

---

12-10-2012

## Teachers' Perceptions of a Multiple High-Risk Behavior Prevention Program and Delivery of Universal Programming

Crystal Collier

*Sam Houston State University, cam066@shsu.edu*

Richard C. Henriksen Jr.

*Sam Houston State University*

Follow this and additional works at: <https://nsuworks.nova.edu/tqr>



Part of the [Quantitative, Qualitative, Comparative, and Historical Methodologies Commons](#), and the [Social Statistics Commons](#)

---

### Recommended APA Citation

Collier, C., & Henriksen, R. C. (2012). Teachers' Perceptions of a Multiple High-Risk Behavior Prevention Program and Delivery of Universal Programming. *The Qualitative Report*, 17(50), 1-19. <https://doi.org/10.46743/2160-3715/2012.1699>

This Article is brought to you for free and open access by the The Qualitative Report at NSUWorks. It has been accepted for inclusion in The Qualitative Report by an authorized administrator of NSUWorks. For more information, please contact [nsuworks@nova.edu](mailto:nsuworks@nova.edu).

---



**Qualitative Research Graduate Certificate**  
*Indulge in Culture*  
Exclusively Online • 18 Credits  
**LEARN MORE**

NSU  
NOVA SOUTHEASTERN  
UNIVERSITY

NOVA SOUTHEASTERN

## Teachers' Perceptions of a Multiple High-Risk Behavior Prevention Program and Delivery of Universal Programming

### Abstract

Much of the success of high-risk behavior prevention programs rests with teachers who deliver the curriculum however; few studies have investigated teachers' perceptions of program implementation. The objective of this phenomenological study was to answer the question, "What are the experiences of teachers who are asked to be involved in the implementation process when their school adopts a multiple high-risk behavior prevention program"? Participants included 10 teachers at a local, private high school in the Southern United States. Five themes emerged: (a) lack of consistent historical effort, (b) need for program, (c) positive but tentative perceptions, (d) challenges with implementation, and (e) review of program counselor. The qualitative results identified factors that can promote or hinder success of the program.

### Keywords

Teachers, Perceptions, Prevention, Private High School, Qualitative Research

### Creative Commons License



This work is licensed under a [Creative Commons Attribution-Noncommercial-Share Alike 4.0 License](https://creativecommons.org/licenses/by-nc-sa/4.0/).



## Teachers' Perceptions of a Multiple High-Risk Behavior Prevention Program and Delivery of Universal Programming

Crystal Collier and Richard C. Henriksen Jr.  
Sam Houston State University, Texas, USA

---

*Much of the success of high-risk behavior prevention programs rests with teachers who deliver the curriculum however; few studies have investigated teachers' perceptions of program implementation. The objective of this phenomenological study was to answer the question, "What are the experiences of teachers who are asked to be involved in the implementation process when their school adopts a multiple high-risk behavior prevention program"? Participants included 10 teachers at a local, private high school in the Southern United States. Five themes emerged: (a) lack of consistent historical effort, (b) need for program, (c) positive but tentative perceptions, (d) challenges with implementation, and (e) review of program counselor. The qualitative results identified factors that can promote or hinder success of the program. Keywords: Teachers, Perceptions, Prevention, Private High School, Qualitative Research*

---

In the United States, adolescent alcohol and drug use increases each year during high school (CDC, 2009). However, alcohol and drugs are among a growing list of high-risk behaviors youth have the choice to engage in today. Researchers have demonstrated the increase in adolescent high-risk behaviors such as gambling (Powell, Hardoon, Derevensky, & Gupta, 1999), pornography (Braun-Courville & Rojas, 2009), self-injury (Alfonso & Dedrick, 2010; Hilt, Nock, Lloyd-Richardson, & Prinstein, 2008), cyberbullying (Agatston, Kowalski, & Limber, 2007), eating disorders (Pisetsky, Chao, Dierker, May, & Striegel-Moore, 2008), video game addiction (Grüsser, Thalemann, & Griffiths, 2007), suicide (Pelkonen, & Marttunen, 2003), driving while drinking (CDC, 2009), and dating violence (Hickman, Jaycox, Aronoff, & Rand, 2004; Spencer & Bryant, 2000). In addition, some adolescents display a pattern of simultaneous engagement in multiple high-risk behaviors that increases from freshman to senior year in high school (Biglan, Brennan, Foster, & Holder, 2005; Brener & Collins, 1998; Fox, McManus, & Arnold, 2010; Lindberg, Boggess, & Williams, 2000). Thus, the need for effective prevention programs that target multiple high-risk behaviors is evident.

For decades, researchers have analyzed prevention programs in the hope of discovering what approaches are most effective in preventing diverse child and adolescent problem behaviors (Faggiano et al., 2005; Biglan et al., 2005; Drug Strategies, 1999; Gottfredson & Wilson, 2003; Hansen, 1992; Porath-Waller, Beasley, & Beirness, 2010; Rohrbach, Grana, Sussman, & Valente, 2006; Schinke, Brounstein, & Gardner, 2002; Tobler & Stratton, 1997; Tobler et al., 2000). Most of these studies agree with a key finding of Tobler et al.'s (2000) meta-analysis of 207 prevention program evaluations that interactive, universal change programs possessed the highest level of effectiveness. Universal or school-wide prevention programs target the entire student population. The Substance Abuse and Mental Health Services Administration (SAMHSA) classifies prevention programs into three categories. According to SAMHSA, universal

programming benefits all members of a community whereas selective programs target individuals possessing certain risk factors and indicated programs target those already engaged in high-risk behaviors (Substance Abuse and Mental Health Services Administration's National Registry of Evidence-based Programs and Practices website, 2011). Much of the success of universal programs rests on the shoulders of teachers who deliver the curriculum (Drug Strategies, 1999). Such an effort involves a great number of teachers willing to invest time and energy to implement programs about topics they may know little about such as alcohol and drug abuse.

A new trend in evaluation involves conducting qualitative studies with teachers or counselors who implement universal programming and using the data to enhance the development, implementation, and success of programs (Baker-Henningham & Walker, 2009; Boxer, Musher-Eizenman, Dubow, Danner, & Heretick, 2006; Crothers & Kolbert, 2004; Klimes-Dougan et al., 2009; Lohrmann, Forman, Martin, & Palmieri, 2008; Soza-Vento & Tubman, 2004). Although this research is sparse, the addition of qualitative data, such as teachers' perceptions, offers a kaleidoscope of rich information regarding factors that can promote or hinder success of prevention programs that traditional quantitative evaluation may miss. For example, positive school climate is associated with effective risk prevention and health promotion efforts (Cohen, McCabe, Michelli, & Pickeral, 2009). According to Cohen et al. (2009), the experience, norms, and values of students and teachers within the school's organizational structure determine the quality of school climate and improving that climate includes the "whole village" of parents, students, teachers, school administration, and the community. Thus, researchers and administrators should hear each constituent's voice when evaluating prevention program changes and improvements. However, traditional quantitative methods may overlook key information that may be uncovered through a more personal, qualitative assessment method.

Qualitative evaluation provides a valid and effective mechanism for giving voice to teachers' perceptions. Researchers utilizing qualitative methodology to examine universal prevention programs that utilize teacher facilitators have shed light on factors that promote and hinder program sustainability and highlight the need to study teachers' perceptions. For example, Soza-Vento and Tubman (2004) found that the effectiveness of a universal anti-tobacco prevention program could be enhanced by targeting and improving teacher's perceptions of the program. They surveyed teachers to discover what factors motivated them to effectively implement the program. Anticipating that teacher training would emerge as a factor, researchers found that teachers regarded organizational commitments to reduce barriers as more important than training in regards to their perceptions of program effectiveness. However, in an attempt to implement a universal substance abuse prevention program, Sobek, Abbey, and Agius (2006) discovered that insufficient teacher training and motivation can have unfavorable results on the effectiveness of program implementation. The authors of this study recommended assessing teacher motivation and training needs prior to program introduction. Both studies highlighted the need for qualitative assessment of teachers' perceptions. Climates and teachers' needs may significantly differ in diverse environments thus creating differences in program success for different reasons.

Successful program implementation by teachers depends, in part, upon how comfortable they are with the approach, how motivated they are about the approach, and

positive perceptions about the approach (Rohrbach et al., 2006). While focused on special education and not prevention, the following qualitative study reflects how resistance can affect the implementation of any universally applied program. Lohrmann, Forman, Martin, and Palmieri (2008) studied school personnel's resistance to adopting a school-wide special education program and found that in schools where the resistance was overwhelming, program execution struggled and overall program implementation was not realized. Some forms of resistance included staff beliefs about the need for the program, feelings of hopelessness about change, philosophical differences with their school, and feelings of disenfranchisement. Early detection of resistance sources such as these allows for the creation of action plans to remove barriers and promote teacher commitment.

Gathering this type of qualitative data allows for an in-depth view of the process of teacher implemented prevention programming. Integrating qualitative process data with quantitative outcome data enables administrators to further program sustainability in real-world settings. In one such study, Boxer et al. (2006) assessed teachers' perceptions of a school-based aggression prevention program and discovered a number of strengths within the school's culture that were already assisting in lowering aggression. They integrated these findings with the quantitative measures and developed individualized recommendations for the school and other schools implementing the same program. In a similar study, Crothers and Kolbert (2006) utilized qualitative and quantitative data from teachers and students to analyze the acceptability of a bullying prevention intervention. In this case, the qualitative data supported the quantitative and led the authors to conclude that the qualitative study of both teachers and students perceptions can improve prevention methods and increase participation.

In light of the promising effects found in the literature, the researchers of the current study decided to utilize qualitative data to examine prevention program effectiveness and sustainability of the universal portion of a prevention program that addresses multiple, high-risk behaviors. To date, no research exists that utilizes qualitative methodology to examine teachers' perceptions of a substance abuse or multiple, high-risk behavior prevention program. The program, adopted by a local religious, private high school, offers universal, selected, and indicated prevention programming to faculty, parents, and students. Faculty members are involved in delivering the universal programming portion. The purpose of this phenomenological study was to describe teachers' perceptions of and their participation in delivering the universal programming portion of a multiple high-risk behavior prevention program recently adopted by a local, private high school in a Southern United States. The study was designed to answer the question, "What are the experiences of teachers who are asked to be involved in the implementation process when their school adopts a new multiple high-risk behavior prevention program"? Thus, as was seen in the research listed above, we hoped that the qualitative results of this study would shed light on factors that could promote or hinder success of this program and others like it that traditional quantitative methods may overlook.

## **Method**

Many participants including teachers and administrators participated in the implementation of the prevention program currently in year two of a 4-year design. The

researchers decided to allow enough time for the faculty to experience a full year and a half of program implementation prior to conducting this study. In addition, the program developers had ample time to ascertain and incorporate the study results into the next two and a half years of programming. For this study, the researchers chose a phenomenological design (Moustakas, 1994) to describe teachers' experiences of the introduction, implementation, and delivery of the universal portion of the prevention program at their school. As researchers who work in the field of adolescent high-risk behavior, the authors possess technical understanding of effective prevention programming and principles. However, this knowledge fails to explain why even excellent programs based on sound theory with good quantitative outcomes fail to integrate into some schools. Moustakas (1994) explains "the meaning of a phenomenon is in the act experience and not in the object" (p. 51). In his phenomenological approach, understanding the meaning of an experience is achieved by perceiving and reflecting on acts. Thus, we chose to utilize Moustakas' conceptual framework in an attempt to describe and understand the intentional experiences of the faculty who in essence are the program or the act.

### **Prevention Program**

Both authors of this article are counselors and counselor educators affiliated with Sam Houston State University who specialize in the area of alcohol and drug abuse prevention and treatment. The first author is an employee of a non-profit agency contracted to design and deliver the prevention program and serves as the program counselor's supervisor. Both authors possess an interest in the creation and sustainment of effective high-risk behavior treatment and prevention programs within their local community and set out to learn how teachers were experiencing their school's adoption of the multiple high-risk prevention program.

The program includes components of previously successful prevention efforts derived from the extant literature as well as two suggested elements missing from these programs: curriculum concerning multiple high-risk behaviors and programming tailored to fit a culture. The program targets 15 high-risk behaviors including: alcohol, drugs, tobacco, bullying, cyberbullying, dating violence, criminal behavior, video game addiction, suicide, driving under the influence, eating disorders, self-injury, gambling, sex, and pornography. Prevention programming takes place throughout each component of the school's system including faculty, parents, and students. Program researchers, including the first author, examined the culture and needs of the school by surveying each group prior to program adoption. The survey data assisted prevention counselors with the development of interventions targeting specific high-risk behaviors prevalent within the culture. Programming focuses on promoting social and emotional competence, changing perceptions about norms, development of executive function skills, and providing confidential therapy services on campus.

### **Participants**

A combination of random purposeful and criterion sampling were employed to determine the participants (Onwuegbuzie & Collins, 2007). The population of interest

included only teachers' who experienced and participated in the phenomenon. Thus, the criterion became teachers that received prevention education and implemented or assisted in the implementation of a prevention activity of the program as opposed to faculty who did not implement any prevention programming. Out of 78 possible teachers who met the criterion, ten participants were randomly selected. Ten participants are considered an appropriate sample size for a phenomenological study (Onwuegbuzie & Collins, 2007). After receiving institutional review board approval from Sam Houston State University as well as agency and program site approval, selected teachers were contacted and recruited using an email invitation. Participation in the study was voluntary. Prior to the interview, the lead author of this study described potential risks associated with participation and obtained consent from each participant. Pseudonyms were used to protect participant anonymity. Interviews were held in a confidential location and no identifying remarks were used. Of the ten selected, five males and five females ranging in age from 26 to 68 participated in the study. All participants identified themselves as Caucasian or White. Seven participants reported being married, two divorced, and one single. Seven participants had children. Three participants had children attending the school. The range of years reported working at the school was between three and 25 years.

### **Data Collection Procedures**

Two types of data were collected including demographic information and participant responses to interview questions. Demographic information included age, gender, race, and occupation, years employed at school, marital status, number of children, and number of children at this school. The demographics questionnaire also included two open-ended questions regarding the participants' experiences with the prevention program. The two questions on the demographics questionnaire were: (a) *Describe what you know about the prevention program being conducted at this school* and (b) *Describe your level of participation in the school's prevention program activities?* These two questions served the purpose of ensuring that each participant met the participant inclusion criteria by being aware of and participating in the program. In addition, the qualitative, fill-in-the blank questions allowed the participant to focus on their experience prior to conducting the interview (Moustakas, 1994). In addition, field notes were taken throughout the interview process and compiled at the end of the data collection process.

The interview was semi-structured and included four open-ended questions that were based on the research literature. Moustakas (1994) recommended general questions in regards to what is experienced in terms of the phenomenon and what contexts or situations typically influence or affect the experiences with the phenomenon. Thus, the questions used were: (a) *What is your perception of how the school has historically dealt with high-risk behavior of the students*, (b) *What is your perception of the current prevention program*, (c) *Describe the role the current prevention program plays in the school*, and (d) *Describe your particular role in the program activities?* These questions tap into the participants' experience of the program and their role within a historical context. Additional questions were asked during the actual interviews to clarify, add to, or elicit a deeper understanding of the interviewee's experience.

The duration of the interview ranged from 15 to 35 minutes. Participants were asked to meet in a private office away from their classrooms and administration buildings. Participants were provided a copy of the written informed consent and a verbal description of the contents. The informed consent included a description of the study, the benefits and risks of participation, the voluntary nature of the study, and that there was no compensation for participation in the study. Some participants were selected to receive an email from the principal investigator requesting a review of their data. This member check served as a validity measure by allowing the participants to verify the accuracy of their initial interview and add additional detail to their experiences (Creswell, 2007).

All interviews were audio taped and transcribed by the first author. All identifying information was coded and kept confidential. Participants chose pseudonyms to insure confidentiality. All study data, including audiotapes, were kept in a locked filing cabinet at the principal investigator's office and were destroyed upon completion of the study.

### **Data Analysis**

A phenomenological study portrays the meanings and essences for several individuals of their lived experiences of a single concept or phenomenon (Creswell, 2007; Moustakas, 1994)). The researchers were interested in allowing the meaning of the teachers' experiences of the introduction and implementation of the new prevention program to emerge rather than presupposing or assuming based upon observation. In order to allow the common essence of the experience to materialize, the researchers bracketed their judgments through a process including self-reflection via journaling and checking interpretations between researchers (Hamill & Sinclair, 2010; Moustakas, 1994). The bracketing procedures began prior to and continued throughout the entire process of the study. By examining and suspending preconceived beliefs, assumptions, and values about the phenomenon, the researchers were able to approach the participants and the interview data with freshness. Sources of bias identified by the researchers included employment as the program manager of the prevention program and direct supervisor of the counselor implementing the program. Even though the researchers had no direct contact with the teachers who implemented the program on campus, the drawback included the possibility of this bias contaminating the researchers' perspective. In addition, the authors accomplished methodological triangulation by utilizing multiple data sources. The authors cross-validated the interview data with the written, open-ended question data from the demographic questionnaire and with the observation and field notes (Creswell, 2007).

The Stevick-Colaizzi-Keen method (Moustakas, 1994) was chosen as the most practical and useful data analysis tool for the phenomenological purposes of this study and is described in the following six steps. First, the researchers entered the epoché, a state of suspended judgment about the phenomenon achieved by examining and journaling all preconceived notions and biases about the prevention program (Hamill & Sinclair, 2010; Moustakas, 1994). For the first author, serving as program manager for the project and researcher meant becoming self-critical and self-aware of how values about the program might influence questioning of participants, collection of data, and data analysis. Second, interview transcriptions were carefully examined to identify

significant statements regarding how participants experienced the introduction and implementation of the prevention program within its historical context. Called horizontalization of data, significant statements are compiled into a list of nonrepetitive, nonoverlapping statements (Creswell, 2007). Third, the authors assembled themes or units of meaning from the list of significant statements. Moustakas (1994) called these themes the horizons and they comprise the textural description of the experience. Fourth, the authors wrote the textural description of the teachers' experience of the prevention program including verbatim examples. Whereas the textural description describes what the participants experienced, the structural description describes how the experience happened (Creswell, 2007). Here the goal was to discover how the experience came to be what it is and what conditions existed for the phenomenon to appear. Therefore, in step five, the authors wrote a structural description of the teachers' perception of the prevention program including information about its setting and historical context. Incorporating both the textural and structural descriptions into a composite of the phenomenon composes the six and final step and ultimately depicts the core of the teacher perceptions of the prevention program. This passage is the "essence" of the experience that intuitively integrates the fundamental textural and structural descriptions into a unified whole and represents the culminating aspect of a phenomenological study (Creswell, 2007, p. 159; Moustakas, 1994). In this step, the authors were able to capture the fundamental synthesis of teachers' experience and understand the nature and meaning of their introduction and participation in the multiple high-risk behavior prevention program recently implemented in their school.

## **Results**

The current study was designed to describe the experiences of teachers who are asked to be involved in the implementation process when their school adopts a new multiple high-risk behavior prevention program. Structurally, participants experienced the phenomenon in multiple locations across the school. Program activities took place within their classrooms during advisories, in the Chapel during speakers and homilies, during in-service training, and in their physical mailboxes and email boxes. Some study participants came into contact with the prevention program in the parking lot during a drunk-driving presentation, in the cafeteria during student activities and lunch hour discussions, in the auditorium during kick-offs and round-table events, and in the hallways when students displayed prevention posters. In addition, some participants encountered the prevention program in the school newspaper when students wrote articles about the program or when the program counselor advertised her confidential office hours. Some attended events in the theater when students presented plays about high-risk topics.

All 10 teachers involved in this study participated in the implementation of the universal portion of the program, nine served as activity facilitators during advisory classes. Research data were analyzed including the teachers' interview transcripts, written open-ended questions, and field notes. Five themes emerged including: (a) lack of consistent historical effort, (b) need for program, (c) positive but tentative perception of current effort, (d) challenges with implementation of the program, and (e) review of program counselor.

## **Lack of Consistent Historical Effort**

All 10 of the participants shared experiences that referenced the school's historical lack of consistent action for students exhibiting high-risk behavior such as alcohol or drug abuse on campus or at off-campus school events. This overall theme included three sub-themes: (a) inconsistent disciplinary action and prevention efforts, (b) previous prevention efforts, and (c) effectiveness of historical prevention efforts.

**Inconsistent actions and efforts.** All 10 participants discussed the school's historical lack of consistency of disciplinary action when students broke school policy regarding alcohol and drug use on campus or during off-campus school events. Many described that before the new prevention program some students were given leniency while others were referred to treatment centers or boarding schools. Stefan's words describe the lack of discipline consistency, "There was no consistency. Some students were kind of handled in a more kind way and others students were handled in a more harsh way....and so it seemed uneven." Additionally, William's words also describe this theme,

From what I have seen the dealings have been inconsistent. In weird situations where someone has been involved with drugs and alcohol, they've been suspended from school. Then there are times you hear about students with drugs and alcohol that maybe have a detention. So, it's been very inconsistent.

Some teachers referred to the school's earlier rules regarding the use of alcohol and drugs. Their shared experience was having clear knowledge of the rules and policy but an unclear knowledge of the consequences for violating them. George's words sum up this dilemma,

I think we knew as faculty there was a...like if someone was bringing alcohol on the campus, we knew there was a clear punishment. We didn't know. If you had a student who you thought was having issues but they weren't blatantly violating a rule in front of you, you just really didn't know how the school was going to deal with that. It was pretty secret.

**Previous prevention efforts.** Regarding previous prevention efforts, all participants shared the experience of inconsistent historical prevention programs prior to the current effort. Efforts included one day to one week of prevention programming each year. Teachers in employment longer than eight years reported some years during which students received no prevention programming. Comments from Elliot, Stefan, and William respectively that demonstrate this theme included: "Limited to non-existent,... It would be one day each year...or maybe a couple of days in a week each year," and

Usually it was a group of people. It was always maybe a district attorney, a police officer, a psychologist. And they would talk about you know the risk involved in drugs and alcohol and driving and sometimes we'd have

somebody from the hospital. So, at least once a year we would have that.

**Effectiveness of historical prevention efforts.** Historically, the school offered some prevention programs. Teachers described these prevention efforts as inconsistent and ineffective. Frankie depicted a particular experience in detail:

We had a guy here for a few years who would come for a week. I met with him once in the group of faculty and I thought he was little crazy. The kids say, if anything, he made them want to try drugs. He was apparently a former drug user who had this sort of mission. The kids would talk about it and as the staff we would joke about it and say 'Oh! It's how to do drugs week'.

### **Need for Program**

Eight participants shared the belief that the school needed to improve their prevention efforts for various reasons. George, Parker, and Mary thought the need was due to the school's reputation as a "party school." George portrays this idea when he tells about what friends told him about the school before he started working there, "They told me 'Good school. We think you'll like working there but off the record, that's the party school of [city].'"

While most teachers did not believe the reputation was completely justified, seven out of 10 did perceive problems with high-risk behavior within the student population that necessitated a more concerted prevention effort. These participants judged the crux of the student's drug and alcohol issues to reside with the parents. Teachers placed emphasis on a more relaxed parenting style common to the high socioeconomic level of the student body. The subsequent quotes illustrate this shared perception. Elliot expresses, "Those parents are supplying them with their alcohol....setting up [beach city] trips...letting them go to [beach resort]. What do you think they are going there for?" George believes, "That's an ingrained cultural attitude that is gonna be really hard to break." Robert thinks, "It's not a real big secret that our biggest problem with alcohol is parents, not students. Parents will allow students to drink in their houses." Steven describes the sentiment and the need for program theme well,

I think um we do certainly have kids that are in high-risk behaviors. I think again this is stereotypical thing to say but we have kids that have access to money, which also gives access to buying drugs and alcohol, and we also have many kids whose parents travel or are out of town a lot. They are home alone. So, I think it's important that we have a program like this.

Catherine offered a response shared by most participants, "My only hope is that these parent programs help. The parents who don't need to be there are truly the ones that are there. And so, that's the problem... the lack of consistent parenting across the board."

## **Positive but Tentative**

All participants described the new prevention effort as an improvement from historical efforts and most thought it fit well within the school's culture. Nine of the 10 participants shared the experience of feeling hopeful and positive regarding the current prevention program but feeling tentative about its impact on students for various reasons. This overall theme included three sub-themes: (a) program infancy, (b) students not serious, and (c) multiple behavioral approach of the program.

**Program infancy.** Eight of 10 participants cited the newness of the program and predicted its improvement as time progressed. Frank states, "It's better than it was before but, I think it still has some issues." Elliot says, "So, I think it is a good, good way to start. I think it is still in its infancy." Robert reports, "I think that it is quite actually effective within this school culture. I think the Choices program needs to be given more time to establish. "

Accompanied by caution, the teachers' common reaction to the program included positive beliefs and attitudes. William's words offer a good example of this shared reaction,

I think we are all behind it. I think we all feel like, you know, anything that can again plant the seed or light the foundation is good. I mean the mission for our school is to have prepared these kids for a life after high school. And, this is what helps then I think we are all for it. I think we are all behind that.

**Students not serious.** Some teachers expressed specific observations regarding the program's effect on students. Most discussed how the students deal with the program topics as Mary describes, "I mean I think it's good because it's educating the students. But, a lot of them don't take it very seriously." Mark illustrates his perceptions,

A lot more tangible work on uh the issues. I know the effort has been a lot more genuine and serious and concerted and focused. The program has been a step in the right direction in terms of providing information to the community. My overall sense is that there hasn't been major behavioral changes among the students yet.

A "roll out" was described by six of the teachers. Teachers used the term "roll out" to describe the lack of impact on current students who were introduced to the program in 2009. They perceived that the students who were enrolled in the school before introduction of the program harbored negative feelings about having to be involved in something new. The teacher's shared belief was that the program would have its greatest impact on students who experienced the "roll out" or all four years of the program. Thus, they believe students who "did not know any different" would take the program more seriously. Parker's words describe this perception, "I think that it is probably better, you know, with the ninth and tenth graders because they have had that from the very beginning." Frankie explained the concept,

The kids that were here before Choices and the roll out is kids who got here with Choices. They don't know any different so they are more receptive. So this is how it works.

**Multiple behavioral approach.** Most study participants felt positive about the ambitious nature of the current program. This was evident in participant perceptions of the multiple high-risk behavior focus of the program as seen in the following comments. Stefan commented, "I see evidence of the program working. It is effective because of its kind of multiple ways of trying to address the students...a lot of different things and its consistent without being overkill." Frank was pleased with the addition of new topics and mentions "But when it comes to some of the other topics like the suicide prevention or eating disorders or the thing about depression...that was a little more interesting to them and I think that's because it's not overdone." William expresses this theme,

I think this program has brought to light that there are other high-risk behaviors that students are involved that maybe as teachers and parents we don't see. You know the eating disorders and the bullying and things like that. I don't remember ever us talking about that before because we tend to concentrate on the drugs and alcohol. Although they hear that a lot more and they hear about a variety of high-risk behaviors.

### **Challenges with Implementation**

Since the prevention program began, a certain number of advisories include topic discussions or experiential activities regarding 15 different high-risk behaviors throughout the school year. Advisory classes occur each week and last for twenty minutes during which students discuss school business. Prior to the prevention program's advisory classes, teachers receive handouts describing the current prevention topic and suggested methods of disseminating the information. These options include discussion questions, quizzes, videos, or experiential activities like role-playing.

Out of the nine teachers who serve as advisors, eight shared the experience of feeling awkward or uncomfortable discussing certain topics. Some felt discomfort when discussing topics when they were aware one of their students currently struggled with the topic behavior. Others felt discomfort with topics they deemed irrelevant to their students as George's admission illustrates, "So, if I have ten advisees and the topic is video game addiction. I know it's not an issue for eight of them. It's a really weird topic to discuss. It makes more sense for me to just not do it." Still others described feeling awkward because of the lack of knowledge or experience with the behavior. Mary's words sum up this experience,

I mean I don't have a problem doing it and going over that stuff. I guess it's kinda hard cause I haven't had any of the issues we often talk about. Depression and suicide. I don't have much experience with a lot of this stuff. So, I'd say it's a little harder for me to share stories and show the kids that is really important.

Many teachers felt unsure they were qualified to facilitate the activities, as Frankie describes, "We have no kind of qualification to talk to these kids about any of these topics." Additional comments that demonstrate this theme included George's, "There are sometimes that I think I'm asked to do things that I'm not comfortable doing. And I haven't really heard how to do it." and Elliot's, "Not sure all the faculty are comfortable with that. Teachers probably don't know how to teach it."

Regardless of the reason for feeling awkward or uncomfortable, eight of the nine teachers who serve as advisors expressed a willingness to facilitate these activities. Most cited the needs of students to learn skills regarding high-risk behavior as the main motivation for engaging in the activities.

### **Review of Program Counselor**

The final theme that emerged from the teachers' shared experience of the program was perceptions of the program counselor. Seven study participants shared positive perceptions of the counselor. Some discussed the counselor's ability to be genuine and approachable with students. Some attributed these abilities to the counselor's "coolness" factor. Remarks representing this theme include Stefan's sentiment, "I'm thrilled the program is here and particularly that [the counselor] is here. I think she's fantastic!" and Mary's remarks, "So, I think she has good rapport with students. She is kind of no nonsense and to the point and I think students like her once they get to know her." Parker's observations of the process demonstrate this theme,

The kids didn't know really how to take [the counselor] and it took them all to find out that she was a regular person and she was cool. I think it's good for [the counselor] just to be seen walking around interacting with students. I think that the kids may think that oh God there's that drug and alcohol woman. I think that her doing that allows the students to let their guards down. And they might be more apt to come in and chat with her because of that.

Most participants described their impressions of the prevention program counselor's rapport with students and staff. Robert described how he perceived how the counselor was fitting in with faculty, "I think now that it is beginning to sort of become part of the school's culture, and particularly the person [the counselor] who is running the program has begun to be accepted more in the faculty and staff circles rather than being very suspicious of her."

### **The Essence of the Experience**

In essence, the participants of this study revealed a cautious but positive experience with the phenomenon. Participants' textural descriptions included experiencing inconsistent historical efforts by the school to deal with high-risk behaviors as well as minimal and ineffective prevention programming. These experiences included the shared knowledge that their school had acquired a reputation as a "party school."

Accompanying this knowledge, there appeared to be a shared awareness of the need for a prevention program to deal with high-risk issues. The perception of historical events and needs of the population seemed to create a cautiously, optimistic environment for the current program's introduction and implementation. Sharing the belief that the new program fits well into the culture, the participants perceived the effort to be a promising beginning in establishing an effective high-risk behavior prevention program. All participants observed effects of the prevention program, some positive as in more student involvement and discussion and some negative such as students not taking the content seriously. Most participants shared positive perceptions regarding the multiple, high-risk focus of the program as well as the program's counselor. The participants saw the counselor as "likable" and seemed to appreciate the useful service she offered to the teachers and the students.

When woven together, the structural and textural elements paint a picture of a cautiously, optimistic participant experience of a multiple, high-risk prevention program taking place in many areas and under many circumstances within their school. Although participants experienced challenges during implementation of the universal portion of the programming, teachers appeared willing to face these difficulties because of their perceived need for the program. Thus far, participants felt hopeful and in support of future prevention endeavors.

### **Discussion**

To sustain the progress made in the development of effective prevention programming, researchers must determine successful implementation procedures for these programs in real-world settings. As described in the literature, much of the success of universal prevention programming lay on the shoulders of teachers and counselors who implement such programming (Drug Strategies, 1999; Porath-Waller, Beasley, & Beirness, 2010; Rohrbach, Grana, Sussman, & Valente, 2006; Tobler et al., 2000). Thus, gathering information from these facilitators is vital both prior to and during the process. Even though the current body of qualitative literature regarding teacher perceptions of prevention programming is limited and sparse, the results of recent studies have demonstrated how valuable this methodology can be in uncovering data critical to promoting program improvements and sustainability (Baker-Henningham & Walker, 2009; Boxer, Musher-Eizenman, Dubow, Danner, & Heretick, 2006; Crothers & Kolbert, 2004; Lohrmann et al., 2008; Soza-Vento & Tubman, 2004). The results of the current study point to specific perceptions about the school climate and attributes of the program that may promote or hinder the real-world application of a multiple high-risk behavior prevention program containing a universal program portion recently implemented at a school in a Southwestern state.

According to Cohen et al. (2009), a positive school climate has been linked to positive student development, academic achievement, teacher retention, and effective high-risk prevention. A sense of positive school climate emerged from the participants shared experience of the introduction and implementation of the prevention program recently implemented in their school. Teachers described beliefs that their school is progressive, proactive, and unified. Catherine's description illustrates these beliefs, "I'm not saying that we're a touchy feely school because that sounds funny. But we are. You

know we are a community. We address problems. We're forward thinking." The positive climate at this school serves as a good foundation for the adoption and growth of the current prevention program.

When taking into consideration that the perceptions of the attributes of a prevention program may affect the rate of its adoption into the school (Lohrmann et al., 2008; Rohrbach et al., 2006), it is important to note that three out of the five themes identified in the current study positively depict program attributes. Teachers perceived the program to be a positive improvement compared to perceived inconsistent and ineffective historical efforts. In addition, most study participants identified a need for a prevention program that addresses the permissive parenting perceived to be prevalent within the student body. Another program attribute well received by participants was the multiple high-risk behavior focus. Teachers viewed this approach as more realistic and offering students a variety of discussion points without overdoing any one specific topic. Lastly, the program counselor herself was perceived as a positive attribute. The positive opinions of the participants may assist in the continued integration of the program within the school system and offer motivation for teachers to deliver the program with fidelity.

Regarding fidelity, previous research indicates successful program implementation by teachers depends, in part, upon how comfortable they are with the approach and how motivated they are about the approach (Rohrbach et al., 2006; Sobeck, Abbey, & Agius, 2006). One of the emerging themes that indicated an area of concern for the current program was the awkwardness felt by teachers during high-risk behavior discussions. Even though teacher motivation appears to be high, eight participants in the current study shared the experience of feeling awkward or uncomfortable when discussing high-risk behavior topics. These feelings may have a negative impact on implementation. This finding concurs with previous research, which found that teachers uncomfortable with content and interactive activities might fail to deliver or implement these activities (Sobeck, Abbey, & Agius, 2006).

Data gathered from the participants of this study regarding their positive reviews of the program counselor may prove useful for teachers who feel discomfort when facilitating program activities. At this school, the prevention program counselor is a mental health counselor who oversees, trains, and directs teachers who facilitate the program activities. Previous studies have shown that the type of leader can affect the delivery quality of prevention programming (Hansen, 1992; Klimes-Dougan et al., 2009; Tobler et al., 2000). Tobler et al. (2000) found that mental health professionals are the most effective prevention program facilitators next to peers and then teachers. However, if prevention programs that contain universal portions such as this one need teachers to assist in the delivery of program curriculum, then cooperation and collaboration between teachers and the mental-health professionals is essential (Boxer, Musher-Eizenman, Dubow, Danner, & Heretick, 2006). According to the teachers' perceptions, this collaboration and cooperation is currently in place. Thus, teachers at this school may benefit from training conducted by the program counselor whom they trust and perceive to be competent. Elliot's comment reflects this sentiment,

I think the program is an excellent idea. I think [the counselor is] doing it the right way. There are those kids that are in desperate need and they need counseling. And you know drug and alcohol abuse is not an easy area

to counsel in.

### **Limitations**

There were several limitations to this study. First, this study was conducted in a private religious school of a single denomination. Therefore, the results may not be transferable to other religious schools nor to public schools. This study did not examine the role religion plays in high-risk behavior. Second, the study took place in one geographic region, which may not be consistent with other geographic regions. Third, there were no ethnically diverse participants in this study. Teachers from other ethnic backgrounds may perceive the implementation of a prevention program differently. A more diverse population may offer different perspectives, opinions, values, and beliefs important to consider within a school's culture. This study took place in a predominantly White high school thus limiting the transferability. Results could be different in schools with more diverse populations but the role that race and class may play in high-risk behavior was not explored in this study. Finally, the authors accomplished data triangulation only by comparing interview data to written information. Further triangulation could have been accomplished by using multiple observers and an additional theoretical scheme to interpret the phenomenon.

### **Implications and Recommendations**

This study is one of few studies that investigated teachers' perceptions of school-wide prevention programming and the only study known that investigated teachers' perceptions of a multiple high-risk behavior prevention program and their part in the facilitation of the universal programming portion. Specifically, the researchers found that the effectiveness of the school's prevention program can be increased by targeting and enhancing teachers' perceptions of (a) the public's perception of the school, (b) the school's positive changes to address high-risk behavior in the students, (c) the school's positive changes to address parenting practices that may increase high-risk behavior in students, (d) the effectiveness and consistency of the current program, and (e) the effectiveness of the program's mental health professional. In addition, teacher training directed toward reduction of facilitation challenges when discussing program material may increase the fidelity of implementation and improve school climate.

These findings have important implications for prevention program implementation in a variety of real-world settings. Prevention programs tailored to fit a school's culture are more effective (Drug Strategies, 1999; Rohrbach et al., 2006; Sobeck et al., 2006; Tobler et al., 2000). Thus, assessing the culture of each school is essential for identifying factors that promote or hinder the adoption, success, and sustainability of the program. The results of this qualitative study identified factors that support the current prevention program as well as issues that may interfere with effectiveness if not addressed. The use of qualitative methods to assess teachers' perceptions allowed for the discovery of this information in a way that traditional quantitative tactics may have missed. Future research should broaden the scope and assess student and parent perceptions as well. Thus, identifying factors related to all constituents of the prevention program may further improve fidelity accuracy, degree of constituent involvement,

saturation of the program within the culture, identification of obstacles of implementation, and target areas in need of support.

### References

- Agatston, P. W., Kowalski, R., & Limber, S. (2007). Students' perspectives on cyber bullying. *Journal of Adolescent Health, 41*, 559-560. doi: 10.1016/j.jadohealt.2007.09.003
- Alfonso, M., & Dedrick, R. (2010). Self-injury among early adolescents. *American Journal of Health Education, 41*(2), 74-84.
- Baker-Henningham, H., & Walker, S. (2009, April). A qualitative study of teacher's perceptions of an intervention to prevent conduct problems in Jamaican pre-schools. *Child: Care, Health & Development, 35*(5), 632-642. doi: 10.1111/j.1365-2214.2009.00996.x
- Biglan, A., Brennan, P. A., Foster, S. L., & Holder, H. D. (2005). *Helping adolescents at risk: Prevention of multiple problem behaviors*. New York, NY: Guilford Press.
- Boxer, P., Musher-Eizenman, D., Dubow, E. F., Danner, S., & Heretick, D. M. (2006). Assessing teachers' perceptions for school-based aggression prevention programs: Applying a cognitive-ecological framework. *Psychology in the Schools, 43*(3), 331-344. doi: 10.1002/pits
- Braun-Courville, D. K., & Rojas, M. (2009). Exposure to sexually explicit websites and adolescent sexual attitudes and behaviors. *Journal of Adolescent Health, 45*, 156-162. doi: 10.1016/j.jadohealth.2008.12.004
- Brener, N. D., & Collins, J. L. (1998). Co-occurrence of health-risk behavior among adolescents in the United States. *Journal of Adolescent Health, 22*, 209-213.
- Centers for Disease Control and Prevention. (2009). *Youth Risk Behavior Surveillance-United States, 2009* (Surveillance Summaries MMWR 2010; 59 No. SS-5). Retrieved from CDC website: <http://www.cdc.gov/mmwr/pdf/ss/ss5905.pdf>
- Cohen, J., McCabe, L., Michelli, N. M., & Pickeral, T. (2009, January). School climate: Research, policy, practice, and teacher education. *Teachers College Record, 111*(1), 180-213.
- Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five approaches* (2nd ed.). Thousand Oaks, CA: Sage.
- Crothers, L. M., & Kolbert, J. B. (2004). Comparing middle school teachers' and students' views on bullying and anti-bullying interventions. *Journal of School Violence, 3*(1), 17-32. doi: 10.1300/j202v03n01\_03
- Drug Strategies. (1999). *Making the grade: A guide to school drug prevention programs. Preventing alcohol, tobacco and other drug use. Updated and expanded*. Washington, DC: Drug Strategies.
- Faggiano, F., Vigna-Taglianti, F. D., Versino, E., Zambon, A., Borraccino, A., & Lemma, P. (2005). School-based prevention for illicit drugs use: A systematic review. *Preventive Medicine, 46*, 385-396. doi: 10.1375/acri.41.2.259
- Fox, H. B., McManus, M. A., & Arnold, K. N. (2010, March). *Significant multiple high-risk behaviors among U.S. high school students* (Fact Sheet No.8). Washington, DC: The National Alliance to Advance Adolescent Health.

- Gottfredson, D. C., & Wilson, D. B. (2003). Characteristics of effective school-based substance abuse prevention. *Prevention Science, 4*(1), 27-38. doi: 10.1023/A:1021782710278
- Grüsser, S. M., Thalemann, L. R., & Griffiths, M. D. (2007). Excessive computer game playing: Evidence for addiction and aggression? *Cyberpsychology and Behavior, 10*, 290-292. doi: 10.1089/cpb.2006.9956
- Hamill, C., & Sinclair, H. (2010). Bracketing -- practical considerations in Husserlian phenomenological research. *Nurse Researcher, 17*(2), 16-24.
- Hansen, W. B. (1992). School-based substance abuse prevention: A review of the state of the art in curriculum, 1980-1990. *Health Education Research: Theory & Practice, 7*, 403-430.
- Hickman, L., Jaycox, L., Aronoff, J., & Rand, Corp. (2004). *Dating violence among adolescents: Prevalence, gender distribution, and prevention program effectiveness*. Retrieved from Rand Corporation: [http://www.rand.org/pubs/reprints/2005/RAND\\_RP1176.pdf](http://www.rand.org/pubs/reprints/2005/RAND_RP1176.pdf)
- Hilt, L. M., Nock, M. K., Lloyd-Richardson, E., & Prinstein, M. J. (2008). Longitudinal study of an interpersonal model of non-suicidal self-injury among preadolescents. *Journal of Early Adolescence, 28*, 455-469. doi: 10.1177/0272431608316604
- Klimes-Dougan, B., August, G. J., Lee, C. S., Realmuto, G. M., Bloomquist, M. L., Horowitz, J. L., & Eisenberg, T. L. (2009). Practitioner and site characteristics that relate to fidelity of implementation: The Early Risers prevention program in a going-to-scale intervention trial. *Professional Psychology: Research and Practice, 40*(5), 467-475. doi: 10.1037/a0014623
- Lindberg, L. D., Boggess, S., & Williams, S. (2000). *Multiple threats: The co-occurrence of teen health risk behaviors*. Washington, DC: Urban Institute.
- Lohrmann, S., Forman, S., Martin, S., & Palmieri, M. (2008). Understanding school personnel's resistance to adopting schoolwide positive behavior support at a universal level of intervention. *Journal of Positive Behavior Interventions, 10*(4), 256-269. doi: 10.1177/1098300708318963
- Moustakas, C. E. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage Publications.
- Onwuegbuzie, A. J., & Collins, K. M. T. (2007, June). A typology of mixed methods sampling designs in social science research. *The Qualitative Report, 12*(2), 281-316. Retrieved from <http://www.nova.edu/ssss/QR/QR12-2/onwuegbuzie2.pdf>
- Pelkonen, M., & Marttunen, M. (2003). Child and adolescent suicide: Epidemiology, risk factors, and approaches to prevention. *Pediatric Drugs, 5*, 243-265.
- Pisetsky, E. M., Chao, Y. M., Dierker, L. C., May, A. M., & Striegel-Moore, R. H. (2008). Disordered eating and substance use in high-school students: Results from the Youth Risk Behavior Surveillance System. *International Journal of Eating Disorders, 41*, 464-470.
- Porath-Waller, A. J., Beasley, E., & Beirness, D. J. (2010, June). A meta-analytic review of school-based prevention for cannabis use. *Health Education & Behavior, 37*(5), 709-723. doi: 10.1177/1090198110361315
- Powell, G. J., Hardoon, K., Derevensky, J., & Gupta, R. (1999). Gambling and risk taking behavior of university students. *Substance Use and Misuse, 34*, 1167-1184.

- Rohrbach, L. A., Grana, R., Sussman, S., & Valente, T. W. (2006, September). Type II translation: Transporting prevention interventions from research to real-world setting. *Evaluation & The Health Professions*, 29(3), 302-333. doi: 10.1177/0163278706290408
- Schinke, S., Brounstein, P., & Gardner, S. (2002). *Science-based prevention programs and principles, 2002*. Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention.
- Sobeck, J. L., Abbey, A., & Agius, E. (2006). Lessons learned from implementing school-based substance abuse prevention curriculums. *Children & Schools*, 28(2), 77-85.
- Soza-Vento, R. M., & Tubman, J. G. (2004). Tobacco use prevention education (TUPE) programs in the State of Florida: Correlates and predictors of teachers' perceptions of program effectiveness. *Journal of Health & Social Policy*, 20(1), 43-63. doi: 10.1300/j045v20n01\_03
- Spencer, G. A., & Bryant, S. A. (2000). Dating violence: A comparison of rural, suburban, and urban teens. *Journal of Adolescent Health*, 27, 302-305.
- Substance Abuse and Mental Health Services Administration's National Registry of Evidence-based Programs and Practices website. (2011). <https://preventionplatform.samhsa.gov>
- Tobler, N. S., Roona, M. R., Ochshorn, P., Marshall, D. G., Streke, A. V., & Stackpole, K. M. (2000). School-based adolescent drug prevention programs: 1998 meta-analysis. *The Journal of Primary Prevention*, 20(4), 275-336. doi: 10.1023/A:1021314704811
- Tobler, N. S., & Stratton, H. H. (1997). Effectiveness of school-based drug prevention programs: A meta-analysis of the research. *Journal of Primary Prevention*, 18, 71-128. doi: 10.1023/A:1024630205999
- 

### Author Note

Crystal Collier, MA, LPC-S received her master's degree in clinical psychology at the University of Houston-Clear Lake and is currently a doctoral candidate at Sam Houston State University. She has been licensed by the State of Texas as a professional counselor since 1999 and counselor supervisor since 2006. Her area of expertise includes adolescent development, prevention, anger management, independent living skills, trauma resolution, and cognitive-behavioral therapy, family of origin work, and counselor education and supervision. Crystal is currently the Director of Youth Services and Clinical Development and oversees the Choices Prevention Program for The Council on Alcohol and Drugs Houston. Correspondence regarding this manuscript can be addressed to: Crystal Collier, Department of Educational Leadership and Counseling, Sam Houston State University, Huntsville, TX 77341. E-mail: cam066@shsu.edu

Richard C. Henriksen Jr., Ph.D., LPC-S received his master's degree in counseling and his doctorate degree in counseling from Texas A&M University Commerce. He is currently an Associate Professor of Education at Sam Houston State University, Huntsville, TX. Dr. Henriksen has written two books, more than 12 book chapters, and has published more than 30 journal articles. His dissertation *Black, White,*

*Biracial Identity Development: A Grounded Theory Study* was his first major work as a qualitative researcher. Since that time he has completed several research projects with his colleagues and students that incorporate a qualitative methodology. His primary area of interest is in the area of multiple heritage identity development. He is currently working on a series of qualitative research projects focused on conducting qualitative analyses of multiple heritage children's books. He has also been working on a new qualitative method that can be used to analyze books.

Copyright 2012: Crystal Collier and Richard C. Henriksen Jr., and Nova Southeastern University

### **Article Citation**

Collier, C., & Henriksen, R. C. Jr. (2012). Teacher's perceptions of a multiple high-risk behavior prevention program and delivery of universal programming. *The Qualitative Report*, 17(Art. 100), 1-19. Retrieved from <http://www.nova.edu/ssss/QR/QR17/collier.pdf>

---