OurFutures: A suite of universal evidence-based eHealth programs to prevent substance use and mental ill-health among adolescents

Dr Lauren GardnerThe Matilda Centre
The University of Sydney









Disclosure statement

Nicola Newton and Maree Teesson are the directors of Climate Schools Pty Ltd. An Australian company set up in 2015 to distribute the online Climate Schools programs (now known as OurFutures)







Universal, evidence-based prevention education for secondary school students; empowering them to make positive choices to improve their health and wellbeing.

Five interactive modules



Alcohol (~13-14 yrs)



Alcohol & Cannabis (~13-15 yrs)



Cannabis & Psychostimulants (~14-16 yrs)



MDMA & Emerging Drugs (~15-17 yrs)

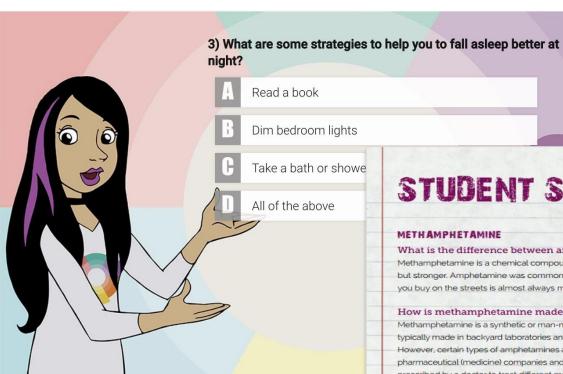


Mental Health (~14-16 yrs)

Interactive cartoon storylines



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Interactive quizzes

Lesson summaries

STUDENT SUMMARY

What is the difference between amphetamine and methamphetamine?

Methamphetamine is a chemical compound which is very closely related to amphetamine,

but stronger. Amphetamine was common in Australia in the early 1990s, but nowayou buy on the streets is almost always methamphetamine.

How is methamphetamine made?

Methamphetamine is a synthetic or man-made drug which is typically made in backyard laboratories and sold illegally. However, certain types of amphetamines are made by pharmaceutical (medicine) companies and can legally be prescribed by a doctor to treat different medical conditions.

These over-the-counter amphetamines will be briefly covered at the end of this section. The remainder of this section will address those forms of the drug which are illegal.

Methamphetamine and the law

Unless amphetamines are prescribed for a person by a medical practitioner, possiusing, making or selling amphetamine/methamphetamine is against the law. Methamphetamine and the law will also be covered in greater detail in lesson 6.

What are some of the different names for methamphetamine?

There are many different names used for methamphetamine, including

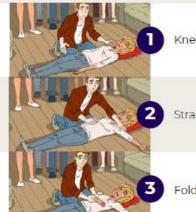


Individual or group activities

How to put someone in the recovery position

If a person is unconscious, or non-responsive but breathing, they should be placed in the recovery position while waiting for help to arrive. If they are left lying on their back they could suffocate on their vomit or their tongue could block their airway. Putting someone in the recovery position will help to keep the airways open.

To place someone in the recovery position:



Kneel beside the person

Straighten their arms and legs.

Fold the arm closest to you over their chest.

Get the leg closest to you and bend the knee.

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Evidence base behind OurFutures

8 RCTs in Australia (6 complete, 2 ongoing)

- 240 schools and > 21,000 students have participated across NSW, WA, VIC, ACT, QLD
- 47 peer-reviewed papers

1 pilot trial in the UK

- 222 students and 11 teachers in London
- Found to be feasible and acceptable in the UK.

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RESEARCH REPORT

doi:10.1111/j.1360-0443.2009.02853.x

Internet-based prevention for alcohol and cannabis use: final results of the Climate Schools course

Nicola C. Newton¹, Maree Teesson¹, Laura E. Vogl¹ & Gavin Andrews²

University of New South Wales, National Drug and Alcohol Research Centre, Sydney, NSW, Australia! and University of New South Wales, Clinical Research Unit for Anxiety and Depression, St Vincent's Hospital, Sydney, NSW, Australia!

Research



A cross-validation trial of an Internetbased prevention program for alcohol and cannabis: Preliminary results from a cluster randomised controlled trial Australian & New Zealand Journal of Psychiatry 2016, Vol. 50(1) 64–73 DOI: 10.1177/0004867415577435

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Katrina E Champion, Nicola C Newton, Lexine Stapinski, Tim Slade, Emma L Barrett and Maree Teesson

Vogl et al. Substance Abuse Treatment, Prevention, and Policy 2014, 9:24 http://www.substanceabusepolicy.com/content/9/1/24



RESEARCH

Open Access

A universal harm-minimisation approach to preventing psychostimulant and cannabis use in adolescents: a cluster randomised controlled trial

Laura Elise Voql¹, Nicola Clare Newton^{2*}, Katrina Elizabeth Champion² and Maree Teesson²

Abstract

Background: Psychostimulants and cannabis are two of the three most commonly used illicit drugs by young Australians. As such, it is important to deliver prevention for these substances to prevent their misuse and to reduce associated harms. The present study aims to evaluate the feasibility and effectiveness of the universal computer-based Climate Schools: Psychostimulant and Cannabis Module.

Methods: A cluster randomised controlled trial was conducted with 1734 Year 10 students (mean age = 15.44 years; SD = 0.41) from 21 secondary schools in Australia. Schools were randomised to receive either the six lesson computer-based Climate Schools program or their usual health classes, including drug education, over the year.

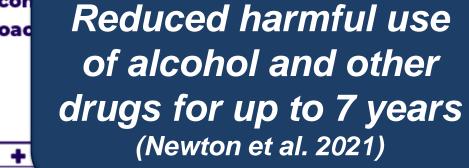
Results: The Climate Schools program was shown to increase knowledge of cannabis and psychostimulants and decrease pro-drug attitudes. In the short-term the program was effective in subduing the uptake and plateauing the frequency of ecstasy use, however there were no changes in meth/amphetamine use. In addition, females who received the program used cannabis significantly less frequently than students who received drug education as usual. Finally, the Climate Schools program was related to decreasing students' intentions to use meth/amphetamine and ecstasy in the future, however these effects did not last over time.

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Results



Increasing knowledge about alcoh cannabis, MDMA and new psychoac substances



Reducing psychological distress Reducing harms related to the use of alcohol and ecstasy Reducing intentions to use MDMA, psychostimulants, new psychoactive substances and synthetic cannabis

tannabis

sy use





Improving attitudes towards alcohol

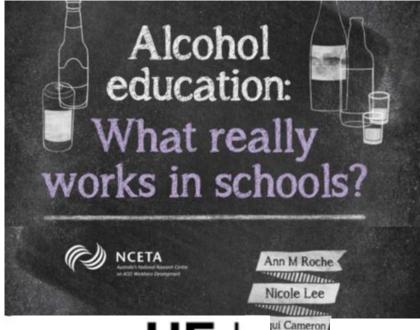
Results

Students and teachers have rated the programs positively:

- 93% of students found the cartoon stories an enjoyable and interesting way to learn
- 93% of students thought the information in the program was easy to understand, to learn and to remember
- 95% of teachers rated the **educational quality** of the program highly
- 88% of teachers rated the program as better than other substance use and mental health programs



Reviews



Evidence Summary:
Public health interventions in response to substance misuse (drugs) to support parents, their children and young

HEJ

Original Article

What works in school-based alcohol education: A systematic review

Health Education Journal
2016, Vol. 75(7) 780–798
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sagepub.co.uki/journalsPermissions.nav
DOt: 10.1177/0017894915612227
hej.sagepub.com

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people up to 25 years

Melissa Tremblay, PhD,^a Lola Baydala, MD,^b Maria Khan, MEd,^a Cheryl Currie, PhD,^c Kirstyn Morley, MEd,^a Caitlin Burkholder, MSc.^b Riley Davidson, MD.^b Amanda Stillar, PhD^a

CONTEXT: An updated synthesis of research on substance abuse prevention programs can promote enhanced uptake of programs with proven effectiveness, particularly when paired with information relevant to practitioners and policy makers.

OBJECTIVE: To assess the strength of the scientific evidence for psychoactive substance abuse prevention programs for school-aged children and youth.

DATA SOURCES: A systematic review was conducted of studies published up until March 31, 2020.

STUDY SELECTION: Articles on substance abuse prevention programs for school-aged children and youth were independently screened and included if they met eligibility criteria: (1) the

abstract

External recommendations and endorsement









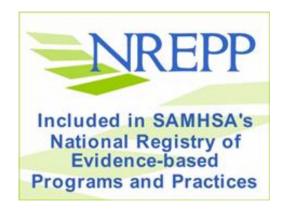








Translation into policy



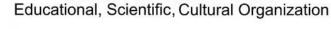
















Queensland Mental Health Commission

Improving the mental health and wellbeing of Queenslanders

https://ourfutures.education

• Reached >1,300 schools/other organisations (>36,000 young people)

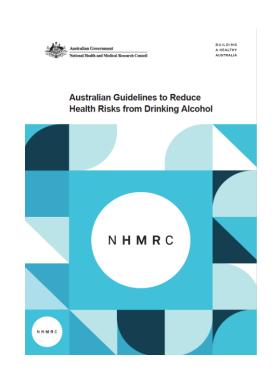


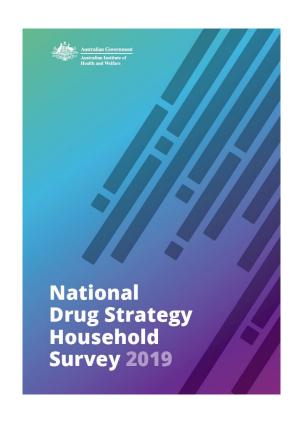


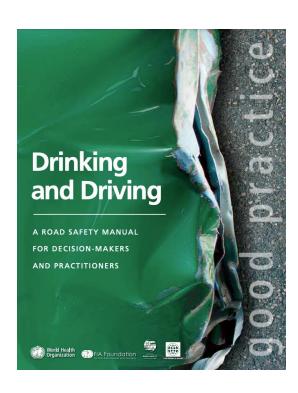




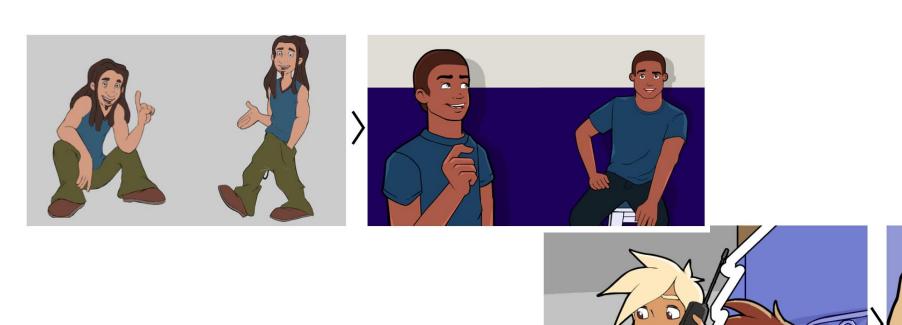
OurFutures updates – evidence and guidelines

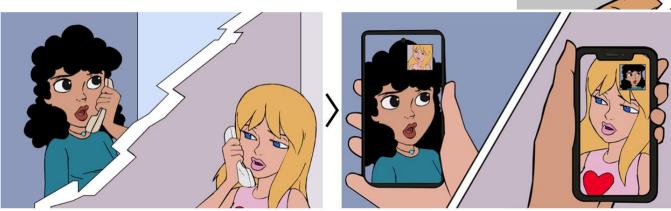






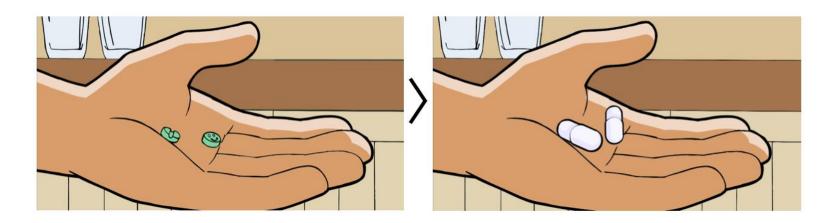
OurFutures updates - cartoon graphics





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OurFutures updates - scripts

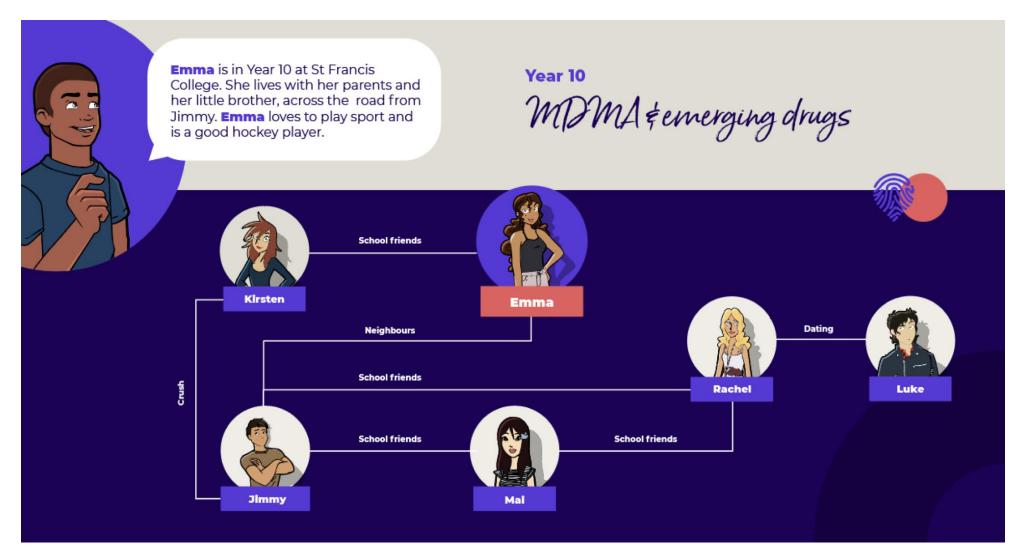




By caps, do you mean MDMA?

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OurFutures updates - backstories



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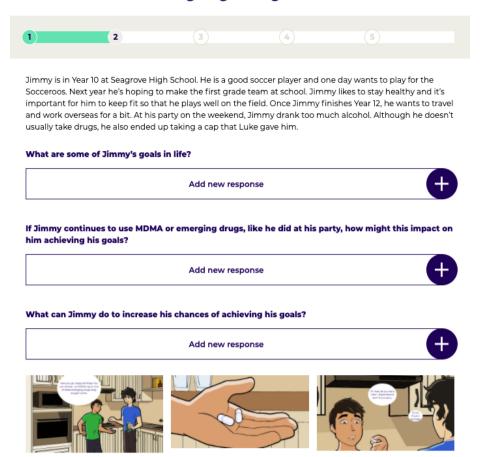
OurFutures updates – voiceovers

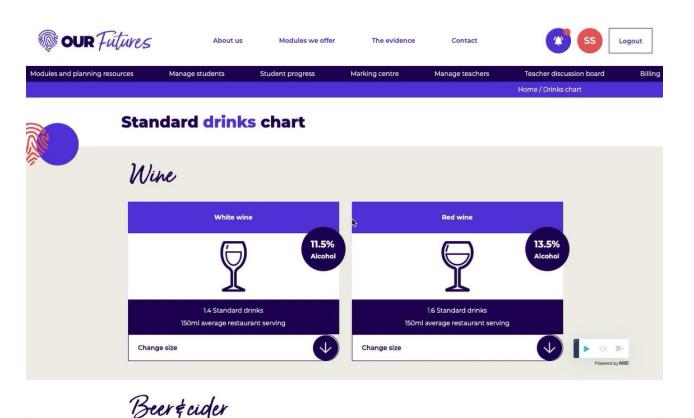


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OurFutures updates — interactive activities

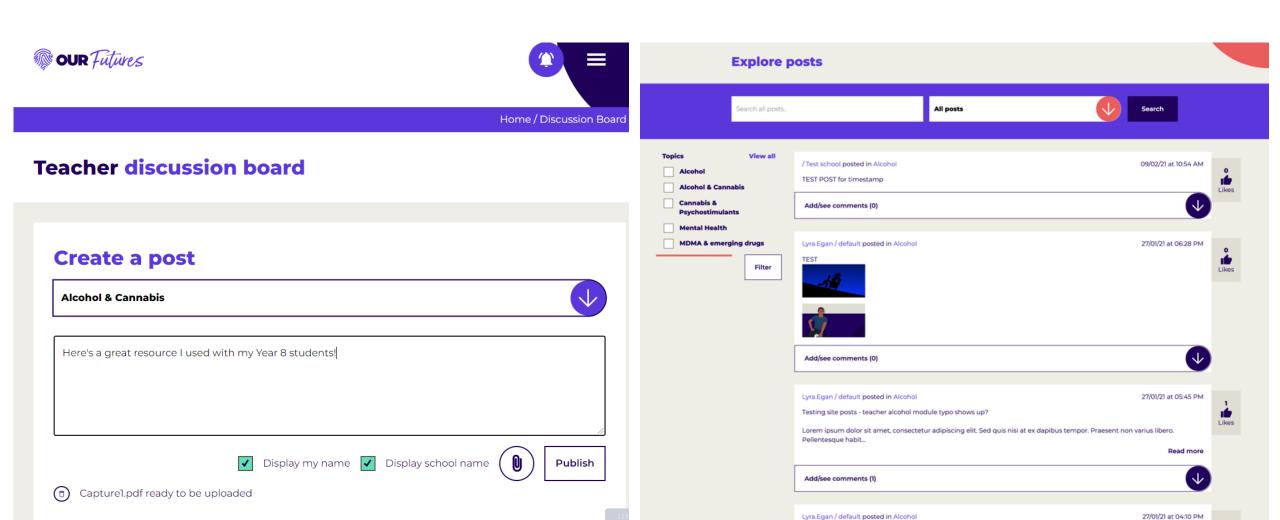
MDMA & emerging drugs





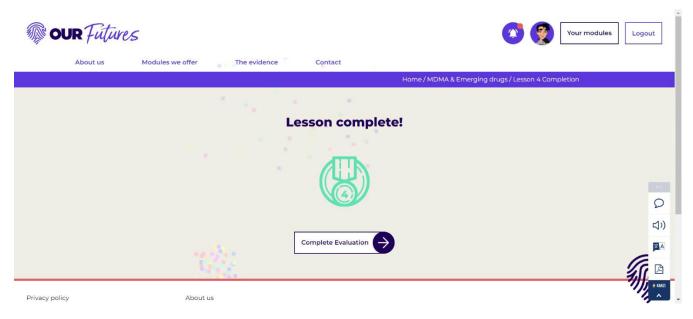


OurFutures updates - teacher discussion board

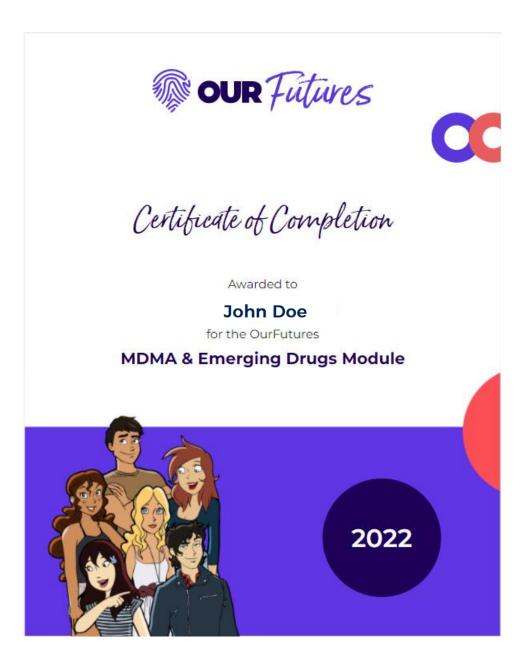


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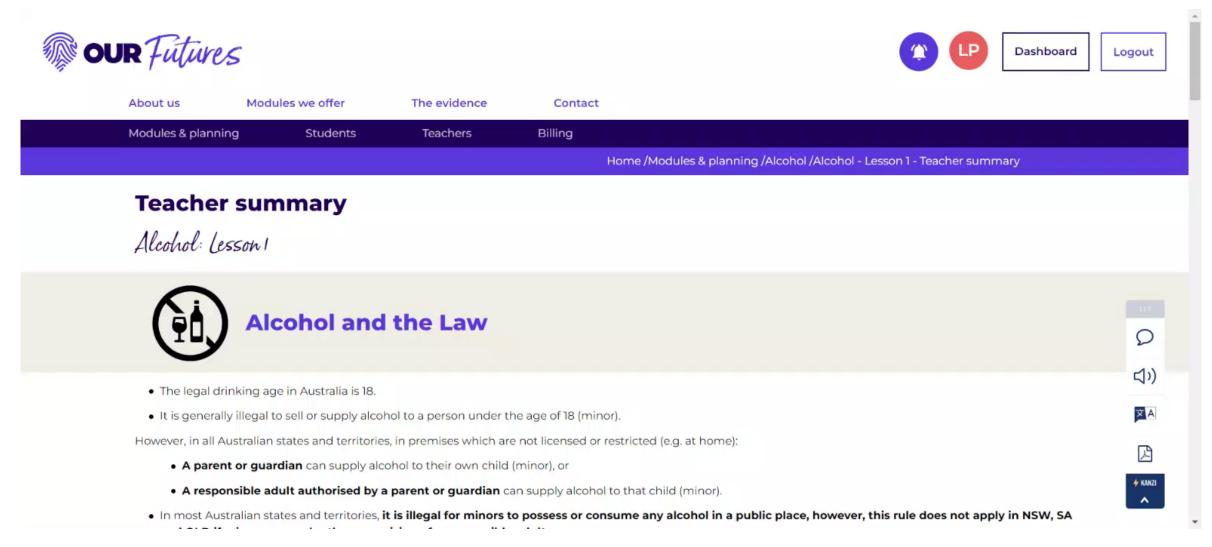
OurFutures updates – student rewards







OurFutures updates – multilingual translation



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Where to next?

New trials







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Future plans Development Rural/ Remote communities **Evaluation Vaping International** Adaptations **Implementation**



Thank you

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