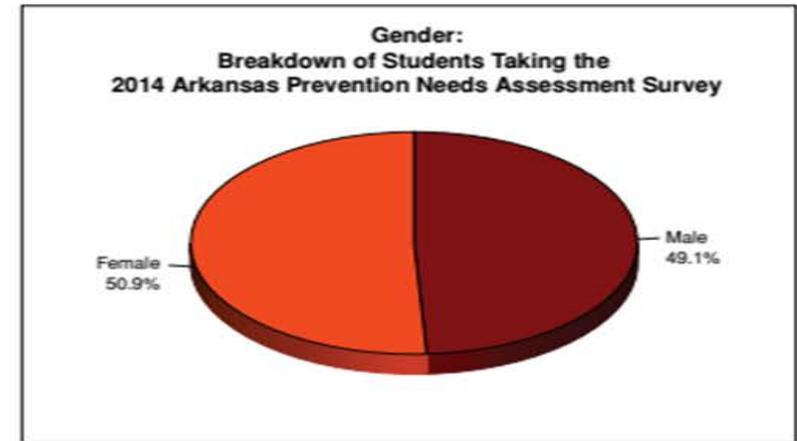
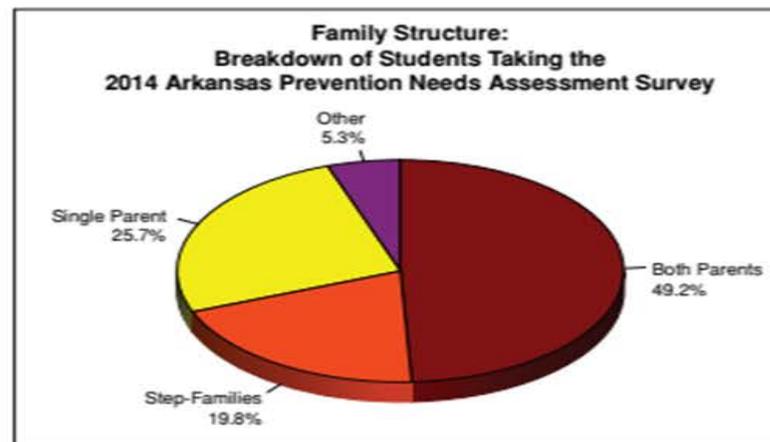


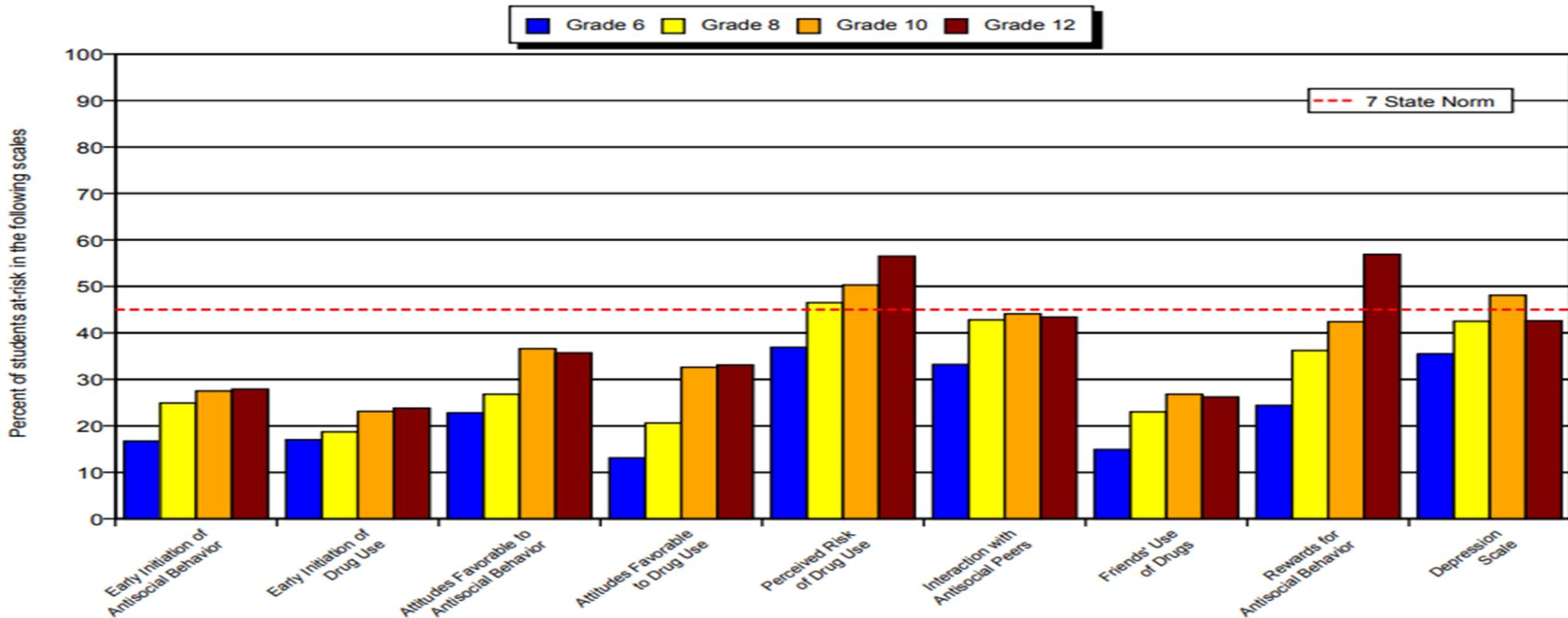
FIGURE I-3



Arkansas Prevention Needs Assessment Survey (APNA)

FIGURE 2-5

Risk Factors: Peer/Individual Domain (2014)



Appendix F: Arkansas Prevention Needs Assessment 2013 Student Survey (2014 Report)

24. What are the chances you would be seen as cool if you:

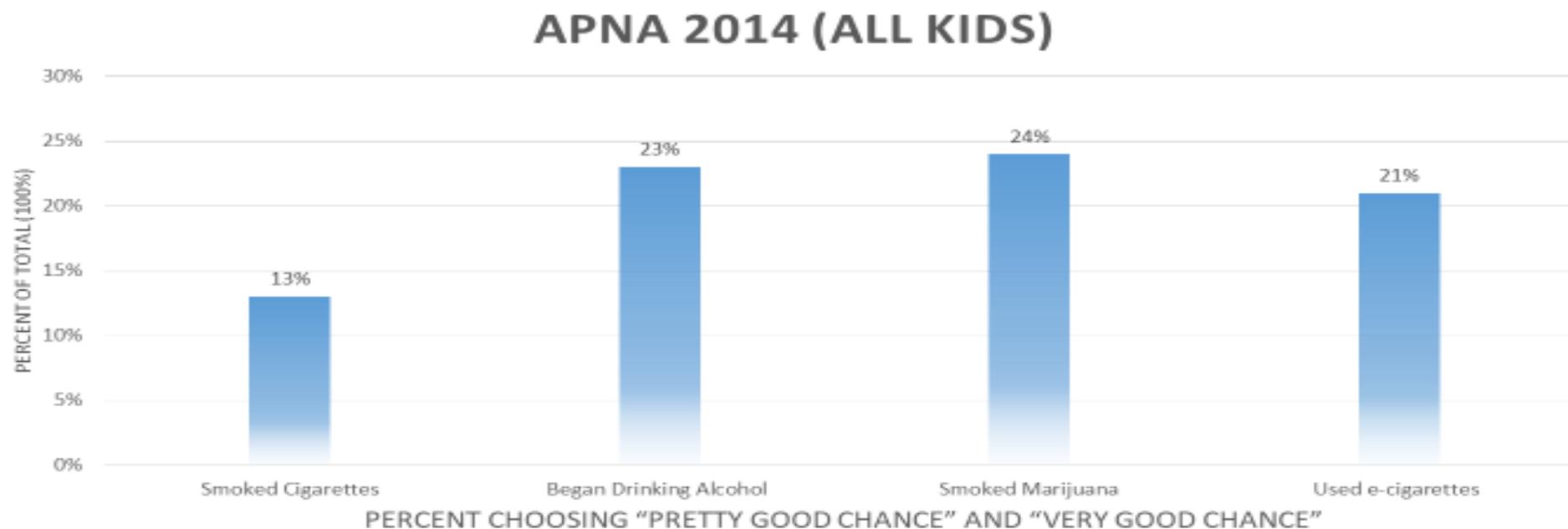
- a. smoked cigarettes?
- b. worked hard at school?
- c. began drinking alcoholic beverages regularly, that is, at least once or twice a month?
- d. defended someone who was being bullied?
- e. smoked marijuana?
- f. carried a handgun?
- g. used e-cigarettes, e-cigars or e-hookahs?
- h. bullied someone or cyber bullied someone?

Likert Scales Response Choices:

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

Data for UCA Research

“What are the chances you would be seen as cool if you”



Tab q24a,c,e,g

Appendix F: Arkansas Prevention Needs Assessment 2013 Student Survey (2014 Report)

27. How wrong do you think it is for someone your age to:

- f. drink beer, wine or hard liquor (for example, vodka, whiskey, or gin) regularly?
- g. smoke cigarettes?
- h. smoke marijuana?
- i. use prescription drugs or non-prescription drugs for the purpose of getting high?
- j. use synthetic marijuana (K2,spice) or bath salts?
- k. use LSD, cocaine, amphetamines or another illegal drug?
- l. use e-cigarettes, e-cigars or e-hookahs?

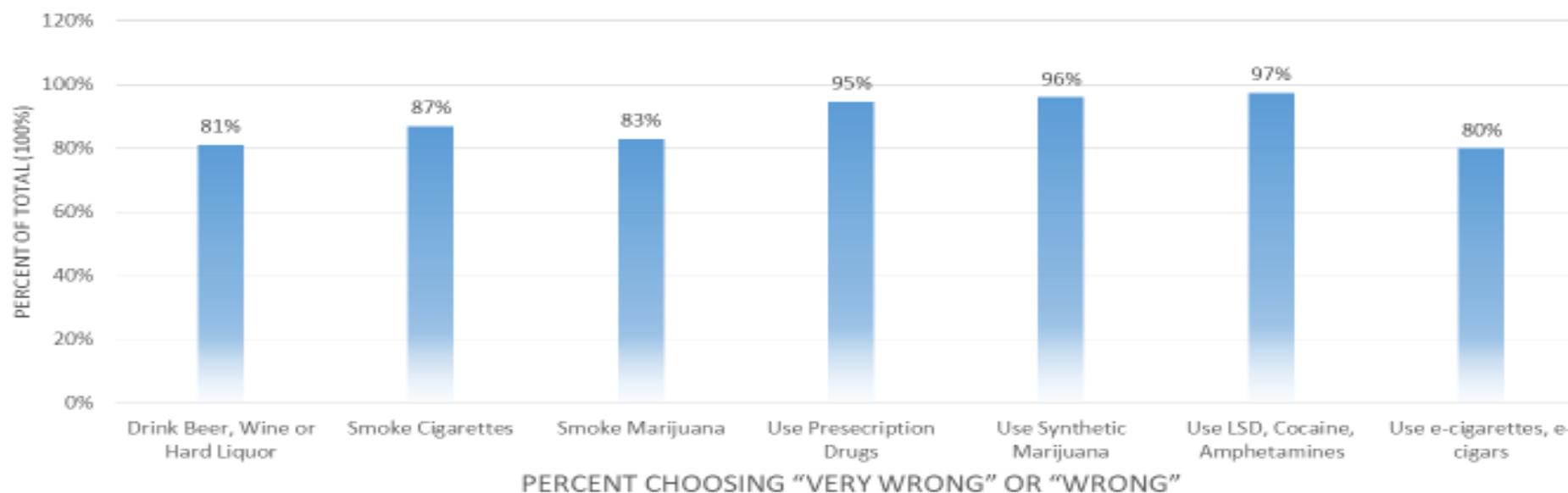
Likert Scales Response Choices:

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

Data for UCA Research

“How wrong do you think it is for someone your age to”

APNA 2014 (ALL KIDS)



Tab q27f-I

Appendix F: Arkansas Prevention Needs Assessment 2013 Student Survey (2014 Report)

44. How much do you think people risk harming themselves (physically or in other ways) if they:

- a. smoked one or more packs of cigarettes per day?
- b. try marijuana once or twice?
- c. smoke marijuana once or twice a week?
- d. take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?
- e. have five or more drinks of an alcoholic beverage once or twice a weekend?
- f. use prescription drugs that are not prescribed to them?
- g. use non-prescription drugs to get high?
- h. use e-cigarettes, e-cigars, or e-hookahs?

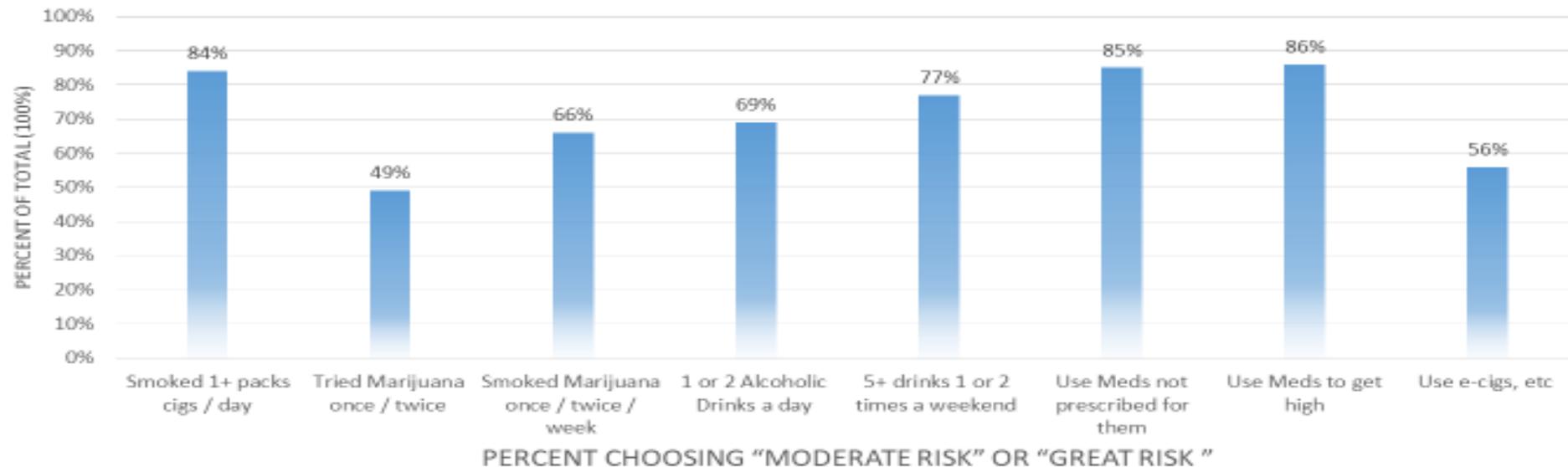
Likert Scales Response Choices:

- No or very little chance
- Little chance
- Some chance
- Pretty good chance
- Very good chance

Data for UCA Research

“What is the perceived risk of”

APNA 2014 (ALL KIDS)



Tab q44a,b,c,d,e,f,g,h

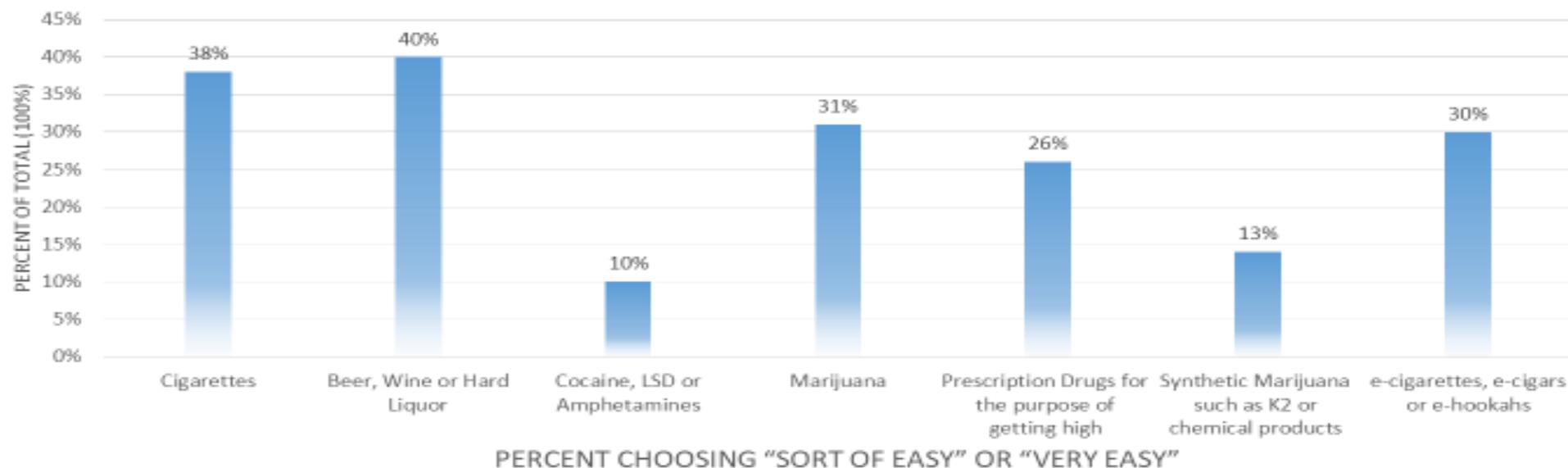
Appendix F: Arkansas Prevention Needs Assessment 2013 Student Survey (2014 Report)

98. If you wanted to get some cigarettes, how easy would it be for you to get some?
99. If you wanted to get some beer, wine or hard liquor (for example, vodka, whiskey, or gin), how easy would it be for you to get some?
100. If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?
102. If you wanted to get some marijuana, how easy would it be for you to get some?
103. If you wanted to get prescription drugs for the purpose of getting high, how easy would it be for you to get some?
104. If you wanted to get synthetic marijuana such as K2 or chemical products such as bath salts to get high, how easy would it be for you to get some?
106. If you wanted to get e-cigarettes, e-cigars, or e-hookahs, how easy would it be for you to get some?

Data for UCA Research

“If you wanted to get some -----, how easy would it be for you to get some?”

APNA 2014 (ALL KIDS)



Tab q98, q99, q100, q102, q103, q104, q106

Conclusions

- Tobacco education prevention and policy is having a positive influence on smoking tobacco.
- Perceived risk related to the use of e-cig/vaping is lower than that of perceived risk related to smoking tobacco.
- Youth do not perceive use of e-cigs/vaping to be as “wrong” as use of other drugs.
- Social norms surrounding use of e-cigs/vaping was similar to the of alcohol and marijuana use.

30mL



Where Do We Go From Here?

- Policy/Regulation
- Program development based on theoretical framework
- Research
- Other

THANK YOU



Duston Morris, Ph.D., CHES
Department of Health Sciences
Email: dustonm@uca.edu



UNIVERSITY
of ARKANSAS
AT PINE BLUFF
—1873—



Emily L. Harris, MPH
Interdisciplinary Leadership
Email: elh91001@cub.uca.edu

