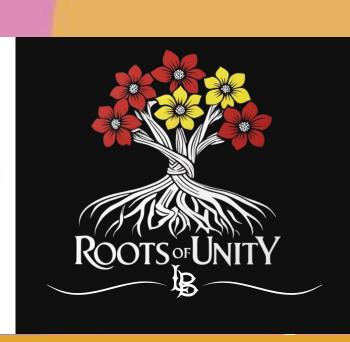


**Human Services** 

# Preventing Overdose Among Santa Ana's Youth







## **Roots of Unity**

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## INTRODUCTION

### **Project Purpose & Description**

An educational Naloxone training was provided by CSULB MSW students to reduce the number of opioid overdoses for youth in the Santa Ana Community. This training aimed to bring awareness of opioid overdose signs and symptoms, proper procedure for responding to an overdose, the good Samaritan Law and proper use of Naloxone. The Naloxone training was presented to a Substance Use Disorder program through project Kinship, on two different occasions. All participants were given brochures and flyers regarding more information about Naloxone and overdose. The purpose was to provide those in attendance with education and skills to a potential life saving intervention. Pre tests and Post tests were utilized during both training with different attendees to analyze the understanding and effectiveness of the training.

## Social Problem & Target Population

Through community assessments it was discovered that there has been an increase in illicit drug use and opioid related overdoses among youth in the community of Santa Ana, California.

## Scope of Social Problem

- Residents interviewed reported feeling unsafe due to the rising rates of substance use in the city, adding to fragmentation within the community.
- Overdose is reported to be the leading cause of death for individuals under the age of 50, with 75% of deaths being opioid related (Pendergrass Boomer et al., 2023).
- Within Orange County, the rates of substance use, including opioids, have increased by almost 50% (Orange County Health Care Agency, 2022 & Santa Ana, CA, n.d.).
- In 2022. 97.5% of adolescents aged 12-17 who had a substance use disorder within the past year did not receive any treatment (Highlights for the 2022 National Survey on Drug Use and Health, n.d.).

## Alignment to Specialization

Our training on Naloxone aligns with adulthood and aging and integrated health by promoting harm reduction, collaboration, and trauma informed care to participants. The training addresses both the behavioral and physical components of addiction and offers useful, life-saving tools.

#### PROJECT OVERVIEW, OBJECTIVES & OUTCOMES

PROGRAM GOAL

To reduce the number of overdoses by youth in the Santa Ana community.

LONG-TERM OUTCOME OBJECTIVES

By March 2030, the partner will adopt and implement the intervention with all youth participants. As a result, the participants will increase their ability to recognize overdose signs and symptoms, use Naloxone, and respond appropriately to opioid overdoses.

INTERMEDIATE OUTCOME OBJECTIVES

By April 2035, the community partner will continue to implement the intervention on a broader scale, which will help decrease overdoses in Santa Ana by 20%.

#### INITIAL OUTCOME OBJECTIVE

By March 2025, youth participants will increase their understanding of how to use Naloxone to prevent overdoses by 15%, as indicated by pre- and post-training assessments.

INITIAL OUTCOME OBJECTIVE 2

By March 2025, youth participants will improve their perception of the usefulness of the intervention by 15%, as indicated by the evaluations.

INITIAL OUTCOME OBJECTIVE 3 By March 2025, youth participants will increase their confidence in their

ability to administer Naloxone by 15%, as measured by self-reported

PROCESS OBJECTIVE

By February 2025, Roots of Unity wil create and implement two hands-on Naloxone training program for justice-involved youth, including educational workshops and interactive learning sessions.

By February 2025, Roots of Unity will develop and distribute educational materials on opioid overdose prevention, including Narcan/Naloxone, pamphlets, and infographics, to support knowledge retention and awareness.

PROCESS OBJECTIVE 2

y March 2025, Roots of Unity will collect and analyze pre- and post-training data from the two workshops using SPSS to assess knowledge acquisition and ability levels in administering Naloxone.

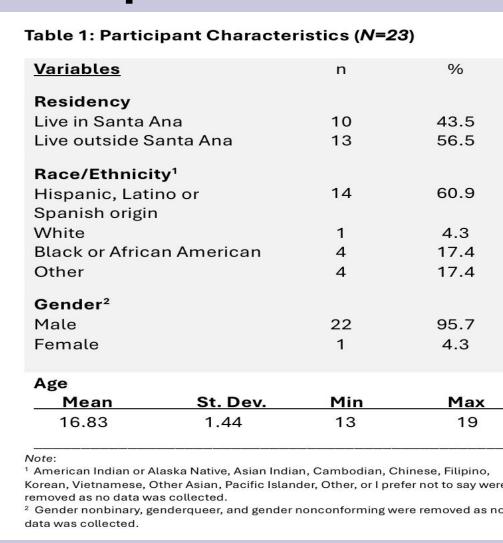
PROCESS OBJECTIVE 3

## **METHODS**

Roots of Unity conducted two workshops in March 2025, each with 12 community members. A quasi-experimental design with pre-test /post-test paper survey was used, involving 24 participants aged 13-19 from Project Kinship, who attended a substance abuse disorder program. We had a total of 24 participants attend, however, only 23 completed both pre and post tests. Quantitative methods were employed, and survey responses were collected using a Likert scale. A paired samples T-test was conducted using SPSS software, to determine statistical differences before and after the intervention.

#### **RESULTS**

## **Participant Characteristics**





Brochure distributed to participants at intervention.

## Descriptive, Inferential, and/or Qualitative Results

#### Paired Samples Statistics (N=23)

<b>Survey Questions</b>	Mean	Std. Deviation	Std. Error Mean	t	df	One-sided p	Two-sided p
Pair 1: I have an understanding of naloxone.	Pre: 3.52 Post: 4.43	1.344 .896	.280 .187	-3.761	22	<.001	.001
Pair 2: I believe that naloxone is useful	Pre: 3.65 Post: 4.57	1.335 .590	.278 .123	-3.761	22	<.001	.001
Pair 3: I feel confident in my ability to use naloxone in an emergency.	Pre: 3.52 Post: 4.43	1.238 .590	.258 .123	-4.041	22	<.001	<.001
Pair 4: I can explain what naloxone is used for.	Pre: 3.26 Post: 4.35	1.544 .775	.322 .162	-3.693	22	<.001	.001
Pair 5: On a scale from 0 to 10 how would you rate the usefulness of this training?	Pre: 7.6087 Post: 8.9130	2.88789 1.95199	.60217 .40702	-2.113	22	<.001	.046

A paired samples t-test was calculated to compare the mean pretest score to the mean post-test score for each survey question.

Q1: For the first pair, the mean on the pretest was 3.52 (sd=1.344), and the mean on the post-test score was 4.43 (sd=.896). A significant increase from pretest to post-test was found (t(22)=3.761, p=.001)

Q2: For the second pair, the mean on the pretest was 3.65 (sd=1.335), and the mean on the post-test score was 4.57 (sd=.590). A significant increase from pretest to post-test was found (t(22)=3.761, p=.001)

Q3: For the third pair, the mean on the pretest was 3.52 (sd=1.238), and the mean on the post-test score was 4.43 (sd=.590). A significant increase from pretest to post-test was found (t(22)=4.041, p=<.001)

Q4: For the fourth pair, the mean on the pretest was 3.26 (sd=1.544), and the mean on the post-test score was 4.35 (sd=.775). A significant increase from pretest to post-test was found (t(22)=3.693, p=.001)

#### RESOURCES

PlaySmart game randomized controlled trial. PloS One, 18(9), e0291298. https://doi.org/10.1371/journal.pone.029

## CONCLUSION

## **Analysis of Findings**

 The study found that participants experienced significant improvements with Naloxone after the training. The data indicated that the training provided positive evidence that reached the intended population, which included a diverse group of youth participants aged 13 to 19. The teaching methods improved youths' understanding of how to use Naloxone and perform the necessary follow-up steps correctly. Participants' confidence in using Naloxone increased directly due to the utilization of visual aids and demonstration. When surveyed, participants expressed that they considered Naloxone to be a useful tool, This indicated an increased awareness of the risks associated with opioid overdoses, as well as the signs to look for in these situations.

#### Limitations & Improvements

- 2 notable limitations were identified: All participants were within a narrow age range of 13 to 19 years, and there was only one female participant.
- Due to program constraints, we were unable to provide participants with free Naloxone or allow them to practice administering it to the dummy head.
- For future research, it is essential to explore additional methods for recruiting a more diverse sample, especially by increasing the representation of female participants.

#### Recommendations & Implications

#### **Practice**

- The results gathered from the training can be used to implement other workshops that focus on harm reduction.
- In order to increase participation in further trainings, it is recommended that Project Kinship use this training as part of their curriculum for their other support groups. Policy
- In 2024, Assembly Bill 2998 (AB 2998) passed which will positively influence the need for Naloxone training. AB 2998 allows a student 12 years or older to carry over the counter Naloxone in school without being reprimanded (Assembly Bill 2998, 2024). Prior to this policy, only nurses or trained volunteers were able to carry Naloxone. AB 2998 will create a conversation amongst schools and families on overdoses and harm reduction. Current social workers should receive Naloxone training so they can address the potential need for training in schools and communities as a result of this bill passing.

#### Research

 Further research needs to be conducted on the effectiveness of Naloxone training on youth overdose rates compared to alternative interventions. There should also be further research into other harm reduction modalities to assess which is most accessible and effective for community members.

## **COMMUNITY PARTNER(S)**

## **Project Kinship**

#### Mission:

Provide support and training to lives impacted by incarceration, gangs, and violence through hope, healing, and transformation.

#### Name of Collaborator

#### Maddy Rodriguez, LMFT

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#### Contributions

- Coordinate live-scan and volunteer forms
- Provided insights and information to various programs available for training
- Identified and finalized participants for
- Provided specific dates for both workshop
- Present day of workshop to ensure participants were present and engaged and providing feedback.



We would like to acknowledge Robin Rush, CEO of Recovery Road who contributed her expertise in Naloxone, foundational knowledge, resources, and Naloxone for the training.