

COMMENT

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# Engaging youth as leaders and partners can improve substance use prevention: a call to action to support youth engagement practice and research

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## Abstract

**Background** As a subfield of prevention science, substance use prevention researchers and professionals are increasingly focused on translating research into practice, developing the workforce of prevention specialists, and creating a robust prevention infrastructure. One critical need for professional development among the substance use prevention workforce is training and technical assistance around how to include young people in developing, implementing, and evaluating substance use prevention programs.

**Main body** Amplifying youth voices can increase the quality and responsiveness of youth prevention research and practice, as well as hasten and improve the translation of prevention interventions into practice while also benefiting youth themselves. Yet, youth engagement is multi-layered and nuanced. Training prevention professionals who work with youth in *youth development* and *youth/adult partnerships* is critical to support meaningful youth engagement efforts. We assert that the substance use prevention workforce needs at least three specific competencies to engage youth meaningfully in prevention: 1) understand adolescent development and the core elements of youth-adult partnerships; 2) apply this knowledge to program design and practice; and 3) implement relational practices to share power with young people.

**Conclusion** Incorporating the insights of young people can improve substance use prevention. The substance use prevention workforce should be supported in developing competencies to meaningfully engage youth. These competencies require training, and resources must be devoted to support appropriate training.

**Keywords** Youth engagement, Substance use prevention, Adolescents, Workforce development

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## Background

The field of prevention science is instrumental in designing, implementing, evaluating, and disseminating evidence-based programs and interventions to prevent substance use among young people, to reduce harms associated with substance use, and to promote health [1]. Thought leaders in substance use prevention science argue that the field should focus on developing the workforce of prevention specialists [1] and a robust prevention infrastructure [2] in order to translate prevention science into services [3]. This brief comment is meant for researchers and practice-oriented professionals focused on improving substance use prevention practice; we offer specific competencies that are needed for the prevention workforce in order to meaningfully engage youth in prevention. We assert that training and funding should be provided for the prevention workforce to develop these competencies.

## Main text

### Youth engagement definition and evidence for multi-level benefits

Within the field of substance use prevention, Youth Engagement (YE) can be thought of as an approach in which prevention organizations effectively engage youth as leaders or partners in planning, tailoring, implementing, and/or evaluating prevention programming [4]. There is a strong theoretical justification [5], real-world precedent [6], and evidence supporting [7–10] the practice of engaging youth as active co-constructors in community initiatives where youth are a central constituency. We define youth broadly as those between the ages of 11–25, sometimes referred to as adolescents and young/emerging adults [11, 12] and we use the term “substance use” to refer to a broad array of substances that practitioners aim to prevent and to reduce associated harms for young people. Core to youth engagement is youth-adult partnerships, which operationalizes partnerships as work that is 1) collective, 2) impactful, and 3) distributed based on skills, expertise, networks, and interests of all involved parties [13]. Centering youth as co-constructors shifts the perspective away from youth as passive recipients of policies or programs.

Calls for increased youth participation in public health emanate from rights-based perspectives arguing for participation as a human right, as well as from empirical perspectives arguing that participation improves outcomes [12, 14]. Studies suggest that youth engagement can increase the quality, responsiveness, and reach of community initiatives [9]. Many programs and organizations that partner with youth showcase examples of how youth involvement increases the quality and relevance of prevention programming [9, 10, 12]. Further,

peer-led substance use prevention interventions have been found to reduce tobacco, alcohol, and cannabis use [11] and raise community awareness of substance use and related solutions [9]. Importantly, youth benefit by taking active roles in the spectrum of health prevention and promotion activities. Specifically, they can experience empowerment, contribute to their communities, form positive connections with adults while gaining personal skills (e.g., communication and leadership) and professional benefits (e.g., broadened networks) [9, 15]. Engaging the constituents affected by research and programming has a long history under the umbrella of participatory approaches (e.g., community-based participatory research, community coalitions) and increasingly is recognized as a practice with the potential to support equity and disrupt traditional power dynamics, including between youth and adults.

Engaging youth in a meaningful way in public health, especially in the United States, is challenging as these efforts must have the adult and organizational capacity and readiness to share power with youth, and to address logistical, developmental, and systemic barriers that young people face [7, 16, 17]. Furthermore, in the United States, adults are afforded power over young people's lives, as the United States has yet to ratify the Convention on the Rights of a Child [18]. Adults need awareness of their own attitudes and beliefs about young people's capacity as well as the skills to lead while amplifying young people's needs within and outside of the partnership [19]. Thus, engaging youth meaningfully requires a proactive and thoughtful approach accompanied by the resources, training, and support necessary to effectively improve prevention and empower young people.

### Youth engagement in substance use prevention practice

YE in substance use prevention practice is critical for several reasons. Young people offer essential perspectives as they are embedded in youth culture and have first-hand knowledge of the attitudes and behaviors of their peers. YE can improve prevention initiatives that target multiple different substances simultaneously, as is often the case in prevention practice, or in substance-specific initiatives. Further, because youth characteristics and environmental contexts differentially affect motivations for substance use and attitudes about prevention programs, incorporating local youth perspectives, especially from youth with lived experiences with substance use, when planning and tailoring prevention efforts can increase the responsiveness and uptake of prevention programs. Existing youth engagement structures in substance use prevention practice include coalitions, youth advisory boards, participatory action research, and youth participating as paid consultants or evaluators.

There is broad recognition of the value of youth engagement in substance use prevention research and practice [9, 11], and many practical resources are available to guide practitioners in involving young people in health policy and promotion. For example, the National Network of State Adolescent Health Coordinators (NNSAHC) offers resources about youth engagement, as does the Substance Abuse and Mental Health Services Administration (SAMSHA) and Community Anti-drug Coalitions of America (CADCA, see Table 1). YE has been implemented in many areas of public health, including to some extent in substance use prevention, harm reduction, treatment, and recovery programs [9, 11, 12] for example using peer support models [20]. Toolkits focused on prevention and harm reduction that were developed or co-developed by young people are available [21]. However, YE remains an innovative strategy underutilized by substance use prevention organizations and warrants more empirical examination to document its effects on prevention. Given increasing recognition of YE as a valuable strategy, with high potential to provide multi-level benefit to both youth and prevention efforts, practitioners should be supported to gain the skills and resources for allocating effort towards YE.

Importantly, YE is aligned with existing and evolving competency standards in the field of prevention. SAMHSA's *Prevention Core Competencies* [22] identifies cultural inclusion, or the "ability to ensure that those affected by a problem are an integral part of devising and implementing the solution" (p.32), as a core competency for the prevention workforce. This includes young people who are often the focal population of substance use prevention initiatives. SAMHSA also identifies "age-appropriate and culturally relevant communications with children and youth" as another core competency for the prevention workforce. At an international level, the United Nations Office on Drugs and Crime's International Standards on Drug Use Prevention highlight the importance of YE. Specifically, resolution 63/4 focuses on "promoting the involvement of youth in drug prevention efforts" [23]. Prevention specialists, in the United States and internationally, are expected to have the competencies needed to engage young people in prevention efforts; however, little

training is offered to support professional's knowledge, skills, and self-efficacy for partnering with young people.

### Conclusions: call to action

As substance use prevention science increasingly focuses on translating science into practice and supporting workforce development efforts, focusing on youth engagement has the potential to support and empower youth and strengthen prevention quality, reach, and responsiveness. In order to move beyond articulating support for YE to living out that commitment, there is a need to train substance use prevention professionals in *youth development* and *youth/adult partnerships*. Despite general enthusiasm for youth engagement, translating this into day-to-day practice that fits within the competing priorities and the requirements and constraints of the substance use prevention funding landscape is challenging [10]. There is a paucity of training specifically for the nuance and messiness associated with "living out" youth-adult partnerships [24]. Yet, training and ongoing coaching are recognized as important factors in youth program effectiveness [25]. In one study, adults significantly increased their confidence to execute youth-engaged activities in systemic approaches to community social action after participating in a youth engagement training course [26]. In order to increase the capacity of the substance use prevention workforce, we believe that the following three competencies, based in youth worker professionalization and practices [27], are foundational for youth engagement training:

- (1) Understand adolescent development across key domains (e.g., physical, emotional, social, cognitive, emotional, spiritual, civic, identity) and the core elements of youth-adult partnerships (authentic decision making, natural mentors, reciprocal activity, community connectedness) [13]; and
- (2) Apply this understanding of adolescent development and youth-adult partnerships to the design of youth/adult meetings, materials, and programs that serve young people; and
- (3) Implement key relational practices (e.g., support youth to make decisions, engage in reciprocal com-

**Table 1** Further Resources for Youth Engagement

Organization	Resource website (links live as of August 2023)
National Network of State Adolescent Health Coordinators (NNSAHC) Substance Abuse and Mental Health Services Administration (SAMSHA)	<a href="https://nnsahc.org/key-topics/youth-engagement/">https://nnsahc.org/key-topics/youth-engagement/</a> <a href="https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/sma16-4985.pdf">https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/sma16-4985.pdf</a>
Community Anti-drug Coalitions of America (CADCA) and Office of National Drug Control Policy (ONDCP)	<a href="https://www.cadca.org/resource/youth-engagement-series/">https://www.cadca.org/resource/youth-engagement-series/</a>

munication, work jointly, share power) that enable authentic collaboration between youth and adults [7, 13, 28].

Training programs focused on these competencies should encourage prevention professionals to reflect on their identities and positionality (i.e., the social identities related to young people they work with) including potential personal biases they may hold toward young people who use drugs. These aspects of identity inform how adults work with young people and self-reflection can minimize potential to harm young people and their communities that can result from biases. Some training and professional support programs that draw on empowerment-based models for engaging young people, such as the Social Justice Approach to Youth Engagement online course [8] and the Dover Youth 2 Youth [29] program, have high potential to improve substance use prevention through building prevention workforce capacity. Specifically, such programs offer the opportunity to develop skills for authentically partnering with young people to co-create solutions to issues identified by youth or through youth-adult partnerships. Given that there are scant opportunities for professional development for authentic youth engagement, more resources are needed to develop, implement, and evaluate training designed around these competencies. Growing the capacity of the prevention workforce for youth engagement will benefit the workforce, their prevention efforts, and ultimately the young people they serve.

#### Abbreviations

CADCA	Community Anti-drug Coalitions of America
NNSAHC	National Network of State Adolescent Health Coordinators
SAMHSA	Substance Abuse and Mental Health Services Administration
YE	Youth Engagement

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#### Authors' contributions

All authors were part of the multidisciplinary team that developed the manuscript concept. PJB wrote the main manuscript text. HKK and JJC contributed to writing and editing. EV and CGC contributed to literature review and provided comments and overall edits. All authors reviewed and approved the final manuscript.

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#### Ethics approval and consent to participate

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#### Competing interests

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