



Toppenish Police Department, Yakima County Washington State Incentive Grant 2nd Year Community-Level Evaluation 2000-2001

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Health Services*

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Executive Summary

Toppenish Police Department in Yakima County is one of eighteen recipients of the Washington State Incentive Grant (SIG). SIG funds are allocated to communities to prevent the use, misuse and abuse of alcohol, tobacco, marijuana and other drugs by Washington State youth. Community grantees are expected to make their local prevention system more effective by establishing prevention partnerships, using a risk and protective factor framework for data driven needs assessments, and by implementing and monitoring science-based prevention programs. Toppenish's second year experiences with SIG are reported here.

Progress toward SIG Community Level Objectives

Toppenish is a small town with a population of 7,940 in eastern Yakima County, located on the Yakima Indian Nation Reservation. It experienced a rapid cultural shift from a majority white population in the 1980s to a majority Hispanic population during the 1990s. Part of the only federally designated Northwest High Intensity Drug Trafficking Area (HIDTA) in eastern Washington, Toppenish experiences easy availability of drugs and drug arrest rates are more than four times the state average for ages 10-17.

Objective 1: *To establish partnerships...to collaborate at the local level to prevent alcohol, tobacco, marijuana, and other drug use, misuse, and abuse by youth.*

An unusual feature of the Toppenish SIG site, among the 18 community grantees, is its Safe Haven building where prevention programs are provided, along with recreation opportunities, computer lab, the SHOP school, and offices for several social service agencies. Renovating the old building required partnerships among the city administration, the police department, Fort Simcoe vocational training program, and the jail, as inmates who had been jailed due to the inability to pay fines were paid to assist in the renovation.

Objective 2: *To use a risk and protective factor framework to develop a community prevention action plan...
and...*

Objective 3: *To participate in joint community risk and protective factor and resource assessment...*

Specific parties in the Toppenish area use the risk and protective factor framework, including grant writers, the school district administration, and prevention professionals. However, the framework has been neither widely taught nor used by the remainder of the prevention community in Toppenish

Community problems and needs are assessed from numerical data, including the school survey and police and school records, and from the impressions of community members who witness the problems daily, such as police officers, schoolteachers and administrators, and prevention professionals. Toppenish performed a formal needs and resource assessment for grant purposes, including SIG and Weed and Seed. Local prevention partners did not participate in the SIG-sponsored collaborative needs assessment at the county level in spring 2001.

Objective 4: *To select and implement effective prevention actions...*

The SIG process encouraged the choice of programs shown through published research to be effective in different locales and with multiple populations. These are known as research-based programs. The programs that the Toppenish community selected to address their prioritized risk and protective factors include the following:

- Tutoring
- Home visiting
- Mentoring
- Parent training: *Los Bien Educados*
- Parent training: Strengthening Multi-Ethnic Families and Communities
- Safe Haven Recreation Infrastructure

Tutoring, Home visiting, Mentoring, and Strengthening Multi-Ethnic Families and Communities are research-based programs. *Los Bien Educados* and the recreation programs are promising approaches, that is, they have not yet been proven effective across different settings with multiple populations.

Objective 5: *To use common reporting tools...*

Common reporting tools include the Washington State Survey of Adolescent Health Behaviors (WSSAHB) and the Everest program monitoring outcome system. WSSAHB data provide cross-sectional substance abuse prevalence rates and measures of risk and protective factors among 6th, 8th, 10th, and 12th grade students. Everest program outcome data provides feedback on the progress of program participants toward reduced risk or enhanced protection.

Toppenish School District participates in the WSSAHB, as required by the grant. Everest pre- and post-tests were collected on program participants in Tutoring, recreation programs, Strengthening Multi-Ethnic Families, and Los Bien Educados.

Conclusion

These are the three key achievements in Toppenish under the SIG project:

1. The creation of a prevention infrastructure, including the Safe Haven program, that qualified Toppenish for a Weed and Seed grant from the federal Office of Juvenile Justice and Delinquency Prevention.
2. The implementation of research-based prevention programs and outcome monitoring.
3. The creation of linkages between various social services, accomplished by housing them in one location, the Safe Haven building.

The Toppenish SIG project has made progress toward achieving the community level objectives as established by the Governor's Substance Abuse Prevention Advisory Committee. During the last year of SIG community funding, Toppenish intends to develop methods to maintain some of the changes achieved in the system of prevention planning, funding, implementation, and monitoring that they developed under SIG.

Toppenish Police Department, Yakima County Year 2 Community Level Evaluation

The Washington State Incentive Grant

Toppenish Police Department in Yakima County is one of eighteen recipients of the Washington State Incentive Grant. The federal grant consists of a three year, \$8.9 million award from the Center for Substance Abuse Prevention to Washington State through a cooperative agreement with Governor Gary Locke's office. State agencies participating in SIG are committed to coordinating resources and reducing duplication of effort. Eighty-five percent of State Incentive Grant (SIG) funds are allocated to communities to prevent the use, misuse, and abuse, of alcohol, tobacco, marijuana, and other drugs by Washington State youth. In their efforts to reduce youth substance use, misuse, and abuse, it is expected that communities will reduce key risk factors and promote protective factors.

The goals and objectives of the *Washington State Incentive Grant Substance Abuse Plan* are listed in Appendix A.¹ They are summarized here:

Goals:

1. Prevent alcohol, tobacco, marijuana and other drug use, misuse and abuse by the state's youth.
2. Make the community level system more effective.

Objectives:

1. Establish local prevention partnerships.
2. Use a risk and protective factor framework to develop a community prevention action plan.
3. Participate in joint community risk and protective factor and resource assessment.
4. Select and implement effective prevention actions.
5. Use common reporting tools.

Introduction

The SIG evaluation is intended to provide feedback to state agencies and communities on their progress toward the goals and objectives stated in the Washington State Incentive Grant Substance Abuse Plan. Evaluation reports are

¹ Governor's Substance Abuse Prevention Advisory Committee (1999). *Washington State Incentive Grant Substance Abuse Prevention Plan*. Olympia, WA: Department of Social and Health Services, Division of Alcohol and Substance Abuse, State Incentive Grant Project.

provided as an integral part of that feedback. Research methods are described in Appendix B.

This report documents SIG-related activities for the second project year of the Toppenish Police Department. It summarizes progress made toward achieving the community-level goals and objectives of the Washington State Incentive Grant. The report describes the ongoing challenges and successes in providing substance abuse prevention services for youth. It also reports the substance abuse prevention funding and planning necessary to implement one prevention program in Toppenish.

Information used in this second evaluation report came from face-to-face and telephone interviews, review of written reports, meeting minutes and data collected from survey instruments. Data was collected on funding sources and planning processes. A program implementation survey was conducted for the Mentoring program to determine the extent to which programs had to be adapted for the local clientele.

Background

Prior to SIG, prevention services were primarily provided through the Toppenish School District in conjunction with Merit Resource Services, an outpatient treatment and prevention service, and the Toppenish Police Department. Substance abuse prevention has been addressed by Intervention and Prevention Specialists and Student Resource Officers (SROs), and is included in the work of Toppenish High School's Peer Health Experts and Peer Counselors. Parenting classes that include substance abuse prevention education have been taught by the Yakima Valley Farm Workers Clinic in Toppenish and by the Central Washington Comprehensive Mental Health Program in Yakima. Although each segment of Toppenish's prevention services has been well planned, what was lacking before SIG was the coordinated, city wide planning, provision, and program effectiveness monitoring of substance abuse prevention services.

The most visible evidence of Toppenish's progress is the Safe Haven building, acquired and remodeled using city funds. SIG provides maintenance and operating funds for the building, which has room for several social service offices. Social services located within Safe Haven have gained improved access to each other for purposes of service coordination and referrals. The office space provided by Safe Haven attracted several new service agencies to town. In addition to formal social services, Safe Haven provides a safe and drug-free place for children after school and space for computer and recreation classes.

Safe Haven helped the city qualify for designation as a United States Department of Justice Weed and Seed site. This designation made the city eligible to apply for funding from several other sources. Thus, Toppenish used the State Incentive

Grant to leverage funds, that is, to create eligibility and apply for additional funding based on previous awards and achievements.

Progress Toward Community-Level Objectives

Progress made by the Toppenish prevention community toward the five community level objectives established by the Governor's Substance Abuse Prevention Advisory Committee is described below.

Objective 1: To establish partnerships which include existing agencies and organizations, and families, youth, schools, and workplaces to collaborate at the local level to prevent alcohol tobacco, marijuana, and other drug use, misuse, and abuse by youth.

An unusual feature of the Toppenish SIG site, among the 18 community grantees, is its Safe Haven building where prevention programs are provided, along with recreation opportunities, computer lab, the SHOP school, and offices for several social service agencies. Renovating the old building required partnerships among the city administration, the police department, Fort Simcoe vocational training program, and the jail, as inmates who had been jailed due to the inability to pay fines were paid to assist in the renovation.

Toppenish service providers realize that the requirement for community partnerships is becoming a common one across all types of grants and are developing boards and committees that will serve multiple purposes. The formal SIG advisory board is a sub-committee of the Weed and Seed Steering Committee, as SIG addresses substance abuse prevention, which is a one of the Weed and Seed strategies of community improvement. Plans are to include a Safe Haven representative on the Community Accountability Board, which assigns community service to young, first-time offenders in lieu of jail. The Safe Haven representative would provide information about services and activities available through Safe Haven, including tutoring for offenders and parenting classes for their parents.

SIG partnerships build on those previously established, such as the Readiness to Learn program. Established in Toppenish over eight years ago, it has 65 partners, including Catholic Family Services, Department of Social and Health Services, Child Protective Services, and the Salvation Army, available to provide services for children.

New partnerships have been developed as a result of SIG. For example, volunteer staff at Safe Haven is provided through work-study programs, Welfare-to-Work, and Heritage College. Businesses also contribute to Safe Haven. A makeover program for mothers and daughters was provided by a local beauty salon. This activity brought in mothers who had not previously been inside of Safe Haven. It was reported in the Yakima Herald newspaper and on the weekly television show, "Focus on Women." A Wapato apple grower donates apples for after school

snacks at Safe Haven, and a local vending machine company donates leftover snack packages.

An example of partnering between the schools and Safe Haven is the mentoring program, which received assistance from the schools in recruiting mentors. The high school assistant principal and counselors handed out bulletins about the program. Counselors screened the mentors, helped them complete the application, and performed the reference check.

Objective 2: To use a risk and protective factor framework to develop a community prevention action plan which reduces factors which put youth at risk for alcohol, tobacco, marijuana, and other drug abuse and increase factors which protect or buffer youth from these risks.

and...

Objective 3: To participate in joint community risk and protective factor and resource assessment by collecting, assessing, and prioritizing community-level information for: a) youth alcohol, tobacco, marijuana, and other drug use, misuse, and abuse; b) risk and protective factor indicators; and c) existing resources and service gaps.

SIG sites used the risk and protective factor model in planning their prevention approaches. This model, developed by David Hawkins, Richard Catalano, and others at the University of Washington, categorizes influences that either increase the likelihood that a child will someday abuse substances or that help lessen the impact of those risks. Influences that increase the likelihood of substance abuse are known as risk factors; those that lessen the impact of risk factors are known as protective factors. Groups of risk and protective factors are categorized into domains of influence: community, school, family, and peer/individual. See Appendix C for a list of risk factors and protective factors, categorized by domain. Factors addressed by the Toppenish SIG project are italicized within the list.

SIG helped increase awareness of the risk and protective factor framework among Toppenish prevention providers, the schools, and city administrators. Examples of data sets that were used in planning are local demographic reports, county profiles, juvenile justice reports, police and school records, and the Washington State Survey of Adolescent Health Behavior. Other information used includes the impressions of community members who witness the problems daily, such as police officers, schoolteachers and administrators, and prevention professionals. Toppenish performed a formal needs and resource assessment for grant purposes, including SIG and Weed and Seed. Local prevention partners did not participate in the SIG-sponsored collaborative needs assessment at the county level in spring 2001. Local, professional grant writers, well-versed in the concepts of prevention, such as risk and protective factors, play a key role in Toppenish's success in receiving funding.

Objective 4: To select and implement effective prevention actions that address priority risk and protective factors in the community by filling identified gaps in resources.

One of the key achievements of the Toppenish SIG project is the introduction of research-based prevention programs to the area. Prevention programs can be categorized by a rigor scale created by the federal Center for Substance Abuse Prevention. Rigor is the extent to which the program has been shown through scientific research to be effective in different locales and with multiple populations. The highest rating is rigor 5; the lowest is rigor 1. Programs ranked as rigor 5 have been shown effective and replicable across venues and populations in published, refereed research journals or in a meta-analysis.² Recipients of SIG grants are expected to deploy at least half of their efforts in research-based programs, also referred to as best practices. Three of Toppenish's programs are research-based: Tutoring, Home visiting, Mentoring, and Strengthening Multi-Ethnic Families and Communities. They are ranked as rigor levels 4 or 5. The two remaining programs, *Los Bien Educados* and the Safe Haven recreation programs are ranked as rigor 1 or 2.

Central Washington Comprehensive Mental Health provides the Strengthening Multi-Ethnic Families and Communities program. While they have provided the program in the Yakima Valley for some years, recruiting parents to participate in the three-hour classes for ten to twelve weeks has been difficult. Yet those who participate reportedly receive great benefit from the program. Toppenish's SIG project has provided a way to increase recruitment for the program through their Home Visitor, a well-known, longstanding member of the community who is bilingual in Spanish and English. She is now trained to teach both the Strengthening Families and *Los Bien Educados* parenting programs. Because she is local, she can provide follow-up with parents beyond the end of the classes and is often contacted informally, in addition to formal home visits.

Los Bien Educados is a Spanish-language parenting program taught by the Northwest Community Action Center, a division of the Yakima Valley Farm Workers' Clinic. SIG provided an opportunity for the program providers to collect program outcome data as part of the research process required to gain a higher-level rigor rating for the program.

The Mentoring program was contracted with a new provider, Northwest Community Action Center, during 2000-2001. The change in providers left a gap in recruitment, but toward the end of the year, the numbers of students served picked up to about two-thirds of that expected. The director of Project Gear-Up, a college exploratory program for under-served youth, is in charge of the mentoring program, another example of prevention partnering.

² A meta-analysis is an examination of a number of published research articles about the same subject. Findings from these articles are compared and sometimes combined to enable drawing conclusions that individual research articles did not warrant when examined independently.

Toppenish high school students receive pay for their services as tutors in the Tutoring program. They work with elementary school youth who are unable to complete classroom assignments alone or who need additional help with basic skills such as reading, writing, or arithmetic.

The content of recreation programs at the Safe Haven building depend on the skills and interests of volunteers. Safe Haven staff recruit community members and local businesses to provide programs.

Objective 5: To use common reporting tools which provide information on what works and what does not work to reduce youth alcohol, tobacco, marijuana, and other drug use, misuse, and abuse.

Common reporting tools include the Washington State Survey of Adolescent Health Behavior and the Everest program outcome monitoring system. These tools are explained in the following paragraphs.

The Washington State Survey of Adolescent Health Behaviors, also referred to as the school survey, is administered every two years in a representative sample of schools across the state. It is available to any other schools that are interested as well, at no cost. Funding for the survey is provided through tobacco settlement funds administered by the Department of Health. Washington State Survey of Adolescent Health Behaviors data provide cross-sectional substance abuse prevalence rates and measures of risk and protective factors among 6th, 8th, 10th, and 12th grade students.

Schools associated with SIG community grantees were required to participate in the survey, which the Toppenish School District did. Survey results, in the risk and protective factor format, have been used as justification for hiring two additional prevention and intervention counselors.

Everest is a web-based, prevention program outcome monitoring system developed for SIG by the Division of Alcohol and Substance Abuse. SIG community grantees have pilot tested Everest. The database design is based on findings from several prevention research studies in which Division of Alcohol and Substance Abuse has participated. It allows SIG grantees and providers to print out tests to be used as pre-tests and post-tests for measuring program outcomes. After administering the tests, answers for each question are entered by local staff over the web. Test results are immediately available to the community grantee and the program provider. Everest contains no identified data. Questionnaire responses are linked by a confidential code for each participant. This means that anyone reviewing the data in Everest would be unable to identify the answers that a particular person chose.

Everest pre- and post-tests were used with Tutoring, Strengthening Multi-Ethnic Families and Communities, *Los Bien Educados*, and the recreation programs.

Program Implementation Fidelity Survey Results

As part of the evaluation, one program in each SIG community was used to pilot a program fidelity survey known as the Program Implementation Survey (see Appendix E). Program implementation fidelity refers to how closely program providers in a local community follow the original design of the prevention program.³

The purpose of our inquiry into implementation fidelity was the development of a tool that can be used by local and state researchers to provide self-reported fidelity.⁴ Evaluators want to know if pre-test/post-test results were due to the program as it was designed, or were the results of a program unique to the site. The survey tells evaluation staff and local SIG providers and staff what they tested with Everest: the program named in their matrix or some variation of that program. The fidelity survey also gives local SIG providers and staff a comprehensive record of what was changed. When combined with Everest results, the survey can help determine two things:

1. If Everest results were positive, should this program be used again as it was administered this time?
2. If Everest results were mediocre or negative, should this program be modified, further modified, or abandoned for a different program?

Evaluators wanted to know from the survey if the results we were seeing from pre-test/post-test results were due to the program as it was designed, or were the results due to a program characteristic unique to the program site?⁵ The fidelity survey also gave local SIG providers and staff a comprehensive record of what was changed.

The Tutoring program was chosen for the program implementation survey in Oak Harbor. Staff concluded that program fidelity was high. There were no changes made to the delivery or content of the program. Everest pre-test/post-test data was collected. Also, the delivery of services was increased from one session a week to two sessions a week, which accommodated the minimal number of weeks in a school quarter.

³ King, Jean A., Morris, Lynn L., and Fitz-Gibbon, Carol T. 1978. *How to Assess Program Implementation*. Newbury Park, CA: Sage.

⁴ Goodman, Robert M. 2000. Bridging the gap in effective program implementation: from concept to application. *Journal of Community Psychology*. 28(3): 309-321.

⁵ *Program Implementation Survey*. Washington State Incentive Grant Evaluation Team, September 2000.

Conclusion

These are the three key achievements in Toppenish under the SIG project:

1. The creation of a prevention infrastructure, including the Safe Haven program that qualified Toppenish for a Weed and Seed grant from the federal Office of Juvenile Justice and Delinquency Prevention.
2. The implementation of research-based prevention programs and outcome monitoring.
3. The creation of linkages between various social services, accomplished by housing them in one location, the Safe Haven building.

SIG helped to formalize some aspects of the prevention system already in place in Toppenish and increased awareness of the risk and protective factor model among members of the local prevention community. Toppenish took the prevention model provided by SIG and integrated its own needs, such as providing Spanish-language parenting classes and hiring a bi-lingual Home Visitor.

The Toppenish SIG project has made progress toward achieving the community level objectives as established by the Governor's Substance Abuse Prevention Advisory Committee. During the last year of SIG community funding, Toppenish intends to develop methods to maintain some of the changes achieved in the system of prevention planning, funding, implementation, and monitoring that they developed under SIG.

Appendix A:

Community-Level Goals and Objectives⁶

Goal:

Communities selected to receive State Incentive Grant funds will work to prevent alcohol, tobacco, marijuana, and other drug use, misuse, and abuse by the state's youth in these communities. They will develop and implement prevention plans, which will foster changes in the prevention system at the community level to make the system more effective.

Objectives:

1. To *establish partnerships* which include existing agencies and organizations, and families, youth, school, and workplaces to collaborate at the local level to prevent alcohol, tobacco, marijuana, and other drug use, misuse, and abuse by youth.
2. To *use a risk and protective factor framework* to develop a community prevention action plan which reduces factors which put youth at risk for alcohol, tobacco, marijuana, and other drug abuse and increase factors which protect or buffer youth from these risks.
3. To *select and implement effective prevention actions* that address priority risk and protective factors in the community by filling identified gaps in resources.
4. To *participate in joint community risk and protective factor and resource assessment* by collecting, assessing, and prioritizing community-level information for: (a) youth alcohol, tobacco, marijuana, and other drug use, misuse, and abuse; (b) risk and protective factor indicators; and (c) existing resources and service gaps.
5. To use common reporting tools which provide information on what works and what does not work to reduce youth alcohol, tobacco, marijuana, and other drug use, misuse, and abuse.

⁶ Governor's Substance Abuse Prevention Advisory Committee (1999). *Washington State Incentive Grant Substance Abuse Prevention Plan*. Olympia, WA: Department of Social and Health Services, Division of Alcohol and Substance Abuse, State Incentive Grant Project.

Appendix B: Methods

Information Sources

Interviews:

Interviews were conducted with lead agency contacts, as well as prevention service providers and school district employees. If audio-taped interviews were conducted, interviewees were informed at the beginning of each interview that the audiotapes were confidential, were for the purpose of ensuring accuracy and would be erased as soon as notes were taken from them. Questions were based on an interview guide, as well as related topics that arose during the interviews. Interview guides were modified after initial site visits, based on the interviewer's ability to obtain the desired information from the questions asked.

Survey:

Program Implementation Fidelity Survey was completed on the Tutoring curriculum.

Meeting observation:

Evaluator attended two meetings of the Weed and Seed Advisory Board and one Toppenish City Council meeting. The local site visit of the Governor's Substance Abuse Prevention Advisory Committee was also observed.

Document Review:

- a. Local Progress Reports from Safe Haven staff and local SIG administrative staff.
- b. Matrices:
Prevention programs intended to address desired outcomes and associated risk and protective factors are described in detail in Community-Based Prevention Action Plan Implementation Matrix, created by SIG state project staff. Matrices were used to guide inquiry into the process of achieving anticipated local outcomes.
- c. Local documents:
 - Advisory Board meeting minutes
 - Local correspondence

Analysis

Data analysis occurs throughout the research process in a case study, from the process of formulating the topic through the write-up. During and after interviews, information gathered is weighed in light of previous information. Questions and topics are modified as indicated by the new information. Data verification occurs through cross checking information from informants with that from other informants, documents, observation, and the researcher's journal entries.

Data analysis in a case study occurs by creating categories of information, broad at first, then becoming more specific. As familiarity with the study topic occurs, categories are related to one another and to theory. CSAP and COSMOS Corporation created broad data categories, around which interview questions and inquiry topics were framed. Data were gathered in the process of this evaluation with the intent of answering specific questions about system change in planning, providing, and evaluating prevention services for youth in local communities. Additional categories were included as it became apparent that they were of importance to the SIG community grantees.

Appendix C: Risk and Protective Factors, Categorized by Domain⁷

Note: Risk and protective factors addressed by the Toppenish SIG project are italicized.

Domains	Risk Factors	Protective Factors
Community	Availability of drugs Community laws and norms favorable to drug use Transitions and mobility <i>Low neighborhood attachment and community disorganization</i> Extreme economic deprivation	Opportunities for prosocial involvement Rewards for prosocial involvement
Family	Family history of the problem behavior <i>Family management problems</i> Family conflict <i>Favorable parental attitudes and involvement in the problem behavior</i>	<i>Bonding: family attachment</i> <i>Opportunities for prosocial involvement</i> <i>Rewards for prosocial involvement</i>
School	<i>Early and persistent antisocial behavior</i> <i>Academic failure</i> <i>Lack of commitment to school</i>	<i>Bonding: attachment to school</i> Opportunities for prosocial involvement Rewards for prosocial involvement
Individual	Rebelliousness <i>Friends who engage in the problem behavior</i> Favorable attitudes towards the problem behavior Early initiation of the problem behavior Constitutional factors	<i>Healthy beliefs and clear standards</i> Bonding: attachment to prosocial peers <i>Social skills</i>

⁷ Modified from *A Guide to the Community Substance Abuse Prevention Projects*. December 2000. Governor's Substance Abuse Prevention Advisory Committee. Available from State Incentive Grant Project, Division of Alcohol and Substance Abuse, Department of Social and Health Services, PO Box 45331, Olympia, WA 98504-5331 (ph: 360 438-8065) or Washington State Alcohol/Drug Clearinghouse (ph: 800 662-9111 in-state; 206 725-9696 Seattle or out of state).

Date _____ Site _____ Program Service _____

Rigor Level _____ Beginning Date of Program Service _____ Ending Date of Program Service _____

Name of person supplying information _____

Appendix E:

Program Implementation Survey

The purpose of this survey is to determine what was measured by the pre-test/post-test associated with your program: was it the program as originally designed and tested, or was it some variation on that program? If program modifications were made, test results may differ from those that would be expected if the program were implemented as originally designed, with the intended target population, taught by a trained instructor. Records of program implementation practices, reviewed in conjunction with program effectiveness measures, can inform future prevention planning. If possible, this form should be completed by the person providing prevention program services.

1. Did this prevention program differ from the original design?

Program Characteristic	Yes	No	Description of change	General reason for change (check one)		Notes on specific reason(s) for change
				Necessity	Program improvement	
1) Number of sessions						
2) Length of sessions						
3) Content of sessions						
4) Order of sessions						
5) Use of materials or handouts						

Program Characteristic	Yes	No	Description of change	General reason for change		Notes on specific reason for change
				Necessity	Program improvement	
6) General location (e.g., at community center instead of school)						
7) Intended population (age, language, level of risk, maturity)						
8) Number of participants						
9) Instructor training						
10) Instructor/student ratio						
11) Anything else?						

2. If this is a Best Practices or science-based program (rigor 5), did you receive guidance from either the program’s designer or from WestCAPT in making changes? ____ Yes ____ No ____ Not applicable
 Is this still considered a best practice (in the opinion of the designer/WestCAPT) after you made these changes? ____ Yes ____ No



3. Instructor training and experience
 - a. Did you receive training for this program? Yes No
 - b. How many years of experience do you have providing substance abuse prevention services?
 <1 1-3 4 or more
 - c. How many years of experience providing social services or teaching, outside of prevention services?
 <1 1-3 4 or more
4. What was your observation of participants' engagement with the program?
 Mostly engaged Neutral Less than fascinated
5. What was your response to the program?
 Enjoyable Neutral Tedious
6. Would you use this program again, given the opportunity?
 Probably Maybe Unlikely
7. What shaped your opinion about whether or not you would use this program again, given the opportunity? Please select all that apply.

<input type="checkbox"/>	Pre-test/post-test results
<input type="checkbox"/>	Participants' or your own reactions to the program
<input type="checkbox"/>	Other measures (school grades, behavioral responses)
<input type="checkbox"/>	Response from parents, school staff, other community members
<input type="checkbox"/>	Discussion with other prevention professionals
<input type="checkbox"/>	Anything else? Please list:

Please note: Development of this form grew out of the book, *How to Assess Program Implementation*, by Jean A. King, Lynn Lyons Morris, and Carol Taylor Fitz-Gibbon, published in 1978 by Sage, Newbury Park, California.
 Created by the Washington State Incentive Grant Evaluation Team, September 2000: Christine Roberts, Ray Mitchell, Kojay Pan, Anne Strode, and Linda Weaver, University of Washington, Washington Institute of Mental Illness Research and Training/Western Branch. Developed under the guidance of the Department of Social and Health Services, Research and Data Analysis Division for the Department of Social and Health Services, Division of Alcohol and Substance Abuse.