Interventions and Preventive Services Targeting Young Adults

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Presentation at the Institute of Medicine’s Workshop on Improving the Health, Safety, and Well-Being of Young Adults, Washington, DC, May 8, 2013
Pathways to Adulthood

- Trajectories are to a large extent established in childhood and adolescence → Early prevention is important!
- Transition times create opportunities for change → Turning Points

Q: What is the potential to intervene during young adulthood?
Inventories of Tested-Effective Programs & Policies

- Reviewed 8 inventories
- Goal: identify tested-effective programs targeting young adults (ages 18-30).
- Not included: programs targeting adults generally
Inventories of Tested-Effective Programs & Policies

1. Blueprints for Healthy Youth Development (U of Colorado)
2. National Registry of Evidence-Based Programs and Policies - NREPP (SAHMSA)
3. Guide to Community Preventive Services (CDC)
4. CrimeSolutions.gov (OJP)
5. OJJDP Model Programs Guide (DOJ)
6. OAH Evidence-Based Programs (DHHS)
7. Social Programs That Work (Coalition for Evidence-Based Policy)
8. Communities That Care Prevention Strategies Guide (U of Washington/SAHMSA)
Identified 26 programs in 5 topic areas:

1. Substance use (14)
2. STI/HIV prevention, risky sexual behavior (5)
3. Educational and vocational skills (3)
4. Suicide prevention and mental health (2)
5. Crime and antisocial behavior (2)
Parenting Programs

• 17 parenting programs for parents of pre-school aged children
• Most inventories find strong evidence for:
  • Nurse-Family Partnership
  • Triple P (Positive Parenting Program)
  • Incredible Years
  • Parent-Child Interaction Therapy
Conclusions

• Only a limited number of programs targeting young adults
• Many focus on college students
  – Don’t forget the non-college population!
• Few programs to build young adult life skills (e.g., relationship skills, finances)
Recommendations

- More research on understanding turning points and the potential to intervene in young adulthood.
- Universal preventive programming
- Match programs more closely to young adult health risks and subpopulations.
Recommendations

• Prioritize testing existing adult programs for young adult populations in well-designed studies (e.g., randomized trials).

• More widespread dissemination and high quality implementation of existing programs.
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