There is a great deal of rhetoric concerning the prevention of violence and related problems faced by youth. A conference speech, this document advocates that rhetoric must be replaced by an examination of available data and experience with school-based prevention programs. This is especially important in light of a growing emphasis on "Safe Schools" and related violence prevention interventions. Rather than implement short-term, band-aid, cosmetic solutions, long term solutions are needed. Foremost past efforts must be examined and used to inform future school-based work to prevent violence. Based on the School Intervention Implementation Study (SIIS), which involved a survey of every New Jersey school district concerning the implementation of substance abuse prevention and related programs over a five year period, data are presented from front-line providers indicating features that made long-term adoption of programs most likely. Also included are comprehensive recommendations at the school, training, and policy levels concerning effective, genuine, and durable procedures for prevention of violence and other problem behaviors. Attachments contain: (1) SIIS Survey: Checklist of Program Characteristics; (2) Guidelines for Successful Long-Term Implementation of Interventions; and (3) Genuine Violence Prevention: A Call to Action. (JBJ)
On the Road Again or Hakuna Matata:
How Past Prevention Efforts Can Increase Our Chances of Effectively Preventing Violence

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Abstract

There is a great deal of rhetoric concerning the prevention of violence and related problems faced by our youth. This rhetoric must be replaced by an examination of available data and experience with school-based prevention programs. This is especially important as we embark on what looks to be a growing emphasis on “Safe Schools” and related violence prevention interventions. Rather than go “On the Road Again” and implement short-term, band-aid, cosmetic solutions, we should aspire to be taking care of children’s problems in a lasting manner, as is espoused in Disney’s “Hakuna Matata”: “no worries for the rest of your days.”

Foremost is to learn from past efforts and use them to inform future school-based work to prevent violence. Based on the School Intervention Implementation Study (SIIS), which involved a survey of every New Jersey school district concerning the implementation of substance abuse prevention and related programs over a 5 year period, data are presented from front-line providers indicating features that made long-term adoption of programs most likely.

Also included are comprehensive recommendations at the school, training, and policy levels concerning effective, genuine, and durable procedures for prevention of violence and other
problem behaviors. As a result of reading the presented materials, it is expected that participants will be better equipped to serve as resources to their schools in the design, implementation, and evaluation of violence and related problem prevention and life skills and social competence promotion initiatives that are realistic and likely to have sustained, versus faddish, impact.
Introduction

The problems facing our youth are too serious to be subjected to any half-hearted, vaguely conceived, inadequately funded, or poorly monitored interventions. Yet, this is the state of the art today. Our responsibilities to children in the area of life skills is every bit as important as our responsibilities to build their academic skills. The two must go hand in hand if children are to grow up in safety and come to be adults, and leaders, of schools, families, and communities characterized by caring more than conflict, and excellence more than mediocrity. And these possibilities must extend equally to all students, regardless of where they live, their culture of origin, their gender, or specific handicaps they might have.

There is a great deal of rhetoric concerning the prevention of violence, substance abuse, AIDS, drop-out, and related problems faced by our youth. This rhetoric must be replaced by an examination of available data and experience with school-based prevention programs. This is especially important as we embark on what looks to be a growing emphasis on “Safe Schools” and related violence prevention interventions. Rather than go “On the Road Again” and implement short-term, band-aid, cosmetic solutions, we should aspire to taking care of children’s problems in a lasting manner, as is espoused in Disney’s “Hakuna Matata”: “no worries for the rest of your
Felton Earls, a leader in the area of violence prevention, puts the issues in a frame of stark reality:

*In the face of barriers such as easy access to guns, widespread use of alcohol and drugs, the the decay of central city areas, a “program”-based effort at health promotion may be the “equivalent of trying to control an epidemic of tuberculosis in a densely populated area without adequate sanitation. Antibiotics may be of some value in treating individual cases and a vaccine may be of even greater value in protecting some groups of individuals but the environmental conditions that promote the disease would simply overwhelm public resources in combating it through these means.”*

*Violence prevention begins with good health care for mother and child, minimizing violent behavior within the family (including exposure to media violence), and stimulating the development of nonconfrontational skills (problem solving, decision making, conflict negotiation and resolution) in language and behavior. [in Hechinger, 1992, pp.159-60]*

We cannot allow ourselves to be confused by the language of prevention or of resiliency research; there are no inoculations;
resiliency really refers to individual attributes in combination with conditions in the environment that provide positive guidance, support, and reinforcement; those who are "most resilient"-- a rare group-- may require LESS of this support, but they DO require it, and in an ongoing, developmentally sensitive way. There is no resilient personality type, there are no social competence genes waiting to be discovered; there is only hard work, hard decisions, and the rewards of knowing that the work we do saves lives-- indeed, creates contributing lives-- and does so not only in this generation, but in those that follow.

There is a frequently cited African proverb: "It takes a whole village to raise a child"-- but that is the Reader's Digest version; the rest goes something like this: "...and it takes them over a decade and a half of sustained, cooperative work to do so successfully."

With this in mind, foremost among our concerns is to learn from past efforts and use them to inform future school-based work to prevent violence. Based on the School Intervention Implementation Study's (SIIS-- Elias, Gager, & Hancock, 1993) survey of every New Jersey school district concerning the implementation of substance abuse prevention and related programs over a 5 year period, what have we learned that can
inform our school-based violence prevention efforts? According to those who carry out programs, what accounts for their success and failure? One significant finding from the SIIS is that even programs with validation evidence supporting their use can be found to have been successful and unsuccessful in New Jersey school districts. This suggests strongly that implementation factors are critical to determining the success of school-based prevention efforts. Relevant SIIS data from front-line providers are presented in the following charts.
Data for this study are derived from a two-step procedure. First, survey packets were sent to each of the approximately 550 operating public school districts in New Jersey. We were concerned that the surveys reached individuals who would gather data for us candidly and based on first-hand knowledge of programs being examined. To accomplish this task, we solicited and received the support of the Commissioner of the State Department of Education. He wrote a cover letter endorsing the project and its importance and urged candid cooperation. He stated that neither he nor any member of his staff would ever see the data but were interested in the results. His letter and our materials were sent to the District Superintendents/Chief School Administrators. These persons were asked to identify the individual with direct supervisory responsibility for the types of programs we were interested in surveying, and to forward the materials to that person along with a request that our survey be completed diligently. At the same time, a post card was sent to us with the name of that contact person so we could begin a follow-up process.

Respondents were asked to indicate which of a series of validated programs had been implemented for prevention of substance abuse and related problem behaviors or the promotion of social skills and competencies; they also were
asked to list other programs that the district may have developed or adopted for the same purposes. Other information elicited concerned the target audience (number of students reached, grade levels, and special education focus); who served as facilitators or instructors of the program; funding; identified goals for the program; level of goal attainment and overall satisfaction; and reasons for successful or problematic outcomes.

The use of survey methodology was seen as a practical way of capturing a panoramic snapshot of the many programs in use across an entire state. Due to the magnitude of the survey sample, it was not possible to do “hands-on” or longitudinal on-site assessments for each program. Because direct indicators of program impact on children’s problem behaviors were not available, we focused on involved school personnel’s evaluations of their level of overall “consumer satisfaction” with the program and the extent to which the program reached its locally defined goals. As such, our study is best framed as exploratory; however, we hope that the results will inform smaller-scale investigations wherein more “objective” measures of program implementation and impact on students will be possible.

Our survey sample was found to be representative of the diversity in New Jersey’s schools, containing a mix of urban, rural, suburban, and other districts, as well as the full range of
sizes and locations in every county in the state. A subset of programs was followed up in Survey II, receiving a checklist of implementation practices reflecting theoretical and research-based characteristics which are predictive of the likelihood of long term, successful program implementation (Elias & Clabby, 1992; Fullan, 1994; Hord et al., 1987; Huberman & Miles, 1984; Price & Smith, 1985; Rossi, 1978; Sarason, 1978; Schorr, 1988; Yin, 1979). Only those programs from the initial survey whose effectiveness has been demonstrated empirically in the literature and/or those that are in widespread use in the state were included in this sample; surveys were completed for a total of 311 programs.
Results

Responses to Survey II were factor analyzed and prevailing patterns of response fell into sets of Do’s and Don’ts with regard to long-term implementation of programs. Discriminant analysis based on the level to which schools’ goals for programs were obtained also served to significantly identify 12 of 44 survey items as differentiating successful versus questionable implementation practices, \( \chi^2 (44) = 67.90, p < .01, \text{Canonical R} = .52 \). [Key items are in bold face on the Survey Items chart; all scores were in the expected directions.] Further, qualitative responses were analyzed and here, too, responses could be divided into actions to take and not take to ensure program longevity. A compilation of key findings with regard to implementation factors is summarized in the charts on Guidelines for Successful Long-Term Implementation of Interventions.

Another key learning from the SIIS is that most children in New Jersey are not being exposed systematically to validated prevention programming. Further, even programs with validation evidence supporting their use can be found to have been successful and unsuccessful in New Jersey school districts. This suggests strongly that factors relating to program implementation are critical to determining the success of
school-based prevention efforts. There is no reason to expect that the same will not be true with violence prevention efforts. Thus, it becomes important to understand what influences the effectiveness of how programs are carried out.

The data support the idea that school psychologists and other pupil services providers face a classic dilemma. To achieve *Hakuna Matata*-- a genuine end to worries about violence and related problem behaviors-- comprehensive work is required. It is possible, but not simple. It requires the school psychologists to engage in a broad program development and collaboration-building role. The alternative-- to go On the Road Again, with testing and short-term, time-limited consultation as primary roles-- will not lead to lasting preventive efforts. An examination of many prevalent practices yields little to recommend their continuation; rather, special consideration must be given to factors promoting coordinated, sustained programs integrated with the full academic curriculum of the schools. Isolated, sporadic, add-on, and short-term programs, and programs lacking in systematic skills-building components, not only do not appear to be effective, but can be harmful in that their existence perpetuates the myth that key life skills areas are being adequately addressed.

These lessons, learned mainly with regard to substance abuse prevention programs, must guide our thinking as we
embark on violence prevention efforts. It is essential that we heed the lessons learned in the school-based Wars on Drugs/Prevention of ATSOD (alcohol, tobacco, steroid, and other drug use), a war that was too limited in its effectiveness (Elias, Gager, & Hancock, 1993). The data included here provide detailed information about the specific implementation technologies within the overall context of the state of the art of programs to prevent substance abuse and related problem behaviors.
SIIS Survey: Checklist of Program Characteristics

RATING: 3=strongly agree; 2=agree; 1=disagree; 0=strongly disagree; N/A= not applicable

1. The program is linked to the stated goals or missions of the school or district.

2. At first, the program was implemented on a small or pilot scale.

3. At least one person or group in the district serves as a strong advocate or champion for the program.

4. Involvement in the program is beneficial to one's standing as a professional in the school district (e.g. recognition, award, promotion).

5. On balance, the difficulties and costs of the program outweigh the benefits.

6. Persons who carry out the program share high morale, good communication, and a sense of ownership concerning the program.

7. Persons who are new at carrying out the program are trained by acknowledged expert trainers, whether from within the district or outside.

8. The administration's response to bringing in new programs has been positive, but programs are as readily discontinued.

9. The building principal has provided consistent support.

10. There is support at the top levels of administration, including active plans for continuation.
11. Supporters of the program include a balance of new and seasoned administrators.

12. The materials are age and grade appropriate.

13. Satisfaction is expressed by the students (or recipients).

14. The school district budget bears the cost of the program or is committed to doing so in the absence of outside funding.

15. Program changes are made based on the inputs of people with day-to-day contact with the program.

16. Persons who carry out the program feel free to adapt or simplify the program to have a better “fit” in our school/district.

17. The level of enthusiasm for the program in the district has declined over time.

18. There is an ongoing process of formal and informal training of persons carrying out the program, methods such as co-teaching, mutual observation, discussion and planning groups, or coaching.

19. The program is appropriate for special education students.

20. The program has a “high profile” / high visibility in the school.

21. There is a regularly scheduled and adhered to time allotted for the program.
22. Persons carrying out the program are committed to the program and believe it is an essential part of education in the community.

23. The program is being used in a systematic way throughout the school district.

24. It is difficult to maintain appropriate classroom decorum during program time.

25. Special education students are regularly recipients of the program.

26. Program procedures do not include explicit home carry-over activities.

27. Community individuals such as police, athletes, or business people work effectively in the schools to help meet program goals.

28. This is not so much a "program" as a shared school-wide effort and commitment.

29. Satisfaction is expressed by the persons carrying out the program.

30. The program does not focus sufficiently on issues and concerns relevant to our students.

31. The program is genuinely sensitive to different cultural and ethnic groups.

32. The program materials are varied, and actively engage
33. A climate of trust among students and teachers regarding the program has been difficult to create.

34. The program’s format allows it to complement and enhance other ongoing curricular areas.

35. The program engenders mutual respect and support among students.

36. Parents take the initiative to get involved with program objectives at home or at school.

37. Students learn basic, everyday life skills.

38. The program contains few specific guidelines or instructions regarding the everyday details for carrying it out.

39. Those carrying out the program express feelings of being “lost” or frustrated.

40. Students do not seem to carry over the behaviors taught in the program into real life.

41. There is discussion of the effectiveness of the program toward meeting its goals.

42. There is a program coordinator, facilitator, or committee that keeps track of the program and works to identify and resolve day to day problems.

43. Funding is a barrier to program delivery.
44. Student evaluation or feedback is used in a systematic way in program development.
Guidelines for Successful Long-Term Implementation of Interventions

Aspects of Implementation to Encourage:

1. At first, the program should be implemented on a small or pilot scale.

2. At least one person or group in the district should serve as a strong advocate or champion for the program.

3. Persons carrying out the program must be committed to the program and believe it is an essential part of education in the community.

4. Persons who carry out the program need to share high morale, good communication, and a sense of ownership concerning the program.

5. There should be an ongoing process of formal and informal training of persons carrying out the program, involving such procedures as co-teaching, mutual observation, discussion and planning groups, or coaching.

6. The program materials are varied, and actively engage learners.

7. The program's format allows it to complement and enhance other ongoing curricular areas.

8. The program engenders mutual respect and support among students.

9. There must be a regularly scheduled and adhered to time
allotted for the program.

10. The program is appropriate for special education students.

11. Special education students must be regular recipients of the program; their schedules for “pull-out” activities must be modified so as to not exclude them from social problem solving activities.

12. Recipients should express satisfaction with the program.

13. There must be a program coordinator, facilitator, or committee that keeps track of the program and works to identify and resolve day to day problems.

14. Community individuals such as police, athletes, or business people can be coached to work effectively in the schools to help meet program goals, but must work in curricular and instructional harmony with those goals.

15. Persons who are new at carrying out the program should be trained by acknowledged expert trainers, whether from within the district or outside.

16. The program should be used in a systematic way throughout much, if not all, of the school district.

17. Once in place, programs that have a “high profile” / high visibility in the school are more likely to be sustained.

Signs of Problematic Implementation to Beware of, or, You should start to worry when you notice that:

1. The administration’s response to bringing in new programs
has been positive, but programs are as readily discontinued.

2. The materials are not age and grade appropriate.

3. The program contains few specific guidelines or instructions regarding everyday details for carrying it out; there is no cadre of implementers in contexts like yours accessible to you.

4. Program procedures do not include explicit home carry-over activities.

5. The program does not focus sufficiently on issues and concerns relevant to your students.

6. Implementers report that it is difficult to maintain classroom decorum during program time.

7. A climate of trust among students and teachers regarding the program has been difficult to create.

8. Those carrying out the program express feelings of being “lost” or frustrated.

9. Students do not seem to carry over the behaviors taught in the program into real life.

10. Shortages of funding are used as or actually serve as, a barrier to program delivery.

11. The level of enthusiasm for the program in the district has declined over time.
GENUINE VIOLENCE PREVENTION: A CALL TO ACTION

* Every child entering school should have a social development plan, designed to ensure that age-appropriate life skills are being learned throughout the school years.

* All those entering the teaching professions-- and School Psychology-- must have the skills necessary to carry out life skills development work confidently and well, and see this as a part of their jobs; certification and hiring practices should reflect this priority.

* Because problems will persist in schools while efforts move forward to develop better models and procedures for our working with our youth, educational administrators need to be prepared to be action researchers, considering the collective impact of various programs and educational approaches, working to combine them, and tracking their progress continually, until and even after goals appear to be attained.

* Concomitant changes are needed in higher education, in teacher and administrator training and supervision, and in the preparation of special services staff. Institutions of educational preparation that are not willing and able to instill the necessary attitudes and skills should not be accredited as places where educators are being prepared. The same should be true of pediatricians and other family health care providers and the institutions that provide
their training.

* Finally, I recommend that ALL schools should become centers for parenting support and education.

Public health issues, like violence, alcohol and other drugs, AIDS, require public health solutions—bold, definitive, focused, sustained efforts. What is at stake is the future identity of our youth, what they will become when they are adults and in a position to take over the responsibilities of citizenship in our democracy. The time for action is now.

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