



Reaching and Engaging “Non-College” Young Adults in Prevention Efforts

February 2015

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Introduction

While young adults enrolled in full-time college report higher rates of binge or heavy drinking than their peers, adults (18+ years old) who did not complete college are more likely to be binge or heavy drinkers than those with a college degree. In addition, current data indicate that illicit substance use among young adults (18-to-25 years-old) is higher among young adults who do not attend or complete college as compared to those that do.¹

To effectively address substance use among “non-college” young adults, practitioners working at the community level need data to understand how, where, and why this group is using substances, and to mobilize them to become active partners in the planning and delivery of effective prevention programming. Yet understanding and mobilizing this group can be challenging. Data can be hard to find and young adults—particularly those not in college—can be difficult to reach.

This toolkit is designed to help practitioners working to reduce substance misuse and abuse among non-college young adults find the data they need to inform their planning efforts, and to overcome some common challenges to reaching and engaging young adults in prevention efforts. Tools include:

- *Preventing Substance Use among Non-College Youth: Challenges and Opportunities*, designed to help practitioners understand some of the ways this group of young adults is unique, and some of the creative ways to learn more about them.
- *Understanding Substance Use among 18- to 25-Year-Olds Not in College: Tapping Existing Data Sources*—a listing of local, state, and national data sources that contain information on this population.
- *Tips for Engaging Non-College Youth in Prevention Efforts*, offering a selection of strategies for overcoming common challenges to reaching this group of young people.
- *Engaging Non-College Youth in Prevention Efforts: Example of Grantee Strategies*, a compilation of strategies shared by CSAP prevention grantees.
- *Related Resources in the CAPT Web Area*: <http://www.samhsa.gov/capt>

¹ Substance Abuse and Mental Health Services Administration, *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

Preventing Substance Use among Non-College Youth: Challenges and Opportunities

Effective prevention begins with a clear understanding of how, where, and when specific groups of individuals use or misuse substances, and the constellation of factors that contribute to their use. Understanding these consumption patterns are key to knowing where and how to intervene most effectively.

While many resources exist for finding consumption data on young adults overall, relatively few describe substance use among non-college young adults, specifically. As a result, prevention providers are frequently tasked with collecting their own data to better understand the substance misuse and abuse behaviors of this population.

This tool is designed to help practitioners working to prevent substance use among non-college young adults better understand how this group is unique, and use this knowledge to overcome some of the challenges associated with collecting substance use data from this population.

What Do We Know About “Non-College” Youth?

- **They’re “different” from youth attending college.** Studies show that college and non-college young adults differ in many ways, including how, where, and why they use substances.^{1,2} Research suggests that non-college young adults tend to have significantly lower rates of binge drinking and higher rates of tobacco use than college students.³ While factors such as fraternities and athletics may influence consumption patterns for college students, workplace culture may play a significant role in substance use for non-college youth.
- **They’re highly diverse.** Education-wise, experiences range from not graduating high school to attending a trade school to earning a terminal associate’s degree. Employment status and type of employment also vary. While the majority of this population is in the workforce (including the military), one in five young workers (ages 16-24) is unemployed.⁴ This suggests a high level of mobility, which can be a challenge to reaching and engaging this population. Also, most non-college young adults work in sectors that have positive cultural norms related to drinking, such as restaurants and bars, construction, and the military.⁵

Why is It So Hard to Find Data on Non-College Youth?

- **They're highly diverse.** As mentioned above, this group comprises individuals with a range of education levels and employment situations, who are subject to a wide variety of factors that may influence their substance use. For this reason, it can be difficult to capture this range in standardized surveys. Also, non-college youth don't always identify as such, and so may not be captured in data collection efforts. Finally, their mobility can make it difficult to capture data trends.
- **They're difficult to find.** Because they live and work in a variety of settings, there's no "one-stop" shopping—no single venue, like colleges or universities, where researchers can focus their data collection efforts. Targeting workplaces is a step in the right direction, but not all non-college youth are employed.
- **They may be reluctant to participate in data collection efforts.** Some young adults may purposefully avoid inclusion in data collection efforts. They may have had negative experiences with researchers (e.g., racial and ethnic minorities), fear discrimination (e.g., gender and sexual minorities), or want to conceal illegal activity.⁶ Also, workplaces that employ young adults may be reluctant to share information about substance abuse among its employees, fearing that these data will reflect poorly on the site.
- **Most data collection instruments don't include questions that identify members of hard-to-reach populations—such as young adults not attending college.** These instruments may include members of these target groups, but there is no way to disaggregate group-specific information. For example, if a survey distributed to 18- to 25-year-olds does not include questions about college attendance, there is no way to tell which respondents do and do not attend college, and how the responses for the two groups might differ.

So How Can You Learn What's Out There?

As more communities prioritize the substance abuse prevention needs of 18- to 25-year-olds, practitioners will need to identify creative ways to learn more about this hard-to-reach population. Strategies include the following:

- ✓ **Reach out to non-traditional partners,** such as unions, employers, military, and hospitals. In particular, connect with industries that employ young adults, and which typically see high rates of substance use (e.g., food service, construction, truck driving).

Establishing these relationships is key to accessing data these sites may already collect, as well as initiating primary data collection efforts.

- ✓ **Find areas of overlap.** Check out the mission statements of potential partner organizations to identify common goals and values. For instance, unions and companies that employ non-college young adults may express a desire to maintain a healthy workforce, making these entities with access to non-college young adults great potential partners.
- ✓ **Don't reinvent the wheel.** Many organizations and agencies collect data on young adults: the challenge, as mentioned above, is that these data don't always differentiate between respondents who are and are not attending college. So be prepared to do some detective work: you may need to look for data related to age and education status, and then put the pieces together.
- ✓ **Start filling the gaps.** Collaborate with your new partners to conduct focus groups and/or key informant interviews with members of your target audience, and/or administer a survey. See if any local agencies (e.g., small business associations or the state chamber of commerce) already collect data on this age group, and if they would be willing to include any additional questions specific to your population of interest.

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 4. Bureau of Labor Statistics April 2007-April 2010, Household Survey.
 5. Duke, Michael R., & Baumbach, W. (2010). "Preventing Alcohol and Drug Abuse among Young Adults Who Have Not Attended College." PPT Presentation.
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Understanding Substance Use among 18- to 25-Year-Olds Not in College: Tapping Existing Data Sources

Data are essential to successful substance abuse prevention. Practitioners use data to guide all aspects of prevention planning: to understand and prioritize problems, make important decisions, identify or develop strategies that meet community needs, and sustain prevention efforts over time.

Before embarking on efforts to collect new data, prevention practitioners are encouraged to look at data that already exist—information and records that have already been collected by others. These data may have been collected as part of an institution’s administrative processes, or through a previous evaluation or study.

Yet finding existing data that describe the substance use behaviors of young adults not attending college can be challenging: the population is diverse, members do not necessarily identify as a ‘group’, and there is no single setting (like a university) where researchers can go to collect these data. It’s not that these data don’t exist; more often, it’s that they are hidden—part of a general pool of data that cannot be disaggregated. This makes it difficult to draw any assumptions specific to the population.

About This Tool

This tool offers a starting point for finding data on this group. Since there is little data available for this population exclusively, we have compiled a list of agencies and organizations operating at the state, regional, and national levels that routinely collect or maintain data on 18- to-25 year-olds, overall. From there, we offer guidance for examining these sources through a “not in college” lens.

The state and local sources are organized according to three categories: health data, crime and accident data, and demographic data. We have also included a list of national sources that may contain relevant data. Please note, however, that this list intentionally excludes college-specific data sources, as they do not capture information on non-college youth.

When reviewing these sources, please consider the following:

- ✓ ***Finding data specific to this population may take some detective work.*** Since most data sources do not include questions related to employment, you may need to look for data related to age and education status, and put the pieces together.

- ✓ **The types of data these sources contain are limited.** Most of the sources included in the list provide information on the health or legal outcomes of substance use (e.g., number of deaths associated with substance use among 18- to 25-year-olds group). Fewer provide information about consumption patterns (e.g., rates of heavy drinking among non-college youth). We have noted those sources that do. We do include data on risk and protective factors.
- ✓ **Don't stop at one source.** Finding the data you need is like piecing together a puzzle. Some pieces are easy to find, some are not so easy. And some pieces may look like they fit, but don't. To get the entire picture, you will need to search multiple sources.
- ✓ **Search at multiple levels.** Starting local will help you develop the clearest picture of what's going on in your community. It will also help you build relationships and support for your prevention efforts. You can then move on to state data to see how the problems in your community compare to other communities, or to the state as a whole. Finally, national data can offer a general picture of the drug or alcohol problems facing young adults, including national trends, patterns, and associated risk factors.

Finally, please note that these sources contain existing reported data; they do not represent primary or new data collection efforts.

State and Local Resources

Health Data Sources

Many state and local agencies collect health data, including data on rates of substance abuse, the consequences of use (e.g., hospital data on overdoses), and, in some cases, attitudes toward alcohol and drug use. These data generally include information on both college and non-college youth. These agencies include the following:

Local, County, and State Health Departments

Health departments, particularly those that oversee state offices of vital statistics, routinely collect and/or store a range of data, including information that describes drug and alcohol consumption patterns (e.g., 30-day use) and/or the health outcomes associated with substance use among young adults. Many health departments also conduct periodic health needs assessments. In addition, local health departments are likely to be aware of the data collection efforts of other health-related agencies, such as hospitals, treatment centers, and prisons.

Hospitals

Hospital records, including hospital admission and discharge records, emergency medical services records, and trauma registries, can reveal patterns of alcohol- and drug-related illnesses and injuries. These records can provide information on particular drugs frequently used by community youth. Hospital records are also likely to reveal outcomes associated with substance use in the community, such as the number of 18-to-25 year-olds treated for drug overdose.

Poison Control Centers

Regional, state, and local poison control centers regularly receive calls related to drug overdoses. These centers generally track the types of calls they receive in order to identify trends and emerging public health concerns. Though these records typically do not capture information related to the education status of callers, they should reveal trends in substance use among 18-to-25 year-olds, specifically related to prescription and nonprescription drug overdoses.

Emergency Medical Services (EMS)

State and local emergency medical services provide pre-hospital emergency medicine, primarily in response to 9-1-1 calls. EMS data can reveal trends in substance use resulting in emergency medical care, with data broken down by gender, age, and symptoms. Once again, this data source most likely will not be able to reveal trends specific to non-college youth. However, these data could reveal important information about substance use in the 18-to-25 year-old age group in general.

Community-Based Coalitions and Agencies

Local coalitions and/or chapters of national organizations that focus on young adults and/or substance use prevention may collect data specific to this age group, including data describing drug and alcohol consumption patterns (e.g., 30-day use) and/or attitudes toward alcohol use (e.g., perception of disapproval, perceived risk). For example, 21 Reasons, a Maine substance use prevention coalition, collaborated with the City of Portland and a local community action agency to develop the Maine Brief Alcohol Check-up (MaineBAC), a free online assessment tool to collect information about alcohol use among 21-to-25-year-olds.



Coalitions and agencies can also provide a unique point of access to non-college youth, as coalitions may include representatives from businesses and community agencies where non-college young adults work, shop, and socialize.

Medical Examiner or Coroner's Office

Most states require a medical examiner or coroner's report for each person whose death resulted from violence or injury, and many counties provide this information, as well. These reports often contain information regarding drug or alcohol use at the time of death. However, these reports typically do not contain information about education status or consumption patterns, making it difficult to isolate data specific to non-college youth.

Crime and Accident Data Sources

Crime statistics can reveal both the number and types of substance-related crimes occurring in a community; accident reports can reveal the number of young adult drivers operating under the influence. These data can shed light on the negative consequences of substance use (e.g., violence, criminal activity, automobile accidents) for a specific age group. However, it can be difficult to determine whether or not offenders are in college or in the workforces, as these data often do not include education status.

Local and State Law Enforcement Agencies

Information available from these agencies can include:

- Arrests for alcohol or drug possession
- Liquor law violations
- Arrests for the sale of drugs
- Drunk driving arrests
- Arrests for drunkenness
- Arrests for teen violence
- Curfew violations
- Rapes
- Personal and property crime
- Homicides
- Vandalism
- Domestic violence
- Aggravated assaults
- Disorderly conduct

Since many local law enforcement agencies are required to provide arrests and convictions to their state, you can usually get this information directly from the state law enforcement agency.

Department or Bureau of Motor Vehicles (DMV/BMV)

State DMV/BMVs maintain records on all drivers who received a citation for operating or driving under the influence of alcohol.

Courts or Justice Department

In most states, the Administrative Office of the Courts publish annual court statistics which include convictions for various crimes. Such reports may contain information, separated out by district or county, on cases that involved drug- or alcohol-related crimes.

Employment Data Sources



Employers often collect information on their employees, and these records can be an important source of information on 18-to-25 year-old non-college youth. Workplaces can also be an important venue for collecting new data on this population; for this reason, building strong relationships with these stakeholders and cultivating them as potential partners is key. It is important to note, however, that employers may resist sharing substance-related information about employees for fear that it will cast the employer in a negative light. Some common employers of non-college youth include the military, restaurants and bars, and construction companies.

Demographic Data Sources

Demographic data describe the composition of a community. You can use these data to determine whether a community has certain risk factors that tend to be associated with substance abuse—such as poverty, high crime rates, and fluctuations in population—and where these risk factors are most prevalent.



Since demographic data generally include information about age of the population, these data may provide useful information regarding risk factors associated with substance use among 18- to-25 year-olds.

The U.S. Census Bureau (<http://www.census.gov/>) provides demographic data disaggregated by city, county, and state. Town, county, and tribal administrative offices also regularly collect demographic data that include the age, gender, and ethnicity of community members. These data are often available on the town's or county's website.

Examples of National Resources

National data sources can be used to see nationwide trends and patterns, and to provide a comparison to local data. Some national sources also provide data on states, regions, counties and some select communities. Please note: This list is not exhaustive.

Behavioral Risk Factor Surveillance System (BRFSS)

www.cdc.gov/brfss/

This ongoing, state-based survey collects data from adults on the prevalence of chronic diseases and conditions, access to health care, and health-risk behaviors including heavy and binge drinking. It also collects information on age, highest level of education completed, and current employment status. This resource could be used to determine the statewide prevalence of binge drinking among young adults, and/or the prevalence of binge drinking by highest level of education achieved. BRFSS results are available at the national and state levels, and at select local levels (e.g., city results are available for larger municipalities and metro areas).

Fatality Analysis Reporting System (FARS)

<http://www.nhtsa.gov/FARS>

Operated by the National Highway Traffic Safety Administration, this system collects information on deaths resulting from motor vehicle collisions, including data on several aspects of the crash, including the event, the vehicle(s) and driver(s) (by age), and each person involved. Specific substance-related indicators include the annual number of alcohol-related drivers in crashes in which at least one person died and the annual number of vehicle deaths sustained in crashes that were alcohol-involved.

Uniform Crime Reports (UCR)

<http://www.icpsr.umich.edu/icpsrweb/content/NACJD/guides/ucr.html>

Operated by the Federal Bureau of Investigation, these reports contain national crime estimates, including arrests, by age, for drug- and alcohol-related crimes; state crime estimates, and city and county crime counts (for cities with populations over 10,000 and counties with populations over 25,000). These data are provided by law enforcement agencies that voluntarily participate in the UCR Program.

National Survey on Drug use and Health (NSDUH)

<https://nsduhweb.rti.org/>

Funded by SAMHSA, the NSDUH annually interviews people nationwide to provide national and state-level estimates of tobacco, alcohol, and illicit drug use and mental health. The survey is designed to provide data on the levels and patterns of substance use, track usage trends, assess consequences, and identify groups at high risk for substance use. It collects information on age, education, employment status, as well as lifetime, annual, and past-month usage for alcohol, illegal substances, and nonmedical use of prescription drugs. This information could reveal

national trends in substance use for college and non-college populations, and co-occurring mental illness and substance use disorders in young adults. State data are also available.

Monitoring the Future

<http://www.monitoringthefuture.org/>

Funded by the National Institute on Drug Abuse, Monitoring the Future (MTF) is a nationwide study of behaviors, attitudes, and values of American adolescents and young adults. MTF surveys participants at the beginning of high school, and into young adulthood. This resource includes national data regarding drug use among college versus non-college young adults for some, though not all, racial and ethnic groups.

Tips for Engaging Non-College Youth in Prevention Efforts

Communities benefit in multiple ways by involving youth in the planning, implementation, and evaluation of their prevention efforts. Young people bring insight into the target audience; trust from that audience; and huge stores of energy, confidence, commitment, and creativity. They bring a fresh—and unique—perspective on strategies that will be most effective, can play a vital role in shaping messages and delivering services that are youth-friendly and resonate with youth interests and priorities, and can help get community buy-in.

Yet engaging young adults—particularly young adults not attending college—can be challenging. Some challenges unique to mobilizing this group include the following:

- ***Social norms supportive of substance use.*** Young adults between the ages of 18 to 25 frequently work and/or socialize in settings that support substance use and abuse. For example, young adults working in the accommodations and food service industries have higher rates of illicit drug use, but the social norm in the construction profession is more centered on binge drinking.
- ***Limited resources.*** Many organizations lack the consistent funding or other resources (e.g., supervision, staffing) to support young adult involvement in workplace- and community-based prevention programs
- ***Low levels of readiness (among young people).*** Young people may lack awareness of, or experience addressing, the negative consequences of substance use. They also may not recognize the value of their participation in prevention efforts.
- ***Low levels of readiness (among adults).*** Many adults also are unaware of the value of engaging young adults as valued partners. For example, ageism/adultism² often results in adults discounting the contributions that young adults can make and/or creating an environment where young adults do not feel valued.
- ***Differences in language/culture.*** One of the best places to reach young people is online, using language familiar to young adults from social media—but to do so effectively, prevention programming has to stay abreast of an extremely fluid medium that is often

² Adultism is any behavior, action, language, or limitation placed on young people's rights that does not afford them the respect they deserve as human beings. It is often predicated on the belief that because someone is young, that person lacks intelligence or ability.

at the center of young adult culture. Five years ago the best way to reach young adults was on Facebook; today it's via Twitter or SnapChat. Who knows where it will be tomorrow!

- **Competing interests, needs, and priorities.** These may include limited time, scheduling conflicts, and difficulty capturing the attention of young adults in an increasingly over-saturated media landscape.

Some strategies for overcoming these challenges include the following:

- ✓ **Do your homework!** Learn as much as you can about the specific groups you're trying to reach and target your outreach efforts to meet their needs. Find out about the cultural norms of their workplaces and social groups, as well as how they get their information and which sources they trust.
- ✓ **Identify gatekeepers.** This is particularly important in the workplace. Identify key workplace stakeholders and allies, such as representatives from the human resources and community relations departments.
- ✓ **Build on existing prevention efforts.** For example, integrate prevention messages into general health promotion efforts targeting young people. In the workplace, promote opportunities for involvement in prevention activities at worksite meetings, trainings, and orientations.
- ✓ **Be strategic.** Young adults are highly selective about what they pay attention to—and they are already over-saturated with media messages. So be judicious in what you ask of them and what you expect them to pay attention to.
- ✓ **Create meaningful opportunities** that produce concrete benefits for the people involved—be it work experience, concrete skills (e.g., public speaking, community organization), mentoring support, the opportunity to give back to others, or professional development.
- ✓ **Be organized.** Be concrete and transparent about your expectations for involvement, provide young people with the supports they need to fulfill their responsibilities, and be respectful of schedules.

- ✓ **Provide incentives.** Recognize that young people have many competing priorities so make the time they spend with you worth their while.
- ✓ **Make it easy for people to get involved.** Meet in settings and at times convenient to this age group.
- ✓ **Listen and appreciate!** Provide regular opportunities for eliciting feedback, and respond to what you hear. Show them how their input will be applied to your prevention efforts, and publicly acknowledge the time and effort they gave.

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Engaging Non-College Youth in Prevention Efforts: Examples of Grantees Strategies

Effective recruitment—particularly of hard-to-reach audiences like non-college youth—takes planning. When developing recruitment messages and strategies, be sure to be clear on whom you want to reach and the types of information you want to collect, highlight the direct benefits of participation, and time your efforts carefully. As with all aspects of prevention, it's important that your outreach and engagement strategies are a good match for what you hope to achieve.

This tool highlights some of the outreach strategies volunteered by CSAP prevention grantees during the July 17, 2014 CAPT webinar *Reaching and Mobilizing Non-College 18- to 25-Year-Olds in Prevention Efforts*. It includes strategies for engaging young adults in data collection efforts as well as prevention activities.

What are some strategies you are using to collect and disseminate data on non-college 18- to 25-year-olds?

- ✓ Conducted surveys and focus groups. For example:
 - Administered surveys at Walmart (accompanied by a \$5.00 Walmart Gift Card incentive donated by Walmart)
 - Used eCheckUp, a Web-based alcohol prevention intervention, to gather survey data
 - Linked to surveys on Facebook
 - Coalition members implemented a community survey for 18- to 25-year-olds
- ✓ Obtained contact information for 18- to 25-year-olds through the Department of Motor Vehicles
- ✓ Coalition members led town hall meetings where data was shared and discussed
- ✓ Used raffles and incentives, as well as outreach by interns in the same age group, to recruit young adults at fairs, community events, and churches

What approaches have you used to reach the 18- to 25-year-olds non-college population? On a scale of 1–5, how would you rate your success?

- ✓ Connected with employers (Success = 2/5: getting in the door often takes significant relationship-building and time)
- ✓ Provided training and outreach through Peer Opinion Leaders (Success = 2/5 when peers were asked to self-identify as "leaders in their community"; Success = 5/5 after pulling back, re-assessing, and conducting informal observation of who people gravitated to in social settings and then approaching them to be trained as peer leaders)
- ✓ Shared information on prevention with young parents who are between the ages of 18 and 25; also with parents of children in that age bracket (Success = 4/5 or 5/5, depending on the venue)
- ✓ Connected with young parents through school newsletters (Success = 4/5)
- ✓ Hired a peer outreach coordinator to oversee a Young Moms Group, a weekly drop-in dinner at the Boys and Girls Club where young adults can get help filling out housing applications, etc. (Success = 5/5)
- ✓ Involved young adults in the planning of a faith-based conference; there has been excitement from this group about presenting to their peers
- ✓ Worked with the Department of Human Services to reach foster care youth that are aging out of the system
- ✓ Got involved in Community Neighborhoods Day (located on a play lot in the community) where many young-adult parents visit
- ✓ Disseminated information in hair/nail salons or barbershops
- ✓ Accessed young adults through ToastMasters or Big Brothers and Sisters

Where are non-college 18- to 25-year-olds spending their time outside of the home?

- Summer weekly concert series/free movies in the park

- Fitness centers and gyms
- Waiting room at Economic Services
- Boys and Girls Clubs/teen centers
- “Unofficial” teen hang-out spots (e.g., transit center)
- Fast food locations
- Retailers, such as coffee shops, art shops, electronic shops, game shops, and bookstores
- Clubs
- Golf courses, skate parks, game shops, and bowling alleys
- Library (for Internet access)

What barriers have you encountered trying to mobilize non-college in prevention efforts?

- Finding a “safe-zone”
- Feelings of mistrust of adults and "agency" staff
- Lack of access to reliable transportation
- Young people are wary of "group" messages
- Young people have a sense of invincibility when it comes to substance abuse
- Difficulty promoting a message that goes against messages in pop culture
- Competing priorities for young adult parents, such as jobs and child care
- Difficulty accessing young adult parents
- Instilling confidence among this population that the information they share will be kept confidential
- Being able to provide stipends and skills development opportunities to help with buy-in
- Being too busy at work to make youth engagement a priority

What is one thing you’ve learned today that you can apply to your work in the next six months?

- ✓ Think outside the box on ways to collaborate to meet the needs of this population
- ✓ Make sure not to “lecture” to this population

- ✓ Consider the different places/locations to reach out to young parents
- ✓ Instead of talking about how to reach youth, talk directly to them

Related Resources on CAPT Web Area: www.samhsa.gov/capt

SAMHSA’s Center for the Application of Prevention Technologies (CAPT) has developed numerous resources to support practitioners in preventing substance use among young adults—including those featured in this toolkit. Other examples include:

Resources to prevent underage and binge drinking, such as:

- Sources of Consequence Data for Underage Drinking
- Sources of Consumption Data on Underage Drinking
- Factors Associated with Binge or Episodic Drinking Among Adolescents and Young Adults: Using Prevention Research to Guide Prevention Practice
- Strategies to Prevent Binge or Heavy Episodic Drinking Among Adolescents and Young Adults: Using Prevention Research to Guide Prevention Practice

Resources to prevent youth marijuana use, such as:

- Risk and Protective Factors Associated with Youth Marijuana Use
- Strategies and Interventions to Prevent Youth Marijuana Use: An At-a-Glance Resource Tool
- Prevention Programs that Address Youth Marijuana Use
- Preventing Youth Marijuana Use: An Annotated Bibliography

Resources to support prevention efforts for boys and young men of color, such as:

- Improving the Behavioral Health of Boys and Young Men of Color: Addressing Data Challenges (archived webinar)
- Sources of Data on Boys and Young Men of Color: Key Data Sources

Resources on using social media, such as:

- Developing a Social Media Plan to Support Substance Abuse Prevention Efforts
- Evaluating Social Media Efforts: One Approach to Consider

Feature articles, such as:

- Getting Young Adult Survey Data: A Tale of Two States
- Bringing Youth on Board: SAMHSA's CAPT Prepares Montana for Meaningful Youth Involvement