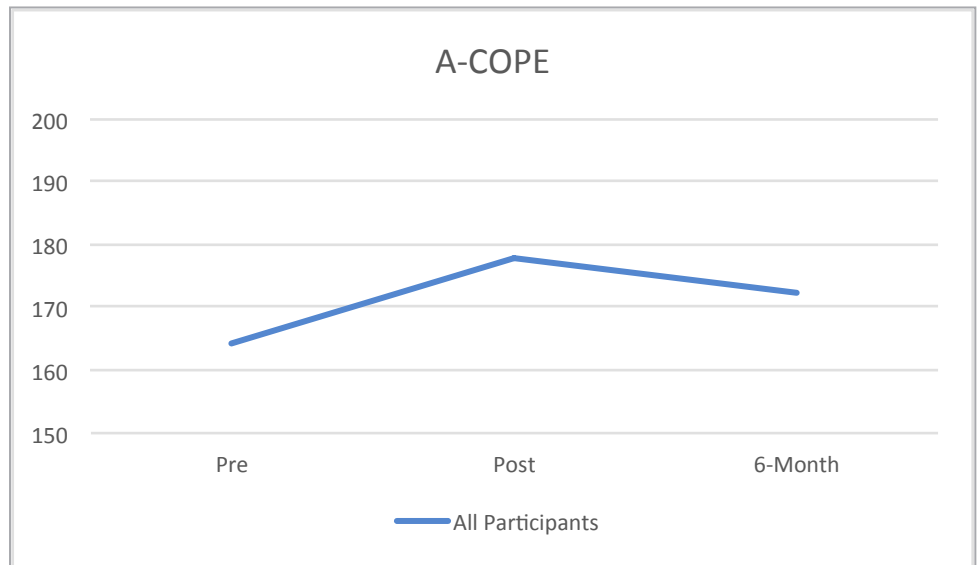


Coping Mechanisms:

- Scores increased (improved) an average of 8.25

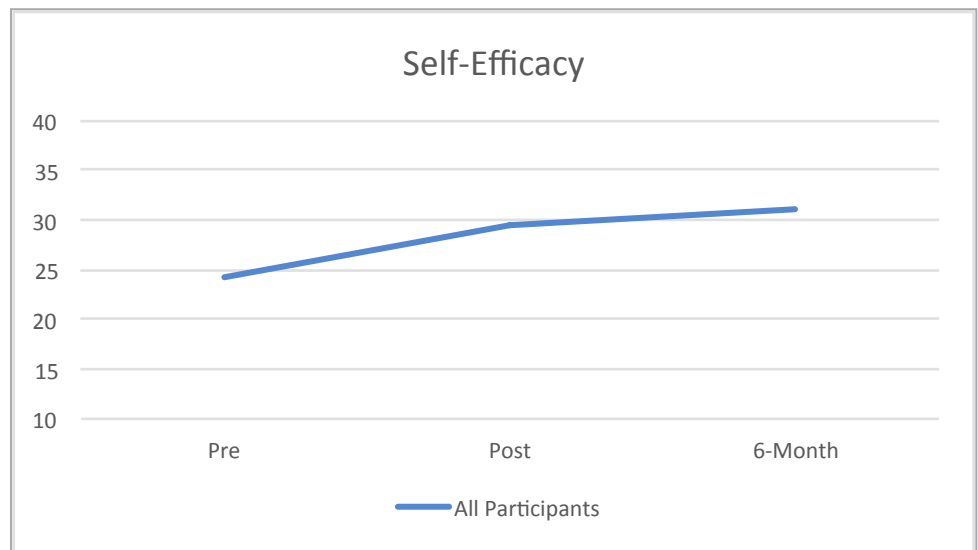
Measured using the Adolescent Coping Orientation for Problem Experience (A-COPE^{vi}), a 54-item self-report coping inventory; possible scores range from 54-270.



Self-Efficacy:

- Scores increased (improved) an average of 6.85

Measured using Schwarzer's General Self-Efficacy Scale^{vi}, a 10-item psychometric scale created to assess perceived self-efficacy in coping and problem-solving abilities during daily activities and isolated stressful events. Perceived self-efficacy facilitates goal-setting, effort investment, persistence in face of barriers, and recovery from setbacks. Possible scores range from 10-40.



Perception of Harm:

- Youth participants consistently rated marijuana as “not too harmful” or “not harmful at all” at all three timepoints.
- Synthetic marijuana, prescription drugs, and “illegal” drugs consistently ranked as very harmful.

Youth were asked to rank substances on how harmful they perceived them to be using a Likert scale with responses ranging from “not harmful at all” to “very harmful.”

Qualitative

General Impressions: Overall, youth participants and mentors had overwhelmingly positive impressions. Youth participants described the experience of meeting with a mentor as positive and noted that mentors made it an enjoyable and fulfilling experience. Mentors generally felt that it was a helpful program for adolescents and also ac-

“I would like to see it [Project Amp] funded by federal or state-provided funding. If I could have anything I wanted, I would have Project Amp implemented in every public high school and adapted to fit the needs of the high school in an intentional way.”

—Site Staff



knowledge of the benefit for their own recovery and professional development. Staff were more likely to have mixed feelings, reporting implementation barriers and some hesitance to the model; yet, they considered it a helpful resource for at-risk youth and acknowledged that it encouraged genuine conversations about sensitive topics while providing positive role modeling.

Impact on Youth Participants: Youth reported positive impacts on their lives including on substance use; stress management; and dealing with difficult situations in school, with friends, or at home. Mentors believed youth participants benefited from having someone to talk to about stress relief, positive goal setting, and whatever was on their minds.

Young Adult Mentor Model: Youth participants were very positive about having someone to talk to, noting they did not feel judged, their mentor had encountered similar experiences to them, and they felt understood. Staff generally recognized the value of the young adult mentor model, citing the importance for youth to have someone to talk to who is near in age. Staff also discussed barriers to the model, including difficulty generating organizational buy-in, challenges discussing Project Amp with parents, reservations about promoting it as a substance use prevention program, and uncertainty about the capacity of young adult peers to serve as mentors to adolescents. Mentors generally reported feeling unsure about their skills to implement Project Amp at first and then quickly becoming comfortable after establishing rapport after the first session.

DISCUSSION & IMPLICATIONS

This pilot study highlights the potential for young adult peer mentors with lived experience to serve in a brief intervention capacity for low to moderate risk adolescents. **Although a small sample size (n=20) prohibits generalizability and statistical significance, Project Amp shows preliminary effectiveness as an innovative brief mentorship intervention for addressing adolescent substance use. It demonstrates the promise of a protective factor-enhancing, strengths-based, and flexible curriculum on critical adolescent outcomes.** Project Amp also demonstrates compatibility with the SBIRT framework and integration into schools and healthcare centers.

While peer roles have mostly been studied as part of an adult behavioral health model, integration of young people in the brief intervention phase and the screening and referral to treatment phases of SBIRT has potential for being responsive, developmentally appropriate, and effective with adolescent populations. There are states, communities, and organizations that embrace peer-delivered services and provide administrative and financial support to these models. **Project Amp represents an innovative model for leveraging the experience and relative age of young people in recovery as peers to support adolescent behavioral health.**

Qualitative findings point to some organizational and implementation barriers and limitations. Some were related to the research study itself (i.e., obtaining parental consent), which were generally unavoidable. Staff in particular identified barriers related to implementation, administrative buy-in, and acceptance of a young person in recovery to serve in a brief mentorship role.

“Cutting down on smoking [and] using healthy coping mechanisms. Those are the main things. Right afterwards I felt like really confident; lately I’ve felt really confident. I don’t know why [but] for the longest time I really doubted myself, and then she was like “what you’re thinking is not stupid” and made me feel good about my plans for myself. She just made me not doubt myself anymore [and] gave me a confidence boost.”

—Youth Participant

“[I]t was nice to have someone young and [who] wants to take time out of their day to help someone else.”

—Youth Participant

“I feel like being someone close in age to the mentees and sharing some of my own experiences with them helped gain trust.

Talking about my experiences and how I perceived things at their age I felt helped a lot of them feel a genuine connection with me. There was nothing I found difficult to discuss..”

—Mentor



Further, although the study was designed as a pilot, a significant limitation is lack of a comparison or control group. While some pilot sites were already implementing SBIRT at the start of the study, a standardized brief intervention for low to moderate risk adolescents was not in place (indeed a lack of evidence-based brief interventions represents a general gap in SBIRT practice). As a result, outcomes of adolescents with similar baseline characteristics who did not receive Project Amp are unknown. However, **we are confident that Project Amp is a promising practice that has been well-received by adolescents, mentors, and staff alike, and that preliminary findings endorse a need for a fully-powered, randomized clinical trial.**

Research and best practices for adolescent SBIRT are evolving quickly. The Project Amp pilot study represents the innovations, adaptations, and iterative learning occurring across various youth-serving settings. While the results from this study are preliminary, Project Amp could help to expand access to substance use prevention and early intervention supports for youth. Further research is needed to yield insights about effectiveness as well as implementation best practices.

For more information about Project Amp, including implementation resources, visit www.projectamp4youth.com.

“What caught my attention was meeting the mentors—that’s when I had buy-in.”

—Site Staff

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