

## SCIENCE-BASED PROGRAMS LIST – NREPP RATING ANALYSIS CASASTART

CASASTART (Striving Together to Achieve Rewarding Tomorrows, formerly known as Children at Risk), is a community-based, school-centered substance abuse and violence prevention program developed by the National Center on Addiction and Substance Abuse at Columbia University (CASA). CASASTART targets youths between 8 and 13 years old who have a minimum of four identified risk factors. Youth participants may remain in the program up to 2 years. Specific program objectives of CASASTART include reducing drug and alcohol use, reducing involvement in drug trafficking, decreasing associations with delinquent peers, improving school performance, and reducing violent offenses. CASASTART's intervention model is informed by the research literature on social learning theory, social strain theory, social control theory, and positive youth development. Its eight fundamental components are community-enhanced policing, intensive case management, juvenile justice intervention, family services, after-school and summer activities, education services, mentoring, and the use of incentives to encourage youth development activities. Each site brings together key stakeholders in schools, law enforcement agencies, and social services and health agencies to develop tailored approaches to the delivery of the core service components consistent with local culture and practice. At all sites, CASASTART is staffed by case managers and requires the cooperation of area police departments and local social service and juvenile crime agencies.

### PROGRAM REQUIREMENTS

- Universal, selective, and/or indicated prevention program
- Targets one or more alcohol, tobacco, drug, disruptive behavior, and/or violence outcomes
- Targets students in one or more grades K-12

### **Does this program meet the minimum program requirements for inclusion on the Science-Based Programs List?**

- YES** This indicated and selective and universal substance abuse and violence prevention program targets upper elementary and middle school students.
- NO**

### RESEARCH RATINGS FOR BEHAVIORAL OUTCOMES

Quality of Research Ratings by Criteria (0.0-4.0 scale)

Outcome	Reliability	Validity	Fidelity	Missing Data/Attrition	Confounding Variables	Data Analysis	Overall Rating
Outcome 1: Use of "gateway drugs" (cigarettes, alcohol, inhalants, marijuana)	4.0	4.0	1.8	2.5	2.5	4.0	<b>3.1</b>
Outcome 2: Use of psychedelics, crack, other cocaine, heroin, or nonmedical prescription drugs	4.0	4.0	1.8	2.5	2.5	4.0	<b>3.1</b>
Outcome 3: Drug trafficking	0.0	4.0	1.8	2.5	2.5	4.0	<b>2.5</b>
Outcome 4: Violence	3.5	3.5	1.8	2.5	2.5	4.0	<b>3.0</b>
Outcome 5: School promotion (progression to the next grade)	3.5	3.5	1.8	2.5	2.5	4.0	<b>3.0</b>
Outcome 6: Knowledge of delinquent peer behaviors	3.5	3.5	1.8	2.5	2.5	4.0	<b>3.0</b>

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### Outcome 1: Use of “gateway drugs”

Youth were asked about their use of gateway drugs (those believed to lead to use of "hard drugs") using questions from the Monitoring the Future survey. Self-reported measures included (1) past-month use of cigarettes, alcohol, inhalants, or marijuana and (2) past-year use of alcohol, inhalants, or marijuana. One year after the end of the program, only 51% of CASASTART youths, compared with 65% of control youths, reported past-month use of cigarettes, alcohol, inhalants, or marijuana ( $p < .001$ ). Similarly, only 64% of CASASTART youths reported past-year use of alcohol, inhalants, or marijuana compared with 74% of youths in the control group ( $p < .01$ ). The treatment group was about half as likely to report past-month ( $p < .001$ ) and past-year ( $p < .01$ ) use of gateway drugs relative to the control group.

Criteria:	Reliability	Validity	Fidelity	Missing Data/Attrition	Confounding Variables	Data Analysis	Study Design
Rating:	4.0	4.0	1.8	2.5	2.5	4.0	Experimental
Meets Minimum:	✓	✓		✓	✓	✓	✓

### Outcome 2: Use of psychedelics, crack, other cocaine, heroin, or nonmedical prescription drugs

Youth were asked about their use of "stronger drugs" including psychedelics, crack, other cocaine, heroin, and nonmedical prescription drugs in the past 30 days using questions from the Monitoring the Future survey. Key Findings One year after the end of the program, treatment youth were significantly less likely than the control youth to report past-month ( $p < .05$ ) use of psychedelics, crack, other cocaine, heroin, or nonmedical prescription drugs. Specifically, 5 percent of CASASTART youths, compared with 9 percent of control youths, reported use of these drugs in the past month. The treatment group was about half as likely to report 30-day use of psychedelics, crack, other cocaine, heroin, or nonmedical prescription drugs relative to the control group ( $p < .05$ ).

Criteria:	Reliability	Validity	Fidelity	Missing Data/Attrition	Confounding Variables	Data Analysis	Study Design
Rating:	4.0	4.0	1.8	2.5	2.5	4.0	Experimental
Meets Minimum:	✓	✓		✓	✓	✓	✓

### Outcome 3: Drug trafficking

Self-reported measures of drug trafficking included lifetime and past-month participation in three kinds of drug-selling activities: (1) finding buyers, holding the drugs or money, or acting as a lookout; (2) selling drugs directly to buyers; and (3) helping to cut, package, or cook drugs. Compared with the control group, treatment youth reported significantly less involvement in drug sales in the past month ( $p < .05$ ) 1 year after the end of the program. Specifically, 14% of CASASTART youths, compared with 24% of control youths, reported having sold drugs within the past month. In addition, 37% of CASASTART youths, compared with 46 percent of the randomized control youths ( $p < .01$ ) and 44% of quasi-experimental control youth ( $p < .05$ ), reported lifetime drug sales activity. One year after the program ended, the treatment group was nearly half as likely to report lifetime involvement in drug-trafficking activities relative to the control ( $p < .05$ ) or quasi-experimental ( $p < .05$ ) groups. The treatment group was also half as likely to report past-month involvement in drug-trafficking activities relative to the control group ( $p < .01$ ).

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Criteria:	Reliability	Validity	Fidelity	Missing Data/Attrition	Confounding Variables	Data Analysis	Study Design
Rating:	0.0	4.0	1.8	2.5	2.5	4.0	Experimental
Meets Minimum:		✓		✓	✓	✓	✓

### Outcome 4: Violence

A violent-crime scale was derived from the mean of 6 self-report items asking youth how often they engaged in the following behaviors in the past year: (1) got in a serious fight at school; (2) took part in a fight between two groups of kids; (3) took money or other things from someone; (4) attacked someone with the intention of seriously hurting him or her; (5) forced or tried to force someone to engage in sexual acts; and (6) carried a weapon. One year after the end of the program, treatment youth reported significantly lower levels of violent crimes in the past year compared with youth in the control group ( $p < .05$ ). Specifically, 22% of CASASTART youth, compared with 27% of control youth, committed a violent crime during this period.

Criteria:	Reliability	Validity	Fidelity	Missing Data/Attrition	Confounding Variables	Data Analysis	Study Design
Rating:	3.5	3.5	1.8	2.5	2.5	4.0	Experimental
Meets Minimum:	✓	✓		✓	✓	✓	✓

**Do this program's NREPP ratings meet the minimum research ratings for inclusion on the Science-Based Programs List?**

YES

NO NREPP reports more than one behavioral outcome related to substance use and violence for CASASTART. However, these behavioral outcomes are not rated at or above the minimum standards on all criteria.