What is Implementation Science?

Implementing strategies based in science to ensure you will achieve the best possible outcomes for the children, youth and families that you serve.
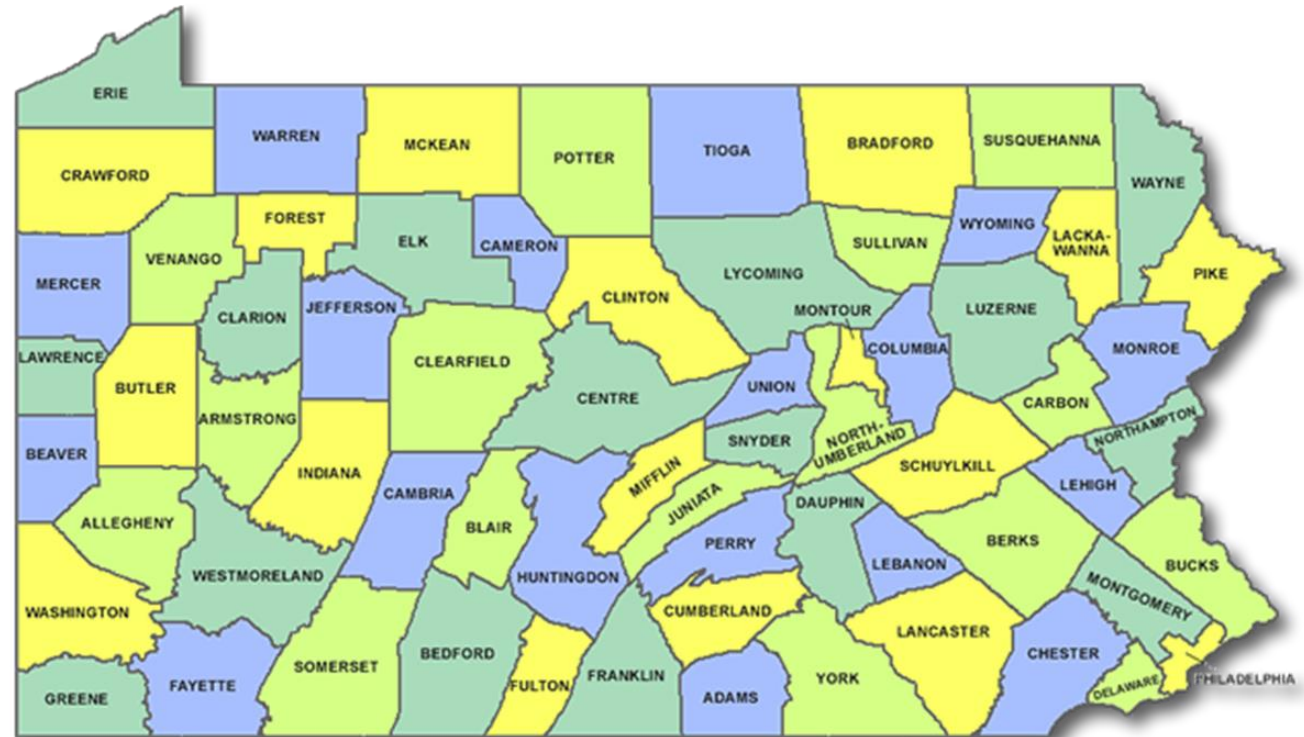
The EPIS Implementation Specialist Team supports the following components of Implementation Science:
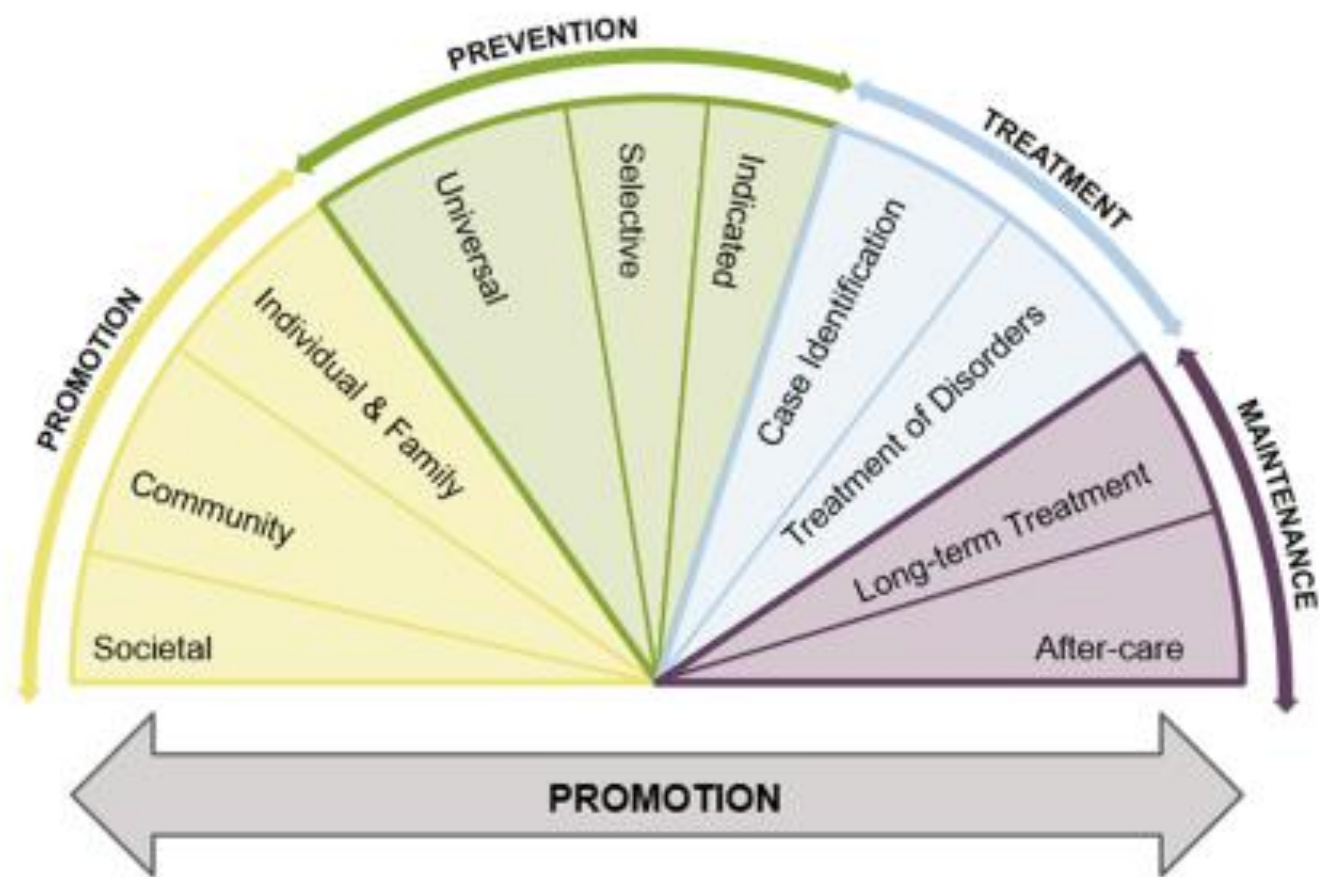
- Program Selection

- Program Readiness

- Funding

- Program Implementation

- Monitoring Impact and Outcomes

- Collaboration with Key Stakeholders

Program Selection

- ✓ What does your community need?
- ✓ What is currently in place?
- ✓ Where are the gaps?
- ✓ What options do we have?

2019: Spectrum of Mental, Emotional, and Behavioral (MEB) Interventions*

*National Academies of Sciences, Engineering, and Medicine (2019). *Fostering Healthy Mental, Emotional, and Behavioral Development in Children and Youth: A National Agenda*. Washington, DC: The National Academies Press. https://doi.org/10.17226/25201.

Continuum of Confidence

Programs/services can be placed along a continuum of confidence based on their evidence or theory

*Bumbarger & Rhoades, 2012

✗ **Ineffective**
"This program has been evaluated and shown to have no positive or negative effect"

Best Practices
"We've done it and we like it"

✓ **Research-based**
"This program is based on sound theory informed by research"

Very Confident program is harmful

HARMFUL   **Ineffective**   **unknown**   **Promising**   **EFFECTIVE**

Very Confident program is effective

✗ **Iatrogenic (Harmful)**
"This program has been rigorously evaluated and shown to be harmful"

✓ **Promising Approaches**
✓"We really think this will work... but we need time to prove it"

✓ **Evidence-Based**
"This program has been rigorously evaluated and shown to work"

Ineffective approaches rely on <u>emotional appeals</u>; which are <u>focused on danger or deterrence.</u>

Some examples of ineffective approaches:

- Horror stories
- Dramatization of dangerous/harmful effects
- Gruesome photos or videos
- Tours of jails; boot camps
- Utilization of infrequent or one-time presentations

WHY SCARE TACTICS IN DRUG PREVENTION MESSAGING DON'T WORK.

Research on these approaches consistently shows their inability to prevent substance use. Youth exposed to these approaches have been shown to be MORE likely to use substances. No scientific debate on these because there is no evidence of effectiveness AND there is evidence of harm.
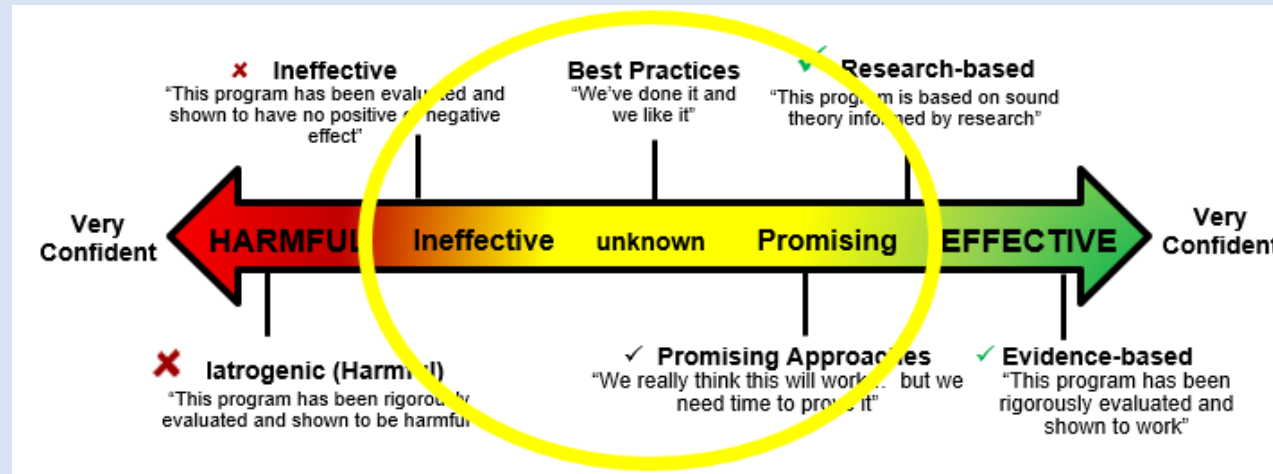
Those programs that fall into the middle of the continuum either have not been evaluated OR it has been evaluated and there are no effects.

*Bumbarger & Rhoades, 2012
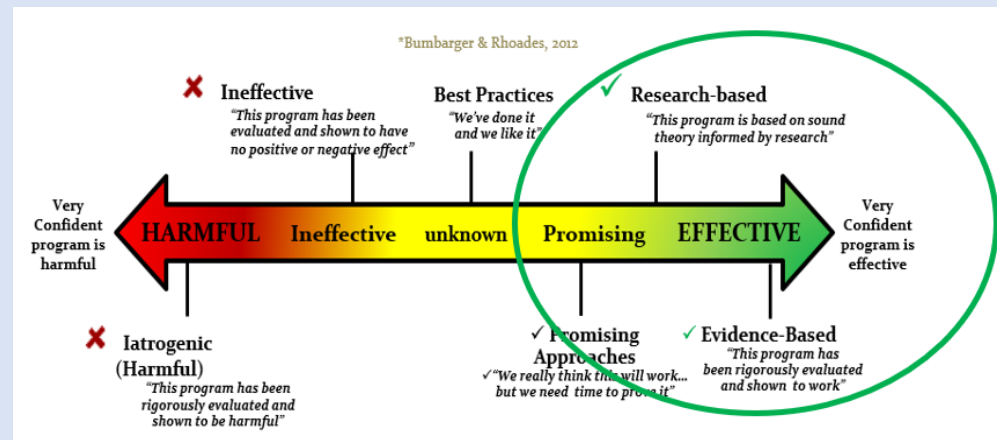
Programs on this side of the continuum…

- Improve Knowledge + Beliefs/Attitudes + Skills

- Are Strengths-based approaches

- Include transfer of skills to Individual, peers, family, school, community

- Are interactive, and hands-on

- Include enough time (weeks/hours) to have impact (dosage)

PROGRAM CLEARINGHOUSES

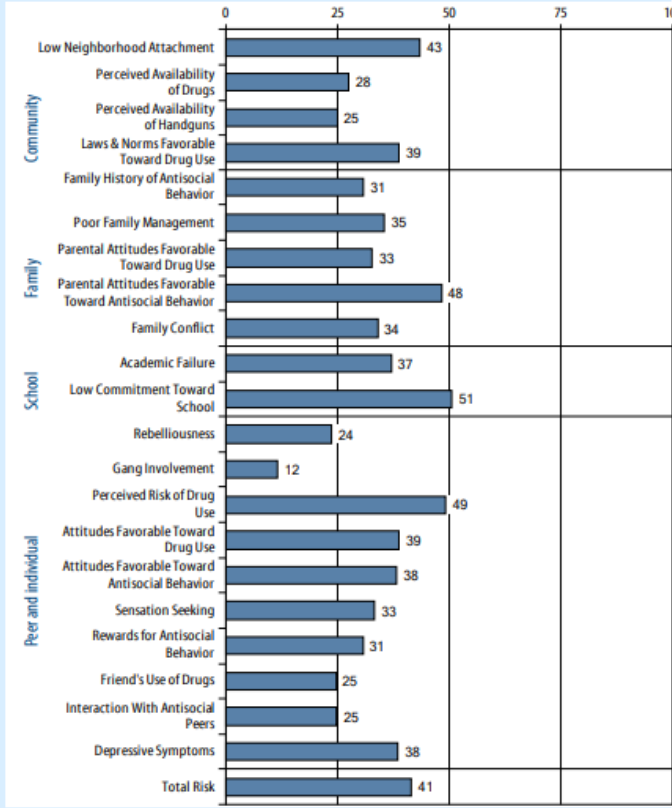| Rating Source	Area of Focus	Website
Results First Clearinghouse Database	Combines 9 national clearinghouses	https://www.pewtrusts.org/en/research-and-analysis/data-visualizations/2015/results-first-clearinghouse-database
Blueprints for Healthy Youth Development	Child welfare, juvenile justice	www.blueprintsprograms.com
California Evidence-Based Clearinghouse for Child Welfare	Child welfare	www.cebc4cw.org/
CrimeSolutions.gov	Criminal justice	https://crimesolutions.ojp.gov/
What Works Clearinghouse	Education	ies.ed.gov/ncee/wwc/
What Works in Reentry Clearinghouse	Criminal justice	whatworks.csgjusticecenter.org
Title IV-E Prevention Services Clearinghouse (Family First)	Child welfare	https://preventionservices.acf.hhs.gov/

2019 Pennsylvania Youth Survey

Empowering Communities to Develop Strategic Prevention Programming

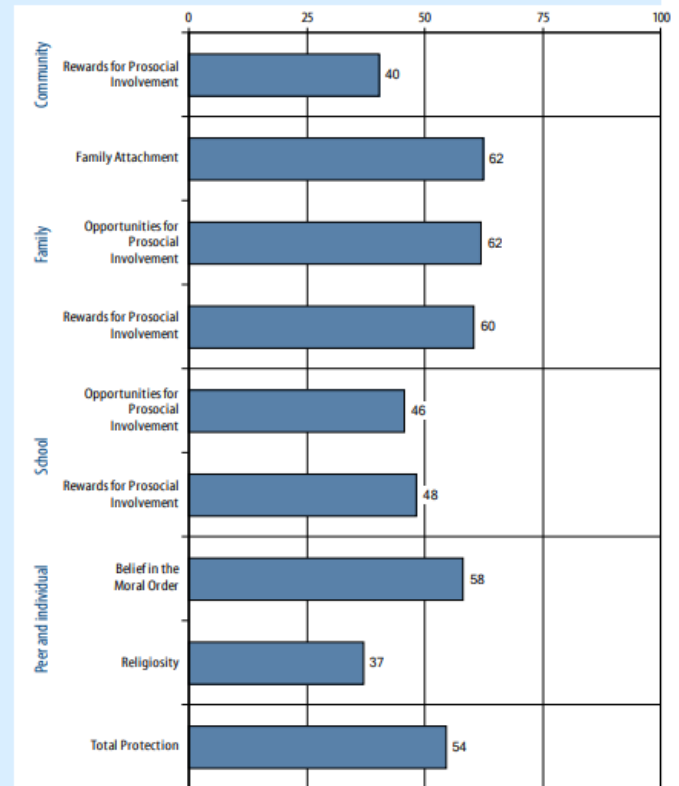## State of Pennsylvania

Conducted by

Pennsylvania Commission on Crime and Delinquency

Pennsylvania Department of Drug and Alcohol Programs

Pennsylvania Department of Education

State of Pennsylvania
Risk Factors, 2019 Pennsylvania Youth Survey

Domain	Factor	Value
Community	Low Neighborhood Attachment	43
Community	Perceived Availability of Drugs	28
Community	Perceived Availability of Handguns	25
Community	Laws & Norms Favorable Toward Drug Use	39
Family	Family History of Antisocial Behavior	31
Family	Poor Family Management	35
Family	Parental Attitudes Favorable Toward Drug Use	33
Family	Parental Attitudes Favorable Toward Antisocial Behavior	48
Family	Family Conflict	34
School	Academic Failure	37
School	Low Commitment Toward School	51
Peer and Individual	Rebelliousness	24
Peer and Individual	Gang Involvement	12
Peer and Individual	Perceived Risk of Drug Use	49
Peer and Individual	Attitudes Favorable Toward Drug Use	39
Peer and Individual	Attitudes Favorable Toward Antisocial Behavior	38
Peer and Individual	Sensation Seeking	33
Peer and Individual	Rewards for Antisocial Behavior	31
Peer and Individual	Friend's Use of Drugs	25
Peer and Individual	Interaction With Antisocial Peers	25
Peer and Individual	Depressive Symptoms	38
	Total Risk	41

State of Pennsylvania
Protective Factors, 2019 Pennsylvania Youth Survey

Domain	Factor	Value
Community	Rewards for Prosocial Involvement	40
Family	Family Attachment	62
Family	Opportunities for Prosocial Involvement	62
Family	Rewards for Prosocial Involvement	60
School	Opportunities for Prosocial Involvement	46
School	Rewards for Prosocial Involvement	48
Peer and Individual	Belief in the Moral Order	58
Peer and Individual	Religiosity	37
	Total Protection	54

Mapping EPIS-supported programs to Risk and Protective Factors

		EPIS Supported Programs	Multisystemic Therapy	Olweus Bullying Prevention	Promoting Alternative THinking Strategies	Positive Action	Strengthening Families 10-14	Strong African American Families	Project Towards No Drug Abuse	Trauma Focused Cog. Behavioral Therapy	Positive Parenting Program (Triple P)
PAYS Risk Factors	Community Domain	Low Neighborhood Attachment	x								
		Perceived Availability of Drugs									
		Perceived Availability of Handguns									
		Laws & Norms Favorable Toward Drug Use						x	x		
	Family Domain	Family History of Antisocial Behavior	x				x				
		Poor Family Management	x				x	x	x		x
		Parental Attitudes Favorable Toward Drug Use	x				x	x	x		
		Parental Attitudes Favorable Toward Antisocial Behavior	x								x
		Family Conflict	x				x	x	x	x	x
	School Domain	Academic Failure	x		x	x					
		Low Commitment Toward School	x		x	x	x		x		
	Peer and Individual Domain	Rebelliousness	x		x	x					x
		Gang Involvement	x				x				
		Perceived Risk of Drug Use					x		x		
		Attitudes Favorable Toward Drug Use					x	x	x		
		Attitudes Favorable Toward Antisocial Behavior	x	x	x	x	x	x	x		
		Sensation Seeking	x								
		Rewards for Antisocial Behavior	x		x				x		
		Friends Use of Drugs	x				x	x		x	
		Interaction with Antisocial Peers	x		x	x	x		x		
		Depressive Symptoms	x				x			x	x
PAYS Protective Factors	Comm. Domain	Community Rewards for Prosocial Involvement									
	Family Domain	Family Attachment	x				x	x		x	x
		Family Opportunities for Prosocial Involvement	x				x	x			
		Family Rewards for Prosocial Involvement	x				x	x			x
	School Domain	School Opportunities for Prosocial Involvement	x	x	x	x					
		School Rewards for Prosocial Involvement	x	x	x	x					
	Peer and Individ. Domain	Religiosity									
		Belief in the Moral Order									

Mapping EPIS-supported programs to Risk and Protective Factors

		EPIS Supported Programs	Aggression Replacement Training	Big Brothers Big Sisters	The Blues Program	Cognitive Behavioral Intervention for Trauma in Schools	Familias Fuertes (Spanish SFP 10-14)	Functional Family Therapy	Incredible Years	LifeSkills Training
PAYS Risk Factors	Community Domain	Low Neighborhood Attachment		x						
		Perceived Availability of Drugs								
		Perceived Availability of Handguns								
		Laws & Norms Favorable Toward Drug Use	x	x						x
	Family Domain	Family History of Antisocial Behavior	x					x	x	
		Poor Family Management					x	x	x	
		Parental Attitudes Favorable Toward Drug Use					x	x	x	
		Parental Attitudes Favorable Toward Antisocial Behavior	x				x	x	x	
		Family Conflict	x	x			x	x	x	
	School Domain	Academic Failure	x	x				x	x	
		Low Commitment Toward School	x	x				x		
		Rebelliousness	x					x	x	
		Gang Involvement						x		
	Peer and Individual Domain	Perceived Risk of Drug Use		x			x			
		Attitudes Favorable Toward Drug Use		x			x			x
		Attitudes Favorable Toward Antisocial Behavior	x	x			x	x	x	
		Sensation Seeking	x	x					x	x
		Rewards for Antisocial Behavior	x	x			x	x		x
		Friends Use of Drugs					x			x
		Interaction with Antisocial Peers	x	x			x		x	x
		Depressive Symptoms			x	x		x		
PAYS Protective Factors	Comm. Domain	Community Rewards for Prosocial Involvement	x	x					x	
	Family Domain	Family Attachment					x	x	x	
		Family Opportunities for Prosocial Involvement	x	x			x	x	x	
		Family Rewards for Prosocial Involvement					x	x	x	
	School Domain	School Opportunities for Prosocial Involvement	x	x					x	
		School Rewards for Prosocial Involvement							x	
	Peer and Individ. Domain	Religiosity								
		Belief in the Moral Order	x						x	

Program Readiness

Questions when considering programming...

- Are the risk and protective factors, addressed by the chosen program, identified and/or prioritized by your very own community?

- Who can deliver the model?

- Where can the program be delivered?

- How many participants can you engage in the program? Is the program implemented with a group or individually?

- Is the program appropriate for the population you plan to target?

- What are the outcomes you intend to change in your targeted population?

- Do you have buy-in from staff of all levels from Directors to Administrative Support Staff, your community stakeholders and key leaders?

- Do you have access to funding and necessary resources to start up and sustain key implementation elements of the program? Making sure to carefully consider and designate those responsible for sustainability planning and securing funds/resources right from the start?

- Determining data collection needs...Who will be responsible for distributing and collecting the surveys? Who will be responsible for data entry? Who will be responsible for analyzing and reporting the data results?

- Can all of these expectations for quality and dosage be met within the existing structure and with the existing resources?

Funding

Check out our Sustainability Planning Checklist to navigate funding strategies and cost-effective approaches for program delivery:

Sustainability Planning Checklist
Use this checklist to identify gaps in your sustainability planning.

BUDGET PLANNING
☐ **Start-Up Budget:** Review your program start-up budget. Identify critical expenses to clarify your minimum cost to start-up.

☐ **Operating Budget:** Review your operating (after start-up) budget. Identify critical expenses to clarify your minimum cost to operate.

☐ **Medical Assistance Rate:** For applicable programs, ensure that your budget identifies costs that can be covered with M.A. dollars.

COST EFFICIENCY
☐ **Supply Costs:** Can you share materials across staff, find better prices, or eliminate non-essential supplies?

☐ **Location:** Can you utilize a low-cost or no-cost venue (e.g., schools, places of worship)?

☐ **Volunteers and/or Interns:** Reach out to local agencies, universities, service clubs, and faith-based groups to identify individuals willing to share their time and talents.

☐ **Tasks and Responsibilities Strategy:** Assign the most cost-effective staff person to each task. Consider staff work location, capabilities, and level of compensation.

☐ **Existing Systems:** Can you reduce overhead costs by utilizing an existing service structure or staff to deliver your program?

☐ **Within-Agency Training:** Having an in-house trainer can reduce the cost of training new staff.

☐ **In-Kind Donations:** Approach local businesses and service groups for donations of supplies and other tangible needs.

PROGRAM REVENUE STREAMS
High Priority, Long Term Sources
☐ **County Needs Based Budget:** Research how your program can help meet the county's needs and priorities. These budgets are formulated two year in advance, so connect early with county officials who make budget decisions.
☐ **School District:** Research how your program can help meet your district's needs and priorities. Connect early with school boards officials who make budget decisions.
☐ **Medical Assistance / Commercial Insurance:** If your program is eligible for insurance reimbursement, initiate credentialing as soon as possible. Enrolling can take a year or longer.

Lower Priority, Short Term or One-Time Sources
☐ **Fundraising:** Connect with agency-wide fundraising efforts. Consider a fund-raising event.
☐ **Corporate Sponsorship:** Large businesses can be a source of one-time or on-going financial support.
☐ **Foundation and Local Grants:** A grant may help to provide bridge funding as you transition to a long-term funding plan.

DATA AS A SUSTAINABILITY TOOL
☐ **Data Collection:** Make data collection a permanent practice; fidelity and outcome data play a valuable and enduring role in high quality, sustainable program implementation.

☐ **Quality Improvement:** Establish a process for regularly reviewing and using program data to identify areas of success and needed improvements.

☐ **Marketing and Outreach:** Ensure that data are used to communicate program impact.

☐ **Public Health Impact:** Use local data sources to determine changes in community needs identified in your project proposal (e.g., placement rates, referrals to child welfare).

☐ **Program Relevance:** Use data to show a match between your program and local needs.

STAKEHOLDER ENGAGEMENT
☐ **Stakeholder Identification:** Who has a stake in your program and how might they play a part in its success or failure? Which of these have the biggest potential impact?

☐ **Communication:** Routinely share program success with stakeholders; both anecdotal victories and data demonstrating program impact.

☐ **Coalition Involvement:** Ensure your program has a relationship with coalitions to stay abreast of what is happening in the community and build relationships with community partners.

☐ **Program Visibility:** Consider ways to increase public awareness of the value of your program.

STAFF RETENTION & DEVELOPMENT
☐ **Staff Retention:** Identify the factors that contribute to staff turnover and develop a plan for supporting and maintaining staff.

☐ **Model Fidelity:** Ensure leadership is providing staff with the resources and support needed to continue implementing the program with quality.

☐ **Maintaining Expertise:** Ensure staff have connections with others disseminating the same program, such as the program developer, technical assistance providers, and provider networks.

☐ **Planning for Training:** Support staff's on-going development by budgeting for staff development costs and having policies that support staff training time.

PROGRAM PARTICIPATION
☐ **Recruitment:** Work with staff, coalition(s), and families to develop strategies for building your referral base and keeping referral sources engaged

☐ **Retention:** Identify barriers to participation and engagement. Ensure your program includes incentives and resources to overcome these barriers.

EPIS

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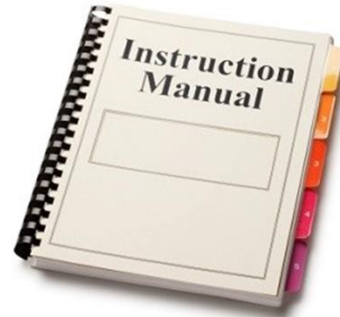**https://epis.psu.edu/node/935**

Program Implementation

Model Fidelity

Evidence-based programs are proven to get high quality outcomes for children, youth, families, and communities. However, these programs only predictably produce quality outcomes when they are implemented as they were designed by the researchers who developed them, with **fidelity to the model**.
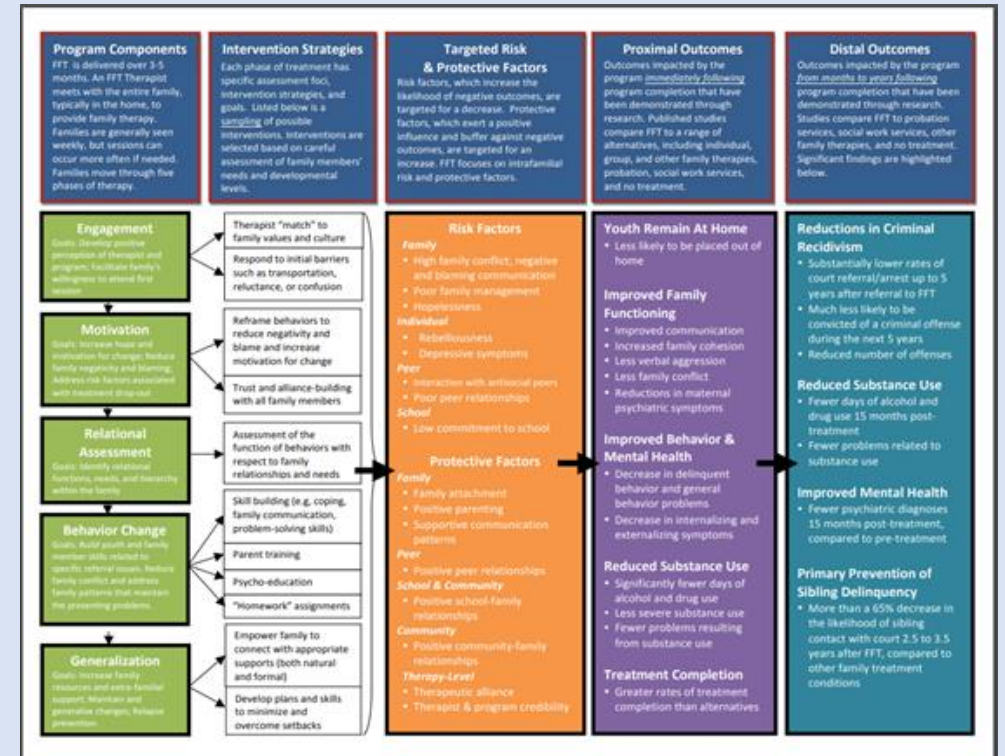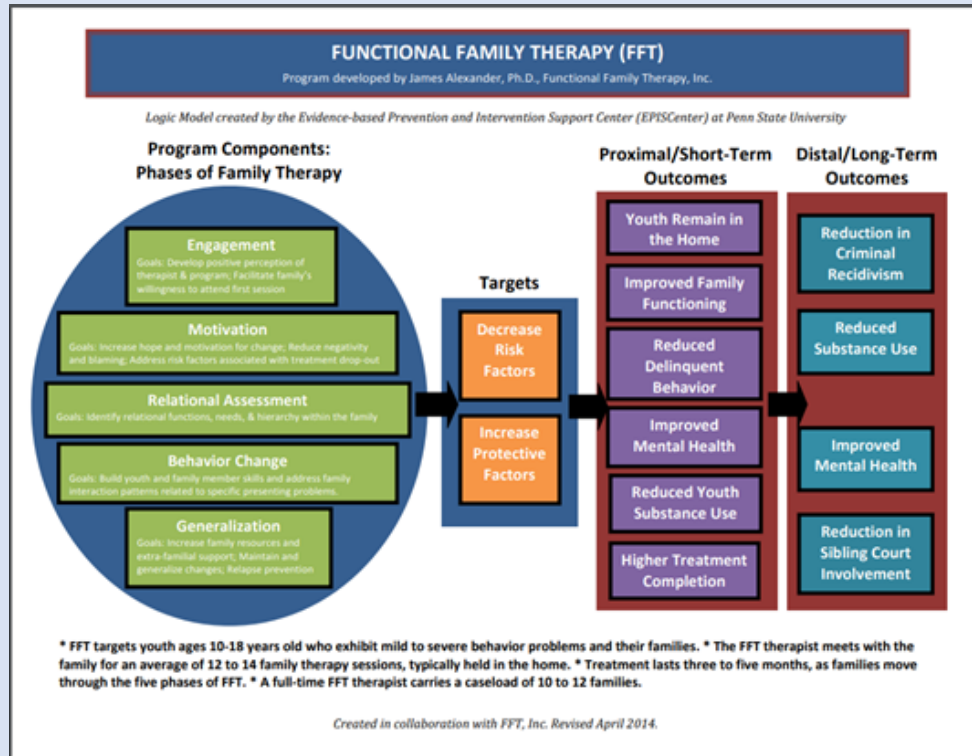
Manualization of Evidence-Based Programs

Logic Models

Model Fidelity further defined…

- **Adherence**
- **Duration**
- **Dosage**
- **Quality of Delivery**
- **Participant Engagement**

Program Implementation – COVID Adaptations

- Program Sign Ups through QR Codes – Online Questionnaires.
- Offering programs virtually or utilizing a hybrid model.
- Decreasing number of program participants.
- Developing policies around checking in with program participants before meeting to ensure everyone is healthy, not exhibiting COVID symptoms.
- Pre- and Post-Surveying by utilizing an online platform.
- Offering handouts and curriculum virtually.
- Cost savings to not paying for childcare.
- Time efficiency/flexibility with offering programming virtually.

Program Implementation – COVID Challenges

- Schools may not be able to allow external program providers in their buildings.
- Schools may still have the need to be virtual every now and then, causing inconsistent programming.
- Families may not have reliable internet.
- It is quite difficult to navigate collecting evaluation data online.
- Some folks are not comfortable yet having people enter their homes.
- Some folks are not comfortable yet participating in a group program.
- Staff turnover.

Monitoring Impact & Outcomes

Find the balance of collecting the right amount of data and information that is useful and meaningful!

Types of Evidence

Weakest to Strongest

Anecdotal: Information based on casual observation or experience only – rather than a more rigorous scientific process.

Descriptive: Data on the characteristics of the program or participant. Demographic data, service setting, numbers served.

Pre-experimental: Evaluation or research that doesn't include a comparison group.

Quasi-experimental: Evaluation or research that includes a comparison group.

Experimental: Evaluation or research that includes a comparison group and randomized assignment.

Adapted from the California Clearinghouse of Evidence-Based Clearinghouse for Child Welfare: https://www.cebc4cw.org/files/CEBCTypesOfResearchEvidence.pdf

Impact & Outcomes Measurement includes both:

Process Measures

- assess a program's reach and implementation quality

Outcome Measures

- assess the impact of the program on its participants.
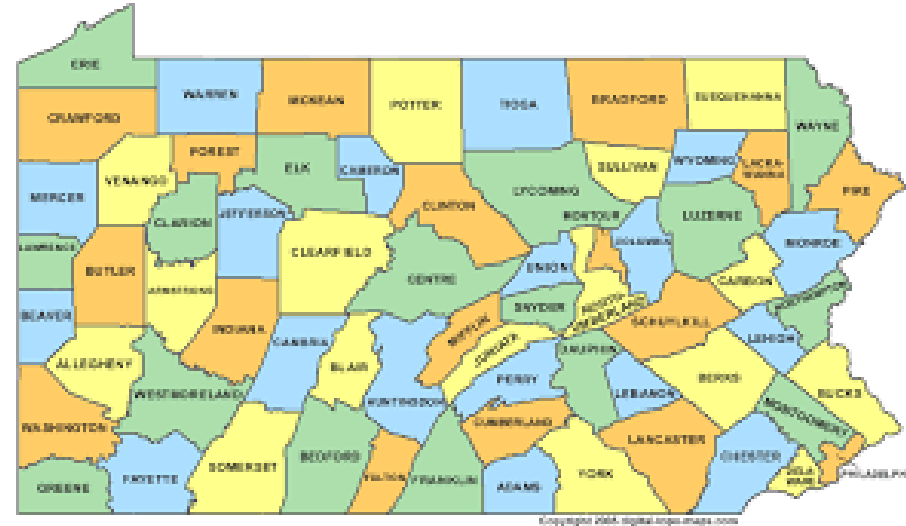
Three primary reasons why Data collection is important:

1. It provides you with the evidence to demonstrate to your **referral sources** that your program works, increasing the buyin and referrals to your program.

2. It provides you with the evidence to prove to **current and future funders** that your organization is implementing the model as it was designed **AND** that it's having an impact **AND** it's worth funding in your county/community/school.

3. **Program implementation staff** will know that by maintaining model fidelity, they **ARE** having a positive impact on the population they are working with.

Collaborate and Engage with Your Key Stakeholders

Definition of Engagement -

The process of **working collaboratively with and through groups of people affiliated** by geographic proximity, special interests, or similar situations to address issues affecting the wellbeing of those people.

Review process and outcome measures with key stakeholders often

Tying it all together

Cooper, B.R., & Betz, D.L. (2017). How can we keep it going? Key ingredients for evidence-based program sustainability. WSU Publications, retrieved at: https://hdl.handle.net/2376/7305

How to get connected...

- **Join an EPIS Listserv**
- **Follow us on Social Media!**
- **Join into Learning Community Meetings**
- **Direct Consultation (1:1)**

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