Strengthening Adolescent Outcomes: Enhancing Adoption and Implementation of *Too Good* Prevention Programs using the Consolidated Framework for Implementation Research (CFIR)

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Outline

- Background
- Purpose
- Prevention Program
- Research Question
- Methods
- Results
- Conclusion
- Implications
Background

Good News
• Proper implementation of evidence-based programs (EBPs) produces positive outcomes for adolescents

Bad News
• Lack of evidence regarding effective strategies to prepare organizations for successful implementation of EBPs

Background

Why the lack of evidence regarding effective implementation?

• Concern for the effectiveness of interventions

• Research has focused on evaluation of and proving the efficacy and effectiveness of interventions

Background

The Research to Practice Gap

• Produces lower outcomes for adolescents

• Research and funding needs to focus more on discovering evidence-based implementation strategies to strengthen outcomes

The purpose of this study was to examine factors that affect the adoption and implementation of Too Good prevention programs.
Too Good Programs

• Evidence-based drug and violence prevention programs

• Listed on National Registry of Evidence-based Programs and Practices (NREPP)

• The programs are developed locally by the C.E. Mendez Foundation

• Implemented in school and community settings in 50 states
Too Good Programs

Theoretical Foundation
Social Learning Theory (Bandura, 1977)
Problem Behavior Theory (Jessor, 1977)
Social Development Model (Hawkins, et al. 1992)

Too Good Programs...
• develop social-emotional learning skills
• build adolescent protective factors
• buffer risk factors

Too Good Programs

Core Components

• Goal Setting
• Decision Making
• Identifying and Managing Emotions
• Effective Communication
• Healthy Bonding and Relationships
Research Question

What are the adoption and implementation moderators and barriers of Too Good programs?
Methods
Methods

• Participants N=140 (from 36 states)
  – Adopters
  – Implementers
  – Facilitators

• Email invitation n=1,082
Research Instrument

- Research Instrument
  - 55-item web-based survey (15-25 minutes)
    - guided by the *Consolidated Framework for Implementation Research (CFIR)*
      - 5 domains with 21 out of 39 constructs of the CFIR

- Content validity was established by recruiting subject-matter experts who evaluated the survey questions.
### Consolidated Framework for Implementation Research (CFIR)

<table>
<thead>
<tr>
<th>Intervention Characteristics</th>
<th>Outer Setting</th>
<th>Inner Setting</th>
<th>Characteristics of the Individual</th>
<th>Implementation Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention source</td>
<td>Client needs and resources</td>
<td>Structural characteristics</td>
<td>Knowledge and beliefs about the intervention</td>
<td>Planning</td>
</tr>
<tr>
<td>Evidence</td>
<td>Cosmopolitanism</td>
<td>Networks and communications</td>
<td>Self-efficacy</td>
<td>Engaging</td>
</tr>
<tr>
<td>Relative advantage</td>
<td>Peer pressure</td>
<td>Implementation climate</td>
<td>Individual stage of change</td>
<td>Opinion leaders</td>
</tr>
<tr>
<td>Adaptability</td>
<td>External policy &amp; Incentives</td>
<td>Tension for change</td>
<td>Individual identification with organization</td>
<td>Internal leaders</td>
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<tr>
<td>Trialability</td>
<td></td>
<td>Compatibility</td>
<td>Other personal attributes</td>
<td>Champions</td>
</tr>
<tr>
<td>Complexity</td>
<td></td>
<td>Relative priority</td>
<td></td>
<td>External change agents</td>
</tr>
<tr>
<td>Design quality and packaging</td>
<td></td>
<td>Organizational incentives and rewards</td>
<td></td>
<td>Executing</td>
</tr>
<tr>
<td>Cost</td>
<td></td>
<td>Goals and feedback</td>
<td></td>
<td>Reflecting and evaluation</td>
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</table>

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<tr>
<th>Resources</th>
<th>Access to knowledge and information</th>
<th>Readiness for implementation</th>
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<th>Leadership engagement</th>
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- **Damschroder, L., Aron, D., Keith, R., Kirsh, S., Alexander, J., & Lowery J. (2009). Fostering implementation of health services research findings into practice: A consolidated framework for advancing implementation science. *Implementation Science*; 4:50.**
CFIR Domain - Intervention Characteristics

**Constructs**
- Intervention source
- Evidence strength & quality
- Relative advantage
- Adaptability
- Trialability
- Complexity
- Design quality and packaging
- Cost

**Survey Question**
- The program was developed with input from experienced professionals.
- *Too Good* Programs can be adapted in ways that work best for my setting.
CFIR Domain - Outer Setting

Constructs

- Patient needs and resources
- Cosmopolitanism
- Peer pressure
- External policy & incentives

Survey Question

What kind of funding support did you or your school/community agency receive to purchase *Too Good Prevention Programs.*
CFIR Domain - Inner Setting

Constructs

- Structural characteristics
- Networks and communications
- Culture
- Implementation climate
  - Tension for change
  - Compatibility
  - Relative priority
- Organizational incentives and rewards
- Goals and feedback
- Learning climate
- Readiness for implementation
  - Leadership engagement
- Resources
- Access to knowledge and information

Survey Question

Administrators at my school or community setting are involved in the planning process to implement *Too Good* prevention programs.
CFIR Domain - Characteristics of Individuals

**Constructs**

- Knowledge & beliefs about the intervention
- Self-efficacy
- Individual stage of change
- Individual identification with the organization
- Other personal attributes

**Survey Question**

- The staff at my setting has a favorable attitudes toward *Too Good* prevention programs.
- I am confident in my ability to fully implement *Too Good* prevention programs.
CFIR Domain - Process

** Constructs **
- Planning
- Engaging
  - Opinion leaders
  - Internal leaders
  - Champions
  - External change agents
- Executing
- Reflecting and evaluation

** Survey Question **
Does your setting appoint a person to monitor the implementation of *Too Good* prevention programs?
Results
Results - Demographics

- Gender
  - Male 14%
  - Female 84%

- Age
  - Under 25 (1%)
  - 25-29 (11%)
  - 30-39 (27%)
  - 40-49 (26%)
  - 50-59 (23%)
  - 60+ (9%)

- 67% of respondents were facilitators of Too Good programs.
Highest level of education that you have completed?

- High School Diploma: 3%
- Some College: 9%
- Bachelor's Degree: 40%
- Master's Degree: 46%
- Doctorate or PhD: 2%
Survey Participants

What is your position at the school or community agency where Too Good prevention programs are implemented?

- Teacher - 3%
- Principal - 1%
- Social Worker - 6%
- Prevention specialist - 56%
- School Counselor - 1%
- Law Enforcement - 1%
- Medical Professionals - 3%
- District Administration - 2%
- Director/ Executive Director - 7%
- Community - 3%
- Other - 7%
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Evidence Strength and Quality

• Program effectiveness determination:
  – National Registry (38%)
  – Research reports (25%)
  – State approval list (38%)
  – Colleague recommendation (20%)
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Participant Quote
“The Middle School Revised program is easier to implement due to all materials (games and game components) are created and ready for implementation (games look like store bought games versus teacher created). Being able to adapt the TGFD program to different schools and each school's needs is a benefit for scheduling as a community non-profit organization.”
Peer Pressure

Who influenced you or your school/community agency to purchase or implement *Too Good* prevention programs?

– 15%, School Counselor
– 14%, Supervisor
– 11%, Committee/Coalition/Service Board
– 7%, National Registry (i.e. NREPP, SAMSHA, OASAS)
– 8%, by State Department of Education
– 8%, Evidence Based/Model Program Research

**Intervention Characteristics**

**Outer Setting**

**Inner Setting**

**Characteristics of the individual**

**Process**
## External Policies and Incentives

### Funding Source

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<tr>
<td>Federal grant</td>
<td>26%</td>
</tr>
<tr>
<td>State grant</td>
<td>44%</td>
</tr>
<tr>
<td>District grant</td>
<td>3%</td>
</tr>
<tr>
<td>Parent donations</td>
<td>0%</td>
</tr>
<tr>
<td>Community donations</td>
<td>7%</td>
</tr>
<tr>
<td>Fundraising efforts</td>
<td>5%</td>
</tr>
<tr>
<td>Other</td>
<td>16%</td>
</tr>
<tr>
<td>Not sure</td>
<td>11%</td>
</tr>
<tr>
<td>Internal funding</td>
<td>11%</td>
</tr>
</tbody>
</table>

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### Intervention Characteristics

- Prevention
- United
- Foundation
- Community
- Federal
- Health
- DCF
- Program
- Prevention
- Healthy
- Foundation

### Outer Setting

- vendor
- Warren
- United
- County
- Healthy
- Foundation
- Prevention

### Inner Setting

- KY
- DCF
- Warren
- County
- Healthy
- Foundation
- Prevention

### Characteristics of the individual

- DCF
- Warren
- County
- Healthy
- Foundation
- Prevention

### Process

- Pay
- Advocate
- Purchase
- Purchase
- Advocate
Funding

Participant Quote
Our agency has had a lot of success with the Too Good programs. Kids enjoy them, teachers find it a valuable use of time, and evaluations show a lot of improvement in attitudes and knowledge! We love it and just hope we can continue to have funding to implement the program in various districts across the county!
• 100% of participants either agreed or strongly agreed there is a need for their student population to receive prevention programs
• 90% agreed or strongly agreed *Too Good* prevention programs are compatible with subject area objectives
• 87% agreed or strongly agreed *Too Good* programs are compatible with state standards.
Readiness for implementation: Leadership Engagement & Available Resources

- Data shows that 61% of participants report administrators at the school or community setting are involved in the planning process to implementToo Good programs

- 30% of schools and community settings are not using laptops or desk computers
The majority of participants reported receiving training in *Too Good* Programs.

59%
The majority of participants reported receiving training by a representative from the program developer.

67%
Available Resources

Reasons given for not receiving training

- 26% lack of funding
- 19% were not aware training was available
- 12% didn’t think it was necessary
- 7% had time constraints
### Available Resources

**What additional types of training formats would enhance *Too Good* program training?**

<table>
<thead>
<tr>
<th>Format</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAQ Questions on a Website</td>
<td>38%</td>
</tr>
<tr>
<td>Online Course</td>
<td>53%</td>
</tr>
<tr>
<td>YouTube</td>
<td>51%</td>
</tr>
<tr>
<td>Online Webinar</td>
<td>42%</td>
</tr>
</tbody>
</table>

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**Intervention Characteristics**
- Outer Setting
- Inner Setting
- Characteristics of the individual
- Process

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A majority of participants (85%) report they agree or strongly agree that the Staff at their school or community setting have a favorable attitude toward *Too Good* prevention programs.
Self-efficacy

A majority of participants, 96%, report they agree or strongly agree they have confidence in their ability to fully implement *Too Good* prevention programs.
• 95% of participants agree or strongly agree they are motivated to implement *Too Good* prevention program.
Planning

• The average class size
  – 12-30 students (61%)
  – 6% reported having 31+ students
Reflecting and Evaluating

• School or Agency
  – 63% reported having someone who monitored implementation
  – 80% of those received support and feedback
We are a school district of 24,000 students and have used the "Too Good for Violence" program since 2007 in grades K through 8. It is required that all school counselors teach the curriculum during the school year along with the other requirements of the guidance curriculum. The student surveys are used as a pre and post assessment. The results are monitored and shared as outcome data during our district program evaluation process, along with other district data.
Conclusion

• Contributes to the field of implementation science
• Limitations in translating research to real-world practice contribute to low levels of program implementation
• Need for additional implementation research using the CFIR or other implementation theory
  • External Validity
  • Improve positive outcomes for adolescents
Conclusion

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• Need for additional implementation research using the CFIR or other implementation theory
  • External Validity
  • Improve positive outcomes for adolescents
Implications for Policy

• Funding and other support for implementation research is needed.

• Promote theoretical-guided evaluation of implementation of evidence based programs.

• Community funding entities should incorporate policies to promote theory guided evaluation of implementation of evidence based programs.
Implications for Practice

• Facilitator Profiles
• Enhanced Trainings
• Implementation Support Blog
Implications for Research

• Consolidated Framework for Implementation Research (CFIR) – Guide evaluations prior to, during, and after implementation

• Findings from this study will help to inform the next stages of research including qualitative semi-structured interviews.
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References


