

Early prevention programs for children could help end the opioid crisis

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Can a program for Grade 7 students help end the opioid crisis? The answer is yes, according to <u>compelling research findings</u> on school-based primary prevention interventions.

As noted by the Canadian Centre on Substance Use and Addiction, the opioid crisis is "a complex public health issue devastating the lives of many Canadians and their families who are experiencing accidental overdose or death from opioids."

To address this crisis, many of <u>Canada's responses to the opioid crisis</u> <u>still focus downstream on adults</u>, after problems have started or become entrenched. In contrast, primary <u>prevention</u> operates upstream in childhood—before most <u>young people</u> start engaging in substance use, misuse or experimentation.

As researchers concerned with helping children avoid opioid misuse, we conducted a systematic review of prevention programs designed for this purpose. We found two programs that stood out for their success in preventing opioid misuse. Both were delivered to children in middle school and tested using rigorous evaluation methods, namely, randomized controlled trials (RCTs).

Potentially life-saving interventions

The program <u>Strengthening Families</u> significantly reduced prescription opioid misuse among young people in Iowa and Pennsylvania, with benefits lasting up to 14 years after the program ended. The impact was also large, <u>reducing misuse by 65 percent</u>.



<u>Project PATHS</u>, the other successful program which was delivered in Hong Kong, significantly reduced heroin use with benefits lasting up to two years later. And each time these programs prevented a young person from misusing opioids, they potentially saved a life.

Beyond intervening early, both of these successful programs shared other similarities. Children learned enduring skills such as resisting peer pressure, managing stress and cultivating positive friendships. Teaching multiple skills that children could apply throughout their development likely played a role in the programs' long-term success—and likely contributed to other positive outcomes including reducing cannabis and ecstasy use.

Both program evaluations also highlighted the ability to reach very large numbers of children, using school delivery. These numbers were about 12,000 for Strengthening Families and about 8,000 for Project PATHS.

Reducing harms, distress, criminal activity

These numbers suggest that new Canadian school-based prevention efforts could potentially reach thousands of young people. With such a substantial population impact, these programs hold great promise to reduce many harms associated with the opioid crisis—including not only deaths but also criminal activity and distress for individuals misusing opioids and their families.

These two school-based programs have another significant feature adding to their appeal for delivery in Canada. Training for facilitators is very brief—only two days for Strengthening Families and three days for Project PATHS.

The short training time also helps reduce delivery costs, further increasing the appeal for policymakers and school administrators.



Canadian evaluations, programs needed

Yet program benefits do not always translate <u>between countries</u>. So Canadian evaluations would be an important component to accompany implementation of either or both programs.

<u>PreVenture</u>, a school-based program developed by a <u>clinical psychologist</u> and researcher at the University of Montréal, is a good example of expanding both prevention and evaluation efforts.

Researchers from across Canada are currently assessing whether this program can avert opioid use with <u>youth in British Columbia</u>, <u>Ontario and Nova Scotia</u>—building on its success with decreasing alcohol problems as well as the number of drugs that youth used in an RCT in the <u>United Kingdom</u>.

If successful, <u>PreVenture</u> could also be expanded so that fewer Canadian children experience the devastating effects of the opioid crisis.

Research has highlighted important gains that Canadians can achieve by investing in school-based prevention programs. These interventions hold the potential to stop many young people from experiencing the harms of the <u>opioid</u> crisis.

To realize these benefits, however, leadership is needed at the provincial and territorial levels given that schools fall within these jurisdictions. Yet the federal government can also take strong leadership, for example, encouraging these types of primary prevention efforts across the country—as they have done with previous <u>important child health problems</u>.

Prevention needs to be central



The federal government has committed more than a billion dollars since 2017 to address the toxic drug problem—paralleled by provincial and territorial funding.

But a policy shift towards meaningful prevention also requires tackling the realities of current Canadian health spending priorities. While last November, the federal government called for proposals for "projects aimed at helping prevent and decrease substance use-related harms among young people," such efforts need to be backed by rigorous evaluation methods such as RCTs. And the programs we describe above have RCT support—suggesting that these are a place to start.

In addition, only <u>6.1 percent of health spending in 2023 went towards</u> <u>public health including prevention, a longstanding pattern</u>. So concerted, coordinated and collaborative efforts are needed within and across every policy level and jurisdiction.

Devastation from the <u>opioid crisis</u> is obviously continuing. Efforts to respond to the acute crisis must therefore also continue—including ensuring access to effective treatments for all in need and curtailing the supply of toxic substances.

But primary prevention also needs to be central in the public health responses given that continuing increases in treatment spending have not been enough and will likely never be enough on their own. Primary prevention is a crucial but underused component of a comprehensive public health approach.

Most importantly, new <u>primary prevention</u> efforts can increase the chances of more young people experiencing the healthy development that they deserve, in turn precluding much suffering and many costs later in life—while meeting the <u>collective duty of care</u> that all Canadians share for all children.



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