Project T.N.D. 2012

University of Southern California

Institute for Health Promotion &
Disease Prevention Research

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Project TND Recognition

- Considered an evidence-based program by:
  - National Institute on Drug Abuse (NIDA)
  - U.S. Department of Education
  - Center for Substance Abuse Prevention (CSAP)/Substance Abuse and Mental Health Services Administration (SAMSHA)
  - University of Colorado "Blueprints" Project
  - Health Canada
  - California and other State Departments of Education
  - Maryland Blueprints
  - OJJDP

Goals of Project TND
Blueprint 2010 Workshop

1. Mention general structural features of TND and revisions of session material per feedback from teachers and students.

2. Very brief summary of the seven experimental trials of Project TND. (Details of them will be provided upon request.)

3. Speculate on what might be mediating program effects.

Background

- Very few effective drug abuse prevention programs that target senior high school-age youth (14-18) have been developed.

- For younger teens (middle school), drug abuse prevention programs based on social influences model have been most effective.

- Project TND is an effective drug abuse prevention program that targets high school age youth (older teens).

Target Audience for Project TND

- High school youth, ages 14-19, including males and females

- Students in regular and alternative high schools

- Youth from diverse cultural/ethnic groups (e.g., White, Latino/Hispanic, African American, Asian)

Program Delivery

- Includes 12 classroom-based lessons.
- Approximately 40-50 minutes each.
- Designed to be implemented over a 4-week period (3 days per week).
- Some people have implemented TND twice a week for 6 weeks, on the condition that all lessons are taught.

TND INVOLVES MATERIAL THAT FACILITATES A SOCIAL-INTERACTIONAL CONTEXT

Use of Socratic Method

- Used throughout the curriculum, characterized by:
  - Emphasis on interaction of students with teacher, and students with each other
  - Teacher's use of questioning to elicit existing knowledge
  - Students assemble facts and draw conclusions from facts
  - Students tend to "own" the answers they produce, which enhances their beliefs against drug abuse

The T.N.D. Game

- The T.N.D. game was developed to:
  - Motivate student participation
  - Reinforce learning
  - Aid the teacher with classroom management
- The game is to be used as a previous session review at the beginning of class and as a session summary at the end of class.

Psychodrama (Talk Shows)

- Involves having a person behave like they would in a real world situation.

- Provides students with training in empathy.

- Allows students to better appreciate drug abuse consequences by experiencing a network of drug abuse-related social roles.

Method: Role-Playing

- Involves having students practice how to handle social situations that they may experience in the future.

- Used mainly in Session 8 (Self Control).

Changes that appear in TND Third Edition

- Re-ordering of 3 sessions: interactive sessions are weaved in between more didactic material (Session 8 [Stress-Health-Goals] became 6, Session 9 [Self-Control] became 8, Session 6 [Marijuana Panel] became 9)

- Addition of option of greater peer group discussion (Sessions 1 [Communication], 3 [Myths], and 6)

- Removal of some "cheesy" examples

- Easier to use teacher's manual

Curriculum Overview

Materials Needed for Session Delivery

- TND Teacher's Manual and cue cards, student workbooks and worksheets
- TND Game board and pieces
- TND Game score sheets
- TND Video "Drugs and Life's Dreams"
- Overhead projector or power point
- Roll sheets

Project TND Curriculum Outline

- Session 1: Introduction and Communication Skills
- Session 2: Stereotyping
- Session 3: Myths and Denial
- Session 4: Chemical Dependency
- Session 5: Talk Show
- Session 6: Stress, Health, and Goals
- Session 7: Tobacco Basketball and Cessation*
- Session 8: Self-Control
- Session 9: Marijuana Panel*
- Session 10: Thought and Behavior Loops*
- Session 11: Perspectives
- Session 12: Decision making and Commitment

Note: * = Three new lessons added to the TND-1 curriculum to comprise the (current) 12-session TND-2 curriculum.

Session 1: Introduction to Project TND and Communication Skills

- Students are introduced to Project TND and discuss the importance of being active listeners.

- Students learn how to communicate effectively and listen with an open mind.

LISTENING PARAGRAPH

Drug use has many consequences and people use drugs for different reasons. Eddy started smoking marijuana occasionally with a friend. Now he's getting high every day, showing up late for school, or not at all. He says he doesn't even care about the classes he's behind in, because he can always take them again. Sherry thought that a beer every now and then at a party was no big deal. Now she's partying a lot, but feels tired and burnt out. She doesn't want to hear about the crazy things everyone said she did at the party last night. David keeps saying that he can quit smoking cigarettes any time. Every time he tries, he bugs his friends for cigarettes day and night. Then, a few days after he tries to quit, he buys another pack. When people begin to experiment with drugs, they seldom realize how many consequences there might be. The consequences may be different for different people.

EFFECTIVE COMMUNICATION SKILLS
" LISTENING WELL AND SENDING CLEAR MESSAGES"

LISTENING
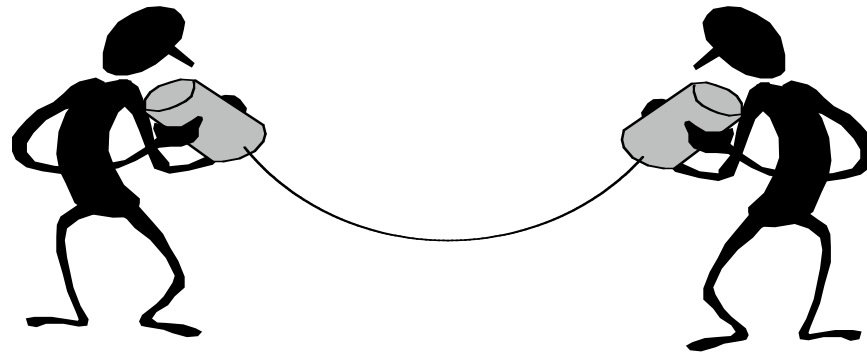
☞ Look at the speaker and pay attention to what he/she is saying

☞ Be respectful of differences of opinion - keep an open mind

☞ Acknowledge what the speaker is saying by nodding, having eye contact, etc.

☞ Ask questions if you don't understand

Session 2: Stereotyping

- Students learn that believing negative stereotypes can lead to self-fulfilling prophecies making themselves more "at risk" for substance abuse.

- Prevalence data regarding high school drug use is provided which shows them just how much students over estimate drug use among peers.

Character Lists-how others see your group; then describe yourself (30 adjectives-13+, 17-)

- Party a lot
- Thoughtful (+)
- Lazy
- Energetic (+)
- Slow learners
- Artistic (+)
- Impatient
- Act without thinking
- Polite (+)
- Creative (+)
- Unique (+)
- Drug users
- Don't finish things
- Independent (+)
- Bright (+)

Hard workers (+)
Behavior problems
Smoke cigarettes
Careless
Have a "don't care" attitude
Absent a lot
Late a lot
Friendly (+)
Cooperative (+)
Street-wise
Drink a lot
Motivated (+)
Good listeners (+)
Smart mouth
Smoke weed a lot

Logic of Rebelling Against Stereotyping

1. Others think older teens are at the extremes, as losers, deviants, stoners (using adjectives list sheet)

2. Older teens are somewhat deviant but not that bad (using adjectives list sheet)

3. Youth conclude: give in to a self-fulfilling prophesy or rebel against it...

PREVALENCE DATA

DRUG	WHAT STUDENTS THINK IS TRUE (Weekly use)	ACTUAL Traditional/ Regular High School (Weekly use)	ACTUAL Alternative High School (Weekly use)
Marijuana	74%	12%	28%
Acid (LSD)	46%	<1%	1%
Cigarettes	83%	16%	39%
PCP	26%	< 1%	< 1%
Cocaine	33%	<1%	4%

Data are from over 15,000 Alternative and Traditional High School students from 80 schools. Surveys and one-on-one interviews, with or without biological validation (drug testing), provide the same estimates. Error in these estimates is low. [earlier TND version; newest one monthly use]

Session 3: Myths and Denial

- Students learn to identify myths associated with drug use, how to distinguish a truth from a lie, and how people use various beliefs to deny or justify their drug abuse.

- Session also confronts denial regarding drug use to minimize the perceptions of positive functions of drug use.

4 COMMON MYTHS ABOUT SUBSTANCE USE

MYTH 1: DRUG   USE   PROVIDES EMOTIONAL PROTECTION FROM THE OUTSIDE WORLD.

MYTH 2: DRUGS   HELP   PEOPLE   TO ESTABLISH FRIENDSHIPS.
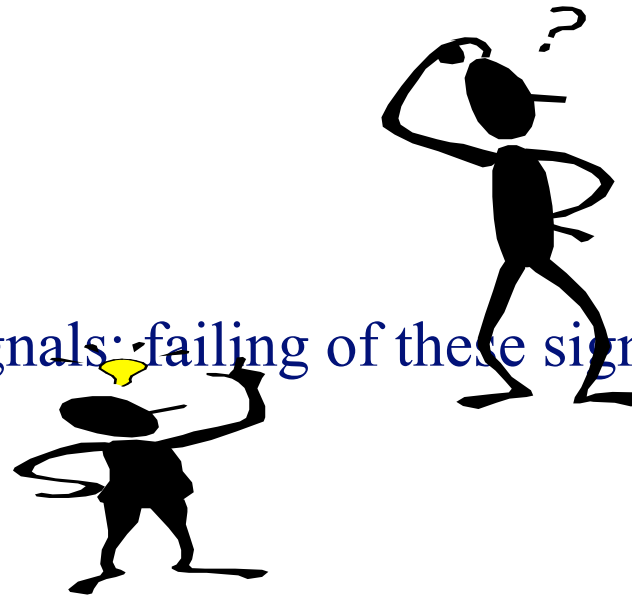
MYTH 3: PEOPLE GET "USED" TO A DRUG.

MYTH 4: DRUG USE SHOWS INDEPENDENCE.

Myth 3: Change cognitive misperceptions about "getting used to a drug"

"I am getting used to the drug, learning how to use it right; I will stop getting sick and enjoy use"

CHANGE TO:

"Getting sick includes warning signals; failing of these signals is the beginning of tolerance"

Need to use *elaboration*

Kernel of truth: one does stop getting sick for a while with some drugs, such as cigarettes or alcohol.

Why is this a myth? One stops getting sick because one's natural warning signals stop operating (analogy to a seat belt buzzer)

Four types of denial

- Drug users frequently blame others or outside social events for their drug use.
- Drug users may deny injury from drug use.
- Drug users deny their effects on others.
- Drug users reinterpret bad things that happen to them, so that they appear to be positive, or at least not so bad.

DRUG USERS MAY REINTERPRET BAD THINGS THAT HAPPEN TO THEM SO THAT THEY APPEAR POSITIVE OF NOT SO BAD.

Session 4: Chemical Dependency

- Students learn about the negative consequences associated with chemical dependency.

- Family roles and enabling are also discussed.

- Students are also provided with a self-help assistance tool kit.

STAGES OF "TRAP"
DAMAGE OCCURRING AT EACH STAGE

1. TRIAL & EXPERIMENTATION
Loss of body's defense and warning system

2. RECREATIONAL USE
Loss of coping skills, social functioning decreases

3. ABUSE
Loss of important aspects of life such as job, family, friends

4. PINNED DOWN/ADDICTED
Loss of hope, self-esteem, self-respect, other peoples' respect

Family Roles Story

- Enabler
- Co-dependent
- Lost child
- Hero
- Scapegoat
- Mascot
- Drug addict
  - Very little empirical support for the existence of these roles, but good material to create healing discussion

Self-help Assistance Toolkit

- Hotline phone numbers and web sites for:
    - Drug or alcohol problems
    - Effects of drug use
    - Family member drug problems
    - Runaway
    - Abused
    - Emotional problems
    - Sexual problems
    - Pregnancy
    - Eating disorder
    - Gambling
    - Overspending

Session 5: Talk Show

- Students role play a talk show whose guests are affected by drug abuse.

- They learn about many physical, emotional and social consequences of chemical dependency.

- Students can experience what it would be like to have a drug abuser impact your life   everyone participates- 6 students sit on panel.

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TALK SHOW HOST
QUESTION

Alcoholic/ Addict (DAVID)

What are some consequences you've experienced as a result of your addiction?
Tell us about one of the worst experiences you've had while using drugs.
What is your family life like? What kinds of problems do you have with them related to your drug use?
What problems does your excessive drug use cause with school?
How has your drug use affected the people closest to you?
When you first started using drugs did you have any idea it would turn out like this?
How did you get started?
Did you feel pressure from friends to use?
What advice would you give to others about drug use?
What would have to happen to motivate you to quit?
How is your drug use affecting your relationship with Cecilia?
Why do you use and abuse?

Session 6: Stress, Health and Goals

- Students learn various ways to cope with stress and the importance of health as a life value in accomplishing life's goals.

Coping Mnemonic

- C - Consider alternatives
- O - Others' support
- P – Problem solving
- E – Esteem building

OTHER'S SUPPORT

Counseling

Any group or individual that provides you with an outlet for your frustrations, stress, and sorrows; where you feel complete safety, trust and freedom to express yourself.

Support groups

Any kind of organized group that helps to support people who are dealing with an addiction of any kind of problems and or behaviors associated with addiction in either oneself or others. Examples are: Alcoholics Anonymous, Narcotics Anonymous, CoDA, Alanon, Alateen, etc.

Processing & Venting

Any friend, family member, peer who is willing to listen and allow a safe place to talk about, express feelings, cry, etc. (a safe place means that no matter what you say, it is CONFIDENTIAL and that you are still loved and accepted and not judged or criticized).

Peer groups

Any group of (same age) peers who share interests, problems or hobbies with you, that you can meet with socially, get support from and share experiences and feelings with.

Networking with others who share the same problems and feelings, or who have overcome similar experiences, can help you feel more able to cope with stress, getting help can also give you an opportunity to help others. Others can identify with your experiences and feelings. We can help each other to learn ways to overcome our problems.

Logic of Instilling Health As a Value

1. What do you want to accomplish in the future?

2. Is your health important to accomplish these goals?

3. Can drug abuse interfere with your health?

4. Youth conclude: give up goals or don't abuse drugs...

Quality of Life

- Questionnaire
- People who have died prematurely
  - What could they have done?
- Admired people
- Importance of good health to achieve goals

Session 7: Tobacco Basketball and Use Cessation

- Students play a "tobacco basketball" question game and learn about tobacco use consequences and cessation information.

- They are also introduced to a brief quit manual.

PROJECT TND

TOBACCO USE

CESSATION MANUAL

MAKE A COMMITMENT

- PICK <u>YOUR</u> QUIT DAY - IN THE NEXT TWO WEEKS,

- PLAN A QUIT DAY - THE BEST DAY PROBABLY WOULD BE THURSDAY. YOU WOULD HAVE FOUR DAYS TO GO THROUGH WITHDRAWALS BEFORE THE SCHOOL WEEK STARTS AGAIN.

- KNOW THAT THE FIRST SEVEN DAYS WILL BE THE MOST DIFFICULT TO NOT SMOKE

- WRITE <u>YOUR</u> PERSONAL STATEMENT OF COMMITMENT
        "I no longer smoke."
        "I quit using tobacco."

- PREPARE TO CONQUER NICOTINE ADDICTION

NCI Self-help booklet also provided

- Clearing the Air: How to Quit Smoking and Quit for Keeps
  - 23 pages: knowing what to expect, ways of quitting, diet, what happens after quitting, maintenance strategies

Session 8: Self-Control

- Students learn to examine their own level of self-control, how to match their behavior to different social contexts, the importance of being assertive, and achieving personal goals.

Social Self-control Scale

- "I enjoy arguing with people"
- "If I think something someone says is stupid I tell them so"
- "My mouth gets me in trouble a lot"
- "Sometimes I provoke people just for the fun of it"
- "I express all of my feelings"
- "If I am angry I act like it"
- "I do things just to get attention"
- "My feelings get hurt easily"
- "I hate being wrong"
- "I say things I regret later"
  - alpha=.72; 4-point scale, from "1=never" to "4=always"

The 3 parts to ASSERTIVE COMMUNICATION

"Let's say your friend borrowed a CD and now you'd like it back.":

A. Other-statement   "I'm glad you enjoyed the CD..."

B. Self-statement   "...but I would like to listen to it today."

C. Action statement "How about if I pick it up from
                             you after school?"

Session 9: Marijuana Panel

- Students learn about the consequences of marijuana use through use of a group "panel" activity.

- Students role-play those affected by marijuana use.

Character sheets help you understand the part you are playing. You may give your own interpretation of the part you are playing, but be sure to mention the points listed below.

Ex- (former) marijuana user/abuser - (DANNY / DANIELLE)

♦ You used to smoke marijuana every day. It became a problem.

♦Your parents and girlfriend/boyfriend started to nag you about it.

♦You did not admit it to anyone else, but your schoolwork was getting worse. You missed a lot of school.

♦ You felt like you couldn't make it through the day without at least one joint.

♦ You depended on marijuana to make you feel better. All you wanted was to be high and not think about anything. You told yourself, and everyone else, that you did it because I was stressed.

♦After a while, the effects of marijuana lessoned and it got boring to smoke it.

♦You noticed that you had trouble remembering things.

♦You realized that your stress and problems were getting worse because you were not doing anything to deal with them. All you did was get high. Now you see that you could have done a lot of things that would have helped, instead of just escaping.

♦A lot of the jobs you might want require drug tests. You don't want to miss out on getting a job because of smoking weed. It's not worth it.

♦Since you quit using, you feel a lot better. You have more energy and your are finally taking care of the things in your life.

Session 10: Thought and Behavior Loops

- Students learn how positive thinking, choices and behavior, or negative thinking, choices and behavior are tied together as process "loops".

- Also covered are reasons for violent behavior and violence prevention material.

POSITIVE EXPERIENCE LOOP

Positive thinking

Positive behavior
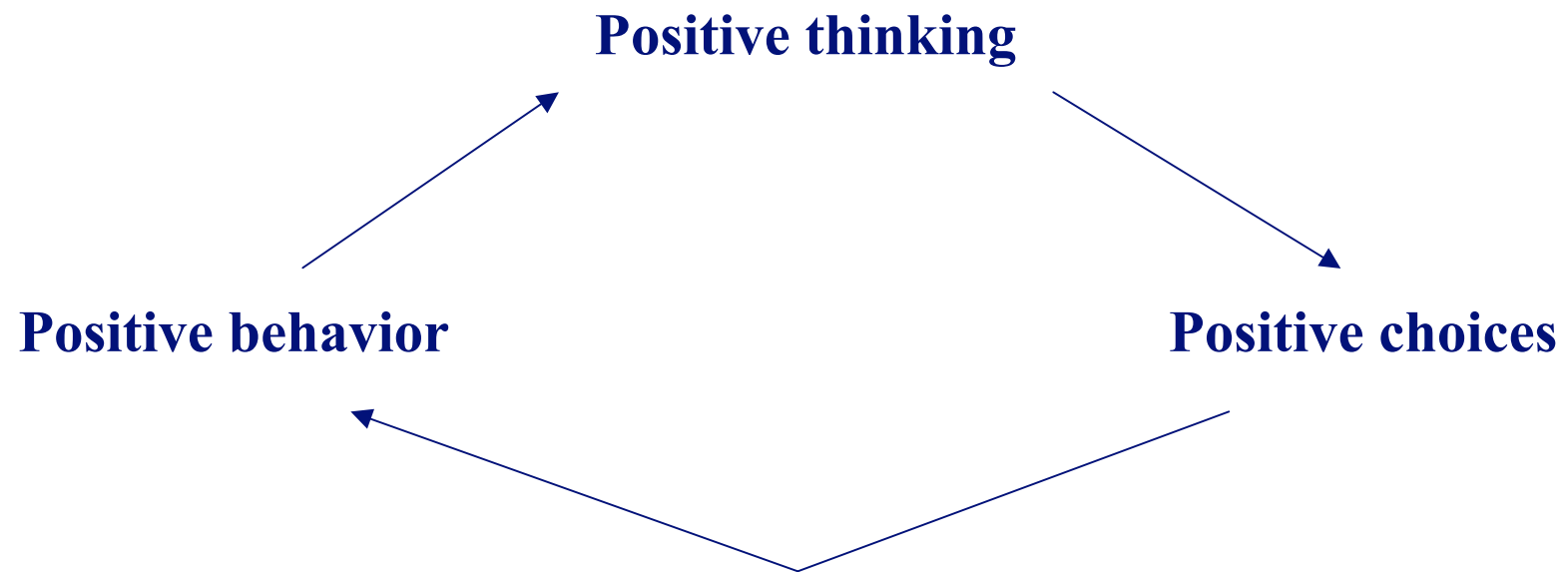
Positive choices

Example of Positive Thought Loop

- Positive Thought-It is a new day
- Positive Choice-I can get things done today
- Positive Behavior-Responsible behavior
  - Can get cheesy – watch out on examples

Example of negative thought loop

- Negative Thought-I am tired. (disappointed)
- Negative Choice-I will sleep in. (give up)
- Negative Behavior-Late for school.
  - Can get cheesy-watch out on examples

VIOLENCE PREVENTION

Below are some strategies for avoiding violence.

1. Find resources in your community to help you resolve conflict, such as peer or adult mediators, church leaders, or talking to other adults, that you trust.

2. Learn to talk out, avoid, ignore, or minimize dares to engage in violence. Try to see the situation through the other person's eyes. You might say something like "I'm sorry," or make a joke, or say something positive to the other person.

3. Learn to keep calm. Get away from the situation, or count to 20 and think about your options. Real toughness is not letting others press your buttons.

4. Practice assertiveness. For example, an assertive statement is: "I know you are upset, but I don't mean any harm. We're good."

5. Think past the situation. Set future goals for yourself.

Session 11: Perspectives

- Students present differing views on topics (e.g., public smoking laws; drug use) and find out that most people have moderate views regarding drug use.

Definitions

- Radical--lots of change, shake things up.

- Traditional--likes things the way they are, no change at all.

- Moderate—in between, less extreme, balance.
  - Gun control, anti-smoking laws, drug use examples

Make sure students understand that moderate means that we can consider all of the views objectively without getting too emotional. Being moderate means that we tend to be more flexible, levelheaded, reasonable, and balanced.

TRADITIONAL   **MODERATE**   **RADICAL**

no change   balance   major change

Logic of Attitudinal Perspectives

1. General self-attitudes: most people view themselves as
    moderates

2. Specific attitudes: regular drug use is one thing you do
    Traditional-no drugs should be used except
        for medically-directed reasons.
    Radical-all drugs should be legalized,
        used and abuse everyday if one wants do.
    Moderate-adults can use legal drugs in moderation,
    not interfering with other aspects of their lives

3. Youth conclude: become a radical or don't abuse drugs
    if one wants to remain a moderate...

Session 12: Decision Making and Commitment

- Students realize they have many choices and can make different decisions regarding drug use and abuse.

- Students practice decision-making skills by thinking through the "pros" and "cons" of drug use and make a commitment to themselves regarding drug use.

Preventing the transition from drug use to abuse: Decision making

- Brainstorming--list options without judging them
- Weigh the pros and cons of each option
- Select the best option
- Follow through
- Re-evaluate--choose again
- Personal commitment about drug use and abuse (think about, discuss, not use, cut down, quit)

SCENARIO

You are at a party and your friend, who drove you, continues to drink throughout the night. It is now 1:30 a.m. and you are tired and want to go home. Most of your friends have already left the party. Finally, your friend says, "I'm ready; let's go." You are unsure whether he can drive at this point. He seems really drunk. You can smell the alcohol on his breath and he is slurring his words. You don't have a driver's license. The party is getting wilder, and you don't know any of the people who are still there. It doesn't seem like you will be able to safely "crash" there. What do you decide to do?

Project TND
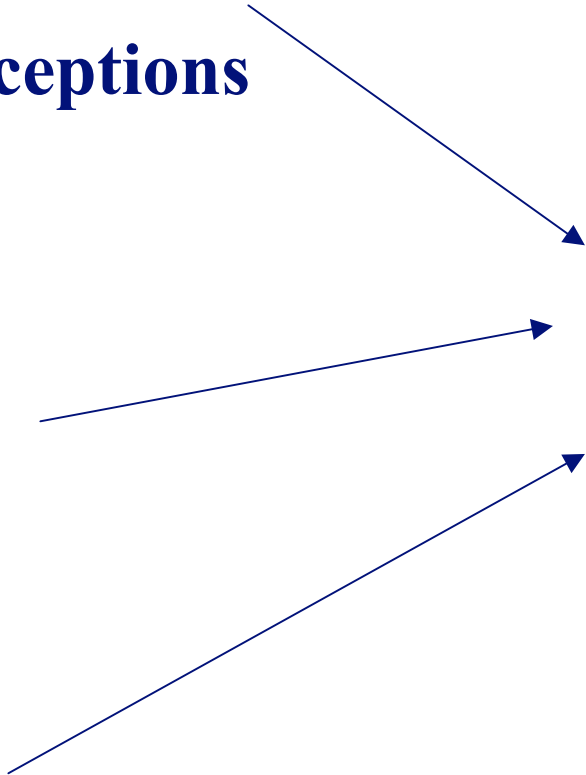# Model and "Current Working Theory"

Motivation-Skills-Decision Making Model of Problem Behavior: The "Initial" Guiding Theory for TND

Motivation/
Cognitive Misperceptions

Social and
Self-control Skills

Behavior:
- Violence-
related
- Drug use

Decision Making

Motivation-Skills-Decision Making Model

Motivation:

- People like to live in harmony between their beliefs and behaviors.

- Awareness of discrepancies in one's beliefs leads to a desire to reduce the discrepancies (motivation).

Motivation

In TND lessons, students:

- Examine their beliefs and perspectives
- Examine their ambivalence about drug use
- Clarify what kind of person they are and what they value
- Resolve self-arguments

Lessons that Emphasize Motivation Component

Session 2 – Stereotyping
- Students become aware that others often think they are deviant, but they are not that deviant. To achieve balance, to rebel against the stereotype.

Session 3 – Myths and Denials
- Students identify myths associated with drug use, and how people use various beliefs to justify their drug use.

Session 4 - Chemical Dependency
- Family roles, TRAP, assistance

Session 5 – Talk Show
- Empathy on consequences of drug misuse

Session 6 – Stress, Health, and Goals
- Students learn importance of health as a value in accomplishing life's goals.

Session 9 – Marijuana Pannel
- Empathy and knowledge on marijuana consequences

Session 11 – Perspectives
- Students find that most people have moderate views regarding drug use.

Lessons that Emphasize Skills

- Social skills
  - Session 1: Introduction to Project TND and Communication Skills. Students learn the importance of listening and other communication skills.

- Coping
  - Session 6: Stress, Health, and Goals. Students learn healthy alternatives for coping with stress.

- Smoking cessation
  - Session 7: Tobacco Basketball and Use Cessation. Youth learn some quit tobacco use skills

- Self-control
  - Session 8: Self-Control. Students learn how to match their behavior to different social situations.

Lessons the Emphasize Decision Making

- Session 10: Thought and Behavior Loops
  - Youth learn steps of positive thinking and apply it to violence and drug use.

- Session 12: Decision Making and Commitment
  - Students examine the many choices they have about behaviors, including drug use.
    - They make a personal commitment regarding drug use (e.g., to think about the dangers of drug use, reduce or quit drug use, or continue to be drug free).

Program Evaluation Research

Evaluation of TND

- 7 experimental (randomized) evaluation studies have been conducted since 1994.
    - The 7th is ongoing (3 year follow-up)

- Studies have involved ethnically diverse groups of students from regular and alternative high schools, in urban, suburban, and rural areas.

Demographic Characteristics of TND Evaluations

Demographics	Study 1 (AHS)	Study 2 (RHS)	Study 3 (AHS)
% Male	62	47	54
% Anglo	37	34	45
% Latino	46	38	42
% African American	8	26	5
% Asian	4	1	1
% Other ethnicity	5	1	1

NOTES**:** AHS=Alternative High School; RHS = Regular High School; N=2473

Demographic Characteristics of Students in Recent TND Evaluations

Demographics	Study 4 (AHS/RHS)	Study 5 (AHS)	Study 6 (AHS/RHS)
% Male	52	62	48
% Anglo	18	11	41
% Latino	62	72	29
% African American	8	6	16
% Asian	8	0	3
% Other ethnicity	4	11	11

NOTES: AHS=Alternative High School; RHS = Regular High School; N=5757 across 3 studies

Demographic Characteristics of TND Evaluations

Demographics	Study 7 (AHS)
% Male	57
% Anglo	12
% Latino	65
% African American	4
% Mixed	13
% Other ethnicity	6

NOTES: AHS=Alternative High School; RHS = Regular High School; N=1186

Baseline Behavioral Characteristics of Students in the Early TND Evaluation Studies

Drug Use	Study 1 (AHS)	Study 2 (RHS)	Study 3 (AHS)
% Using CIGARETTES	57	24	57
% Using ALCOHOL	64	36	63
% Using MARIJUANA	55	22	54
% Using HARD DRUGS	29	7	30

Violence	M	F	M	F	M	F
% WEAPON CARRYING	60	22	34	15	53	18
% VICTIMIZED	68	40	37	28	60	50

NOTES: AHS=Alternative High School; RHS = Regular High School
M=males, F=females.
Drug use %: pertains to any use in last 30 days. "Hard drugs" includes stimulants, hallucinogens, cocaine, inhalants, and other drugs.
Violence %: pertains to any such behavior in the last 12 months.
Weapon carrying includes guns and/or knives.
N=2473

Any Effects on Drug Use by TND Trial

TND Trial	Cigarettes	Alcohol	Marijuana	Hard drug use
TND-1 AHS		+		+
TND-1 RHS		+		+
TND-2 AHS	+	+	+	+
TND-Network AHS				+
TND-3 AHS/RHS				+
TND-Dissem.RHS			+	+
TND-EA AHS	+	+		+

Summary of effects:

No negative impacts were found.

Most consistent effects were on hard drug use, in all 7 of 7 evaluated trials.

Effects on alcohol use=4 trials; effects on marijuana use or cigarette smoking=2 trials.

School environment manipulations do not enhance effects (TND-1 AHS).

Self-instruction does not work (TND-2).

Behavioral skills instruction NOT important above and beyond cognitive misperception correction (TND-3).

Quality of classroom interaction is very important (TND-2, TND-Networked, TND-EA).

Enhanced training appears to not be important (TND-3, TND-Dissemination).

Effects tested/found on violence victimization and weapons carrying (TND-1-AHS and RHS, TND-2 AHS).

In general, the program has tended to work better on heavier levels of use.

Differences in effects have failed to be observed as a function of gender or ethnicity of participant.

Current trial: At 1-year follow-up MI booster programming failed to strengthen program effects

Does enriched school environment programming help?-- nope

- TND-1-AHS made use of a school-as-community component, with use of the ASB, 6 events per school, and a newsletter to network schools in that condition – manipulation check worked but not incremental effects of this component

Does self-instruction programming work?--nope

- TND-2-AHS provided a comparison of the SAME program material via health educator delivered, highly interactive versus a self-instruction format (programmed learning packets, with a health educator simply available for questions)– the self-instruction program produced the same change in knowledge as the interactive program condition but did not do better than the control condition.

Does making use of social networks within anti-drug use socioenvironmental contexts help?--yes

- TND-Networked increased social interaction among youth within groups in the classroom, guided by appropriate peer leaders, and enhanced program effects in TND compared to the standard TND.
  - We make use of this increased interaction feature in the current curriculum

Does behavioral skills instruction above and beyond motivation and decision making help?---nope

- TND-3-AHS found that a combined TND program did no better than a cognitive misperception only version, and both worked on hard drug use.

What does this mean? One may speculate...

- Something about the classroom interactional context is key.
- Something that students do based on prompting from the material is key.
- Healing talk– spontaneous statements made
  - By students to class (e.g., "both of my parents are alcoholic, maybe I should not drink")
  - Students to each other (e.g., Student 1: "I only use meth on weekends, that is not abuse"; Student 2: "Yes, that is drug abuse.")

Current TND Research

- We are examining use of Motivational Interviewing and "change talk" as booster programming with three contacts, 1 in person and 2 by telephone

- We are comparing this condition to standard TND and a control condition

- At 1-year, the booster appear to not add anything, but we need to see what happens at the 2-to-3 year follow-up

Other New TND Research

- We will begin a process analysis of TND sessions to detect critical moments of change

Questions ????