The Coalition for the Promotion of Behavioral Health
Unleashing the Power of Prevention
Ensure Healthy Development for All Youth

Strategic Plan
Approved January 16, 2019
The Context

Behavioral health problems in childhood and adolescence take a heavy toll over a lifetime, with significant impacts on rates of economic independence, morbidity, and mortality. Scientific evidence from the past 30 years shows that behavioral health problems can be prevented. The Coalition for the Promotion of Behavioral Health is an interdisciplinary group of researchers, practitioners, and policymakers committed to reducing behavioral health problems in young people. It is working to meet the goals of Unleashing the Power of Prevention, a report published by the National Academy of Medicine. Unleashing the Power of Prevention is also recognized as one of the 12 Grand Challenges for Social Work (Ensure Healthy Development for All Youth) set forth by the American Academy of Social Work and Social Welfare. The Coalition for the Promotion of Behavioral Health organizes and leads the activities described in this Strategic Plan.

Overarching Goals

The primary goals of the grand challenge to Ensure Healthy Development for All Youth and the Unleashing the Power of Prevention report are to: 1) reduce the incidence and prevalence of behavioral health problems in the population of young people from birth to age 24 by 20%; and 2) reduce racial, socioeconomic, and other disparities in behavioral health problems by 20%. These goals were initiated in 2016 and are to be met by 2026.

Specific Goals, Action Steps, and Strategies

Seven goals and corresponding action steps are necessary to reach the overarching goals of reducing the prevalence, incidence, and inequities of behavioral health problems by 20% by 2026.
Goal 1: Increase public awareness: In a decade, a majority of the U.S. adult population will report in surveys that it is possible and cost-effective to prevent behavioral health problems among children and adolescents.

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| Develop and increase public awareness of the advances and cost savings of effective preventive interventions that promote healthy behaviors for all. | Priority Activities:  
  a. Collect and disseminate written and video accounts (e.g., “stories”) to convey the impact of prevention  
  b. Link Coalition activities to newly-funded Prevention Technology Transfer Centers (SAMSHA)  
  c. Present the *Unleashing the Power of Prevention* framework at local, state, and national conferences and meetings  
  d. Write and publish articles in the popular press  
  **Other Activities:**  
  a. Hold public events that align with increasing awareness of prevention  
  b. Publish books, chapters, and articles in peer-reviewed outlets  
  c. Publish special sections or issues in journals (e.g., *Journal of the Society for Social Work and Research*)  
  d. Maintain the Coalition website  
  e. Create and administer items in state surveys to assess the impact of the work being done by Coalition members  
  f. Hold Congressional Briefings on the effects of prevention annually in different areas  
  g. Collaborate with NPN and NPSC to use social media to promote the awareness of prevention  
  h. Produce cost savings “did you know” briefs based on (WSIPP) cost-benefit analyses | a. Coalition Steering Committee and members generate prevention “stories”, presentations, and publications  
  b. Research Assistant or part-time communications staff maintains a database of productivity among Coalition members  
  c. Research Assistant updates relevant activities on the Coalition website  
  d. Coordinate efforts with the National Prevention Science Coalition  
  e. Coordinate efforts with WSIPP  
  f. A workgroup of Coalition members is formed to guide social media dissemination efforts  | a. Travel funds for selected presentations  
  b. Access to “stories”, presentations, and publications  
  c. Funds for a workgroup coordinator who provides research and communication support  
  d. Coalition website  
  e. Produce fact sheets for Congressional Briefings that can but used in other venues | a. Public perception of prevention as measured by opinion polls and surveys  
  b. Annual count of the number of presentations and publications by Coalition Steering Committee and members  
  c. Publication of JSSWR special issue  
  d. Meta-data from Coalition website  
  e. Congressional Briefing documents  
  f. Cost-savings fact sheets | a. Annual monitoring of national opinion polls pertaining to prevention  
  b. Annual assessment of presentations, publications, and related activities of Coalition members  
  c. Monthly update of content on Coalition website  
  d. Annual, semi-annual, and/or quarterly briefs and fact sheets |
Goal 2: Increase public funding of prevention programs: In a decade, at least 10 percent of all state and federal expenditures on the education, health, protection, and welfare of children will be allocated to effective universal, selective, and indicated interventions for preventing behavioral health problems.

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<td>Ensure that 10 percent of all public funds spent on young people support effective prevention programs.</td>
<td>Priority Activities: a. Inform legislators and policymakers of the evidence and cost-savings associated with preventive interventions b.</td>
<td>a. A Public Funding Task Force and Coalition staff will monitor and organize responses to requests for input about prevention policy, track legislation and other initiatives, and monitor funding allocations. b. Coalition staff is hired to provide support to this and other task forces.</td>
<td>a. Funds to support a task force that is charged with monitoring legislation and funding activities b. Coalition staff to support task force</td>
<td>a. Federal legislation that includes funding for prevention. For example, Healthy Kids Act Family First Prevention Act</td>
<td>a. Quarterly reporting and annual assessment of progress by task force members</td>
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<td>Other Activities: a. Develop infrastructure in the Coalition to monitor federal and state requests for input about proposed legislation or initiatives involving prevention policy b. Develop mechanisms to respond to identified requests for information about prevention (e.g., Public Funding Task Force; parttime staff) c. Coordinate monitoring and response efforts with the National Prevention Science Coalition (NPSC) d. Generate prevention platforms that can be inserted into local candidate campaigns</td>
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Goal 3: Implement community-assessment and capacity-building tools (e.g., Communities That Care, PROSPER) to facilitate the adoption, implementation, and sustainability of evidence-based interventions:

Goal 3a: In a decade, at least 1,000 U.S. communities will actively monitor population levels of risk and protective factors and behavioral health problems among young people.

Goal 3b: In a decade, at least 1,000 U.S. communities will implement effective health promotion approaches and evidence-based preventive interventions.

Goal 3c: In a decade, at least 1,000 U.S. communities will have a multisector coalition of stakeholders who actively monitor the reach and fidelity of a comprehensive system of effective interventions to promote behavioral health for young people from birth to age 24.

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| Implement community-assessment and capacity-building tools that guide communities to systematically assess and prioritize risk and protective factors and select and implement evidence-based prevention programs that target prioritized factors. | Priority Activities:  
   a. Promote and advocate for the measurement of risk, protection, and behavioral health outcomes in statewide youth surveys  
   b. Advocate for measurement of risk and protective factors that includes community-level structural determinants of health  
   c. Promote and advocate for the use of tested and effective preventive interventions  
   d. Promote and advocate for the use of tested and effective systems to guide prevention coalitions  
   e. Promote the efforts of federal block-granting agencies who fund tested and effective preventive interventions  
   f. Continue investigating the role of discrimination, bias, oppression, and positive cultural identity as risk and protective factors for behavioral health  

Healthy Parenting Initiative:  
   a. Support the integration of effective programs that promote healthy parenting into primary care settings  
   b. Increase the implementation and evaluation of tested and effective family-focused preventive interventions for behavioral health problems in primary care settings:  
      i. Work with members of the Collaborative on | a. A workgroup is created to monitor statewide surveys, tested and effective programs, and prevention systems⁵  
   b. Research Assistant to provide support to the workgroup  

Healthy Parenting Initiative:  
   a. J. David Hawkins to lead Primary Care Task Force⁶  
   b. CRISP staff, Charles Lewis  
   c. Coalition staff and Research Assistant | a. Funds to support workgroup  
   b. Research Assistant to support the workgroup  

Healthy Parenting Initiative:  
   a. Funds to support task force  
   b. Coalition staff and Research Assistant to support task force activities | a. Number of states that use measures of risk and protection in statewide surveys  
   b. Number of tested and effective preventive interventions delivered in the US  
   c. Number of CTC and PROSPER sites  
   d. Number of federally-supported and state-led prevention coalitions  
   e. Number of presentations at conferences of state and local officials that highlight the benefits of using data (e.g., National League of Cities, National Association of Counties, National Governors Association)  
   f. Number of presentations at conferences of state and local officials that highlight Successful coalition outcomes | a. Quarterly reporting and annual assessment of progress by workgroup and RA  

Healthy Parenting Initiative:  
   a. Task Force is formed in 2019  
   b. Day on the Hill event in 2019 |
### Healthy Parenting in Primary Care

- to advance the integration of family-focused programs into primary care settings
- Recruit Coalition members to participate in the Collaborative
- Establish a Primary Care Task Force charged with advancing preventive interventions
- Develop a “Day on the Hill” event sponsored by the Congressional Research Institute for Social Work and Policy (CRISP)
- Recruit Coalition members to participate in a working group that organizes “Day on the Hill” event

### Healthy Parenting Initiative:

- Task Force participation and activities (to be defined)
- Interest and participation in the primary care initiative among Coalition members
- Research evidence relative to the effectiveness of family-focused interventions in primary care
- “Day on the Hill” event

### Success of using data

- to inform prevention efforts in selected communities (e.g., Franklin County, MA; Bronzeville neighborhood of Chicago)
**Goal 4: Establish and implement criteria for preventive interventions:** In a decade, all 50 states and territories of the United States will use outcome data from controlled studies and information from cost-benefit analyses to inform policy decisions regarding investments in prevention, treatment, and control of behavioral health problems.

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| Establish and implement criteria for preventive interventions that are effective, sustainable, equity-enhancing, and cost-beneficial. | **Priority Activities:**
  a. Examine existing definitions of what constitutes an effective, sustainable, equity-enhancing, and cost-beneficial preventive intervention
  b. Endorse a definition and promote its use through presentations, publications, the Coalition website, and in states where Coalition members are providing consultation
  c. Develop and promote research guidelines for examining equity-enhancing preventive interventions
  d. Establish task force to identify and disseminate preventive strategies to reduce disparities and guidance for tailoring and testing such strategies | **a. An Evidence-Based Criteria Task Force is established among**
  Steering Committee, Coalition members, and selected state representatives
  b. Coalition staff and Research Assistant provide support to the task force
  C. Coordinate efforts aimed at equity with the current SPR Taskforce on Disparities and NIMHD | a. Funds to support task force
  b. Coalition staff and Research Assistant to support task force
  c. Valerie Shapiro or other Coalition member to lead Disparities Task Force | a. Criteria for effective interventions is endorsed by the Coalition
  b. Use of endorsed criteria by states the Coalition is involved in
  c. Monitor state-level disparities by race and socioeconomic status | Task Forces are formed in early 2019 |
Goal 5: Increase infrastructure for preventive interventions: In a decade, 25 states will have cross-agency “backbone” organizations that provide coaching, technical assistance, and monitoring services to local community organizations that provide behavioral health promotion and prevention services for youth and their families.

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| Increase infrastructure to support the high-quality implementation of preventive interventions. | **Priority Activities:**  
  a. Develop criteria for what constitutes an effective state level “backbone” organization  
  b. Disseminate information about different types of state “backbone” organizations aimed at increasing infrastructure for prevention  

**Other Activities:**  
  a. Support state efforts to improve infrastructure for selecting, implementing, and evaluating tested and effective interventions  
    - Continue current efforts in CO, UT, and MA  
    - Select additional states  
  b. Write-up a “process” that describes guiding principles used by Coalition to engage states in discussions and actions aimed at infrastructure improvement | a. An *Infrastructure Task Force* is created among Steering Committee, Coalition members, and selected state representatives  
  b. Coalition staff and Research Assistant provide support to the task force  
  c. Coordinate efforts with Pew-MacArthur Results First | a. Funds to support task force  
  b. Coalition staff and Research Assistant to support task force | a. Evidence of Coalition’s action steps and guiding principles in state prevention plans and reports  
  b. A count of the number of states that have an identified “backbone” organization that meets our established criteria | a. Quarterly reporting and annual assessment of progress by task force members |
Goal 6: Develop data systems to monitor access to tested and effective preventive interventions:

Goal 6a: In a decade, child welfare, disability, education, employment, public health, health, justice, and other agencies in 20 states will use integrated data systems that enable cross-agency collaboration in monitoring the provision of tested and effective behavioral health and preventive interventions and that promote cross-agency quality assurance in providing a full range of effective programs.

Goal 6b: In a decade, integrated data systems will have the capacity to be disaggregated by local community area and social group and will be used to monitor the provision of tested and effective behavioral health and preventive interventions to promote health equity.

Goal 6c: In a decade, tested technology-assisted approaches will be widely used to ensure the accessibility and reach of effective preventive interventions.

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| Develop data surveillance systems to monitor and increase access of children, youth, and young adults to tested and effective preventive interventions. | Priority Activities:  
- Develop advocacy briefs on:  
  - state laws regarding prevention (e.g., identify laws that suggest a certain percentage of funds be spent on evidence-based prevention, how much money is allocated, etc.)  
  - the reach of tested and effective programs  
- Create a database of technology-assisted preventive interventions that address behavioral health outcomes  
Other Activities:  
- Ask developers of tested and effective preventive interventions to count and report the number of program sales by state | a. Coalition staff and selected Coalition members  
b. Invite a Coalition member to lead a workgroup aimed at assessing technology-assisted approaches in prevention | a. Coalition staff and Workgroup  
c. Research Assistant to support technology workgroup | a. Advocacy briefs on state laws about funding for prevention and reach of tested and effective programs being implemented in the US  
b. Database of current technology-assisted interventions  
c. Number of:  
  - tested and effective programs in the US  
  - states that include measures of risk and protection, and behavioral health outcomes in statewide surveys  
  - tested and effective prevention programs in the nation’s schools and communities  
  - communities using coalition systems | a. Advocacy briefs are developed by 12/31/19  
b. Tech work group submits a report to the Coalition Steering Committee by 9/1/19 |
Goal 7: Create workforce development strategies:

Goal 7a: In a decade, 20 universities will include cross-disciplinary, prevention-focused training programs in behavioral health that will include public health, health, primary care medicine, nursing, psychiatry, social work, and psychology.

Goal 7b: In a decade, 25 schools of social work or schools of public health will include an evidence-based behavioral health promotion and prevention curriculum track in their master’s programs.

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<td>Create workforce development strategies to prepare practitioners in health and human service professions for new roles in promotion and preventive interventions.</td>
<td>Priority Activities: a. Develop and disseminate prevention training modules for use in undergraduate and graduate programs (overview/theory; direct practice; community practice; policy) b. Disseminate training modules through the University of Wisconsin curricula website (Prof2Prof) and other national outlets</td>
<td>a. Current workgroup led by Kim Bender b. Selected Coalition members to review content of modules c. Research Assistant to support workgroup d. Valerie Shapiro to organize Coalition efforts aimed at assessing standards for state prevention specialists</td>
<td>a. Funds to support final editing and production of high-quality training modules</td>
<td>a. Number of universities that provide training in prevention of behavioral health problems b. Number of schools of social work that offer an MSW prevention curriculum track c. Number of individuals, schools, and departments that use prevention modules developed by the Coalition</td>
<td>a. Modules are sent for final production by 12/15/18 b. Modules are uploaded to UW and ready for use by 12/15/18 c. Report on status of state prevention specialists by 3/1/19</td>
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<td>Other Activities: a. Recruit faculty and researchers from universities with prevention curricula to do presentations on their educational materials at selected conferences b. Investigate current standards for prevention specialists in states across the US</td>
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Notes

1. A Research Assistant and/or Communications staff position will be created and supervised by the Chair of the Coalition (Goal 1 and others as specified).
2. A workgroup of Coalition members will be created to guide social media dissemination efforts (Goal 1).
3. A Public Funding Task Force of Coalition members will be created to track levels of public funding for prevention (Goal 2).
4. A staff person will be hired by the Coalition to provide support to work groups and newly created task forces (Goals 2, 4-9).
5. A workgroup of Coalition members will be created to track states who are measuring risk, protection, and behavioral health outcomes and to monitor the number of effective programs and prevention system sites in the US (Goal 3).
6. A Primary Care Task Force will be created to support the integration of effective family-focused interventions into primary care settings (Goal 3).
7. An Evidence-Based Criteria Task Force will be created to create/endorse criteria for preventive interventions (Goal 4).
8. A Disparities Task Force will be created to develop and implement strategies aimed at reducing disparities in behavioral health problems (Goal 4 and others).
9. An Infrastructure Task Force will be created to oversee current and new efforts aimed at promoting infrastructure for preventive interventions (Goal 5).
10. A workgroup of Coalition members will be created to assess the use of technology-assisted approaches in prevention (Goal 6).

References


Steering Committee of the Coalition for the Promotion of Behavioral Health

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