

Last reviewed: February 2018

Intervention website: <https://www.lionslifeskills.co.uk>

GUIDEBOOK INTERVENTION INFORMATION SHEET

Lions Quest Skills for Adolescence

Please note that in the 'Intervention summary' table below, 'child age', 'level of need', and 'race and ethnicities' information is **as evaluated in studies**. Information in other fields describes the intervention as **offered/supported by the intervention provider**.

Intervention summary	
Description	Lions Quest Skills for Adolescence is a universal school-based intervention for children aged between 11 to 14 years old. It is delivered by trained teachers or youth workers to groups of children for nine months.
Evidence rating	3
Cost rating	N/A
Child outcomes	<ul style="list-style-type: none"> Preventing substance abuse - Reduced substance misuse.
Child age (population characteristic)	11 to 12 years old
Level of need (population characteristic)	Universal
Race and ethnicities (population characteristic)	<ul style="list-style-type: none"> African American American Indian Asian American Hispanic American Mixed ethnic background Other minoritised ethnic groups White

Foundations Guidebook – Intervention information sheet

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Intervention summary	
Type (model characteristic)	Group
Setting (model characteristic)	<ul style="list-style-type: none">• Secondary school• Primary school• Community centre.
Workforce (model characteristic)	Teachers
UK available?	Yes
UK tested?	Yes

Model description

Lions Quest Skills for Adolescence (SFA) is a universal school-based intervention for children aged between 11 to 14 years old. It is delivered by trained teachers or youth workers to groups of children for nine months.

SFA is a multicomponent life skills intervention that teaches cognitive-behavioural skills for building self-esteem and personal responsibility, communicating effectively, making better decisions, resisting social influences, and increasing knowledge with regards to drug use and consequences to children in the school setting.

Delivered through workbooks and activities like role-play, group work, and self-reflection, lessons follow a structured four-phase approach: Discovering, Connecting, Practising, and Applying. This method ensures children understand, apply, and practise the skills in real-life contexts.

Intervention content is separated into 5 units; Unit 1: Connecting with Others, Unit 2: Exploring My Values and Goals, Unit 3: Understanding my Emotions, Unit 4: Respecting Myself and Others and Unit 5: Making Responsible Decisions. Of note, while the intervention units remain consistent the lessons within each unit vary dependent on the year group receiving the intervention.

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Target population

Age of child	11 to 14 years old
Target population	This intervention is a universal intervention targeting the general population of adolescents.

Please note that the information in this section on target population is as **offered/supported by the intervention provider**.



Theory of change

Why		Who	How	What		
Science-based assumption	Science-based assumption	Science-based assumption	Intervention	Short-term outcomes	Medium-term outcomes	Long-term outcomes
Adolescent substance misuse, mental health, and behavioural problems are multi-determined by processes occurring at the level of the child, parent, family, and community.	Prosocial behaviours and a positive sense of self can be increased using social influence and social cognitive approaches, leading to a reduction in negative behaviours including drug use, violence, and discipline problems.	All children aged 11 to 14 years old.	Prosocial behaviours are promoted by using social influence and social cognitive approaches to teach cognitive behavioural skills for building self-esteem and personal responsibility, communicating effectively, making decisions, resisting social influences and asserting rights, and increasing drug-use knowledge and consequences.	Improved positive prosocial behaviours, including self-discipline, responsibility to self and others, good judgement, and the ability to get along with others.	<ul style="list-style-type: none"> • Stronger social connections • Better self-understanding. 	Reduced drug use, violence, and discipline problems.



Implementation requirements

Who is eligible?	All children aged 11 to 14 years in secondary school classrooms.
How is it delivered?	Lions Quest Skills for Adolescence is delivered in 36 sessions of 45 minutes' duration each by one practitioner to groups of children.
What happens during the intervention?	<p>Children are taught the skills necessary to cope with physical, emotional, and social challenges of early adolescence.</p> <p>Various themes are covered throughout the intervention, including strengthening self-confidence; dealing with feelings; relationships with friends; dealing with temptations and peer pressure; and decision-making.</p> <p>Teachers (or youth work teams) and children are provided with workbooks to help guide them through the intervention content, which is taught using a combination of role-play, group work, discussion, and self-reflection.</p> <p>Each lesson is divided into four phases of learning: (1) Discovering (explicit instruction defining the concepts addressed during the lesson); (2) Connecting (individual work applying the concepts of the lesson); (3) Practising (students role-play using the learned skills); and (4) Applying (students apply skills to a new situation).</p>
Who can deliver it?	The practitioner who delivers this intervention is a teacher.
What are the training requirements?	The practitioners have between eight and 16 hours of intervention training. Booster training of practitioners is recommended.
How are practitioners supervised?	It is recommended that practitioners are supervised by one host-agency supervisor, with 12 hours of intervention training.
What are the systems for maintaining fidelity?	<p>Intervention fidelity is maintained through the following processes:</p> <ul style="list-style-type: none"> • Face-to-face training • Fidelity monitoring and assessment • Teacher and student workbooks • Implementation toolkit for users.
Is there a licensing requirement?	No



Implementation requirements (Cont.)

*Contact details	<p>Contact person: Matthew Kiefer</p> <p>Organisation: Lions Quest Programmes</p> <p>Email address: Matthew.kiefer@lionsclubs.org</p> <p>Website: https://www.lionslifeskills.co.uk</p> <p>*Please note that this information may not be up to date. In this case, please visit the listed intervention website for up to date contact details.</p>
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Evidence summary

Lions Quest Skills for Adolescence’s most rigorous evidence comes from one cluster RCT conducted in the United States consistent with Foundations’ Level 3 evidence strength threshold.

This study identified statistically significant reductions in recent and lifetime marijuana use.

Lions Quest for Adolescence can be described as evidence-based: it has evidence from at least one rigorously conducted RCT or QED demonstrating a statistically significant positive impact on at least one child outcome.

Child outcomes			
Outcome	Improvement index	Interpretation	Study
Reduced lifetime marijuana use	+4	<p>3.26-percentage point decrease in proportion of participants with lifetime marijuana use (measured using a self-report measure adapted from Monitoring the Future Survey)</p> <p>Long term: A year later</p>	1
Reduced recent marijuana use	+5	<p>2.47-percentage point decrease in proportion of participants with recent marijuana use (measured using a self-report measure adapted from Monitoring the Future Survey)</p> <p>Long term: A year later</p>	1



Search and review

	Number of studies
Identified in search	6
Studies reviewed	1
Meeting the L2 threshold	0
Meeting the L3 threshold	1
Contributing to the L4 threshold	0
Ineligible	5

Individual study summary: Study 1

Study 1	
Study design	Cluster RCT
Country	United States
Sample characteristics	7,426 children aged 11 to 12 from 34 middle schools in metropolitan areas across Los Angeles, Detroit, Washington, D.C., and Boston. Over half of the sample were female (52%) with 34% Hispanic, 18% African American, and 7% Asian American students.
Race, ethnicities, and nationalities	<ul style="list-style-type: none"> • 34% Hispanic • 25.7% White • 18% African American • 7% Asian American • 6.9% Mixed ethnic background • 6.3% Other • 1.4% American Indian.
Population risk factors	None reported



Study 1	
Timing	<ul style="list-style-type: none"> • Baseline • Post-intervention (12-month follow-up) • One-year post-intervention (24-month follow-up).
Child outcomes	<ul style="list-style-type: none"> • Lifetime marijuana use (Child report, 24-month follow-up) • Recent marijuana use (Child report, 24-month follow-up).
Other outcomes	None
Study Rating	3
Citation	Eisen, M., Zellman, G. L. & Murray, D. M. (2003) Evaluating the Lions-Quest Skills for Adolescence drug education program. <i>Addictive Behaviors</i> . 28, 883–897.

Brief summary

Population characteristics

7,426 children aged 11 to 12 from 34 middle schools in metropolitan areas across Los Angeles, Detroit, Washington, D.C., and Boston. Over half of the sample were female (52%) with 34% Hispanic American, 25.7% White, 18% African American, 7% Asian American, 6.9% Mixed ethnic background, and 1.4% American Indian students.

Study design

The study adopted a two-arm cluster-randomised controlled trial with a nested cohort design across 34 schools. Schools were pair-matched within each district on sixth-grade prevalence of recent use of tobacco, alcohol, or illicit drugs and on rates of parental consent, and one school from each pair was randomised to the intervention group with the other assigned to the control group. 17 schools (number of children not reported) were randomly assigned to the intervention group, which implemented the SFA curriculum, and 17 schools (number of children not reported) to the control group, which continued with standard drug education programmes. Intervention and control schools were equivalent on baseline measures of self-reported drug use.

Measurement

Assessments took place at baseline, post-test (12 months post-baseline) and one-year post-intervention (24 months post-baseline). All measures were completed at all timepoints.

Child report measures included survey items adapted from the Monitoring the Future survey and three cigarette smoking questions established by the National Cancer Institute.



Outcome data was only available for the 24-month timepoint.

Study retention

24-month follow up

77% (5694) children participated in post-intervention assessment; differential attrition between intervention and control group schools was not reported.

Results

Data-analytic strategy

Mixed-method regression models, accounting for school-level clustering, were used to estimate the intervention's effects on the intended outcomes, following an intent-to-treat approach.

Findings

Youth in the intervention group showed statistically significant reductions in current and lifetime marijuana use at 24 months follow-up.

Study 1: Outcomes table

Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Child outcomes					
Recent marijuana use	Adapted MTF survey (child report)	Not reported	Yes	5,316–5,610	24-month follow-up
Lifetime marijuana use	Adapted MTF survey (child report)	Not reported	Yes	5,316–5,610	24-month follow-up
Recent alcohol use	Adapted MTF survey (child report)	Not reported	No	5,316–5,610	24-month follow-up
Lifetime alcohol use	Adapted MTF survey (child report)	Not reported	No	5,316–5,610	24-month follow-up



Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Binge drinking	Adapted MTF survey (child report)	Not reported	No	5,316–5,610	24-month follow-up
Recent smoking	National Cancer Institute survey items (child report)	Not reported	No	5,316–5,610	24-month follow-up
Lifetime smoking	National Cancer Institute survey items (child report)	Not reported	No	5,316–5,610	24-month follow-up
Recent other illicit substance use	Adapted MTF survey (child report)	Not reported	No	5,316–5,610	24-month follow-up
Lifetime other illicit substance use	Adapted MTF survey (child report)	Not reported	No	5,316–5,610	24-month follow-up

Other studies

The following studies were identified for this intervention but did not count towards the intervention's overall evidence rating. An intervention receives the same rating as its most robust study or studies.

Kahnert, H. (2002) *Evaluation of the Lions Quest program 'Erwachsen Werden'* (German version of Skills for Adolescence). University of Bielefeld.

Kidron, Y., Garibaldi, M. & Osher, D. (2016) *Lions Quest Skills for Adolescence: Implementation and outcome study in Wood County, West Virginia*.

Malmin, G. (2007). *It is my CHOICE (Lions Quest) evaluation part 5: The impact on the behavior of the students*. Unpublished evaluation report.

Matschek-Jauk, M., Krammer, G. & Reicher, H. (2017) *The life-skills program Lions Quest in Austrian schools: Implementation and outcomes*. Health Promotion International.



Switzer, J. L. (2016) *Evaluation of the intervention efficacy of Lions Quest Skills for Adolescence*.
Walden University, Walden Dissertation and Doctoral studies.

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Note on provider involvement: This provider has agreed to Foundations' terms of reference (or the Early Intervention Foundation's terms of reference), and the assessment has been conducted and published with the full cooperation of the intervention provider.