The American Lung Association’s Intervention for Nicotine Dependence: Education, Prevention, Tobacco and Health (INDEPTH) program is an alternative to suspension or citation program that is offered to students who face suspension for violation of school tobacco or nicotine use policies. It is administered by an adult facilitator in either a one-on-one or group format in a school or community-based setting. The program consists of four 50-minute sessions focused on tobacco, vaping, and other nicotine use; nicotine addiction; establishing healthy alternatives; and ending personal use of nicotine and tobacco products.

In Spring 2019, the American Lung Association recruited a total of 11 schools from across the United States to participate in an INDEPTH pilot. The Research & Evaluation Group at Public Health Management Corporation (R&E Group), the Lung Association’s external evaluator, developed online surveys to measure program outcomes and gather evaluation feedback from participating students, program facilitators, and school administrators. This report summarizes feedback from these pilot participants and describes recommendations for next steps.

Feedback from INDEPTH participating students (n=66), adult facilitators (n=11) and school administrators (n=11) assisted the American Lung Association in better understanding the program benefits and next steps for program updates. Program adult facilitators reported the following roles in their schools and communities: school nurse, drug prevention specialist, health department educator, clinical social worker, certified tobacco treatment specialist, and in school suspension supervisor.

The INDEPTH program was delivered at 7 high schools, 2 combination middle and high schools, 1 alternative school, and 1 court system. Participating schools served urban, suburban, and rural communities.

All surveyed adults, including adult facilitators and school administrators, would recommend the INDEPTH program to other schools in their area. Additional feedback on the program is detailed below.

INDEPTH activities include learning about alternatives to nicotine/tobacco use. The Top 3 activities students reported they will use after INDEPTH ends were:

‘Use gum, candy or toothpicks’
‘Drink water’
‘Doodle or draw’

At the end of the program, over half of students were willing to try to quit use of nicotine/vaping/tobacco products.
Most students reported that INDEPTH activities influenced them to make a plan to stop using nicotine/tobacco products. For example, over half of students reported the “My Nicotine/Tobacco Budget” activity influenced them ‘a lot’ to make a plan to stop using nicotine/tobacco products.

A majority of the student participants identified as male (68%) and nearly a third (30%) identified as female; one respondent identified as other. Two thirds identified as White (67%), 15% identified as American Indian or Alaskan Native, 11% identified as Multi-racial, 5% identified as Black or African American, and 3% identified as Hispanic or Latinx. The average age of student participants was 16.3 years old. Nearly three quarters of students reported using e-cigarettes.

The timing of INDEPTH sessions can be individualized based on what is feasible for a given school. During Spring 2019, the program was frequently delivered in four separate sessions.

INDEPTH is administered by an adult facilitator in either a one-on-one or group format. During the Spring 2019 pilot implementation, nine adult facilitators used the group setting approach for program delivery.

Findings from the Spring 2019 evaluation will be used to update the INDEPTH program guide as well as the development of additional materials and tools to better support schools and communities in implementing the INDEPTH program. The Lung Association will continue to collect data from program participants to inform continuous quality improvement.

As a next step, the Lung Association is working to make the INDEPTH program guide available online. Schools and adults facilitators will be able to download the guide free of charge.