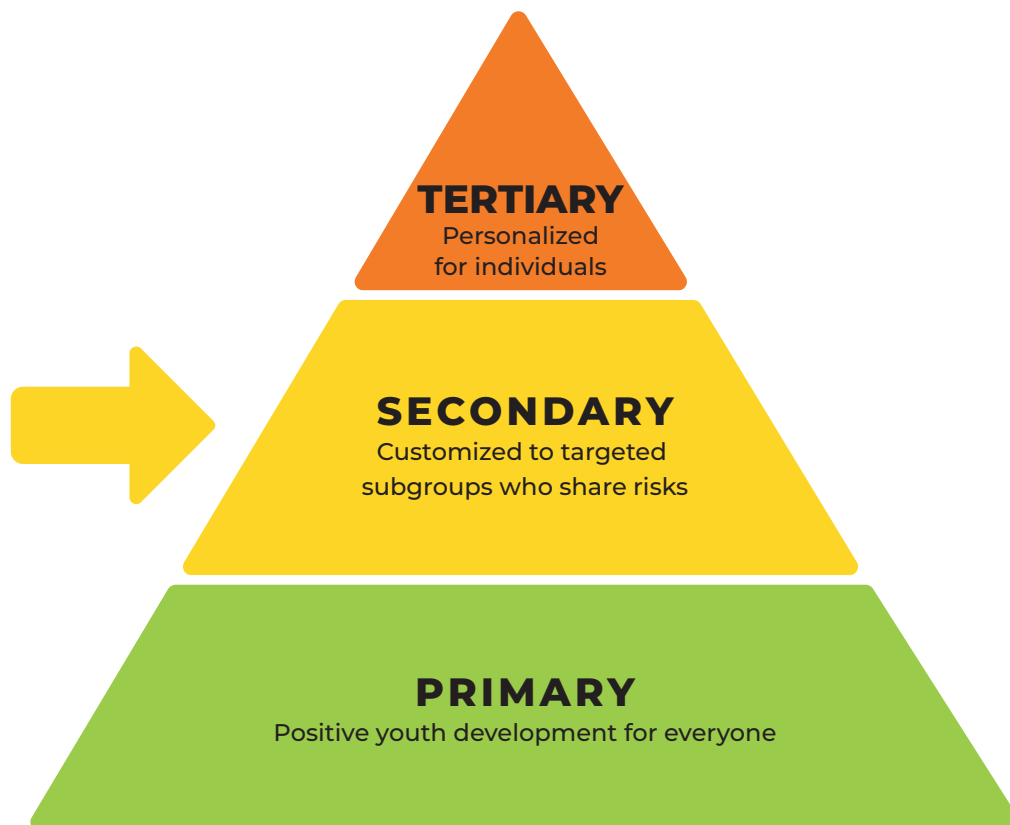




Targeted Prevention: Risk Reduction

Three tiered prevention

The fields of education, health and public safety all increasingly rely on a model of three-tiered intervention: primary for universal preventive intervention; secondary for targeted risk reduction; and tertiary for personalized, adaptive intervention after school failure, injury, or anti-social behavior have begun to occur. Ripple Effects' software-based training program is effective for all three levels of intervention. This guide focuses particularly on secondary prevention: risk factors that affect groups of children, such as injury, health-related problems, and school failure.



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Where to start?

So many prevention issues

So many proven strategies

So many kinds of learners

So few hours

Interlinking variables

Ripple Effects synthesizes research from many fields

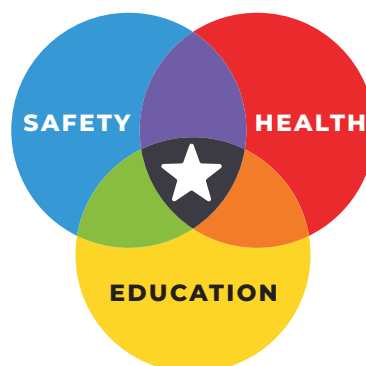
School failure, behavior problems, substance abuse, and mental health issues including depression and Post-traumatic Stress Response (PTSR), have been shown to be interdependent variables that can be linked to each other, as well as to common external risk factors often related to trauma - from poverty, to family discipline patterns, to mental health problems, to racism, to community violence. Teachers report that 25% to as much as 80% of instruction time is spent dealing with problem behavior.

Cause and effect

In some cases, substance abuse leads to multiple problem behaviors, and problem behavior leads to school failure. In others, school failure leads to substance abuse, and substance abuse leads to problem behavior. In still others, anti-social behavior leads to school failure, which in turn leads to substance abuse. Individual mental health problems, especially Post Traumatic Stress and depression, may trigger any, or all, of the three responses. Regardless of which is the first presenting problem, they commonly are enmeshed and related to deeper personal, family and community issues, which also need to be somehow addressed.

Proven effective prevention strategies – but one size does not fit all

The field of prevention has developed at the intersection of public health, public safety, and public education. A range of school-based programs have been developed to separately affect anti-social behavior, school failure, mental health issues and substance abuse. Proven effective strategies include affective, cognitive-behavioral, social skill and attention training, as well as counseling. However, there is not one strategy that works for every child, all the time. A range of evidence-based strategies work in some situations, with some students. The key to successful prevention is to make the closest possible match between an individual student's needs and the prevention strategies offered. Ripple Effects' database structure and library of media- rich content bring a whole spectrum of proven effective strategies to each student. Ripple Effects programs enable a more personalized approach, without adding to the already heavy burden of teachers.



A comprehensive approach

Primary: Universal training to build strengths

Primary prevention is geared toward promoting success and preventing a whole population from developing a disorder. In health, it's the good diet and exercise approach. In school, it's the basic reading curriculum. For behavior, it's universal promotion of abilities that increase the likelihood of school and life success: character education, asset building, positive youth development, social-emotional competence, etc. Instructions for using Ripple Effects for primary prevention are included in a separate manual, the *Universal Promotion Guide* (found in your dashboard).

Secondary: Targeted risk reduction

Secondary prevention is for subgroups of people who share one or more risk factors for injury, illness or school failure. It's the extra support needed for success. For social behavior, it often takes the form of prevention curricula, designed to head off a problem before it occurs; for instance, school violence, substance abuse, teen pregnancy or bully prevention.

Tertiary: Individualized intervention to prevent re-occurrence

Tertiary prevention is intervention after the fact. It aims to reduce the chance that injury, illness or school failure will continue or reoccur. In health terms, this is the prescriptive approach. In reading it's remedial tutoring. For behavior, it's individualized counseling and skill training. In each case, the key to success is individualizing – getting the right match between the student's need and the intervention offered (See *Individual Treatment Plans Manual* in your dashboard).

Assessment a key factor at every level

At all three levels, continual assessment and progress monitoring are an important component of success. Ripple Effects *Planning & Assessment Tools* and *Data Viewer* are easy to use tools for planning, assessment, and monitoring at both group and individual levels.

Strengths-based risk reduction

Multiple groups – overlapping risk factors

One challenge with school-based, secondary prevention is that multiple groups are represented, with sometimes overlapping risk factors. Since it's not possible to address every issue that might be a problem for every student, it makes sense to focus on reducing the risk by increasing the protective factors that affect multiple problems. Due to the developmental variance among youth who might be the same age/grade, or share some of the same risks, there is no set grade-by-grade sequence. From the lists, use the “core curriculum” to identify skills specific to the particular theme, and then select tutorials that match to the particular risk and protective factors specific to the youth in your setting.

Three lists for each scope and sequence

The curriculum for each thematic area is organized into three lists that contain skill-building tutorials. The first list, “Basic info,” includes tutorials that provide skill-building around the theme’s core content. The second list, “Protective skills” contains topics considered protective in the thematic area and across multiple domains. They are drawn from the core social-emotional competencies that comprise primary prevention (universal promotion) programs. Lack of specific skills are risk factors for specific disorders/problem behaviors, such as lack of empathy being tied to bullying or bias activity. Learning these skills does more than protect against a single problem; they are linked to other positive outcomes. For instance, the ability to empathize with others is also linked to connectedness and test scores. Including these topics in your secondary prevention plan, helps to build overall strengths. The third list of tutorials, “Context,” include tutorials that maybe the “reasons” behind or related to the theme; symptoms of the related theme; or topics closely related to the theme. These topics are often considered personal or sensitive in nature. When these topics are common risk factors for your group, include them in your assignment. However, because of their personal nature, it may be more appropriate to not assign them, but let youth know that they are available and encourage them to choose ones that are concerning to them.

Often youth, like adults, are more likely to seek help to alleviate some point of personal pain, than to invest in personal growth (Basic info or Protective skills). For this reason, building time into your implementation plan or prevention curricula for youth to problem solve and skill-build around what is most concerning to them is key. To maximize user choice in how to handle sensitive and potentially controversial areas, sites can block any topic from the program. To customize the list for your site, go to “Customize topics” in your site’s Admin Dashboard.

How it works: simplest vs. more structured

Single session intervention

The simplest and also most personalized way to use Ripple Effects as a prevention curriculum is to simply assign the topic/lesson that corresponds to your major concern (like marijuana use, bullying, or depression). Make sure that the learner completes the interactive parts of the assigned topic (“Got it,” “Brain” “Profiles”). To track, have students show you their Scorecard or check the Ripple Effects *Data Viewer* in your dashboard. Then encourage students to choose one of the “Related topics” from the lesson’s sidebar or hyperlinks in the lesson’s “How to.” This allows learners the opportunity to self-direct their skill-building and problem solving around the issue of concern.

Multi-session prevention plans

If you prefer to have all learners follow the same scope and sequence, you can choose topics from the lists suggested in the following pages to fit within your constraints. Each session should allow approximately 15 minutes per assigned topic, with extra time for personal exploration. Sessions can consist of various combinations of independent exploration and directed discussion.

One group model is to introduce a topic beginning with the “What If,” then have students complete the topic independently, and then follow it up as a group, using the “Apply It” activities for role plays or discussion.

Another model is to assign a scope and sequence for all to complete, but have them do it privately, with or without discussion after completion. In your planning include time for students to have personal exploration. Effectiveness research on Ripple Effects shows that, at least with teens, learners who use the program with adult monitoring, but not any adult mediation (teaching) of content, have better social and academic outcomes than those who have 100% adult mediation of the program.

For guidelines on developing targeted prevention plans, refer to the Implementer’s Guides at rippleeffects.com/teachers/.

Successful facilitation: do's and don'ts

Ripple Effects is used across settings with both groups and individuals. It is primarily student-directed, but can also be educator-facilitated, or a combination of the two. To learn more about best practices of delivery, see the Implementer's Guides to the programs at rippleeffects.com/teachers/

- **Do not over-direct – every way is a right way**

There is no wrong way for a student to complete a particular topic.

- **Set expectations and monitor for completion**

All students need to complete the interactive “Got It,” “Brain” (assisted journal writing) and “Profile” elements. (Not all topics have a “Profile.”) This interactivity is key to program success. Monitor completion of the assigned topics by having students show you their “Scorecards,” or by using the *Ripple Effects Data Viewer*.

- **Respect student privacy**

Again and again we have seen that students are more open to the program when they can explore it privately. Younger children will need more guidance than older children, but even young children often prefer some privacy in dealing with sensitive issues.

- **Remember: Be the guide on the side, not the sage on the stage**

It may be a new role for you to not be the content expert. Enjoy it. Spend the extra time investing in your relationships with students and you'll both benefit from it.

Child Abuse

Child abuse – physical and sexual – is a serious problem that crosses lines of race, religion, ethnicity, gender and income. Among children, the combined rate of abuse is higher than for serious car accidents, being in a fire, or drowning. Overall rates of sexual abuse appear to have decreased over the last decade, but (because they are taken from CPS files) may not take into account abuse by people outside the family, or child trafficking victims. They definitely don't take into account the emerging phenomenon of “compliant victimization,” that is, the unforced participation of children in sexual activity, as a result of their intensive exposure to imagery, language and music that presents children's sexual acting out as a positive cultural norm.

Why address child abuse at school?

Children who are abused at home are disproportionately represented as aggressors in anti-social behavior at school. They often bully others and transfer their anger onto teachers and other adults. They are also more likely to withdraw, drop out, become involved in substance use/misuse, and be victimized again in peer relationships. Perhaps most importantly, school-based prevention appears to be partly working. Decreased rates of abuse since the 1980s, when these programs became popular, are testimony to that.

Effective prevention programs provide children with basic safety information about people. They provide older children with appropriate training to avoid being either victims or victimizers, promoting self-efficacy, decision-making and connection to community.

Some people may decide some of the topics in this subject area are inappropriate for their site. Educators can either not assign the specific topic or use the customization feature to block topics within their site's program.

Handling disclosure

After exposure to abuse prevention programming, affected children may disclose abuse. Stay calm. Assure the student you will work to keep them safe. Remember, you are a mandated reporter; don't promise to keep it secret. Do reassure students that it is not their fault and that nothing they tell you will go beyond the chain of command needed to keep them safe.

Reminder: *Due to the sensitive nature of this issue, some implementers, in some situations, will want to not assign the specific topic.*

Goals of intervention - learners will:

- Distinguish between legal discipline styles and illegal abuse
- Recognize, resist when it is safe, and report
- Understand that it is never their fault and never too late to tell
- Manage feelings of anger or shame in constructive ways
- Avoid the use of alcohol or drugs as a response to abuse
- Develop core social-emotional competencies that are tied to resilience: assertiveness, problem solving, and connection to community

Ripple Effects for Teens

	Basic Info	Protective skills	Context
Core topics	Physical abuse Emotional abuse Sexually abused Neglected Touch Secrets	Asserting yourself Connecting with others Getting help Managing feelings Shame Managing anger	Risk and protection Vulnerable Aggression Substance abuse Depression Victimized
Supplemental topics	Child abuse Discipline Incest Online threats Dating abuse Trafficked Legal rights	Assertive reasons Refusal skills Decisions Problem-solving Courage Feelings-handling Managing anxiety Managing fear Guilt	Abandoned Alone Aches and pains Bullied Bullying Dating abuse Isolated

Ripple Effects for Kids

	Basic Info	Protective skills	Context
Core topics	Personal safety Beaten Touch Secrets	Assertiveness Connecting with others Help - getting it Understanding feelings Managing feelings	
Supplemental topics	Discipline	Assertive message Nervous Saying no Angry Online safety Afraid Decision making Lonely Problem – solving Sad Anxiety Shame	Drugs Bullied Bully - you do it Substance abuse - family

Bias Activity

Effective preventive intervention for bias activity necessarily includes policy formulation and staff training, as well as direct intervention with students. Learners' bias activity usually consists of taunting, hitting, socially excluding or otherwise harassing students, based on those students' race, ethnicity, religion, gender, sexual orientation, gender identity or physical or mental disabilities. Rarely does this activity escalate to meet the standard of proof for hate crimes, but it stresses and can fracture the whole school community. Often perpetrators hope their acts of violence will earn respect from their friends. Being unsure about oneself and wanting desperately to belong to a powerful group can lead some young people to commit hate crimes. But young people's strong desire for power and respect can also become a powerful motivator for learning positive skills to connect with community.

Promote respect, build community

The best way to prevent bias activity is to have high expectations for all students, build a strong sense of shared community and promote respect for all of the similarities and differences among people. Diversity appreciation training for students and teachers alike can aid in this effort, but no amount of individual training can compensate for an unsafe, unfair or hostile environment.

Have a plan for restorative justice

If teens are surrounded by a community filled with prejudice toward particular groups, and if they have no personal experience of people different from themselves, they may be unable to empathize with potential victims. They may see them as objects, or stereotypes, not human beings. Regardless of the reason for the action, once a bias offense has been committed, restorative justice requires both making things right and reconnecting the offender with the community. See the *Individual Behavior Treatment Plans* manual (in your dashboard) for a scope and sequence for intervention after the fact.

Goals of intervention - learners will:

- Examine and understand their own identity, life experiences and actions
- Understand their shared identity with people they might consider "different"
- Value diversity as a positive factor in their school community
- Avoid the use of bias slurs
- Learn positive skills to connect with others

Ripple Effects for Teens

	Basic info	Protective skills	Context
Core topics	Appreciating diversity Bias Stereotypes Identity slurs Discrimination Online hate	Knowing yourself Perspective taking Respect - showing Get respect Confronting behavior Confronting injustice	Risk and protection Feel powerless Disrespected Hate school Unpopular Alcohol
Supplemental topics	Bias activity Bias activity - target Online threats Online harassment Gay bashing Legal rights Patriotism Religious attack Sexually harassed Racial conflict	Background - family Background - community Cultural differences Racial diversity Diversity- physical Diversity - religious Sexual orientation Transgender Diversity - gender Connecting with others Digital citizen Empathy Apologies Resolving conflict Beliefs Legal rights	Drugs Bullied Bullying Hate Poor Undocumented Transgender Immigrant Multi-racial Isolated Loyalty Clique Social media Vulnerable Teasing

Ripple Effects for Kids

	Basic info	Protective skills	Context
Core topics	Bias Stereotypes Discrimination	Knowing yourself Point of view Diversity - appreciating Respect Assertiveness	Hate school Not popular Alcohol
Supplemental topics		Strengths Background Cultural differences Physical differences Beliefs Connecting with others	Digital citizen Online safety Empathy Apologies Resolving conflict
			Drugs Bullied Bully - you do it Poor Immigrant Social media Teasing

Bullying

Bullying can be a “gateway” and pervasive problem behavior. Learners who bully others during their school years, especially middle school, are much more likely than other learners to get in trouble with the law as adults. Youth who bully often come from homes where physical punishment is the norm. This punishment may have crossed over into actual abuse.

Contrary to what used to be believed, research has shown youth who bully demonstrate little anxiety and report strong self-esteem. They often lack empathy for their victims, or blame them for “asking for it.” A substantial number of bystanders to bullying actually agree with this analysis.

Because bullying is primarily about power dynamics, the most successful bully prevention programs are school-wide, addressing these power dynamics from all three directions: bully, target and bystander/up-stander. Individual interventions for youth who bully and those who are targeted by the bully can also be effective.

Goals of intervention - learners will:

- Understand the part they play in the bullying dynamic
- Internalize norms against bullying
- Identify with others
- Stand up for themselves and those who are weaker
- Manifest greater self-control (both feelings and behavior)
- Redirect desire for power and dominance
- Understand reasons behind their anger or fear

Ripple Effects for Teens

	Basic info	Protective skills	Context	
Core topics	Bullying Bullied Online bullying Upstander Power	Agency Asserting yourself Connecting with others Decision making Managing feelings Controlling impulses	Risk and protection Victimized Vulnerable Alone Managing fear Managing anger	
Supplemental topics	Gossip Social media Online threats Sexually harassed Fighting Hitting Identity slurs Gay bashing Teasing Mean	Getting help Courage Assertive message Assertive reasons Assertive posture Reporting someone Ignoring Speaking up Empathy Perspective taking	Predicting feelings Diversity appreciating Making friends Problem-solving Resolving conflict Self-aware Body clues Self-talk Consequences - predicting	Embarrassment Gender identity Hazing Clique Undocumented Immigrant Physical differences Cultural differences Family violence

Ripple Effects for Kids

	Basic info	Protective skills	Context	
Core topics	Bully - you do it Bullied Online bullying Upstander	Agency Assertiveness Connecting with others Decision making Managing feelings Controlling impulses	Fear Angry Lonely Left out	
Supplemental topics	Gossiping Fighting Hitting Teasing Threats Play fighting	Help - getting it Assertive message Assertive voice Assertive body Tattling Ignoring Empathy Point of view	Feelings - predicting Diversity - appreciating Making friends Problem-solving Resolving conflict Self-awareness	Embarrassed Teased Immigrant Disability Physical differences Cultural differences Family violence Mean friend Social media Peer pressure

Sexual Harassment

Uninvited, sexually-oriented comments; snapping bra straps; unwanted touching; applying sexual pressure for romantic relationship after an invitation is declined; sexual aggression or acting out and sending/texting uninvited sexually-oriented content are all forms of sexual harassment.

Some youth make inappropriate sexual comments for no other reason than that is what they have seen modeled – in the media or at home. For them, changing their behavior is mostly a matter of consciousness-raising and norm setting.

For other youth, sexual harassment is a form of bullying. The common theme is the use of intimidation as a means to exercise control. Because it is primarily about power dynamics, as with bullying, the most successful sexual harassment prevention programs are school-wide ones that address these power dynamics from all three directions: bully, target and bystander.

Bystanders may be fulfilling gender stereotypes, or getting vicarious satisfaction from aggression. They may have convinced themselves that sexual harassment is a victimless prank. They may be engaging in veiled, anti-gay activity.

Any youth can be a target of sexual harassment, but girls are more frequently targeted.

Both perpetrators and targets of sexual harassment – may have experienced sexual abuse at the hands of an older child or adult, usually someone well known to them. These students need to be directed to counseling resources. If they disclose abuse to a teacher or other mandated reporter, that abuse must be reported to the proper authorities.

Goals of intervention - learners will:

All students will:

- Internalize norms against sexual harassment
- Recognize and reject gender stereotypes

Potential targets of sexual harassment will:

- Stand up for themselves and demand respect
- Know who to ask for help and how

Potential perpetrators will:

- Empathize with others
- Manifest greater self-control (both feelings and behavior)
- Redirect desire for power and dominance
- Understand reasons behind their anger or fear

Ripple Effects for Teens

	Basic info	Protective skills	Context
Core topics	Harassment - sexual Harassment - online Harassment - offender Stalker Power	Norms Values Resisting stereotypes Respect - showing Respect - getting it Getting help	Bullied Disrespected Abuse-sexual Sexting Sexism Not popular
Supplemental topics	Stalked Legal rights	Connecting with others Getting support Upstander Assertive reasons Assertive message Assertive voice Assertive eyes Assertive posture Courage Empathy Understanding feelings Perspective taking Predicting feelings Apologies Predicting consequences Controlling impulses Stopping reactions Consent Managing feelings	Risk and protection Victimized Trafficked Vulnerable Managing anger Jealousy Rejected Fear Shame Dating abuse Breaking up Alcohol Drugs Porn Sexual exploitation online Sexual orientation Gay bashing Social media

Violence Prevention

Today's violence – complex and pervasive

With the continuing occurrence of high profile, school shootings and increased aggression in schools, there is renewed interest in violence prevention, especially as it pertains to adolescents. But the violence that affects today's students is both more complex and more pervasive than the headline grabbing, but statistically rare, multiple shootings at schools. Bullying, fighting, and dating violence, as well as family violence and drug-related parental violence are far more common forms of violence than school shootings for today's students. Fewer learners are faced with gang violence, but it does account for a large proportion of deadly violence in poor, urban neighborhoods.

Needs are diverse

Since not all schools or classes experience the same forms of violence, they are not all helped by the same violence prevention program. In addition, not all teaching conditions are the same. Some schools have shorter class periods, some longer ones. Some districts mandate violence prevention and allow a significant number of classroom hours for it. Many don't.

Individual student needs differ as well. Some are more at risk to be perpetrators of violence, others to be targets of violence, while many have a "dual status" where they are victims in one situation (often at home), and then become perpetrators in another situation. Many adolescent boys clearly need training in empathy. Many adolescent girls are made more vulnerable by their exaggerated sense of empathy at the expense of assertiveness and a solid sense of self.

Peers are most often the targets of adolescent violence, but increasingly teachers are targets of student aggression as well. Classroom teachers are routinely subjected to disruptive, anti-social behavior that forces attention away from teaching and the needs of other students. Beyond that "routine" aggression, some 200,000 overt acts of aggression are committed against teachers each year. Since the onset of the pandemic, these numbers have increased. In addition to the programming for students described here, Ripple Effects' staff program, *Educator Ally*, offers parallel, digital training for teachers to reduce their chances of being targets, inadvertent precipitators, or unconscious escalators of violence.

Goals of intervention - learners will:

- Master skills of assertiveness, decision making, problem solving and conflict resolution
- Develop the core abilities of empathy, impulse control and anger/fear management
- Know basic strategies for making friends and asking for help
- Understand the criteria for deciding whether to break a confidence and turn someone in

Ripple Effects for Teens

	Basic info	Protective skills	Context
Core topics	Violence Aggression Fighting Threats - to kill Weapons Institutional injustice	Empathy Asserting yourself Controlling impulses Managing anger Managing fear Problem solving	Physical abuse Family violence Discrimination Poor Picked on Drugs
Supplemental topics	Upstander Hitting Online threats Identity slurs Bullying Hazing Racism Sexism Gay bashing Revenge Stalker Sexual assault Threats – to kill Messing around	Confronting behavior Understanding feelings Predicting feelings Stereotypes Perspective taking Predicting consequences Managing feelings Frustration Jealousy Self-aware Breathing Brush it off Resolving conflict Resisting pressure Reporting someone Disagreeing Accepting responsibility Making things right Respect – showing it	Risk and protection Beat up – victim Victimized Betrayed Disrespected Depression Witness to violence Hurting animals Loner Selling drugs Parent in jail Fighting with parents Discipline Neighborhood Gangs Police Choosing friends Loyalty Shame Envy

Dating Abuse

Relationship abuse is a significant problem among adolescents. Estimates of prevalence vary widely, from less than 10% to more than 50%, with many researchers documenting a level of at least 20% among girls and boys, gay and straight. It can include both psychological and physical expressions. Psychological abuse includes public or private humiliation, controlling behavior, rage, and fits of jealousy. Physical abuse can take both sexual and non-sexual forms. Unlike with adult domestic violence, rates of dating abuse are about the same for boys as for girls. However, girls are more likely to be physically injured than boys. They are more likely to be subjected to unwanted sex. Girls who are in abusive relationships are more likely to become pregnant than other girls. Youth in gay relationships are neither more – nor less – likely to be victims of relationship abuse than other youth.

Why it is a school concern

Certain risk factors have been correlated with abuse. Substance use, depression and anti-social behavior are among them, though it is difficult to know which is cause and which is effect. Regardless of which are causes and which are effects, all of these risk factors are also predictors of school failure. Mental health, social behavior and school achievement are related variables. As in any ecological system, disturbance in any one of them can have profound effects on the other two.

Needs differ for perpetrators, potential victims and friends of both

As with other exploitation-related behavior, dating abuse needs to be addressed from the separate perspectives of the perpetrator and the victim. Both need to understand the different forms of dating violence, the dynamics of power and control, early warning signs, and aspects of healthy and unhealthy relationships. Both are likely to need skill building in effective communication and conflict resolution. But as with other forms of violence, perpetrators are more likely to need training in empathy, impulse control, and management of feelings, especially feelings of jealousy and anger. Their victims are more likely to need help with assertiveness, decision-making and use of community resources. The relationship of third-party peers to dating violence is important. Unlike with bullying, where there may be a large group of bystanders, only close friends may be privy to what is happening. An effective prevention program provides training for these friends on how to offer help and when to make a report to a trusted adult.

Goals of intervention - learners will:

- Understand the dynamics and early warning signs of dating violence
- Understand and value norms for healthy relationships
- Use effective, non-abusive methods of communication and conflict resolution
- Develop assertiveness skills to avoid abusive relationship
- Learn constructive ways to manage feelings of anger and jealousy
- Learn who and how to ask for help
- Understand how to offer help to a friend who might be in an abusive relationship

Ripple Effects for Teens

	Basic info	Protective skills	Context
Core topics	Dating abuse	Controlling impulses	Risk and protection
	Emotional abuse	Consent	Jealousy
	Date rape - offender	Asserting yourself	Managing anger
	Sexual assault	Setting limits	Drugs
	Date rape	Resisting pressure	Alcohol
	Confusing touch	Connecting with others	Loneliness
Supplemental topics	Power	Stopping reactions	Rejected
	Harassment - sexual	Empathy	Alone
	Harassment - online	Managing feelings	Substance abuse
	Secrets	Expressing feelings	Aggression
	Love	Behavior confronting	Vulnerable
	Mean	Feelings -communicating	Isolated
	Roles-gender	Needs stating	Insecure
		Confidence - self	Victimized
		Getting help	Sexual abuse
		Counselors	Breaking up
		Resources	Fighting
		Making friends	Date rape drug
		Legal rights	Child abuse
	Help - giving	Social media	

Online Abuse/Exploitation

Technology is quickly becoming a pervasive, near universal part of the everyday experience of children and teens. It offers enormous opportunities for building knowledge and making positive connections across the globe. The internet also includes a wide range of ways in which youth can be hurt or taken advantage of, both by complete strangers and by people that they already know and may trust, including other youth.

What constitutes online abuse?

Not every online interaction that makes a child – or adult – feel uncomfortable is abuse. Online abuse includes bullying, sexual harassment, sexual exploitation, sexual abuse, and “grooming” (building trust with a child in order to sexually exploit, abuse, or traffic them).

Online sexual harassment can include lewd comments, inappropriate photo sharing or badgering for relationships after they have been declined. Sexual exploitation includes tricking, coercing or threatening someone into posting explicit images or videos, or using sexually explicit language. Perpetrators of child abuse look to take advantage of children through social media, instant messaging, texting, and gaming platforms.

Risk factors for online abuse

As with many kinds of abuse, certain individual factors are correlated with increased chance of online sexual exploitation and emotional abuse. Children and teens who have been sexually abused offline are more likely to get tricked or lured into abusive relationships by online “friends.” Those who post innocent, flirtatious materials are more likely to be told they have invited sexual contact. Those who use weak, unassertive language (like “I kind of feel” “I sort of don’t want to”), and or who have been victims of bullying offline, are more likely to be targeted by online bullies.

Reducing the risk

It isn’t possible to shield young people from all potentially harmful contact, but it is definitely possible to reduce the risk of their being victimized. Ripple Effects’ approach to online exploitation is to teach young people how to recognize, avoid, and report exploitation, including training them in assertiveness and core communication skills.

Goals of intervention - learners will:

- Understand basic personal internet and digital safety rules
- Understand how to command and show respect online
- Be able to recognize, avoid, and report sexual exploitation

A suggested scope - Teens

CORE CONTENT TOPICS

Internet privacy
Online safety
Online bullying
Addicted - electronics
Online harassment
Hate speech online
Sexual exploitation online
Online threats
Social media
Sexting

SKILL TRAINING TOPICS

Asserting yourself
Assertive message
Connecting with others
Getting help
Predicting consequences
Setting limits

RELATED PERSONAL TOPICS

Bullied
Embarrassed
Isolated
Porn
Abuse – sexual
Shame
Vulnerable

Smoking & Vaping

Tobacco use is a major health problem that affects children. While numbers of new teen smokers have gone down in the last decade, use of electronic cigarettes or “vaping” increased among middle and high school students, becoming the leading type of tobacco product used. Across the grades, there has been a steady increase in the number of youth trying and regularly vaping. Over 25% of high school seniors report that they vape. But research shows if kids and young adults can be kept tobacco-free, most will never start using tobacco.

Risk factors that influence the likelihood of whether an adolescent will smoke are: lower levels of school achievement and college aspirations, high levels of stress, weaker refusal skills, friends and family who use tobacco, lower self-image, and whether they see smoking or vaping as having “great risk.” Youth report the primary reasons that they use e-cigarettes/vape is because a family or friend use them; availability of flavors; and belief that it is less harmful than other forms of tobacco use.

Media analysis critical

Mass media often show tobacco and vaping use as normal and cool. Companies that sell vaping products misleadingly promote them as healthy alternatives to smoking. Thus media analysis is an important part of most effective tobacco prevention programs. Every Ripple Effects topic has a media analysis component in the “Apply It.”

Strengths-based approach

Ripple Effects tobacco-prevention program, like all its prevention curricula, is based on developing strengths that can reduce risks. It builds a stronger sense of self, stronger refusal skills, critical thinking skills, and skills in managing feelings like anxiety, fear, or anger that students may be using tobacco to sublimate. Rather than focusing on long-term health risks of tobacco use, Ripple Effects strengthens norms against tobacco use by appealing to things young people think are important, like immediate effects on appearance and aversion to being manipulated by cynical corporations.

Prevention over cessation

Teens for whom tobacco/nicotine is functional or who use it to accomplish something they otherwise feel they couldn't, can become the most strongly addicted and have the hardest time quitting. Most adolescents report that they want to quit, but can't. Cessation programs often don't work. They experience relapse rates and withdrawal symptoms similar to adults. Thus prevention is key. Students who already have developed a tobacco/nicotine habit are likely to need more support to quit than they can get from a Ripple Effects program. Nonetheless, the benefits they gain from correcting false images, identifying their own motivation, and developing core social-emotional abilities can be a valuable supplement to group support, nicotine patch or other methods they may be using.

Goals of intervention - learners will:

- Develop a stronger, firmer sense of self
- Understand their risk factors
- Internalize norms against use of tobacco
- Develop refusal skills
- Master cognitive-behavioral techniques for managing uncomfortable feelings
- Learn and use stress management techniques
- Practice critical thinking skills in analyzing media

Ripple Effects for Teens

	Basic info	Protective skills	Context
Core topics	Tobacco Vaping Smoking Chew Marijuana	Decision making Refusal skills Managing feelings Controlling impulses Quitting habits	Stress Peer pressure Hate school Not popular Risk-taking Drugs
Supplemental topics		Getting support Knowing yourself Norms Self-esteem Liking yourself Strengths Decisions Predicting consequences Asserting yourself Resisting pressure Setting limits Self-aware Physical sensations Relaxing Self-talk Exercise Grit Making friends Resources	Risk and protection Choosing friends Alcohol Trauma No future Substance abuse - family Anxiety-managing Depression Nervous habits Relapse School failure Experimenting Outside triggers

Drugs & Alcohol

Wide range of problems and solutions

Different communities and different individuals within communities have different issues around drugs, and thus need a wide range of options to choose from in dealing with their specific drug and alcohol problems. Both prevention and cessation are important strategies.

Where designer drugs are a problem, resisting peer pressure is an important intervention technique. Kids using depressants are more likely to need help managing their feelings. Kids involved in selling drugs need help in predicting consequences. Regular marijuana users need to learn how to relax, deal with anxiety and relate to others without drugs. Meth users need to be alerted to the serious short-term dangers of that drug. Heroin users need to access community resources to deal with their addiction.

Ripple Effects programs are comprehensive. *Ripple Effects for Teens* includes 90+ topics directly related to substance use/misuse. Sites decide what does and doesn't fit for their group of learners. This way all learners and communities can be assured they are getting best practices in prevention regardless of what their particular emphasis is.

A full range of proven strategies

Prevention programs aim to reduce risk factors and strengthen protective factors. Experts agree that a range of approaches can be effective with substance abuse prevention:

- Social skill training, especially in assertiveness so students are able to resist peer pressure
- Cognitive-behavioral training in managing feelings so they are not as tempted to use alcohol or drugs to manage emotional discomfort or mental health
- Training in decision-making skills so they can realistically predict consequences and develop viable options
- Bonding learners to their schools and families so that they have a net of support that reduces the chances they'll turn to drugs and alcohol
- Training in norm setting so students recognize drug and alcohol use as something that is unhealthy
- Providing information, including facts, about drugs and their effects, as well as related resources and laws

Goals of intervention - learners will:

- Strengthen norms against use of drugs or alcohol
- Improve social skills, especially in assertiveness and communication
- Master cognitive-behavioral techniques for controlling self-talk
- Learn stress management techniques
- Develop stronger bonds to community
- Develop decision-making skills and problem solving strategies
- Adopt an exercise program matched to their temperament and body type

Ripple Effects for Teens

	Basic info	Protective skills	Context
Core topics	Substance abuse	Agency	Risk and protection
	Alcohol	Norms	Trauma
	Drugs	Managing feelings	Managing stress
	Drugs/alcohol - addiction	Asserting yourself	Managing anxiety
	Drinking too much	Decision making	Depression
		Connecting with others	Substance abuse - family
Supplemental topics	Antidepressants	Strengths	Background – community
	Drugs – depressants	Values	Background – family
	Drugs – designer	Goals	Not liking yourself
	Stimulants	Resilience	Dieting
	Drugs – hallucinogens	Expressing feelings	Embarrassment
	Opioids	Self-aware	Managing fear
	Drugs – prescription	Physical sensations	Alone
	Drugs – inhalants	Calming breath	Hopeless
	Drugs – marijuana	Exercise	Loneliness
	Adderall	Controlling impulses	Sadness
	Synthetic drugs	Quitting habits	Shyness
	Drugs - steroids	Refusal skills	Smoking
	Heroin	Setting limits	Recklessness
	Meth	Making friends	Peer pressure
	Cocaine	Social skills	Pressure to succeed
	Drunk driving	Communication skills	Expectations
	Selling drugs	Friends – choice of	Triggers – outside
	Vaping	Getting support	Change – unplanned
		Counselors	Parent drug dealer
	Mentors	Relapse	

Eating Disorders

Serious illnesses marked by distress and extremes

Eating disorders are serious illnesses that usually come on during early adolescence and affect 2.7% of teens. They are defined as severe disturbances in eating behavior, including extreme under-eating, extreme overeating, and/or feelings of extreme distress about body weight or shape. The main eating disorders are binge-eating (compulsive, continuous overeating), bulimia (binge eating followed by purging through vomiting or use of laxatives), and anorexia (starving oneself). Very often these are linked to distress over an intensely negative body image. Many professionals consider eating disorders to be caused by a complex interaction of genetic, psychological, behavioral, biological, and social/environmental factors. Unfortunately, eating disorders carry physical health risks: puts kids at higher risk for diabetes and heart disease; excessive vomiting causes tooth decay and damages the digestive system; starving oneself can cause irreversible organ damage; kids die from it at higher rates than other mental disorders. Girls are more likely to have an eating disorder than boys.

Linked to additional mental health concerns

Eating disorders are not a purely physical disease. They usually are associated with additional mental health disorders, and/or known precipitators of those disorders. It's often difficult to separate cause from effect. There are complex associations between eating disorders and: 1) trauma, especially sexual abuse; 2) gender socialization, especially pressure to conform to a feminine ideal; 3) skill deficits, especially emotional regulation and impulse control; 4) supportive or abusive relationships, especially in the family; and 5) depression, anxiety, and other obsessive-compulsive disorders. Because of these complex associations, there is no effective, one-size-fits-all prevention or intervention program. Personalized responses are essential.

Affect school directly and indirectly

Eating disorders impact school directly and indirectly. They are linked to greater absenteeism, decreased ability to concentrate, and decreased interpersonal functioning. As with other illnesses, environmental conditions can affect the progression of these diseases. Here are some ways schools can become a helpful, healing environment for students with eating disorders, or risk factors for ED: 1) Intervene with bullying around body size and shape, like with other kinds of bias activity; 2) provide students time and space to privately explore whatever personal factors are causing them stress; 3) provide skill training in stress management and self-regulation; 4) adopt policies, including cafeteria offerings, that reinforce healthy eating habits; 5) make gender socialization an explicit part of advisory for pre-teens and early adolescents; 5) be respectful and personally supportive to students with eating disorders; don't interrogate or criticize them.

Reducing stigma and prompting disclosure

Some eating disorders, especially anorexia, require professional intervention. Ripple Effects doesn't offer that level of support, but it is effective in reducing the stigma about eating disorders, building coping and relationship skills, helping students examine conscious and unconscious feelings about gender and body image, and it does prompt students to disclose their illness to trusted adults, especially health professionals.

Goals of intervention - learners will:

- Understand what eating disorders are and their possible consequences
- Understand how their eating patterns are linked to personal stressors and emotional health
- Develop a realistic body image
- Identify a kind of exercise they can like
- Use cognitive-behavioral strategies for dealing with emotional needs directly
- Recognize the role of technology in their eating habits

A suggested scope - Teens

CORE CONTENT TOPICS	SKILL TRAINING TOPICS	RELATED PERSONAL TOPICS
Anorexia	Knowing yourself	Afraid
Binge eating	Body/Genes	Appearance
Bulimia	Body image	Angry
Eating disorder	Body weight	Anxiety
Obesity	Exercise type	Ashamed of body
	Strengths Goals	Depression
	Manage feelings	Chronic Illness
	Emotions	Diet - healthy
	Identifying feelings	Dieting
	Managing feelings	Exercise
	MIndfulness	Sad
	Triggers – outside	Social media
	Relaxing	Drugs - steroids
	Self-talk	Stress
	Controlling impulses	Suicidal
	Reactions – stopping	Addicted - electronics
	Predicting consequences	Screens
	Problem solving	Gaming
	Problem-solving	

Obesity & Overweight

Prevalent among youth

Obesity is a national health problem nearing epidemic proportions. Nearly 1 in 3 youth are overweight, about 17% of them are considered obese. The prevalence of obesity increases with age. Rates of obesity are higher among Hispanics (almost 22%) and non-Hispanic blacks (19.5%) than among non-Hispanic whites (14.7%). Obesity affects children from low-income disproportionately; with significant variation by state in their rates of obesity.

Lots of contributing factors

Lots of things affect the likelihood of young people becoming obese. Genes matter; so does poverty, access to good grocery stores, which foods kids eat, cultural approval for being overweight, the amount and kind of exercise they get, sleep routines, screen time, and medications. For many overweight kids, eating can be a compulsive reaction to stress or unmet emotional needs, rather than a simple response to hunger.

High personal costs

Regardless of why, children who are overweight or obese pay a high price for their condition, both socially and physically. They are more likely to be bullied, stigmatized, and excluded. They are at higher risk for mental health disorders, like anxiety and depression. They are more likely to have diabetes, breathing problems, high blood pressure and cholesterol, muscle and joint pain, and digestive ailments. These health issues often translate into health risks in adulthood: heart disease, Type 2 diabetes, and cancer.

Preventing childhood obesity

Comprehensive, school-based nutrition can partly offset the impact of lack of access to healthy foods in the poorest neighborhoods, and/or very unhealthy parental modeling. Explicit training in cognitive-behavioral strategies and social skills to promote healthy behaviors can reduce the risk of excessive weight gain. Regular physical exercise can help control weight. However, many schools are pulling back from the healthier menus they had begun to adopt, and/or are unwilling to devote instruction time to health education, or physical education. These decisions are largely self-defeating, since the core social-emotional abilities that are part of health education have been linked to higher academic achievement; and movement and exercise have been shown to improve brain functioning.

Following is a suggested prevention curriculum to address obesity directly. For a comprehensive health education curriculum matched to the CDC's National Health Education Standards, see the Ripple Effects Health Promotion lesson plans in the *Universal Promotion Manual* found in your dashboard.

Goals of intervention - learners will:

- Understand what obesity is, and who it affects
- Know the basic components of a healthy diet
- Understand how their eating patterns are linked to emotional health
- Develop a realistic body image
- Examine their technology use and its influence on health
- Identify a kind of exercise they can participate in
- Use cognitive-behavioral strategies for dealing with emotions

A suggested scope - Teens

CORE CONTENT TOPICS

Obesity

SKILL TRAINING TOPICS

Knowing yourself

Appearance
Body image
Body type
Body/Genes
Exercise type
Goals
Self-esteem
Strengths
Weight

Manage feelings

Body sensing
Emotions
Triggers – outside
Identifying feelings

Managing feelings

Mindfulness

Relaxing

Self-talk

Control impulses

Reactions – stopping
Impulse control
Predicting consequences

Connecting with others

Getting help
Joining a group

RELATED PERSONAL TOPICS

Afraid
Angry
Anxiety
Ashamed of body
Bullied

Cultural differences

Depression

Chronic illness

Diet/Healthy

Dieting/Losing weight

Eating disorders

Embarrassment

Exercise

Family background

Addicted- electronics

Lonely

Sad

Shame

Social media

Sleep problems

Drugs - steroids

Stress/Pressure

Screens

Gaming

A suggested scope - Kids

CORE CONTENT TOPICS

Obesity

SKILL TRAINING TOPICS

Knowing yourself

Body type
Goals
Self-esteem
Strengths

Manage feelings

Feelings – dealing with
Triggers
Calming down
Self-talk

Control impulses

Reactions – controlling
Impulse control
Predicting consequences

Connecting with others

Help – getting it
Joining a group

RELATED PERSONAL TOPICS

Afraid
Angry
Anxiety
Worries
Background
Bullied
Cultural differences
Sickness
Health/Nutrition
Embarrassed
Exercise

Internet

Lonely

Sad

Shame

Sleep

Social media

Screen time

Mental Health Challenges

Stress, anxiety, depression

Stress, anxiety and depression cut across social and economic groups. It affects adolescents and increasingly, younger children as well. Stress, a response to a threat, and anxiety, a reaction to stress, are normal parts of adolescence. For many, it is temporary and usually harmless, and may even result in personal growth. However, according to the 2015 Child Mind Institute Children’s Mental Health Report, 30% of children and adolescents will meet the criteria for an anxiety disorder. Often, those who experience anxiety, also experience depression. The National Institute of Mental Health reported in 2015 that 12.5% of adolescents had at least one major depressive episode in the past year. And reports suggest that nearly 1 in 5 adolescents will have a depressive episode before they reach adulthood. Emerging data from the Covid pandemic shows those numbers increasing.

Risk factors

Youth under stress, those who experience loss or trauma, or who have attention, learning, conduct or anxiety disorders are at a higher risk for depression. Depression also tends to run in families. Untreated depression is highly correlated with substance abuse.

In extreme cases, depression can lead to suicide. Suicide is the second leading cause of death for US young people between the ages of 15 and 24. According to the CDC, in 2020 it was the second leading cause of death for US kids between 10 and 14 years old.

Using Ripple Effects for successful prevention strategies

1. To complement suicide prevention and mental health wellness programs:

- Use the “Mental Health Challenges” core topics as a foundation to provide information and skill-building for the most frequently occurring mental health challenges adolescents face.
- Customize your curricula to meet your group’s risk and protective factors, as well as values.
- Use substance abuse topics to build healthy coping skills. Use of alcohol and drugs as a response to depression and anxiety predicts school failure, behavior problems, and more depression.
- Address underlying issues by allowing youth to independently explore topics in the program most concerning to them. Gender/sexual identity and sexual abuse issues are high on the list of depression and suicide precipitators for adolescents.
- Encourage youth to use Ripple Effects for ongoing mental & behavioral health supports and personal problem-solving, specific to their personal contexts.

2. Target peers as well as those at risk. Statistically, peers provide the most help in preventing suicidal youth from completing suicide. Ripple Effects topic “Suicide – friend” teaches youth to recognize and address signs of suicidal inclination in their peers.

3. Deliver a clear message to youth to ask for help. All topics related to harming behaviors, teaches skills such as asking for help, and points them to community resources.
4. Encourage exercise. Regular exercise is one of the most effective self-help strategies for managing stress and anxiety, as well as for depression and substance misuse/use prevention. Have youth use the “Profile” in the topic “Exercise” to identify a physical activity they could stick to. Research has shown use of Ripple Effects training in psycho-social strategies, as part of a program including exercise and personal supports, resulted in decreased rates of depression among seven cohorts of depressed youth.

What Ripple Effects is not

Ripple Effects program is not intended to be used for diagnostic purposes or to replace the nuanced services of professional therapists and mental health service providers.

Goals of intervention – learners will:

- Recognize common signs of anxiety & depression in themselves and their friends
- Identify a form of exercise that they are likely to enjoy and stick to
- Know who and how to ask for help if they are depressed
- Avoid the use of drugs or alcohol to handle uncomfortable feelings
- Use evidence-based cognitive, behavioral strategies to manage feelings
- Talk to a trusted adult if they have suicidal feelings
- Tell a trusted adult if a friend expresses suicidal impulses

Ripple Effects for Teens

	Basic Info	Protective skills		Context	
Core topics	Anxiety	Self-talk		Stress	
	Depression	Self-calming		Rejected	
	PTSD	Exercise		Obsessing	
	Self-harm	Getting support		Substance abuse	
	Suicidal	Managing feelings		Loneliness	
	Aggression	Asking for help		Feel powerless	
Supplemental topics	Hospitalization	Body image	Physical sensations	Trauma	Death
	Feeling crazy	Future	Triggers – outside	Learning disability	Social media
	Suicidal friend	Setting goals	Counselors	Gender identity	Shyness
	Prescription drugs	Resilience	Resources	Bullied	Isolated
	Aches and pains	Strengths	Parent – talking to	Rape – victim	Shame
		Temperament	Help – getting it	Sexually abused	Grief
		Managing change	Helping others	Discrimination	Hopeless
		Brush it off		Natural disasters	Survivor guilt
		Coping		Family violence	
		Laughing		Addicted parent	
		Practicing happiness		Parents – breaking up	

Handling Trauma

Natural disasters, the constant threat of terrorist violence, exposure to pervasive and persistent discrimination, these “big picture” stressors impact many children, often falling hardest on the poor. Physical and sexual abuse, neglect, neighborhood violence, bullying, divorce, chronic illness, death in the family – are harsh realities closer to home that affect more than half the nation’s children, and often trigger a stress response in their wake. The more traumatic experiences children have, and the longer they last, the more likely to impact their learning and behavior. Just four adverse experiences in childhood can result in 32x more likely chance of a child having learning and behavior problems. Educators often see the effects of traumatic stress without ever knowing its cause.

Signs of traumatic stress response

Signs of traumatic stress include: a heightened startle-response, extreme withdrawal, disruptive behavior, inability to pay attention, regressive behaviors, irrational fears, irritability, outbursts of anger and fighting, stomach aches or other physical symptoms without a medical explanation, declining grades, depression, anxiety, a flat, non-responsive affect, substance use/misuse, and problems with peers.

The role of teachers: creating emotional safety and support

Educators can adapt their teaching style to create a safe, predictable supportive atmosphere, where vulnerable children are supported and thus feel less threatened, without accepting aggressive behavior. Review the “Trauma” topic in *Educator Ally* to learn specific strategies.

Direct support to students

Children also need direct support to address their personal serious stressors. Many children are helped by talking about the traumatic event right after it happens, but forcing discussion or repeatedly bringing up the catastrophic event may re-traumatize children. While other children have strong family or cultural prohibitions against talking about “private” things in school settings. Trust the program to match each student’s context to the most relevant set of evidence-based strategies for addressing them and be super careful about respecting student privacy in the process. The following scopes list “Trauma Related Personal Topics” that implementers may make available for students to independently chose from.

Sometimes professional help is needed

Those youth who show avoidance behavior, such as refusing to go places that remind them of the place where the traumatic event occurred, and emotional numbing that lasts more than two weeks, or whose externalizing behavior is chronic and escalating may need the help of a professional. The Ripple Effects program encourages them to ask for that help and provides training in how to get it, while still safeguarding their confidentiality

Goals of intervention - learners will:

- Develop the strengths to handle many forms of adversity
- Recognize that hard things happen to people, and can be survived
- Learn to control self-talk and managing anger and fear
- Learn who and how to ask for help if needed
- Develop greater flexibility and optimism, two components of resilience
- Develop problem-solving skills

Ripple Effects for Teens

	Basic Info		Protective skills		Context	
Core topics	Trauma		Empowering yourself		Risk and protection	
			Resilience Self-calming Coping Optimism Connecting with others		Poor Discrimination Neighborhood Substance abuse Mental health-hospital	
Supplemental topics	Abandoned	Divorce	Agency	Brain	Triggers - outside	Aches and pains
	Neglected	New kid	Managing feelings	Self-talk	Change - unplanned	Eating disorder
	Child abuse	Bullied	Managing anger (Anger)	Calming breath	Sleep problems	Suicidal
	Emotional abuse	Violence	Anxiety-managing	Exercise	Depression	Feeling crazy
	Sexually abused	Witness to violence	Managing fear (Fear)	Faith	Nerves	Unlucky
	Rape – victim	Natural disasters	Grief	Humor	Obsessing	Deployment
	Substance abuse - family	Immigrant	Hopeless	Problem-solving	Recklessness	Alone
	Death	Trafficked	Guilt	Reactions - stopping	Skipping school	Isolated
	Parent in jail	Terrorism	Vulnerable	Getting support		
			Self-aware	Making friends		
			Counselors			

Ripple Effects for Kids

	Basic info		Protective skills		Context	
Core topics	Hard things		Resilience		Poor	
			Self-awareness Relaxing Managing change Connecting with others Help - getting it		Discrimination Neighborhood Drugs Triggers	
Supplemental topics	Beaten	Agency	Your brain		Change – unplanned	Attachment objects
	Family violence	Managing feelings	Self-talk		Clingy	Parent – deployed
	Unsafe - touch	Angry	Calming breath		Trouble sleeping	New kid
	Substance abuse - family	Anxiety	Exercise		Missing school	Immigrant
	Death	Nervous	Problem-solving		Nail biting	Weapons
	Divorce	Fear	Reactions – controlling		Wetting bed	
	Bullied	Lonely	Making friends			
	Natural disasters	Sad	Personal safety			

STIs/HIV-AIDS/Pregnancy

Adolescent health still seriously endangered by sexual behavior

While rates of teen pregnancy have dropped, sexually transmitted infections' (commonly known as STDs) rates are much higher in the United States than in most other developed countries, with teenagers at the highest risk. HIV remains a serious health problem for young people, accounting for about 22% of all new cases. African American and Latino young people are disproportionately represented in all three groups: more pregnancies, more STI's and higher HIV rates.

Effective prevention

Prevention research shows that accurate information, norm-setting and skill-building are all needed to change sexual behavior. NIDA has defined as a principle of effective programming that prevention interventions must be personalized. This means tailoring programming to reach diverse students, with their unique strengths, learning abilities, interests, histories and risk factors, while still taking community values into account.

No consensus on norms

Sexuality is a matter of public health, public safety, and private morality. Nothing is as apt to ignite controversy in a school setting as discussion of sex. Differences in perspective create a wide spectrum of perceived needs, mandates, local values and policies. In diverse communities, there simply will not be consensus about what combination of information and skill training is best for every group, every student, and every situation.

The full version of *Ripple Effects for Teens* offers reading independent, accurate information, sensitively presented, about a whole range of topics related to sexual behavior. It offers dozens of skill-training tutorials that can strengthen a sense of self, while increasing sensitivity to others and building decision-making skills in the process. Ultimately any path will lead to skill-training to stand up for their values, ensure their own safety and protect the safety of whomever they relate to. *Ripple Effects* also offers sites the ability to customize the program to their setting, by blocking topics/lessons they consider inappropriate.

Goals of intervention - learners will:

- Act in accordance with their moral beliefs
- Demonstrate good decision-making skills
- Be able to control impulses
- Command respect for their decision to abstain from sex
- Understand the safety issues involved in sexual activity
- Know how to protect themselves and others from unintended consequences
- Manifest greater self-control (both feelings and behavior)

Ripple Effects for Teens

	Basic info	Protective skills	Context
Core topics	STD/STI	Knowing your values	Risk and protection
	HIV/AIDS	Setting limits	Background – family
	Pregnant	Consent	Background – community
	Dating abuse	Setting goals	Sexually abused
	Safer sex	Predicting consequences	Impulsive
	Hooking up	Asking for help	Feel powerless
	Supplemental topics	Abstinence	Asserting yourself
Protection – sex		Assertive reasons	Insecure
Condoms		Knowing yourself	Roles – gender
Teen parent		Values	Crush
Puberty		Beliefs	Dating
Hormones		Goals	Dating abuse
Menstruation		Controlling impulses	Trafficked
Kissing		Managing feelings	Sexual harassment
Masturbation		Mixed feelings	
Date rape drug		Decisions	
Sexual assault		Refusing sex	
Sexual assault – offender		Choosing friends	
	Pressure – resisting		
	Respect – getting it		

Academic Failure

Research shows ingredients for school success include: family involvement, parental/guardian discipline styles, strong executive function skills, strong school policies and leadership, peer support for achievement, high expectations from teachers and family, accommodation of learning differences, teacher content expertise, personal bonds between students and teachers, resilience in the face of trauma, and overall student engagement. Addressing this combination of external and internal factors is no small task, but Ripple Effects helps by breaking the pieces down into accessible skill-building units for both students and staff.

Ripple Effects' suggested curriculum to promote school success combines strength-based asset development – including: cognitive-behavioral strategies; social skill development; training for executive function, focusing attention and developing study habits; and specific problem solving strategies for both academic and social problems. Programs address the domains of the individual, teacher, peers, and family/community. Topics targets the process of learning itself, with tutorials on mindsets, learning styles and intelligences, learning differences/disabilities, grades, testing and more.

Studies have shown that Ripple Effects can be an effective tool for raising grades, reducing problem classroom behaviors and keeping kids in class.

Goals of intervention – learners will:

- Problem-solve reason(s) to their absenteeism
- Increase their motivation to perform well in school, both socially and academically
- Understand their learning strengths and how to use them to their advantage
- Become familiar with their personal risk factors and identify resources for addressing them
- Develop skills to constructively handle conflict with teachers
- Develop problem-solving and executive function skills related to learning
- Improve their ability to control their impulses in classroom situations

Ripple Effects for Teens

	Identity as a learner	Learning mindsets	Learning practice	Building relationships	Addressing barriers (risk factors)
Core topics	Your mind Learning style Intelligences Expectations Temperament Strengths	Self-efficacy What you love Growth mindset Motivation Effort Perseverance	Getting organized Time management Study habits Predicting consequences Managing change Reflecting on performance	Belonging Making friends Communication skills Diversity - appreciating Joining a group	Self-advocacy Asking for help Problem-solving Managing stress Anxiety Trauma Risk and protection
Supplemental topics	Creativity Curiosity	Self-determination Self-confidence Setting goals Future Grit Optimism Self-talk Mistakes Criticism Managing feelings Frustration Discouraged Unlucky Bored Embarrassment Shame	Mindfulness Attention Asking questions Active listening Paraphrasing Instructions - following Decision making Controlling impulses Experimenting Being responsible Procrastination Change - unplanned Rules Attendance Grades Tests	Family background Community background Choosing friends Introducing yourself Standing up for yourself Group discussions Opinions Perspective taking Disagreeing respectfully Resolving conflict Communicating feelings Reliability Parent - talking to Digital citizen Mentors Getting support Resources	Build into your plan, time for youth to identify and problem-solve their personal challenges. Use of Ripple Effects in this learner-directed fashion is an effective motivational counseling tool and can work to mitigate personal risk factors.

Goals of intervention – learners will:

- Increase their motivation to perform well in school, both socially and academically
- Understand their learning strengths and how to use them to their advantage
- Become familiar with their personal risk factors and identify resources for addressing them
- Develop the skills to constructively handle conflict with teachers
- Develop problem-solving and executive function skills related to learning
- Improve ability to control their impulses in classroom situations

Ripple Effects for Kids

	Identity as a learner	Learning mindsets	Learning practice	Building relationships	Addressing barriers (risk factors)
Core topics	Your Mind	Self-efficacy	Getting organized	Belonging	Asking for help
	Learning style	Mindset	Study habits	Making friends	Problem-solving
	Smarts	Motivation	Predicting consequences	Conversations	Worries
	Strengths	Effort	Managing change	Diversity - appreciating	Hard things
	Curiosity	Perseverance		Joining a group	
	Knowing yourself				
Supplemental topics	Liking yourself	Mindfulness	Background	Build into your plan, time for youth to identify and problem-solve their personal challenges. Use of Ripple Effects in this student-directed fashion is an effective motivational counseling tool and can work to mitigate risk factors	
	Goals	Attention - paying	Background - family		
	Self-talk	Asking questions	Introducing		
	Mistakes	Listening	Point of view		
	Managing feelings	Instructions - following	Arguing - respectfully		
	Frustrated	Transitions	Resolving conflict		
	Discouraged	Decision making	Communicating feelings		
	Embarrassed	Controlling impulses	Parent - talking to		
	Ashamed	Experimenting	Digital citizen		
	Resilience	Being responsible			
	Change - unplanned				
	Rules				
	Absent				
	Grades				
	Tests				

Match of Ripple Effects to NIH/NIDA Principles of Effective Prevention

Principle 1

Prevention programs should enhance protective factors and reverse or reduce risk factors (Hawkins et al., 2002).

Ripple Effects programs build internal protective factors (strengths/resiliency assets) and strengthen children's ability to cope with risk factors (reasons for problems, including trauma). The risk of becoming involved in anti-social behavior or drug abuse involves the relationship among the number and type of risk factors (e.g., deviant attitudes and behaviors) and protective factors (e.g., parental support) (Wills et al., 1996). Ripple Effects addresses both risk and protective factors in five domains and provides an interactive profile for students to assess their own level of risk and protection.

- The potential impact of specific risk and protective factors changes with age. For example, risk factors within the family have greater impact on a younger child, while association with drug-abusing peers may be a more significant risk factor for an adolescent (Gerstein and Green, 1993; Dishion et al., 1999). Ripple Effects for Kids focuses more on family issues (such as divorce); Ripple Effects for Teens focuses more on peer and community-related issues.
- Early intervention with risk factors (e.g., aggressive behavior and poor self-control) often has a greater impact than later intervention by changing a child's life path (trajectory) away from problems and toward positive behaviors (Lalongo et al., 2001). Ripple Effects provides targeted intervention for aggression and lack of impulse control, starting at 2nd grade.
- While risk and protective factors can affect people of all groups, these factors can have a different effect depending on a person's age, gender, ethnicity, culture, and environment (Beauvais et al., 1996; Moon et al., 1999). Ripple Effects provides more than 300 tutorials on various risk and protective factors. Implementers can choose the most relevant to address, based on their unique situations.

Principle 2

Prevention programs should address all forms of drug abuse, alone or in combination, including the underage use of legal drugs (e.g., tobacco or alcohol); the use of illegal drugs (e.g., marijuana or heroin); and the inappropriate use of legally obtained substances (e.g., inhalants), prescription medications, or over-the-counter drugs (Johnston et al., 2002).

Ripple Effects covers legal drugs, including caffeine, tobacco and prescription drugs, as well as alcohol, and a range of illegal drugs, including marijuana, meth, club drugs, cocaine and heroin. recollections during the day, and hyper arousal, including sleep disturbances and a tendency to be easily startled, may respond well to supportive reassurance from parents, teachers and the guides within the software.

Principles 3 & 4

Prevention programs should address the type of drug abuse problem in the local community, target modifiable risk factors, and strengthen identified protective factors (Hawkins, J.D.; Catalano, R.F.; Kosterman, R.; Abbott, R.; and Hill, K.G.).

Prevention programs should be tailored to address risks specific to population or audience characteristics, such as age, gender, and ethnicity, to improve program effectiveness (Hawkins, J.D.; Catalano, R.F.; and Arthur, M.).

Ripple Effects emphasizes the role of personal context. Students start from their own most pressing concern in any domain: psychological issues, family problems, bullying, personal and community drug use/abuse problems, and uneven experiences of the impact of race, class, gender, ethnicity, disability, religious differences. These are their doors into multiple modes of instruction, engagement and representation, which are matched and chosen by the student. Through these doors students identify and strengthen their personal protective factors.

Principle 5

Family-based prevention programs should enhance family bonding and relationships and include parenting skills; practice in developing, discussing, and enforcing family policies on substance abuse; and training in drug education and information (Ashery, et al., 1998).

Ripple Effects provides training to strengthen family bonds, including training in talking to parents/guardians, and transfer training of skills to friends and family for each of hundreds of tutorials.

- Family bonding is the bedrock of the relationship between parents and children. Bonding can be strengthened through skills training on parent supportiveness of children, parent- child communication, and parental involvement (Kosterman et al., 1997). Parental monitoring and supervision are critical for drug abuse prevention. These skills can be enhanced with training on rule-setting, techniques for monitoring activities, praise for appropriate behavior and moderate, consistent discipline that enforces defined family rules (Kosterman et al., 2001). Ripple Effects training manual for parents include simple instructions for open communication and appropriate, consistent discipline, “showing care,” and becoming involved in children’s learning.
- Drug education and information for parents or caregivers reinforces what children are learning about the harmful effects of drugs and opens opportunities for family discussions about the abuse of legal and illegal substances (Bauman et al., 2001).

Ripple Effects prompts students to initiate this conversation with parents or an adult they trust.

- Brief, family-focused interventions for the general population can positively change specific parenting behavior that can reduce later risks of drug abuse (Spoth et al., 2002). Ripple Effects' family-focused intervention pieces include parental substance abuse, discipline, curfew, family background, etc.

Principle 6

Prevention programs can be designed to intervene as early as preschool to address risk factors for drug abuse, such as aggressive behavior, poor social skills, and academic difficulties (Webster-Stratton, 1998; Webster-Stratton, et al., 2001).

Ripple Effects' early learning program, Bouncy's You Can Learn, trains Pre-K to Grade 1 students in self-efficacy; a key mediator of health, mental health and school outcomes.

Principle 7

Prevention programs for elementary school children should target improving academic and social-emotional learning to address risk factors for drug abuse, such as early aggression, academic failure, and school dropout. Education should focus on the following skills (Conduct Problems Prevention Research Group, 2002; Lalongo et al., 2001):

- self-control
- emotional awareness
- communication
- social problem-solving
- academic support, especially in reading

Ripple Effects includes all of these skill areas, with scopes designed specifically to address aggression and drug use, as well as academic failure and dropout prevention.

Principle 8

Prevention programs for middle or junior high and high school students should increase academic and social competence with the following skills (Botvin et al., 1995; Scheier et al., 1999):

- study habits and academic support
- communication
- peer relationships
- self-efficacy and assertiveness
- drug resistance skills
- reinforcement of anti-drug attitudes strengthening of personal commitments against drug abuse

Every one of these areas is addressed with a separate tutorial in the *Ripple Effects for Teens* program.

Principle 9

Prevention programs aimed at general populations at key transition points, such as the transition to middle school, can produce beneficial effects even among high-risk families and children. Such interventions do not single out risk populations and, therefore, reduce labeling and promote bonding to school and community (Botvin et al., 1995; Dishion et al., 2002).

Ripple Effects provides a program for universal positive youth development that includes lessons on bonding to school and developing positive peer relationships.

Principle 10

Community prevention programs that combine two or more effective programs, such as family-based and school-based programs, can be more effective than a single program alone (Battistich et al., 1997).

Ripple Effects provides student transfer training opportunities to friends and family and sports settings, parent training post cards, training for teachers in how to involve parents in school, and "Doin' Democracy" a tutorial that promotes community involvement.

Principle 11

Community prevention programs reaching populations in multiple settings—for example, schools, clubs, faith-based organizations, and the media—are most effective when they present consistent, community-wide messages in each setting (Chou et al., 1998).

Ripple Effects programs are delivered in a wide variety of community settings, including after school and faith-based groups. Media analysis activities are included with each lesson.

Principle 12

When communities adapt programs to match their needs, community norms, or differing cultural requirements, they should retain core elements of the original research-based intervention (Spoth et al., 2002), which include:

- Structure (how the program is organized and constructed)
- Content (the information, skills, and strategies of the program)

- Delivery (how the program is adapted, implemented, and evaluated)

Ripple Effects programs are ideally designed to balance adaptation with fidelity to proven effective strategies. Because content, structure and modes of teaching/learning are in the box, the implementer role is changed from sage on the stage to guide on the side. Interactive processes are identified as core components. Hundreds of modules that provide training in evidence-based strategies can be mixed and matched for site-specific adaptation.

Principle 13

Prevention programs should be long-term with repeated interventions (i.e., booster programs) to reinforce the original prevention goals. Research shows that the benefits from middle school prevention programs diminish without follow-up programs in high school (Scheier et al., 1999).

By providing a whole library of related tutorials, Ripple Effects programs can be used for repeated interventions from grades 3 to 11.

Principle 14

Prevention programs should include teacher training on good classroom management practices, such as rewarding appropriate student behavior. Such techniques help to foster students' positive behavior, achievement, academic motivation, and school bonding (Lalongo et al., 2001).

Ripple Effects' staff program, Educator Ally, as well as live training, include a range of tutorials on effective classroom management, including setting expectations, making rules, enforcing consequences, reinforcing success, and teaching diverse learners.

Principle 15

Prevention programs are most effective when they employ interactive techniques, such as peer discussion groups and parent role-playing, that allow for active involvement in learning about drug abuse and reinforcing skills (Botvin et al., 1995).

Ripple Effects programs have three levels of interactivity: the student interacting with and receiving feedback from the computer (including games, journals, and self-profiles); transfer training applications for friends, family, and sports situations, lesson-correlated media analysis exercises, recommended role play or mirror rehearsal, and training post cards for parents; and opportunities to add content to the program.

Principle 16

Research-based prevention programs can be cost-effective. Similar to earlier research, recent research shows that for each dollar invested in prevention, a savings of up to \$10 in treatment for alcohol or other substance abuse can be seen (Aos et al., 2001; Hawkins et al., 1999; Pentz 1998; Spoth et al., 2002).

At about \$13 per student on a district level (for a program that can be used on all three levels of universal promotion, targeted prevention based on risk factors, and individualized intervention), Ripple Effects is the most cost-effective program available. Some clients can recover the entire cost in the first year, just from added revenue captured from reducing chronic absenteeism.

Know your resources

Implementation Resources

Planning, implementing, progress monitoring & technical support

Universal Promotion Manual positive youth development scope and sequences

Targeted Prevention Manual scopes and sequences for preventive risk reduction

Individualized Behavior Intervention Manual sample individual intervention plans for behavior problems

Mental & Behavioral Health Manual guide to address mental-social-emotional disorders

Juvenile Justice Manual sample interventions for the most common offenses

Implementer Guides program-specific planning, implementing and progress monitoring supports

Implementation Planning Resources helps implementers build customized plans

Planning for RTI tools to help create an individualized response plan

Family engagement strategies and resources

Trainer's Resources

Technology Support comprehensive technical instructions and troubleshooting

Software Programs

Youth programs & self-assessments

Bouncy's Ready to Learn Resilience Program (pre-K – grade 1/2)

Ripple Effects for Kids (grades 2/3-5)

Ripple Effects for Teens (grades 6-11)

Screen for Strengths (Student self-assessment)

Educator programs & tools

Educator Ally

(Staff PD program)

Data Viewer

Individual Playlist Creator

Group Playlist Creator

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