



2027 Curriculum Guide

**Approved Evidence-Based Substance
Use Prevention Programs**



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Introduction to the Curriculum Guide

The Virginia Foundation for Healthy Youth (VFHY) maintains the Curriculum Guide, a collection of evidence-based youth substance use prevention programs. These programs are designed for implementation by schools, after school programs, community centers, faith-based organizations, and other community organizations to help youth under age 18 remain substance-free.

Each program in the Curriculum Guide involves sustained engagement and instruction delivered over multiple sessions. Depending on the program, instruction may take place in a classroom, through small-group discussions, via virtual learning platforms, or in other settings.

The Curriculum Guide provides an overview of selected programs that VFHY grantees may receive funding to implement through our 2027–2030 Youth Substance Use Prevention Grants. Each program profile includes information such as the intended audience, program structure and requirements, vendor contact information, and links to additional resources.

Required VFHY Nicotine Products Prevention Lesson

Applicants serving middle and high school-age youth are required to include [VFHY's Nicotine Products Prevention Lesson](#) (6th–12th grades) in addition to the evidence-based prevention program selected from this guide. The 15- to 25-minute lesson is available in English and Spanish and should be incorporated into program sessions where most appropriate. See the [RFA Instructions](#) for complete requirements.

For further assistance with selecting the right program for your target audience or additional Curriculum Guide information, please contact:

Michael Parsons
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Program	Type	#/Length of Session	Session Frequency	PK	K	1	2	3	4	5	6	7	8	9	10	11	12
AI's Pals Page 5	Prevention	52 lessons, 15–20 mins. (plus 9 booster lessons*)	2–3x week for 18–26 weeks														
Botvin LifeSkills Training Page 10	Prevention	Elem: 8 lessons, 30–45 mins MS: 15 lessons, 45–50 mins HS: 10 lessons, 40–45 mins Transitions: 6 lessons, 40–45 mins	1–5x week (length depends on level)														
Bright Views Page 18	Prevention	10 lessons, 30–45 mins.	1x week for 10 weeks														
CATCH My Breath Page 23	Prevention	4 lessons, 30–40 mins.	1x week for 4 weeks														
Positive Action Page 32	Prevention	PK–6: 130–140 lessons, 5–15 mins Grades 7–12: 82–130 lessons, 15–20 mins	2–4x week for 10–36 weeks														
Too Good for Drugs – Maximizing Life Page 39	Prevention	10 lessons, 30–50 mins.	1x week for 10 weeks														
You and Me, Together Vape-Free** Page 44	Prevention	5 lessons, 35–40 mins.	1–5x per week for 1–5 weeks														
Healthy Futures (optional intervention) Page 48	Alternative to suspension	2 lessons Self-paced lesson: 40–60 mins. Facilitated lesson: 2–4 hours	Both lessons in one week														

Evidence Levels

Evidence-based and recently studied within the last 10 years

Evidence-based, studied 10+ years ago

*AI's Pals booster lessons for grades 2–3

**If you choose to implement You and Me, Together Vape-Free, you have the option of implementing Healthy Futures as well. VFHY will not fund Healthy Futures alone.



Al's Pals™
Kids Making Healthy Choices

Al's Pals: Kids Making Healthy Choices

Teaching Strategies, LLC

Program Overview

Program summary	Al's Pals: Kids Making Healthy Choices is an evidence-based social-emotional learning and resilience-building curriculum for children ages 3–8. Through engaging puppet-led lessons, songs, stories, and hands-on activities, children develop self-control, emotional regulation, problem-solving, healthy decision-making, and positive social skills. The program helps children build protective factors that support school readiness and long-term mental health while reducing risk factors associated with later substance use, violence, and other challenging behaviors. It is designed for use in preschool, pre-K, kindergarten, and early elementary classrooms.
Program outcomes	Formal evaluations have demonstrated that Al's Pals improves children's social-emotional competence and resilience — protective factors associated with long-term healthy decision-making and reduced risk for substance use. Documented outcomes include: • Increased social-emotional competence, including self-control, emotional regulation, problem-solving, and positive social skills. • Increased social independence and positive coping behaviors. • Decreased emotional distress, anxiety, attention problems, social withdrawal, explosive behaviors, and antisocial behaviors. • Improved classroom behavior and school readiness. • Increased protective factors associated with resilience and healthy decision-making.
Audience	Ages: 3–6 (Booster lessons: Ages 7–8) Grade Levels: PK–1st Grade (Booster lessons: 2nd–3rd)



Available Languages	English & Spanish
Program Details	Type: Prevention Class size: No min. or max. Number of lessons: 52 (+9 boosters for grades 2–3) Lessons required to achieve fidelity: 52 (for grades 2–3, 9 boosters) Length of each lesson: 15–20 mins. Frequency of implementation: 2–3x week Duration of implementation: 18–26 weeks (Boosters have shorter duration) Recommended intervention site: School and community

Evidence & Evaluation

Program materials last updated	Materials have not been updated within the last 4 years.
Recent program evaluation	While the program is evidence-based and was last evaluated in 2004 , it has not been formally evaluated within the last 10 years.
Cost-effectiveness / ROI evaluation	No evaluation of cost-effectiveness.
Third-party evidence designations	• The National Center on Quality Teaching and Learning – Rated highest level of evidence of effectiveness • Substance Abuse and Mental Health Services Administration – Designated Model Program • Department of Education – Designated Effective School-Based Prevention Program
Evaluation & fidelity tools	Al's Pals includes several tools and resources to support implementation quality and program evaluation, including: • Teacher implementation (fidelity) checklists to monitor whether lessons are delivered as designed. • Implementation observation tools for coaches or administrators to assess fidelity and instructional quality. • Child behavior and social-emotional assessment measures used to evaluate outcomes such as self-control, emotional regulation, social skills, and problem-solving.

Implementation

How the program works	Al's Pals is delivered through interactive, scripted lessons led by classroom teachers using engaging puppets, stories, songs, discussions, and hands-on activities. • Children participate in two 15–20-minute lessons each week that teach social-emotional skills such as self-control, emotional regulation, problem-solving, healthy decision-making, empathy, and positive peer relationships. • Teachers reinforce these concepts throughout the school day using program strategies and activities. • Family take-home materials extend learning into the home, helping caregivers reinforce the same skills and promote consistent social-emotional development across settings.
Implementation requirements	To implement Al's Pals with fidelity, classrooms should deliver all 52 core lessons in sequence, twice per week, over approximately 26 weeks. Lessons should be taught by the classroom teacher or another trained early childhood educator, with ongoing reinforcement of the program's social-emotional concepts throughout daily classroom routines. To maintain fidelity, educators should: • Deliver all scripted lessons as designed. • Use the required puppets, stories, songs, and lesson materials. • Reinforce skills daily through classroom interactions. • Utilize implementation and fidelity monitoring tools provided by the program. • Participate in ongoing coaching or technical assistance as needed.
Family engagement components	Al's Pals includes family engagement resources that reinforce the social-emotional skills children are learning in the classroom. Components include: • Take-home family letters and activity sheets that explain each lesson and provide simple activities to practice skills at home. • Family tip sheets with strategies for supporting emotional regulation, problem-solving, and positive behavior. • Home-school connection materials that encourage caregivers to reinforce key concepts through everyday interactions. • Resources for teachers to facilitate ongoing communication with families about children's social-emotional development. These materials help strengthen the connection between school and home by giving families practical ways to support resilience, self-control, and healthy decision-making outside the classroom.
Materials & Costs	Required materials: Official Al's Pals curriculum kit, which includes scripted lesson manuals, puppets, storybooks, music, activity materials, family engagement resources, and implementation guides. Cost: \$1,219 per classroom per year

Training & Costs	Training requirement: Not required Cost: Trainings can be purchased from Teaching Strategies, cost varies based on length of training. • Private 6-hour training: \$4,185.00 • Private 3-hour virtual training: \$2,092.50 Duration: 6-hour session or 3-hour session Min/Max number of participants: 30 Train-the-trainer option: Not available
Virtual implementation	Although Al's Pals was designed for interactive, in-person classroom instruction, it has been successfully implemented in virtual learning environments.

Program Provider Contacts

Training & program information	Stephanie Legan stephanie.l@teachingstrategies.org 240-213-5208
Material information	Stephanie Legan stephanie.l@teachingstrategies.org 240-213-5208
Website	https://teachingstrategies.com/product/als-pals-social-emotional-learning-curriculum/

Substance, Tobacco & Nicotine Use Prevention

Substances addressed	Al's Pals is a universal prevention program that builds protective factors associated with preventing a broad range of future substance use. Rather than focusing on individual drugs, the program teaches children to recognize unsafe substances, make healthy decisions, and seek help from trusted adults. The program addresses prevention of: • Alcohol • Marijuana (Cannabis) • Prescription medication misuse • Over-the-counter medication misuse • Inhalants • Tobacco and nicotine products (including e-cigarettes/vaping when incorporated into instruction) • Other harmful or unknown substances
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Lessons/ modules that address vaping	No modules that address vaping specifically.
Lessons that address tobacco/ nicotine	• Lesson 30 – Taking Care of Ourselves • Lesson 35 – What's Safe to Taste? • Lesson 38 – What's Safe to Touch? • Lesson 39 – Just for Grown-Ups

Program Replication Contacts

Organizations with experience implementing this program

Contact	Address	Phone Number	Email Address
Hattie Harris, Alternatives, Inc.	359 Fenwick Road Building 263 Ft. Monroe, VA 23651	(757) 838-2330	hharris@altinc.org
Lori Carlton, Endless Opportunities	300 Towne Center Drive Abingdon, VA 24210	(276) 628-2160	lcarter@eoco.org
Jackie Cadotte, Danville-Pittsylvania Community Services	245 Hairston St, Danville, VA 24540	(434) 799-0456	jcadotte@dpcs.org



Botvin LifeSkills Training (LST)

Princeton Health Press

Program Overview

Program summary	The Botvin LifeSkills Training (LST) program is an evidence-based substance abuse and violence prevention curriculum designed for youth in grades 3–12. Backed by more than 40 peer-reviewed publications, LST has been proven to reduce tobacco and vaping (nicotine-based products), alcohol, marijuana, prescription drug (opioid) misuse, violence, and more by teaching key skills to avoid health risks. LST equips students with core life skills, including personal self-management (decision-making, managing emotions, goal setting, etc.), general social and communication skills (effective communication and relationship-building), and drug resistance skills (assertiveness, advertising and media, myths and realities, etc.) to lead healthy and drug-free lives.
Program outcomes	LST is highly effective at reducing smoking, vaping, and substance use: • Elementary, Middle School, and E-Learning Middle School curricula have been shown to reduce smoking by more than 60%. • The High School curriculum has been shown to reduce overall substance use by more than 50%.
Audience	Ages: 8–17 Grade Levels: 3rd –12th
Available Languages	English & Spanish (Spanish language support is available for Middle School levels 1, 2, and 3, as well as High School)

Continued on next page →

**Program
Details****Type:** Prevention**Class size:** 4–30**Number of lessons:**

- Elementary Level 1: 8 lessons
- Elementary Level 2: 8 lessons
- Elementary Level 3: 8 lessons
- Middle School Level 1: 15 lessons
- Middle School Level 2: 10 lessons
- Middle School Level 3: 5 lessons
- E-Learning Middle School: 15 lessons
- High School: 10 lessons
- E-Learning High School: 8 lessons
- Transitions (Grades 11–12): 6 lessons

Lessons required to achieve fidelity: All lessons within the selected level are required for fidelity.**Length of each lesson:** Elementary: 30–40 mins.; All other lessons: 45–50 mins.**Frequency of implementation:** 1x week or 2-3 times a week**Duration of implementation:**

Program level	Min. (2-3 times a week all grade levels)	Max. (1x week)
Elementary	2 weeks	8 weeks
Middle School Level 1	2.5 weeks	15 weeks
Middle School Level 2	2 weeks	10-12 weeks
Middle School Level 3	1 week	5 weeks
E-Learning Middle School	3 weeks	15 weeks
High School	2-3 times a week	10 weeks
E-Learning High School	2 weeks	8 weeks
Transitions (Grades 11–12)	2 weeks (2-3 times a week)	6 weeks

Recommended intervention site: School and community



Evidence & Evaluation

Program materials last updated	All LST Program materials for teachers and students are updated regularly when appropriate. For example, graphs, charts, and data. Additional updates are in progress, but materials have not been updated within the last 4 years.
Recent program evaluation	The curriculum has been evaluated within the last 10 years: - Williams, C., Griffin, K. W., Botvin, C., Sousa, S. & Botvin, G. J. (2023). Effectiveness of digital health tools to prevent bullying among middle school students when combined with a cognitive-behavioral skills training classroom program. - Adolescents 3(1), 110-130. Griffin, K. W., Botvin, G. J., Scheier, L. M., & Williams, C. (2023). - Long-term behavioral effects of a school-based prevention program on illicit drug use among young adults. Journal of Public Health Research., 12(1), 1-5. Griffin KW, Williams C, Botvin CM, Sousa S and Botvin GJ (2022). - Effectiveness of a hybrid digital substance abuse prevention approach combining e-Learning and in-person class sessions. Front. Digit. Health 4:931276. Williams, C., Griffin, K.W., Mehta, R.K. & Botvin, G.J. (2021). - Testing an evidence-based drug abuse and violence preventive approach adapted for youth in juvenile justice diversionary settings. Health Justice 9, 3. Velasco V., Griffin, K.W., Botvin, G.J., and Corrado Celata and Gruppo LST Lombardia. (2017). - Preventing Adolescent Substance Use Through an Evidence-Based Program: Effects of the Italian Adaptation of Life Skills Training. Prevention Science.
Cost-effectiveness / ROI evaluation	Multiple independent return-on-investment (ROI) analyses demonstrate that the Botvin LifeSkills Training (LST) program delivers significant long-term financial and social savings relative to its implementation costs. State and national reports show exceptionally high cost-benefit ratios, ranging from \$15.97 up to \$44.81 returned per dollar invested. The Washington State Institute for Public Policy's current LST model reports, per participant: Total benefits: \$1,881, Net program cost: \$118, Benefits minus costs: \$1,763, Benefit-cost ratio: 15.97:1, Probability benefits exceed costs: 63% The report The Economic Return on PCCD's Investment in Research-Based Programs applied benefit-cost estimates to Pennsylvania implementation. For LST, it reported: \$25.72 returned per dollar invested, \$808 in net benefit per student, approximately \$1.70 million in total economic benefit for a Tioga County example serving 2,100 students, a projected \$16.16 million statewide benefit from serving approximately 20,000 students. Substance Abuse Prevention Dollars and Cents: A Cost-Benefit Analysis reported an LST-specific: 21:1 cost-benefit ratio, approximately \$4,380 in net benefits per pupil https://www.samhsa.gov/sites/default/files/cost-benefits-prevention.pdf DPH-DMH Analysis on Life Skills Training, per person cost-benefit Expected Case Dollars Total Benefits \$1,479, Cost (Net) \$33, Benefits - Costs (NPV) \$1446, Benefits / Costs (Ratio) \$44.81



Third-party evidence designations	Botvin LifeSkills Training (LST) has been selected for the highest honors by numerous government agencies and registries that recognize exemplary, model, and model plus programs. • Blueprints for Healthy Youth Development – Model Plus (Highest distinction) • Social Learning Programs – Top Tier (Highest distinction) • National Institute of Justice: Crime Solutions – Very Effective (Highest distinction) • SAMHSA National Registry of Evidence-Based Programs and Practices (NREPP): QOR Score (Quality of Research) 3.9 out of 4.0; Readiness Score (Materials, dissemination, training services, etc). 4.0 out of 4.0 Center for Substance Abuse Prevention (CSAP) • U.S. Department of Health and Human Services (HHS) – Model Program (highest distinction) • Office of the Surgeon General, Facing Addiction in America: The Surgeon General’s Report on Alcohol, Drugs, and Health. Washington, DC: HHS, November 2016.
Evaluation & fidelity tools	All LST program levels have pre-tests and post-tests, as well as fidelity checklists.



Implementation

How the program works	Botvin LifeSkills Training (LST) builds student competency in three interconnected areas: Personal Self-Management Skills, General Social and Communication Skills, and Drug-Resistance Skills. Together, these domains address factors associated with tobacco and nicotine use, underage drinking, opioid and prescription drug misuse, illicit drug use, and other risky behaviors. LST uses an interactive, skills-based teaching approach rather than relying primarily on information delivery. Teachers introduce and explain each skill, model its use, and guide students through discussion, role-play, behavioral rehearsal, coaching, and feedback. Practice progresses from simple situations to more realistic and challenging scenarios, helping students develop confidence and apply skills outside the classroom. Personal Self-Management Skills Students learn problem-solving, decision-making, and critical-thinking skills; strategies for recognizing and resisting advertising appeals; techniques for coping with stress and anxiety; emotional self-regulation; anger and frustration management; and skills that support personal growth and healthy choices. General Social and Communication Skills Students develop skills for communicating clearly, listening effectively, avoiding misunderstandings, overcoming shyness, interpreting verbal and nonverbal communication, building healthy relationships, and expressing themselves assertively. Interactive practice helps students move from understanding these skills to using them confidently in real-life situations. Drug-Resistance Skills Students learn to recognize and resist social pressures to use alcohol, tobacco, nicotine products, opioids, prescription medications, and other drugs. Lessons address the consequences of substance use and correct misconceptions about how common drug use is among youth and adults. Drug-resistance skills are also reinforced throughout the curriculum. Students apply decision-making, assertiveness, communication, and emotional self-management skills when responding to peer pressure and other high-risk situations. This integrated approach gives students practical skills for making healthy decisions and resisting substance use.
Implementation requirements	LST Fidelity Guidelines for all LST programs (including e-learning) are as follows: • Teach the full scope and sequence of the LST curriculum. • Teach at least one time per week until all units are taught (more than one lesson per week is also effective) • Teach the lessons in the order presented LST student materials and teacher's manuals are required for implementation. The LST program can be effectively delivered by a diverse group of facilitators, including classroom teachers, school counselors, and prevention specialists. It is also well-suited for health and mental health professionals, social workers, and community youth educators who engage with students directly. Additionally, law enforcement officers, older peer leaders, and after-school program leaders can successfully deliver the program.



Family engagement components	Elementary levels include Parent Letters for each lesson. High School and E-Learning High School levels include a family communications lesson.
Materials & Costs	Required materials: A curriculum set for each level (elementary, middle school and high school) includes one teacher's manual and 30 student guides (E-Learning modules include Student Keys, available for purchase in 10-packs). Year 1 Program Materials: • Elementary School Year 1: \$235, additional 10 pack student Guide: \$50 • Middle School Year 1: \$295, additional 10 pack student Guide: \$60 • E-Learning Middle School 1: \$100 10-pack Student Keys; \$85/Teacher's Manual • High School: \$265, additional 10 pack student Guide: \$60 • E-Learning High School: \$100 10-pack Student Keys; \$85/Teacher's Manual • Transitions: \$265, additional 10 pack student Guide: \$60 Booster Materials (Years 2 & 3): • Elementary School Year 2: \$235 • Elementary School Year 3: \$235 • Middle School Year 2: \$245 • Middle School Year 3: \$175 • Elementary School Full Set (all 3 years): \$655 • Middle School Full Set (all 3 years): \$645 Additional Student Guides: • Elementary Level 1: \$50 per pack of 10 • Elementary Level 2: \$50 per pack of 10 • Elementary Level 3: \$50 per pack of 10 • Middle School Level 1: \$60 per pack of 10 • Middle School Level 2: \$50 per pack of 10 • Middle School Level 3: \$40 per pack of 10 • E-Learning Middle School: \$100 per pack of 10 (Student Keys) • High School: \$60 per pack of 10 • E-Learning High School: \$100 per pack of 10 (Student Keys) • Transitions: \$60 per pack of 10 Optional Materials: • LST Galaxia Online Bullying Cyberbullying Game: \$950 per teacher • Botvin Health Connections: Electronic Cigarettes and Vaping: Free • LST Middle School Companion Website: Free • LST High School Companion Website: Free



Training & Costs	Training requirement: Preferred Cost: Contact Nina for most up-to-date info • Online training: \$300/person • In-person training: \$4,000 + trainer travel (est. \$1,800) Duration: 6 hours Participant capacity: 6–20 Train-the-trainer option: Yes • Cost: \$1,500 per participant • Eligibility: (1) be trained by a PHP LST Trainer in LST, (2) teach any one level of the LST program, and (3) complete a 2-day ToT certification training workshop.
Virtual implementation	The e-learning versions for grades 6–12 – e-LST Middle School and e-LST High School – are available in an e-learning 'hybrid' implementation format.

Program Provider Contacts

Training & program information	Nina Daley 914-421-2525 ext. 218 ndaley@lifeskillstraining.com
Material information	Kyle Spinks 914-421-2525 ext. 216 kspinks@lifeskillstraining.com
Website	lifeskillstraining.com

Substance, Tobacco & Nicotine Use Prevention

Substances addressed	• Cuts alcohol use by 60% • Cuts marijuana use by 75% • Cuts methamphetamine use by 68% • Cuts polydrug use by 66% • Reduces Pack-a-Day Smoking by 25% • Cuts risk for Rx & opioid misuse • Decreases Use of Inhalants, Narcotics and Hallucinogens • Reduces Violence and Delinquency • Reduces risky driving behavior
Lessons/ modules that address vaping	• The Botvin Health Connections: Electronic Cigarettes and Vaping resource connects vaping in LST Elementary, Middle School, and High School print programs. • E-learning versions of LST (e-LST Middle School and e-LST High School) also address vaping and smoking.

**Lessons
that address
tobacco/
nicotine**

LST addresses tobacco, vaping, and other nicotine-based products. Many lessons across all levels address or incorporate nicotine-based products (smoking, tobacco use, e-cigarettes and vaping) including Smoking Myths and Realities, Smoking and Biofeedback, Advertising (resisting tobacco advertising), Decision-Making and Assertiveness (refusal skills to resist peer pressure).

Program Replication Contacts

Organizations with experience implementing this program

Contact	Address	Phone Number	Email Address
Lee Winterhalter, Fayette County Drug & Alcohol Commission, Inc.	100 New Salem Road, Suite 106, Uniontown, PA 154	(724) 970-3487	LWinterhalter@fcdaa.org
Christopher Harmon, Compact	380 McDow Rd Columbiana, AL 35051	205-746-8831	CHARMON@shelbyso.com
Ronna Yablonski, Safe Project	1201 Wilson Blvd, Arlington, Virginia 22209	(240) 485-1001	ronna@safeproject.us



Bright Views

Virginia Health Sciences at Old Dominion University

Program Overview

Program summary	Bright Views is a research-based social and emotional (SEL) curriculum designed for children ages 3–6 developed by researchers and early childhood experts at Virginia Health Sciences at Old Dominion University. The program includes 10 engaging, play-based lessons that help children build essential social-emotional skills. Designed for flexibility, Bright Views can be adapted to fit a variety of early learning settings while aligning with existing early childhood learning standards. Participating sites receive self-paced online training, a comprehensive curriculum kit, ongoing implementation support, and access to professional development resources. To evaluate program impact and support continuous improvement, teachers complete pre- and post-assessments that measure student growth in key social-emotional competencies, along with feedback throughout and after the program.
Program outcomes	Bright Views was evaluated with more than 300 preschool children across diverse early childhood settings. Children demonstrated significant improvements in all ten measured social-emotional competencies following the program, with approximately one-third showing measurable gains in each skill area. Overall, the percentage of children rated as proficient increased from 47% before the program to 62% afterward, while lower-performing ratings decreased. Improvements were observed across diverse demographic groups and implementation settings, suggesting Bright Views is an effective and broadly applicable approach for strengthening preschoolers' social-emotional development. A detailed results report can be provided upon request. Bright Views has not directly measured tobacco- or nicotine-specific outcomes, as this is not developmentally appropriate for this age group. However, the curriculum has demonstrated improvements in protective social-emotional competencies — including self-management, emotion regulation, self-efficacy, social awareness, and decision-making skills — that are recognized as protective factors associated with healthy behavior and substance use prevention later in life.



Audience	Ages: 4-6 Grade Levels: PK–1st
Available Languages	English
Program Details	Type: Prevention Class size: No min. or max. Number of lessons: 10 Lessons required to achieve fidelity: 10 Length of each lesson: 30– 45 mins. Frequency of implementation: 1x week, though flexibility is encouraged to best meet the needs of different classrooms and environments. While most teachers deliver one complete Bright Views lesson weekly, others choose to integrate the same lesson into shorter lessons spread throughout the week. Resources are provided for different implementation strategies, encouraging teachers to use the curriculum in the way that works best for their unique classroom and student needs. Duration of implementation: 10 weeks Recommended intervention site: School and community

Evidence & Evaluation

Program materials last updated	Materials have been updated within the past 4 years and are revised as needed based on teacher feedback and student outcomes.
Recent program evaluation	The program has undergone rigorous evaluation by researchers at ODU over the last 2 years, assessing child outcomes pre- and post-program, teacher satisfaction, and fidelity. Pilot evaluation has demonstrated improvements in children’s social-emotional skills and high teacher satisfaction. A detailed results report can be provided upon request.
Cost-effectiveness / ROI evaluation	The program has not been formally evaluated; however, the program was intentionally designed to be a low-cost, scalable intervention that can be implemented within existing early childhood education settings with minimal disruption to classroom instruction. Pilot evaluation has demonstrated improvements in children’s social-emotional skills and high teacher satisfaction, suggesting the program has the potential to produce meaningful benefits relative to its implementation costs.

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Third-party evidence designations	Bright Views is still in the early stages of dissemination and has undergone pilot evaluation demonstrating improvements in preschool children's social-emotional competencies and high implementation feasibility across multiple early childhood settings. As Bright Views continues to expand, we are conducting additional implementation and effectiveness research, including larger-scale evaluations, with the goal of meeting the evidence standards required for future review by national evidence clearinghouses.
Evaluation & fidelity tools	Bright Views includes a comprehensive evaluation process to measure student growth and teacher satisfaction. Teachers complete a pre-assessment with students before beginning the curriculum and a post-assessment after completing all lessons to measure changes in key social-emotional competencies. At the midpoint of implementation, teachers complete a Midpoint Evaluation which collects program feedback, and a Bright Views staff member visits the classroom for a Fidelity Check to ensure the curriculum is being delivered as intended. Upon completion of the program, teachers also complete a brief feedback survey to share their experiences and suggestions.

Implementation

How the program works	Before beginning the curriculum, teachers complete a self-paced online teacher training and a student pre-assessment. They then receive a curriculum kit containing all lesson materials and implement ten play-based social-emotional learning lessons, typically over a 10-week period. Each lesson includes circle time, an interactive story, music and movement, hands-on activities, and reflection, while allowing teachers the flexibility to adapt pacing and activities to meet their classroom's needs. Midway through implementation, teachers participate in a midpoint evaluation and fidelity check to receive support and provide feedback. After completing all lessons, teachers complete a post-assessment and feedback survey to measure student growth and help guide ongoing program improvement.
Implementation requirements	Teacher training; complete Bright Views curriculum kit; digital access and online teacher portal; student pre/post-assessments.
Family engagement components	Before the start of Bright Views, parents receive a welcome letter introducing the Bright Views curriculum and specific lesson topics. The letter explains the benefits of social-emotional learning, encourages families to reinforce these new skills at home using the provided resources, and invites them to contact the Bright Views team with any questions. Parents also receive information about the evaluation program and are given the opportunity to opt their child out of the research component while still participating in classroom instruction. Following each Bright Views lesson, families receive a handout summarizing the lesson focus and key concepts children learned, suggested activities to reinforce the skills at home, and quick preview of the next lesson.



Materials & Costs	Required materials: Bright Views curriculum kit + digital access Cost: \$599 initial purchase, \$240/annual subscription fee beginning in year 2
Training	Training requirement: Required Cost: Included in curriculum cost Duration: 2 hours, online and self-paced. Participant capacity: No min. or max. Train-the-trainer option: Not at this time, though sites are able to sign up multiple teachers per classroom.
Virtual implementation	Bright Views is designed to be implemented in-person with children ages 3–6 and does not currently have a standard virtual implementation model. However, if a participating site needs to deliver the program virtually, the Bright Views team will work closely with the site to adapt lessons, activities, and materials while maintaining the key objectives and fidelity of the curriculum.

Program Provider Contacts

Training & program information	Sara Rothenberg, Bright Views Project Director Nicole Beer, Bright Views Project Coordinator info@brightviews.org
Material information	Nicole Beer, Bright Views Project Coordinator info@brightviews.org
Website	brightviews.org

Substance, Tobacco & Nicotine Use Prevention

Substances addressed	Bright Views does not include lessons that specifically address substance use, as it is not developmentally appropriate at this age level. Instead, the curriculum focuses on building foundational social-emotional skills, in a developmentally appropriate way, that serve as protective factors against future risky behaviors, including substance use.
Lessons/ modules that address vaping	No lessons focused on vaping.
Lessons that address tobacco/ nicotine	No lessons focused on tobacco/nicotine use.



Program Replication Contacts

Organizations with experience implementing this program

Contact	Address	Phone Number	Email Address
Dr. Joy Hernandez, Hampton University Child Development Center	137 William R Harvey Way, Hampton, VA 23668	757-727-5698	joy.hernandez@hamptonu.edu
Luz Padilla, Children's Learning Paradise	612 Fremac Dr, Virginia Beach, VA	757-491-1330	
Alison Noble, Yolanda, First Connections for Early Success	209 E Cawson St, Hopewell, VA 23860	804-458-6329 x-2022	anoble@arls.org ; pace2u@comcast.net



CATCH My Breath

CATCH Global Foundation

Program Overview

Program summary

CATCH My Breath is an evidence-based vaping and nicotine prevention curriculum for grades 5–12 developed at the University of Texas School of Public Health using social cognitive theory. The program is informed by youth prevention researchers and practitioners, [real-world implementation](#), and input from a [youth advisory board](#). Through peer-facilitated lessons, students build knowledge about e-cigarette harms, strengthen refusal skills, and develop healthier norms around vaping. [Research has shown](#) that the program can reduce the likelihood of e-cigarette initiation among youth.

High school students can also participate in the Students Teach Students model, which prepares them to serve as peer educators and deliver CATCH My Breath lessons to peers and younger students under adult mentorship.



Program outcomes	Evaluation findings across multiple studies and implementation settings have shown a range of positive outcomes associated with CATCH My Breath, including: • Reduced e-cigarette initiation among middle school students, including nearly fourfold lower odds of initiating e-cigarette use in a randomized controlled trial. (<i>Mantey et al., 2025</i>) • Reduced e-cigarette initiation by 46% among middle school students in an earlier quasi-experimental study. (<i>Kelder et al., 2020; Kelder et al., 2021</i>) • Decreased current e-cigarette use in some real-world school implementations. (<i>Burchfield et al., 2024; Guiler et al., 2024</i>) • Improved student knowledge about the health risks and contents of e-cigarettes and vaping products. (<i>Baus et al., 2026; Burchfield et al., 2024; Cole et al., 2024; Baker et al., 2022</i>) • Increased students' confidence in their ability to refuse e-cigarettes. (<i>Baus et al., 2026</i>) • Reduced perceived peer influence and social norms supportive of vaping in some evaluations. (<i>Burchfield et al., 2024; Cole et al., 2024</i>) • Increased students' self-reported intention or perceived likelihood to avoid vaping. (<i>Baus et al., 2026</i>) • Demonstrated positive outcomes across middle and high school settings and in U.S. and international implementations. (<i>Baus et al., 2026; Burchfield et al., 2024; Cole et al., 2024; Guiler et al., 2024; Kelder et al., 2020</i>) • Demonstrated positive implementation experiences and acceptability in school settings. (<i>Baus et al., 2026; Moosbrugger et al., 2023</i>) Citations and additional research findings are available in Research & Evaluation section.
Audience	Ages: 10–18 Grade Levels: 5th–12th
Available Languages	English and Spanish (Grades 7–8 and 9–12 core curricula are also available in Portuguese) Contact kerry@catch.org if you would like to discuss access to the Portuguese resources.
Program Details	Type: Prevention Class size: 5–35 Number of lessons: 4 (plus optional supplemental lessons) Lessons required to achieve fidelity: 4 Length of each lesson: 35 mins. Frequency of implementation: 1x week Duration of implementation: 4 weeks Recommended intervention site: School and community

Evidence & Evaluation

Program materials last updated	Program materials have been updated within the last 4 years. CATCH My Breath's core program materials have been regularly updated to reflect the evolving vaping landscape, including updated statistics, current information on available products, and refreshed advertising/marketing samples reflecting industry tactics. Within this timeframe, CATCH also introduced the Students Teach Students (STS) model, expanding the program's peer-leadership component and extending its reach through trained high school peer educators.
Recent program evaluation	Program has been evaluated within the last 10 years: • Mantey, D. S., Springer, A. E., Chen, B., Omega-Njemnobi, O., Clendennen, S., Garza, P., Bianco, M., Van Dusen, D., & Kelder, S. H. (2025, March). <i>Evaluation of the CATCH My Breath e-cigarette prevention program: A randomized control trial (RCT)</i> [Poster presentation]. Society for Research on Nicotine and Tobacco Annual Meeting. Note: Peer-reviewed journal publication is pending. • Baus, A., Burchfield, K., Chill, C., Litton, A., Bolen, S., Barclay, C. T., Mickey, C., Parker, R., Eubank, S., Thacker, R. T., Payne, H., & Doyle, D. (2026). Statewide youth vaping prevention in West Virginia: Two-year outcomes of CATCH My Breath. <i>Journal of Primary Care & Community Health</i>, 17, 21501319261428032. https://doi.org/10.1177/21501319261428032 • Burchfield, K., Doyle, D., Mantey, D., Bennett, T., & Baus, A. (2024). The CATCH My Breath vaping prevention curriculum: An evaluation of impacts in Central Appalachian middle and high schools, 2019–2023. <i>Journal of Primary Care & Community Health</i>, 15, 21501319241277393. https://doi.org/10.1177/21501319241277393 • Cole, A. G., Fairs, L., Mantey, D., Philipneri, A., Degano, C., Bianco, M., & Kelder, S. H. (2024). The impact of the 'CATCH My Breath' vaping prevention curriculum among high school students in Ontario, Canada: Results of a pilot test. <i>Preventive Medicine Reports</i>, 48, 102919. https://doi.org/10.1016/j.pmedr.2024.102919 • Guiler, C. R., Hessock, M., & Sehring, M. (2024). <i>Reducing e-cigarette use among high school students: An evidence-based practice improvement project</i> [Poster]. Graduate Publications and Other Selected Works—Doctor of Nursing Practice (DNP), University of Tennessee, Knoxville. https://trace.tennessee.edu/dnp/122/ • Moosbrugger, M., Losee, T. M., González-Toro, C. M., Drewson, S. R., Stapleton, P. J., Ladda, S., & Cucina, I. (2023). Pre-service teachers' perceptions and experiences implementing CATCH My Breath. <i>American Journal of Health Education</i>, 54(1), 20–28. https://doi.org/10.1080/19325037.2022.2142336 • Baker, K. A., Campbell, N. J., Noonan, D., Thompson, J. A., & Derouin, A. (2022). Vaping prevention in a middle school population using CATCH My Breath. <i>Journal of Pediatric Health Care</i>, 36(2), 90–98. https://doi.org/10.1016/j.pedhc.2021.07.013 • Kelder, S. H., Mantey, D. S., Van Dusen, D., Case, K., Haas, A., & Springer, A. E. (2020). A middle school program to prevent e-cigarette use: A pilot study of "CATCH My Breath." <i>Public Health Reports</i>, 135(2), 220–229. https://doi.org/10.1177/0033354919900887 • Kelder, S. H., Mantey, D. S., Van Dusen, D., Vaughn, T., Bianco, M., & Springer, A. E. (2021). Dissemination of CATCH My Breath, a middle school e-cigarette prevention program. <i>Addictive Behaviors</i>, 113, 106698. https://doi.org/10.1016/j.addbeh.2020.106698



Cost-effectiveness / ROI evaluation	Though cost effectiveness has not been formally evaluated, CATCH My Breath is designed to be highly cost-effective for schools and districts. The curriculum itself is provided free of charge, with costs limited to optional professional development. This low-cost, high-accessibility model allows schools to adopt an evidence-based prevention program with minimal budget impact.
Third-party evidence designations	CATCH My Breath was formally recognized by SAMHSA in its Evidence-Based Resource Guide Series, “Reducing Vaping Among Youth and Young Adults” as a school-level intervention focused on the implementation of interventions in school-based settings. CATCH My Breath has also been recognized by the Community Anti-Drug Coalitions of America (CADCA) as a leading vaping prevention resource for schools and is featured in CADCA-affiliated coalition implementation examples nationwide.
Evaluation & fidelity tools	• Student evaluation: Optional pre-/post-surveys assessing knowledge, attitudes, e-cigarette use and experiences, and program feedback. • Training evaluation: Post-training surveys assessing facilitator feedback, training quality, and preparedness to implement the program. • Fidelity monitoring: Optional Usage Reports showing curriculum access by organization, educator, and lesson, including whether lessons were accessed according to the recommended pacing. Reports do not measure lesson delivery quality or student engagement.

Implementation

How the program works	CATCH My Breath is a peer-facilitated vaping and nicotine prevention curriculum for grades 5–12. The core curriculum consists of four classroom lessons per grade group (5, 6, 7–8, and 9–12), each approximately 35 minutes and designed for delivery one lesson per week over four consecutive weeks. Each lesson includes a full lesson plan with learner outcomes, step-by-step directions, and presentation slides. Rooted in social cognitive theory, lessons use cooperative learning groups, discussion, and goal setting to build students’ knowledge of e-cigarette harms, expose youth-targeted marketing tactics, and let students practice refusal skills, reinforcing non-use as the peer norm rather than relying solely on adult-delivered messaging. All classroom lessons and parent resources are available in both English and Spanish, and the program is aligned to CDC National Health Education Standards, SHAPE NHES 2024 Standards, Common Core Standards, and CASEL Standards. Beyond the core lessons, schools can layer in optional supplements: STEM, and Humanities extensions, virtual field trips, student self-paced modules, environmental supports like intercom announcements and signage, and video lessons (grades 6-8, providing an alternate delivery format).
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Implementation requirements

CATCH My Breath is designed to be implemented with fidelity through a structured combination of educator training and consistent lesson delivery, rather than as a stand-alone set of materials handed to teachers.

While the core curriculum itself is straightforward to access and free to U.S. schools, successful outcomes depend on a few key components working together: trained facilitators and adherence to the recommended lesson sequence and pacing. When feasible, coordination with families before implementation begins is preferred.

CATCH My Breath is designed to be highly accessible to organizations and schools of every size and capacity; it does not require specialized health education staff or advanced credentials. The core requirement is a trusted adult facilitator, ideally someone students already know and feel comfortable with, such as a classroom teacher, health or PE teacher, school counselor, school nurse, or community health worker. Any of these roles can successfully deliver the program. For best results, the same facilitator should deliver all four lessons to a given group of students, providing continuity and reinforcing the trusted relationship at the heart of the program's peer-and-adult-supported approach.

While CATCH My Breath can technically be delivered by an untrained adult using the provided lesson plans, outcomes are strongest when the facilitator has completed CATCH-provided training. SAMHSA itself has noted that training is "vital" for successful implementation and to build program capacity.

Delivery fidelity requirements:

- Deliver all 4 core lessons, each approximately 35 minutes, following the recommended cadence of 1 lesson per week for 4 consecutive weeks.
- Use the complete lesson plan and materials as provided (learner outcomes, directions, presentation slides), rather than partial or modified delivery.
- Maintain peer-facilitated group activities within lessons rather than delivering a straight lecture. Parent/Family Notification. Depending on District requirements: prior to beginning the program, the Parent Program Notification Letter (digital or hard copy) informing families of program content and the youth vaping epidemic context may be required. If administering the optional student survey, a separate Parent Survey Notification Letter (with opt-out option) may be required. Evaluation Components

Optional, but recommended:

- Pre-/post-student surveys assessing knowledge, attitudes, and experience with e-cigarettes; pre-survey any time before the program begins, post-survey at least one week after the final lesson.
- A Usage Report (available on request) showing curriculum access by organization, educator, and lesson; useful for confirming whether each lesson was accessed and whether the recommended weekly cadence was followed, though it cannot verify actual classroom delivery or content fidelity.



Family engagement components	CATCH My Breath includes a robust set of family-facing resources, all available in both English and Spanish, designed to extend prevention messaging beyond the classroom and equip parents and caregivers to reinforce healthy decision-making at home. Together, these resources reflect a layered approach to family engagement, from initial notification and consent to educational tools that help parents have informed conversations at home, to age-appropriate materials spanning elementary through high school. Elementary-Focused Parent Resources (Grades K-4): Recognizing that even elementary-aged students are exposed to vaping and related misinformation, CATCH provides an informational video, a fact sheet, and a parent-child activity for families of younger students all available in digital or printable formats for easy distribution as classroom handouts. (Available in English and Spanish) Parent Toolkit (Grades 5-12): A comprehensive toolkit helps parents understand the youth vaping epidemic, gauge their own child's risk of trying e-cigarettes, and identify the best strategy for talking with their child about e-cigarettes. (Available in English and Spanish) Parent Information Handout: A concise, one-page resource gives families general program information and explains how to bring CATCH My Breath to their child's school. (Available in English and Spanish) Parent Program Notification Letter: This may be sent to families before the program begins. The letter provides a brief overview of program content alongside high-level context on the youth e-cigarette epidemic. It's designed for flexible distribution through a school's digital communication platform or as a hard copy. (Available in English and Spanish) Parent Survey Notification Letter: This letter informs families about the optional pre/post student survey and provides an opt-out option. It's built as a customizable template schools can place on their own letterhead. (Available in English and Spanish) Extensive Multimedia Library: Beyond these core materials, the CATCH My Breath website's parent and community section, offers additional videos and multimedia resources tailored to parents of middle and high school students, supporting ongoing family engagement throughout program implementation. (Available in English only) (https://catch.org/program/vaping-prevention/#parents)
Materials & Costs	Required materials: The CATCH My Breath curriculum and all associated materials are provided free of charge to U.S. schools, including all four grade-band lesson sets (5, 6, 7–8, 9–12), lesson plans, presentation slides, and program supplements such as the Cannabis Supplement, STEM and Humanities extensions, virtual field trips, and parent education materials. Cost: Free Optional materials: Video Lessons (Grades 6–8): an alternate delivery format providing on-screen slides, activity prompts, and companion worksheets for added flexibility. Cost: \$99 per school



Training	Training requirement: Preferred Cost: • Asynchronous, 45-minute Implementation Training: Free • Live, 2-hour Virtual Implementation Training (Individual Seat): \$99 • Private Implementation Training (Live, Virtual, up to 25 educators): \$2,300 • Private Implementation Training (In-person, up to 35 educators): \$4,250 • Live, Virtual Students-Teach-Students Training (Individual Seat): \$99 Duration: • Implementation Training: Asynchronous, 45-minute; in-person or live, virtual 2 hours • Students-Teach-Students: 2-hours live, virtual • Number of Participants: • Individual virtual seats: no min. or max. • Private virtual: 5–25 • Private in-person: 5–35 • Students-Teach-Students: no min. or max. Train-the-trainer option: CATCH My Breath offers a Train-the-Trainer Academy that allows an organization or school district’s staff member(s) to become certified to train future facilitators locally, building in-house, sustainable training capacity rather than relying solely on outside trainers. CATCH strongly recommends, though does not require, that educators have experience implementing CATCH My Breath before attending a Train-the-Trainer Academy. Format: Available as a 2-day (3-hour-day and 4-hour day) live virtual training (open or private), or a 1-day, 7-hour in-person private session for 5–15 educators. Cost: • Live, Virtual Train-the-Trainer Academy (Individual Seat): \$475 • Private Train-the-Trainer Academy (Virtual or In-Person, 5–15 educators): \$5,000 Please note: Each Train-the-Trainer attendee must pass an exam to become a Certified Community Trainer. Certification is valid for one year and is renewed annually by completing two free booster trainings and documenting continued facilitation activity (e.g., having delivered CATCH My Breath, implementation training, or a parent workshop at least twice, in any combination). Recertification fee is \$49 after the first full year of certification, and all certification requirements are met.
Virtual implementation	CATCH My Breath is designed for in-person implementation and is not intended to be delivered virtually to students. The program’s peer-facilitated small-group activities, discussions, and role-play exercises rely on in-person interaction to be effective.



Program Provider Contacts

Training & program information	Kerry Van Dusen Sr., Manager, Business Development kerry@catch.org
Material information	Lawrence Blair, Community Partnerships Manager lawrence.blair@catch.org
Website	https://catch.org/program/vaping-prevention/

Substance, Tobacco & Nicotine Use Prevention

Substance addressed	CATCH My Breath's core curriculum is specifically focused on e-cigarette and nicotine vaping prevention; it does not directly target alcohol, opioids, or cocaine. However, the program does offer a supplemental cannabis lesson, which addresses "fact vs. fiction" around vaping marijuana. This supplement has not been evaluated for efficacy in preventing marijuana use, and CATCH does not currently have published evidence demonstrating impact on cannabis-specific outcomes. It is worth noting that the refusal skills, decision-making strategies, and social pressure resistance techniques CATCH My Breath teaches are grounded in social cognitive theory, the same behavioral framework that underlies substance use prevention more broadly. The core skills students practice (recognizing peer and advertising pressure, using avoid/refuse/exit strategies, and building personal commitment to healthy choices) are transferable skill sets applicable across substances, even though the program's evidence base and core content are specific to vaping and nicotine.
Lessons/modules that address vaping	Vaping and nicotine content is embedded throughout the entire CATCH My Breath curriculum rather than isolated in a single module, with e-cigarettes as the central focus of every lesson across all grade bands.
Lessons that address tobacco/nicotine	Across all grade bands, tobacco/nicotine content threads through every session, including health effects, addiction science, industry marketing tactics, refusal skills, and personal decision-making, rather than being isolated to a single lesson.



Program Replication Contacts

Organizations with experience implementing this program

Contact	Address	Phone Number	Email Address
Heather Hansen, Eastern Public Health District (ID - District 7)		(208) 522-0310	hhansen@eiph.idaho.gov
Alicia Aston, Shenandoah County Public Schools		(540) 459-6222	aeaston@shenandoah.k12. va.us
Adrienne Cordero, Mohave County Department of Public Health		(928) 753-0748	cordea@mohave.gov

**Positive Action.**

Positive Action

Positive Action, Inc.

Program Overview

Program summary	Positive Action is a structured, evidence-based PK–12 educational program that fills a critical instructional gap, providing educators and practitioners with a proven approach and easy-to-use lessons. Built on the philosophy that we feel good about ourselves when we do positive actions, its scripted lessons use the Thoughts-Actions-Feelings Circle to develop positive self-concept and healthy decision-making. The program includes classroom curriculum, school-climate kits, a counselor kit, family and community components, and a secondary Substance Use Prevention Series for grade 6 and up, with content regularly updated to reflect evolving substance-use trends. Lessons are flexible for classroom, small-group, or 1:1 delivery.
Program outcomes	Randomized controlled trials have demonstrated specific tobacco and nicotine outcomes: • Tobacco Use (Teacher Report of Student Behavior): 38% improvement; effect size = 0.33 (<i>Beets et al., 2009</i>) • Cigarette Use, Ever (Student): 31% improvement; effect size = 0.21 (<i>Lewis et al., 2012</i>) • Cigarette Use, Ever (School): 34% improvement; $p < .05$ (<i>Lewis et al., 2012</i>) • Tobacco: 47% improvement; effect size = 0.41 (<i>Beets et al., 2009</i>) More broadly, these trials also demonstrated significantly lower overall substance use, violence, bullying, and sexual activity, along with improved academic achievement, attendance, and school climate. Citations and additional research findings can be found in the Evidence & Evaluation section.
Audience	Ages: 4–18 Grade Levels: PK–12th
Available Languages	English



Program Details	Type: Prevention Class size: Flexible. Designed for whole-classroom delivery but can also be used with small, targeted groups. It is recommended to have no less than five students due to group activities throughout the lessons. Number of lessons: PK-6, 130 -140 lessons, 5-15 mins; Grades 7-12, 82-130 lessons per grade, 15-20 mins.; Additional optional Substance Use Prevention lessons for Grades 6-12. Lessons required to achieve fidelity: Positive Action is dosage-based; the more lessons delivered, the better the outcomes. Min. fidelity is 22 lessons. Length of each lesson: PK, 5-10 mins.; K-6, 15 mins; Grades 7-12, 15-20 mins. Lessons can be combined for longer-duration sessions. Frequency of implementation: 1-4 lessons per week Duration of implementation: Designed as a full-school-year curriculum; certified trials delivered approximately 20-25 weeks of lessons per year. Best results come from multi-year implementation. This can vary depending on implementation constraints. Recommended intervention site: School and community
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Evidence & Evaluation

Program materials last updated	Materials have been updated within the last 4 years. Products and grade-level curricula have been updated and are actively maintained on the Pasela digital platform. We are committed to staying current with evolving substance-use trends and regularly update content to reflect emerging threats, including recent additions addressing vaping and fentanyl (2025). Note: the print kits have not been updated; current updates are reflected in the digital products.
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Recent program evaluation	Program has been evaluated within the last 10 years. Positive Action has one of the most extensive evaluation records among SEL/prevention programs, including multiple randomized controlled trials. Recent peer-reviewed publications include: • Duncan, R., Washburn, I. J., Lewis, K. M., Bavarian, N., DuBois, D. L., Acock, A. C., Vuchinich, S., & Flay, B. R. (2017). Can universal SEL programs benefit universally? Effects of the Positive Action program on multiple trajectories of social-emotional and misconduct behaviors. <i>Prevention Science</i>, 18(2), 214–224. https://doi.org/10.1007/s11121-016-0745-1 • Beets, M. W., Flay, B. R., Vuchinich, S., Snyder, F. J., Acock, A., Li, K.-K., Burns, K., Washburn, I. J., & Durlak, J. (2009). Use of a social and character development program to prevent substance use, violent behaviors, and sexual activity among elementary-school students in Hawaii. <i>American Journal of Public Health</i>, 99(8), 1438–1445. https://doi.org/10.2105/AJPH.2008.142919 (PubMed) • Lewis, K. M., Bavarian, N., Snyder, F. J., Acock, A., Day, J., DuBois, D. L., Ji, P., Schure, M. B., Silverthorn, N., Vuchinich, S., & Flay, B. R. (2012). Direct and mediated effects of a social-emotional and character development program on adolescent substance use. <i>International Journal of Emotional Education</i>, 4(1), 56–78. (pmc.ncbi.nlm.nih.gov) • Silverthorn, N., DuBois, D. L., Lewis, K. M., Reed, A., Bavarian, N., Day, J., Ji, P., Acock, A. C., Vuchinich, S., & Flay, B. R. (2017). Effects of a school-based social-emotional and character development program on self-esteem levels and processes: A cluster-randomized controlled trial. <i>SAGE Open</i>, 7(3), 1–12. https://doi.org/10.1177/2158244017713238 • Stalker, K. C., Wu, Q., Evans, C. B. R., & Smokowski, P. R. (2018). The impact of the Positive Action program on substance use, aggression, and psychological functioning: Is school climate a mechanism of change? <i>Children and Youth Services Review</i>, 84, 143–151. https://doi.org/10.1016/j.childyouth.2017.11.020 • Hull, D. M., Hinerman, K. M., Fagan, M. A., Powell, M. G., Näslund-Hadley, E. I., & Hayes, D. (2021). Positive youth development in Belize: A cluster-randomised trial of Positive Action. <i>Educational Psychology</i>, 41(8), 1003–1023. https://doi.org/10.1080/01443410.2021.1922611
Cost-effectiveness / ROI evaluation	The Washington State Institute for Public Policy (WSIPP) found Positive Action to be the most cost-effective school-based health and prevention program for public benefit. WSIPP's analysis yields a cost-benefit ratio of approximately \$182 for every \$1 spent, with a 97% probability of a positive return.
Third-party evidence designations	Positive Action holds top-tier ratings from multiple registries: • Blueprints for Healthy Youth Development: Model (highest rating) • CrimeSolutions.gov (OJP) – Effective OJJDP Model Programs Guide: Effective • What Works Clearinghouse (U.S. Dept. of Education): Meets Standards Without Reservations – Positive Effect • SAMHSA rating: 2.2–2.8 • Also recognized by the U.S. Department of Education, U.S. Department of Justice, Harvard University, and CASEL.
Evaluation & fidelity tools	The program includes an assessment packet with pre- and post-tests, implementation reports, and behavior rating scales. Pre- and post-assessment within the Pasela platform is currently under development; at present these assessments are paper/pencil.



Implementation

How the program works	Positive Action is grounded in self-concept theory and the Thoughts-Actions-Feelings Circle: positive thoughts lead to positive actions, which produce positive feelings about oneself, reinforcing more positive thoughts. Scripted lessons teach positive actions across four areas of the self — physical, intellectual, social, and emotional — organized into six universal units: • The PA Philosophy and Thoughts-Actions-Feelings Circle • Positive Actions for Body and Mind • Managing Yourself Responsibly • Getting Along With Others • Being Honest With Yourself and Others • Improving Yourself Continually All teaching materials (posters, music, games, activity booklets, journals) are provided. School-wide climate resources are available while family components extend the philosophy into homes and neighborhoods. The approach builds intrinsic motivation and addresses shared predictors of multiple problem behaviors simultaneously.
Implementation requirements	Lessons are scripted and flexible, delivery does not have to be done by a classroom teacher, though it can be. The program can be delivered by a range of facilitators and used with a full classroom, in a small, targeted group, or even in a 1:1 intervention setting. No clinical credentials are required. Self-paced training is included with the subscription.
Family engagement components	Positive Action includes a robust family component: a Family Kit (for families with children PK-5) with 42 lessons plus posters, music, games, and activity sheets, and a Secondary Family Kit (for families with children in grades 6-12) also with 42 lessons. These kits reiterate what is being taught in the curriculum, delivered at home, and applied to different home situations.



Materials & Costs	Required Materials: A Starter Kit per grade level + a Pasela License per grade kit for one instructor. Starter Kits include physical materials for 30 students and are priced separately by grade kit. Combo kits include a 1-year Pasela License at a discounted price. K Starter Kit: \$425 / Combo: \$630 / Refresher: \$125 1st Starter Kit: \$325 / Combo: \$530 / Refresher: \$100 2nd Starter Kit: \$250 / Combo: \$450 / Refresher: \$150 3rd Starter Kit: \$250 / Combo: \$450 / Refresher: \$130 4th Starter Kit: \$250 / Combo: \$450 / Refresher: \$70 5th Starter Kit: \$200 / Combo: \$400 / Refresher: \$100 Elementary Starter Combo Kit: \$2,800 6th Starter Kit: \$200 / Combo: \$400 / Refresher: \$40 7th Starter Kit: \$175 / Combo: \$380 / Refresher: \$70 8th Starter Kit: \$150 / Combo: \$350 / Refresher: \$30 MS Starter Combo Kit: \$1125 HS Kit 1: \$150 / Combo: \$350 / Refresher: \$65 HS Kit 2: \$100 / Combo: \$300 / Refresher: \$35 HS Kit 3: \$100 / Combo: \$300 HS Starter Combo Kit: \$975 Prevention Starter Kit (ages 11-18): \$350 / Combo: \$590 / Refresher: \$115 Pasela License: One license required per product (a single grade level, or Prevention Series) for one instructor. Flexible pricing tiers are available based on the size and needs of the group. Cost: \$240/1-year; \$430/2-year; \$570/3-year
Training	Training Requirement: Preferred Cost: Self-paced training for 2 included with the program subscription, \$20 per additional person to be trained. • Webinar training: \$500 per hour, up to 30 participants • On-site training: \$6,000 per day plus travel expenses Duration: Varies based on training needs. Webinar training typically runs 3–5 hours depending on the content covered. On-site training duration depends on the scope of what is being trained. Number of participants: Webinar training: up to 30 participants. On-site and Train-the-Trainer participant numbers vary by session. Train-the-trainer option: Positive Action offers Train-the-Trainer certification via both webinar and on-site formats, enabling an organization's staff member to be certified to train future facilitators. The number of hours or days depends on which components the trainers wish to be fully trained on. Cost: • Train-the-Trainer (webinar): \$600 per hour • Train-the-Trainer (on-site): \$6,500 per day plus travel expenses
Virtual implementation	The curriculum is delivered digitally through the Pasela app (pasela.com), which supports virtual, blended, and in-person delivery, and live training is available via webinar.



Program Provider Contacts

Training & program information	Positive Action, Inc (800) 345-2974 info@positiveaction.net
Material information	Positive Action, Inc. (800) 345-2974 info@positiveaction.net
Website	positiveaction.net

Substance, Tobacco & Nicotine Use Prevention

Substances addressed	• Alcohol • Marijuana/cannabis • Tobacco/nicotine (including vaping) • Fentanyl • And other illicit substances As an upstream preventive intervention, the program also targets risk factors associated with later substance use and opioid use disorder.
Lessons/modules that address vaping	As of 2025, the secondary Substance Use Prevention Series (grade 6 and up) has been updated to include current information on vaping and fentanyl use, part of an ongoing commitment to keep content aligned with evolving substance-use trends. • Prevention Series (Secondary): Lessons 204, 402, 403, 502, 702 • Grade 3: Lesson 211 • Grade 4: Lesson 212 • Grade 6: Lesson 206 • Grade 7: Lesson 205 • High School 1: Lessons 210, 211, 507 • High School 2: Lessons 213, 319 • High School 3: Lessons 202, 210, 212, 603
Lessons that address tobacco/nicotine	• Prevention Series: 202, 204, 205, 206, 303, 402, 403, 502, 503, 701, 702, 801 • Grade 1: Lesson 219 • Grade 3: Lesson 211 • Grade 4: Lessons 212, 213 • Grade 5: Lesson 612 • Grade 6: Lessons 205, 206 • Grade 7: Lessons 205, 210, 224 • Grade 8: Lessons 202, 507, 521, 622 • High School 1: Lessons 104, 203, 208, 210, 211, 219, 224, 305, 507, 514, 608, 623 • High School 2: Lessons 213, 304, 319, 322 • High School 3: Lessons 202, 210, 212, 213, 306, 603



Program Replication Contacts

Organizations with experience implementing this program

Contact	Address	Phone Number	Email Address
Mollie, Alle, Girls Inc. of Bristol	885 Clinton Avenue, Bristol, VA 24201	276-669-8686	mollie@girlsinc.com
Michael Cook-Burgess, BGC of Northern Neck	517 North Main, Kimarnock, VA 22482	804-435-9696	mcook-burgess@bgcnn.org
Brooke Mahalic, Center for Family Services	492 Route 57 West, Washington, NJ 07882	484-735-1531	



Too Good for Drugs – Maximizing Life

C.E. Mendez Foundation

Program Overview

Program summary	Too Good for Drugs – Maximizing Life is a comprehensive K–12 prevention education program that helps students build the confidence, communication, and decision-making skills needed to make healthy choices and avoid risky behaviors involving alcohol, nicotine, and other drugs (ATOD). The program strengthens key protective skills that support student well-being, positive relationships, academic success, and healthy development.
Program outcomes	Reported 30-day use of tobacco, alcohol and marijuana: • 30-day smoking 13 to 26% reduction • 30-day drinking 15 to 17% reduction • 30-day binge drinking 7 to 27% reduction • 30-day marijuana use 7 to 39% reduction Intentions to Use Tobacco, Alcohol or Marijuana (ATOD) in the Future • Intentions to smoke cigarettes 33 to 63% reduction • Intentions to drink alcohol 38 to 50% reduction • Intentions to use marijuana 25 to 51% reduction Protective Factors Associated with Increasing Students' Resiliency • Goal setting and decision-making skills 10 to 16 percentile point increase for middle school students • Social and peer pressure refusal skills 13 to 16 percentile point increase for middle school students • Emotional competency/self-efficacy skills 8 to 16 percentile point increase for middle school students • Perceptions harmful effects of drug use 7 to 16 percentile point increase for middle school students Learn more about the studies on the Too Good Programs website.
Audience	Ages: 5–18 Grade Levels: K–12th



Available Languages	English & Spanish
Program Details	Type: Prevention Class size: 10–36 Number of lessons: 10 Lessons required to achieve fidelity: 10 Length of each lesson: K–3rd, 30 mins; 4th–5th, 45 mins.; 6th–12th, 50 mins. Frequency of implementation: 1x week Duration of implementation: 10 weeks Recommended intervention site: School and community

Evidence & Evaluation

Program materials last updated	Each grade is updated every 4–8 years depending on the grade. Everything has been updated since 2020.
Recent program evaluation	The last third-party evaluation was performed in 2013. Find evaluations and case studies on the Too Good Programs website.
Cost-effectiveness / ROI evaluation	No cost-effectiveness evaluation.
Third-party evidence designations	Institute of Education Sciences' National Center for Education Evaluation and Regional Assistance What Works Clearinghouse
Evaluation & fidelity tools	Fidelity Monitoring: Teacher Implementation Survey Classroom Observation Form Pre/Post Survey Instruments: • Teacher Checklist of Student Behaviors (Grades K–12) • Student Checklist of Behaviors (Grades 3–12) • Student Knowledge Test (Grades 3–12) • Student Risk and Protective Factors Survey (Grades 3–12)



Implementation

How the program works	Too Good for Drugs is designed to prevent complex problems with many contributing factors. Multifaceted and based on several theoretical constructs, Too Good for Drugs works to mitigate the risk factors related to substance use. Key Elements of the program: • 10 Fully Scripted Lessons for ease of implementation with minimal preparation and efficient use of class time. • Interactive Learning Activities to reinforce lesson concepts for multiple intelligence learning styles. • Age-Appropriate Approach to address complex topics at the students' developmental level. • Workbooks and Activities to build student engagement and interactivity in class and at home. • Enhanced Cooperative Learning designed for full student engagement and participation. • Built-in Classroom Management to facilitate lesson pacing and promote student participation. • Home Workouts – A parent component to bring the learning home for practice and reinforcement.
Implementation requirements	Instructor Preparation (no specific staffing requirements): It's recommended that each Instructor complete a curriculum training session. Intensity and Dosage: • Deliver one lesson per week for 10 weeks. • Deliver the lessons in a classroom setting. • Instructors have a class size of up to 36 students. • Plan for and use the allotted lesson time. Methods and Activities • Deliver the lessons in the order presented in the Teacher Manual. • Deliver every activity in each lesson. • Deliver the activities in the order presented in the Teacher Manual. • Use all of the program materials. • Provide each student with his/her own Student Workbook.
Family engagement components	Each lesson in grades K–8 includes a Home Workout. The Home Workout has information for the caregiver on the topic covered in that lesson and an activity to do at home as a family focused on the topic. Each High School lesson has a two-page Bring It Home Newsletter with information for the caregiver on the topic covered in the lesson so they can model and reinforce the concepts taught. Each High School lesson also includes an optional at home activity.
Materials & Costs	Required materials: One classroom kit per grade and workbooks for students. Cost: Kits range from \$295.95–\$525.95 per grade. Workbooks are the only re-occurring costs. Workbooks range from \$44.95–\$54.95 per pack of 30.



Training	Training requirement: Preferred Cost: \$2,000 (plus \$1,800 for travel) for onsite training Duration: 7 hours Number of participants: 10–30 Train-the-trainer option: Training-of-Trainers Workshops are comprehensive two-day sessions that will give you the knowledge and skills necessary to train other professionals employed by your school, school district, or agency who intend to deliver the Too Good programs. Too Good Certified Trainers are only certified to train staff employed by their own agency or school district. Cost: \$345–\$445 To attend a Training of Trainers session, participants must meet these prerequisites: • Complete a Curriculum Training session conducted by a Mendez Foundation Trainer. Attendance at a curriculum training conducted by a Too Good Certified Trainer does not satisfy this requirement. • Classroom instruction of a minimum of one grade level of Too Good for Drugs, Too Good for Violence, Seeds of Nutrition, or Too Good OST. Your certification will cover only those programs in which you have firsthand delivery experience. Please be ready to provide confirmation of your classroom instruction experience. • Upon completion of a TOT session, you will be certified to train in your organization or district in the Too Good programming in which you have received curriculum training and completed program implementation. Learn more about training on the Too Good Programs website.
Virtual implementation	No virtual option.

Program Provider Contacts

Training & program information	Cindy Swartzwelder 800-750-0986 ext. 206 cwiley@mendezfoundation.org
Material information	Customer Service 800-750-0986 ext. 215 customerservice@mendezfoundation.org
Website	toogoodprograms.org



Substance, Tobacco & Nicotine Use Prevention

Substances addressed	• Tobacco/nicotine • Alcohol • Marijuana • Misuse/abuse of Rx and OTC drugs • All street drugs including opioids, cocaine, meth, hallucinogens (including mushrooms), and inhalants.
Lessons/modules that address vaping	• Grades K–2: Lesson 9 – Identifying & Avoiding Harmful Substances • Grade 3: Lesson 10 • Grade 4: Lesson 8 • Grade 5: Lesson 8 • Grade 6–12: Lesson 7 – Effects of Nicotine Use
Lessons that address tobacco/nicotine	The same lessons as listed above.

Program Replication Contacts

Organizations with experience implementing this program

Contact	Address	Phone Number	Email Address
Sheila Barnard, Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities Prevention and Promotion Branch, Division of Substance Use Disorder	275 E. Main Street Frankfort, KY 40621	270-256-0938	sheila.barnard@ky.gov



You and Me, Together Vape-Free

Stanford REACH Lab

**Note: If you choose to implement You and Me, Together Vape-Free, you have the option of implementing Healthy Futures, an alternative-to-suspension cessation program created by the Stanford REACH Lab as well.*

Program Overview

Program summary	You and Me, Together Vape-Free is a free, evidence-based tobacco and nicotine prevention curriculum developed by the Halpern-Felsher REACH Lab at Stanford University School of Medicine in collaboration with youth, educators, healthcare providers, and scientists. Available for elementary, middle, and high school students, the curriculum uses engaging, interactive lessons to build knowledge about nicotine addiction, the developing brain, marketing tactics, peer influence, and healthy decision-making. All lessons align with National Health Education Standards and are designed for classroom implementation, but can also be done in other settings, such as after school programs.
Program outcomes	Formal evaluations have demonstrated improvements in: • Knowledge of nicotine addiction and other vaping risks • Understanding the effects of nicotine on the developing brain • Recognition of tobacco and vaping industry marketing tactics • Refusal skills and confidence resisting peer pressure • Reduced susceptibility to future vaping • Increased perceptions of harm from vaping • Improved media literacy related to nicotine products Citations and additional research findings can be found in the Evidence & Evaluation section.
Audience	Ages: 11–18 Grade Levels: 6th–12th
Available Languages	English, Spanish, & Vietnamese



Program Details	Type: Prevention Class size: 10–35 (designed for standard classroom implementation). May be adapted for larger assemblies or smaller groups. Number of lessons: 5 Lessons required to achieve fidelity: 5 Length of each lesson: 50 mins. Frequency of implementation: Daily or 1 time per week Duration of implementation: 1–5 weeks Recommended intervention site: School & community
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Evidence & Evaluation

Program materials last updated	The curriculum is routinely updated to reflect emerging nicotine products, vaping devices, current scientific evidence, and changes in the youth nicotine marketplace. The program was last updated in the summer of 2026.
Recent program evaluation	The curriculum has been evaluated within the last 10 years. We have a number of pre-post curriculum surveys and academic publications showing that the curriculum changes students' knowledge, attitudes, susceptibility to vaping, behavioral intentions, and refusal skills. We also have completed an NIH-funded randomized control trial showing short-term and long-term changes in adolescents' knowledge, attitudes, susceptibility to vaping, and behavioral intentions and behavior. Results have not been published. Find a list of recent studies in the FAQ section on Stanford Medicine's website.
Cost-effectiveness / ROI evaluation	Although a formal ROI analysis has not been completed, the curriculum and training are provided free of charge, minimizing implementation costs for schools and community organizations.
Third-party evidence designations	The curriculum has undergone rigorous scientific evaluation through the Stanford's REACH Lab that have resulted in peer-reviewed studies. We have also been evaluated independently by the California Department of Education, Hawaii Community Foundation, and other states, organizations, and countries that have listed the curriculum as recommended/required and evidence-based.
Evaluation & fidelity tools	• Student pre/post surveys (anonymous – embedded in the course) • Knowledge assessments • Facilitator implementation guidance • Fidelity recommendations • Optional classroom discussion prompts and reflections • Randomized control trials



Implementation

How the program works	Students participate in five interactive lessons that combine science, media literacy, peer discussion, and skill-building activities. Lessons explore the effects of nicotine on the adolescent brain and body, identify tobacco industry marketing strategies, examine social influences, and strengthen refusal and decision-making skills. Activities include videos, games, collaborative discussions, and scenario-based learning designed to increase engagement and reduce future nicotine use.
Implementation requirements	To maintain fidelity: • Deliver all five lessons in sequence. • Facilitator should review instructor materials before implementation. • Facilitators may include classroom teachers, prevention specialists, school counselors, health educators, nurses, or community prevention professionals. • No specialized clinical credentials required. • Basic familiarity with adolescent health education is recommended.
Family engagement components	• Take-home activities • Family discussion prompts • Student-family conversation guides • Resources for parents/caregivers regarding youth vaping and nicotine
Materials & Costs	Required materials: Internet-enabled computer, projector/display, student handouts Cost: Free Optional classroom supplies: Whiteboard/chart paper, sticky notes, printed worksheets, and small group activity materials. Cost: Varies by classroom
Training	Training requirement: Preferred Cost: Stanford Reach Lab offers a 90-min online training for free. • Request a Toolkit training or webinar • Download the Toolkit Training Menu Number of participants: Up to 40 participants. Train-the-trainer option: Train-the-trainer opportunities may be available through Stanford REACH Lab. Organizations interested in becoming regional trainers should contact the Stanford REACH Lab for current options, requirements, and associated costs.
Virtual implementation	Lessons are designed using digital slide decks and can be delivered virtually or in hybrid classrooms using common videoconferencing platforms. Digital handouts and online discussion activities support virtual implementation.



Program Provider Contacts

Training & program information	Stanford REACH Lab Dr. Bonnie Halpern-Felsher bonnieh@stanford.edu Natalie Andrade natalie.andrade@stanford.edu
Material information	Stanford REACH Lab Dr. Bonnie Halpern-Felsher bonnieh@stanford.edu
Website	https://med.stanford.edu/tobaccopreventiontoolkit/you-and-me-together-vape-free-curriculum.html

Substance, Tobacco & Nicotine Use Prevention

Substance addressed	Primary focus is tobacco and nicotine prevention. The curriculum also develops general substance use prevention skills (decision-making, refusal skills, media literacy, healthy coping) that may be protective against alcohol, cannabis, and other substance use, although these are not the primary instructional focus.
Lessons/modules that address vaping	The entire curriculum focuses on youth vaping prevention and current nicotine products. All five lessons contain up-to-date information on electronic cigarettes, disposable vapes, nicotine addiction, marketing practices, and emerging products.
Lessons that address tobacco/nicotine	All five lessons address tobacco and nicotine.

Program Replication Contacts

Organizations with experience implementing this program

Contact	Address	Phone Number	Email Address
Malia Maier, MPH, Hawaii Community Foundation	827 Fort Street Mall Honolulu, HI 96813	808-537-6333	
Brian Glendenning Director, Healthful Living, Wake County Public School System	5625 Dillard Drive Cary, NC 27518	919-533-7191	
Sarah Planche, California Department of Education, Whole Child Division	1430 N Street Sacramento, CA 95814	916-319-0193	



Healthy Futures

Stanford REACH Lab

Note: If you choose to implement *You and Me, Together Vape-Free*, you have the option of implementing Healthy Futures as well. **VFHY will not fund Healthy Futures alone.** For more information about Healthy Futures, please contact Director of Programs Michael Parsons at mparsons@vfhy.org.

Program Overview

Program summary	Healthy Futures is a free, evidence-based, tobacco/nicotine intervention curriculum developed by the Halpern-Felsher REACH Lab at Stanford University School of Medicine for students who have been found using tobacco/nicotine products or who want to quit. Designed as an alternative-to-suspension program, Healthy Futures combines self-paced learning, facilitated group lessons, and evidence-based quitting resources to help students understand nicotine addiction, build motivation to quit, strengthen coping skills, and develop personalized quit plans. The curriculum supports restorative, educational approaches that keep students engaged in learning while addressing nicotine use. Healthy Futures includes both a self-paced and small group counselor-led version.
Program outcomes	Evaluation findings have demonstrated improvements in: • Knowledge about nicotine addiction and vaping • Understanding of nicotine's effects on the developing brain • Motivation to quit nicotine use • Confidence (self-efficacy) to refuse future nicotine use • Development of individualized quit plans • Increased awareness and use of cessation resources • Reduced intentions to continue vaping or using tobacco products • Improved attitudes toward quitting and healthy behavior change Supporting citations: Stanford REACH Lab Healthy Futures evaluation reports and publications; Stanford Tobacco Prevention Toolkit resources.
Audience	Ages: 11-17 Grade Levels: 6th– 12th



Available Languages	English & Spanish
Program Details	Type: Cessation Class size: Recommended: Individual intervention or 3–8 Can be adapted for larger intervention groups if appropriate staffing is available. Number of lessons: 2 Lessons required to achieve fidelity: 2 Length of each lesson: Self-paced module, 40–60 mins.; Facilitated curriculum, 2–4 hours Frequency of implementation: Typically implemented following a tobacco/nicotine policy violation or when a student voluntarily seeks support to quit. Generally delivered as a one-time intervention with opportunities for follow-up support. Duration of implementation: Typically completed within 1 week, although schools may extend follow-up activities based on student needs. Recommended intervention site: School and community

Evidence & Evaluation

Program materials last updated	The Healthy Futures curriculum is routinely updated to reflect current scientific evidence, emerging nicotine products, youth vaping trends, and best practices in youth tobacco intervention and cessation support. Materials have been updated within the last 4 years.
Recent program evaluation	Healthy Futures has been evaluated through pre-post intervention surveys and now through a randomized control trial within the last 10 years. We have shown that, post-curriculum, adolescents were significantly more likely to report ways to reduce stress, had more knowledge about triggers of substance use, and could identify quitting resources, more knowledge about the impact of substances on the body, more knowledge about signs and symptoms of withdrawal, and could identify mental health symptoms associated with use. Additional evaluation efforts continue as implementation expands.
Cost-effectiveness / ROI evaluation	A formal return-on-investment analysis has not been conducted. However, the curriculum is available at no cost, reducing financial barriers for schools while providing an educational alternative to exclusionary discipline.
Third-party evidence designations	Healthy Futures has been developed using current scientific evidence and adolescent behavior change principles and has been evaluated by Stanford researchers, but to our knowledge it has not yet received formal designation from national evidence registries.
Evaluation & fidelity tools	The program includes: • Student pre- and post- surveys • Knowledge assessments • Self-reflection activities • Quit planning worksheets • Facilitator implementation guidance • Fidelity recommendations • Student goal setting and action planning tools



Implementation

How the program works	Healthy Futures provides students with an educational alternative to suspension curriculum by combining self-directed learning with facilitated discussion and skill-building. Students first complete an interactive online module that explains nicotine addiction, brain development, vaping products, and quitting strategies. They then participate in a counselor-, teacher-, or prevention specialist-led intervention that emphasizes motivation, coping strategies, stress management, refusal skills, goal setting, and individualized quit planning. Students leave with practical resources and a personalized action plan to support nicotine-free lifestyles.
Implementation requirements	To replicate with fidelity: • Students should complete the MY Healthy Futures module before participating in the facilitated curriculum whenever possible. • The facilitator should complete all curriculum components in sequence. • Facilitators may include school counselors, nurses, teachers, health educators, prevention specialists, administrators, or community prevention professionals. • No clinical license is required. • Basic familiarity with adolescent health education and motivational communication is recommended.
Family engagement components	Healthy Futures encourages family engagement through: • Take-home educational materials • Parent/caregiver resources about youth nicotine use • Student-family discussion opportunities • Resources to support quitting at home
Materials & Costs	Required materials: • Internet-enabled computer (not recommended for a smart phone or tablet) • Facilitator guide • Student worksheets • Digital curriculum material Cost: Free Optional materials: • Printed student workbooks • Quit resource handouts • Whiteboard or chart paper • Supplemental Stanford Tobacco Prevention Toolkit lessons Cost: Varies depending on local printing



Training	Training requirement: Preferred Cost: Training is available through Stanford REACH Lab. Cost varies depending on delivery format. Many webinars and implementation trainings are available at no cost. Duration: 90 mins. Participant capacity: Flexible, 10–100+ participants. Train-the-trainer option: May be available through Stanford REACH Lab. Organizations interested in becoming regional trainers should contact the Stanford REACH Lab for current options, requirements, and associated costs.
Virtual implementation	The self-paced MY Healthy Futures module is designed for online completion. The facilitated curriculum can also be delivered virtually using common videoconferencing platforms, allowing students to complete both individual and group components remotely or in hybrid settings.

Program Provider Contacts

Training & program information	Stanford REACH Lab Dr. Bonnie Halpern-Felsher bonnieh@stanford.edu Natalie Andrade natalie.andrade@stanford.edu
Material information	Stanford REACH Lab Dr. Bonnie Halpern-Felsher bonnieh@stanford.edu
Website	https://med.stanford.edu/halpern-felsher-reach-lab/preventions-interventions/healthy-futures.html

Substance, Tobacco & Nicotine Use Prevention

Substance addressed	Healthy Futures primarily addresses: • Tobacco and nicotine use The curriculum also strengthens decision-making, stress management, healthy coping, refusal skills, and behavior change strategies that may support prevention of other substance use, including: • Cannabis • Alcohol
Lessons/modules that address vaping	Healthy Futures focuses specifically on youth vaping, nicotine addiction, and tobacco use intervention. All program components include current information about e-cigarettes, disposable vaping devices, nicotine addiction, emerging products, quitting strategies, and available cessation resources.
Lessons that address tobacco/nicotine	All Healthy Futures components address tobacco and nicotine use.



Program Replication Contacts

Organizations with experience implementing this program

Contact	Address	Phone Number	Email Address
Sarah Planche, California Department of Education, Whole Child Division	1430 N Street Sacramento, CA 95814	916-319-0193	
Brian Glendenning Director - Healthful Living, Wake County Public School System	5625 Dillard Drive Cary, NC 27518	919-533-7191	
Malia Maier, MPH, Hawaii Community Foundation	827 Fort Street Mall Honolulu, HI 96813	808-537-6333	



Established in 1999 by the Virginia General Assembly, the Virginia Foundation for Healthy Youth (VFHY) empowers Virginia's youth to make healthy choices.

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