



Guiding Good Choices for Health (GGC4H)

Principal Investigators

Margaret Kuklinski, PhD; and Stacy Sterling, DrPH, MSW

Sponsoring Institution

University of Washington

Collaborators

- Kaiser Permanente
- Henry Ford Health System

NIH Institute Providing Oversight

National Center for Complementary and Integrative Health (NCCIH)

Program Official Beda Jean-Francois, PhD (NCCIH)

Project Scientist

Elizabeth Ginexi, PhD (NCCIH)

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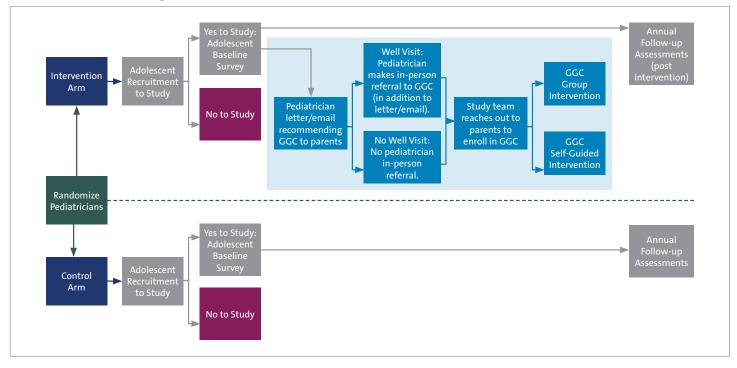
ABSTRACT

Fifty percent of all adolescents will use some form of illicit drugs before the end of high school, and 20% to 25% will meet criteria for depression, while many others will engage in health-compromising behaviors like delinquency and violence—with consequences for their long-term health. Evidence-based parenting interventions shown to prevent these behavioral health concerns could improve adolescent health trajectories if implemented widely in pediatric primary care. The American Academy of Pediatrics' Bright Futures recommends that pediatricians offer developmentally tailored anticipatory guidance to all parents to support their children's healthy development, but programs providing guidance are not offered universally.

The Guiding Good Choices for Health (GGC4H) Demonstration Project is a cluster-randomized trial that will use the RE-AIM framework to test the feasibility and effectiveness of implementing Guiding Good Choices (GGC)—a universal evidence-based anticipatory guidance curriculum for parents of early adolescents—in three large, integrated healthcare systems serving socioeconomically diverse families. In prior community trials, GGC has been shown to prevent adolescent substance use (alcohol, tobacco, and marijuana), depressive symptoms, and delinquent behavior. This study offers an opportunity to test GGC effectiveness with respect to improving adolescent behavioral health outcomes when implemented at scale in pediatric primary care within a pragmatic trial.

GUIDING GOOD CHOICES SESSIONS		
Getting Started: How to Prevent Drug Use in Your Family		
Setting Guidelines: How to Develop Healthy Beliefs and Clear Standards		
Avoiding Trouble: How to Say No to Drugs (with children in attendance)		
Managing Conflict: How to Control and Express Your Anger Constructively		
Involving Everyone: How to Strengthen Family Bonds		

GGC4H Effectiveness Design



WHAT WE'VE LEARNED SO FAR

Challenge	Solution
The original plan was to include adolescents who had well visits, but 25% of teens do not have such visits at some pediatric clinics.	The study team revised the study design to include all adolescents who receive care at the pediatric clinic. Although some study participants will not engage with the intervention, results will be more generalizable.
The pragmatic GGC implementation plan results in partial cross-nesting of intervention participants, which threatens valid statistical inference.	The study's biostatisticians came up with a modelling approach that resolved statistical concerns and, in a simulation study, showed strong power, nominal alpha levels, and adequate coverage.
The study design needs to address the study's two important goals: whether pediatrician recommendation to enroll in GGC increases uptake over historical levels found in community settings, and whether GGC can achieve practice-wide reductions in adolescent substance use initiation.	The study's cluster-randomized trial addresses questions of GGC efficacy. GGC will be offered to all parents in the intervention arm, regardless of whether their adolescents are study participants, to provide important information about GGC uptake among parents outside of the artificial context of a research study, as well as among those who consented to the study.

"We have complementary strengths across our site leaders and a collegial team. These features have helped us hit the ground running in this fast-paced trial."

SELECTED PUBLICATIONS & PRESENTATIONS

• Publication (Study Design): Parent-Focused Prevention of Adolescent Health Risk Behavior: Study Protocol for a Multisite Cluster-Randomized Trial Implemented in Pediatric Primary Care

Access the complete set of GGC4H resources.