



# A large-scale initiative to disseminate an evidence-based drug abuse prevention program in Italy: Lessons learned for practitioners and researchers



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## ARTICLE INFO

### Article history:

Received 13 September 2014

Received in revised form 1 March 2015

Accepted 12 March 2015

Available online 20 March 2015

### Keywords:

Dissemination

Implementation

Adaptation

Evidence-based program

Drug abuse prevention

Capacity building

## ABSTRACT

Across developed countries, experimentation with alcohol, tobacco, and other drugs often begins in the early adolescent years. Several evidence-based programs have been developed to prevent adolescent substance use. Many of the most rigorously tested and empirically supported prevention programs were initially developed and tested in the United States. Increasingly, these interventions are being adopted for use in Europe and throughout the world. This paper reports on a large-scale comprehensive initiative designed to select, adapt, implement, and sustain an evidence-based drug abuse prevention program in Italy. As part of a large-scale regionally funded collaboration in the Lombardy region of Italy, we report on processes through which a team of stakeholders selected, translated and culturally adapted, planned, implemented and evaluated the Life Skills Training (LST) school-based drug abuse prevention program, an evidence-based intervention developed in the United States. We discuss several challenges and lessons learned and implications for prevention practitioners and researchers attempting to undertake similar international dissemination projects. We review several published conceptual models designed to promote the replication and widespread dissemination of effective programs, and discuss their strengths and limitations in the context of planning and implementing a complex, large-scale real-world dissemination effort.

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## 1. Introduction

Epidemiological data from multiple developed countries show that experimentation with alcohol, tobacco, and other drugs typically begins during the adolescent years. Fortunately, there are a growing number of evidence-based prevention programs for adolescent substance abuse that have been rigorously designed and tested in large scale prevention trials, mostly in the United States. In an attempt to use evidence-based programs and practices, a number of prevention research and/or practitioner

groups have attempted to adopt and adapt evidence-based prevention programs developed elsewhere. Furthermore, advancements in implementation science have increased the recognition among researchers and practitioners that efforts to adapt and disseminate evidence-based programs should be approached in a standardized and rigorous fashion. This has led to the development of several conceptual models regarding best practices in replicating effective programs and disseminating them widely. Some of these models may be informative for the dissemination of evidence-based drug abuse prevention programs on an international scale.

In this paper, we describe how a collaboration of public organizations administering health and social services in the Lombardy region of Italy approached the tasks of identifying, selecting, adapting, disseminating, and testing a drug abuse prevention program for middle school students as part of large regional project designed to promote evidence-based prevention. In particular, we summarize and examine the processes and challenges involved in selecting and implementing the Life Skills

*Abbreviations:* LST, life skills training; REP, replicating effective programs; CDC, Centers for Disease Control and Prevention; ISF, interactive systems framework; SPM, sustainability planning model; OReD, Regional Observatory on Drug Addiction; NHPA, National Health Promotion Associates.

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<http://dx.doi.org/10.1016/j.evalprogplan.2015.03.002>

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Training (LST) program in Lombardy, a region in the north of Italy. The LST program (Botvin, Baker, Dusenbury, Botvin, & Diaz, 1995) is a research-validated substance abuse prevention program proven to reduce alcohol, tobacco, drug abuse, and violence by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors (see Botvin & Griffin, 2015, for a review). The program provides adolescents with the confidence and skills necessary to handle challenging situations and succeed at the developmental tasks of adolescence. The program is recognized as a Model or Exemplary program by an array of government agencies including the U.S. Centers for Disease Control and Prevention, National Institute on Drug Abuse, National Cancer Institute, Center for Substance Abuse Prevention, Office of Juvenile Justice and Delinquency Prevention, and the U.S. Department of Education's Safe and Drug Free School Expert Panel. The LST middle school program was developed and tested initially in the U.S. and in recent years has been widely disseminated and has now been implemented in 33 countries around the world.

The analysis of the Italian experience provides a significant opportunity to test the utility of theoretical models for the dissemination and implementation of effective interventions as well as an opportunity to discuss the balance needed between fidelity and adaptation. Indeed, the Italian implementation of LST had two main challenges: (1) adapting a program developed in another country and culture (Backer, 2000; Miller & Shinn, 2005); and (2) disseminating a validated program by negotiating the necessary changes at the individual, organizational and community levels. We describe the activities and processes of implementation and dissemination of the LST Lombardia project, and review them in the context of published conceptual models on adaptation and implementation processes in order to highlight their strengths and limitations in the context of real-world prevention program planning, implementation, and evaluation.

## 2. Conceptual models for program replication and dissemination

A leading theoretical model that conceptualizes the stages of bringing effective prevention programs to scale is the diffusion of innovations model developed by Rogers (1995). Diffusion of innovation refers to the process by which new knowledge is "communicated through specific channels over time among members of a social system". Rogers proposes that the process of diffusing innovative interventions (such as evidence-based drug abuse prevention programs) involves four stages: dissemination, adoption, implementation, and maintenance. Dissemination refers to the process by which effective innovations are spread or distributed, adoption refers to the decision processes by which organizations decide to use an innovation, implementation refers to the degree to which the program is delivered with fidelity to its' original design, and sustainability or maintenance refers to how a program is institutionalized over time. Although Rogers' model was a general one that describes multiple categories of innovation, several models that focus specifically on program replication and dissemination refer to on one or more stages of the Rogers' model.

Conceptual frameworks that focus specifically on the dissemination, adoption, implementation and sustainability of evidence-based interventions have been developed and tested. Examples of these frameworks include the Replicating Effective Programs model, the Interactive Systems Framework, and the Sustainability Planning model.

### 2.1. Replicating Effective Programs (REP)

The REP framework (Kilbourne, Neumann, Pincus, Bauer, & Stall, 2007) grew out of an initiative at the U.S. Centers for Disease Control and Prevention (CDC), called the Replicating Effective

Programs (REP) project. The goal of the CDC REP project was to develop systematic and effective strategies to prepare HIV interventions for wide-scale dissemination by community-based organizations. According to the REP model, there are four phases for implementing effective programs. The first phase, entitled "Pre-Conditions" involves identifying needs of the local community, identifying effective interventions that address those needs, ensuring that the selected intervention fits local settings, identifying implementation barriers, and drafting the intervention package. The second phase, entitled "Pre-Implementation" involves setting up a community working group, pilot testing the intervention package, and addressing orientation and logistics. The third phase, entitled "Implementation", involves providing training and technical assistance to intervention providers. Finally, the fourth or "Evaluation" phase includes examining the effect of the intervention on key outcomes.

### 2.2. Interactive Systems Framework (ISF)

The Interactive Systems Framework for Dissemination and Implementation (Wandersman et al., 2008) was developed to provide a framework for understanding the process of moving scientifically rigorous and effective intervention models into field settings to promote the public health. IFS key elements and relationships involved in the movement of knowledge of prevention research into practice. These components include (1) the Prevention Synthesis & Translation System, which involves the summary and synthesis of research findings to create information and products that practitioners can use in everyday practice; (2) the Prevention Support System, which includes the trainers and technical assistance providers who build capacity for prevention within organizations; and (3) the Prevention Delivery System, which includes the schools, community-based organizations, and other organizations and their staff who implement prevention programs. These systems together build general and innovation-specific capacity of individuals, organizations, and communities where prevention innovations are implemented.

### 2.3. Sustainability Planning Model (SPM)

The SPM (Johnson, Hays, Center, & Daley, 2004) offers useful details in a prescriptive fashion for how to plan for sustainable prevention. These authors define sustainability as "the process of ensuring that an adaptive prevention system and a sustainable innovation can be integrated into ongoing operations to benefit diverse stakeholders". This involves building, supporting, and strengthening infrastructure capacity needed to sustain a prevention innovation before and during the initial introduction and implementation of the innovation. This can be broken down into steps that include creating linkages to promote cooperation and build support among the diverse administrative units that have purview over the innovation; developing the human, physical, technological, and information resources and local expertise needed to integrate an innovation into routine operations; and using program champions and opinion leaders within or outside these institutions to educate policymakers to promote the innovation.

In the following sections, we describe the LST Lombardia Project and examine the utility of the conceptual models reviewed above in a real-world context.

## 3. The LST Lombardia project

The LST Lombardia project began as an effort to improve the quality of drug prevention programming through the selection, adaptation, implementation, and testing of an evidence-based drug abuse prevention program for middle schools in the region; and to identify strategies for effectively disseminating the

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