

THE pHARMING EFFECTS

The pHARMING Effects Presentation: Results from School Settings

In 2016-2017, “The pHARMING Effects” presentations were hosted in numerous settings across the country, including large youth conference proceedings and in school- and community-based settings, to educate youth about the harmful effects of prescription drug misuse. To evaluate the influence of “The pHARMING Effects” presentations, researchers at The Ohio State University Community and Youth Collaborative Institute (CAYCI) summarized the overall results of “The pHARMING Effects” presentations in a final report published on the Youth to Youth (Y2Y) International website.

To further examine the influence of the presentations delivered only in school settings (i.e., middle and high schools), researchers examined how youth who received the presentations in school settings grew in their perceptions (i.e., knowledge, attitudes, and future behaviors) regarding prescription drug misuse. The Prescription Drug Misuse Knowledge, Attitudes, and Future Behavior Scale was used to assess how youth in schools perceive their knowledge, beliefs, and attitudes about prescription drug misuse at pre- and post-test (i.e., before and after the presentation). The evaluation tool was designed by CAYCI researchers as a single front and back sheet of paper, allowing researchers to assess whether or not youth perceptions regarding prescription drug misuse increased after delivery of the presentation. The items on the evaluation tool are described below in Table 1.

Table 1. The Prescription Drug Misuse Knowledge, Attitudes, and Future Behavior Scale

1. I believe many youth my age are misusing prescription drugs.
 2. I am knowledgeable about the dangers of misusing prescription drugs.
 3. I understand that using someone else’s prescription drugs is illegal.
 4. I understand how using someone else’s prescription drugs can be harmful to my health.
 5. I am aware of how misusing prescription drugs can negatively impact my relationships with others.
 6. I understand how someone may become addicted to prescription drugs.
 7. I would feel comfortable saying “no” if offered a prescription drug that was not prescribed to me.
 8. I would not take a prescription drug prescribed for someone else.
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All items are measured on a 1-7 scale where 1 = Strongly Disagree, 2 = Disagree, 3= Somewhat Disagree, 4 = Neutral, 5 Somewhat Agree, 6 = Agree, and 7 = Strongly Agree.

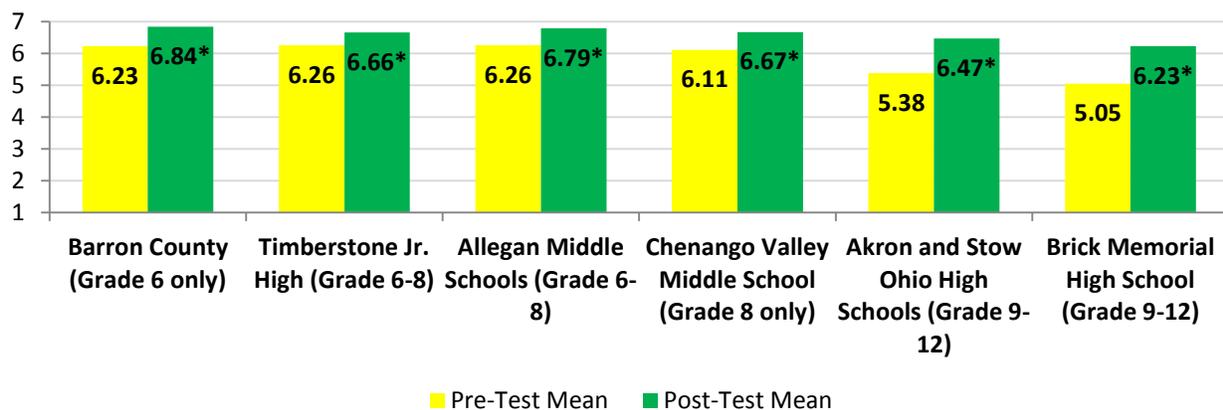
Findings presented below in Table 2 and Figure 1 summarize the results from approximately 287 youth who received “The pHARMING Effects” presentation in six different school settings. The implementation of the evaluation tool in these school settings allowed for examination of aggregate scores from each school and not matched pre- and post-test scores on every item on the tool.

Results. Table 2 reports the pre- and post-test means for each overall pre- and post-test mean scores for each school, the change from pre- to post-test for each item (ΔM), and p values indicating if the change was significant from pre- to post-test. Overall, results suggest “The pHARMING Effects” presentations significantly increased the perceptions of youth in schools from pre- to post-test on the scale which measures knowledge, beliefs, and attitudes about prescription drug misuse.

Table 2. School Outcomes	Overall Pre-Test Mean	Overall Post-Test Mean	ΔM	p value
Barron County (Grade 6 only; n = 43)	6.30	6.84	0.54	.00*
Timberstone Jr. High (Grade 6-8; n =23)	6.26	6.66	0.30	.00*
Allegan Middle Schools (Grade 6-8; n = 89)	6.26	6.79	0.53	.00*
Chenango Valley Middle School (Grade 8 only; n = 42)	6.11	6.67	0.56	.00*
Akron and Stow High Schools (Grade 9-12; n = 47)	5.38	6.47	1.09	.00*
Brick Memorial High School (Grade 9-12; n =43)	5.05	6.23	1.18	.00*

Note. * $p < 0.05$. SD = Standard deviation. 1 = Strongly Disagree, 2 = Disagree, 3= Somewhat Disagree, 4 = Neutral, 5 Somewhat Agree, 6 = Agree, and 7 = Strongly Agree.

Figure 1. Pre- and Post-Test Mean Scores for Schools

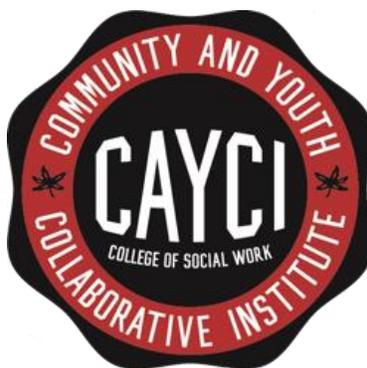


Note. *Indicates significant increase from pre- to post-test; $p < 0.05$.

Summary and Conclusion. In the end, findings demonstrate support for “The pHARMING Effects” presentations among youth who participated in the presentations in school settings. Significant increases on scores on the overall scale from pre- to post-test suggest youth who participated in the presentations significantly improved their perceived knowledge, skills, and future intentions not to engage in prescription drug misuse. In addition, changes in the overall mean scores from pre- to post-test were the greatest among youth who received the presentations in high school settings. Therefore, results may indicate “The pHARMING Effects” presentations have the greatest impact on high school youth.

Together, results provide preliminary evidence of the positive impact of “The pHARMING Effects” presentation when delivered in a school setting. School health educators and other leaders may look to use “The pHARMING Effects” presentation as a resources to mitigate risks for prescription drug misuse among young people in their schools and communities.

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