

Adolescence and COVID-19

November 18, 2021

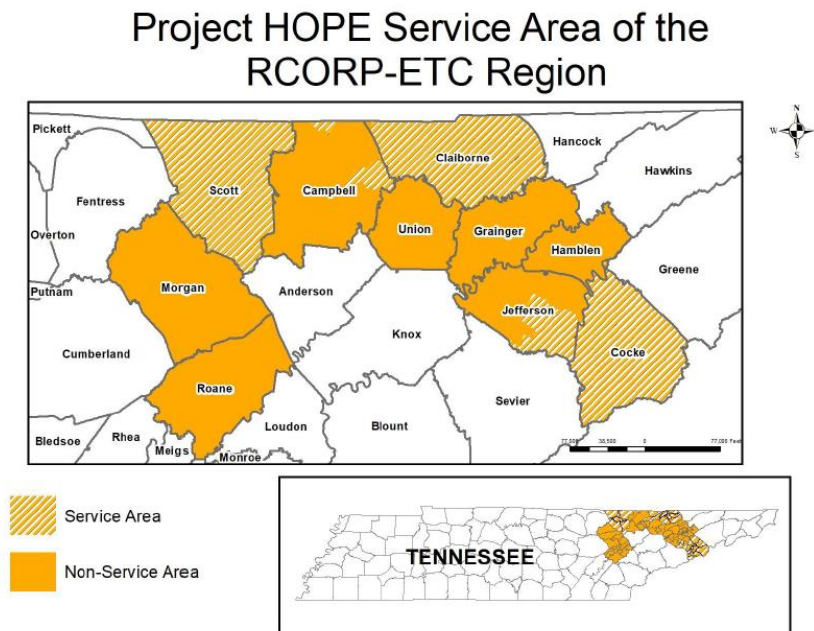
Youth Development Collaborative Training

On November 18, 2021, Project HOPE (Healing Opioid Use Disorder Through Prevention and Expertise) hosted an online event for professionals working with youth who serve in the Project HOPE 10-county area. The 1-hour event included a training session on adolescence and COVID-19 presented by Laurie Meschke, Ph.D., Kyler Groner, and Ahdya Attea.

Attendees

Project HOPE service area includes 5 counties in East Tennessee: Scott, Claiborne, Cocke, Jefferson, and Campbell (see Figure 1). The consortium is co-led by the University of Tennessee, Knoxville and has more than 150 members. The training flyer was posted on the project website. Invitations for this training were emailed to all consortium members. While 17 individuals registered for the training, 8 professionals attended. Among 17 individuals who registered for the training, 7 (41.1%) heard about this training from RCORP consortium listserv, 10 (58.9%) heard about this training from their organizations.

Figure1. Project HOPE region and service area



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Evaluation

Five attendees completed the evaluation survey. Community professionals who attended the training included social workers, public health professionals, and students. The attendees work or serve in 12 counties: Campbell, Claiborne, Cocke, Grainger, Hamblen, Jefferson, Morgan, Roane, Scott, Union, Knox, and Washington.

Evaluation of Training

The overall experience of the training was well regarded among attendees, as most participants (80%) would recommend the training session to a colleague.

Attendees indicated how satisfied they were with the training, possible answers ranged from *very dissatisfied* (1) to *very satisfied* (5). On average, participants' answers ranged between *satisfied* (4) and *very satisfied* (5) on every question. Attendees were very satisfied with the training content (5.0), knowledge of the facilitators (5.0), relevance of the training to their needs (5.0), mix of presentation and activities (4.8), and engagement of the training (4.8).

Attendees indicated how much they knew before and after the training session, retrospectively for a series of learning objectives. Possible answers ranged from *nothing at all* (1) to *a whole lot* (4). On average, attendees reported knowing between *a little bit* to *a lot* before the training (grand mean= 2.1) and between *a lot* to *a whole lot* after the training (grand mean=3.6, $p<0.001$). There were significant increases in knowledge reported in all learning objectives within the training session (Table 1). The increases were in clarifying changes and challenges of adolescent development during COVID-19 ($p=.005$), describing impact of COVID-19 on adolescent physical health ($p=0.005$) and mental health ($p=0.005$), and identifying how to mitigate the negative effects of COVID-19 and promote healthy adolescent development ($p=0.003$).

Table 1.

Learning Objectives	Pre-Score	Post-Score	Mean Difference	p-value
Changes and challenges of adolescent development during COVID-19	2.0	3.4	1.4	0.005
Impact of COVID-19 on adolescent physical health	2.0	3.4	1.4	0.005
Impact of COVID-19 on adolescent mental health	2.2	3.6	1.4	0.005
How to mitigate the negative effects of COVID-19 and promote healthy adolescent development	2.2	3.8	1.6	0.003

When asked what new knowledge was most useful, attendees indicated they found the statistics on the effect of COVID-19 on adolescents, COVID-19 data, and tools to help youth were most useful. When asked how they plan to use this training in their professional role, responses included putting this information into practice, working with adolescents' parents, and disseminating the knowledge in response to COVID-19 pandemic. Attendees were asked to provide insight on how future training may be improved. Attendees had no recommendations.