Healthy Families Healthy Youth
Year 3 - Final Report

Prepared by:

Wendy Wolfersteig, PhD
Grant Yoder, MEd
Destinee Brittingham, MA
Mara Funke, MPH
Siobhan Lawler, MSW
# Table of Contents

Executive Summary ........................................................................................................................ 1  
  Participants: ............................................................................................................................................... 2  
  Findings: ................................................................................................................................................... 2  
Background ..................................................................................................................................... 4  
  Format ....................................................................................................................................................... 5  
  Modifications ............................................................................................................................................ 5  
Methodology ................................................................................................................................... 7  
  Family Packets .......................................................................................................................................... 7  
    Consent Process ............................................................................................................................................. 7  
    Instruments .............................................................................................................................................. 8  
    Distribution ............................................................................................................................................. 9  
    Survey Matching ......................................................................................................................................... 10  
    Response Rate .......................................................................................................................................... 10  
Analysis Plan .......................................................................................................................................... 10  
Limitations .............................................................................................................................................. 11  
Theoretical Framework ................................................................................................................. 12  
Adults ............................................................................................................................................ 14  
  Demographics ......................................................................................................................................... 14  
    Race .......................................................................................................................................................... 14  
    Gender ..................................................................................................................................................... 15  
    Ethnicity .................................................................................................................................................. 16  
    Age ........................................................................................................................................................... 16  
Adult Preliminary Findings ..................................................................................................................... 17  
  Knowledge .............................................................................................................................................. 17  
  Program Impact ......................................................................................................................................... 18  
  Perceived youth exposure to substances ............................................................................................... 19  
  Risk for youth ............................................................................................................................................ 21  
  Post program satisfaction ....................................................................................................................... 23  
Adult Pre to Follow-up ........................................................................................................................... 25  
  Knowledge .............................................................................................................................................. 25  
  Program impact ......................................................................................................................................... 25  
    Adult and youth communication about substance use ............................................................................ 27  
    Perceived youth exposure to substances ............................................................................................... 28
HFHY Year 3 Evaluation Report

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk for youth</td>
<td>30</td>
</tr>
<tr>
<td>Family Norms</td>
<td>31</td>
</tr>
<tr>
<td>Frequency of substance use conversations</td>
<td>32</td>
</tr>
<tr>
<td>Program utility</td>
<td>32</td>
</tr>
<tr>
<td>Adult Open-Ended Response</td>
<td>35</td>
</tr>
<tr>
<td>Pre-Survey</td>
<td>35</td>
</tr>
<tr>
<td>Youth</td>
<td>47</td>
</tr>
<tr>
<td>Demographics</td>
<td>47</td>
</tr>
<tr>
<td>Race</td>
<td>47</td>
</tr>
<tr>
<td>Gender</td>
<td>48</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>49</td>
</tr>
<tr>
<td>Age</td>
<td>49</td>
</tr>
<tr>
<td>Youth Preliminary Findings</td>
<td>50</td>
</tr>
<tr>
<td>Knowledge</td>
<td>50</td>
</tr>
<tr>
<td>Substance use communication</td>
<td>51</td>
</tr>
<tr>
<td>Perceived parental disapproval</td>
<td>53</td>
</tr>
<tr>
<td>Substance use risk</td>
<td>54</td>
</tr>
<tr>
<td>Family rules</td>
<td>56</td>
</tr>
<tr>
<td>Peer disapproval</td>
<td>57</td>
</tr>
<tr>
<td>Difficulty communicating about substance use</td>
<td>58</td>
</tr>
<tr>
<td>Post program satisfaction</td>
<td>59</td>
</tr>
<tr>
<td>Youth pre to follow-up</td>
<td>61</td>
</tr>
<tr>
<td>Knowledge</td>
<td>61</td>
</tr>
<tr>
<td>Substance use communication</td>
<td>62</td>
</tr>
<tr>
<td>Spend time doing fun things</td>
<td>63</td>
</tr>
<tr>
<td>Perceived parental disapproval</td>
<td>64</td>
</tr>
<tr>
<td>Substance use risk</td>
<td>65</td>
</tr>
<tr>
<td>Substance use conversation</td>
<td>67</td>
</tr>
<tr>
<td>Family rules</td>
<td>67</td>
</tr>
<tr>
<td>Youth peer disapproval</td>
<td>69</td>
</tr>
<tr>
<td>Program utilization</td>
<td>70</td>
</tr>
<tr>
<td>Youth Open-Ended Response</td>
<td>72</td>
</tr>
<tr>
<td>Pre-Survey</td>
<td>72</td>
</tr>
<tr>
<td>Post-Survey</td>
<td>80</td>
</tr>
<tr>
<td>Facilitators and Coordinators</td>
<td>86</td>
</tr>
</tbody>
</table>
HFHY Year 3 Evaluation Report

Post-Survey ................................................................. 86
  Participants ........................................................................ 86
  Program perceptions ............................................................ 87
  Perceived program impact .................................................. 88
  Participation ....................................................................... 89
  Open-ended questions .......................................................... 91
Follow-up ........................................................................ 93
  Coordinator program perception ......................................... 93
  Coordinator program impact .............................................. 95
  Coordinator open-ended questions ...................................... 96
Conclusion ........................................................................ 99
  Recommendations ............................................................ 100
Appendix 1: Participating Schools and Schedule .................... 101
Appendix 2: HFHY County Coverage .................................... 102
List of Figures

Figure 1: Ecodevelopmental Model ................................................................. 12
Figure 2: Theoretical Framework ................................................................. 13
Figure 3: HFHY Program Impact ................................................................. 18
Figure 4: Perceived youth exposure to substances according to parents/caregivers 20
Figure 5: Perceived youth risk regarding substances according to parents/caregivers 22
Figure 6: Parent/caregiver satisfaction with HFHY - set 1 ................................. 23
Figure 7: Parent/caregiver satisfaction with HFHY-set 2 ................................. 24
Figure 8: Program impact among parents/caregivers pre to follow-up ................. 26
Figure 9: Parent/caregiver communication about substances pre to follow-up ........ 27
Figure 10: Perceived youth exposure to substances pre to follow-up ................... 28
Figure 11: Perceived youth substance use risk according to parents/caregivers pre to follow-up 30
Figure 12: Parent/caregiver perceived family norms pre to follow-up .................. 31
Figure 13: Parent/caregiver reported substance use conversation ....................... 32
Figure 14: Program utility according to parents/caregivers ................................. 33
Figure 15: Program effect among parents/caregivers ......................................... 34
Figure 16: Youth reported communication regarding substance use ................... 52
Figure 17: Youth perceived parental disapproval of substance use ....................... 53
Figure 18: Youth perceived substance use risk ............................................... 54
Figure 19: Family rules according to youth .................................................... 56
Figure 20: Peer disapproval according to youth ............................................... 57
Figure 21: Youth level of difficulty communicating about substance use ............... 58
Figure 22: Youth satisfaction with HFHY - set 1 ............................................ 59
Figure 23: Youth satisfaction with HFHY - set 2 ............................................ 60
Figure 24: Substance use communication according to youth ............................ 62
Figure 25: Doing fun things with parents/caregivers according to youth ............... 63
Figure 26: Youth perceived parental disapproval of substance use ..................... 64
Figure 27: Youth perceived substance use risk - pre to follow-up ...................... 65
Figure 28: Substance use conversation according to youth - pre to follow-up ........ 67
Figure 29: Family rules according to youth - pre to follow-up ............................ 68
Figure 30: Perceived youth peer disapproval - pre to follow-up ......................... 69
Figure 31: Program utilization by youth - set 1 .............................................. 70
Figure 32: Program utilization by youth - set 2 .............................................. 71
Figure 33: Facilitator and coordinator role ..................................................... 86
Figure 34: Facilitator and coordinator perceptions of the HFHY Program ............... 87
Figure 35: Facilitator and coordinator program impact ....................................... 88
Figure 36: Perceived program participation .................................................... 89
Figure 37: Coordinator program perception .................................................... 94
Figure 38: Coordinator program impact ......................................................... 95
List of Tables

Table 1 New Schools for Year 3 .......................................................... 5
Table 2 Adult race totals for HFHY .................................................... 15
Table 3 Adult gender totals ................................................................. 15
Table 4 Adult ethnicity for HFHY ....................................................... 16
Table 5 Adult age totals .................................................................. 16
Table 6 Adult change in knowledge from pre to post ......................... 17
Table 7 Adult change in knowledge from pre to follow-up .................. 25
Table 8 Youth race totals ................................................................. 48
Table 9 Youth gender totals ............................................................... 48
Table 10 Youth ethnicity totals ......................................................... 49
Table 11 Youth age totals ............................................................... 49
Table 12 Youth knowledge from pre to post .................................. 50
Table 13 Youth knowledge change from pre to follow-up .................. 61
Executive Summary

The Healthy Families Healthy Youth (HFHY) Program has been implemented since the Spring of 2016, and has now completed its third year. The program was initially developed in 2016 by the Arizona Governor’s Office of Youth, Faith and Family (GOYFF) in collaboration with substance abuse professionals in Arizona. Adaptations to the program have been made over time to reflect the changing drug trends in Arizona, and to respond to the feedback of participants and coordinators. Since the program’s inception, the Southwest Interdisciplinary Research Center (SIRC) Office of Evaluation and Partner Contracts was contracted as a third party to evaluate the program.

As a developmental point for youth, 7th grade is a critical time for interventions related to substance use. The program was designed for 7th grade students and their parents to aid in their communication about the avoidance of drugs and alcohol. The program has multiple goals including: increasing knowledge of the effects of drug use, improving youth and parent(s)/caregiver(s) communication about substance use, and increasing awareness of current drug trends. Research has shown that these points of intervention are all critical protective factors for the initiation of substance use. The culminating experience of the program is the development of a prevention plan to help aid youth in the avoidance of drugs and alcohol in the coming year. For Year 3, the implementation timeline was shifted and the program was implemented in the spring.

Year 3 of the HFHY Program maintained the same format as previous iterations. The program itself was designed to be delivered over the course of two and a half hours, and was implemented outside of regular school hours. The first portion of the program was an introductory session delivered by a school administrator to both adults and youth. The youth and adults were then divided into separate sessions where they were provided information about drugs and avoidance strategies as well as conversation prompts to help initiate a dialogue. After these separate sessions, youth and adults were brought back together to share a meal and work through some of the conversation prompts. It was during this meal that families developed their family prevention plans.
Participants:
There were a total of 617 adults and 615 youth who completed the pre-survey, and 590 adults and 588 youth who completed the post-survey with a total of 575 adults and 566 youth with matched pre and post-surveys. Ultimately, 106 adults and 105 youth completed the follow-up survey several months later. There were 104 adults and 100 youth with matched pre and follow-up surveys. This final report summarizes the outcomes from adults and youth with matched pre and post-surveys, as well as those adults and youth with matched pre, post and follow-up surveys.

Findings:
There were multiple positive outcomes for youth and adults immediately following the completion of the HFHY Program. Both adults and youth experienced increases in various dimensions related to substance use communication and drug perceptions. Weeks after taking part in the HFHY Program, adults maintained several of the improvements they experienced from participating in the program. The results for youth were more mixed, but they still experienced improvements in multiple dimensions from pre to follow-up survey time points.

I learned more about the drugs and ways our youth use them. The program allowed my child & I to talk more freely & open about drugs/alcohol. I also learned about quite a few things from my child just talking about things.

<table>
<thead>
<tr>
<th>Adults</th>
<th></th>
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<tbody>
<tr>
<td><strong>Immediate Outcomes</strong></td>
<td><strong>Longer-Term Outcomes</strong></td>
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<tr>
<td>• Increased familiarity with pressure points and two-way conversations</td>
<td>• Maintained high levels of familiarity with pressure points and two-way conversations</td>
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<tr>
<td>• Experienced improvements in dimensions related to program influence, including a 19.3% increase in those families with a plan to avoid drugs and alcohol</td>
<td>• Experienced significant improvements in constructs related to program influence, including those with a family plan to avoid drugs and alcohol</td>
</tr>
<tr>
<td>• Increase in the perceived danger of various substance use behaviors for youth</td>
<td>• Improved communication about substances, with 100% of participants indicating they have warned their youth about substance use</td>
</tr>
<tr>
<td>• Reported high levels of satisfaction with participation in the program</td>
<td>• Demonstrated positive changes in perceived substance use risk for youth, family norms and frequency of substance use conversations</td>
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Youth

<table>
<thead>
<tr>
<th>Immediate Outcomes</th>
<th>Longer-Term Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Increased familiarity with pressure points, and knowledge about youth susceptibility to addiction</td>
<td>• Maintained high levels of familiarity with pressure points and youth susceptibility to addiction</td>
</tr>
<tr>
<td>• Experienced improvements in dimensions related to communication about substance use, including a 12.5% increase in those youth who have been asked their thoughts and opinions about substance use</td>
<td>• Experienced significant improvements in constructs related to communication about substance use, maintained large increases in those youth who were asked their thoughts and opinions about substance use</td>
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<tr>
<td>• Increase in the perceived risk of various substance use behavior including a 17% increase in the number of youth who believe daily drinking is a <em>Great risk</em></td>
<td>• Documented a 26% increase in the number of youth reporting doing fun things with their parents/caregivers</td>
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<tr>
<td>• Demonstrated high levels of satisfaction with participation in the program</td>
<td>• Increase in the frequency of substance use conversations, with 26% reporting a conversation in the past week</td>
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</table>

*Two things I learned during this program is that when you are peer pressured, you can just walk, away, say no, etc. Also, I learned that you can listen to music when you’re stressed or overwhelmed.*

*Miami Jr. High Event Set up*
Background

The Healthy Families Healthy Youth (HFHY) Program was developed in 2016 by the Arizona Governor’s Office of Youth, Faith and Family (GOYFF) in collaboration with substance abuse professionals in the state of Arizona. The program was designed for 7th grade students and their parents with the goals of increasing knowledge of the effects of drug use, improving youth and parent(s)/caregiver(s) family norms, and increasing awareness of current Arizona drug trends. The culminating experience for participants is the development of a family substance use prevention plan which is intended to guide youth throughout the next year. The Southwest Interdisciplinary Research Center (SIRC) Office of Evaluation and Partner of Arizona State University (ASU) has served as the third-party evaluator to measure the effectiveness of the pilot program.

The HFHY Program was initially piloted in one school in each of Arizona’s 15 counties, and schools were chosen by the county school superintendents. In Year 1 there were 496 adults and 452 youth who completed post-surveys as a part of the program. Both adults and youth experienced positive outcomes in Year 1, and as such, the continued implementation and expansion of the program was deemed appropriate. It was determined that the program would be expanded in Year 2, and a total of 53 schools were selected for participation in the program. These schools represented 14 Arizona counties (Mohave County chose not to participate in Year 2). In Year 2, there were 1,139 adults and 1,127 youth who completed a pre-survey at the beginning of the program. Once again, participants experienced positive results. The encouraging findings from Year 2 provided additional evidence for program efficacy and built a strong case for the continuation of the program into Year 3.

Event at Rim Country Middle School in Gila County
In the previous years of program implementation, adults and youth both experienced substantial improvements in dimensions related to the program curriculum. Adults and youth both experienced increased familiarity with pressure-points and two-way conversations, critical aspects of the program. Further, adults and youth also reported significant improvements in family norms about substance use and substance use communication. Both adults and youth also reported leaving the HFHY Program with a family prevention plan to help avoid drugs and alcohol in the coming year. Given the positive outcomes from Years 1 and 2, the program was offered for Year 3. In 2019, the HFHY Program was implemented in 27 schools in Arizona representing ten counties. In the first two years, the program was implemented in the fall, but for 2019 the program was implemented in the spring, and programming continued through the end of April. Similar to the previous years of the HFHY Program, participating schools were selected by county school superintendents. There were 11 new schools participating in Year 3 of the program. Appendix 1 provides a breakdown of all the schools that participated in the program as well as their implementation dates, and Appendix 2 shows the county participation in HFHY Year 3.

### Format

The program was designed to take place outside of the regular school day over the course of two and a half hours. It begins with a brief introductory session presented by a school administrator, usually the principal. The introduction is for both youth and adult participants. Following the introduction, adults and youth are divided into separate sessions. During these separate group sessions, adults and youth are given information about drug use and avoidance strategies, as well as conversation prompts to help initiate dialogue later in the program. After these separate sessions, youth and adults are brought back together to share a meal and discuss topics. During this meal, families develop their family prevention plan.

### Modifications

After each successive implementation of the HFHY Program, modifications were made based on the feedback from participants and facilitators. For Year 3 of the HFHY Program, only minor modifications were made to program content. This was to ensure the continued efficacy and relevance of the materials being presented to families across Arizona. The biggest change for Year 3 of the HFHY Program was the implementation schedule. In previous years, the program was implemented in the fall, during August and September. For 2019, due to funding timelines, the program was implemented in the spring. In addition to moving the program into the spring, the timeline was also extended to accommodate school calendars. As a result of the timeline

### Table 1: New Schools for Year 3

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<th>New Schools</th>
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<tr>
<td>Cactus Middle School</td>
<td>Pinal</td>
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<td>Freedom Elementary</td>
<td>Maricopa</td>
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<tr>
<td>Liberty Elementary</td>
<td>Maricopa</td>
</tr>
<tr>
<td>Patagonia Elementary School</td>
<td>Santa Cruz</td>
</tr>
<tr>
<td>Rim Country Middle School</td>
<td>Gila</td>
</tr>
<tr>
<td>Pima Jr. High School</td>
<td>Graham</td>
</tr>
<tr>
<td>Rainbow Valley Elementary School</td>
<td>Maricopa</td>
</tr>
<tr>
<td>Red Rock Elementary</td>
<td>Pinal</td>
</tr>
<tr>
<td>Safford Middle School</td>
<td>Graham</td>
</tr>
<tr>
<td>Sequoia Village School</td>
<td>Navajo</td>
</tr>
<tr>
<td>St. David Elementary School</td>
<td>Cochise</td>
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expansion, events took place through the end of April. The first event took place on 2/11/2019 and the final two events were completed on 4/30/2019. A list of all the schools and their implementation dates are shown in the appendix.

Further, the timeline for the distribution of the follow-up survey was amended to accommodate the new timeline. Ideally, the follow-up survey would be administered three months, or 90 days, after program completion. The challenges of the project timeline, however, shortened this timeframe for many of the schools participating in the program. Follow-up surveys were therefore distributed in May of 2019 for all the participating schools. The intent was to minimize participant attrition, and to account for the summer holiday break which would have made the distribution of the surveys extremely difficult, and potentially reduce the response rate. Though the timeline was shortened for the follow-up survey, the data gathered from the delayed follow-up survey still allow the measurement of the long-term effectiveness of the program.

Sample incentives for HFHY Program
Methodology
Since the program’s pilot in 2016, SIRC has been responsible for the evaluation of the HFHY Program. In Year 1 of the program, the evaluation consisted of two surveys, one taken after the program to measure satisfaction, and one completed three months later to gauge programmatic impact. Recognizing the importance of implementing evidence-based programming, the GOYFF has maintained a long-term goal of having the HFHY Program recognized as an Evidence-Based or Evidence-Informed program. In pursuit of this goal, Year 2 of the program featured a substantially more rigorous evaluation. The same evaluation procedures were utilized for Year 3. In both Years 2 and 3, youth and adults were asked to complete three surveys. The first two surveys were completed on the night of the program (pre and post), and the third follow-up survey completed several weeks after the program event.

Given the positive outcomes from the previous two cycles of the HFHY Program, the program was included on the list of approved programs to be used across the state.

Family Packets
Immediately upon arriving at the HFHY Program, families were given a Family Survey Packet which contained multiple surveys and instructions. The packet contained the pre-surveys, post-surveys, and follow-up surveys for both youth and adults. The Family Survey Packet also contained the adult information letters, youth assent letters, follow-up survey instructions, and pre-paid return envelope for the follow-up surveys. Each item in the Family Survey Packet was also color coded to simplify instructions and survey collection. Once families received their packets they were asked to write the name and address of the parents on the front label of the envelope to facilitate in the distribution of the follow-up surveys three months after the completion of the program.

Consent Process
Year 3 utilized the same consent process as Year 2. In accordance with the standards set by the ASU Institutional Review Board, all required assent, consent, and permission forms were collected from participants. The consent and survey administration were led by Collaborative Institutional Training Initiative (CITI) Certified ASU-SIRC staff. During the introduction portion of the HFHY Program, when adults and youth were together, parents were instructed to open the Family Survey Packet and review the Adult Consent and Permission Letter. This letter provided parent(s)/guardian(s) with more information about the program, and had two places to sign. The first signature granted consent for the adult to take part in all three surveys, and the second signature was for the parent(s)/guardian(s) to grant permission for their youth to take part in all three surveys. Further, at no point during the survey administration would surveys be given directly to youth; it was the responsibility of the parent(s)/guardian(s) to give the surveys to their youth if they wished. Surveys would only be accepted from those individuals who had signed the Adult Consent and Permission Letter.
After signing the Adult Consent and Permission Letter, adults would give their youth the Youth Pre-survey, and proceed to complete the Adult Pre-survey. Youth who were given the Youth Pre-survey were then asked to read the Youth Pre-survey Information Letter, the first page of the survey. By continuing with the survey, youth were giving their assent to participate in the survey.

Having already consented to take all three surveys by signing the Adult Consent and Permission Letter, for the proceeding Adult Post and Follow-up Surveys, adults were provided information letters for each surveys. These letters once again provided background to the project and indicated that by continuing with the survey, adults were once again giving their consent to participate.

**Instruments**

The survey instruments utilized for the HFHY Program have been refined over the three years of the program. The post and follow-up surveys utilized in Year 1 were shorter and were designed to measure satisfaction and the impact of the program. In an effort to increase the rigor and build the body of evidence for having the program recognized as Evidence-Based/Evidence-Informed, a more comprehensive survey instrument was used in Years 2 and 3. The surveys for years 2 and 3 included validated scales that aligned closely with programmatic objectives.

These scales came from a variety of sources including the Arizona Youth Survey, a biannual survey for 8th, 10th and 12th graders. Other scales were incorporated from the existing academic literature on substance use prevention. Only minor changes to the previously validated scales were made to ensure the relevance of each question. Further, each scale used on the HFHY survey instruments was retested in Year 2 to ensure the construct validity. For both youth and adults, many of the survey questions were shared across all three surveys. The purpose was to gain a better understanding of the impact of the program over time.

After receiving feedback from coordinators and facilitators, extra efforts were made to shorten and simplify the surveys in Year 3. There are a total of eight surveys associated with the HFHY Program, and SIRC team members reviewed each question on every survey to ensure relevance. Reviewers revisited the findings from Year 2 and eliminated multiple questions where participants had nearly universal agreement prior to participation in the program. The research team also went to great lengths to affirm that the questions were phrased in concise and simple language. For Year 3, only minor changes were made to the survey instructions for the pre, post
and follow-up surveys. The instructions and surveys were designed to take roughly 15 minutes to complete to provide ample time for administering the program. Though survey completion still took approximately the same amount of time in Year 3, the revisions enabled a smoother survey process.

Ultimately, the HFHY surveys consisted of 12-19 questions, and all of the surveys (pre, post and follow-up) had similar formats for both adults and youth. The first set of questions were knowledge based, and were meant to capture familiarity with various concepts that were to be taught during the HFHY Program. After the knowledge questions, there were a series of questions directly related to attitudes and behaviors, and indirectly related to drug and alcohol use. Next, adults and youth were asked multiple open-ended questions which provided participants the opportunity to provide more in-depth feedback about the program. Finally, on the pre-surveys, participants were asked a series of demographic questions related to race, ethnicity, gender and age. Demographic data were not collected on any subsequent surveys as the responses could be linked based on the unique survey code, modified from existing validated scales.

**Distribution**

All adult and youth survey materials were distributed in the Family Survey Packet when families arrived the night of the event. At the beginning of the program adults were given detailed instructions on how to complete the surveys. All survey instructions were delivered by SIRC staff. The survey distribution procedures were unchanged in Years 2 and 3.

Prior to completing any surveys, parents completed Adult Consent and Permission Letters. These were collected separately from the pre-surveys to maintain anonymity and ensure adult consent/permission. After that, adults and youth were requested to complete the pre-surveys. These surveys were then collected by SIRC staff. Families then began the program. Immediately upon completion of the program, adults and youth were requested to complete post-surveys. As families turned in their post-surveys, they also returned their Family Survey Packets, which contained all the remaining materials for the follow-up survey. All surveys completed on the event night were turned into the survey tubs and collected by the ASU research team.

*Survey Tubs used at HFHY Events*

The Family Survey Packets were left with the schools for dissemination of follow-up materials. SIRC researchers informed the families that the completed surveys were taken to ASU and stored in a double-locked storage cabinet while the Family Packets remained at the school.

The distribution of Family Survey Packets, which contained the follow-up materials, occurred at the discretion of each school’s Data Coordinator. SIRC and GOYFF provided some guidance on
distribution methods and timing, and sent multiple reminders to the Data Coordinators. Some chose to send the materials with students, while others decided to mail the packets directly to families. Detailed instructions on how to complete the Youth and Adult Follow-up Surveys were included in the survey packets. Participants were instructed to place completed surveys in the postage-paid envelope, pre-addressed to SIRC.

**Survey Matching**

When previously designing the HFHY evaluation, it was determined that matching the pre, post and follow-up surveys was critical. By matching the surveys, it would facilitate comparisons over time and enable more powerful statistical analyses. In order to facilitate survey matching, each survey in the Family Survey Packet was given a unique Family ID prior to distribution. The family ID made it possible to match the surveys across the three waves of data collection.

**Response Rate**

There were a total of 617 adults and 615 youth who completed the pre-survey. Although researchers from SIRC took efforts to ensure every individual who took part in the pre-survey also completed the post-survey, some families left the program early, resulting in a small amount of attrition from pre to post. There were 590 adults and 588 youth who completed the post-survey. Ultimately there were 106 adults and 105 youth who completed the follow-up survey several weeks later.

Using a unique Survey ID code attached to each survey, the pre and post-surveys were matched. For analysis, there were 575 adults and 566 youth with matched pre and post-surveys. This accounts for a 93.2% response rate for adults and a 92.0% response rate for youth.

As previously discussed, three months after completing the program, families were requested to take part in the follow-up survey. Using the unique Survey ID code attached to each survey, the pre, post and follow-up surveys were matched. As might be expected, there was a substantial attrition rate from the pre to follow-up. There were 104 adults and 100 youth who had matched responses on all three surveys. This equates to a 17.0% response rate for adults and a 16.3% response rate for youth.

This final report summarizes the outcomes from 575 adults with matched pre and post-surveys and the 104 adults with matched pre and follow-up surveys. For youth, the outcomes are for 566 youth matched pre and post-surveys and the 100 youth matched pre and follow-up surveys.

**Analysis Plan**

There was a substantial amount of data collected as a part of the adult and youth pre, post and follow-up surveys. As a result, an analysis plan was developed to ensure the most comprehensive assessment of the program.
Given the extended timeline of the HFHY Program, the initial findings from the HFHY Program were not reported in the Preliminary HFHY Report. For that reason, the Final Evaluation Report highlights these preliminary findings for adults and youth, as well as facilitators and coordinators.

This HFHY Year Three Final Report is a cumulative analysis of all the data collected for the program, including the follow-up survey. As the program implementation timeline was expanded, the analysis for the Year Three Final Report includes data from all three surveys. Additional attention was placed on the pre and follow-up surveys. These analyses are meant to highlight the long-term impact of the program.

The final report also includes an analysis of the open-ended questions asked on the pre, post and follow-up surveys. A thematic analysis was done on these questions to capture salient themes and ideas. Additional analyses were run for program evaluation components on the post and follow-up survey, as well as other stand-alone questions relevant to the program.

**Limitations**

Although there were numerous positive outcomes from the HFHY Program, there are also several shortcomings which should be considered when examining the data. Self-selection bias is an issue not only relevant to participation in the program, but also to completion of the surveys. Self-selection bias occurs when participation in a program is voluntary, and corresponds to the desired outcome of that program.\(^1\) Participation in the HFHY Program was voluntary, and a major objective was to improve communication about drugs and alcohol; it may have attracted participants who were already interested in and knowledgeable about the topic. Additionally, self-selection is also relevant to the individuals who attended the entire program and completed the post-survey, as well as those who completed the follow-up survey.

A further limitation came in regard to the administration of the pre and post program surveys. Given the consent and assent requirements for the survey, adults and youth completed the program next to one another. This proximity may have influenced how some youth, and potentially adults, responded to the surveys.

There was a high level of attrition from pre to follow-up. By losing the input of a high proportion of the participants, generalizability of the findings may be limited. There were no incentives given for the follow-up survey.

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Theoretical Framework

The purpose of the Healthy Families Healthy Youth program is to increase communication about substance use between parents and their adolescents by developing a plan to avoid substance use. HFHY was administered after hours, in a school environment to 7th graders and their family. This evaluation coupled with the ecodevelopmental theory provides a foundation for incorporating Microsystems and mesosystems into prevention program curricula. The “ecodevelopmental theory is a conceptual model that describes the interconnections among various sources of risk and protection in adolescents’ lives”\(^2\). The ecodevelopmental theory is comprised of three integrated elements: 1) social-ecological theory, 2) developmental theory, and 3) social interactions\(^3\). The social-ecological theory consists of four levels: 1) macrosystem, 2) exosystem, 3) mesosystem, and 4) microsystem. The Healthy Families Healthy Youth Program draws upon the three elements, emphasizing the exosystem, mesosystem, and microsystem.

The basis for the conceptual framework of this evaluation was to focus on the ecodevelopmental theory drawing from the microsystem (family, school, and peers), mesosystem (relationship between the different Microsystems), and the exosystem (environmental settings). A variety of variables in each microsystem influence an adolescent’s development. However, of the various Microsystems, the most influential on adolescent development is the family\(^4\). In this evaluation, risk and protective factors were examined for substance use with a slight focus on family-school and family-peer relationship (mesosystems) and a primary focus on family (microsystem). The nationally recognized risk and protective factor model and framework was developed by Hawkins, Catalano, and a team of researchers at the University of Washington\(^5\). That framework is used as the basis for the Communities That Care Survey, upon which the Arizona Youth Survey is based and from which item/factor scales were also used for these surveys.

---


Research shows that presence of strong parent-child relationships in communication result in fewer externalizing behaviors. In a study conducted by Prado et al., “the findings suggest that adolescents with high ecodevelopmental risk should be targeted for substance abuse prevention” (p. 57). “Adolescents who initiate substance use tend to select friends who are similar in terms of substance use.” However, parental control, family cohesion, parental monitoring (family-peer) and parental academic (family-school) involvement have been found to decrease the risk of substance use amongst adolescents.

---


Adults

There were 617 adults who took part in the pre-survey for the HFHY Program, with a total of 590 adults with completed post-surveys. Using a unique Survey ID code attached to each survey, the pre and post-surveys were matched for 575 adult pre and post-surveys. The pre-post analyses were conducted using the data from the 575 adults with matched pre and post-surveys.

For follow-up, approximately three months after completing the program, pre and follow-up surveys were matched using a unique Survey ID code attached to each survey. There were 107 adults who completed the follow-up survey, and 104 adults who had matched pre and follow-up surveys. The follow-up analyses were conducted using the data from the 104 adults with matched pre and follow-up surveys.

Demographics

The pre-survey for the HFHY Program included demographic questions about race, gender, ethnicity, and age. It is important to note, the demographics reported hereafter are for all 617 participants who completed the pre-survey. This was done to provide a picture of all those individuals who took part in the program. In addition to the demographics of all participants in the program, the demographics for those individuals who completed the follow-up survey are also reported.

Race

Demographic data were collected on the adult pre-survey. The first demographic question asked participants: *What is your race?* On the pre-survey, there were a total of 540 individuals who answered this question, and there were 92 responses by those individuals with all three surveys matched. Of the 540 individuals who responded to this question on the pre-survey, the majority (75.2%) identified as *White*. The other most commonly identified races were *More than one race* (7.2%) and *Race not known or other* (3.7%). When compared to the state of Arizona, there were lower percentages of *White*, *African American or Black*, *American Indian* and *Asian* participants in the HFHY Program than the general population. The state census does not account for *race not known, other or prefer not to respond* hence these figures could not be compared.

Looking at those who completed the pre and follow-up survey, this group reported their race as *White* (83.7%), *Race not known or other* (4.3%) and *Native Hawaiian* (1.1%) more frequently than the sample as a whole. Those completing the follow-up also reported being *African American*, *Native Hawaiian*, *Asian*, *American Indian* and *More than one race* less frequently than the initial sample. A detailed breakdown of participant race is displayed in Table 2.
Table 2: Adult race totals for HFHY

<table>
<thead>
<tr>
<th>Race</th>
<th>Pre Count</th>
<th>Pre Percentage</th>
<th>Matched Surveys Count</th>
<th>Matched Surveys Percentage</th>
<th>State of AZ Estimates⁹</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>406</td>
<td>65.8%</td>
<td>77</td>
<td>83.7%</td>
<td>82.8%</td>
</tr>
<tr>
<td>African American or Black</td>
<td>17</td>
<td>3.1%</td>
<td>2</td>
<td>2.2%</td>
<td>5.1%</td>
</tr>
<tr>
<td>Native Hawaiian/Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pacific Islander</td>
<td>3</td>
<td>0.6%</td>
<td>1</td>
<td>1.1%</td>
<td>.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>3</td>
<td>0.6%</td>
<td>0</td>
<td>0.0%</td>
<td>3.7%</td>
</tr>
<tr>
<td>American Indian</td>
<td>10</td>
<td>1.9%</td>
<td>0</td>
<td>0.0%</td>
<td>5.3%</td>
</tr>
<tr>
<td>More than one race</td>
<td>39</td>
<td>7.2%</td>
<td>5</td>
<td>5.4%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Race not known or other</td>
<td>20</td>
<td>3.7%</td>
<td>4</td>
<td>4.3%</td>
<td>N/A</td>
</tr>
<tr>
<td>Prefer not to respond</td>
<td>42</td>
<td>7.8%</td>
<td>3</td>
<td>3.3%</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>540</strong></td>
<td><strong>92</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Gender

Participants were also asked: What is your gender? A total of 575 individuals answered this question on the pre-survey and there were 96 responses by those with pre and follow-up surveys. On the pre-survey, the majority (66.7%) identified as female, 25.2% identified as male, 1.7% selected Other identity (none of those selecting this option specified their identity), and 1.6% shared they Prefer not to respond. There were more females completing the follow-up survey (79.2%) identified as Female. When compared to the state of Arizona, a higher percentage of females took part in the HFHY Program. A breakdown of participant gender is shown in Table 3.

Table 3: Adult gender totals

<table>
<thead>
<tr>
<th>Gender</th>
<th>Pre Count</th>
<th>Pre Percentage</th>
<th>Matched Surveys Count</th>
<th>Matched Surveys Percentage</th>
<th>State of AZ Estimates¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>145</td>
<td>25.2%</td>
<td>17</td>
<td>17.7%</td>
<td>49.7%</td>
</tr>
<tr>
<td>Female</td>
<td>411</td>
<td>66.7%</td>
<td>76</td>
<td>79.2%</td>
<td>50.3%</td>
</tr>
<tr>
<td>Other identity</td>
<td>10</td>
<td>1.7%</td>
<td>3</td>
<td>3.1%</td>
<td>N/A</td>
</tr>
<tr>
<td>Prefer not to respond</td>
<td>9</td>
<td>1.6%</td>
<td>0</td>
<td>0.0%</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>575</strong></td>
<td><strong>96</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

⁹ https://www.census.gov/quickfacts/AZ
Ethnicity
Participants were next asked: What is your ethnicity? A total of 558 individuals answered this question on the pre-survey, and there were 95 responses by those with pre and follow-up surveys. Over half of those completing the pre-survey (53.6%) identified as Hispanic or Latino. The majority of the remaining participants identified as Not Hispanic or Latino (40.0%), or Ethnicity unknown (1.4%) and an additional 5.0% indicated they Prefer not to respond. When compared to the state of AZ, a higher percentage of Hispanic or Latino individuals participated in the HFHY Program than are represented in the population at large. A breakdown of participant ethnicity is shown in Table 4.

Table 4: Adult ethnicity for HFHY

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Pre Count</th>
<th>Pre Percentage</th>
<th>Matched Surveys Count</th>
<th>Matched Surveys Percentage</th>
<th>*State of AZ Estimates(^{10})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic or Latino</td>
<td>299</td>
<td>53.6%</td>
<td>60</td>
<td>63.2%</td>
<td>31.6%</td>
</tr>
<tr>
<td>Not Hispanic or Latino</td>
<td>223</td>
<td>40.0%</td>
<td>33</td>
<td>34.7%</td>
<td>68.4%</td>
</tr>
<tr>
<td>Ethnicity unknown</td>
<td>8</td>
<td>1.4%</td>
<td>1</td>
<td>1.1%</td>
<td>N/A</td>
</tr>
<tr>
<td>Prefer not to respond</td>
<td>28</td>
<td>5.0%</td>
<td>1</td>
<td>1.1%</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>558</strong></td>
<td><strong>95</strong></td>
<td><strong>95</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*These estimates are for the entire state of Arizona.

Age
Finally, participants were asked to answer What is your age? A total of 573 individuals answered this question on the pre-survey, and there were 98 adults with all three surveys. Of those, the majority (69.7% pre and 73.5% matched surveys) were between the ages of 25 to 44. The next most frequently reported age range was 45 to 64 (26.3% pre and 24.5% matched surveys). A breakdown of participant age is shown in Table 5.

Table 5: Adult age totals

<table>
<thead>
<tr>
<th>Age</th>
<th>Pre Count</th>
<th>Pre Percentage</th>
<th>Matched Surveys Count</th>
<th>Matched Surveys Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 to 17</td>
<td>3</td>
<td>.5%</td>
<td>1</td>
<td>1.0%</td>
</tr>
<tr>
<td>21 to 24</td>
<td>3</td>
<td>.5%</td>
<td>1</td>
<td>1.0%</td>
</tr>
<tr>
<td>25 to 44</td>
<td>405</td>
<td>69.7%</td>
<td>72</td>
<td>73.5%</td>
</tr>
<tr>
<td>45 to 64</td>
<td>153</td>
<td>26.3%</td>
<td>24</td>
<td>24.5%</td>
</tr>
<tr>
<td>65 and over</td>
<td>9</td>
<td>1.5%</td>
<td>1</td>
<td>1.0%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>573</strong></td>
<td><strong>98</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\(^{10}\) [https://www.census.gov/quickfacts/AZ](https://www.census.gov/quickfacts/AZ)
Adult Preliminary Findings

Knowledge
As a part of all three surveys, adults were asked a series of knowledge questions meant to gauge familiarity with various drug prevention strategies. Adults experienced increases on all knowledge questions. Participants had the greatest level of improvement in regard to the concept of Pressure Points, a central concept in the HFHY Program. When asked: _______ are another name for the stressors a youth experiences, only 42.1% of participants on the pre-survey were able to identify the correct answer Pressure Points, but by the post-survey 81.9% correctly answered the question. This represents a 39.8% increase from pre to post.

There were improvements from pre to post on all other questions, though the knowledge gains were smaller. The vast majority (99.3%) of adults entered the program with a recognition that parents need to set boundaries for their children, leaving very little room for improvement, though the proportion of correct responses did increase to 99.6%. There were also moderate gains for adults on questions related to parent and children being friends, normality of youth experimentation with drugs and alcohol, and the importance of two-way conversations about drugs and alcohol. Table 6 provides a detailed breakdown for adult knowledge questions from pre to post.

Table 6: Adult change in knowledge from pre to post

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre (% Correct) N=575</th>
<th>Post (% Correct) N=575</th>
<th>Pre-Post Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is the job of parents/caregivers to set boundaries for their child (True)</td>
<td>99.3%</td>
<td>99.6%</td>
<td>+.3%</td>
</tr>
<tr>
<td>Parents and children should be friends at all times (False)</td>
<td>75.3%</td>
<td>77.9%</td>
<td>+2.6%</td>
</tr>
<tr>
<td>It is normal for youth to experiment with drugs and alcohol (False)</td>
<td>85.0%</td>
<td>87.2%</td>
<td>+2.2%</td>
</tr>
<tr>
<td>It is important to have a {two way} conversation when discussing drugs and alcohol</td>
<td>87.2%</td>
<td>88.8%</td>
<td>+1.6%</td>
</tr>
<tr>
<td>{Pressure points} are another name for the stressors a youth experiences</td>
<td>42.1%</td>
<td>81.9%</td>
<td>+39.8%</td>
</tr>
</tbody>
</table>
Program Impact

Adult HFHY participants were asked a series of questions meant to capture their level of understanding of various dimensions related to youth substance use, communication about substances and perceived agency in preventing youth substance use. These were meant to capture several programmatic objectives. This question utilized a five-point Likert Scale, and participants were asked to rate their level of agreement with a series of questions with answers (1=Strongly disagree, 2=Disagree, 3=Neither agree nor disagree, 4=Agree, and 5=Strongly agree). For the purposes of this analysis, a positive outcome is a response of 4 or 5 which indicates a participant’s agreement.

Figure 3: HFHY Program Impact

<table>
<thead>
<tr>
<th>Statement</th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>I know the warning signs associated with drug and alcohol use</td>
<td></td>
<td>84.1%</td>
</tr>
<tr>
<td>I play a role in determining if my youth uses drugs or alcohol</td>
<td></td>
<td>87.7%</td>
</tr>
<tr>
<td>I understand the impact drugs and alcohol have on a youth's development</td>
<td></td>
<td>97.3%</td>
</tr>
<tr>
<td>I have an impact on my youth’s use of drugs and alcohol</td>
<td></td>
<td>90.3%</td>
</tr>
<tr>
<td>My family has a clear plan for my youth to avoid drugs and alcohol</td>
<td></td>
<td>78.2%</td>
</tr>
<tr>
<td>I feel comfortable talking to my youth about drugs and alcohol</td>
<td></td>
<td>97.5%</td>
</tr>
<tr>
<td>I understand the stressors my youth experiences</td>
<td></td>
<td>86.3%</td>
</tr>
</tbody>
</table>

Percentage responding Strongly Agree or Agree
There were numerous positive outcomes related to programmatic impact of the HFHY Program, and adults experienced improvements on every question related to program impact. One such positive outcome was in regards to having a family plan to avoid drugs and alcohol, and 97.5% of participants indicated they had such a plan. This represents a 19.3% increase from pre to post. Adults also expressed improved knowledge of how to recognize the warning signs associated with substance use (a 14.3% increase). Additionally, by the post-survey, 99% of participants shared they understood the impact drugs and alcohol have on a youth’s development. Further, participants also experienced an increased understanding of the stressors currently faced by their youth (an 8.6% increase). Overall these outcomes indicate a positive impact associated with participation in the HFHY Program.

**Perceived youth exposure to substances**

Another objective of HFHY is to help parents understand the prevalence of substance use for 7th grade youth. For that reason, adults were asked a series of questions related to the perceived exposure of their youth to various substances including, alcohol (beer, wine and liquor), cigarettes/tobacco, marijuana, or other drugs. These questions utilized a four-point Likert Scale (1=Never, 2=Rarely, 3=Sometimes, 4=Often).

Figure 4 shows the distribution of answers related to perceived youth exposure to various substances. These charts illustrate the shifts in perceived youth exposure immediately after taking part in the HFHY Program. Prior to taking part in the program, many adults believed their youth were not in situations where they were exposed to substances. By the post-survey, fewer parents felt that their youth were Never in situations where various substances were available. There was also an increase in the perception that youth were Often in situations where substances were available to them. These results indicate that adults are more aware of potentially risky situations to which their youth may be exposed.
Figure 4: Perceived youth exposure to substances according to parents/caregivers

Perceived exposure to alcohol

Perceived exposure to cigarettes

Perceived exposure to marijuana

Perceived exposure to other drugs
Risk for youth
Another objective of HFHY was to make adults and youth more aware of the dangers of drug and alcohol use, particularly for the developing child. To measure this awareness, adults were asked a series of questions about the potential risk of various substance use behaviors for youth. These questions utilized a four-point Likert Scale (1=No risk, 2=Slight Risk, 3=Moderate risk, 4=Great risk). A higher score indicates that the adult believes that the behavior is riskier. For the purposes of this analysis, a positive outcome was identified as those individuals who responded Moderate risk or Great risk.

By the post-survey, more adults expressed their belief that various substance use behaviors were a Moderate or Great risk. Though parents came into the program with high anti-drug norms, there were improvements from pre to post across each of these attitude questions. The question with the greatest increase from pre to post was related to trying marijuana once or twice. Going into the program, less than 80% of participants felt it was a Moderate or Great risk for a youth to try marijuana once or twice. By the end of the program, 85% of participants shared that it was a Moderate or Great risk.
Percentage responding *Moderate* or *Great risk*

*How great is the risk for youth if they...*

<table>
<thead>
<tr>
<th>Activity</th>
<th>Pre Precentage</th>
<th>Post Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use prescription drugs without a doctor telling them to take them</td>
<td>83.8%</td>
<td>86.5%</td>
</tr>
<tr>
<td>Have five or more drinks of an alcoholic beverage in a row once or twice a week</td>
<td>83.5%</td>
<td>87.0%</td>
</tr>
<tr>
<td>Take one or two drinks of an alcoholic beverage nearly every day</td>
<td>83.7%</td>
<td>87.2%</td>
</tr>
<tr>
<td>Smoke marijuana once or twice a week</td>
<td>83.0%</td>
<td>85.9%</td>
</tr>
<tr>
<td>Try marijuana once or twice</td>
<td>79.6%</td>
<td>85.0%</td>
</tr>
</tbody>
</table>

*Figure 5: Perceived youth risk regarding substances according to parents/caregivers*
Post program satisfaction

After participating in the HFHY Program adults were asked to answer two sets of questions meant to gauge their satisfaction with various aspects of the program. Overall, adults expressed high levels of satisfaction with the program. For the first set of questions, a positive outcome was a response of Satisfied or Very Satisfied. No question had a level of agreement under 98.0%. Almost all participants (99.5%) of participants indicated they were satisfied with the program facilitators. Further, 99.0% of participants expressed satisfaction with what their youth learned during the program. The program overall received very high satisfaction as well, with 98.0% of participant indicating their satisfaction.

<table>
<thead>
<tr>
<th>Aspect</th>
<th>Satisfaction Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>The facilitators</td>
<td>99.5%</td>
</tr>
<tr>
<td>What my youth learned</td>
<td>99.0%</td>
</tr>
<tr>
<td>The adult session</td>
<td>98.4%</td>
</tr>
<tr>
<td>The organization of the program</td>
<td>98.4%</td>
</tr>
<tr>
<td>The program overall</td>
<td>98.0%</td>
</tr>
</tbody>
</table>

*Figure 6: Parent/caregiver satisfaction with HFHY - set 1*
For the second set of satisfaction questions, a positive outcome was recorded when an individual responded *Agree* or *Strongly agree*. Again, adults expressed high levels of satisfaction with participation in the program. Nearly all participants (96.8%) indicated that they would recommend the program to other parents, and nearly 96% of participants indicated that the skills they learned will be useful for their family.

![Figure 7: Parent/caregiver satisfaction with HFHY-set 2](chart)

*Figure 7: Parent/caregiver satisfaction with HFHY-set 2*
Adult Pre to Follow-up
In order to examine the long-term efficacy of the program, adults and youth were asked to take a follow-up survey several weeks after taking part in HFHY. There were a total of 104 individuals with matching pre and follow-up surveys. The proceeding analyses are for only those individuals with matched pre and follow-up surveys. In addition to the questions asked on the pre, post, and follow-up surveys, there were a series of questions asked only on the pre and follow-up surveys.

Knowledge
Similar to the post, adults were asked a series of knowledge questions meant to gauge their understanding of content covered in the HFHY Program. From pre to follow-up, participants experienced improvements on four of the five questions. The question where adults did not improve was: Parents and children should be friends at all times. Adults actually decreased from pre to follow-up, with .9% fewer individuals answering this question correctly.

Table 7: Adult change in knowledge from pre to follow-up

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre (% Correct)</th>
<th>Post (% Correct)</th>
<th>Pre Follow-up Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is the job of parents/caregivers to set boundaries for their child (True)</td>
<td>99.0 %</td>
<td>100%</td>
<td>+1.0%</td>
</tr>
<tr>
<td>Parents and children should be friends at all times (False)</td>
<td>78.8%</td>
<td>77.9%</td>
<td>-0.9%</td>
</tr>
<tr>
<td>It is normal for youth to experiment with drugs and alcohol (False)</td>
<td>83.7%</td>
<td>90.0%</td>
<td>+6.3%</td>
</tr>
<tr>
<td>It is important to have a {two way} conversation when discussing drugs and alcohol</td>
<td>87.0%</td>
<td>88.0%</td>
<td>+1.0%</td>
</tr>
<tr>
<td>{Pressure points} are another name for the stressors a youth experiences</td>
<td>54.8%</td>
<td>73.3%</td>
<td>+18.5%</td>
</tr>
</tbody>
</table>

Program impact
On the follow-up survey adults were once again asked the same series of questions related to the impact of the program. These questions utilized a five-point Likert Scale, and participants were asked to rate their level of agreement with answers (1=Strongly disagree, 2=Disagree, 3=Neither agree nor disagree, 4=Agree, and 5=Strongly agree).

There were numerous positive long-term outcomes related to the program impact, and participants maintained many of the positive gains they experienced from the program. For all but one question, participants experienced an improvement from pre to follow-up. That question, I have an impact on my youth’s use of drugs and alcohol, had participants experience a 1.6% decrease from pre to follow-up. Outside of this question, the results were positive. There was a
19.0% increase in those reporting a family plan to avoid drugs and alcohol, a 15.9% increase in the understanding of warning signs of drug and alcohol use, and an 11.9% increase in understanding of youth stressors. The results shown in Figure 7 illustrate some of the long-term benefits of participating in the program.

**Figure 8: Program impact among parents/caregivers pre to follow-up**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Pre</th>
<th>Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>I know the warning signs associated with drug and alcohol use</td>
<td>81.2%</td>
<td>97.1%</td>
</tr>
<tr>
<td>I play a role in determining if my youth uses drugs or alcohol</td>
<td>86.0%</td>
<td>94.2%</td>
</tr>
<tr>
<td>I understand the impact drugs and alcohol have on a youth's development</td>
<td>97.0%</td>
<td>99.0%</td>
</tr>
<tr>
<td>I have an impact on my youth's use of drugs and alcohol</td>
<td>90.8%</td>
<td>89.2%</td>
</tr>
<tr>
<td>My family has a clear plan for my youth to avoid drugs and alcohol</td>
<td>76.2%</td>
<td>95.2%</td>
</tr>
<tr>
<td>I feel comfortable talking to my youth about drugs and alcohol</td>
<td>98.0%</td>
<td>99.1%</td>
</tr>
<tr>
<td>I understand the stressors my youth experiences</td>
<td>84.2%</td>
<td>96.1%</td>
</tr>
</tbody>
</table>
Adult and youth communication about substance use

Communication between adults and youth about substance use is an important protective factor in preventing youth substance use. On the pre and follow-up survey there were a set of questions asked to capture adult and youth communication about substance use. These questions used a five-point Likert Scale (1=Strongly disagree, 2=Disagree, 3=Neither agree nor disagree, 4=Agree, and 5=Strongly agree). For the purposes of this analysis, a positive outcome is a response of 4 or 5 which indicates a participant’s agreement.

Adults improved on all dimensions related to communication about drugs and alcohol, a critical component of the HFHY Program. The question with the largest improvement was: *An adult in my family has asked my child’s thoughts and opinions about substance use.* Before the program, only 79.2% of indicated they *Agree* or *Strongly agree* with this statement. By the follow-up, 98.0% indicated they agreed with that statement, an 18.8% increase. There was also a 7.9% increase in those sharing they had spoken to their child about how to handle offers of substances, and a 7.0% increase in rule setting about substance use from pre to follow-up.

*Figure 9: Parent/caregiver communication about substances pre to follow-up*

---

**Percentage of adults stating they *Agree* or *Strongly agree* an adult in my family...**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Pre</th>
<th>Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>...has warned my child about the dangers of substance use</td>
<td>97.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>...has told my child he or she would not approve if they used substances</td>
<td>95.1%</td>
<td>99.0%</td>
</tr>
<tr>
<td>...has set rules about substance use</td>
<td>91.1%</td>
<td>98.1%</td>
</tr>
<tr>
<td>...has talked to my child about how to handle offers of substances</td>
<td>90.2%</td>
<td>98.1%</td>
</tr>
<tr>
<td>...has asked about my child's thoughts and opinions about substance use</td>
<td>79.2%</td>
<td>98.0%</td>
</tr>
</tbody>
</table>
Perceived youth exposure to substances

On the follow-up survey adults were also asked a series of questions related to the perceived exposure of their youth to various substances including: alcohol (beer, wine and liquor), cigarettes/tobacco, marijuana or other drugs on the follow-up survey. These questions were measured using a four-point Likert Scale (1=Never, 2=Rarely, 3=Sometimes, 4=Often).

Figure 9 shows the distribution of answers related to perceived youth exposure to various substances. These charts illustrate the shifts in perceived youth exposure to various substances several weeks after taking part in the HFHY Program. Prior to taking part in the program, many adults believed their youth were not in situations where they were exposed to these various substances. By the follow-up survey, for two substances (alcohol and marijuana) on the survey fewer adults felt that their youth were Never in situations where these substances were available to them. Further, for all the substances, except alcohol, adults felt that their youth were Often in situations where the substances were available with greater frequency. This increase was particularly pronounced for Other Drugs which had a 9.0% increase from pre to follow-up. These results indicate that adults are more aware of the potentially risky situations to which their youth may be exposed.

Figure 10: Perceived youth exposure to substances pre to follow-up
Perceived exposure to marijuana

<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>52%</td>
<td>48%</td>
</tr>
<tr>
<td>Rarely</td>
<td>26%</td>
<td>28%</td>
</tr>
<tr>
<td>Sometimes</td>
<td>14%</td>
<td>11%</td>
</tr>
<tr>
<td>Often</td>
<td>8%</td>
<td>14%</td>
</tr>
</tbody>
</table>

Perceived exposure to other drugs

<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Rarely</td>
<td>30%</td>
<td>26%</td>
</tr>
<tr>
<td>Sometimes</td>
<td>16%</td>
<td>12%</td>
</tr>
<tr>
<td>Often</td>
<td>4%</td>
<td>13%</td>
</tr>
</tbody>
</table>

Willcox Middle School
Risk for youth

Questions regarding adult’s perception of risk for youth substance use were also asked on the follow-up survey. Once again, these questions utilized a four-point Likert Scale (1=No risk, 2=Slight Risk, 3=Moderate risk, 4=Great risk). A higher score indicated that the adult believes that the behavior is riskier. For the purposes of this analysis, a positive outcome was identified as those individuals who responded Moderate risk or Great risk.

By the follow-up, more adults expressed their belief that various substance use behaviors were a Moderate or Great risk. Though parents came into the program with high anti-drug norms, there were improvements from pre to follow-up across each of these behavior questions, shown in Figure 10. The question with the greatest increase from pre to post was related to trying marijuana once or twice. Going into the program, 85.2% of participants felt it was a Moderate or Great risk for a youth to try marijuana once or twice, by the follow-up the proportion increased to 93.3% (a 8.1% increase). Adults also reported increases in the perceived risk of all the substance use behaviors.

Figure 11: Perceived youth substance use risk according to parents/caregivers pre to follow-up
Family Norms
On the pre and follow-up surveys there were a set of questions asked about familial norms. These questions utilized a Likert Scale (1=NO!, 2=No, 3=Yes, 4=YES!). For these questions, a positive outcome was identified as when an individual responded YES! or Yes.

Parents came into the HFHY Program reporting high family norms about rule setting and communication with their children. However, despite the initially high levels of agreement, adults did experience modest improvements long-term. For three of the four questions, 100% of those individuals with matched pre and follow-up surveys had a positive outcome. There was also a modest increase in the other question, My child feels comfortable asking me about any stressful situations they might have (1.2%). Figure 11 depicts these outcomes.

Figure 12: Parent/caregiver perceived family norms pre to follow-up

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre</th>
<th>Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>My child has at least one adult they can talk to about important things</td>
<td>99.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>My child feels comfortable asking me about any stressful situations they might have</td>
<td>94.0%</td>
<td>95.2%</td>
</tr>
<tr>
<td>My family has clear rules about substance use</td>
<td>97.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>My family has clear rules for my child</td>
<td>98.0%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>
Frequency of substance use conversations
One of the primary objectives of the HFHY Program is to increase the frequency with which adults and youth have conversations about substance use. From pre to follow-up there were substantial increases in the number of families who had a conversation about substance use in the past week (17% increase). Almost half of participants (49%) reported having a conversation in the past week. Also, on the follow-up, no individuals reported having *Never* had a conversation about substance use.

How recently have you had a conversation with your youth about how to refuse or avoid drugs and alcohol?

![Figure 13: Parent/caregiver reported substance use conversation](image)

Program utility
In addition to the questions asked on both the pre and follow-up, there were two sets of unique questions posed to adults on just the follow-up. These questions were meant to gauge the utility of the program and how useful the program had been in the interceding months. These questions used a five-point Likert Scale (1=Strongly disagree, 2=Disagree, 3=Neither agree nor disagree, 4=Agree, and 5=Strongly agree).

Participants reported high levels of agreement with the various questions associated with the HFHY Program utility. All participants indicated they were prepared to answer challenging questions from their youth. Further, 99% indicated that their families had set boundaries around substance use and 98.1% shared they had a clear plan for avoiding drugs and alcohol in the coming year. The question with the lowest level of agreement was related to using the prevention plan developed during the program, but this question still had 82.1% of individuals agreeing.
My family has used the prevention plan developed during the program

My family will use the family substance use prevention plan in the future

I am confident my youth will make good decisions about drugs and alcohol

I can make an impact on my youth's behavior

I have made an impact on my youth's attitude about drugs and alcohol

I can ask my youth challenging questions about drugs and alcohol

My family has a clear plan for how to avoid drugs and alcohol in the coming year

The information provided during the program has been helpful for my family

I am prepared to answer challenging questions my youth asks me

I check on my youth's activities and behavior

My family has set boundaries around substance use

Individuals responding *Strongly agree* or *Agree*

0% 20% 40% 60% 80% 100%

**Figure 14: Program utility according to parents/caregivers**
Program effect

Similar to the program utility questions, the program effect questions utilized a five point Likert Scale (1=Strongly disagree, 2=Disagree, 3=Neither agree nor disagree, 4=Agree, and 5=Strongly agree). For the purposes of this analysis, a positive outcome was a response of 4 or 5 which indicates a participant’s agreement.

Participants reported high levels of agreement with the various questions associated with the HFHY Program effect. For every question, there was over 90% agreement, and 98.1% of participants shared that their child knows more about drugs and alcohol because of the program. Additionally, 90.3% of participants indicated that their child was comfortable speaking with them about drugs and alcohol, a critical component of the HFHY Program.

![Figure 15: Program effect among parents/caregivers](image)

<table>
<thead>
<tr>
<th>Question</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>…my child knows more about the dangers of using drugs and alcohol</td>
<td>98.1%</td>
</tr>
<tr>
<td>...I have knowledge about youth drug and alcohol use</td>
<td>97.1%</td>
</tr>
<tr>
<td>...my family is willing to make a plan about avoiding drugs and alcohol</td>
<td>95.2%</td>
</tr>
<tr>
<td>...my family is open to talking about drugs and alcohol</td>
<td>94.2%</td>
</tr>
<tr>
<td>...my child is willing to speak with me about drugs and alcohol</td>
<td>91.3%</td>
</tr>
<tr>
<td>……my child is comfortable speaking with me about drugs and alcohol</td>
<td>90.3%</td>
</tr>
</tbody>
</table>

Figure 15: Program effect among parents/caregivers
Adult Open-Ended Response

As a part of all three surveys, adults were asked a series of open-ended questions to gain a clearer understanding of their opinions about the program. These questions were all entered into NVivo qualitative data analysis software to identify salient themes and ideas expressed by HFHY participants. The NVivo analyses also included those responses provided by Spanish speaking participants. Spanish quotes, along with their translations, are included below to ensure the voices of all HFHY Participants are reflected in this report.

Pre-Survey

Adults were asked two open-ended questions as a part of the pre-survey.

**How difficult is it to start a discussion about substance use with your child? How does your child respond?**

The vast majority of participants indicated it was not hard to discuss substances with their child. Many participants merely shared “Not hard at all”, but the remaining individuals provided a reason as to why it was not difficult. The most common explanation for why it was not difficult was that the parent and youth are comfortable with the topic and actively listens to one another. These quotes provide some examples of the types of answers adults provided to this question.

- **Open minded conversation and always welcome.**

- **Not hard at all. Response is always positive.**

- **Se quedan pensativos con los datos que les damos saber que les puede pasar con las drogas.**
  (Translation: They think about the information we give them about what can happen if they do drugs.)

Many of the adults who indicated that it was not difficult to discuss substances explained their children already know about the harmful consequences of drugs and feel confident saying no.
Numerous participants also shared they have open communication in their home and expressed their comfort discussing any topic.

*They just feel they already know and will say no.*

Participants provided several other reasons why they felt it was not difficult to discuss substance use with their youth. Many participants claimed that speaking about drugs was a consistent conversation in their house, which made the conversations easier. Others shared that conversations with their youth were not difficult because their youth was already knowledgeable about substance use. Numerous participants also shared that the level of importance of these conversations makes the conversations easier.

*We can talk about anything, anytime.*

*We have great communication.*

*We have talked about this matter. They understand.*

*We have had a conversation about drugs.*
While most participants indicated that speaking to their youth was not difficult, some individuals shared that it was a difficult conversation. Some of those individuals indicated it was difficult because their youth shuts down when broaching the conversation on substance use. Other participants have expressed that their youth is not open to the conversation.

True. It is difficult sometimes because they're not as open.

Whenever I bring it up. She shuts down.

Finally, others indicated that when they try to discuss substance use with their youth, their youth does not respond positively. Some indicated that their youth gets defensive, talks back, loses interest, or starts a fight. Others shared that their youth acts like they know everything which makes discussions difficult.

They respond by telling me I know mom.  She thinks I'm annoying and she rolls her eyes at me.

Others have shared they do not communicate about substance use and or have infrequent conversations about the topic.

Not having this conversation  We have only discussed once.

What do you hope to learn from the HFHY Program?

Adults were next asked, what do you hope to learn from the HFHY Program. Many participants’ responses reflected their desire to learn tips to better approach the topic with their youth as well as ways to be more aware of the signs of someone on using illegal substances, and recognize if their youth is mirroring that behavior.

Ways to continue keeping open lines of communication.
Moreover, many parents were very concerned with the peer pressure their youth may encounter and the percentage of teens using and abusing drugs and alcohol and wanted to know more information on the topic.

Many adults also shared that they wanted to use the knowledge they received to further educate their youth, as well as use the newfound substance abuse knowledge as a way to become closer to their youth.

Other adults shared that they wanted to be able to prevent their youth from making bad decisions and to build trust and better lines of communication.

*To prevent my children from making the wrong decisions.*

*To let my children know that they can talk to us.*

*Ways to become better at discussing substance abuse.*

*To learn more and we identify systems if our kids are using drugs.*

*About the stressors + peer pressure.*

*The percentage of 13 years and up using alcohol on a weekly basis.*

*Take all knowledge and be closer to my child and help their awareness.*

*Que me ensenen la forma correcta de detectar cuando consumen drogas.*

(Translation: Teach me the best way on how to detect when using drugs.)
Many adults were very weary of the impact of the community on their children, specifically regarding substance use and wanted to know what the community is doing to help control the situation. Adults also wanted to know what their children’s schools are doing to stop drug use.

What our community is doing to control the drug epidemic.

Furthermore, some adults shared that they hoped to learn useful information and info about potential resources.

Resources to help prevent or help if it gets out of hand.

Supportive information.
Post-Survey

On the post-survey, adults were asked two open-ended questions about their experience participating in the HFHY Program.

List two ways you plan to use what you learned in this program in the future:

When asked to list two ways you plan to use what you learned in this program in the future, adults offered several different answers. Many indicated they plan to apply the communication techniques in the future. Several adults mentioned the family action plan.

Apply better communication.

Talk more to ensure a 2-way conversations.

Many parents shared they found the pressure point cards the most useful, and some adults commented that the activities in the program really helped them understand the dangers children are facing with substance abuse.

Use information on pressure points

Use plans to use a scale system.

Other adults indicated they will use the family plan and intend to use the skills they developed to be aware of what is going on with their child.

We created a family prevention plan.

To be alert of my child's surrounding.

Finally, adults were able to take away how to keep their families safe using communication and the knowledge they gained as a result of the program.
Please provide any additional comments or suggestions:

The last open-ended question on the post-survey asked adults for any additional comments or suggestions. The majority of participants provided some type of affirmation for the program.

- This was an absolute beneficial program. Can’t thank you enough.
- This was an awesome event. Thank you.
- Thank you for offering this program.
- To protect my family from addiction.
- Tener mas contacto con mi hijo hablar de cualquier informacion. (Translation: having more contact with my child and talk about any information)

Adults did however provide some constructive feedback on how to improve the program. One point brought forward by several adults was in regards to adding additional activities. Several participants wanted to show the long-term effects of substance use, while others requested more interactive activities.

- Maybe show the kids what drugs can do to their bodies.
- Have before-after pictures.

Many participants shared suggestions for how the facilitators of the program may improve.

- I feel the facilitators could have been prepared for more adult session.
Participants also provided some constructive feedback for how to improve the session. A few parents were critical of the tone of the program, while other suggested having different facilitators to administer the sessions.

- Make it less monotone.
- It's better when children hear it from different people.
- May be good to have facilitators that have children.

Tener mas informacion en las esuelas para nuestros estudiantes.
(Translation: Have more information in schools for our students)
Follow-up

There were two questions asked on the follow-up about the value of the skills learned while participating in the HFHY Program.

**Follow: List two things you learned in this program that make it useful for all parents and the community**

When asked about what participants had learned from participation in the HFHY Program. The majority of participants indicated they had learned more about drugs and the pressures on their children. Adults commented that they are now more “open” to communication with their youth.

- I learned more about the drugs and ways our youth uses them. The program allowed my child & I to talk more freely & open about drugs/alcohol. I also learned about quite a few things from my child just taking about things.
- I learned about pressure points; how to create a plan to talk more about how to avoid drugs; alcohol.

Numerous adults also indicated their increased confidence in looking for the warning signs of drug use. They mentioned several times they learned about several different drugs in the community and feel more prepared to help their children with drug prevention.

- My youth used the program not only because she knows what’s bad. But she also learned to help someone else if she needs us

- Importance of family in preventing substance use; Importance of staying active emotionally and spiritually together.
Participants also shared they had used a variety of other skills developed during the HFHY Program. Most were able to be more understanding and patient when speaking to their children about substance abuse.

I learned to watch the behaviors changes of my children and to keep an open door so that my children can come talk to me about drugs.

Ability to understand & confidently speak to your child. Knowing the reality of drugs and their availability.

How to speak with my child about substance use and abuse look for signs of substance use.

How to communicate better with my child; How to make a prevention plan.

Aprendi que mi hija me mira como su mama y con respeto y no mas como una amiga, y hablar con mas confianza da la mala y el dono que puede causar las drogas y el alcohol.
(Translation: I learned that my daughter looks at me as her mother and with respect and not only as a friend and speak with more confidence on how bad and harmful drugs and alcohol can be.)

Adults mentioned the use of drug test becoming normalized into their homes after this program.

It is okay & real to have drug tests in the house and we now do! My kids know we will bring them randomly! Side Note: (A sibling has suffered from addiction and wish I had incorporated this a long time ago.)

Furthermore, many participants mentioned the use of continued communication with their youth and a better sense of awareness.
Follow: Tell us two or three ways your prevention plan has been helpful:

When asked about how the prevention plan has been helpful, participants provided numerous ideas. Adults also shared that communication about substance use has improved since taking part in the program. Adults shared how the program helped their family realize their youths struggle with substance abuse.

We make it a point to start discussions with our kids more often to check up on them. We also share stories of other kids that slip/struggle hoping to show our kids that consequences are real.

We communicate more, my child is able to ask questions without being scared to ask.

Our family has always discussed prevention & results of use of drugs & alcohol. Stay in contact w/ our kids about their friends & any offers that may or may not have been offered. Keep line of communication open. We tell our kids in more ways than one, communication is key, always communicate struggles, peer pressure, being overwhelmed as well as positive feelings & emotions.

My daughter learned other ways to say no to drugs and alcohol; we were able to pass down the prevention plan to incorporate my high school son.

Talking beforehand will always have an effect on whether a child even experiments with drugs/alcohol if offered. Open communication is key
Several adults mentioned their communication improved drastically after participating in the program.

*Again, the program opened our communication. It was never talked about as often as we talk now. We have weekly conversations now and my child has definitely benefitted from that. I think this program is amazing! Thank you for taking time to develop & implement at our school! Keep up the good work!*

1. We found out my son is an alcoholic; 2. we were able to provide help. 3. We were more able to speak to him about it.

Finally, adults commented on the improvement in their child’s confidence to handle peer pressure. Participants shared their plans they have been implementing in their homes.

1. To make a plan for our family to prevent drugs and alcohol use + ways to communicate about the risks. 2. To make more family activities together. 3. It has been helpful for my child & me to become better educated on the serious issue drug abuse causes & ways to prevent not only the children in my household from abuse but other youth in the community. Thank You for your help services.

*My prevention plan is to integrate my children more into church/prayer/bible reading and have them tell me how drug usage goes counter to what God says in the Bible. I plan to have my children to do a project/power point presentation based on what they share with me*
**Youth**

There were 615 youth who took part in the pre-survey for the HFHY Program, and a total of 588 youth who completed the post-surveys. Using a unique Survey ID code attached to each survey, the pre and post-surveys were matched for 566 youth. The pre-post analyses were conducted using the data from the 566 youth with matched pre and post-surveys.

For follow-up, completed several weeks after completing the program, pre and follow-up surveys were matched using a unique Survey ID code attached to each survey. There were 105 youth who completed the follow-up survey, and 100 youth who had matched pre and follow-up surveys. The follow-up analyses were conducted using the data from the 100 youth with matched pre and follow-up surveys.

**Demographics**

The pre-survey for the HFHY Program included demographic questions about race, gender, ethnicity, and age. For the preliminary report, demographics were reported for all 615 youth who completed the pre-survey as a part of the program. These numbers will remain unchanged, but the demographics of those youth with all three surveys matched will also be reported.

**Race**

Demographic data were collected on the youth pre-survey. The first demographic question asked participants: *What is your race?* On the pre-survey, there were a total of 516 individuals who answered this question, and there were 86 responses by those individuals with all three surveys matched. Of the 516 individuals who responded to this question on the pre-survey, the majority (67.6%) identified as *White*. The other most commonly identified races were *More than one race* (9.4%) and *Race not known or other* (3.7%). An additional 6.0% answered *Prefer not to respond*.

When compared to the state of Arizona, there were lower percentages of *White, African American or Black, American Indian* and *Asian* participants in the HFHY Program. The state census does not account for *race not known, other or prefer not to respond* hence these figures could not be compared.

Looking at the group that completed the pre and follow-up survey, this group reported their race as *White* (73.3%), *Race not known or other* (4.7%) and *Native Hawaiian* (1.2%) and *More than one race* (11.6%) more frequently than the whole sample population. Those completing the follow-up also reported being *African American, Native Hawaiian, Asian, and American Indian* less frequently than the initial sample. A detailed breakdown of participant race is displayed in Table 8.
Table 8: Youth race totals

<table>
<thead>
<tr>
<th>Race</th>
<th>Pre Count</th>
<th>Pre Percentage</th>
<th>Matched Surveys Count</th>
<th>Matched Surveys Percentage</th>
<th>State of AZ Estimates¹¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>349</td>
<td>56.7%</td>
<td>63</td>
<td>73.3%</td>
<td>82.8%</td>
</tr>
<tr>
<td>African American or Black</td>
<td>26</td>
<td>4.2%</td>
<td>3</td>
<td>3.5%</td>
<td>5.1%</td>
</tr>
<tr>
<td>Native Hawaiian/Other Pacific Islander</td>
<td>5</td>
<td>0.8%</td>
<td>1</td>
<td>1.2%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>4</td>
<td>0.7%</td>
<td>0</td>
<td>0.0%</td>
<td>3.7%</td>
</tr>
<tr>
<td>American Indian</td>
<td>10</td>
<td>1.6%</td>
<td>0</td>
<td>0.0%</td>
<td>5.3%</td>
</tr>
<tr>
<td>More than one race</td>
<td>58</td>
<td>9.4%</td>
<td>10</td>
<td>11.6%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Race not known or other</td>
<td>27</td>
<td>4.4%</td>
<td>4</td>
<td>4.7%</td>
<td>N/A</td>
</tr>
<tr>
<td>Prefer not to respond</td>
<td>37</td>
<td>6.0%</td>
<td>5</td>
<td>5.8%</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>516</strong></td>
<td><strong>86</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Gender

Participants were also asked: *What is your gender?* A total of 563 individuals answered this question on the pre-survey and there were 91 responses by those with pre and follow-up surveys. The gender breakdown for youth more closely resembled the state of Arizona as a whole. On the pre-survey 50.3% of participants identified as *Male* and 46.7% identified as *Female*. A further 1.2% of participants shared they identified as *Other identity* and 1.6% of participants answered: *Prefer not to respond*. On the follow-up there was an increase in the proportion of individuals identifying as *Other identity* (5.5%). A breakdown of participant gender is shown in Table 9.

Table 9: Youth gender totals

<table>
<thead>
<tr>
<th>Gender</th>
<th>Pre Count</th>
<th>Pre Percentage</th>
<th>Matched Surveys Count</th>
<th>Matched Surveys Percentage</th>
<th>State of AZ Estimates¹¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>283</td>
<td>50.3%</td>
<td>45</td>
<td>49.5%</td>
<td>49.7%</td>
</tr>
<tr>
<td>Female</td>
<td>263</td>
<td>46.7%</td>
<td>41</td>
<td>45.1%</td>
<td>50.3%</td>
</tr>
<tr>
<td>Other identity</td>
<td>7</td>
<td>1.2%</td>
<td>5</td>
<td>5.5%</td>
<td>N/A</td>
</tr>
<tr>
<td>Prefer not to respond</td>
<td>10</td>
<td>1.6%</td>
<td>0</td>
<td>0</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td><strong>96</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹¹ [https://www.census.gov/quickfacts/AZ](https://www.census.gov/quickfacts/AZ)
Ethnicity
Participants were next asked: What is your ethnicity? A total of 534 individuals answered this question on the pre-survey, and there were 89 responses by those with pre and follow-up surveys. Over half of those completing the pre-survey (56.2%) identified as Hispanic or Latino. The remaining participants identified as Not Hispanic or Latino (35.2%), or Ethnicity unknown (3.7%) and an additional 3.7% indicated they Prefer not to respond. When compared to the state of Arizona, a higher percentage of Hispanic or Latino individuals participated in the HFHY Program. A breakdown of participant ethnicity is shown in Table 10.

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Pre Count</th>
<th>Pre Percentage</th>
<th>Matched Surveys Count</th>
<th>Matched Surveys Percentage</th>
<th>State of AZ Estimates¹²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic or Latino</td>
<td>300</td>
<td>56.2%</td>
<td>58</td>
<td>65.2%</td>
<td>31.6%</td>
</tr>
<tr>
<td>Not Hispanic or Latino</td>
<td>188</td>
<td>35.2%</td>
<td>27</td>
<td>30.3%</td>
<td>68.4%</td>
</tr>
<tr>
<td>Ethnicity unknown</td>
<td>23</td>
<td>3.7%</td>
<td>1</td>
<td>1.1%</td>
<td>N/A</td>
</tr>
<tr>
<td>Prefer not to respond</td>
<td>23</td>
<td>3.7%</td>
<td>3</td>
<td>3.4%</td>
<td>N/A</td>
</tr>
<tr>
<td>Total</td>
<td>534</td>
<td>89</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Age
Finally, participants were asked to answer What is your age? A total of 560 individuals answered this question on the pre, and 91 with all three surveys. Of those, the vast majority (98.2% pre, 98.9% matched surveys) were between the ages of 12 to 14. A breakdown of participant age is shown in Table 11.

<table>
<thead>
<tr>
<th>Age</th>
<th>Pre Count</th>
<th>Pre Percentage</th>
<th>Matched Surveys Count</th>
<th>Matched Surveys Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>9-11</td>
<td>6</td>
<td>1.1%</td>
<td>1</td>
<td>1.1%</td>
</tr>
<tr>
<td>12-14</td>
<td>550</td>
<td>98.2%</td>
<td>90</td>
<td>98.9%</td>
</tr>
<tr>
<td>15-17</td>
<td>1</td>
<td>0.2%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>18-20</td>
<td>3</td>
<td>0.5%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Total</td>
<td>560</td>
<td></td>
<td>91</td>
<td></td>
</tr>
</tbody>
</table>

¹² https://www.census.gov/quickfacts/AZ

ASU-SIRC
**Youth Preliminary Findings**

**Knowledge**

As a part of all three surveys, youth were asked a series of knowledge questions meant to gauge their familiarity with various drug prevention strategies. The results for youth knowledge were mixed. On two questions, *Most Arizona youth my age use drugs and alcohol* and *Peer pressure is the only stressor that may lead youth to use drugs*, the percentage of youth correctly answering decreased modestly. However, on the two other knowledge questions, *It is easier for youth to get addicted to drugs and alcohol than adults* and *[Blank] are another name for the stressors youth my age experience*, there were substantial increases from pre to post.

Overall, youth experienced increased understanding of the concept of pressure points with a 33.4% increase from pre to post, a major objective of the HFHY Program. Additionally, there was a 18.7% increase in knowledge about youth addition risk.

**Table 12: Youth knowledge from pre to post**

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre (% Correct) N=588</th>
<th>Post (% Correct) N=588</th>
<th>Pre-Post Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most Arizona youth my age use drugs and alcohol</td>
<td>55.7%</td>
<td>54.3%</td>
<td>-1.4%</td>
</tr>
<tr>
<td>Peer pressure is the only stressor that may lead youth to use drugs</td>
<td>64.6%</td>
<td>63.8%</td>
<td>-0.8%</td>
</tr>
<tr>
<td>It is easier for youth to get addicted to drugs and alcohol than adults</td>
<td>65.2%</td>
<td>83.9%</td>
<td>+18.7%</td>
</tr>
<tr>
<td>[Blank] are another name for the stressors youth my age experience</td>
<td>23.3%</td>
<td>56.7%</td>
<td>+33.4%</td>
</tr>
</tbody>
</table>
Substance use communication
Youth were asked a series of questions about substance use communication in their family. Open communication about substance use is a central tenant of the HFHY Program. The substance use communication questions utilized a four-point Likert Scale with participants asked to rate their level of agreement with various statements (1 = Strongly disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly agree). For the purposes of this analysis, a positive outcome is a response of 3 or 4, which indicates a youth’s agreement.

There were numerous positive outcomes related to substance use communication for youth. Though there were generally high levels of communication coming into the program, youth reported increases in every question related to substance use communication. The question with the smallest increase was in relation to receiving a warning from a parent or caregiver about substance use, with 98.6% of youth indicating they received a warning before participating in the program. Despite the high initial agreement, there was a small (.5%) increase by the post-survey. The question with the largest increase was A parent/caregiver has asked my thoughts and opinions about substance use. Prior to the program only 80.0% of participants indicated their parents/caregivers had asked their opinion, but by the post-survey, 92.5% shared their parents had asked their opinion a 12.5% increase. Overall, these outcomes indicate improvement in substance use communication as a result of participation in the HFHY Program.

Willcox Middle School
Individuals responding _Agree or Strongly agree_ 
_At least one of my parents/caregivers_

- **…has asked my thoughts and opinions about substance use**
  - Pre: 80.0%
  - Post: 92.5%

- **…has told me they would not approve if I used substances**
  - Pre: 95.4%
  - Post: 97.7%

- **…has talked about how to handle offers of substances**
  - Pre: 91.7%
  - Post: 97.3%

- **…has warned my child about the dangers of substance use**
  - Pre: 98.6%
  - Post: 99.1%

---

*Figure 16: Youth reported communication regarding substance use*
Perceived parental disapproval

Youth were also asked multiple questions about their perceived parental disapproval of substance use. These questions utilized a Likert Scale with answers: 1=Not wrong at all; 2=A little bit wrong; 3=Wrong; 4=Very wrong. A positive outcome for these questions was a response of 3 or 4, indicating perceived parental disapproval of various substance use behaviors.

Youth came into the HFHY Program with high levels of perceived parental disapproval. For that reason, there were only modest improvements from pre to post for two questions, and a decrease in another. Coming into the program 97.0% of youth indicated that their parents would not approve of smoking marijuana, but only 95.7% shared the same on the post-survey. There were small increases from pre to post related to prescription drugs (0.7% increase) and drinking alcohol (0.7%).

Figure 17: Youth perceived parental disapproval of substance use
Substance use risk
Youth were also asked five questions about the perceived risk associated with various substances. Two of the questions pertained to the risks associated with marijuana, one about trying marijuana and the other about smoking marijuana regularly (once or twice a week). Two of the questions were about drinking, one about regular drinking (one or two drinks nearly every day) and the other about binge drinking (five or more drinks in a row once or twice a week). The final substance use question inquired about prescription drug use without a doctor’s prescription. These questions utilized a Likert Scale with answers: No risk, Slight risk, Moderate risk and Great risk.

Figure 18 shows the distribution of answers related to perceived substance use risk. These charts help illustrate how participation in HFHY led youth to perceive greater risk related to substance use. For every substance use behavior, a greater proportion of participants viewed the behavior as a Great risk. An additional 17.0% of participants viewed drinking daily as a Great risk after participating in the program. By the end of the program, fewer individuals viewed these substance use behaviors as having Slight or No risk.

Figure 18: Youth perceived substance use risk
Family rules

One of the major HFHY program objectives was the development of family guidelines regarding substance use, and there were multiple questions concerning family rules on the pre and post-surveys. These questions utilized a four point Likert Scale (1=NO!, 2=No, 3=Yes, 4=YES). A positive outcome was identified as those who responded Yes or YES!

As shown in Figure 17, most youth coming into the program indicated their family had rules, as well as rules specific for substance use. Youth also shared they felt comfortable communicating with their parents/caregivers about any issues they might have. Despite the high initial agreement related to Family Rules, there were increases from pre to post for each question. These increases ranged from 1.1% to 1.8%.

*Figure 19: Family rules according to youth*
Peer disapproval

Youth perceptions of peer disapproval were also measured by pre and post-surveys. These questions utilized a four-point Likert Scale (1=Not wrong at all, 2=A little bit wrong, 3=Wrong, 4=Very wrong). A positive outcome was identified as those individuals answering Wrong or Very wrong.

After participating in the HFHY Program, there was an increase in the proportion of participants who felt that their peers would disapprove of substance use. This was true for every substance asked on the survey. Coming into the program, 85.3% of youth felt their peers would disapprove of marijuana use, but after participating in the program this increased to 92.8%, a 7.5% increase.

**Figure 20: Peer disapproval according to youth**
Difficulty communicating about substance use
Youth were also asked to rate how difficult it was for them to communicate about substance use with their parents/caregivers, a central premise of the program. By the end of the program, more youth (39% vs. 44%) felt that it was *very easy* to talk about substance use with their parents/caregivers.

![Figure 21: Youth level of difficulty communicating about substance use](image)

*Figure 21: Youth level of difficulty communicating about substance use*

*Wade Carpenter Youth Session*
Post program satisfaction
After participating in the HFHY Program, youth were asked two sets of questions meant to gauge their satisfaction with various aspects of the program. Overall, the youth were very satisfied with their experience participating in the program. For the first set of questions, a positive outcome for the satisfaction question were the responses Satisfied or Very Satisfied. No question had a level of agreement under 94.0%. Almost all participants (98.6%) indicated they were satisfied with the organization of the program. The program overall received very high satisfaction as well, with 97.6% of participant indicating their satisfaction.

Figure 22: Youth satisfaction with HFHY - set 1
For the second set of satisfaction questions, a positive outcome was recorded when an individual responded *Agree* or *Strongly agree*. Again, youth expressed satisfaction with participation in the program. The vast majority of youth (98.8%) indicated that they would recommend the program to other youth/families, and 97.4% of participants indicated that the skills they learned will be useful for their family.

![Bar chart showing youth satisfaction with HFHY - set 2](chart.png)

*Figure 23: Youth satisfaction with HFHY - set 2*
Youth pre to follow-up

Knowledge
As a part of all three surveys, youth were asked a series of knowledge questions meant to gauge their familiarity with various drug prevention strategies. The results for youth knowledge were mixed. On one question, *Most Arizona youth my age use drugs and alcohol*, the percentage of youth correctly answering decreased from pre to follow-up. However, for two of the knowledge questions, *It is easier for youth to get addicted to drugs and alcohol than adults* and *[Blank] are another name for the stressors youth my age experience* there were substantial increases from pre to follow-up. The question and *Peer pressure is the only stressor that may lead youth to use* effectively remained the same from pre to follow-up.

Overall, youth experienced increased conceptual understanding of pressure points with a 22.4% increase from pre to post, a major objective of the HFHY Program. Additionally, there was nearly a 15% increase in youth who understand that youth get addicted to drugs and alcohol more easily than adults.

*Table 13: Youth knowledge change from pre to follow-up*

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre (% Correct) N=100</th>
<th>Post (% Correct) N=100</th>
<th>Pre to follow-up Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most Arizona youth my age use drugs and alcohol</td>
<td>53.2%</td>
<td>45.9%</td>
<td>-7.3%</td>
</tr>
<tr>
<td>Peer pressure is the only stressor that may lead youth to use drugs</td>
<td>69.1%</td>
<td>70.0%</td>
<td>0.9%</td>
</tr>
<tr>
<td>It is easier for youth to get addicted to drugs and alcohol than adults</td>
<td>73.4%</td>
<td>88.0%</td>
<td>+14.6%</td>
</tr>
<tr>
<td>[Blank] are another name for the stressors youth my age experience</td>
<td>23.1%</td>
<td>45.5%</td>
<td>+22.4%</td>
</tr>
</tbody>
</table>
Substance use communication
On the pre and follow-up surveys youth were asked a series of questions about family substance use communication. The substance use communication questions utilized a four-point Likert Scale with participants asked to rate their level of agreement with various statements (1=Strongly disagree, 2=Disagree, 3=Agree, and 4=Strongly agree). For the purposes of this analysis, a positive outcome is a response of 3 or 4, which indicates a youth’s agreement.

There were mixed outcomes related to substance use communication for youth. There were generally high levels of communication coming into the program, and youth reported increases in three question related to substance use communication. One question …has told me they would not approve if I used substances there was a 1.9% decrease from pre to follow-up. There was no change in the question about parents sharing their disapproval of substance use. There was a 4.2% increase in youth who shared their family has talked about how to handle substance offers and a 14.9% increase in those youth who have had their parents ask their thoughts and opinions about substance use.

Figure 24: Substance use communication according to youth
Spend time doing fun things
On the pre and follow-up surveys only, youth were asked if their parents spent time with them doing fun things. This was a point of emphasis during the program, meant to help adults better engage with their youth. This was measured with one question and utilized a four-point Likert Scale (1=Strongly disagree, 2=Disagree, 3=Agree, and 4=Strongly agree). By the follow-up survey, substantially more youth agreed that their parents spent time with them doing fun things. There was a 26.0% increase from pre to follow-up on this question (those responding Strongly agree or Agree).

![Figure 25: Doing fun things with parents/caregivers according to youth](image)

*Figure 25: Doing fun things with parents/caregivers according to youth*
Perceived parental disapproval

On the follow-up youth were also asked multiple questions about their perceived parental disapproval of substance use. These questions utilized a Likert Scale with answers: 1 = Not wrong at all; 2 = A little bit wrong; 3 = Wrong; 4 = Very wrong. A positive outcome for this question was a response of 3 or 4, indicating perceived parental disapproval of various substance use behaviors.

Youth came into the HFHY Program with high levels of perceived parental disapproval. This could be one possible reason the results for this question were mixed. From pre to follow-up there were decreases in perceived parental disapproval of marijuana smoking (-1.9%) and prescription drug use (-1.7%). There was however an increase of 3.2% in the number of youth who believe their parents would not approve of regular alcohol consumption.

![Figure 26: Youth perceived parental disapproval of substance use](image)

Individual responding Wrong or Very wrong

*How wrong do your parents/caregivers believe it would be for you to...*

- use prescription drugs without a doctor telling you to take them
  - Pre: 92.7%
  - Follow-up: 91.0%

- take a puff or smoke marijuana
  - Pre: 96.9%
  - Follow-up: 95.0%

- take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day
  - Pre: 92.8%
  - Follow-up: 96.0%
Substance use risk
Youth were also asked multiple questions about the perceived risk associated with the use of various substances. Two of the questions pertained to the risks associated with marijuana, one about trying marijuana and the other about smoking marijuana regularly (once or twice a week). Two of the questions were about drinking, one about regular drinking (one or two drinks nearly every day) and the other about binge drinking (five or more drinks in a row once or twice a week). The final substance use question was in regards to using prescription drugs without a doctor’s permission. These questions utilized a Likert Scale with answers: No risk, Slight risk, Moderate risk and Great risk.

Figure 25 shows the distribution of answers related to perceived substance use risk. These charts help illustrate how participation in the HFHY Program led youth to perceive greater risk in substance use behaviors. For each behavior, a greater proportion of participants viewed the behavior as a Great risk or Moderate risk. Further, by the follow-up fewer individuals viewed these substance use behaviors as having Slight or No risk.

Figure 27: Youth perceived substance use risk - pre to follow-up
HFHY Year 3 Evaluation Report

**Binge Drink**

- Pre: 11% No risk, 14% Slight risk, 6% Moderate risk, 8% Great risk
- Follow-up: 1% No risk, 14% Slight risk, 0% Moderate risk, 8% Great risk

**Drink Daily**

- Pre: 14% No risk, 14% Slight risk, 23% Moderate risk, 49% Great risk
- Follow-up: 9% No risk, 11% Slight risk, 32% Moderate risk, 47% Great risk

**Prescription Drugs**

- Pre: 10% No risk, 5% Slight risk, 7% Moderate risk, 78% Great risk
- Follow-up: 8% No risk, 2% Slight risk, 8% Moderate risk, 81% Great risk
Substance use conversation
One of the primary objectives of the HFHY Program is to increase the frequency with which adults and youth have conversations about substance use. From pre to follow-up there was an increase in the number of families who had a conversation about substance use in the past week (7.0%) as well as an increase in families who had a conversation in the past month (6.0%). Over a quarter of participants (26.0%) reported having a conversation in the past week. Also on the follow-up, no individuals reported having never had a conversation about substance use.

*How recently have you had a conversation with your youth about how to refuse or avoid drugs and alcohol?*

![Bar chart showing the percentage of participants who had a conversation with their youth about refusing or avoiding drugs and alcohol in the past week, the past month, in the last three months, in the last year, and never.](image)

*Figure 28: Substance use conversation according to youth - pre to follow-up*

*Miami Jr. High family conversation*
Family rules
As one of the major objectives of the HFHY Program was the development of family guidelines about substance use, there were multiple questions asked about family rules on all three surveys. These questions utilized a four point Likert Scale (1=NO!, 2=No, 3=Yes, 4=YES). A positive outcome was identified as those who responded Yes or YES.

Once again, youth came into the program with very high rates of having family rules, which could account for the regression from pre to follow-up. Though there were no substantial changes from pre to follow-up, there was a decrease in the proportion of youth sharing they can ask their parent/caregiver about problems they may have.

Figure 29: Family rules according to youth - pre to follow-up
Youth peer disapproval
Youth perceptions of peer disapproval were also measured on the follow-up survey. These questions utilized a four-point Likert Scale (1=Not wrong at all, 2=A little bit wrong, 3=Wrong, 4=Very wrong). A positive outcome was identified as those individuals answering Wrong or Very wrong.

After participating in the HFHY Program, there was an increase in the proportion of participants who felt that their peers would disapprove of binge drinking and prescription drugs use, but a slight decrease in those who perceived peer disapproval of marijuana use.

![Figure 30: Perceived youth peer disapproval - pre to follow-up](image-url)
Program utilization
On the follow-up survey, youth were asked two sets of questions about their utilization of the skills and tools developed during the program. This was measured using a four-point Likert Scale (1=Strongly disagree, 2=Disagree, 3=Agree, and 4=Strongly agree). Overall, youth reported high rates of utilization of those HFHY skills. A total of 95.9% of youth reported their family had made rules about substance use. Additionally, 80.2% of youth participated in activities that could help them avoid drugs and alcohol.

**Figure 31: Program utilization by youth - set 1**
For the second set of skill utilization questions, youth once again reported high levels of utilization of skills, and retention of knowledge from the program. All the participants (100%) reported they understood their choices regarding drug and alcohol use had consequences.

![Figure 32: Program utilization by youth - set 2]

**Figure 32: Program utilization by youth - set 2**
Youth Open-Ended Response
As a part of all three surveys, youth were asked a series of open-ended questions to gain a clearer understanding of their opinions and the impact of the program. All responses were entered into NVivo qualitative data analysis software to identify salient themes and ideas expressed by HFHY participants.

Pre-Survey
Youth were asked three open-ended questions as a part of the pre-survey.

What would be the hardest part of talking about substance use with your parents/caregivers?

The first open-ended question for youth asked: What would be the hardest part of talking about substance use with your parents/caregivers?

The majority of participants shared that it was difficult to discuss substance use with their parents. Some stating that their parent’s reaction was the hardest part. Others indicated that it would be difficult or awkward to communicate about substance use.

Them yelling at you or getting mad
The hardest part would be trying to get them to understand.

Many youth also shared they fear letting their parents down and not meeting their expectations.

The hardest part is how awkward it is because of expectations.

Many youth indicated it was difficult to talk to their parents about substance use because their school has substances.

The hardest part about talking about substances is if your school has had drugs in it.
Numerous youth shared they simply do not talk to their parents about drugs because it makes them uncomfortable.

*For me it would be mentioning the topic because I don’t like talking about this kind of stuff.*

Further, many youth indicated communicating about substance use was difficult because they knew of family members and friends who have had trouble with substance use.

*When a family member almost die using one. But he's safe.*

*Heroin because some family has been on it & had problems.*

A few youth also shared that it was a very difficult conversation to have with their parents for fear of disappointing them and being ashamed.

*The hardest part would be to see that they are disappointed in me*

*They would be ashamed of you.*

*They would not want to talk to you for a while*

Some youth also shared that this was a difficult conversation because their parents would ask if they are using drugs. The youth also mentioned communicating with their parents is difficult because they don’t know where to begin on the topic.

*Bringing it up, they would ask "why are you doing drugs?"*
While some indicated conversations about substance use were difficult, others found such conversations easy. Youth shared a variety of reasons why substance use conversations were easy including: they feel comfortable, it is simple, and their religion.

Many youth simply shared their curiosity about what the effects of drugs as well as their parent’s previous drug usage.
When you have discussions with your family about substance use, how does it make you feel?

The second open-ended question asked youth: When you have discussions with your family about substance use, how does it make you feel? Discussing substance use made participants feel a variety of different ways. For this question, responses were nearly evenly split between positive and negative feelings associated with substance use discussions.

For those who did share negative feelings about discussing substance use, the most frequent response was the discussions made them feel sad because they fear their parents don’t trust them.

\[ \text{Bad, or makes me feel they don't trust me.} \]

Others shared that this discussion was uncomfortable because they feel very self-conscious and scared.

\[ A \text{ little bit self-conscious, and nervous too. I'm afraid of being addicted to drugs and scared at the mention of it. I've heard a lot about the danger and horrors of alcohol and drugs.} \]

\[ \text{When I have a conversation with my family it makes me feel nervous of what they think of me.} \]

\[ \text{Bad, because people get hooked to it.} \]

Numerous youth shared discussing substance use made them feel sad, but specifically sad for those who use drugs and who have been harmed by them.

\[ \text{Sad for my fellow children dead to it.} \]

\[ \text{Sad that other people go through this but also happy I know how to stay out of it.} \]
Many youth also shared that the discussions about substance use made them feel sad because they have family members that struggle with substance abuse.

Sad because my family had problems because of drugs. I don’t want to be like them.

Several also shared that these conversations were weird, and uncomfortable as well as awkward because they don’t do drugs.

Weird because I don't like it and don't know why they would bring it up.

Sometimes it makes me feel awkward. Weird because I know I don't get involved with that stuff.

While many shared that conversations about substance use brings out negative feelings, many indicated positive experiences with these conversations.

A few individuals shared that conversations about substance use make them feel better, and that they feel safe because they can speak to their parents about the topic.

Safe, I can have a learning experience from my parents. We talk about it all the time and it makes me feel a lot better when they tell me not to do them.

The discussions I have make me feel safe.
Of those that felt positive about those conversations, many shared that those conversations made them feel more knowledgeable on how to handle the pressure of drug use.

**Yes, it makes me feel better because then I know what to do.**

**We talk about it all the time and it makes me feel a lot better when they the tell me not to do them.**

Numerous youth also shared feeling comfortable having these conversations with their peers as well. Participants shared social media helps prompt discussions about substance use, and that it is a topic of conversation with their peers.

**Discuss when one of my peers tells me about it.**

**Every time an overdose case pops up on social media. (Often)**

Youth also shared that substance use conversations make them focus on their futures.

**Think about my future life.**

**Name two things you want to learn:**

The final open-ended question on the pre-survey was about two things youth hoped to learn from the program.

The most frequent cited hope for the program was to become more knowledgeable about drugs and the signs of substance use.

**How many kids my age are doing drugs; - multiple signs to tell if they are doing drugs.**
Many participants wanted to learn more about the effects of drugs and risk it can place on an individuals’ life.

1. How many people die a week off of drugs; 2. If they did it.

Several youth wanted to learn how youth get access to drugs, why people sell them to youth and why people in general use them.

About OD; make is easyr to talk.

How do kids get a hold of drugs? Why sell it to kids?

Where do you find it and why do they sell it. Why do people take drugs.

Another idea mentioned as a hope for the HFHY Program was to understand why drugs are so addicting.

Why is it so addicting? why do people say it fun and get high?

Many participants wanted to know how drugs and alcohol effect the body.

How does substance abuse affect your body.

1. What they can do to your body. 2. the effects on your mind.
Several students wanted to learn more about different drugs and how they effect your life.

Different kinds of drugs the difference between bad and good drugs.  
How drugs affect kids in their system and how do you know what drug not to use

Other youth wanted to learn how to take information learned during the program to help prevent others from taking drugs as well as persuade people to stop drug use.

How to prevent it for others; - Why people make them.  
Different ways how to prevent drugs & alcohol.

1. how to persuade people to stop doing drugs.

Participants commented that they looked forward to learning about how to avoid drugs and peer pressure from friends.

How to avoid peer pressure to drugs. - How to pick right friends who won't do that stuff.

What to do when someone offers me Drugs Learn how to back out of pure pressure.  
1) How to avoid drugs; 2) How to avoid alcohol.

Several youth also indicated they hope to gain better communication skills, with some specifically referring to communication with their families.

Communication better.  
Talk with my family.
Post-Survey
Youth were asked one open-ended question on the youth post-survey to gain a better understanding of their experience with the program.

**Name two things you learned during the program that will help you.**

When asked about two things you learned during the program that will help you, youth provided a variety of answers. Many shared that “Everything” about the program was beneficial. Of those who provided a specific answer, the most frequently shared idea was information about the consequences of drugs and how to better communicate. This aligns very closely to the responses provided by adults on the post-survey.

1. I can talk to guardian/adult about a problem I may have; 2 I learned that I know how to talk to my mom better and that we are making a plan.

1. to not be afraid to tell my parents about my feelings; 2. not to be afraid to tell an adult about anything

Better communication with my parents; Getting addicted with drugs could harm yourself, family, and friends.

Many participants mentioned the tools the program provided to them with technique and skills to say no to drugs.

1. How to avoid drugs.; 2. How to say no to drugs (excuses, better things to do).

You should have a code if you need to get picked up from somewhere; ways to say no.

1. finding out what my pressure points are.; 2. Finding ways to avoid dealing with drugs.
Many youth indicated that the time in the program helped them understand to not do drugs.

*Don't do drugs; Don't start because it's easier to get addicted at a younger age.*

*Don't do drugs; Drugs can harm you in many ways and the break relationships.*

*Don't use heroine or you'll die; using somebody's drugs without the doctor's permission is bad.*

*We don't have to use drugs and don't take drugs from anyone*

Other youth shared that the information presented in the youth session provided them with key lessons from the program.

*The talk with other 7th grades or when we got separated from the adults. I got to hear the opinion about drugs and alcohol from people my age*

Many youth also pointed specifically to the pressure points activity as a key area of learning from the program.

*I think it was when we had to write our pressure points it made me realize what really made me stress.*

Information about the effects of drugs was another aspect of the program which was a key learning for many youth.
Youth also indicated that the development of the plan, as well as the communication with adults was the most beneficial.

A few youth provided other answers about what they found most beneficial including: learning, helping their future, surveys, and activities.

There were a few youth who indicated there was nothing they found beneficial, or they were unsure. Some of those who gave this answer shared that they already knew this information.

Participants commented that one of the key learnings from the program was how to deal with peer pressure and in turn say no to drugs.

1. Don't do drugs talk to a trusted adult; make up an excuse to get out of pressure of drugs.
1. It's riskier to try drugs as a child than an adult; 2. I can surround myself with positive, trusted people to keep from negative influence of pressure points and peer pressure.

Always say no to drugs no matter what; Don't ever listen to the people that call you a sissy for not taking drugs or alcohol.

Come up with an excuse to leave if someone offers you alcohol and drugs; Tell an adult if anyone offers you alcohol or drugs.

Two things I learned during this program is that when you are peer pressured, you can just walk away, say no, etc. Also, I learned that you can listen to music when you're stressed or overwhelmed.
Follow-up Surveys

Youth were also asked two open-ended questions as a part of the follow-up survey.

_How could the HFHY Program be better for you?_

When asked what could be done to make the program better, numerous youth indicated the program was beneficial. Of the youth who provided suggestions for improving the program, the most frequently cited suggestion was to provide more ideas and to give examples and more engaging activities.

Give examples.

Have some activities.

Many youth expressed a desire for the program to happen more frequently.

If they would come more often.  It could be better by being more often.

Some students mentioned that the information would be better to give to all students, with others specifically stating it should be done with different grade levels.

If we didn't go we wouldn't know.  It would be better if it was for 6th and 8th grade.

Youth also suggested that the survey questions should be clearer in the future.

These questions could be easier to understand.

Youth also expressed a desire for more videos.

More videos.
Youth also wanted the program to provide more information about the consequences of substance use.

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*Can be better for me if they showed the consequences.*

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Finally, several participants mentioned how much they enjoyed the program and thought it helped everyone.

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*It already is a perfect program.*  
*Program helps everyone.*

---

**Has the plan you developed during the HFHY Program been helpful? If yes, why? If no, why not?**

Finally, youth were asked if the plan they developed during the program was helpful, and 78 individuals provided responses. The majority of those individuals shared that, yes, it had been helpful. However, those individuals who did indicate it had been helpful did not provide a rationale as to why. There were some who indicated that the program was not helpful, though they were in the minority.
Facilitators and Coordinators

Post-Survey

Individuals who had a leadership role in the Healthy Families Healthy Youth Program were asked to voluntarily complete an anonymous survey online, one week post-program completion. The online survey link was emailed to adult and youth leaders, program coordinators, data coordinators, and other program support staff. A total of 51 individuals completed the survey. Overall, the responses to the survey were positive.

Participants

Of the 51 facilitators and coordinators who completed the post-survey, the majority identified as one of the following roles: Adult Leader (33.3%), Program Coordinator (25.5%), Youth Leader (19.6%), or Data Coordinator (19.6%). The remaining 2.0% identified as Other.

Figure 33: Facilitator and coordinator role
Program perceptions
Facilitators and coordinators were asked a series of questions about their perception of the program. There were high levels of agreement on each question, and no question had less than 90% agreement. Two questions, *I expect the families to use the prevention plan they developed during the program* and *More families would benefit from participating in the HFHY Program*, had 100% agreement among the facilitators and coordinators.

**Figure 34: Facilitator and coordinator perceptions of the HFHY Program**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>More families would benefit from participating in the Healthy Families Healthy Youth Program</td>
<td>100.0%</td>
</tr>
<tr>
<td>I received the school support necessary to be a successful coordinator of the HFHY Program.</td>
<td>98.0%</td>
</tr>
<tr>
<td>The HFHY Program was a success.</td>
<td>98.0%</td>
</tr>
<tr>
<td>The content presented in the program was understood by the participants.</td>
<td>98.0%</td>
</tr>
<tr>
<td>I expect the families to use the prevention plan they developed during the program.</td>
<td>94.1%</td>
</tr>
<tr>
<td>The evaluation procedure was understood by participants.</td>
<td>94.0%</td>
</tr>
<tr>
<td>Families enjoyed participating in the program.</td>
<td>94.0%</td>
</tr>
</tbody>
</table>
Perceived program impact
When asked about the perceived impact of the program, facilitators and coordinators were once again positive. The question with the highest level of agreement was *Parents and youth developed a drug and alcohol prevention plan* with 98% indicating they *Strongly agree* or *Agree*.

Percentage of individuals stating they *Agree* or *Strongly agree*

- Parents and youth developed a drug and alcohol prevention plan: 98%
- Parents better understand the pressure points their youth experience: 96%
- Parents are more aware of the drug and alcohol resources available in the community: 94%
- Parents and youth learned better communication skills: 94%
- I feel more comfortable communicating with youth about challenging subjects: 90%
- The youth and adults who participated in the HFHY Program have better communication skills: 90%
- I have more skills to make an impact in my community: 88%

*Figure 35: Facilitator and coordinator program impact*
Participation
There were also a series of questions meant to gauge the depth of engagement by youth and adult participants. Facilitators and coordinators reported high levels of participation, attentiveness, family plan development, belief that youth will use the skills, and belief that the program will meet its intended goals.

Figure 36: Perceived program participation

- **Participant attentiveness**
  - Very attentive: 33.3%
  - Attentive: 66.7%

- **Active participation in discussion**
  - All: 62.7%
  - Most: 37.3%

- **Participant family plan development**
  - All: 51.0%
  - Most: 47.1%

- **Likelihood youth use skills from program**
  - Very likely: 51.0%
  - Likely: 47.1%
Likelihood program will meet intended goals

- Very likely: 3.9%
- Likely: 45.1%
- Unlikely: 51.0%
Open-ended questions
Beyond the reported survey responses, facilitators and coordinators were asked a series of open-ended questions meant to explore additional outcomes, successes, and challenges.

What skills did the HFHY provide participants?
Overall, respondents’ comments indicate the HFHY Program provided parents and youth with better communication on the topic of substance use, brought awareness to families about drugs, and provided families with knowledge and data on substance use.

Ways to talk with your children about difficult subjects, great awareness of the drug epidemic and how to identify signs learning preventative measures BEFORE there is a problem.

Which parts of the HFHY Program do you believe were the most beneficial for participants? Why?
Overall, respondents indicated the HFHY Program, in general, was beneficial. Specifically, they reported that the program provided an environment and appropriate activities for families to communicate about substance use.

The meeting where they actually sat and talked. I watch many barriers be lifted and communication channels built between parent and child.

Are there any additional resources you think would be necessary to help achieve the goals of the HFHY Program? What are they?
Respondents’ comments indicated the HFHY program could enhance the achievement of its goals by bringing in other individuals who support substance prevention to deliver information and share community resources.
Do you have any additional comments or concerns about the program?

Comments varied with participants, but one frequent comment was in regards to shortening the program overall.

It is a great program but the program is too long for a school night 3+ hours. If we want families to keep coming the program should top out at 2 hours but no more than 2.5 hours. I believe the ending should be cut down and just focus on the families coming together to create an exit plan that is comfortable for the child and suitable for the parent. Dialogue will be happening during dinner about what should be done in their family in case something comes up. Here is a mockup of what could make that possible: Intro (7 mins), 1st survey (15 mins), class (50 mins), dialogue/plan building/dinner (40 mins), exit survey (15 mins), and conclusion (7 mins). That is a total of 134 mins = 2 hrs and 15 mins max.

I have spent time trying to figure out how to spread the word. I think the length of the program is part of what dissuades families from attending.

It is very very long. I don’t know how to make it faster, but it turns out to be a long night and there are quite a few complaints about that.
Follow-up
Several weeks after the completion of the HFHY Program, HFHY Coordinators were asked to complete a voluntary and anonymous online follow-up survey. A total of 12 coordinators completed the survey. Overall, the responses to the survey were positive, with the majority of respondents either agreeing or strongly agreeing with various statements related to the program. Many of the follow-up survey questions utilized a Likert scale format. Participants were asked to rate their level of agreement, and responses were based on a scale of 1 - 5, with (1) Strongly disagree, (2) Disagree, (3) Neither agree nor disagree (neutral), (4) Agree, and (5) Strongly agree.

Coordinator program perception
The first section of the survey was comprised of 14 declarative statements used to identify coordinators perceptions of the program. Generally, there were high levels of agreement with each statement, however there were a few statements where participants expressed disagreement. When participants were asked to rate the following question: I have seen the skills taught in the HFHY Program used in my community only 30% of participants stated the Strongly agree or Agree. Further, when rating their agreement with Families in my community are committed to continuing the lessons learned in the HFHY Program only 30% of participants indicated they Strongly agree or Agree.

Photobooth activity set up by facilitators at Duncan Elementary in Greenlee
Figure 37: Coordinator program perception

I received the school support necessary to be a successful coordinator of the HFHY Program. 100%

The HFHY Program has been beneficial for my community. 100%

The evaluation procedure was made clear to me. 90%

I received adequate training to be a successful coordinator of the HFHY Program. 90%

The Facilitators and coordinators are committed to continuing the lessons taught during the HFHY Program. 90%

The content presented in the program was understood by the participants. 90%

I believe more families in my community would be interested in participating in the HFHY Program. 90%

The HFHY Program was a success. 90%

I was able to have any questions about the program answered. 80%

The HFHY Program was well organized. 70%

I would have benefited from greater guidance after the training on how to conduct the HFHY Program. 60%

I believe families in my community have used their prevention plans. 60%

I have seen the skills taught in the HFHY Program used in my community. 30%

Families in my community are committed to continuing the lessons learned in the HFHY Program. 30%
Coordinator program impact

Coordinators were next asked to indicate their agreement with a series of statements related to the impact of the HFHY Program. Once again, coordinators expressed high levels of agreement with most questions related to the impact of the HFHY Program. The question with the lowest level of agreement was: *I have noticed a difference in the behavior of the youth in my community.* Only 30% of participants stated they *Strongly agree* or *Agree.*

<table>
<thead>
<tr>
<th>Statement</th>
<th>Percentage Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents better understand the pressure points their youth experience.</td>
<td>100%</td>
</tr>
<tr>
<td>Parents and youth developed a drug and alcohol prevention plan.</td>
<td>100%</td>
</tr>
<tr>
<td>Parents are more aware of the drug and alcohol resources available in the community.</td>
<td>90%</td>
</tr>
<tr>
<td>I have more skills to make an impact in my community.</td>
<td>80%</td>
</tr>
<tr>
<td>The youth and adults who participated in the HFHY Program have better communication skills.</td>
<td>70%</td>
</tr>
<tr>
<td>I feel more comfortable communicating with youth about challenging subjects.</td>
<td>70%</td>
</tr>
<tr>
<td>I have had additional conversations with families/youth about drugs and alcohol.</td>
<td>55%</td>
</tr>
<tr>
<td>I have noticed a difference in the behavior of the youth in my community.</td>
<td>30%</td>
</tr>
</tbody>
</table>

*Figure 38: Coordinator program impact*
Coordinator open-ended questions
Finally, the coordinators were asked three open-ended questions about the HFHY Program.

*How worthwhile was the HFHY Program as an investment of time, effort and money to influence youth to make safer choices?*

When asked about the merits of the HFHY Program, specifically in relation to the time, effort, and money, coordinators were generally positive.

---

*I think this program was incredibly worthwhile. The money spent on dinner provided incentive for everyone to attend and the content of the program is incredible. If everyone could hear the conversations that our students had with their parents they would support the program 100%!*

There was however one individual who expressed a concern about communication.

---

*It was definitely worthwhile. However, I feel communication needs to be better between schools and the State.*

*How well did the HFHY Program provide youth with the knowledge and skills needed to make safer choices, and influence their attitudes, beliefs and intentions about drugs and alcohol?*

Very well. The youth program was written perfectly so that students make a proactive plan for their futures. It didn’t dwell on the effects of drugs too much to be a negative experience. Instead, it educated and empowered the students to make healthy choices.

---

When asked about how well the HFHY Program provided youth with knowledge and skills, coordinators were once again extremely positive.
It created a stronger bond between my staff and student and let the kids see how important it was to be drug free.

**Looking back on the HFHY Program what could be done differently to make a greater impact in your school/community?**

When asked about what could be done differently, Coordinators offered several suggestions for how to improve the program.

Many shared it would be beneficial to increase participation/attendance through more communication.

I believe schools need to recruit more aggressively in order to ensure greater participation.

More communication with the school so we can get more families to attend. When the school has to compete with sports, events etc. Our attendance drops. Also we need more clarification from the state regarding the purchases, dates etc.

The only thing I want to work in is increasing attendance. We’ve done better each year but it is always frustrating to have so many people register initially only to have a third show up. I’m still mulling this over.

Other coordinators expressed a desire for better communication between the schools and GOYFF.

More communication from GOYFF. I think they assumed just because this program had been completed in the past, people would remember what to do. We had to continually ask questions. VERY little was communicated unless asked. The program seemed much less organized this year.
If the program were to be run again next year, is there anything you would do differently? What would it be?

When asked what they would do differently next year, coordinators shared several ideas for how to approach the program. Many indicated they would switch to holding the Program earlier in the year.

I would love to see the program hosted earlier. June/July

Others provided other insights for returning post-surveys [sic. Follow-up].

I would encourage schools to do more recruiting. I would also have kids return the post-surveys to the schools so that we can ensure a higher return rate.
Conclusion

The evaluation of Healthy Families Healthy Youth demonstrates that the program was effective in achieving the goals set forth by the framework:

1. Increase communication between students and their parents/caregivers
2. Increase awareness of substance use by students and their parents/caregivers

Program surveys from pre, to post, through follow-up demonstrate increased knowledge among parents and caregivers as well as student participants.

The percentage of adult participants who understood pressure points nearly doubled. The proportion of youth respondents able to define pressure points doubled from pre to post-survey.

Survey results demonstrate increased communication between parents and caregivers and youth.

Nearly all adults reported as they left the program that their family had a clear plan for youth to avoid drugs and alcohol. By the follow-up survey, almost all parent and caregiver respondents indicated they had asked their child about their thoughts and opinions on substance use, demonstrating a near 20% increase. Almost half of adult respondents reported they’d had a conversation in the last week. By the follow-up survey, there was nearly a 15% increase in youth who reported their parents asked their thoughts and opinions about substance use. The proportion of youth reporting their parents spend time with them doing fun things rose by over a quarter. A quarter of youth participants reported having a conversation with their parents or caregivers in the past week regarding substance use.

Program surveys from pre, to post, through follow-up show an increased perception of substance use risk among student participants.

There was also a massive increase in the proportion of youth who understood that the risk of addiction is much higher among youth than adults who use drugs or alcohol. Youth perceptions pertaining to the risk of drinking rose significantly by the program’s end.

Both adult and youth participants reported an overwhelming amount of satisfaction with the Healthy Families Healthy Youth program.
Recommendations

Youth and adults, as well as facilitators and coordinators, provided suggestions for how to improve the HFHY Program.

- Implement the program during the Spring, to coincide with the beginning of the school year
- Shorten program
- Improve recruitment by schools to increase participation
- Increase the amount of communication between schools and GOYFF, specifically in regards to budgets
- Allow facilitators more flexibility in the delivery of the curriculum
- Expand the program to other grades/schools
- Time the program so there are no (or minimal) conflicts with other activities
- Provide more hands-on activities in the youth session

Centennial Middle School Event
## Appendix 1: Participating Schools and Schedule

<table>
<thead>
<tr>
<th>Region</th>
<th>School Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cochise</td>
<td>Joyce Clark Middle School</td>
<td>3/7/2019</td>
</tr>
<tr>
<td></td>
<td>St. David Elementary School</td>
<td>3/5/2019</td>
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<tr>
<td></td>
<td>Willcox Middle School</td>
<td>3/4/2019</td>
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<tr>
<td>Gila</td>
<td>Hayden Winkelman</td>
<td>2/26/2019</td>
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<tr>
<td></td>
<td>Miami Jr. High</td>
<td>2/11/2019</td>
</tr>
<tr>
<td></td>
<td>Rim Country Middle School</td>
<td>2/27/2019</td>
</tr>
<tr>
<td></td>
<td>Safford Middle School (3 events)</td>
<td>2/28/2019</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3/7/2019</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3/19/2019</td>
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<tr>
<td>Greenlee</td>
<td>Duncan Elementary (K-8)</td>
<td>2/19/2019</td>
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<tr>
<td></td>
<td>Fairbanks Middle School (5-8) (2 events)</td>
<td>3/6/2019</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3/7/2019</td>
</tr>
<tr>
<td>Maricopa</td>
<td>Freedom Elementary</td>
<td>4/30/2019</td>
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<tr>
<td></td>
<td>Liberty Elementary</td>
<td>4/29/2019</td>
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<tr>
<td></td>
<td>Rainbow Valley Elementary</td>
<td>4/30/2019</td>
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<tr>
<td>Navajo</td>
<td>Sequoia Village School</td>
<td>3/27/2019</td>
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<tr>
<td></td>
<td>Show Low USD - Show Low Junior High School</td>
<td>3/26/2019</td>
</tr>
<tr>
<td>Pima</td>
<td>Challenger Middle School</td>
<td>3/6/2019</td>
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<td></td>
<td>Gallego Inter. Fine Arts Magnet School</td>
<td>3/11/2019</td>
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<td></td>
<td>Lauffler Middle School</td>
<td>2/27/2019</td>
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<td>Pinal</td>
<td>Cactus Middle School</td>
<td>4/10/2019</td>
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<tr>
<td></td>
<td>Eloy Junior High School</td>
<td>3/5/2019</td>
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<td></td>
<td>Red Rock Elementary</td>
<td>4/3/2019</td>
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<tr>
<td>Santa Cruz</td>
<td>Desert Shadows Middle School</td>
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<td></td>
<td>Patagonia Middle School</td>
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<td></td>
<td>Wade Carpenter Middle Academy</td>
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<td>Yuma</td>
<td>Centennial Middle School</td>
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<td>Crane Middle School</td>
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<tr>
<td></td>
<td>Woodard Junior High School</td>
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</tr>
<tr>
<td><strong>Total number of events</strong></td>
<td>30</td>
<td></td>
</tr>
</tbody>
</table>
Appendix 2: HFHY County Coverage