A Wellness Approach to Preventing Youth Risk Behaviors
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Chapter 1
Introduction

“The majority of American youth experience two, three and sometimes more health risks at the same time. These can include, for example, physical inactivity, unhealthy eating, lack of sleep, uncontrolled stress, lack of spirituality and alcohol, tobacco, marijuana or other drug use. Together, these multiple and sometimes co-existing harmful behaviors cause significant anxiety, pain and suffering for young people, their families and our communities.

To address this national epidemic we developed a wellness strategy for promoting positive behaviors and images like being physical active while at the same time preventing risky habits such as substance abuse. This unique Prevention Plus Wellness (PPW) Approach has been used to create evidence-based programs that are customized to the current health habits of each youth, and are quickly implemented in as little as one lesson.

The PPW Approach is an evidence-based, practical method for prevention, health and youth services providers to protect youth and young adults from many of today’s common health risks, and improving their “whole health.” Unlike other prevention and health strategies that address just a single risk behavior or use negative fear or harm communication, the PPW Approach is designed to improve the physical, mental, emotional and spiritual health and positive development of young people.

I hope you’ll find this e-book helpful in seeing the potential of the PPW Approach as a positive, practical and powerful method for promoting healthy, fit and substance-abuse free lifestyles of children, adolescents and young adults. Please contact us to learn more about our evidence-based Prevention Plus Wellness programs and training, or how you can use the PPW Approach to plan and implement a wellness-based prevention strategy that meets the needs of your organization and youth population.”

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Chapter 2
How it All Began

The creation of Prevention Plus Wellness™, LLC and the PPW Approach to positive youth development began with the early personal experiences and later professional training of Chudley Edward Werch, PhD. As a young person growing up in rural Wisconsin, Chudley experienced first-hand many of the harmful effects of wide-spread alcohol misuse in individuals, families and communities.

These included family conflict, vandalism, fighting and bullying, injury, auto crashes, and even the death of a high school classmate from drinking driving. It also involved his own experiences with binge drinking while an undergraduate student, and the many times he drove after partying and arrived home safely “only by the grace of God.”

Not surprisingly, these seminal life experiences influenced his academic interests and professional goals. While a PhD candidate at the University of Wisconsin-Madison, he chose to develop and evaluate a brief alcohol abuse prevention intervention as part of his dissertation. That research launched a 30-year career in academia and business aimed at planning, testing and disseminating prevention and health programs for young people.

A turning point came when Dr. Werch was challenged with designing a feasible and relevant prevention program for youth participating in school athletics. His solution was to integrate substance abuse prevention within a wellness-based program that emphasized the benefits of participating in sports and physical activity, eating healthy, getting adequate sleep, and managing stress.

This work led to the creation of theoretical and practice models for planning and implementing cost-effective programs that address multiple health behaviors, but are able to be implemented in busy, time-limited settings. These two models, along with knowledge gained from applying them in developing over a dozen brief motivational integrated interventions, constitute the Prevention Plus Wellness Approach to planning and implementing wellness-based prevention.

In 2013, Dr. Werch founded Prevention Plus Wellness™, LLC to achieve his dream of improving the “whole health” of youth throughout the US by disseminating the PPW Approach, as well as providing evidence-based Prevention Plus Wellness programs and training, to youth services providers, parents and young people. In the remainder of this e-book, we discuss the Prevention Plus Wellness Approach as a positive and practical tool for developing wellness-based prevention materials, media campaigns, programs, and multi-level community-wide strategies.
Chapter 3
Modern Epidemic of Multiple Risk Behaviors

National data from the Centers for Disease Control and Prevention\(^1\) show that millions of American adolescents experience key risk behaviors known to harm their physical, mental, emotional and spiritual health. Many of these risk behaviors are associated with substance use. For example:

- 66% of US adolescents have tried and 35% currently drink alcohol
- One in 10 currently drive after drinking, and 22% ride with a drinking driver
- Over 1 in 5 (21%) currently binge drink alcohol
- 40% have tried and 23% currently use marijuana
- 41% have tried and 23% currently smoke cigarettes
- 18% have used prescription drugs without a doctors script

In addition to risk behaviors associated with substance use, many youth are also exposed to chronic disease risks. For example:

- Only 27% of US adolescents were physically active for 60 minutes every day
- 41% use a computer three or more hours a day that is not for school work
- Only 38% ate breakfast every day
- Only 16% ate vegetables, and 22% ate fruit 3 or more times a day
- Only 13% drank three or more glasses of milk last week, while 27% drank soda every day
- Only 32% got 8 hours of sleep on school nights

These data show that American youth are at risk for many behaviors that are harmful to their health, development and well-being. In fact, research\(^2\) indicates that the majority of US youth (53%) experience two or more co-existing risk behaviors, and over a third (36%) three or more risk behaviors. Together, multiple risk habits interact to compound the pain, suffering and sadness youth and their families experience by increasing the likelihood of injury, illness, personal and social problems, and premature death.

Many of these risk behaviors start in early adolescence, increase throughout a young person’s life, and typically peak in young adulthood. In addition, many harmful behaviors are interrelated and share underlying risk and protective factors, such as negative self-images and lack of self-regulation skills.

\(^1\) Centers for Disease Control & Prevention, Youth Risk Behavior Survey, 2014.
Risk behaviors like alcohol, tobacco, marijuana and other drug use are associated with an increased likelihood of experiencing other risk behaviors, including misuse and abuse of current substances, initiation of new substance use, violence, bullying, unprotected sex and suicide. In addition, risk habits are associated with a decreased probability of participating in health-enhancing behaviors, like physical activity and healthy eating.

The good news is that wellness habits like physical activity are linked to an increase in other healthy behaviors as well as a decrease in risk behaviors like substance use initiation and continuation. While these associations may or may not be causative, they indicate critical behavior connections for planning wellness-based prevention and promoting positive youth development.
Chapter 4
Three Solutions to Youth Health Risks

There are three approaches to addressing the epidemic of multiple and co-occurring risk behaviors harming America’s youth. They include dealing with the problem in a: 1) piecemeal fashion, 2) serial fashion, or 3) integrated fashion.

The Piecemeal Approach

The piecemeal strategy for addressing the problem of multiple youth health risks means maintaining the status quo. That is, addressing individual youth risk behaviors as single, independent, and non-concurring problems.

For example, many if not most prevention programs target individual substance use behaviors as though they were unrelated, like underage alcohol consumption, separate from and unassociated with cigarette smoking and marijuana use. It is equally common to find health programs that address individual chronic disease risk habits as separate if not competing health issues, such as physical inactivity, versus drinking too many sugared beverages, or a lack of vegetable and fruit consumption.

These scattered and unrelated efforts spread thin the limited funding available for prevention and health efforts, and result in inequitable and inadequate funding across health risks. The piecemeal approach is the most prevalent, but least cost-effective strategy for addressing multiple risk behaviors among today’s youth.

The Serial Approach

This strategy addresses multiple health risks in serial fashion, one at a time. Perhaps the best illustration of this method is school health education which in the past has covered a number of important youth health risks in a sequential manner, but typically as though they were independent of each other.

The serial approach is better than the piecemeal strategy by targeting more than a single risk behavior or health issue. However, the serial method misses the opportunity to draw connections among risk habits, and deal with the common problem of co-occurring risk behaviors.

The serial approach is slightly more cost-effective than the piecemeal method in that multiple health risks can be addressed in a single setting. However, this approach is usually quite time consuming and therefore not very practical, particularly in busy and multi-purpose settings such as schools and health clinics.
The Integrated Approach

The only approach that directly addresses the problem of multiple and co-occurring risk behaviors among youth is the integrated strategy. This method allows seemingly divergent health risks, such as substance use behaviors, chronic disease risk behaviors and even health-enhancing habits, to be targeted within a single intervention.

Integrated programs provide a more holistic and efficient strategy by simultaneously addressing multiple risk habits in one setting and one program. The integrated approach recognizes the co-existence of, and connections among, multiple risks and purposefully links health behaviors to increase the probability of enhancing program strength and breadth.

Integrated interventions can also be tailored to individual youth health behaviors, increasing participant, parent and provider interest, salience and participation. The integrated approach is the most cost-effective of strategies for addressing the current youth epidemic of multiple risk behaviors.
Chapter 5
Advantages of Wellness with Prevention

The Prevention Plus Wellness Approach permits planning and implementing integrated interventions in brief formats which cue naturally motivating wellness images. These images increase self-regulation habits to set and monitor multiple behaviors resulting in improved health behaviors and positive self-identity among youth and young adults. Advantages of these integrated wellness with prevention programs over typical prevention or health interventions include the following:

- Greater cost-effectiveness and sustainability
- More positive and enjoyable, increasing youth and parent participation
- Personalized to each youth’s specific health habits
- Brief and adaptable to nearly any setting
- Protect youth from multiple common health risks, improving their “whole health”
- Founded on proven, evidence-based theory and practices models
- Implemented in as little as a single lesson
- Published research supports influencing both health risk and wellness habits
- Programs are listed in multiple evidence-based directories
- Target positive wellness habits and related images
- May be used alone or in conjunction with other programs and activities
- More likely to achieve broader and larger outcomes than single risk programs
- Greater impact on improving the nation’s public health
- Increased funding opportunities by targeting multiple health problems
Chapter 6
Theory Supporting the PPW Approach

The Behavior-Image Model (BIM)\(^3\) is the theoretical basis supporting the integration of wellness and prevention within single interventions. BIM is a practical, proven evidence-based framework for planning brief motivational prevention interventions that target wellness behaviors and images. BIM has been used in the development of over a dozen integrated interventions, including two evidence-based programs listed in the National Registry of Evidence Based Programs and Practices (NREPP).

BIM can be used to plan programs, materials, media campaigns, and entire strategies aimed at preventing risk behaviors while increasing health enhancing behaviors among youth and young adults. BIM is a road map for developing integrated resiliency-based interventions emphasizing wellness behavior and positive self-identity content.

BIM consists of two key components:

1) Targeting appealing wellness images to link health risk and health promoting behaviors, and
2) Developing self-regulation skills to set and achieve multiple health behavior goals.

Targeting Motivational Wellness Images of Youth

Wellness-based prevention interventions founded on BIM are designed to trigger naturally motivating appealing images of youth using vivid, image-related words associated with each of the target wellness behaviors. Gain-framed content is used to highlight benefits associated with participating in health enhancing behaviors. Then, loss-framed content is used to illustrate the costs of engaging in risk habits by interfering with wellness behaviors and image achievement.

An example of a gain-framed message promoting greater physical activity is: “Young people who exercise regularly tend to feel energetic, sleep better, and look more active, fit and confident.” In comparison, a related loss-framed message targeting alcohol use and harming physical activity is: “Alcohol use can get in the way of participating in moderate exercise and achieving your fitness goals of being in-shape, looking good, and feeling fit and active.”

The use of images in prevention and health communication has a foundation in both theory and practice. The use of image-related content to influence behavior change is supported by multiple conceptual models, including Social Cognitive Theory\(^4\), the

Prototype/Willingness Model\textsuperscript{5}, and developmental psychology of self-concept\textsuperscript{6}. In addition, the use of appealing images has been a proven and central strategy for effectively influencing buying behavior since the early development of the advertising and marketing industries. Today, positive images are used by multi-billion dollar companies to sell everything from clothing to cars.

Two specific types of images are targeted in BIM. One type is the social image or prototype. The second image type is the future or desired image. Both social/prototype\textsuperscript{7} and future/desired images\textsuperscript{8} are supported by research as influencing youth health behaviors and are therefore effective targets for motivating behavioral change in young people.

**Developing Self-Regulation Action Skills**

BIM is also founded on self-regulation theory\textsuperscript{9}. Wellness-based prevention interventions planned using BIM provide feedback to youth regarding their current health behaviors, and the relations of their health habits to images.

The discrepancy between these behaviors and social and future images are highlighted as possible action goals. Participating youth are provided an opportunity to set and monitor goals to avoid risk habits while increasing wellness promoting habits.

Public commitment to goal setting is used to reduce discrepancy in wellness behaviors and related images, and increase discrepancy in substance use risk behaviors and images. Youth sign a contract, along with implementers, increasing motivation and commitment to improving multiple health habits.


Chapter 7
Effectiveness of Wellness-based Prevention

In this chapter, we present some of the published research findings supporting the effectiveness of wellness-based prevention programs for influencing both health risk and health-enhancing behaviors among young people. Two of these programs are listed in NREPP, as well as in other evidence-based data bases. They include the SPORT Prevention Plus Wellness program for youth, and the InShape Prevention Plus Wellness program for young adults.

SPORT Prevention Plus Wellness Program

SPORT has been evaluated in several research studies funded by the National Institutes of Health (NIH). An overview of these studies, their outcomes and research citations are listed below.

SPORT Study I: Young Adolescents

An initial study\(^\text{10}\) of the first version of SPORT evaluated with 465 middle school students showed that over time, young adolescents given the brief wellness-based prevention lesson significantly:

- reduced initiation of alcohol use,
- reduced alcohol problems,
- improved protective factors like self-control,
- reduced risk factors like perceived peer use of alcohol,
- increased moderate physical activity,
- increased vigorous exercise, three months after intervention, and
- increased parent-youth communication for parents receiving mailed communication materials.

SPORT Study II: Older Adolescents

A second study\(^\text{11}\) of a subsequent version of SPORT tested among 604 high school students showed that compared to youth in a health education control group, the brief wellness-based prevention lesson and flyer significantly:

- reduced quantity of alcohol use,


• reduced frequency of alcohol use,
• reduced binge drinking,
• reduced the length of drinking,
• reduced the stage of initiating drinking,
• reduced frequency of cigarette smoking, and
• increased moderate physical activity three months after intervention.

In addition, one year after baseline, adolescents receiving SPORT who were using drugs prior to intervention, compared to youth in a control group who were using drugs, showed significant:

• reductions in binge drinking,
• reductions in frequency of cigarette smoking,
• reductions in marijuana use,
• reductions in the initiation of cigarette use,
• reductions in initiation of marijuana use,
• increases in vigorous exercise, and
• increases in moderate physical activity.

The effect sizes of behavior outcomes from the brief wellness-based prevention intervention ranged from small to large. Effects were small to medium for youth in the entire sample, and were generally medium to large for the drug using subgroup.

**SPORT Study III: Parent Materials**

A third study\(^{12}\) of the stand-alone parent SPORT print materials program among 684 high school students showed that compared to youth given health flyers, three parent postcards/flyers significantly:

• reduced frequency of alcohol use,
• reduced alcohol-related problems,
• improved adolescent self-control and parental monitoring, and among drug using youth
• reduced frequency of alcohol use,
• reduced frequency of marijuana use,
• reduced initiation of alcohol use, and
• reduced initiation of marijuana use four months after intervention.

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SPORT Study IV: Cross-Cultural Evaluation

A fourth study\(^{13}\) evaluating SPORT translated into Turkish language and implemented among 215 high school students in Istanbul, Turkey showed that compared to youth in a control group, the brief wellness-based prevention lesson significantly:

- increased vigorous and moderate physical activity,
- increased vegetable and fruit consumption,
- increased the duration of sleep,
- improved exercise self-efficacy,
- improved dietary self-efficacy,
- reduced the number of days in an unhealthy mental condition, and
- reduced the number of days youth were unable to do school activities.

Together, research published in refereed scientific journals show that the SPORT wellness-based prevention intervention has a positive effect on both substance use and wellness behaviors among young and older adolescents in a single-lesson in-person format, and substance use behaviors among older adolescents in a print format. The brief in-person lesson was found to both prevent and reduce substance use behaviors and problems, with some behavior outcomes lasting up to year.

The study evaluating SPORT in Turkey highlights the viability and strength of the wellness-based prevention approach for impacting multiple health behaviors among youth from diverse cultures. Additional recent research\(^{14}\) has supported findings that brief wellness-based prevention interventions can increase health-enhancing habits like fruit and vegetable consumption and stress management, while reducing substance use among American adolescents.

InShape Prevention Plus Wellness Program

Like SPORT, the InShape Prevention Plus Wellness program was evaluated in a number of research studies funded by NIH. The results of two of these studies published in scientific journals are presented below.

\(^{13}\) Lhan, N. Thesis research conducted as part of a Master’s degree program in Nursing. Istanbul, Turkey, 2013.

InShape Study I

An initial study\(^{15}\) of an early version of InShape was evaluated with over 300 college students and showed that, compared to a control group, young adults given the brief wellness-based lesson significantly:

- reduced frequency and heavy use of alcohol,
- reduced driving after drinking,
- reduced initiation, quantity, and heavy use of marijuana,
- increased hours of sleep,
- increased moderate exercise,
- increased three types of healthy eating, and
- improved social and spiritual health-related quality of life.

In addition, an analysis of the outcome data one year after baseline\(^{16}\) found that, compared to young adults in a control, those receiving InShape continued to show significant:

- reductions in driving after drinking,
- increases in moderate exercise,
- improvements in social health-related quality of life,
- improvements in spiritual health-related quality of life, and
- improvements in recent activity.

InShape Study II

A subsequent study\(^{17}\) of InShape in a computer-based format with 200 college-aged young adults found that, compared to a computer control, students given the InShape wellness-based prevention lesson had significantly:

- Less intentions to drink alcohol,
- Less intentions to smoke cigarettes,
- Less intentions to use marijuana,

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\(^{16}\) Werch, C.E., Moore, M.J., Bian, et al. Are Effects from a Brief Multiple Behavior Intervention for College Students Sustained Over Time? Preventive Medicine, 2010.

• More positive alcohol use social norms,
• More positive cigarette smoking social norms, and
• More positive marijuana use social norms.

These published research findings indicate that InShape is effective in preventing and reducing substance use and related risk factors, and increasing health promoting behaviors among young adults. It was also found to enhance various measures of health-related quality of life of college students. Some of the positive outcomes from the brief InShape lesson lasted for up to a year. InShape is an effective wellness-based prevention intervention in a single in-person lesson, and has potential as a self-administered computer-based prevention intervention.
Chapter 8
Implementing Wellness-based Prevention

Wellness-based prevention can be implemented in a number of formats, including print materials, electronic media, and programs implemented by professionals, peers and trained volunteers. The latter approach has thus far received the greatest attention, particularly as brief interventions.

In brief program format, wellness-based prevention has been implemented in four easy steps. These steps are founded upon the evidence-based SFGF brief intervention practices model, including Screening, Feedback, Goal-setting and Follow-up. The four steps for implementing brief wellness-based prevention programs are described in more detail below.

Step #1: Screening

The first step in implementing a wellness-based prevention program is to screen participating youth for their current health behaviors. This is accomplished by implementing a screening survey which takes just a few minutes for youth to complete. Screening surveys can be administered to youth individually or in a group.

Screening has two purposes. First, to trigger desired health behaviors and related images. Second, to provide data for tailoring feedback on both health enhancing and health risk behaviors, and later for setting specific behavior improvement goals.

Step #2: Feedback

During the second step, youth are provided feedback about their current health habits based on their responses to screening survey items. Using a scripted protocol, implementers provide youth with positive feedback for engaging in each of the targeted health enhancing behaviors, and avoiding each of the risk behaviors. Meanwhile, feedback for participating in unhealthy behaviors is presented in a neutral and encouraging manner to prevent youth from disengaging or discounting the communication.

Using the script, implementers then trigger wellness images of youth using vivid image terms (e.g., active, fit, athletic, successful) to highlight the benefits of engaging in each health enhancing behavior. This is followed by communicating how individual risk behaviors interfere with each healthy habit and results in opposing behavior and image effects.

PowerPoint slides are provided to highlight positive image terms and illustrate relations between health risk and health promoting habits. While less tailored, positive image messages can be presented to a group of youth instead of as a one-on-one coaching lesson.
Step #3: Goal-setting

The third step involves implementing a multiple behavior goal plan and contract with participating youth. Youth are provided an opportunity to set concrete goals for any of the target health enhancing and risk behaviors to achieve desired positive images.

An opportunity is also provided for youth to make a public commitment to work toward achieving the goals by signing the contract along with the implementer. This increases motivation and commitment to attain agreed upon goals. The need to monitor and revise goals is also communicated to participating youth.

Step #4: Follow-up

The final step in implementing brief wellness-based prevention programs is providing follow-up contacts, programs, or materials to maintain initial program messages. Some Prevention Plus Wellness programs include participant booklets, parent flyers, or youth and parent web-based health resources as follow-up tools. Other programs offer multiple lessons reinforcing and building upon each other.

An easy approach to reinforce wellness-based images and positive behaviors is to have youth revise their original goal plan by completing one or more follow-up plans. In addition, providing an annual booster involving brief screening, feedback, and goal-setting is recommended to continue to inoculate and protect youth against common risk behaviors which increase from early adolescence through young adulthood.
The development of the Prevention Plus Wellness Approach for increasing positive behaviors and images while preventing and reducing risk behaviors among young people has been nearly 15 years in the making. This ongoing, cyclical process has involved theory and program development, practical testing and research evaluation, theory and program revision, and retesting and continued evaluation.

During the last five years, practical testing of the PPW Approach and programs has been conducted in real world settings and with youth populations across the nation. In total, the accumulation of data and experiences over the last 15 years indicates that the PPW Approach is a viable, practical and cost-effective method for planning, implementing and evaluating strategies that integrate wellness behavior and image promotion with risk behavior prevention among young people.

The Prevention Plus Wellness Approach has untapped potential for addressing a currently unknown number of risk behaviors and health-enhancing habits, and improving the physical, mental, emotional and spiritual well-being of youth populations. These multiple behaviors can be efficiently addressed concurrently within in a range of different formats, including brief motivational programs, media campaigns, electronic interventions, print materials, and community-wide strategies.

We recommend the Prevention Plus Wellness Approach continue to be applied to capitalize on its potential for developing new and effective:

- Programs and strategies targeting the prevention of different risk behaviors such as other substance use and addictions, HIV/STDs, youth pregnancy, violence, bullying and suicide.
- Programs and strategies that target other health-enhancing and positive development behaviors and images, like mental and intellectual competence, career and job abilities, social and relationship skills, physical competence and talents, physical appearance, sense of humor, and spiritual and moral competence.
- Implementation strategies other than brief motivational interventions, including media campaigns, electronic interventions, print materials, and community, school and campus-wide programs.
- Evidence-based programs, strategies and policies to cost-effectively influence multiple risks among new youth, young adult and adult populations in the US and abroad.
- Techniques for customizing existing PPW evidence-based programs to meet the needs of individual settings, organizations and youth populations.
Chapter 10
Wellness-based Prevention Resources

Prevention Plus Wellness provides a number of resources for prevention, health and youth services providers and parents interested in using, adapting or creating their own wellness-based prevention program or strategy. Below are links to various resources found on our website.

Presentations:

Program Samples:
http://preventionpluswellness.com/resources/program-samples/

Program Brochures:
http://preventionpluswellness.com/drug-free-communities-graph/

Training Workshops:
http://preventionpluswellness.com/programs/training/

Grant Writing Services:
http://preventionpluswellness.com/programs/consulting-services/

Logic Model:

Grant Funding:
http://preventionpluswellness.com/resources/grant-writing-funding-resources/

Sample Grant Proposal:
http://preventionpluswellness.com/sample-grant-proposal/
Chapter 11
For More Information

For more information about the Prevention Plus Wellness Approach, and our programs, training and grant writing, please contact us:

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Or visit us on our Home page:

http://preventionpluswellness.com/

Also, please send us a brief note telling us what you liked about this e-book, or provide us with suggestions for improving it in the future. Thank you!
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