

TEXT CHAT CONTENTS

WEB CONFERENCE

How to Draw Upon Evidence and Lessons Learned to Advance Primary Prevention Practice

Wednesday, August 12th, 2009

2:00-3:30 PM Eastern (11:00 AM – 12:30 PM Pacific)

Presenters

Wendi Siebold, EMT Associates

<u>Host</u>

David Lee, Prevention Connection Program, California Coalition Against Sexual Assault

Participant names have been removed from this chat record, unless provided by the participant in text.

Wendi Siebold: Currently in AK, living in WA and originally from CA

Calling from North Carolina

Hi Wendi! Debbie in Olympia here.

Wendi Siebold: Hi Debbie I think the weather is better here than down there. Go figure

yes - we have rain - go figure! AK is big - where are you?

Wendi Siebold: Anchorage on my way to the Native village of Akiachak

NJ

Anne Silbernagel West Virginia

David Lee: Please call in for audio at 1-888-447-7153 passcose 84 68 09 8#

David Lee: Copies of the slides are available at NSVRC's RPE pages and

http://www.preventconnect.org/display/displayTextItems.cfm?itemID=232§ionID=248

David Lee: EBI is the acronym

David Lee: http://www.cdc.gov/HealthyYouth/AdolescentHealth/registries.htm

David Lee: is the CDC's list of lists

David Lee: REP http://www.cdc.gov/hiv/topics/prev_prog/rep/resources/qa/process.htm re HIV

replicating effective programs

David Lee: if you have a question, please write it in the text chat or raise your hand

Is this a place for community based participatory research?

David Lee: What SV prevention programs do you know that are "promising?"

Coaching Boys into Men

We have promoted Nan Stein's curricula - Gender violence, Gender justice or BullyProof, for example, as research-based one.

You already mentioned MCSR's MOST approach. I would also include Care For Kids. Also, a lot of local initiatives that have been systematically developed.

Green Dot, Safe Dates, anything from Nan Stein, Bystander Intervention work from Prevention Innovations

A Call to Men

MVP

We shouldn't forget local initiatives...there are some really great approaches in local communities that meet a lot of the "promising" criteria...they aren't as hyped or marketed as these national programs, but that doesn't mean they aren't just as effective.

I second the local initiatives, and also wanted to add "SV in Teenage Lives: A Prevention Curriculum" by Planned Parenthood of Northern New England.

Please provide links to the article Wendi just mentioned. Thanks!

David Lee: We are trying to include local program on the Prevention Connection Wiki so we can have information about prevention beyond the nationally listed programs http://www.preventconnect.org/wiki

David Lee: What are some of the settings that are typically "closed" to rape prevention programs? What are some of the "open" settings?

Open: Juvenile Detention centers

Schools can be either depending on local relationships

alternative high schools (open)

Anything that directly talks about sex can be problematic for our locals. I think after school programs in NGO's, or church programming has been successful for some of our programs.

Open: Athletic teams/AAU/Optimus, etc

Planned Parenthood Teen Health boards are very open, but often if we partner with them we get political flack

depends on the community...but I'm not sure I'd even recommend framing your program to any setting as solely "rape prevention"...programs are usually broader than that in practice...they talk about gender, communication, personal development, healthy relationships, etc.

faith communities can also be open or closed depending on the community

Although I also agree with Binnie

Generalizing "closed" = schools, places of worship, campuses

We can find more openness if we talk about addressing the underlying conditions that lead to a variety of bad outcomes, sexual violence being one of them.

I agree, framing is KEY. Understanding that for some simply the language scares them into pushing us away. But Healthy Gender Roles and Relationships elicit interest

As a state agency, we're encouraging all of our prevention educators to work together, Alcohol, Drug, Pregnancy Prevention, Sexual Violence Prevention, etc.

David Lee: What are some of risk and protective factors targeted in other prevention programming that may overlap with SV prevention?

connection to caring adults

Alcohol use

Protective--positive youth development

On the topic of framing, Glynis Shea presents excellent work on this related to youth sexual health that could help our work

Strengthening relationships between parents and young children as protective factor.

positive identities. commitment to learning

self-empowerment

I really like this concept...we used a similar framework in the development of our Primary Prevention Guidelines (which will be FINALLY be available this week!).

This framework is relevant to me because our field is still so new. We have a lot of experience "making it up as we go" and we should find ways to draw on that!

It seems to me that his is helpful in undertaking the large task of evaluation and gathering evidence. With so many "big" picture topics we include in our primary prevention efforts it can feel like there is no way to evaluate it all, but this feels manageable

(this is actually erin at CCASA in Colorado) This strikes me as returning to our feminist roots of respecting the community/practitioner experience as much as the "formal" research.

And in terms of the "making it up as we go," it's really important to document efforts (be they "successful" or not) to create an evidence base and so all the work isn't lost when staff changes, etc.

I think respecting the community/practitioner experience also gives us a better product. I'm not a big fan of any of the programs that were developed in an academic vacuum.

well said Brad

Media especially wants simple answers to this complex problem...no one thing will stop sv but the integration of many effective programs

could we get a link to the EMPOWER handout on the 9 principles? thanks!

David Lee: we will get the EMPOWER document onto the NSVRC RPE web sites

Just a note on the EMPOWER hand-out - it covers 5 (I think) of the 9 principles

good to know, thanks Karen and David!

David Lee: In what ways have RPE grantees in your state started to follow the prevention principles?

NC

We've had to focus on the principles if we are trying to write our state plans the way that CDC wants us to....

Dosage - some programs have started saying they will only do a program with multiple sessions

At the state level, I have incorporated an expectation into my contracts that local programs meet X number of the 9 principles (it changes each year to keep increasing their capacity)

This is why we developed the VA Primary Prevention Guidelines...they are our translation of the 9 principles...result of a 3.5 year process!

Some local orgs are focusing on increasing dosage with school-based presentations, others are working on appropriately timed programs, they all have a theory base

It's a very new topic for our local programs, BUT we have made it a part of Year 4 goals and objectives that they address them.

Most of Ohio's programs work with these principles. Dosage has proven difficult with schools limiting our time to only 3 days.

Many are attempting to increase the "dosage" of their presentations.

We have started looking at them...I think the one that has to do with dosage can be difficult...how much dosage...

We have found we needed first to come up with a core knowledge base for our Prevention Educators

Different local programs have focused in on particular principles that seemed most relevant to them.

Bad "enter"--they've had to incorporate them by trying to make sure they are addressing 5 (I think) of the 9 with their prevention strategies.

some work with varied teaching methods - variations on peer to peer work

All the Moving Upstream volumes are fantastic prevention resources! Be sure to check them out!

http://www.vsdvalliance.org/secPublications/newsletters.html

That's the link for all of the Moving Upstream issues.

David Lee: From your experience, what are potential common factors in effective sexual violence prevention?

gender or faith based

gender roles, positive relationship choices

programs that work at multiple levels of the social ecology; programs that focus on "root causes" of sexual violence AS WELL AS healthy sexuality, and relate/teach that content in a real way

Building and maintaining relationships (be it with program participants, community partners, etc.). And listening to the community and focus population(s).

skill building

incorporating a media analysis or awareness component and how it impacts gender roles.

nonjudgmental approach?

understanding oppression, power dynamics

Healthy relationships and sexuality, and bystander behavior

communication/decision making,

youth informed

programs that are VERY informed by the community they are trying to impact

Listening and learning going on back and forth between participants and trainers

challenging sexism and male/female socialization, sexual consent and coercion

How are the core elements of a program identified?

its a start

we were talking here about identifying assets and activities that achieve them

This info will be in the elearning tools?

David Lee: Yes e will have this info in the eLearning unit -- later we will ask what pieces are most important

thanks wendy for your answer, it was helpful!

That seems to be the hardest part...getting rape crisis centers to THINK about evaluation, documentation, changing practice toward primary prevention.

David Lee: What topics from today's web conference should be included in an eLearning Unit for local RPE grantees?

how to start documenting it informally and the "in their opinion" part so it's not so intimidating.

(Not Amy but Patty Wetterling)Sample questions they should all answer

I love the part on developing your own program vs. adapting an existing model. And core elements/common factors.

have different levels - beginner through advanced

Address the issue of "how to get into schools" by encouraging them to consider the import of relationship development and looking for other risk/protective factors to address.

ways to develop "buy in" with the agencies RPE programs are trying to reach, how can they "encourage" schools and agencies to give more time for multi-sessions, so we can have more input to evaluate

How to identify core elements, common factors

Two topics I think would be helpful are the "evidence-informed decision making" sections of today's web conf., and the evidence "common factors" sections (particularly the "Examples of Common Factors" slide).

I also like looking towards other prevention modalities/fields for what works.

I echo what Emilee just wrote...

have a way for them to ask specific questions about what's they're doing.

common factors with regard to skills building, and how to incorporate evaluation

what information is most key to attempt to capture

Match strategies with Education Frameworks

how to reach minority community

ways that evaluation and use of evidence informed practice can actually benefit their agency, community, and hopefully change social norms

Second that Debbie!

I am thinking about promoting the use of a program notebook that our folks can use to track their presentations, the results, and the ways they adapt it. We can then use them to review and help capture some of the adaptations/effective strategies.

Hi Everyone - I wanted to let you all know that the NSVRC private RPE web pages will be down for maintenance the rest of this week. We apologize for the inconvenience. If you need resources, please email me directly at jgrove@nsvrc.org and I will go in and retrieve them for you.

Some folks have a really hard time with theory. It would be great to have a tool that helps with that.

Good ideas Binnie.

I agree with Ashley's point.

on formation and support the Prevention Teams can bring back to their entire agencies, to get their whole program behind their efforts of prevention

Thanks for the encouragement and inspiration Wendi! I appreciate you ending on a positive note.

Thanks Wendi. This is very helpful.

thank you, this was great!

Thanks Wendi, David, Karen, Brad and everyone for your comments!!

great info and encouragement today!

Very interesting call - nice work!

Lydia - Another Washingtonian!

Ditto, ditto - I always look forward to these conferences!

Thank YOU! Very helpful.

Thanks, all!

Appreciate it! Thanks!

thank you!

Thank you!

Thanks everyone!

many thanks!

Thank you from Vermont.

Thanks!

Great work! Thanks

Thanks, very thoughtful discussion.