



**“Community Defined Practices
Capacity Building Project”**

Training & Dissemination Webinar

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Training and Dissemination Webinar

Wednesday, March 18, 2015

1:00 PM – 2:30 PM

Facilitator: **Sheron Wright, Project Coordinator**

California Institute for Behavioral Health Solutions (CIBHS)

Presenter: **Will Rhett-Mariscal, PhD, MS**, Associate Director

California Institute for Behavioral Health Solutions (CIBHS)



Presentation Outline

- *Practice Dissemination Overview*
- *Addressing Dissemination Concerns*
- *Next Steps*



Practice Dissemination

Overview



Why Dissemination?

- **Practice is “accepted”/recognized, funders want to fund others to do it**
- **Or you have agencies wanting to implement and asking you if you can help them**
- **Are you ready?**
 - Shift from service provider to practice developer/trainer



NREPP Readiness for Dissemination Criteria

- **Availability of implementation materials**
 - Information for prospective implementers so they can decide whether to implement, implementation support
- **Availability of training and support resources**
 - training and ongoing support
- **Availability of quality assurance procedures**
 - Ways that new implementers and developers can make sure the practice is being implemented correctly: fidelity checklists, data tools
 - Support for improving/tweaking implementation if not getting expected results



Implementation Materials

- **Marketing materials to potential implementers:**
 - Practice description: summary model articulation, evidence of effectiveness
 - Site/staff requirements
 - Training requirements/costs
- **Implementation support materials**
 - Implementation guide
 - Readiness assessment/support



Example Marketing– NREPP Listing



<http://www.nrepp.samhsa.gov/>

Joven Noble

Joven Noble is a youth development, support, and leadership enhancement curriculum designed to strengthen protective factors among male Latino youth ages 10-24. The curriculum aims to promote the character development of young men and facilitate continued "rites of passage" development with the goals of reducing and preventing unwanted or unplanned pregnancies, substance abuse, community violence, and relationship violence. The curriculum also promotes responsible and respectful behavior in relationships with significant others.

Joven Noble is based on the philosophy that male youth need other men and women, their family, and community to care for, assist, heal, and guide them, and successfully prepare them for true manhood. The intervention is informed by positive youth development theory, the risk and protective factors model, acculturation, and Latino cultural values. Delivered by facilitators in 10 weekly sessions, the curriculum focuses on four core teachings: *conocimiento* (acknowledgment), which addresses social and cultural attachment; *entendimiento* (understanding), which addresses social and behavioral factors such as violence and aggression as well as the ability of youth to focus on goals; *integración* (integration), which addresses factors in the broader culture that may lead to feelings of isolation and sadness; and *movimiento* (movement), which addresses how the physical and emotional aspects of teenagers' lives intersect. Sessions involve a mixture of activities and teaching methods (e.g., testimony by role models, skits) relating to a young person's self, family, and community while focusing on the four core teachings. After completing the program, youth are encouraged to join an extended kinship group for ongoing support and development.

The intervention has been implemented with low-income high school students as well as youth in probation and community alternative justice programs. Joven Noble facilitators are required to participate in training before implementing the program and are encouraged to join a network for the ongoing sharing of resources and implementation techniques.

Descriptive Information

Areas of Interest	Mental health promotion Substance abuse prevention
Outcomes	Review Date: January 2012 1: HIV risk knowledge 2: Cultural knowledge and beliefs 3: Cultural esteem 4: Psychosocial stress exposure 5: Attitudes toward couple violence
Outcome Categories	Family/relationships Mental health Social functioning Violence
Ages	13-17 (Adolescent)
Genders	Male
Races/Ethnicities	Hispanic or Latino Race/ethnicity unspecified
Settings	Outpatient Correctional School Other community settings
Geographic Locations	Urban
Implementation History	Established in 1996 in East Los Angeles, California, the intervention is currently being used in more than 20 States. To date, more than 5,000 individuals have participated in the intervention.
NIH Funding/CER Studies	Partially/fully funded by National Institutes of Health: No Evaluated in comparative effectiveness research studies: No
Adaptations	Program materials are available in English and Spanish.
Adverse Effects	No adverse effects, concerns, or unintended consequences were identified by the developer.
IOM Prevention Categories	Universal Selective

Training and Support Resources

- **Training protocol**
 - What methods are used to train, how long does it take, who can do the training, how do you know someone is ready
- **Training manuals**
 - Provides support to trainees and trainers
- **Training videos**
 - Allows people to learn skills by watching them
- **Ongoing support**
 - What happens if people have questions or problems?
- **Skill refresher/enhancement trainings**
 - How do people keep growing and not lose skills?



Quality Assurance Procedures

- **Is practice being implemented correctly?**
 - Fidelity checklists
 - Video-tape reviews
 - Practical demonstrations
 - Site visits
 - Getting expected outcomes
- **How to help implementers improve?**
 - Technical assistance
 - Refresher training



Addressing Dissemination Concerns

Implementation, Training, and
Quality Assurance



Some Dissemination Concerns

- **Fit**
 - Population served, setting, desired outcomes
- **Readiness**
 - Prerequisites to implementation, capacity
- **Clarity**
 - People know what they are supposed to do and how to do it
- **Quality**
 - People are qualified to do the practice
 - People have learned how to do the practice correctly
- **Fidelity**
 - People know how to be flexible and how not – when they are doing the practice, when not



Fit and Readiness

- **Be clear who this is for so agencies can determine fit**
 - Cultural appropriateness key factor
- **Develop a list of “prerequisites” necessary for implementation**
 - Readiness assessment/checklist
- **Provide support to help people get ready to implement**



Clarity

- **Articulate your practice well**
- **People need to know how, when, why to do things**
- **Need to know what is core to the practice and what is individual expression of practitioner**



Quality

- **Be clear what are the prerequisite criteria for someone to be trained as a provider so don't train people who aren't qualified and then they do the practice**
- **Be clear what are the criteria for someone having learned the practice well enough to do it**
- **Think about whether you want to distinguish between “real” or “approved” providers and those who are just attempting to copy the practice**
 - **Certify providers after training?**
 - Certification criteria. Will you test them?



Fidelity

- **If the people trained do not do your practice as they were taught but say they are doing the practice, is that an issue for your practice?**
- **How would you know whether they are still doing it correctly?**
 - Fidelity checklists
 - Regular site visits/reviews
 - Tape reviews



Next Steps



Where are you?

- **Review these considerations and think about which apply to your practice and how**
- **Develop a plan to improve dissemination readiness for your practice**



Questions/Comments?



*Thank you for
participating on today's
Webinar!*



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