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## **Title**

Preliminary Outcomes from Project TRUST, a school-based intervention to promote student-school connectedness and engagement

## **Priority 1 (Research Category)**

Social determinants and vulnerable populations

## **Presenters**

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## **Abstract**

Context: School connectedness and engagement are key proximal social determinants of adolescent health that are associated with improved behavioral health including lower levels of substance use, improved emotional well-being, and higher academic achievement. These determinants are less accessible to Black, Indigenous, and People of Color (BIPOC) students due to structural barriers at the school level, with long-term implications for health. Objective: Assess the effectiveness of Project TRUST, a multicomponent school-based intervention, at addressing student-school connectedness and engagement. Study Design TRUST was a controlled trial that utilized participatory research approaches. The multicomponent intervention focused on school environment included: 1) Training to build teacherstudent relationships and promote positive youth development, 2) Youth-defined school policy, practice, or procedure change to promote connectedness, and 3) Parent-defined school policy, practice, or procedure change to promote parent and community connection. Primary outcomes were studentschool connectedness and engagement assessed through longitudinal online student surveys between 2017 and 2019. Five diverse middle and high schools were assigned to Wave 1 intervention implementation at study onset and five to delayed-control Wave 2 condition two years later. We used a novel weighting algorithm to mitigate the lack of randomization and potential imbalances across conditions. Setting: A large U.S. Midwestern school district. Participants: 809 6th and 9th grade students. Results: Participants were predominately female (53%), BIPOC (74%) and included 16% English language learners. School connectedness and engagement declined for all students from baseline to follow up (school connectedness, 3.15 to 3.02; school engagement, 3.22 to 3.07). No overall significant intervention effect was noted in school connectedness (difference in change 0.03 (95% CI -0.11, 0.17)) or school engagement (0.06 (-0.02, 0.14)). However Wave 1 BIPOC students maintained their level of school engagement compared to Wave 2 where it dropped (difference in change 0.109 (0.005, 0.214)). Conclusions: A multicomponent participatory intervention maintained school engagement for BIPOC students, emphasizing the importance of school environment for BIPOC student health in particular.

Social determinants of health focused interventions are important for addressing health inequities and promoting population health.