



Dissemination of Evidence-based Programs to Improve Public Health: Developing Capacity Through a State-level Prevention Support System



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**PA's prevention practitioners and
community prevention coalitions**

Over a decade ago, we conducted a comprehensive review, at the request of CMHS, to identify programs with empirical evidence of effectiveness in preventing mental disorders in children.

Since then, many “lists” have emerged to guide policy makers and practitioners in the adoption of evidence-based practices.

Today there is little evidence that the knowledge of “what works” has resulted in large-scale public health impact.

**PREVENTING MENTAL DISORDERS IN
SCHOOL-AGE CHILDREN:
A Review of the Effectiveness of Prevention Programs
EXECUTIVE SUMMARY**

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Translational Research Perspective



From Lists to Improved Public Health: Barriers

- **Synthesis and translation of research to practice, (and practice to research)**
- **EBP dissemination, selection, and uptake**
- **Ensuring sufficient implementation quality and fidelity**
- **Understanding adaptation and preventing program drift**
- **Measuring and monitoring implementation and outcomes**
- **Policy, systems, and infrastructure barriers**
- **Coordination across multiple programs and developmentally**
- **Sustainability in the absence of a prevention infrastructure**

Bumbarger, B. and Perkins, D. (2008). After Randomized Trials: Issues related to dissemination of evidence-based interventions. *Journal of Children's Services*,3(2), 53-61.

Bumbarger, B., Perkins, D., and Greenberg, M. (2009). Taking Effective Prevention to Scale. In B. Doll, W. Pfohl, & J. Yoon (Eds.) *Handbook of Youth Prevention Science*. New York: Routledge.

The challenges

- **Having prevention practice be more focused and strategic**
- **Increase (carefully planned) adoption of EBPs by more communities**
- **Ensure high quality implementation**
- **Sustain programs long-term**

Multi-Agency Steering Committee
(Justice, Welfare, Education, Health)

Resource Center
for Evidence-based and Promising Prevention
and Intervention Programs and Practices

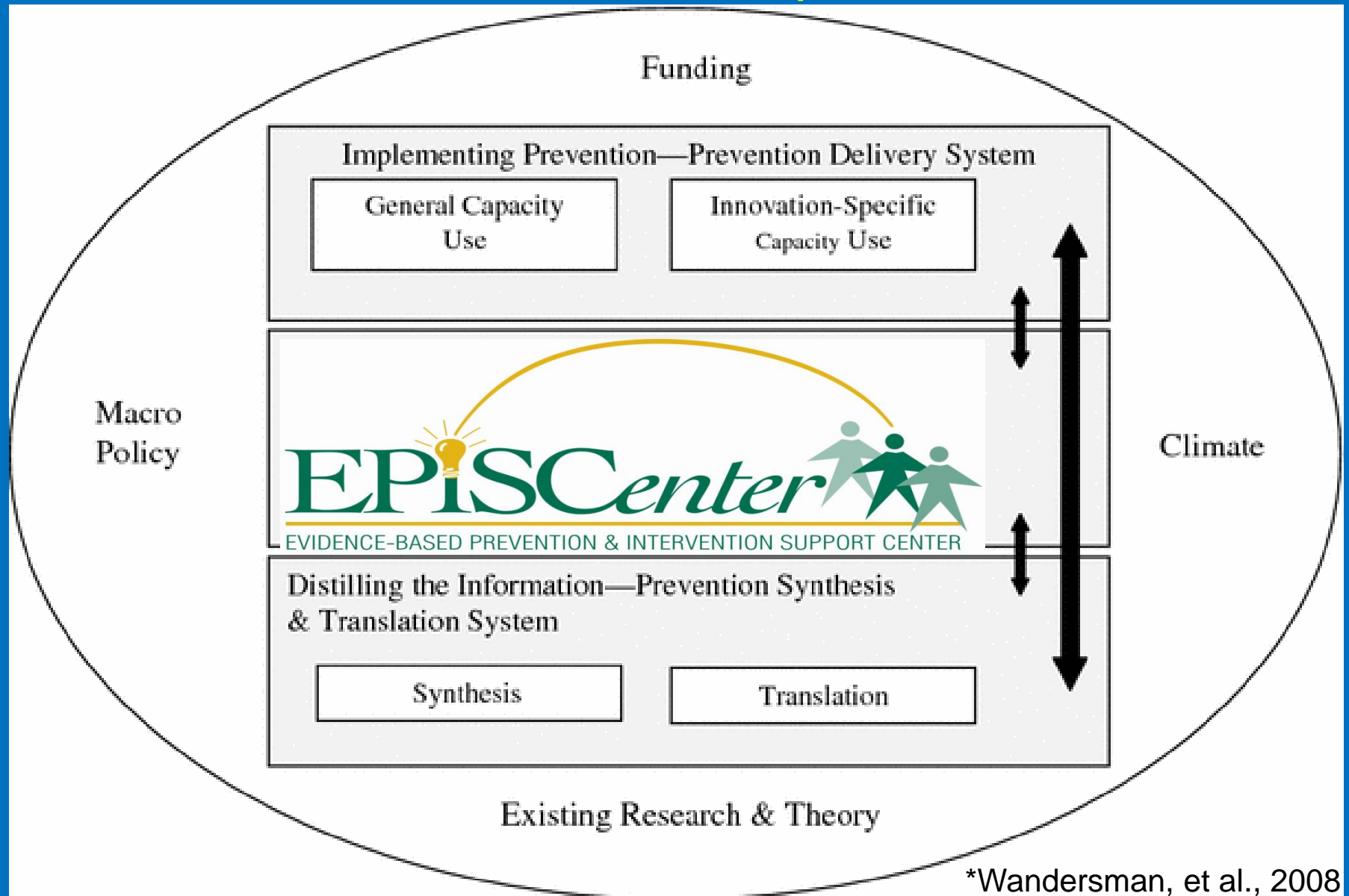
Support to
Community
Prevention
Coalitions

Support to
Evidence-based
Programs

Identification of
Local Innovative
Programs and
Practices

*A unique partnership between policymakers, researchers,
and communities to bring science to bear on issues of public
health and public safety*

Interactive Systems Framework for Dissemination and Implementation



Creating Fertile Ground for EBPs

Risk-focused Prevention Planning

(the Communities That Care model)



Supporting EBPs

- Onsite TA during startup phase
- Manualize implementations within PA context
- Promote high quality implementation
- Create economies of scale & learning communities
- Develop tools for outcome and implementation data collection and utilization (INSPIRE)
- Foster coordination across state agencies
- Develop and test new models for training, coaching, adaptation, and dissemination

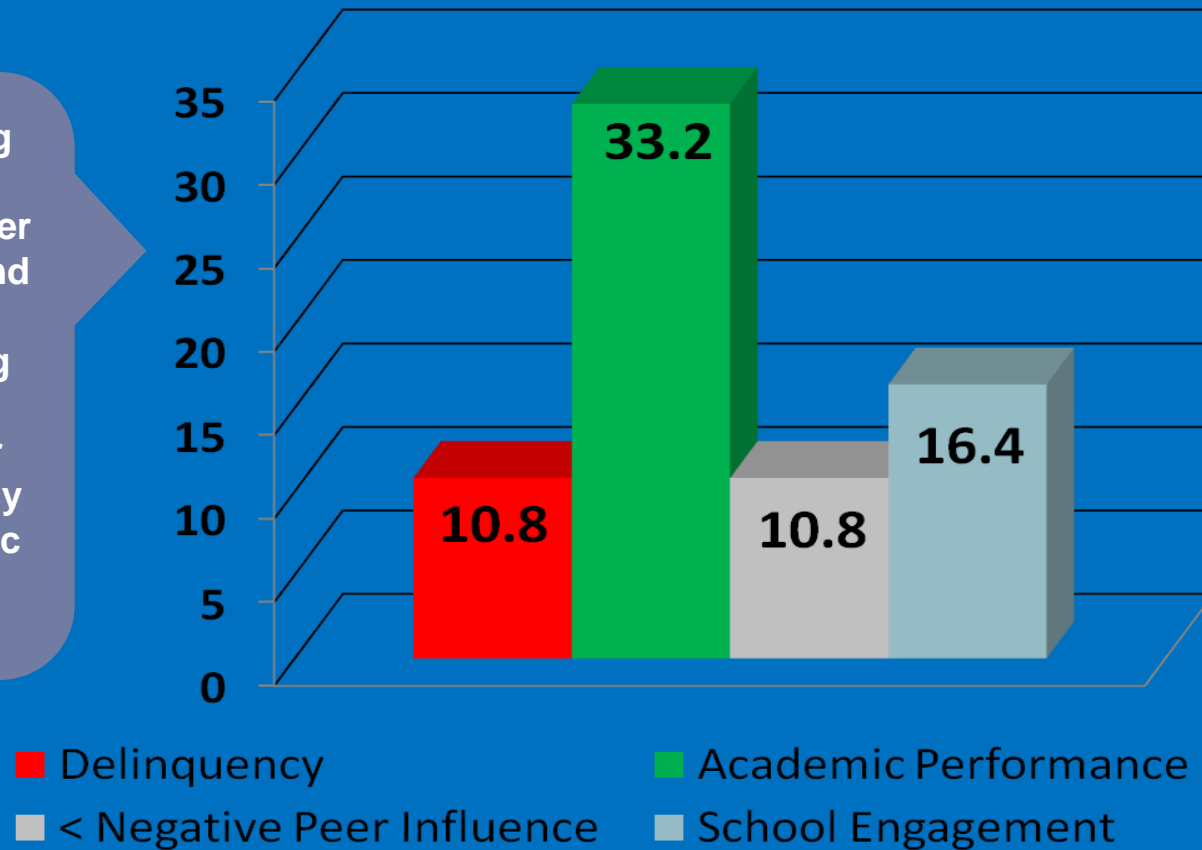
Measuring Population-level Impact

- **Cross-sectional quasi-experimental study of 98,000 students in 147 communities**
 - **Found youth in CTC communities reported lower rates of risk factors, substance use, and delinquency than youth in similar non-CTC communities**
 - **Communities using EBPs showed better outcomes on twice as many R/P factors and behaviors**

5 year Longitudinal Study of PA Youth

% Relative reduction in negative developmental trajectory of CTC/EBP youth over comparison group

Research following 419 age-grade cohorts of youth over a 5-year period found youth in CTC communities using EBPs had significantly lower rates of delinquency and better academic achievement!



* Feinberg, M.E., Greenberg, M.T., Osgood, W.O., Sartorius, J., Bontempo, D.E. (In Press). Can Community Coalitions Have a Population Level Impact on Adolescent Behavior Problems? CTC in Pennsylvania, [Prevention Science](#).

Some Lessons Learned

- **Focus on risk and protective factors rather than narrowly-defined behavioral outcomes**
- **Community-specific (i.e. local) data to drive decision making and resource allocation**
 - **Single state epidemiological survey**
 - **Becomes community needs assessment tied to multiple agency RFPs**
- **Community needs assessment and mobilization, as well as EBP implementation, requires proactive Technical Assistance**

Some Lessons Learned (cont.)

- **Fix community readiness and infrastructure issues before throwing money at problems**
- **Find a small number of things that work, and do them well**
- **Multi-year funding is necessary to get to stable effective services**
- **Tie funding to quality implementation and outcomes (objective criteria de-politicizes the process)**

Thank You!

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