

# Overview of the EBPP Process, with an example

This document provides an overview of the EBPP process with an example of a real-world application. This can be used to help potential recruiters and stakeholders understand the EBPP process and goal.

Actions/Activities	Description
Module 1: Recruit and Engage team	<p>Purpose Group norms Goals/outcome Identifying &amp; Recruiting Stakeholders</p> <p><i>Group identified that they have a shared goal of reducing youth involvement in the juvenile justice system in their county, identified and recruitment additional stakeholders for the team, determined agreements, commitments, and assigned leadership roles.</i></p>
Module 2: Identify and Locate Indicator Data	<p>Brief overview of different types of data, selection and collection of indicator data</p> <p><i>Reviewed different kinds of data and what they are used for. Specifically, addressed primary data (collected by agency) vs. secondary data (collected by other agencies/groups). Talked about pros/cons of each and how data might be used to make some decisions. The group determined they wanted to better understand role of mental health and substance use in relation to arrests and detention. They selected indicator data in the substance use, mental, and juvenile justice systems that they wanted to collect, especially data from the HKCS, CBI, and SB94 report. They assigned specific people to collect and organize the data before their next meeting.</i></p> <p><i>The group created an Action Plan for everyone to help collect data and assigned a team member who has experience with data to take charge of organizing the data for presentation to the group at the next meeting.</i></p>
Module 3: Review Indicator Data and Select Priorities through an Interactive Data Analysis Gallery Walk	<p>Large group discussion of goals</p> <p><i>Based on the data collected and presented, the group reviewed the data. They noted high number of homeless youth; lower number of substance use and most of the arrests appear to be related to</i></p>

	<p>non-violent crimes. Group was surprised to see that many of the youth did not report alcohol use, there were several DUI arrests.</p> <p>Group was interested in substance use data and began to question why the numbers were different than they thought. The increase in marijuana use is rising across the state – not necessarily a local problem. However, group is unsure whether the data from Healthy Kids Survey is accurate and wonder if there needs to be better screening specific to youth who are arrested. Luckily, one team member was able to provide the SAS screens from the last year specific to kids who were detained on the spot. Among those arrested, the numbers for alcohol and marijuana are much higher. Based on the data and the risk factors for involvement in the juvenile justice system (their original goal), the identified three priorities: substance use, mental health, and family involvement.</p>
<p>Module 3: Identify and Collect Resource Data</p>	<p>The group assigned their local 311 database administer to coordinate the effort to collect information on resources related to substance abuse, mental health, and family involvement available in the community. Four other organizational representatives who provide direct services related to their priority areas also offered to help collect data, and a parent agreed to be responsible to reach out to a policy advocacy organization to get information about their work around policies related to youth and families. Everyone returned their data to the 311 database administer, who organized it to present to the group.</p>
<p>Module 3: Analyze Resource Data and Identify Priority Gaps</p>	<p>Group reviewed list of resources. There were a good number of services for both mental health and family involvement in the community, although it looked like there were some barriers for the people most in need to access the services. However, current substance abuse providers in town appeared to be lacking. It was determined that there are only two options – local AA group and an out of town residential treatment program that serves youth from the area. Group discussed need for more options for youth who do not need residential placement for substance abuse, especially for youth who are not yet addicted, both</p>

	<p>those who have begun to experiment with substance use and youth before they start experimenting.</p> <p>The group discussed the readiness of their community for different options, their resources, and where they could have the biggest impact. Three of the group members worked for organizations that were identified as potentially having barriers, and two indicated that their organizations were actively working internally to reduce or eliminate those barriers, and the third agreed to take the message back to his organization to see if they would work on the same. Therefore, the group determined that the best use of their resources would be to address the need for additional evidence based strategies to address youth substance abuse in their community.</p>
<p>Module 4: Search the databases for Evidence-based programs &amp; practices (strategies)</p>	<p>The group broke into smaller work groups and researched find information related to substance use programs using a wide variety of the clearinghouses and registries. They found two potential options:</p> <ol style="list-style-type: none"> <li>1. A program specific to those youth arrested for DUI. Findings indicate a decrease in DUI arrests, but no change in substance use.</li> <li>2. An online treatment program based on CBT activities. Rates for both marijuana and alcohol were lower at the end of the treatment.</li> <li>3. An in-school prevention program that is shown to prevent substance use for indicated populations (youth who have been experimenting with substances but are not addicted)</li> </ol>
<p>Module 4: Compare EBPP Options and Select EBPP</p>	<p>Group worked through the goodness of fit worksheets and determined the DUI program was too costly for them and they do not have buy-in from the schools to conduct the in-school program at this time. However, the online program is free and it looks like it is a good fit for the youth who would be accessing it. There will be a need to train clinicians and work with the local mental health center to support it, and the group determined that they have the resources and the buy-in for that. The group selected the online program for implementation with their resources now, and noted</p>

	<i>that they would like to work to build buy-in with the schools for the prevention program in the future.</i>
Module 5: Implement EBPP	<i>The group recruited and trained the clinicians, and worked with the local mental health organization to provide the support needed. The group trained all probation officers on the new program. In piloting the program to determine its effectiveness, half of the youth on probation who showed indications of alcohol or marijuana use were referred to the new online program, and the other half received referrals to the local AA group (which was the current practice).</i>
Module 5: Evaluate EBPP	<i>Group developed an evaluation plan to screen for substance use at probation intake and then at the end of their probation and will track the rate of DUIs for these youth for 1 year following completion of the online program. The group will single out those youth who completed the new online program to determine if they had any different outcomes than the youth who attended the AA group, and the youth who received a referral but did not complete or participate in either intervention.</i>
Next Steps	<i>Group would like to continue to meet to further discuss implementation, fidelity and evaluation results as the program moves forward. Once the online program is sustained, the group will move on to building buy-in and readiness with the schools to implement prevention programming.</i>