



The Community Youth Development Study: Testing the Communities That Care Prevention System

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The Community Youth Development Study

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The Communities That Care Prevention System



- **Helps communities apply the advances of prevention science to guide youth development and prevention work.**
- **Measures community levels of protection and risk by surveying young people.**
- **Matches the community's profile of risk and protection with tested, effective actions.**



The Communities That Care Prevention System

- **Local control builds ownership to create sustainable change.**
- **Focuses on outcomes to insure success:
Are fewer teens using drugs? Fewer smoking? Fewer committing violent acts?**

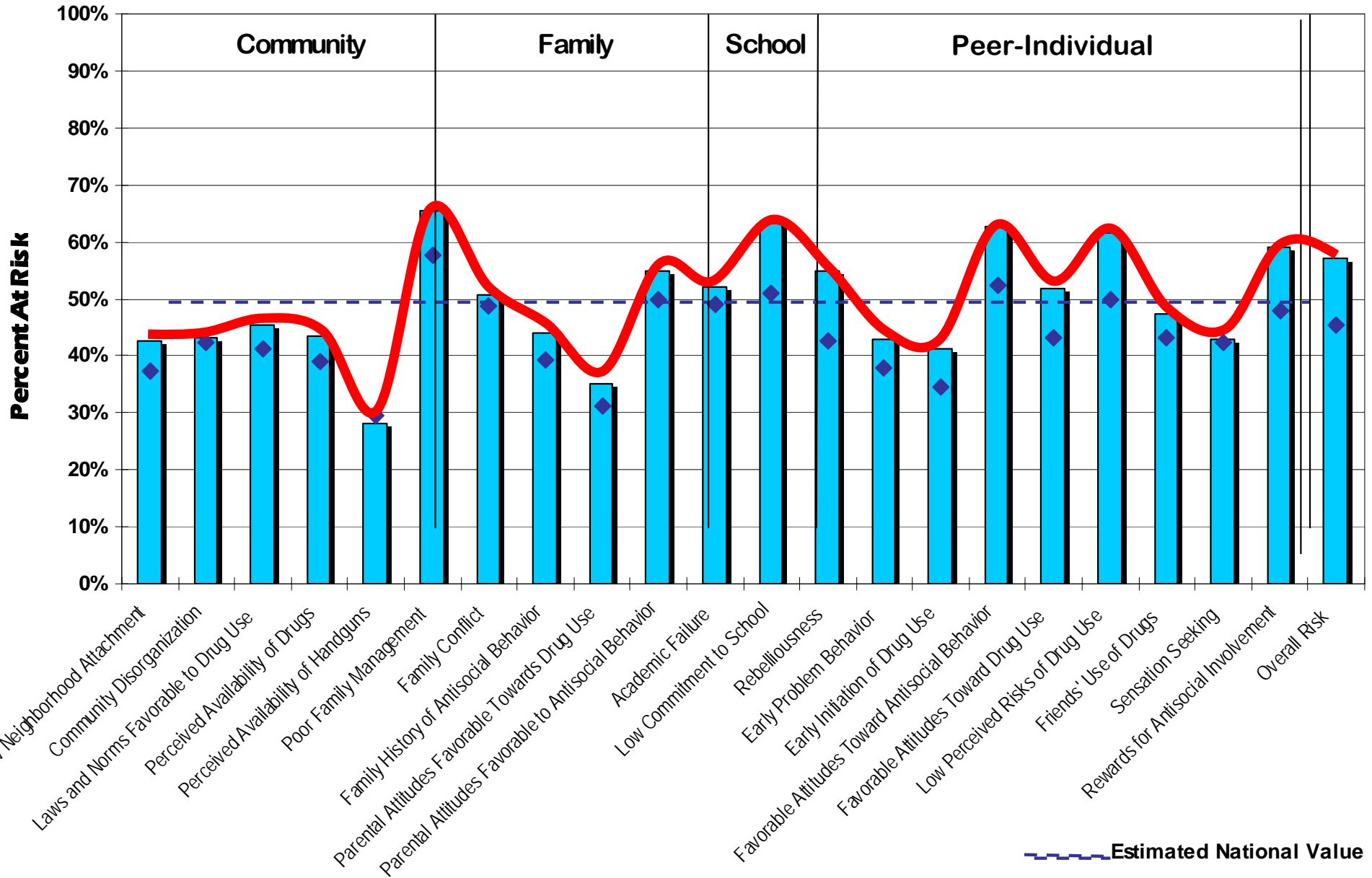


The Communities That Care Prevention System





Community "X" Risk Profile 8th Grade 2002



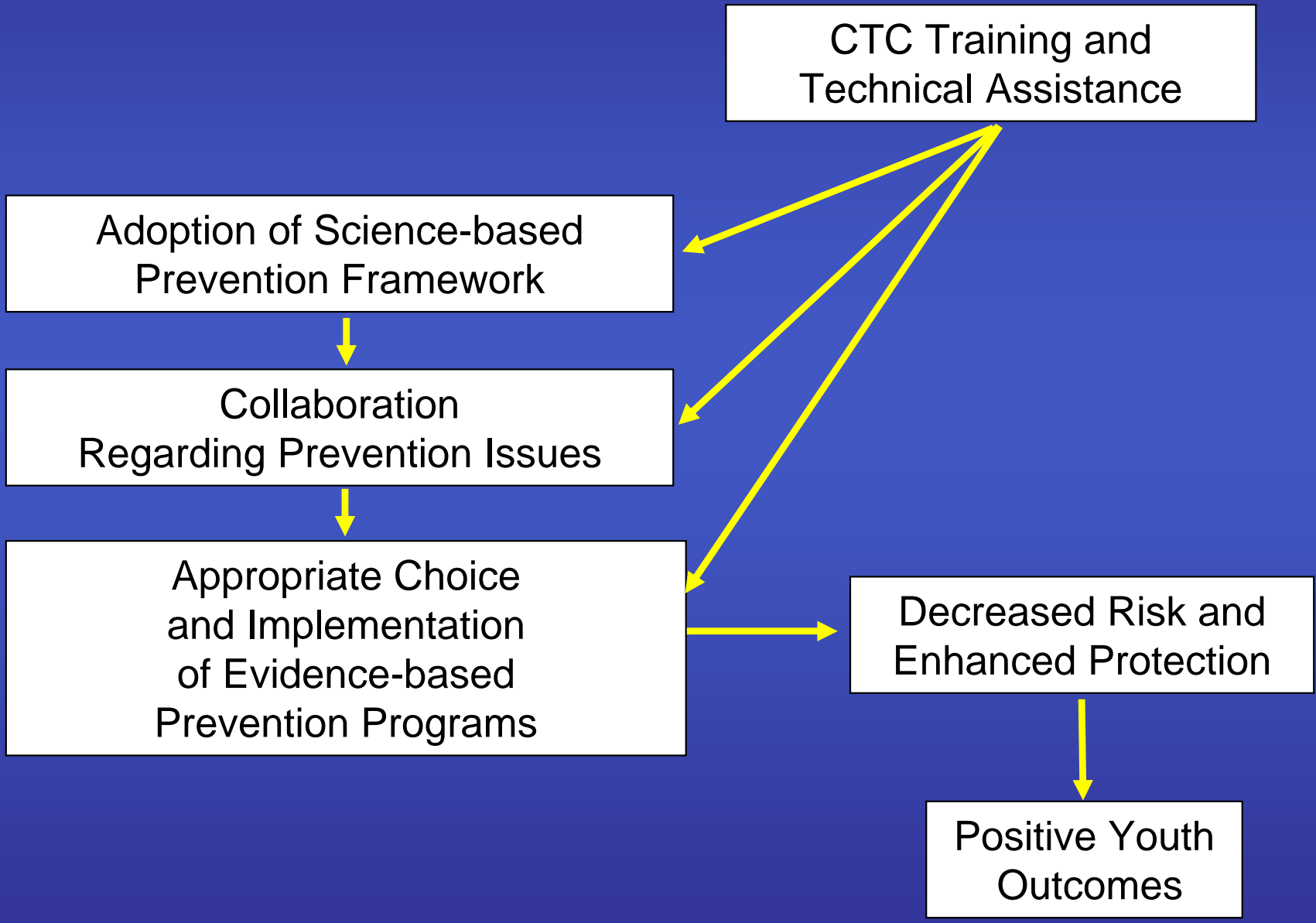


What is required to install CTC?

- A coalition of community stakeholders.**
- A coordinator for the CTC process.**
- Manuals and curriculum materials.**
- Training from certified trainers.**
- Technical assistance when difficulties are encountered.**
- A monitoring system to provide routine feedback on progress and outcomes.**



Communities That Care Theory of Change

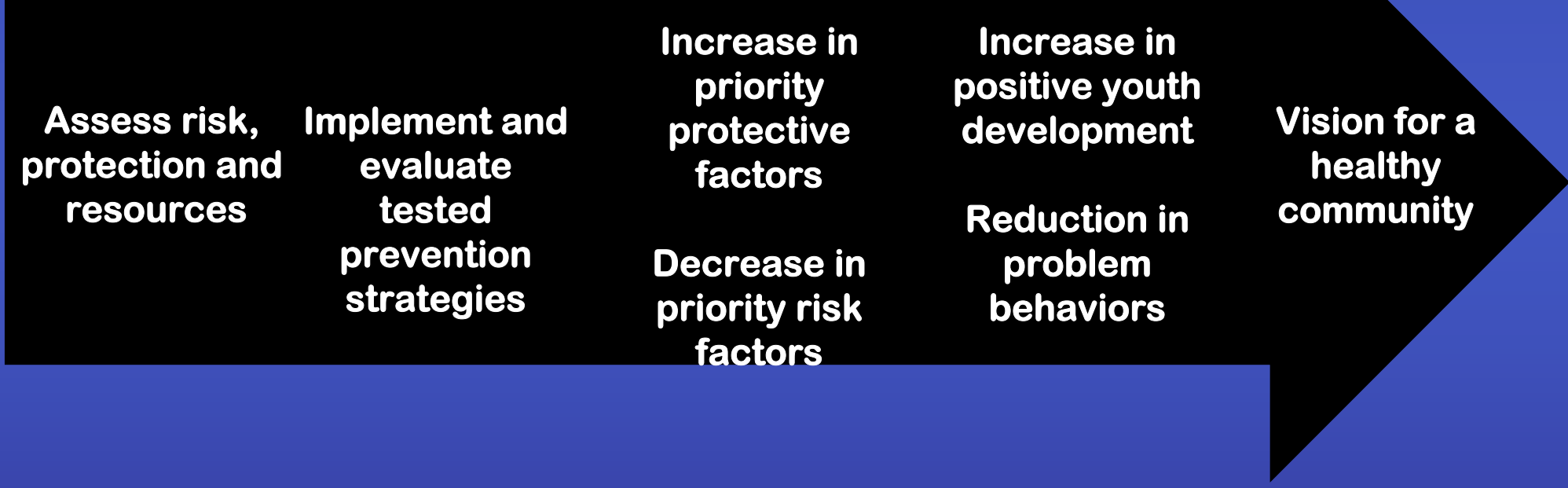




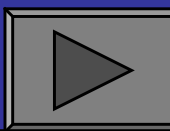
Communities That Care Process and Timeline

Process

**Measurable
Outcomes**



6-9 mos.	1 year	2-5 years	5-10 years
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The Community Youth Development Study (CYDS)

- A 24 community-randomized controlled trial to test the Communities That Care system.



CYDS Primary Aim

To test the efficacy of the
Communities That Care system in

- reducing levels of risk
- increasing levels of protection
- reducing health and behavior problems among adolescents

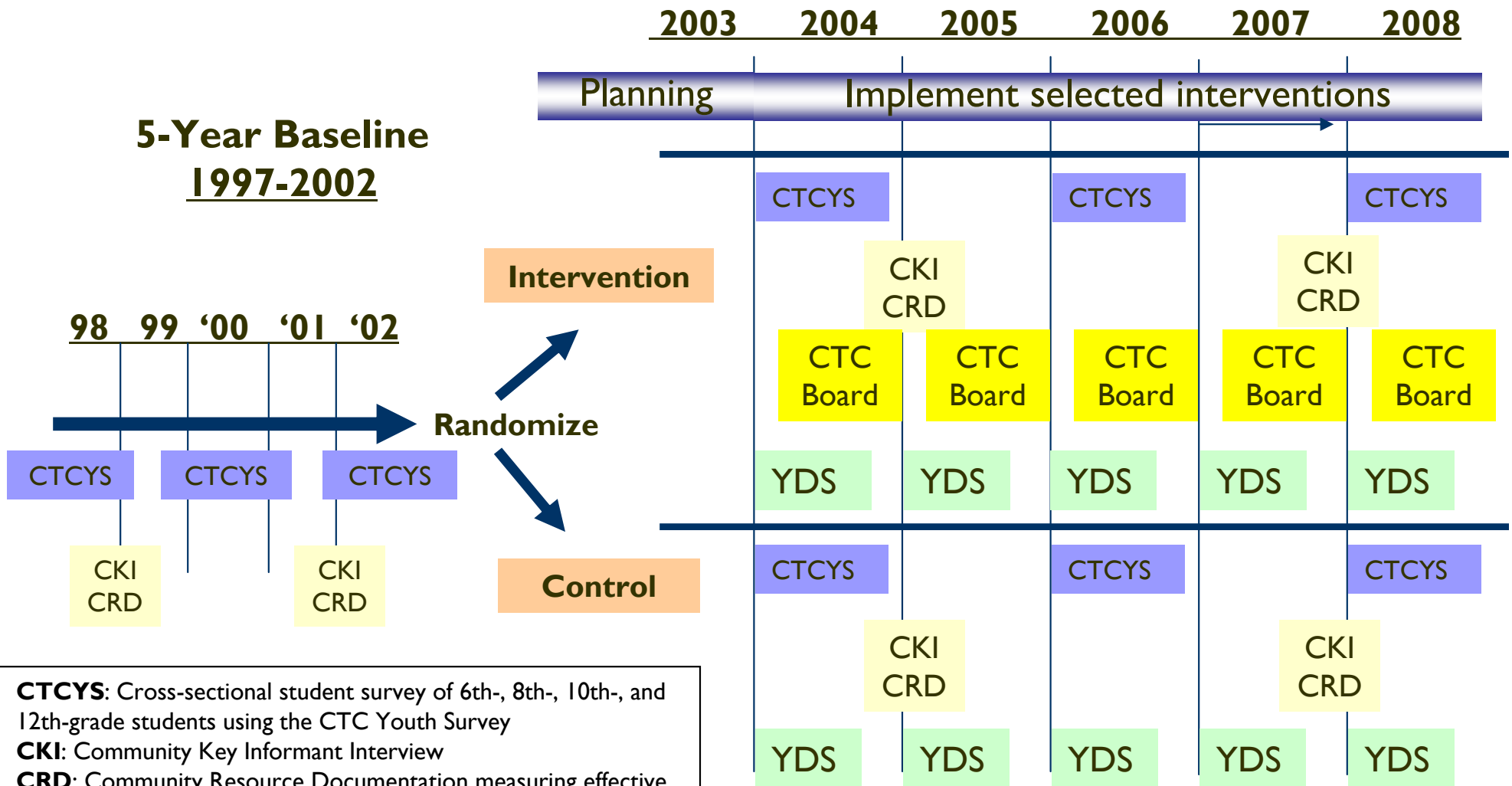
...using a true experimental design.



STUDY DESIGN



Randomized Controlled Trial 2003-2008



CTCYS: Cross-sectional student survey of 6th-, 8th-, 10th-, and 12th-grade students using the CTC Youth Survey
CKI: Community Key Informant Interview
CRD: Community Resource Documentation measuring effective prevention programs and policies in the community
CTC Board: CTC Board Member Interview
YDS: Longitudinal Youth Development Survey of students in the class of 2011 starting in 5th grade in spring 2004



Demographics of 24 CYDS Communities

	Mean	Minimum	Maximum
Total Population	14,616	1,578	40,787
Percent Caucasian	89.4%	64.0%	98.2%
Percent Hispanic Origin	9.6%	0.5%	64.7%
Percent African-American	2.6%	0.0%	21.4%
Percent Eligible for Free/Reduced Lunch	36.5%	20.6%	65.9%



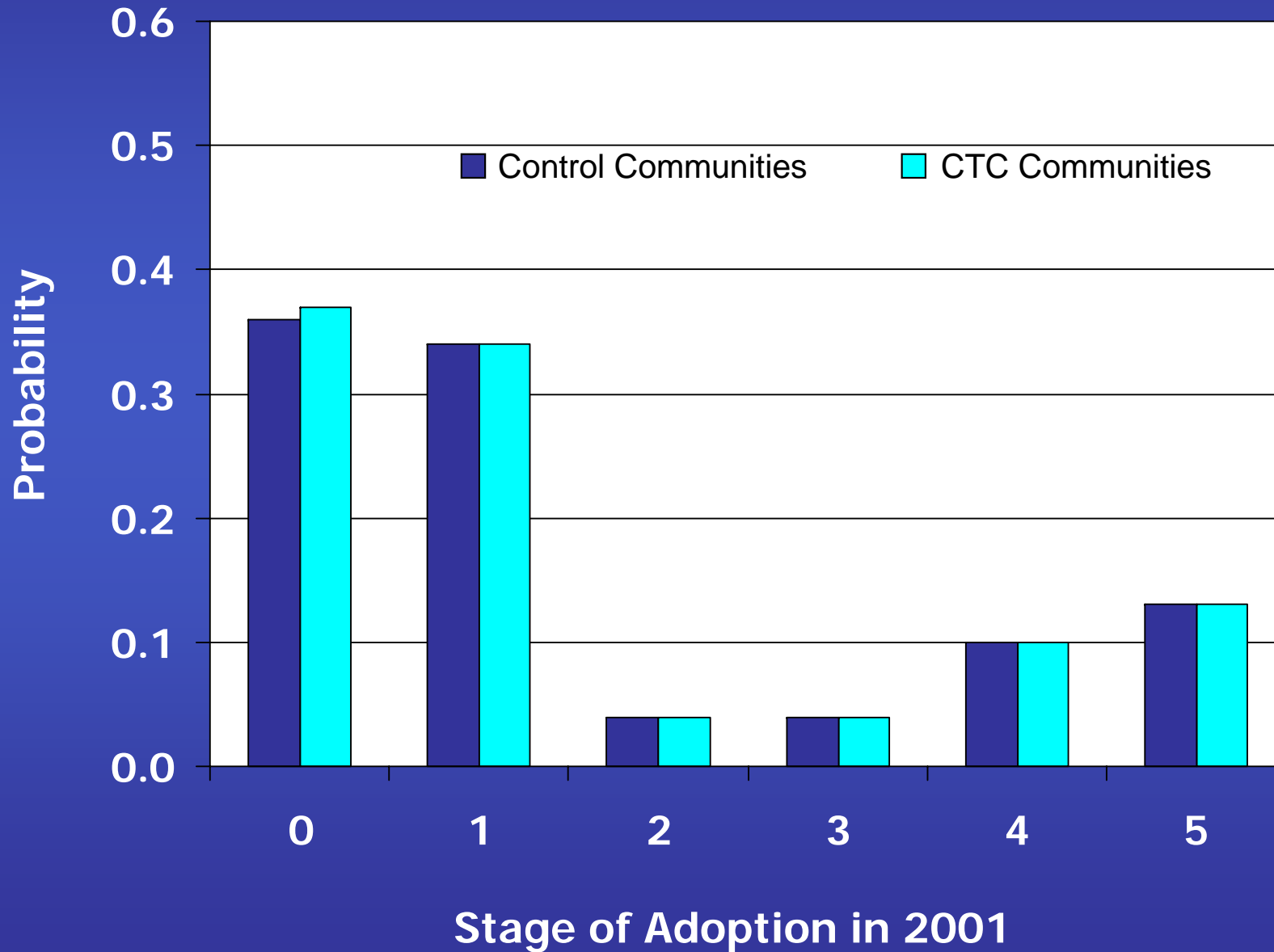
Adoption of Science-Based Prevention



- Stage 0: No Awareness
- Stage 1: Awareness of Prevention Science Terms and Concepts
- Stage 2: Using Risk and Protection Focused Prevention Approach as a Planning Strategy.
- Stage 3: Incorporation of Community Epidemiological Data on Risk and Protection in Prevention System.
- Stage 4: Selection and Use of Tested and Effective Preventive Interventions to Address Prioritized Risk and Protective Factors.
- Stage 5: Collection and Feedback of Process and Outcome Data and Adjustment of Preventive Interventions Based on Data.



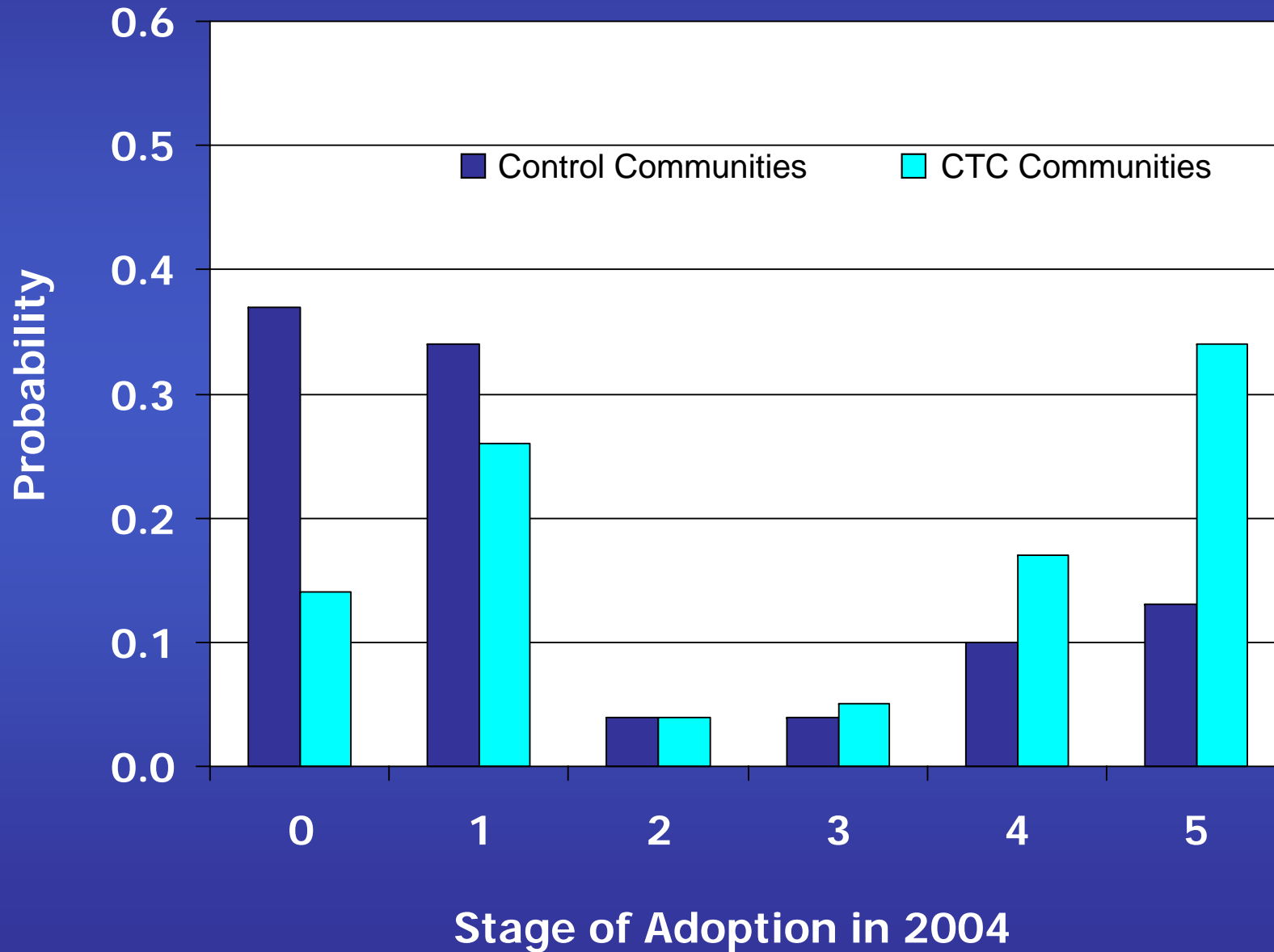
Baseline Stages of Adoption by Intervention Status



Note. Community Key Informant Survey (CKI).



Post-Intervention Stages of Adoption by Intervention Status



Note. Community Key Informant Survey (CKI).



Collaboration on Prevention

- **Sectorial Collaboration**

- **Assessed by degree to which key leaders report collaborating across seven different community sectors.**

In the past year, how much has [your organization] collaborated with [community sector] regarding prevention issues?

0 = none, 1 = some, 2 = a little, 4 = a lot.



Collaboration on Prevention

- **Prevention Collaboration**

- **Assessed by 9 items measuring prevention-specific collaborative activities.**

There is a network of people concerned about prevention issues who stay in touch with each other.

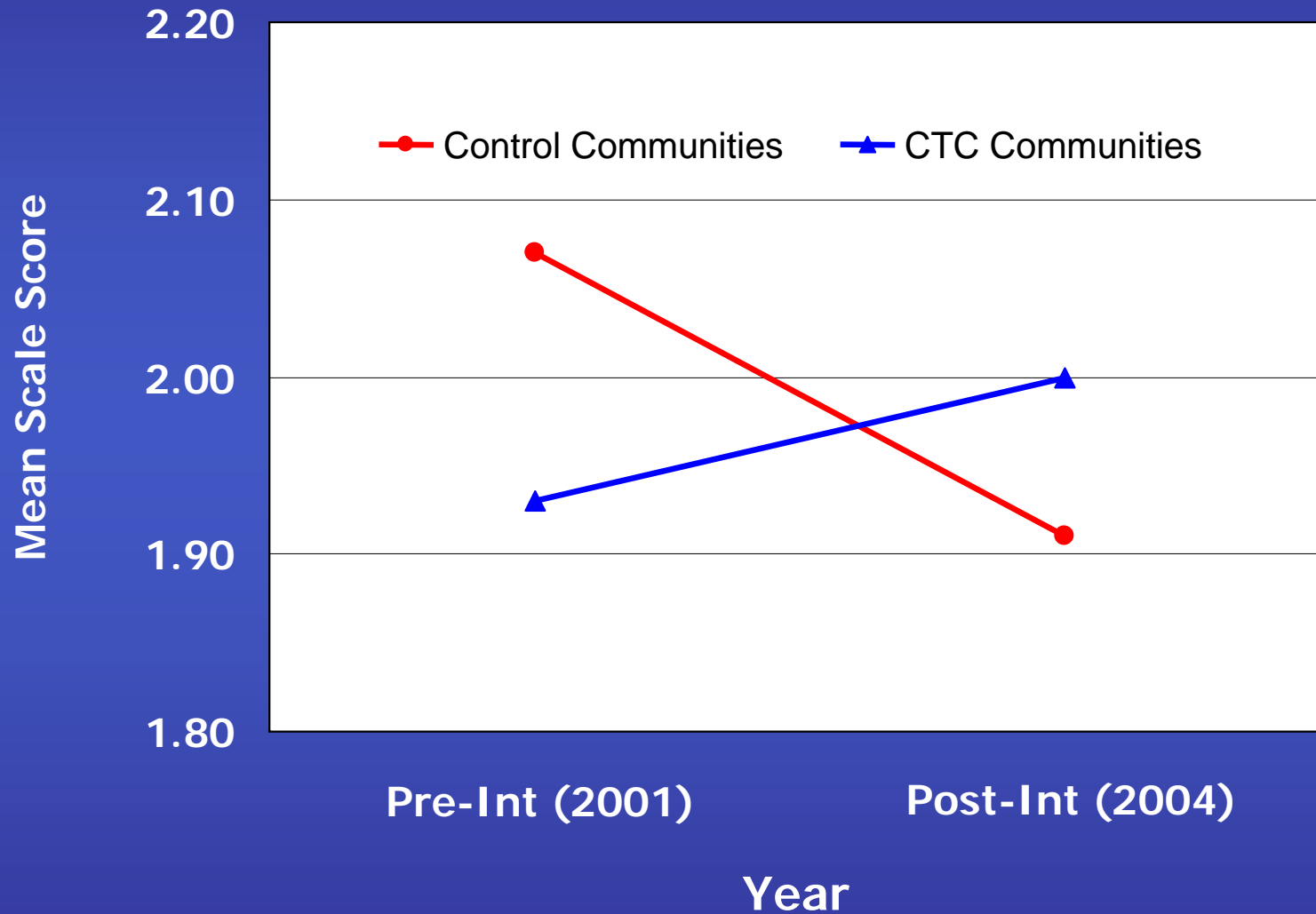
Organizations in [community] share money or personnel when addressing prevention issues.

Organizations in [community] participate in joint planning and decision making about prevention issues.

1 = strongly agree, 2 = somewhat agree, 3 = somewhat disagree, 4 = strongly disagree



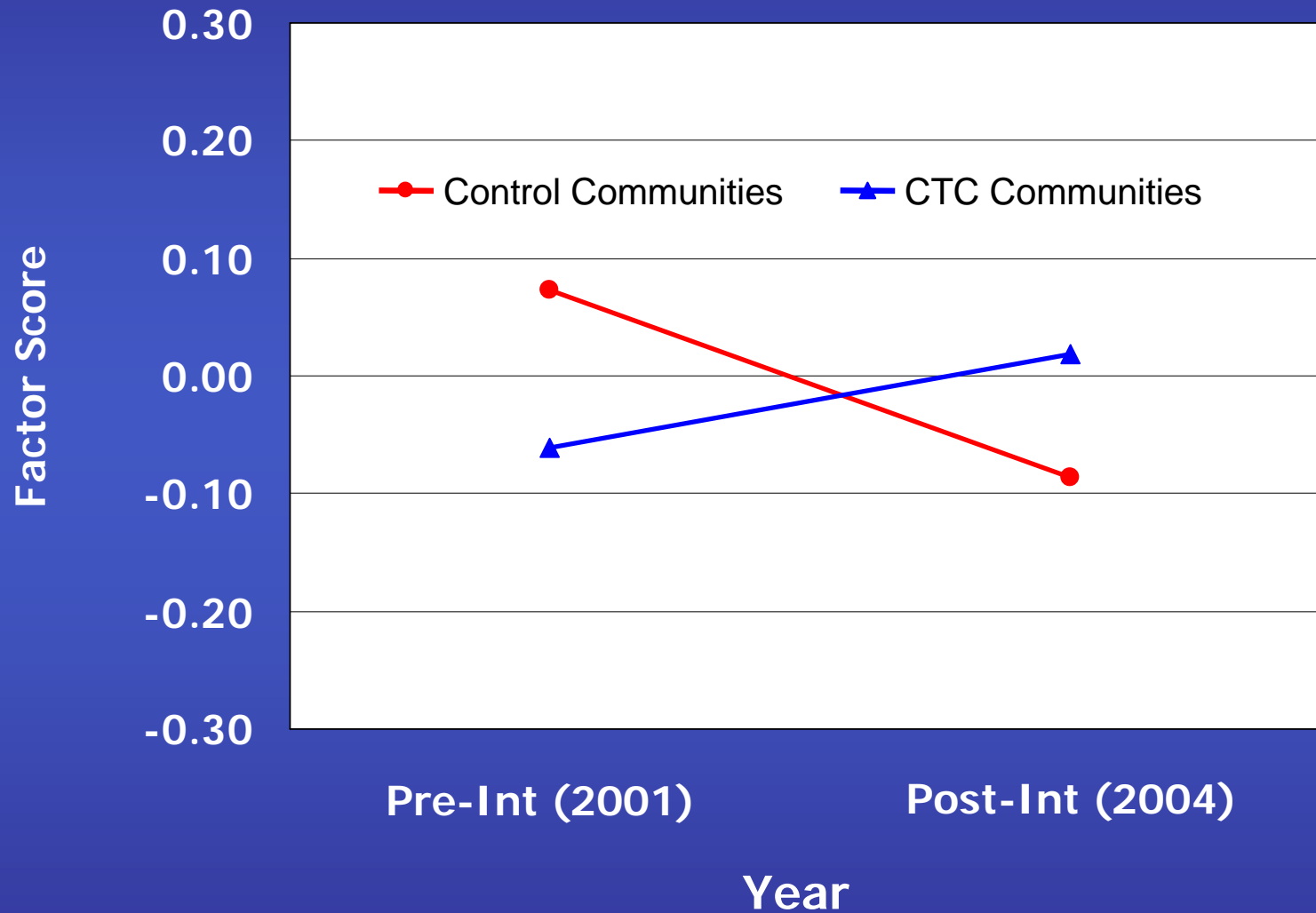
Change in Sectorial Collaboration by Intervention Status



Note. Community Key Informant Survey (CKI).



Change in Prevention Collaboration by Intervention Status



Note. Community Key Informant Survey (CKI).



Program Selection

CTC Community Board members selected prevention programs from a menu of programs that:

- ~ Showed significant effects on risk/protective factors, and drug use, delinquency, or violence
- ~ Involved at least one high-quality research study
- ~ Targeted children or families in Grades 5-9
- ~ Provided materials and training

Note. See "<http://preventionplatform.samhsa.gov>"



Programs Selected in 2004-2007



<u>PROGRAM</u>	<u>2004-05</u>	<u>2005-06</u>	<u>2006-07</u>
All Stars Core	1	1	1
Life Skills Training	2	4*	5*
Lion's-Quest Skills for Adolescence	2	3	3
Project Alert	-	1	1
Olweus Bullying Prevention Program	-	2*	2*
Program Development Evaluation Training	1	1	-
Participate and Learn Skills (PALS)	1	1	1
Big Brothers/Big Sisters	2	2	2
Stay SMART	3	3	1
Tutoring	4	6	6
Valued Youth Tutoring Program	1	1	1
Strengthening Families 10-14	2	3	3
Guiding Good Choices	6	7*	8*
Parents Who Care	1	1	-
Family Matters	1	1	2
Parenting Wisely	-	1	1
TOTAL	27	38	37

*Program funded through local resources in one or two communities.

Implementation Fidelity Assessment Checklists

- **Obtained from developers (9) or created by research staff (7)**
- **Provided similar information across all programs to measure 4 elements of fidelity**
- **Over 6,000 checklists were completed by program implementers and coordinators**
 - ~ **Minimal missing data (8.2% in 2004-05 and 2.1% in 2005-06)**
- **Checklists were collected and reviewed by communities, then sent to SDRG**

Program Observations

- **Observed 10-15% of sessions in 10 of 16 programs**
- **Completed fidelity checklists to verify adherence information**
 - ~ **Rate of agreement between observers and implementers was 93% (range: 77%-100%)**
- **Observers also rated the quality of delivery and participant responsiveness**



Participant Exposure



Number of Participants Receiving Prevention Services

Program Type	2004-05	2005-06	2006-07
School Curricula	1432	3886	5165
After-school*	546	612	589
Parent Training	517	665	476

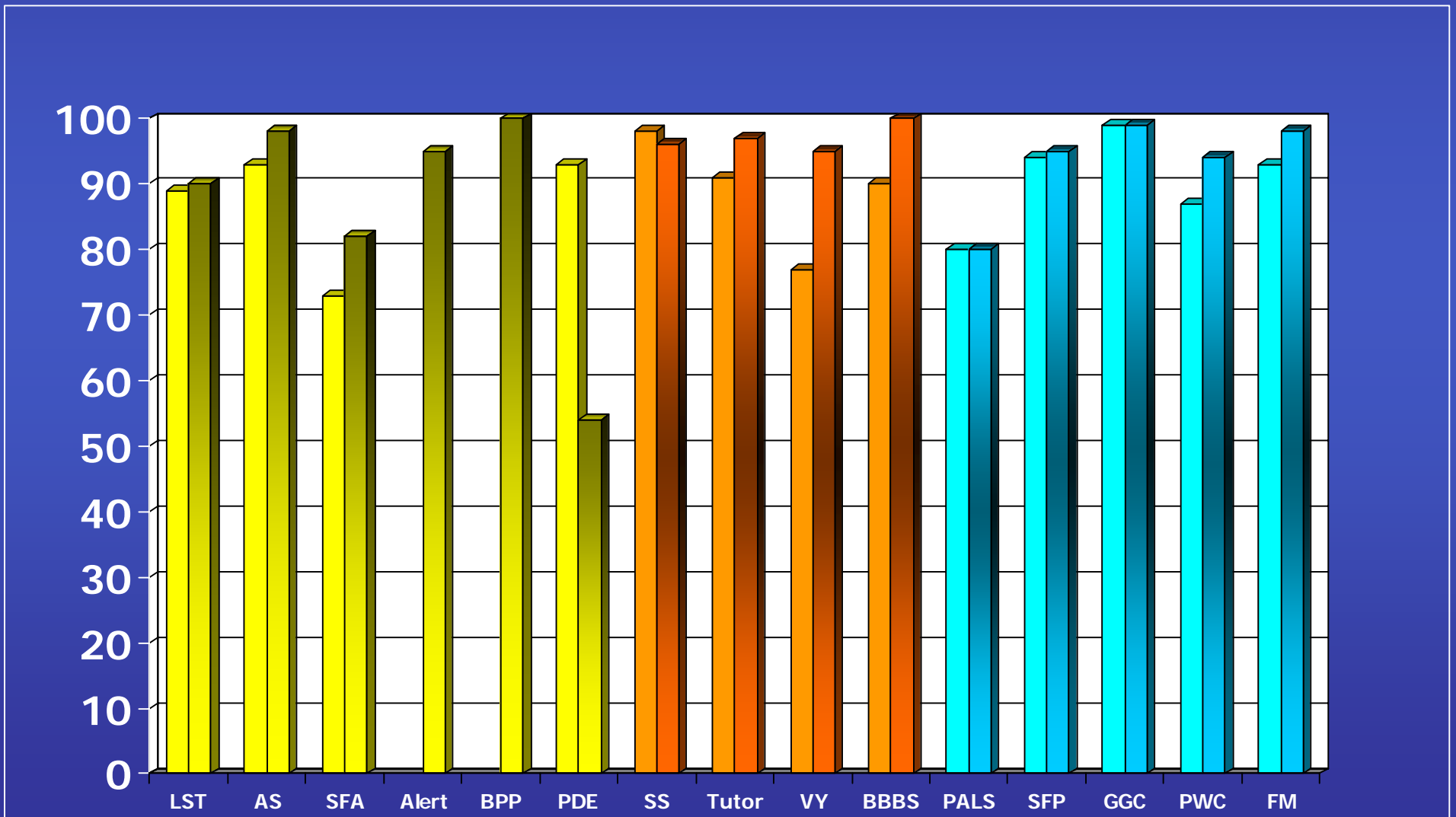
Note: Total eligible population of 6th, 7th, and 8th-grade students in 2005-06 was 10,031.

***Includes PALS, BBBS, Stay SMART, and Tutoring programs**

Adherence Rates

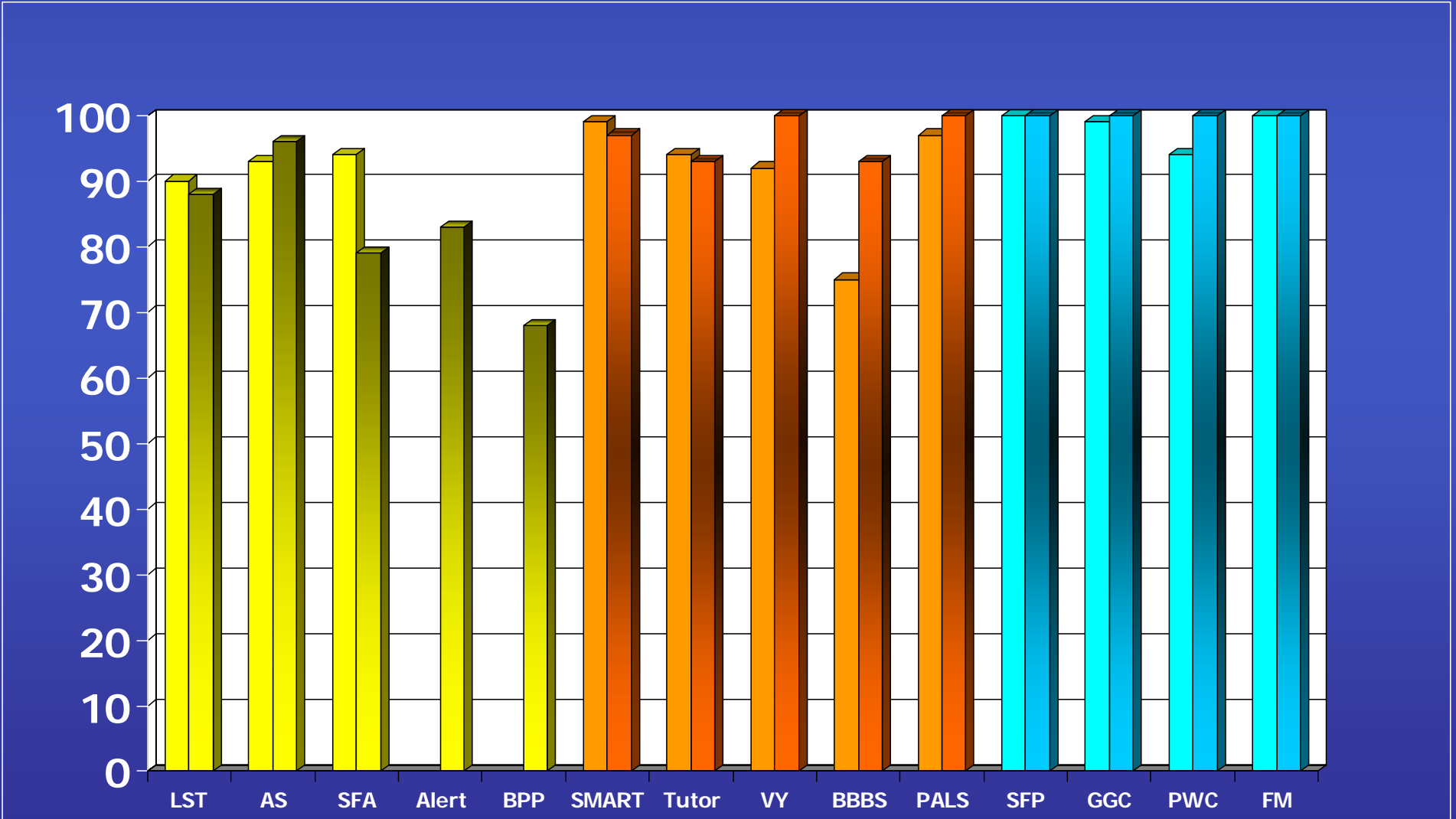
2004-05 and 2005-06

Percentage of material taught or core components achieved



Dosage: Delivery of Lessons 2004-05 and 2005-06

Percentage of delivery requirements met

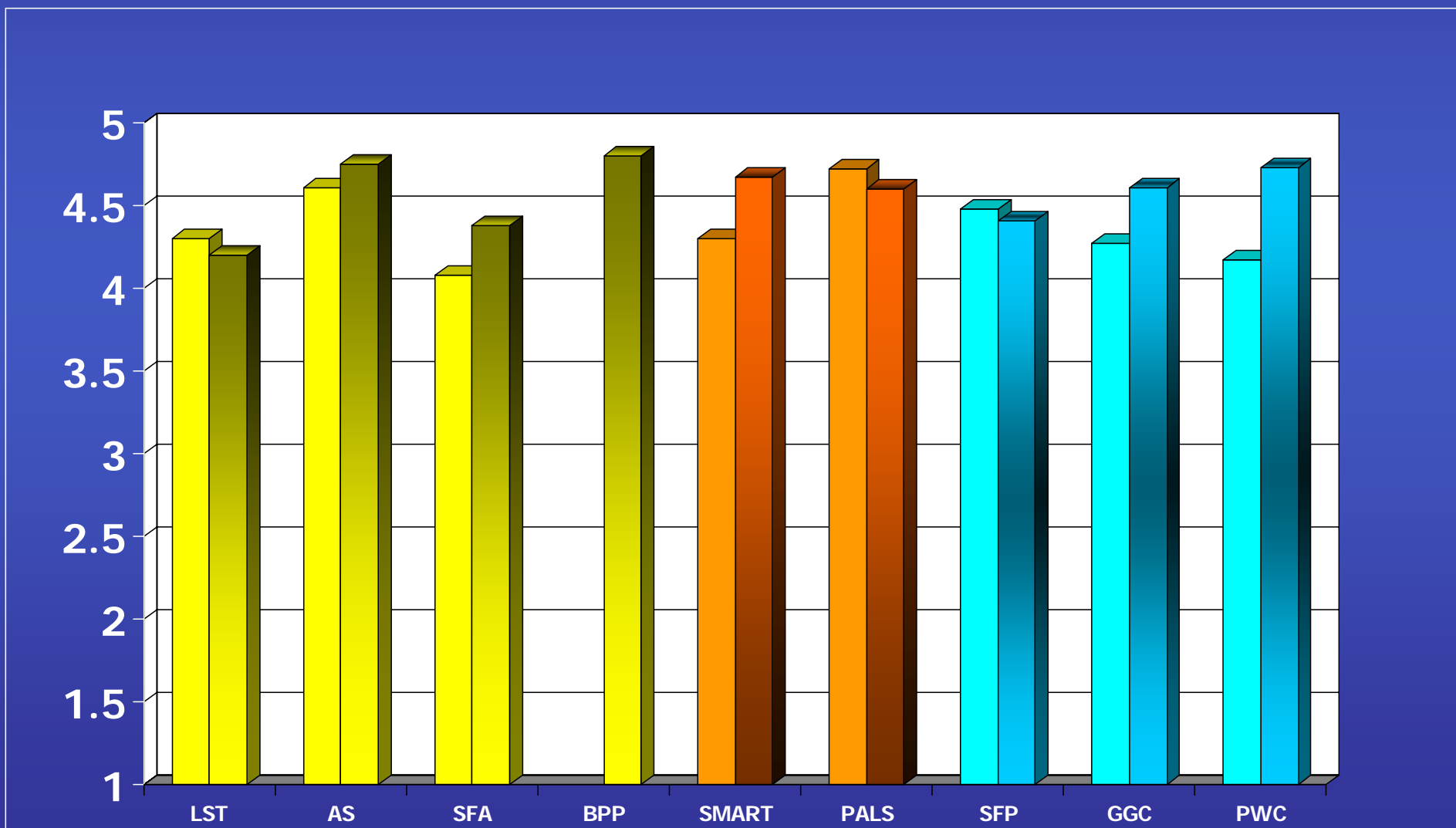




Quality of Delivery

2004-05 and 2005-06

Average score on 10 items reported by program observers



Participant Responsiveness

- **Observers rated participant responsiveness on two items, using a 1-5 scale (higher scores indicate better responsiveness):**
 - ~ **To what extent did the participants appear to understand the material?**
 - ~ **How actively did group members participate in discussions and activities?**
- **Across all programs, rates were high: 4.38 and 4.52 in 2004-05 and 2005-06**



Risk Factors Addressed in CTC Communities



Community	Targeted Risk Factors
A	Parental attitudes favorable to problem behavior Low commitment to school Favorable attitudes toward problem behavior
C	Family management problems Low commitment to school Friends who engage in problem behavior Favorable attitudes towards problem behavior
G	Poor family management Low commitment to school
H	Poor family management Academic failure Low commitment to school
I	Low commitment to school Friends who engage in problem behavior
J	Academic failure Low commitment to school Friends who engage in problem behavior Favorable attitudes toward problem behavior Rebelliousness



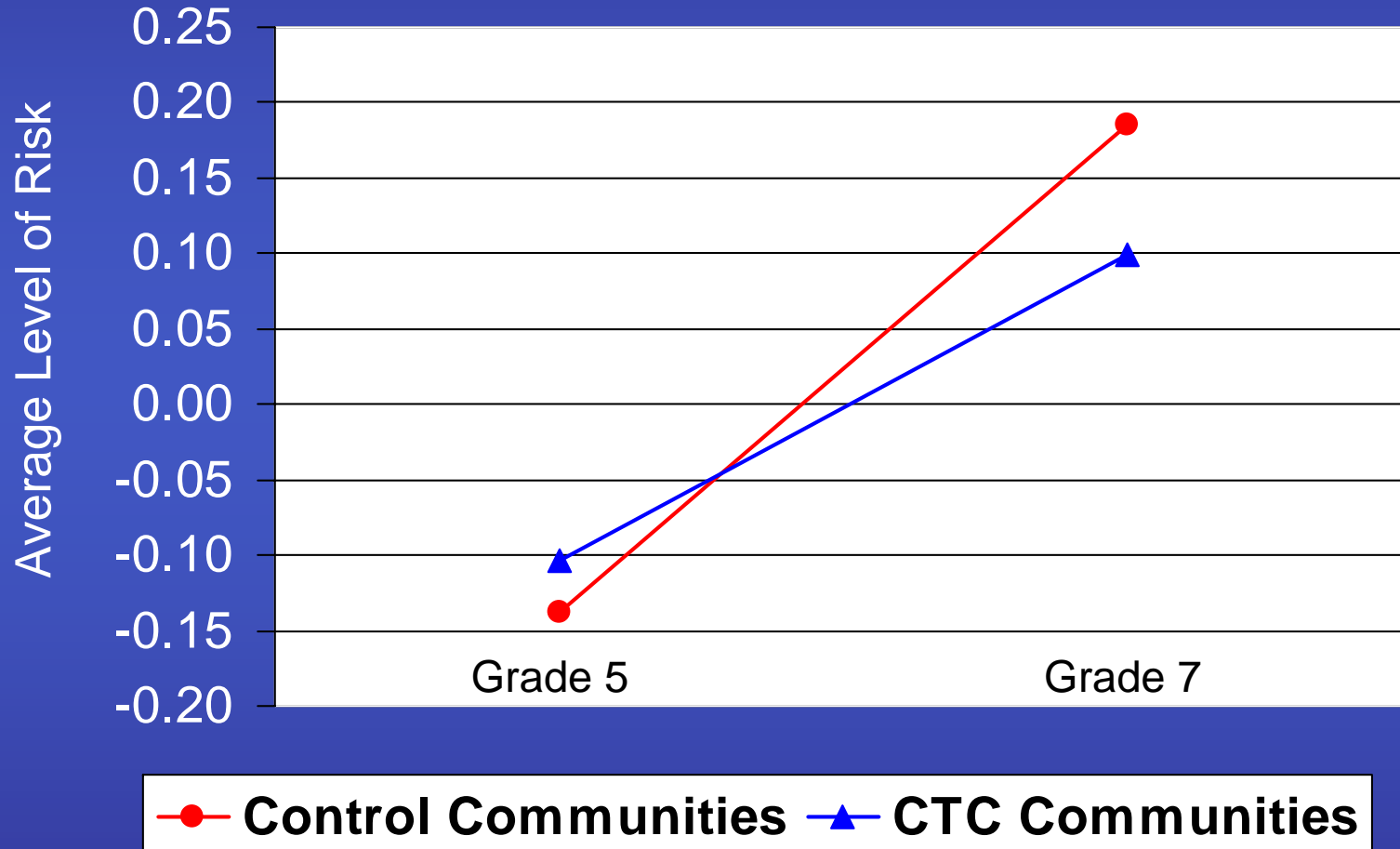
Risk Factors Addressed in CTC Communities



Community	Targeted Risk Factors
N	<p>Academic failure</p> <p>Friends who engage in problem behavior</p>
O	<p>Laws and norms favorable toward drug and alcohol use</p> <p>Low commitment to school</p> <p>Friends who engage in problem behavior</p> <p>Rebelliousness</p>
Q	<p>Family conflict</p> <p>Friends who engage in problem behavior</p> <p>Favorable attitudes towards problem behavior</p> <p>Rebelliousness</p>
T	<p>Family conflict</p> <p>Low commitment to school</p> <p>Friends who engage in problem behavior</p>
W	<p>Poor family management</p> <p>Academic failure</p> <p>Friends who engage in problem behavior</p> <p>Favorable attitudes towards problem behavior</p>
X	<p>Academic failure</p> <p>Low commitment to school</p> <p>Friends who engage in problem behavior</p>



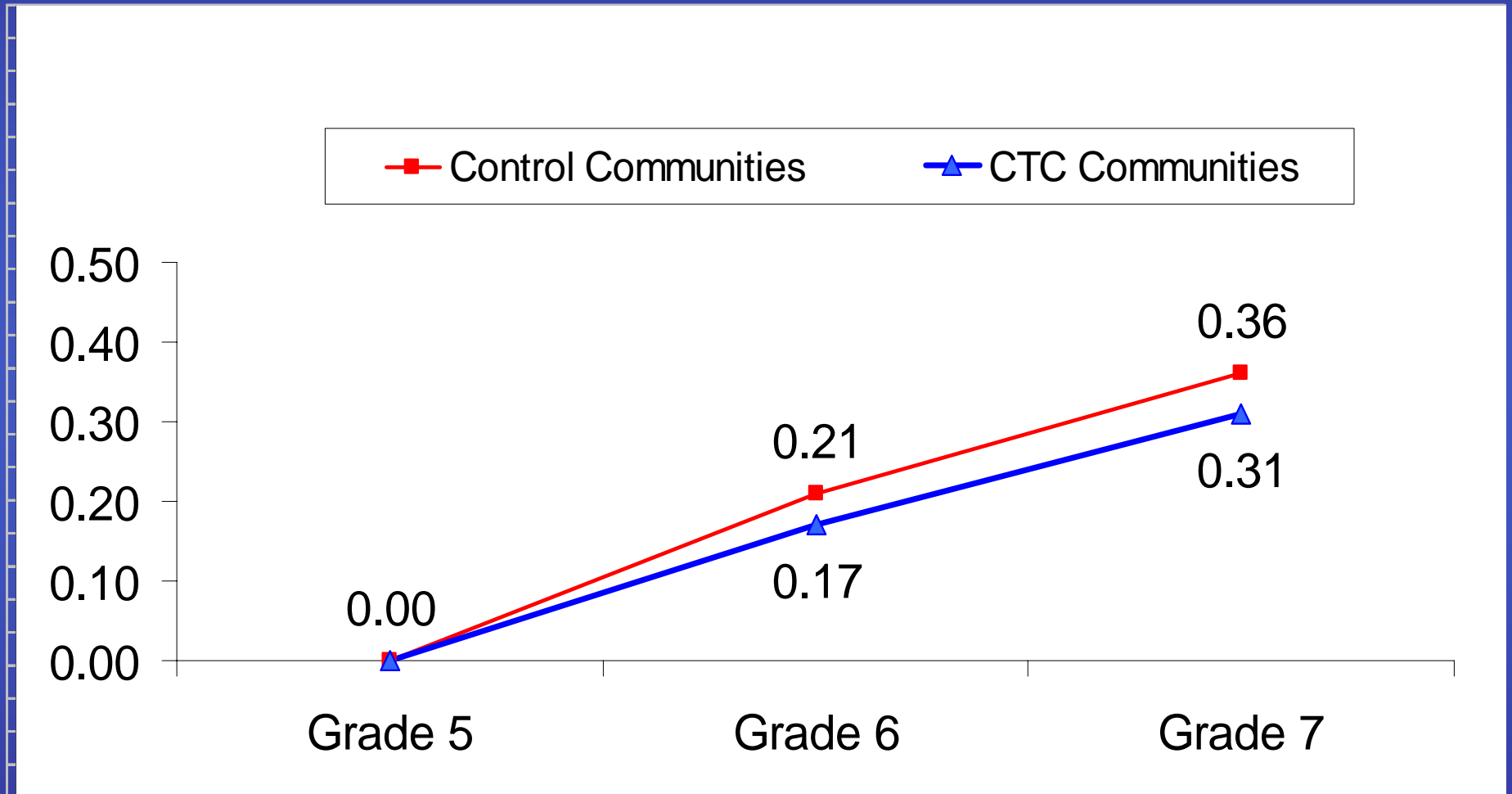
Pre-post change in community targeted risk factors



Note. Youth Developmental Study panel sample.



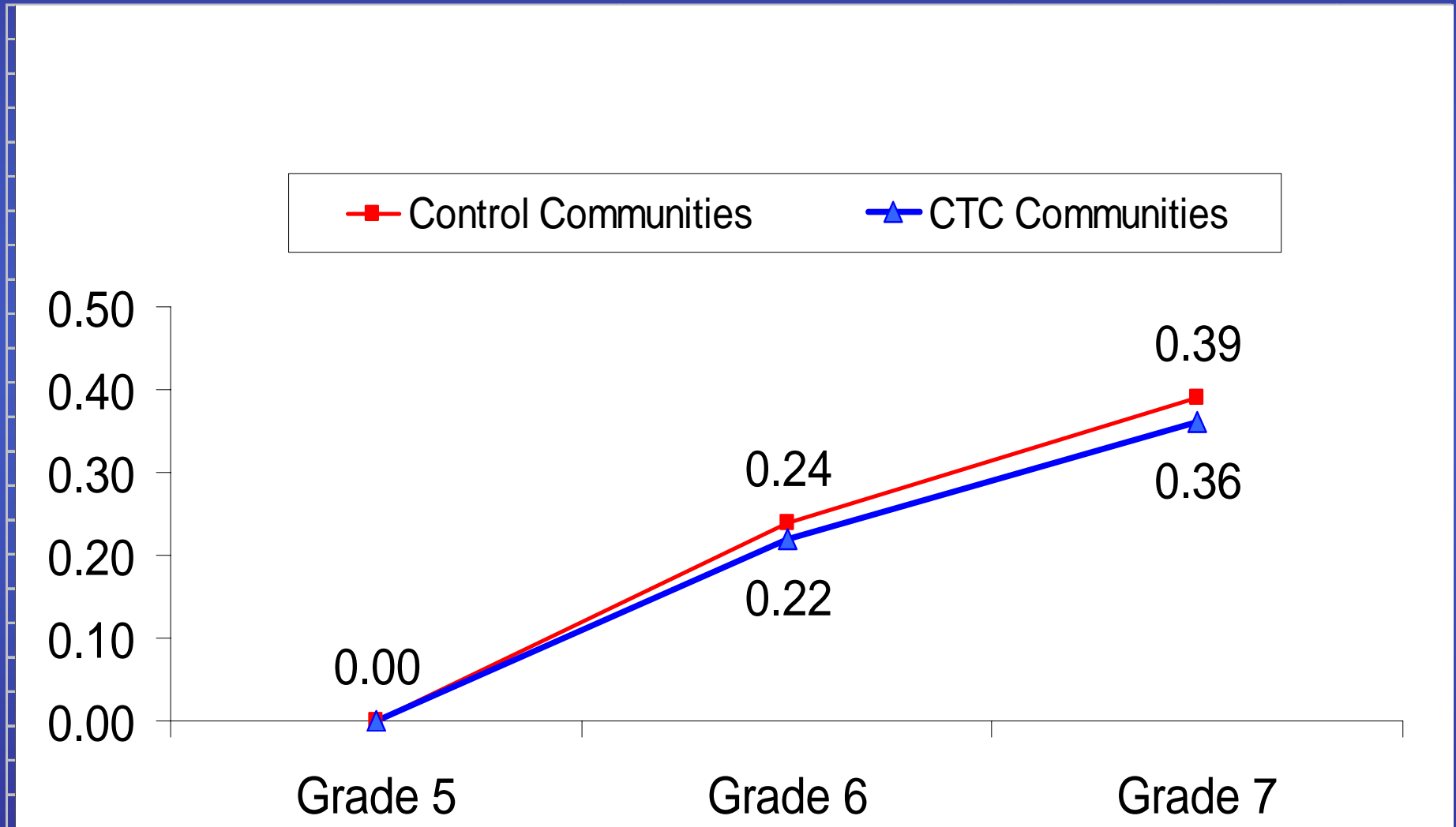
Initiation of Delinquent Behavior



Note. Youth Developmental Study panel sample. Excludes students who initiated delinquent behavior by Grade 5.



Substance Use Initiation



Note. Youth Developmental Study panel sample. Excludes students who initiated substance use by Grade 5.



Summary

- Adoption of science-based prevention and collaboration are higher in CTC communities than in control communities.
- CTC communities and schools are implementing tested & effective programs.
- The new programs are being implemented with fidelity.
- Targeted risk factors are increasing less rapidly in CTC than in control communities.
- The rate of initiation of delinquent behaviors are lower in CTC than in control communities.