



Steps to Success Frequently Asked Questions (FAQ's) Updated 9-2-2015

PROJECT OVERVIEW

What is the Steps to Success Project?

The Steps to Success Project is a unique partnership between the Montbello community, faculty researchers from the University of Colorado (CU) Boulder and the CU School of Medicine/Children's Hospital to promote positive youth development and reduce youth violence in Montbello through a coordinated community-wide effort. The project is funded by a five-year (2011-2016) \$5.4 million cooperative agreement from the Centers for Disease Control and Prevention's National Centers of Excellence in Youth Violence Prevention (YVPC).

Steps to Success is directed by a Key Leader Advisory Board and Community Board consisting of community leaders and partner organizations. These Boards make decisions – based on data – about the strategy and programming that best meet the needs of the community. After reviewing school and community survey data and prioritizing Montbello's risk and protective factors, the Boards reviewed community resources to identify gaps and areas of promise that can be leveraged and enhanced. They then selected from a menu of evidence-based programs that impacted Montbello's top risk factors and protective factors related to violence and other problem behaviors. The project aims to embed these programs and strategies into an on-going community delivery system through both governmental and nongovernmental organizations so that Montbello may continue to benefit from the programs long after the five years of funding.

How did you pick Montbello?

Montbello was selected after a number of steps. The Center for the Study and Prevention of Violence (CSPV) at CU Boulder discussed the project with then Mayor Hickenlooper, who directed us to the work with the Denver Crime Prevention and Control Commission (CPCC). CPCC helped us obtain Denver crime and violence data and a special "cluster" analysis identified 7 communities which were very much alike. The "cluster" analysis showed Montbello and Northeast Park Hill were a match on various social characteristics (e.g., percent minority, percent free and reduced lunch and crime rates). Next, we met several times with community stakeholders who helped us understand the local infrastructure that would be available to manage the project. Montbello, given the data, infrastructure and dynamics surrounding youth violence, was selected as the target neighborhood for implementation of a comprehensive strategy to prevent youth violence. Northeast Park Hill was selected as the comparison community.

Aren't we already doing this kind of project in Montbello?

This project has never been done in Montbello before and is very different from other projects in two ways. First, we use scientific objective methods for collecting useful risk and protective factor data which predict

violence and other problem behaviors such as school drop-out, substance abuse, delinquency, teen pregnancy and depression and anxiety. Second, this is truly a community-driven approach. Using the objective data to identify priorities, the community selected the evidence-based programs that were implemented in Montbello.

Tell me what this project will do?

This project looks at scientifically collected experiences and opinions of Montbello residents, sorts out the most serious risk factors and protective factors, and works in partnership with the community to recommend and implement evidence-based programs that can reduce the high risk factors and strengthen the less effective protective factors, thereby reducing youth involvement in violent behavior in Montbello.

THE COMMUNITIES THAT CARE MODEL

Why are you using the Communities That Care model for Steps to Success?

In the Montbello Steps to Success project, we are using the Communities that Care Model (CTC) as the framework for our comprehensive approach to promote positive youth development and reduce youth violence and other problem behaviors. There are many benefits to using Communities That Care (Hawkins, Catalano and Kuklinski, 2011) – including encouraging local control, building community capacity and positively impacting risk factors, specifically:

- Local control
 - The community determines which risk factors to prioritize.
 - The community chooses which evidence-based programs to implement to address their top concerns.
- Community capacity
 - Data based decision making
 - Community organization
- Proven impact
 - Delinquency (62% vs. 70%)
 - Alcohol use (67% vs. 75%)
 - Cigarette smoking (44% vs. 52%)

What did prior Communities That Care communities do to get good results?

Success strategies included:

- Implementing the Communities that Care model with fidelity
- Prioritizing 2-5 risk factors to be targeted by tested and effective prevention programs
- Receiving up to \$75,000 per year for evidence-based programs (on average communities selected 2.75 programs)
- Hiring a full-time site coordinator
- Training communities with a certified Communities That Care trainer

The Steps to Success project in Montbello was designed to implement the Communities That Care model with fidelity. The Community Board Risk and Protective Factor Work Group prioritized 3 risk factors and 2 protective factors to be targeted, we have a full-time site coordinator, Shelli Brown, and trainings have been implemented by a certified Communities That Care trainer. By following the model of this tested effective intervention, these (or better) are the kind of results we should expect for Montbello.

COMMUNITY SURVEY

What are risk and protective factors?

There are risk and protective factors for heart disease, cancer, diabetes, and many other diseases. For example, risk factors for heart disease include tobacco use, obesity, High LDL cholesterol, and physical inactivity. Likewise, there are also risk factors for youth violence. For example, substance use before age 12, family conflict, academic failure in late elementary school, and anti-social peers are risk factors for youth violence. Research over the past 20 years has also identified protective factors for both heart disease and youth violence. Some protective factors for heart disease include exercise, sound diet, high HDL cholesterol, and stress management. Protective factors for youth violence include family attachment, school opportunities for pro-social attachment, good social skills, and school recognition of pro-social involvement. The Steps to Success Community Board prioritized 3 risk factors and 2 protective factors to be targeted by tested and effective prevention programs.

What is the purpose of surveying the community?

The initial baseline community survey conducted in 2012-13 provided Montbello and Northeast Park Hill with information about their specific risk and protective factors. This helped each community make truly informed decisions that respond to their neighborhood's unique needs. In Montbello, the Community and Key Leader Advisory Boards used this data to set priorities and define key areas of action to address those priorities. Dave Bechhoefer, Co-Chair of the Steps to Success Community Board and Executive Director of the Families Forward Resource Center in Montbello explains, "This information is so helpful to our community. We have limited resources in terms of time, people and money and this community data has helped us use our scarce resources in the best possible way."

We are now surveying Montbello and Northeast Park Hill again (Fall 2015) to evaluate the impact of the Steps to Success project. By having both baseline and outcome data, we can study whether the Steps to Success activities resulted in a change in the levels of violence and other problem behavior and/or changed the levels of risk and protective factors within Montbello, especially in comparison to such changes in the comparison neighborhood.

Haven't we already collected community data in Montbello?

Montbello has never collected risk and protective factor information in a structured scientifically valid way. Some of the best researchers in the nation are overseeing the data collection process in Montbello to ensure it collects valid measures and accurately represents the community.

How many households are being sampled in the community survey?

We plan to screen approximately 2,300 households in Montbello and 2,800 in Northeast Park Hill to determine if they are eligible to participate in the survey. All 10-17 year-old youth residing in a selected household are eligible to participate in the survey, so there is no selection, beyond the age requirement, of the youth survey respondents. Upon determining that eligible respondents (youth aged 10-17) live in a selected household, the interviewers will schedule and conduct interviews with all the eligible 10-17 year-old residents and one of their parents who reside in that household. We expect to survey approximately 500 youth and 380 parents in each community.

Will there be research articles coming out about this project?

Yes, there will be publications about this work, which will focus on lessons learned that could help other communities reduce youth violence and promote healthy youth development. However, research articles are not the project's primary purpose. The primary purpose of this project is to engage in a

partnership with the Montbello community to reduce youth violence and promote healthy youth development.

EVIDENCE-BASED PROGRAMS

I know someone who has just started a program to address youth violence, why can't we just give him money to build his program?

While that program may be well-deserving, this cooperative agreement with the Centers for Disease Control and Prevention (CDC) requires us to use well-documented effective programs on nationally recognized lists that have been approved by their office. However, there are several options for the program. First, it can be evaluated using the standards established by CDC and if it is demonstrated effective, added to the CDC approved list. Second, it may be that the program manager would be interested in one of the well documented effective programs to implement as an adjunct to work already in progress. Third, it may be that the program already has been evaluated and that information can be submitted to the University of Colorado for possible inclusion in their Blueprints for Violence Prevention project. Blueprints' standards for certifying model and promising programs are widely recognized as the most rigorous in use.

What is an evidence-based program?

An evidence-based program is a program that has been carefully evaluated and has proven to be effective. The best level of proof is a randomized control trial (RCT). In medicine, RCTs are always done before a drug is released to the public. It is the highest standard. Without it in medicine, "snake oil" would still be in use. Without it in violence prevention, we might actually cause more crime. The perfect example of violence "snake oil" is Scared Straight. Before several RCT's were done everyone thought Scared Straight was the perfect violence prevention program. After RCTs we found in many cases that it increased the crime of the juveniles who went through it. See the following site for examples of good programs with proven effectiveness: www.blueprintsprograms.com.

How much does it cost to become an evidence-based model program?

Approximately \$350,000-\$500,000. It is possible to get on many of the evidence-based lists including the Blueprints Promising Program list with a rigorous quasi-experimental or randomized study – some of these may have lower costs.

FUNDING AND SUSTAINABILITY FOR STEPS TO SUCCESS

What is the grant award amount and how are the grant funds allocated?

The original award was for \$6.5 million dollars over five years (\$1.3 million per year). In Year 2 (9/30/12 to 9/29/13), the CDC award was scaled back by 20% from \$1.3 million to \$1,040,000 because of cuts in CDC's budget. This budget reduction continued throughout the entire grant award period. The YVPC Team worked in partnership with CDC to ensure that the budget cuts would not impact direct program funding to the community.

Direct Program Costs. CDC's YVPC Program requires that an academic institution partner with a high-risk community to implement comprehensive strategies to prevent violence and promote positive youth development. These strategies must rely on the best evidence about effective violence prevention programs and measure the effect of the comprehensive prevention strategies on youth violence in the community.

In the Montbello Steps to Success project, we are using the Communities that Care Model as the framework for our comprehensive approach. We are using the CDC grant dollars to support the full implementation of the Communities that Care model. This includes:

- Data collection (community and school surveys)
- Training and technical assistance in the Communities That Care approach
- Formation of Community Board and Key Leader Advisory Board
- Developing a Community Action Plan
- Selection and implementation of tested and effective programs to address the priority risk factors.
- Approximately \$100,000 per year will be allocated to the Montbello community for implementation of evidence-based programs. The programs funded must be on an approved list of evidence-based model programs.

Indirect Costs. CU Boulder has an indirect cost rate of 52.5% that is applied only to direct costs and the first \$25,000 of any subcontract. The indirect cost rate actually ends up being about 1/3 of the budget allocation when applied according to the University procedures.

Is it possible that the Steps to Success program and funding will be able to help leverage other funding for Montbello?

Yes, this is exactly the intent of the Communities That Care process. Many of the sites participating in the Communities That Care randomized study launched their prevention coalitions and have maintained the quality of prevention services (at the time of the last review this was over 5 years). For example, a Communities That Care site in Massachusetts has recently been recognized for their collective impact work on addressing teenage drinking and drug use. Over an 8-year period, their work has reduced binge drinking by 31 percent, reduced teen cigarette smoking by 32 percent and teen marijuana use by 18 percent. The coalition has raised more than \$5 million of new public money to support their work.

The Communities That Care process has already lead to leveraging significant resources to increase positive youth development and decrease youth violence and other problem behaviors in Montbello including obtaining funding to implement the Incredible Years early childhood social-emotional learning program and significant support for the Steps to Success Positive Recognition Campaign. The Community Board has developed a sustainability plan for Steps to Success that includes forming a nonprofit organization for Steps to Success.

Key components contributing to leveraging resources and sustainability include:

- **Community Capacity Building**
 - Formation of the Community Board, Key Leader Advisory Board, and Work Groups provides the essential infrastructure and coordination necessary to address difficult community issues.
 - Full-time Community Site Manager housed in the community provides staff support for these boards providing essential infrastructure and coordination.
- **Common Agenda and Shared Vision**
 - A shared vision and plan for addressing the community priorities using tested and effective prevention programs and policies.
 - Community members and partner organizations will have a common understanding of their priorities and a joint approach to addressing those priorities through agreed upon actions.

- **Data Driven Decision Making**
 - Data was utilized to make decisions about the priority risk and protective factors and youth outcomes.
 - On-going data collection will demonstrate that the evidence-based programs and policies selected by the community are making an impact. This provides a system of shared measurement and accountability across all involved.
- **Sustainability**
 - Demonstrating the impact of these efforts is one of the greatest tools for making the case for sustainability, for clearly articulating community needs and priorities, and for aligning resources toward what works.
 - When the Communities That Care model is followed, it has proven successful.
 - Cost savings - the Communities That Care Benefit-Cost ratio is \$5.30 per each \$1 invested.

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