

Y-CHATNOW II
YOUTH CHANGING HEALTH AWARENESS TRENDS NOW!

UMSL MIMH
Missouri Institute of Mental Health

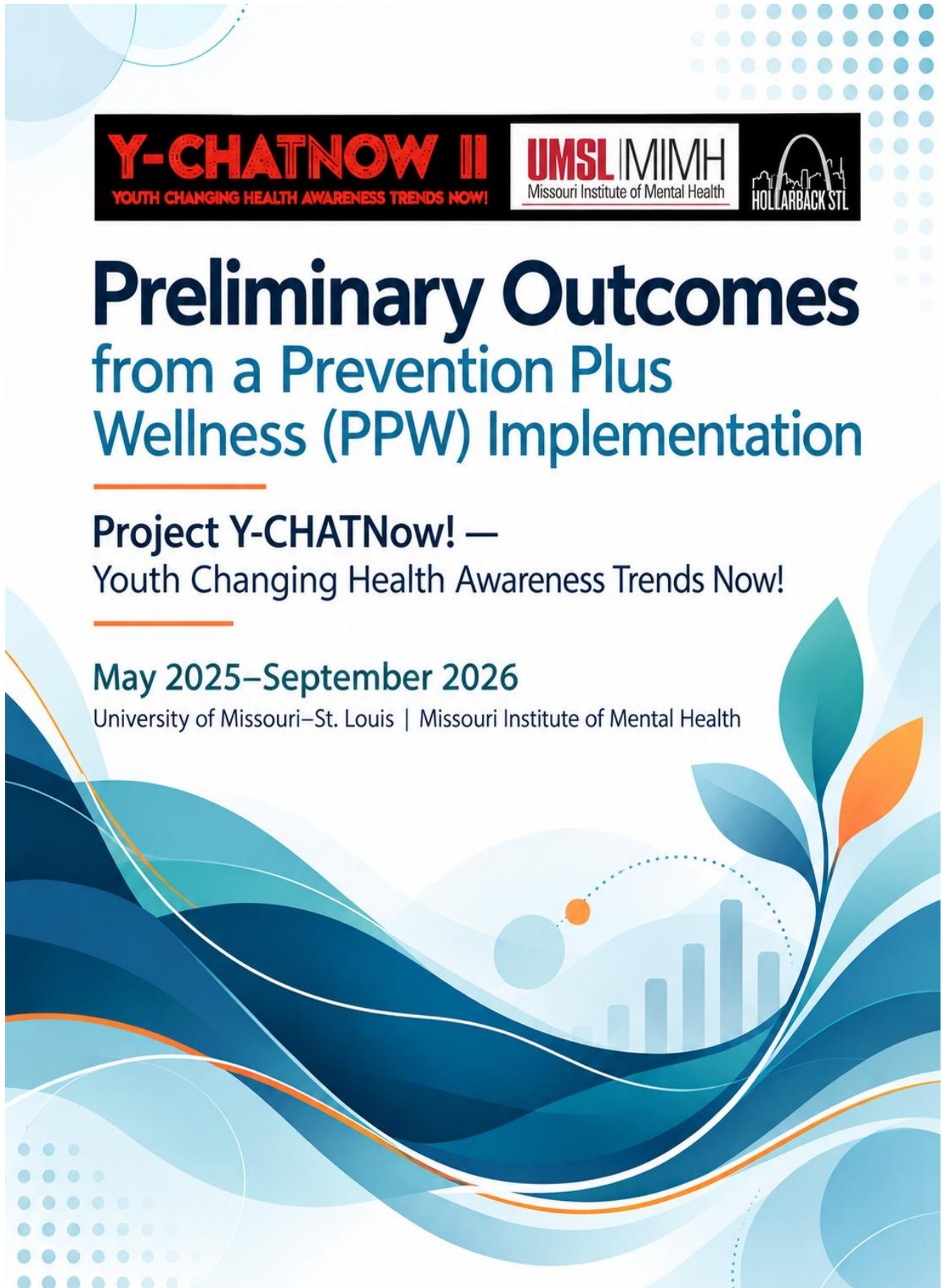


Preliminary Outcomes from a Prevention Plus Wellness (PPW) Implementation

Project Y-CHATNow! —
Youth Changing Health Awareness Trends Now!

May 2025–September 2026

University of Missouri–St. Louis | Missouri Institute of Mental Health



Introduction. Youth Changing Health Awareness Trends Now! II (Y-CHATNow! II) is an integrated substance misuse and mental health promotion program for youth and young adults that includes three hours of substance misuse and mental health well-being education. The Prevention Research and Community Education (PCRE) team at the University of Missouri–St. Louis Missouri Institute of Mental Health (MIMH), which oversees Project Y-CHATNow! II, has more than 20 years of experience in community-based substance use prevention.

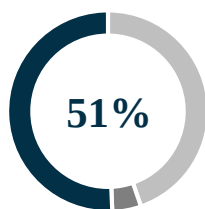
The team incorporated Prevention Plus Wellness (PPW) into Y-CHATNow! II after determining that briefer interventions better meet the needs of participants, families, and community partners. Most participants complete PPW's SPORT curriculum; the InShape curriculum is used with community partners serving young adults ages 19–24. Both curricula are delivered as written and with fidelity. Current programming also includes a one-hour presentation on drugs and their effects, adapted from another prevention curriculum used by the team,¹ with interactive games to reinforce learning and well-being. In addition, there is a one-hour presentation on mental health and well-being developed by RTI International under contract with the Family and Youth Services Bureau; however, outcomes presented in this report do not include data from this presentation.²

This brief report presents preliminary findings from two federally funded projects serving youth and young adults ages 13–24. The projects aim to reduce substance misuse and promote mental health and well-being. Data were collected from May 2025 through September 2026 using surveys administered at baseline, program exit, and one-month follow-up. Measures included substance use and mental health outcomes routinely used by the team, as well as items from the PPW evaluation tool. A summary of measures and administration time points is provided in the Appendix.

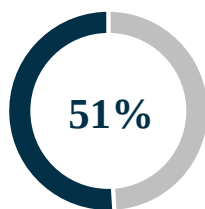
Demographics. A total of **367** (youth = 333 and young adults = 34) have participated in the program. The exit survey response rate is 89% (326 out of 367) and the one-month follow-up survey response rate is 75% (277 out of 367).

- **Race/Ethnicity:** Black or African American (320, 87%), White or Caucasian (31, 8%), or identified with 2 or more races/ethnicities (41, 11%)
- **Sex:** Female (187, 51%), Male (179, 49%), Did not answer (1, 0.3%)
- **Age:** The median age is 15 (range: 13-24)
- **Age Group:** Youth ages 13-17 (333, 91%), Young Adults ages 18-24 (34, 9%)
- **Living Situation:** Report living with family (334, 91%), foster care (17, 5%), campus/dormitory housing (10, 3%), or their own home or apartment (7, 2%)
- **Setting:** Local/St. Louis Area High School (186, 51%), Community-Based Organization (CBO, 164, 45%), Community recruited cohort (CRC, 17, 5%)

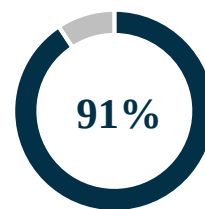
Local High Schools |
CBO | CRC



Female
| Male



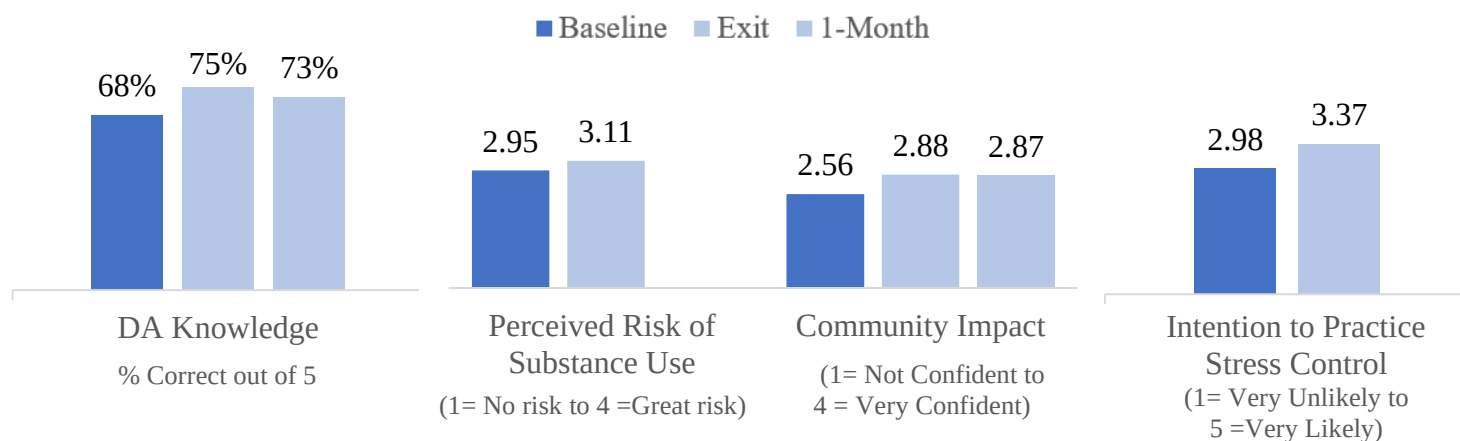
Youth (Ages 13-17)
| Y. Adult (18-24)



Disclaimer: The following are preliminary findings from a single-group evaluation without a comparison group. Although changes were observed from baseline to follow-up, the findings cannot establish that our Project Y-ChatNow II program alone caused these changes. Other factors may have contributed to the observed outcomes.

Participants demonstrated significant changes across several measured outcomes. **Drug and alcohol** knowledge increased significantly from baseline to program exit and remained higher at the one-month follow-up ($F(2, 245) = 13.289, p = .001^*$). **Perceived risk** of substance use also increased significantly from baseline to exit ($t(308) = 4.287, p = .001^*$). **Community impact** showed a small but significant improvement from baseline to exit that was maintained at follow-up ($F(2, 241) = 12.399, p = .001^*$). **Intention to practice stress control** increased significantly from baseline to exit, $t(312) = 5.064, p = .001^*$.

Significant / Strongest Changes in Outcomes

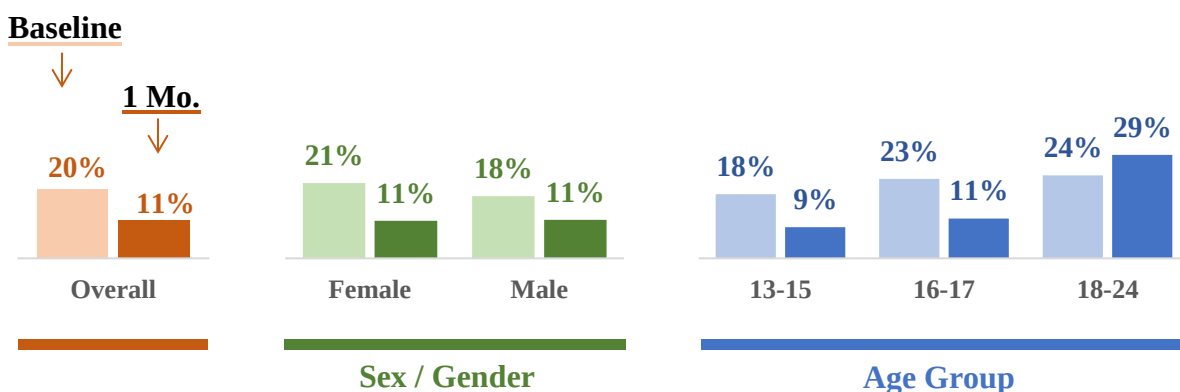


Substance Use. Among participants who completed both baseline and one-month follow-up surveys, the percentage reporting past-30-day substance use was lower at follow-up than at baseline. Marijuana, electronic vaping, alcohol, and tobacco were the four most commonly reported substances.

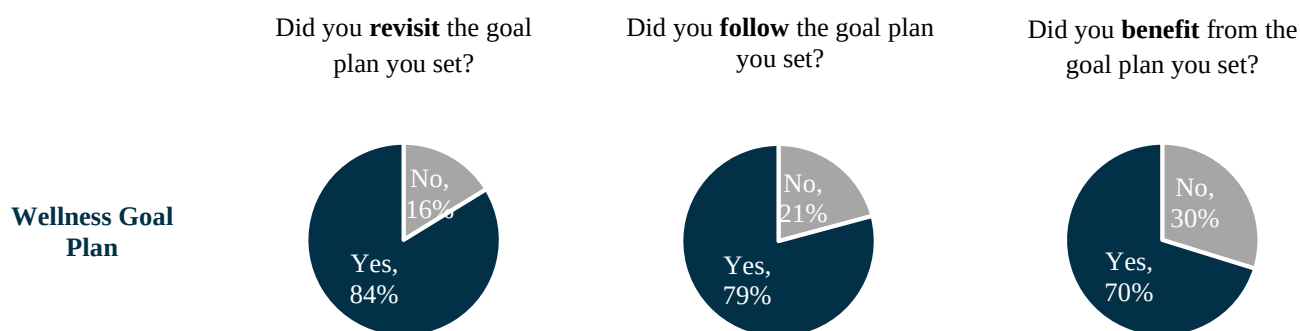
Substance Use	Time Points	Baseline	1 Month Follow-up
Marijuana	Baseline (N =350)	39 (11.1%)	—
	Baseline and Follow-up (N = 262)	29 (11.1%)	18 (6.9%)
Electronic Vaping	Baseline (N =353)	43 (12.2%)	—
	Baseline and Follow-up (N = 260)	30 (11.3%)	17 (6.5%)
Alcohol	Baseline (N =352)	25 (7.1%)	—
	Baseline and Follow-up (N = 259)	18 (7.3%)	5 (1.9%)
Tobacco	Baseline (N =353)	13 (3.7%)	—
	Baseline and Follow-up (N = 261)	9 (3.4%)	4 (1.5%)
Prescription Opioid Use	Baseline (N =352)	10 (2.8%)	
	Baseline and Follow-up (N = 260)	5 (1.9%)	2 (0.8%)
Other Prescription Drug Use (excluding prescription opioids)	Baseline (N =352)	6 (1.7%)	
	Baseline and Follow-up (N = 260)	4 (1.5%)	1 (0.4%)
Nonprescription Opioid Use	Baseline (N =352)	6 (1.7%)	
	Baseline and Follow-up (N = 261)	3 (1.1%)	2 (0.8%)
Other Illegal Substances	Baseline (N =353)	6 (1.7%)	
	Baseline and Follow-up (N = 262)	4 (1.5%)	3 (1.1%)
Any Substance Use	Baseline (N =342)	68 (19.9%)	—
	Baseline and Follow-up (N = 250)	49 (19.6%)	27 (10.8%)

Percentage of Participants Who Used Any Substances

by Demographic Characteristics



Wellness Goal Plan. Participants complete a wellness goal plan at the end of the Prevention Plus Wellness (PPW) lesson, choosing one goal to practice in the following week in areas such as healthy eating, sleep, or exercise. One month after the end of the program, we ask three **yes/no** and one open-ended question about their goal plan. A **high percentage** of participants reported **revisiting**, **following**, and **benefiting** from their wellness goal plan.



If you benefited from the **wellness goal plan**, please tell us how?

- I benefited by realizing I need to improve on my motivation to follow my own goals. (My goal was for a better sleep schedule.)
- I am better person.
- Built muscle and learning more about discipline.
- I got more exercise than I usually did.
- It helped me see that I am capable of setting goals for myself and achieving them.
- Because I started going to sleep early and it made me feel better.
- I am healthier mentally and more active.
- I exercised and became more productive.
- I started putting me first and doing more to be active.
- I've been eating more vegetables and drinking more water, so I haven't been dehydrated.

Summary of Outcomes:

- Improved knowledge about drugs and alcohol;
- Increased perceived risk of substance use;
- Increased perceived community impact (talking to peers about substance use; significant at exit only);
- Decreased substance use behavior for most commonly used drugs;
- Increased intention to practice stress control.



Appendix: Summary of Evaluation Measures

Outcomes Measured	Brief description	When administered*
Drug and Alcohol Knowledge	Knowledge items related to alcohol and other drugs. The scale consists of 5 items that ask about factual knowledge regarding alcohol and drugs. Responses are either “True” or “False.”	Baseline; Exit; 1-month Follow-up
Perceived Risk	Perceived risk of substance use: 6 items measuring the level of risk participants rate substance use (tobacco, alcohol, marijuana, non-prescription opioid, prescription opioid, inject drugs) ¹	Baseline; Exit; 1-month Follow-up
Community Impact	1-item. Asks participants to rate their degree of confidence to influence peers in their community about prevention of alcohol/drug use, on a scale from 1= “Not confident” to 4= “Very confident”. ²	Baseline; Exit; 1-month Follow-up
Intention to Practice Stress Control	1-item. ‘In the next year, how likely are you to practice a stress control or relaxation technique 4 or more days a week?’ ³	Baseline; Exit
Behavioral Intentions	Behavioral intentions related to substance use. The scale consists of 5 items measuring how likely participants are to use substances (alcohol, cigarettes, e-cigarettes, marijuana, and opioids) in the next year. ³	Baseline; Exit
Substance Use Behavior	10 items assessing past 30-day substance use (tobacco, electronic vapor products, drink alcohol, binge drink, marijuana, prescription opioid drugs, other prescription drugs, non-prescription opioid drugs, other illegal drugs, inject any drugs) ¹	Baseline; Exit; 1-month Follow-up
Wellness Goal Plan	4 items assessing goal plan outcomes. Did you revisit the goal plan you set? (yes/no) Did you follow the goal plan you set? (yes/no) Did you benefit from the goal plan you set? (yes/no) If you benefited from the wellness goal plan, please tell us how? (open-ended)	1-month Follow-up
Sources for items/measures: ¹From SAMHSA/CSAP’s federal evaluation tool. ²Adapted from Pearlman et al., 2002. ³From Prevention Plus Wellness evaluation tools. ⁴ Created by implementation and evaluation team. *Baseline=start of the program prior to any lessons; Exit=immediately after the last program lesson/module; 1-month follow-up=1 month after Exit.		

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Views and opinions contained in this report do not necessarily reflect those of OASH, SAMHSA or the U.S. Department of Health and Human Services and should not be construed as such.

¹*Drugs and their effects* adapted from **Appendix B** in Jemmott, L. S., Jemmott, J. B., & McCaffree, K. A. (2019). *Be Proud! Be Responsible!: An EBI program for sexual and reproductive health* (5th ed.). ETR.

²RTI International. *Mental Health and Well-Being: A Plug and Play Activity for Youth*. Developed under contract with the U.S. Department of Health and Human Services, Administration on Children, Youth and Families, Family and Youth Services Bureau.