

Embedding Prevention in State Policy and Practice: Second Annual Evaluation Report Volume I

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PREFACE

This report was prepared by the Association for the Study and Development of Community (ASDC) on behalf of the National Crime Prevention Council (NCPC). David Chavis (Project Director), D.J. Ervin (Deputy Project Director), Kien Lee (Senior Research Associate), Jill Hunter-Williams (Research Associate), and Larry Contratti (Research Assistant) of ASDC contributed to this report. We would like to acknowledge NCPC for its support, leadership, and vision for this project. We would like to thank NCPC staff members who made major time contributions to the enhancement of the evaluation: John A. Calhoun (President and Chief Executive Officer), Kimberly J. Dalferes (Embedding Initiative Director), Jean O'Neil (Research and Evaluation Director), and Theresa Kelly (Community Outreach and Support Director).

The state embedding team members also contributed a great deal to the evaluation in terms of substance, making local arrangements for site visits, providing information, arranging conference calls, commenting on drafts, and responding to numerous electronic mail messages.

This evaluation was supported by funds from the Robert Wood Johnson Foundation, Annie E. Casey Foundation, California Wellness Foundation, Florence V. Burden Foundation, and the U.S. Department of Justice.

EXECUTIVE SUMMARY

In 2001, the National Crime Prevention Council (NCPC) launched the Embedding Prevention in State Policy and Practice Initiative (“the Initiative” or “the Embedding Initiative”). The goal of the Initiative is “to create, within five years, self-supporting movements within selected states and their communities that promote and implement prevention as the policy of choice for reducing crime, violence, and drug abuse.” To achieve this goal, NCPC provides funding and technical assistance to help six states embed the prevention of crime, violence, and substance abuse in state policy and practice. Each of the Initiative states—Arizona, California, Connecticut, Iowa, Kentucky, and Oregon—have created an embedding team charged with leading the project at the state level.

The Association for the Study and Development of Community (ASDC) provided evaluation and capacity building services for the Initiative. This report covers the period through December 2002. This evaluation report (Volume I) focuses primarily on the cross case analysis of the efforts of the six state embedding teams, the strategies adopted by the state teams, changes in how the states do business, and the overall state context. It presents a systematic analysis of the states’ efforts, the facilitators and challenges encountered, and the lessons learned. Although the report focuses on the past year, it includes information accumulated from the first year of the Initiative and the states’ previous prevention history.

This report draws from individual case study reports from each of the six participating states. These six case study reports may be found in Volume II of this report. Much of the information in the case studies came from project documents and interviews with the project participants. It is hoped that the report will be useful to future funders, implementers, and evaluators of systems-change efforts.

NCPC, the evaluation team, and the state embedding teams developed a logic model (or theory of change) that serves as a framework for how the Initiative is expected to help states embed prevention in state policy and practice, particularly as a strategy to reduce crime, violence, and substance abuse. The framework guides the evaluation and provides the structure for the development of the evaluation questions, methods, analysis, and reporting. It was revised during the second year to reflect lessons learned during the first year’s evaluation and the results of an extensive literature review conducted by the evaluation team.

The evaluation addresses the following questions:

- How do states embed prevention in state policy and practice?
- How has NCPC supported the states’ efforts to embed prevention?
- What progress has been made in embedding prevention in state policy and practice across the states?
- What lessons have been learned that can help other states embed prevention in state policy and practice?

ASDC developed case studies of the six states (see Volume II) engaged in the NCPC Embedding Initiative. These case studies focused on state context and embedding team activities during the second year of the Initiative. Information for case studies was derived from project documents, conference calls with state representatives, and site interviews with embedding team members, state leaders, and local prevention leaders. In addition, evaluators participated in Initiative activities throughout the year, including NCPC staff meetings, conference calls conducted by NCPC with the sites, and semiannual cross-state conferences.

Accomplishments

The embedding team activities during the first two years resulted in the following accomplishments:

- Increased state capacity;
- Improved process for planning and implementing prevention;
- Changed state structures responsible for prevention;
- Enhanced prevention strategies;
- Increased resources for prevention; and
- Increased public support.

Facilitating Factors

The following factors were found in the first year evaluation to support efforts to embed prevention and continued to play an important role during the second year:

- Top leadership support;
- Policy entrepreneurs;
- Existing relationships among state and local agencies;
- Prior successful state experience with crime, violence, and substance abuse prevention;
- Access to knowledge on prevention; and
- Administrative and legislative policy mandates supporting prevention.

In addition to the facilitating factors identified during the first year, two others emerged during Year Two:

- Nongovernmental and quasi-governmental intermediaries that were used to facilitate and staff the embedding teams; and
- Focused and incremental plans for embedding team strategies.

There were three facilitating factors from last year that were mentioned less often, most likely because participants believed they are historical facilitators already known to the evaluation team:

- Lessons learned and legitimacy from past efforts;
- Balance of power between state and local governments; and
- National dialogue about prevention.

Benefits from this Initiative

State embedding teams identified a consistent range of benefits of participating in the Embedding Prevention Initiative in both years of this evaluation:

- Prestige of participating in a national initiative;
- New language and approaches for embedding prevention;
- Flexible funds and direction;
- Embedding Initiative is not driven by funding;
- Opportunities to learn from other states; and
- Technical support provided.

Challenges to the Embedding Initiative

Generally, the challenges of Year One were still present in Year Two, though, in most cases, to a lesser extent. These are the challenges encountered by the embedding teams in their efforts to embed prevention; efforts were greatly affected by state context, especially economic and other trends:

- Worsening fiscal condition of states;
- Maintaining political support;
- Categorical and short-term funding;
- The stability of existing prevention systems;
- Access to information on what works and has promise;
- Insufficient resources for implementing system change;
- Getting everyone to participate and collaborate;
- Changing skills and organizational capacities;
- Limited availability of data and the lack of coordinated data systems;
- Difficulty explaining prevention and youth development concepts ;
- Difficulties marketing prevention;
- Limitations of state government personnel to influence legislation and other decision-making processes;
- Underdeveloped constituency for prevention; and
- Elections and new state leadership.

Lessons Learned

The Initiative has completed its second year. Lessons learned from both years are listed below. These lessons are drawn directly from the ongoing experiences of national and state participants and the evaluation team.

Lessons for National Support of Embedding Initiatives:

- National support can sometimes be a catalyst and add legitimacy for efforts;
- Each state needs to be able to develop its own approach based on their past efforts and relationships;
- Lead organization and team facilitators influence the approach to embedding-form needs to follow function;
- Peer support networking is helpful and takes time to establish and maintain; and
- States need more information about effective and cost-effective practices.

Lessons for State Teams Trying to Embed Prevention in State Policy and Practice:

- Build and maintain relationships;
- Combine formal policy changes and informal collaborations for the most resilient embedding strategies;
- Communicate with and engage the public;
- Recruit and retain leadership at multiple levels;
- Attend to the state context for successful planning;
- Recognize that systems change takes time and resources;
- Engage people throughout the state and local system in systems-change efforts;
- Recognize that a changed system requires new skills throughout the system;
- Struggle with clarifying vision, language, and framework;
- Focus on building systems capacity, not individual capacity;
- Develop collaborative leadership to promote collaboration;
- Engage and educate the public;
- Promote communication among stakeholders;
- Use prevention-embedding initiatives to promote change in other areas;
- Engage and build constituencies for prevention; and
- Strategize in planning change incrementally.

Conclusion

The second year of the Embedding Initiative saw a continuation of both successes and challenges. Embedding teams made significant accomplishments, especially given economic crises in each of the participating states. NCPC contributed to these accomplishments, providing a strong national support system valued as a resource by and for all state teams. In spite of uncertainties regarding national and state funding for their efforts, all embedding team members interviewed expressed an unwavering belief in the continuation of their work.

The evaluation team found converging information that the efforts across five of the six states have continued to embed prevention as it has been conceptualized by participants in this national initiative. The evaluation team was able to see that these states are changing according to the theory of change presented. State embedding teams have targeted activities to affect the levers of change and there have been positive changes in the adoption indicators at the state level. Given the state budget crises, which had a major effect on embedding efforts, the survival of most efforts undertaken by the teams is another indicator of the degree to which prevention is embedded or institutionalized within the states.

The national support provided by NCPC increased the capacity of the state embedding teams in several ways as noted in this report. The embedding teams are still at the early stages of their efforts, with some indication that prevention continues to be adopted, but not sufficiently institutionalized at the state and local levels. These successes, but large and small, showed an increased momentum for almost all state embedding efforts after two years of technical assistance and relatively limited financial support. The continued support by NCPC will further enhance the capacity to embed prevention within these states. The state financial crises may become opportunities for state teams to work together to advance prevention programming and funding at the state and national levels. There are several opportunities to advance this work at the national and state levels as well as advancing the evaluation of such efforts.

Opportunities at the National Level

New national strategies, such as public information and media strategies, need to be further encouraged and supported. The national stature, capacity, and track record of NCPC provides an invaluable platform for a national public information campaign on the importance of increased support for prevention at the state level. This can include public service announcements, editorials, national events and speaking engagements, and other ways to sue national media to draw greater public support.

NCPC can also have a greater impact by linking with similar national efforts to expand the states' participation in this Embedding Initiative. The Advisory Committee for this initiative is a great beginning of a collation that can be the initial leadership for a national movement to provide greater support for prevention as the primary approach for addressing social problems.

The need for useable information on cost effective prevention strategies is generally needed and has been reported as a major barrier. This type of activity is best generated at the national level, but also needs the infrastructure to reach the states and local communities. The Center for Substance Abuse's Center for the Advancement of Prevention Technology with Regional Prevention Centers is a learning opportunity for such an infrastructure. NCPC and its national partners can encourage further funding for the development and dissemination of prevention technology across a number of social problem and service areas. Because of the interrelatedness of these social problems (e.g. crime, substance abuse and violence) and integrated and coordinated approach to this system are essential.

Opportunities at the State Level

State embedding teams have not significantly expanded their relations with the judicial system. This issue was raised in the Year One report. NCPC has encouraged these relations at its semi-annual conferences and through other mechanisms. Collaboration across branches of government may be particularly challenging, and judicial systems may be perceived to have a relative small role in prevention, when in fact their role may be quite significant (e.g. using alternatives to sentencing). Greater effort and engagement of the leaders in the state judicial systems is needed.

Engaging the public and statewide organizing to advocate for prevention are two of the greatest underdeveloped components (Levers of change) of the embedding strategies. There have been some important initial efforts to better understand and engage the public through media (i.e. Connecticut), but a great deal still needs to be done. None of the states have developed a large regularly active statewide advocacy organization that involves numerous local constituents of prevention (e.g. crime prevention, public health, law enforcement, social work, domestic violence, child protection and advocacy, mental health, education practitioners as well as parent, civic, and other voluntary organizations).

Legislators interviewed generally did not believe there was public demand for prevention. Yet public support for prevention has rarely been tapped and there are reasons to believe it can be successful. Two prevention related initiatives in California passed with strong public support, despite the state's poor financial condition and a perceived lack of public support by state agency representatives that were interviewed for this evaluation. These initiatives appear to have been success because of the high level of of the support and organization backing the initiative. The public can be engaged and supportive of increased spending if there is an appropriate strategy.

Rarely did embedding teams initiate or actively support legislation. The evaluation team acknowledges the limits of state agencies in this regard, but also recognizes that this void needs to be robustly filled in order for embedding to have the greatest impact and sustainability. Lessons learned from the tobacco control movement, through such national efforts as the American Stop Smoking Intervention Study Trials (ASSIST), can be very useful in supporting the development of statewide advocacy coalitions to support prevention.

Finally, major informational and research needs at the state and local levels still remain as mentioned previously. A broad spectrum of practitioners, administrators, and legislators have strongly stated the need for a simple comprehensive source for information of proven effective strategies, policies, and prevention methods. They have also expressed the need for information on the cost-benefit effectiveness of different prevention strategies. Information on benchmarks for judging best practices in prevention programming has also been requested. The state capacity to evaluate prevention programming also needs enhancement. There is an equal need for the states to have the capacity to provide assistance to local governments and organizations to obtain and use this information.

Opportunities for Evaluation

The evaluation of initiatives such as this one are generally accepted as daunting, but essential endeavors. This was clearly the message of the Embedding Initiative's Evaluation Advisory Committee convened during the first year. They are large in scope, broad in focus, and difficult to evaluate using traditional evaluation standards and methods. The appropriate methodologies for large systems change evaluations are emerging, however they are still judged by funders and many in the scientific community by standards with limited applicability having been developed for agricultural research. The so-called "gold standard", experimental designs, have been successful at the individual level of analysis, but cannot be applied to efforts whose "subjects" are as large, complex, and limited in numbers as a state. States cannot be assigned to experimental and control conditions with the same validity as individuals. Therefore new methods as well as measures are needed. This initiative provides an opportunity to advance the methods and measures that can be used this type of systems change initiative.

NCPC and its national and state partners can help advance the evaluation of systems change evaluation by educating funders and other policy members on the importance and potential of such evaluations. Funders and their scientific advisors need to be educated on the scientific validity of other evaluation methodologies (e.g. cross case designs). Funders have also approached evaluations of systems change efforts quite paradoxically: while applauding the need for broad-based long term approaches to system changes, evaluations are expected to be focused and show short term results.

There has been little exchange of advances in the methodology and measures for evaluating systems change initiatives. To the knowledge of the evaluation team, there have been no recent national conferences sharing and "cataloging" the advances these methodologies and measures. Presentations on these topics dot the conferences of professional associations. Funders will sometimes convene small "by invitation only" groups. Annual national meetings on the evaluation of systems change for promoting prevention would contribute greatly to the advance our knowledge and these types of evaluations and enhance these initiatives.

The evaluation team has found our work on this initiative to be both challenging and fulfilling. NCPC has engaged the evaluators as part of the learning process and as a way to keep them accountable. It has modeled a relationship that has used the evaluation to strengthen national and state efforts through conference presentations and consultation. NCPC has also insisted on direct feedback, rigorous methods, and honest verifiable information. The evaluation team feels confident that our relationship with NCPC has produced an enhanced initiative and an evaluation of the highest integrity.

TABLE OF CONTENTS

PREFACE.....	i
EXECUTIVE SUMMARY.....	ii
1. INTRODUCTION.....	1
1.1 Organization of Volume.....	1
2. SUMMARY OF THE EVALUATION METHODOLOGY.....	2
3. OVERVIEW OF THE INITIATIVE.....	4
4. NCPC ACTIVITIES.....	5
4.1 Provided Funding.....	5
4.2 Efforts Targeting All Initiative States.....	6
4.3 Efforts Tailored to Specific State Needs.....	8
4.4 Efforts to Raise National Awareness of and Support for the Initiative.....	9
5. CROSS-CASE ANALYSIS.....	10
5.1 Demographic, Economic, and Political Contexts.....	10
5.2 The State Embedding Teams.....	12
5.3 Approaches to State Systems Change.....	23
5.4 Accomplishments in Year Two.....	23
6. MEDIA ANALYSIS.....	27
6.1 Methodology.....	27
6.2 Findings.....	28
7. FACILITATORS TO THE EMBEDDING INITIATIVE.....	30
7.1 Facilitating Factors.....	30
7.2 Benefits from this Initiative.....	32
8. CHALLENGES TO THE EMBEDDING INITIATIVE.....	34
9. LESSONS LEARNED.....	38
9.1 Lessons for National Support of Embedding Initiatives.....	38
9.2 Lessons for State Teams Trying to Embed Prevention in State Policy and Practice.....	40
10. CONCLUSION.....	44
REFERENCES.....	48

TABLES

Table 1: Profile of the State Embedding Teams.....14
Table 2: Embedding Team Accomplishments for Year Two.....18
Table 3: Number of Newspapers by State.....30
Table 4: Major Subject Categories by State.....30

FIGURE 1: Theory of Change.....3

APPENDIX A: Demographic, Economic, and Political Context Tables

1. INTRODUCTION

In 2001, the National Crime Prevention Council (NCPC) launched the Embedding Prevention in State Policy and Practice Initiative (“the Initiative” or “the Embedding Initiative”). The goal of the Initiative is “to create, within five years, self-supporting movements within selected states and their communities that promote and implement prevention as the policy of choice for reducing crime, violence, and drug abuse.” To achieve this goal, NCPC provides funding and technical assistance to help six states embed the prevention of crime, violence, and substance abuse in state policy and practice. Each of the Initiative states—Arizona, California, Connecticut, Iowa, Kentucky, and Oregon—have created an embedding team charged with leading the project at the state level. The Initiative is funded through support from the Robert Wood Johnson Foundation, Annie E. Casey Foundation, California Wellness Foundation, Florence V. Burden Foundation, and the U.S. Department of Justice.

The Association for the Study and Development of Community (ASDC) provided evaluation and capacity building services for the Initiative. This report covers the period through December 2002. Five of the six states involved in the Initiative completed their second year of operations, and the sixth state completed over 18 months of involvement in this program.

This evaluation report (Volume I) focuses primarily on the cross case analysis of the efforts of the six state embedding teams, the strategies adopted by the state teams, changes in how the state does business, and the overall state context. It presents a systematic analysis of the states’ efforts, the facilitators and challenges encountered, and the lessons learned. Prevention is not a new concept in any of the states in the Initiative; efforts now underway build on a history of prevention activities in each state. Thus, although the report focuses on the past year, it includes information accumulated from the first year of the Initiative and the states’ previous prevention history.

This report draws from individual case reports from each of the six participating states. These case reports may be found in Volume II of this report. Much of the information in the case studies came from project documents and interviews with the project participants. It is hoped that the report will be useful to future funders, implementers, and evaluators of systems-change efforts.

1.1 Organization of Volume

Volume I is organized into eight sections, following this introduction. It begins with an overview of the evaluation, followed by brief descriptions of the Initiative and NCPC activities promoting the Initiative. Next is a cross-case analysis that describes state contexts for the Initiative, as well as the state embedding teams and their goals and accomplishments. This is followed by a media analysis. Two subsequent sections detail the facilitators and challenges to the Initiative. Lessons learned and recommendations conclude the analysis contained in Volume I.

2. SUMMARY OF THE EVALUATION METHODOLOGY

NCPC, the evaluation team, and the state embedding teams developed a logic model (or theory of change) that serves as a framework for how the Initiative is expected to help states embed prevention in state policy and practice, particularly as a strategy to reduce crime, violence, and substance abuse (Figure 1). The framework guides the evaluation and provides the structure for the development of the evaluation questions, methods, analysis, and reporting. It was revised during the second year to reflect lessons learned during the first year's evaluation and the results of an extensive literature review conducted by the evaluation team.

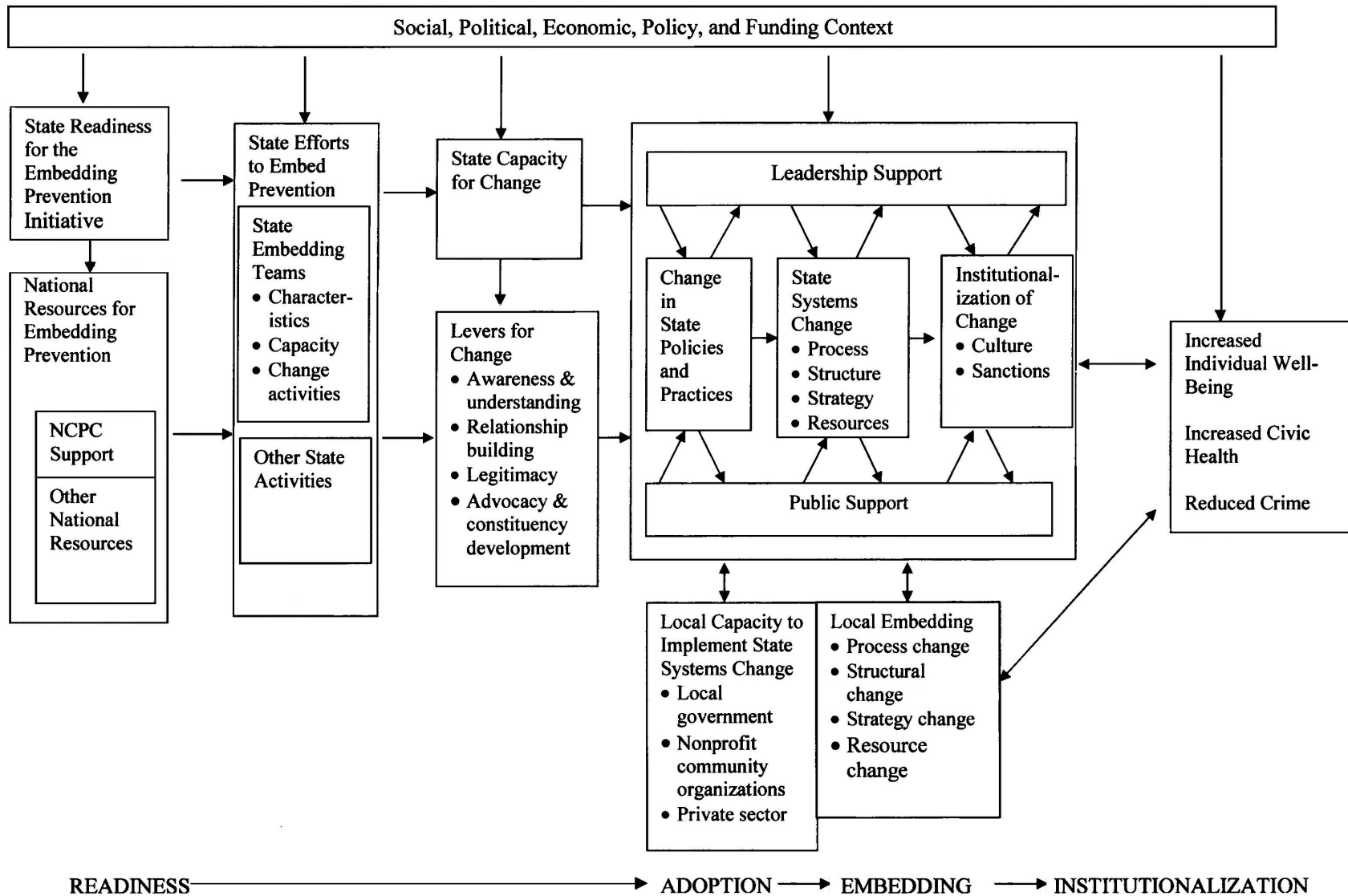
The evaluation addresses the following questions:

- How do states embed prevention in state policy and practice?
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ASDC developed case studies of the six states (see Volume II) engaged in the NCPC Embedding Initiative. These case studies focused on state context and embedding team activities during the second year of the Initiative. Information for case studies was derived from project documents, conference calls with state representatives, and site interviews with embedding team members and state leaders. Evaluators asked each embedding team to choose interviewees, with the guidance that the team should choose some team members, as well as others who could speak to the status of crime, violence, and substance abuse prevention within the state. Ten to fifteen leaders were interviewed in each state during the two-day site visits. Interviewees included state agency heads, policy makers, local community prevention leaders, and other leaders with roles in reducing crime, violence, and substance abuse. In addition, evaluators participated in Initiative activities throughout the year, including NCPC staff meetings, conference calls conducted by NCPC with the sites, and semiannual cross-state conferences.

Information collected from interviews and other sources for each state was organized according to the components of the logic model and according to facilitators, challenges, and lessons learned about the project. Case studies then were written according to this organization. The findings reported were based on at least three independent sources when subjective information was used. The individual case studies can be found in Volume II of this report. Representatives from each embedding team reviewed their state's case study and provided comments and additional information.

FIGURE 1: THEORY OF CHANGE



The evaluation team conducted a cross-case analysis (Yin, 1979; 1994) focusing on the facilitating factors, challenges, and lessons learned. The results of the cross-case analysis are presented in this report; the evaluation team also examined newspaper coverage of prevention issues to determine public awareness and attitude towards prevention. Newspapers in all six states were reviewed. The methods and results of this analysis are found later in this report.

3. OVERVIEW OF THE INITIATIVE

The Initiative grew out of experience with successful neighborhood and citywide comprehensive prevention efforts. State governments have primary authority over many of the essential systems that are critical for promoting prevention and well-being (e.g., education, health, law enforcement, and justice); over the years, NCPC staff has heard local communities call repeatedly for more state government support to assist them in planning and implementing local prevention efforts. NCPC describes its rationale for the Initiative as follows:

“Despite the proven effectiveness and favorable cost-benefit ratios of a preventive approach to reducing crime, violence, and substance abuse, state policy makers traditionally have relegated crime prevention to a distant third place, behind building prisons for those who have already committed crimes and “fixing” offenders. In an effort to shake that shortsighted tradition and help states make prevention policy and practice the preferred choice of local governments and communities, NCPC launched *Embedding Prevention in State Policy and Practice*.

“The goal is to identify and promote successful strategies that establish and sustain state-level crime and violence prevention policy and practice. NCPC is challenging states to move from a *reactive* to a *proactive* approach, and to shift their point of focus from prison planning to building vital communities that do not generate crime.” (NCPC, 2001)

NCPC staff sought to help states meet the core challenge to change the way states conduct business so that prevention becomes highly valued and practiced. If prevention were to become a preferred method for addressing issues such as crime, violence, and substance abuse, then comprehensive, effective local prevention efforts would be better and more broadly supported.

The emergence of a new group of advocates for these approaches among governors, police chiefs, corrections commissioners, attorneys general, and state legislators also encouraged the development of this Initiative. Many of these new advocates are driven, in part, by recognition of the rising costs and other burdens of incarceration. Concerns over the cost-benefit value of prisons have led to new collaborative relations on behalf of prevention that can be engaged to change state policy and practice.

NCPC developed the Embedding Initiative to help states attain three goals:

- To create self-supporting movements that promote and implement prevention as the policy of choice for reducing crime, violence, and substance abuse;
- To identify and promote strategies that establish crime, violence, and substance abuse prevention policy and practice at the state level; and
- To help states better support local communities in preventing crime, violence, and substance abuse.

In 2000, NCPC invited states to apply to participate in the Initiative. Six states were chosen because of their demonstrated commitment to prevention: Arizona, California, Connecticut, Iowa, Kentucky, and Oregon. In choosing these states, NCPC looked for top elected officials and career civil servants who showed leadership and support for institutionalizing or “embedding” prevention in state policy and practice through cross-systems collaboration among state and local organization and leaders. States were required to demonstrate explicit support from the governor or a senior state official in order to participate in the Initiative.

According to the first-year evaluation, the state embedding teams both solidified their own capacities as well as created goals for conducting several activities by 2002. At this time, the evaluation identified several “looming” challenges (e.g., budget cuts and unsupportive state leaders), which developed into greater challenges in the second year.

4. NCPC ACTIVITIES

NCPC staff respected the state teams and placed very few restrictions on the ways in which they could approach the challenge of embedding prevention in state policy and practice, or on the focus of their work (e.g., youth development, early intervention, substance abuse, etc.). NCPC worked closely with state participants in a variety of ways to help embedding team efforts emerge.

4.1 Provided Funding

NCPC provided the state embedding teams with funding (\$100,000 per state annually) to use at their discretion to meet the embedding needs in their state. This amount of funding was intended to aid embedding efforts without being so large as to spark agency tensions over its control. These funds were primarily for staff support to facilitate the embedding teams, coordinate activities and collect data.

NCPC also provided technical assistance and support to the states in a variety of areas via multiple avenues. This assistance may be categorized into four types:

- Efforts targeting all Initiative states;
- Efforts tailored to specific state needs;
- Efforts to raise national awareness of the Initiative; and
- General assistance to states.

4.2 Efforts Targeting All Initiative States

The majority of technical support involved all six Initiative states. The assistance varied in the nature of administration, with support administered in person, via telephone, via printed documents, and via electronic mail.

Annual Site Visits

To build relationships with embedding team members and familiarize itself with state team goals and activities, NCPC staff visited each state at least once annually. The Embedding Prevention Initiative Director visited four states during 2002: California from January 7-9, 2002; Kentucky from March 24-26, 2002; Iowa from August 14-15, 2002; and Oregon from November 20-22, 2002. The Connecticut site visit occurred in January 2003.¹ At times, embedding teams requested on-site assistance from the Initiative Director during the annual visits. For example, the Director facilitated discussions of the Kentucky Year Two work plan during her site visit.

Cross-State Conferences

Twice annually, NCPC convened the embedding teams from each of the six Initiative states for a three-day conference. These meetings served as catalysts for the embedding teams to meet, exchange ideas, learn about systems-change strategies, and problem-solve obstacles encountered during the embedding process. Each participating state was actively engaged in these conferences, sending a team of five to ten individuals; in total, 56 people attended the first cross-state conference in Year Two, held April 14-16, 2002, in Phoenix, Arizona. Topics included: setting benchmarks for change in state policy and practice; youth and prevention policy; what works in prevention; framing a persuasive prevention message; developing a comprehensive plan for effective prevention; and the status of the evaluation and lessons learned.

The second Conference of State Partners for 2002 was held in Mystic, CT, from October 20 to 22. Over 70 individuals participated, with NCPC providing support for key team members and the states finding additional resources to bring as many as 15 participants. Representatives from both Canada and the United Kingdom joined the state teams, consultants, NCPC staff and guest panel participants. The main topics covered were: Legislating Prevention; National Prevention Initiatives; Peer-to-Peer networking and a report on the status of the evaluation. The discussion of legislating prevention was facilitated by the participation of state legislators from Arizona, Connecticut, Iowa, and Oregon.

Embedding Initiative Brochure

NCPC developed a brochure promoting the Embedding Initiative for distribution to interested parties and for participating states to use to communicate with prevention leaders in their states. The brochure was published in August 2002.

¹ The Connecticut site visit for Year Two was originally scheduled for November 2002 to coincide with a media roundtable. Due to elections, the Roundtable and, consequently the site visit, were rescheduled for January 2003.

Evaluation Support

NCPC supports the evaluation of the Initiative to deepen the understanding of what it takes to promote lasting changes on the state level. In general, during Year Two, NCPC staff met monthly with the evaluation team to discuss progress and advice on program activities. In addition, NCPC personnel reviewed and contributed to multiple evaluation documents and funding proposals prepared by the evaluation team.

Informational Conference Calls

NCPC held regular conference calls to provide state embedding teams with opportunities to take advantage of expert technical assistance and peer-to-peer information sharing. Topics included:

- January 2002: Faith- and community-based initiatives (featuring Mark Scott from the White House Task Force on Faith-based Initiatives);
- February 2002: Homeland security (featuring John Calhoun and Jim Cople from NCPC);
- June 2002: Child Welfare League of America's (CWLA's) work addressing the linkages between child welfare and juvenile justice (featuring John A. Tuell, Director of CWLA's Juvenile Justice Division); and
- July 2002: National Governors Association's (NGA's) work to develop a youth policy network (featuring Thomas MacLellan, Policy Analyst, Employment & Social Services Policy Studies at the NGA).

Informational Resources

NCPC provided assistance to embedding teams via electronic and U.S. mail, detailing available funds for, and informational resources on, prevention. The Initiative Director routinely sent electronic support; during 2002, over 60 items were sent to the state teams. Examples of topics included: availability of state-specific data related to childhood risk factors (e.g., teen pregnancy, juvenile offenders); state budget shortfalls; and the Office of Juvenile Justice and Delinquency Prevention *2000 Report to Congress: Title V Community Prevention Grants Program*. These resources were posted on the Embedding Initiative website and generally included internet links. Written assistance also was provided to state teams. In April, NCPC forwarded the new public service announcements regarding national security and the accompanying fulfillment products to the state teams. In July, NCPC sent copies of the following documents for teams to add to the prevention libraries established in Year One:

- Volume 22, Number 6, July 2002 edition of the *Catalyst*, focusing on embedding prevention;
- State Youth Policy: Helping All Youth to Grow Up Fully Prepared and Fully Engaged, by Thaddeus Ferber and Karen Pittman, Forum For Youth Investment, 2002;
- Publications Guide: Raising the Level of Awareness Regarding the Link Between Child Maltreatment and Juvenile Delinquency, by John A. Tuell, CWLA, 2002;

- Child Maltreatment and Juvenile Delinquency: Raising the Level of Awareness, by John A. Tuell, CWLA, 2002;
- Youth Gun Violence and Victimization: Prevention, Intervention, and Control, by John A. Tuell, CWLA, 2002; and
- 50 Strategies to Prevent Violent Domestic Crimes, National Crime Prevention Council, October 2002.

Peer-to-Peer Consultation

In addition to the peer-to-peer consultation provided via conferences and phone calls, NCPC supported peer-to-peer technical assistance between the sites, funding travel of embedding team members to other sites. In response to requests by two state embedding teams, NCPC conducted a brief conference in September 2002 during which representatives from each state met to obtain peer-to-peer consultation. NCPC also encouraged these exchanges at their semi-annual meetings.

4.3 Efforts Tailored to Specific State Needs

A primary manner in which NCPC provided guidance and technical assistance unique to specific embedding teams was to respond to embedding team requests for support. Highlights of this work during Year Two included:

- Conducting a statewide methamphetamine/oxycontin summit in conjunction with the Kentucky Embedding Team;
- Facilitating discussions during the *Violence and Crime in California— From Evidence to Policy: Options to Reduce Violence and Crime in the Future* conference on June 4, 2002, sponsored by the California Embedding Team, the Office of the California Attorney General, and the Department of Health and Human Services;
- Aiding the Connecticut Embedding Team in developing a proposal for a planning grant on *Primary Prevention Through Media* to a national foundation, including technical and funding support;
- Assisting the Connecticut Embedding Team in planning a media roundtable in January 2003, in which NCPC personnel participated;
- Funding Karen Pittman from the Forum for Youth Investment to keynote the Prevention Summit sponsored by the Oregon Embedding Team in November 2002, which NCPC personnel also attended;
- Providing the Oregon Embedding Team with contacts to assist in developing a prevention data system;
- Providing Connecticut with a letter of support for Bill 886 which supported the State Prevention Council and the development of investment priorities;
- Providing California with a letter supporting *Shifting the Focus* by encouraging agencies to participate in the effort and emphasizing the benefits of prevention and embedding;
- Testifying before the Little Hoover Commission in California and the Prevention Council of Connecticut in support of state prevention efforts;

- Writing grants for California’s Prevention Institute to the California Wellness Foundation and one for the State of Iowa to the Maytag Foundation;
- Providing Iowa with a letter supporting a SAMHSA grant;
- Meeting with the Governors of Iowa and Connecticut to encourage their continued support of prevention;
- Providing Oregon with a letter supporting its application for a State Incentive Enhancement Grant from SAMHSA; and
- Sponsoring Dr. Charles Ogletree, Harvard Law Professor, to speak at the Connecticut Media Roundtable which was the “kick-off event” for their media initiative.

Some embedding teams took advantage of NCPC services more often than others, with the Kentucky Embedding Team using a wide-range of assistance and the Arizona Embedding Team requesting no additional assistance.

Some embedding team leaders contacted NCPC personnel regularly to provide summaries of events in their states. For example, the Kentucky Embedding Team leader spoke with the Initiative Director approximately three times per month. Similarly, the Connecticut leaders communicated with the Director monthly.

4.4 Efforts to Raise National Awareness of and Support for the Initiative

Many of NCPC’s efforts focused on increasing national awareness of and garnering support for the Embedding Initiative. NCPC adopted multiple approaches to this end in Year Two.

National Advisory Group

NCPC annually convenes a National Advisory Group for the Initiative to provide the state embedding teams with feedback and expertise from, and access to, national constituencies. In 2002, this group met on February 14. Consisting of 15 national organizations, the Advisory Group supports the Initiative by:

- Advising on policy, direction, implementation, and evaluation;
- Providing direct assistance to state embedding teams through various information, training, and technical assistance resources; and
- Providing access to broad constituencies of federal, state, and local policymakers through national conferences, newsletters, and other publications.

Collaboration with Prevention Partners

NCPC worked with other national organizations, associations, and foundations to publicize the Initiative. Examples of such efforts in Year Two included:

- Conducting a workshop on the Embedding Initiative at the CWLA on March 7, 2002;
- Facilitating discussions of embedding at the CWLA Juvenile Justice Summit, May 8-10, 2002;

- Assisting the CWLA, in conjunction with the Juvenile Justice Summit it facilitated in May 2002, in developing a paper, *Child Maltreatment and Juvenile Delinquency: Raising the Level of Awareness*, that will highlight the Embedding Initiative, to be published by the CWLA in 2003; and
- Assisting the Forum for Youth Investment in developing *State Youth Policy: Helping All Youth to Grow Up Fully Prepared and Fully Engaged*, a paper on national initiatives to promote positive systems change for youth that highlights the Embedding Initiative.

Embedding Initiative Bulletins

NCPC produces periodically bulletins on this Initiative. The bulletins are designed to inform crime prevention constituents about the Embedding Initiative and related issues, and are widely circulated to numerous individuals, including representatives of all six embedding teams, the National Advisory Group for the Initiative, and members of the Crime Prevention Coalition of America, as well as funders and partners of NCPC. *The State of Prevention* appeared in Winter 2001-2002 and Summer 2002. A third issue was published in the Winter 2002-2003. The bulletins are also available from the NCPC's Embedding Initiative website.

Embedding Initiative Website

In Year One, NCPC created an Embedding Prevention Initiative Website, <http://www.ncpc.org/embedding/index.html>, to highlight the accomplishments of the Initiative and to provide links to important prevention resources. The site includes a description of the Embedding Initiative, links to prevention tool kits, copies of the Initiative bulletins, links to on-line prevention resources, descriptions of the embedding activities underway in each of the six participating states, and the proceedings from each of the cross state conferences. In Year Two, NCPC included access to evaluation reports of the Initiative, as well as links to all electronic technical assistance provided to the states.

5. CROSS-CASE ANALYSIS

5.1 Demographic, Economic, and Political Contexts

Differences in demographics, economic factors, governance, and risk factors are important in understanding the efforts undertaken by the embedding teams and the effects of those efforts. NCPC chose the six states in part because of their diversity; as a result, state characteristics vary considerably. Volume I, Appendix B of the First Annual Evaluation Report presented the various characteristics of the participating states. Appendix A of the present report presents this data for comparison of the contexts among the six states.

Demographics

Table A (of Appendix A) shows that there continues to be considerable diversity in the populations among the states. For example:

- State population growth between 1990 and 2000 ranges from a 40% increase in population in Arizona to only 4% in Connecticut;

- Connecticut and Kentucky residents' levels of high school education differ by 10 percentage points, and have both dropped by one percentage point since the previous reporting period. Likewise, their median household incomes differ by about \$20,000. Connecticut has the highest secondary education and income levels among the six states, and Kentucky the lowest;
- Iowa has a fairly homogeneous population, whereas those of California and Arizona are very diverse. As an example, California is less than 50 percent non-Latino White, meaning that the traditional 'majority' population is no longer, though it still maintains a plurality in the state; and
- The population living in urban areas ranges from 93% in California to a low of 52% in Kentucky.

Economies

The states vary considerably in the strength of their economies (Appendix A, Table B). Ratings of state economic well-being by a national enterprise-development organization described the states' overall economic performance as: much above average for Connecticut; above average for Iowa; average for Arizona, California, and Oregon; and slightly below average for Kentucky. All the states have been hit by the recent economic downturn, and all states reported across-the-board cuts in state expenditures. Embedding team members believe these cuts will have an impact on efforts to embed prevention in state policy and practice. The unemployment rates, while lower than in the First Annual Report, represent the employment situation before the current recession.

Government Structures

The states' governance structures, political leadership, and level of government expenditures vary (Appendix A, Table C). For example:

- Connecticut has no county governance structure; the other five states have strong county government systems;
- State legislators meet annually, except in Oregon, where policymakers meet biennially with special sessions as needed;
- Except in California, state legislators work part-time;
- Arizona and California have term limits for legislators, but the other four states do not. Oregon had term limits until a recent court decision overturned them;
- Almost all of the current governors are viewed as supportive of prevention efforts, although their levels of support differ; and
- States vary considerably in state government per capita expenditures on citizens, with Arizona spending a low of \$2,988 and Connecticut a high of \$4,635.

The states reported lower expenditures for the current year and expect lower expenditures for the foreseeable future. Unfortunately, a current single source of information on expenditures that could be used to compare the relative changes across the embedding states was not found.

Risk Factors

Rates of adult and youth crime, violence, and substance abuse vary across the six states (Appendix A, Tables D and E). For example:

- Adult crime increased between 1999 and 2001 in all the embedding states, except Connecticut;
- Compared with national averages, Arizona and Oregon have high adult violent crime rates, whereas Kentucky, Connecticut, and Iowa experience comparatively low rates;
- Incarceration rates do not necessarily correlate with violent crime rates. Kentucky has a higher percentage of its residents in jail than the national average. In contrast, Arizona's and California's rates of prison incarceration are very high;²
- Per capita alcohol sales data suggest that, among the six states, Arizona has the highest per capita use. Kentucky, a major producer of distilled spirits and tobacco, has the lowest rate of alcohol use, but a tobacco use rate that is higher than the national average. Strong tobacco control programs in Arizona and California appear to have contributed to reductions in smoking rates in those states; and
- Violent crime arrest rates for youth are highest in Kentucky and California and lowest in Oregon. The percentage of youth incarcerated in the juvenile system in Kentucky is lower than the national rate; the percent of incarcerated youth in Connecticut is above the national rate.³ Youth death and high school dropout rates are highest for Arizona and lowest for Connecticut and Iowa. Iowa youth engage in heavy drinking at comparatively high rates, and Kentucky youth use tobacco at comparatively high rates.

5.2 The State Embedding Teams

Each of the states established an embedding team to provide leadership for efforts to embed prevention in state policy and practice. In some of the states, efforts consistent with the Embedding Prevention Initiative already had been made prior to the inception of the Initiative; participants in these preexisting efforts recognized the compatibility of the Initiative with their state's previous efforts.

All embedding teams were required by NCPC to provide work plans that included goals and activities for their state systems-change efforts. Embedding teams varied according to history, membership, and structure (Table 1). Brief descriptions of each state team are provided below.

² Arizona's incarceration rate is based on custody counts.

³ Connecticut has a high rate of youth arrested and incarcerated for drug offenses.

Table 1: Profile of the State Embedding Teams

	<i>Arizona</i>	<i>California</i>	<i>Connecticut</i>	<i>Iowa</i>	<i>Kentucky</i>	<i>Oregon</i>
<i>Team History</i>	New	Existing	New	Existing	New	Existing
<i>Number of Participants</i>	3 ⁴	35+	80+	90+	20 to 25	15 to 20
<i>Coordinating Organization (Status)</i>	Arizona Prevention Resource Center (state university)	Prevention Institute (nonprofit)	Commission on Children (state commission)	Criminal and Juvenile Justice Planning (state agency)	Kentucky Crime Prevention Coalition (nonprofit)	Commission on Children and Families (state commission)
<i>Membership</i>	Public	Public/private	Public/private	Public/private	Public/private	Public/private
<i>Authority of Participants</i>	Leaders, managers, mid-level managers	Leaders, managers, mid-level managers	Leaders, managers, mid-level managers	Leaders, managers, mid-level managers	Leaders, managers, mid-level managers	State leaders, managers, mid-level managers, county leaders and managers
<i>Committees</i>	APRC Steering Committee, Drug and Gang Policy Work Group, Embedding team	Data, Inventory, Local, Request for Proposals, Steering, Training and Technical Assistance, Website	Best Practices, Community Involvement, Public Engagement, Steering	State Agency, Steering, Training and Technical Assistance, Youth Involvement	Core Team, Data Collection, Retreat/Strategic Planning, Survey Team, Web Development	Cultural Competency, Data, Planning, Public Awareness, Steering, Technical Assistance and Evaluation
<i>Decision-Making</i>	Informal consensus of embedding team and Steering Committee; majority voting of Work Group	Informal consensus of Steering Committee	Consensus by Executive Director of the Commission in collaboration with Steering Committee Chair; consensus by Steering Committee	Informal consensus of Steering and State Agency Committees	Informal consensus	Informal consensus
<i>Substantive Foci</i>	Crime and substance abuse prevention, community planning, general prevention	Family violence prevention, youth development	Primary prevention, health, safety, learning	Youth development	Crime, violence, and substance abuse prevention	Comprehensive state/local planning and coordination of services and supports

⁴ Expanded using consultants, but only three core members

⁶ US Census Bureau, 2000.

Arizona

The Arizona Embedding Initiative, which joined the NCPC Initiative about six months after the other five states, had originally established a 12-member team composed of state agency representatives and staff from the Arizona Prevention Resource Center at Arizona State University. During the first year of the Initiative, the team focused on developing mechanisms to increase federal, state, and local collaboration, and on integration of efforts, with an emphasis on encouraging state support of local community prevention activities and establishing a statewide, result-based accountability system for efforts to improve Arizona residents' quality of life.

In Year Two, Arizona continued to build its state Embedding Team, with a focus on the prevention of crime, violence, and substance abuse as a pathway to enhancing quality of life. The Embedding Team reported maintaining three core members, with 35 members of state agencies and private sector groups related to crime, violence, and substance abuse prevention available to work on agenda items. Overall, in Year Two, the Arizona Team was not very active with regard to embedding activities; the team did not engage in ongoing planning of new activities or the determination of new future strategies.

California

The California Embedding Team, originally known as Shifting The Focus (STF), is a large, voluntary, interagency prevention partnership with more than 35 members from the public and private sectors. The team is coordinated by an independent nonprofit organization dedicated to violence prevention. Established in 1997, STF has focused on advancing a violence prevention strategy for the state government with particular attention to strengthening partnerships among state agencies and between state and local violence prevention efforts. The Little Hoover Commission, a bipartisan state oversight agency that is independent of state agencies or government branches, has been working in collaboration with STF and NCPC on promoting a greater preventive approach within the state. In 2001, this highly respected Commission released a report, *Never Too Early, Never Too Late to Prevent Youth Crime & Violence*, which has set the stage for future efforts to embed prevention.

Readiness to embed prevention at state and local levels appeared to increase slightly in California during Year Two. Commitment and support from a core group of individuals in key positions in the state's Departments of Justice and of Education, the Attorney General's Office, and the California Health and Human Services Agency (CAHHS) contributed to this increase. Participation of these key individuals led to deeper consideration for policy and practical changes related to prevention by the leaders of their agencies, including the adoption of prevention principles by three of the agencies and consideration of adoption by the fourth agency. New and strengthened relationships among Embedding Team members resulted in increased collaboration across agencies. For example, CAHHS invited the Attorney General's Office and the Superintendent of Public Instruction to get involved in its new child development task force. In late 2002, STF changed their name to the California Interagency Prevention Partnership in order to more clearly communicate their mission.

The Embedding Team also established goals around specific issues related to family violence prevention and youth development, resulting in what some of the members considered a broader and more focused agenda that will appeal to a wider range of leadership and audience. Information sharing and discussion among members of the Embedding Team increased their knowledge about prevention, particularly about the interrelatedness of social issues. Increased local and public support for prevention appeared to be consistent with increased support at the state level, as demonstrated by allocation of resources to local prevention efforts, and passage of Proposition 49, which advocated for after-school programs. Despite the above accomplishments, all of the Embedding Team members and local participants who were interviewed did not believe that prevention will be embedded successfully unless the California Governor is willing to endorse it explicitly and publicly.

Connecticut

The Connecticut Embedding Team has more than 80 members from state, local, and private agencies. The Team is led by a Steering Committee composed of leaders of state and county agencies and departments. The team has focused on increasing primary prevention, health, safety, and learning efforts in the state by educating and engaging the public in prevention efforts, promoting successful primary prevention strategies, and advocating for public policies to increase resources and improve the infrastructure that promotes and supports primary prevention efforts.

The two key players in the embedding effort, the Commission on Children and the State Prevention Council, represent the legislative and executive branches of the state government on the team. In addition, the Embedding Team includes a number of representatives from the private sector. Team members represent a broad array of interests and geographical locations; in spite of these differences, however, team members share a common goal.

In Year Two, the team continued to take on new initiatives as well as supporting the State Prevention Council's work. Of particular consequence has been their work in developing a media campaign aimed at getting, according to a team member, "the proper message to the appropriate audience."

Iowa

The Iowa Embedding Team originally consisted of the Steering Committee for the Iowa Collaborative for Youth Development (ICYD). ICYD, an interagency initiative established in 1998, was composed of approximately 90 representatives from public and private agencies; the Steering Committee (the Embedding Team) was composed of the heads of state agencies related to youth. Embedding Team efforts were directed at aligning state policies and programs to a youth development approach, engaging youth in decision making, and building capacity at the community level to plan and implement youth development practices.

In Year Two, Iowa continued to build a state Team to continue the Embedding Initiative. The Embedding Team's mission continued to focus on youth development as a

pathway to enhancing quality of life. Currently consisting of about 25 members of state agencies and local groups related to youth development, the Iowa Embedding Team has executed several of its original goals.

Kentucky

The Kentucky Embedding Team was established for the implementation of the Embedding Initiative. It originally consisted of approximately 20 members of state agencies and private sector groups and was coordinated by a private, nonprofit organization. With the mission of preventing crime, violence, and substance abuse, and enhancing the quality of life of Kentucky residents, the Kentucky Team has focused on developing its Team, adding new members, garnering support from existing state leadership bodies, and planning future activities.

In the beginning, the Kentucky Embedding Team established a plan for the development of embedding. Team members have followed the plan and are on track in accomplishing their goals. Their incremental approach has allowed them to identify the best new participants at each step along the way; presently, they are searching for representatives from the media and from the legislature.

Oregon

The Oregon Embedding Team was originally the Senate Bill 555 Committee, established in 2000. The team consisted of representatives from state agencies and local community organizations and was jointly led by five state agencies, as mandated by the legislation. The Team was required by SB 555 to develop and implement a state/local partnership to ensure the delivery of coordinated, comprehensive services to children and their families at the community level.

The state Embedding Team continues to be organized around the implementation of SB 555. Embedding efforts have been facilitated by the issuance of an Executive Order supporting SB 555 and mandating cooperation from executive departments. To further this effort, Oregon held a Prevention Conference in November for local agencies and communities regarding comprehensive physical and behavioral health risk prevention to be implemented under Senate Bill 555. In an effort to support embedding in other states, representatives from other states attended.

Table 2: Embedding Team Accomplishments for Year Two Categorized by Type of Change

	<i>Increase State Capacity</i>	<i>Improve Process</i>	<i>Change Structures</i>	<i>Enhance Strategies</i>	<i>Increase Resources</i>	<i>Increase Public Support</i>
Arizona	<ul style="list-style-type: none"> • Established the Embedding Team and leadership • Changed the Embedding Team to three core members with inclusion of others as needed • Adopted strategic goals for Embedding Team • Supported a comprehensive community planning conference • Improved webpage and completed a proof of concept for interactive mapping pages 	<ul style="list-style-type: none"> • Hired research assistants to develop local data resources • Worked with other state agencies and bodies to develop a standardized Request for Grant application for agencies and prevention benchmarks • Worked with Drug and Gang Policy Council to develop statewide results-based accountability system 	<ul style="list-style-type: none"> • Created online information system to better recognize needs of communities 	<ul style="list-style-type: none"> • Revised Drug and Gang Policy Council legislation to expand duties and enhance funding, and to work with governor's plans 	<ul style="list-style-type: none"> • Received monies from the local utility company • Assisted in the acquisition of funding for state reading readiness program 	

Table 2 (continued)

	<i>Increase State Capacity</i>	<i>Improve Process</i>	<i>Change Structures</i>	<i>Enhance Strategies</i>	<i>Increase Resources</i>	<i>Increase Public Support</i>
California	<ul style="list-style-type: none"> • Prevention principles adopted by the Dept. of Justice, Dept. of Education, and the Attorney General, and considered for adoption by the California Health and Human Services Agency (CAHHS) • Annual conference on interdisciplinary strategies for preventing youth violence cosponsored by the Dept. of Justice, CAHHS, Dept. of Social Services, and Mental Health Services • Youth development summit held by Senator Dede Alpert, the Dept. of Education, and the National Academy of Sciences in September 2002 	<ul style="list-style-type: none"> • New common request for proposal across four teen pregnancy programs supported by the CAHHS • Attorney General and Superintendent of Public Instruction involved in the CAHHS's new task force on child development • Deputy Director who values prevention hired in the Dept. of Alcohol and Drug Programs 	<ul style="list-style-type: none"> • State website for data sharing maintained by the Dept. of Justice made easier to access and use • Safe and Drug-Free Schools Initiative and Healthy Start Initiative merged under a single office to maximize existing resources 	<ul style="list-style-type: none"> • Young Men as Fathers Curriculum revised by the Youth Authority to include a stronger emphasis on prevention • Request for proposal requiring local agencies to establish collaborative efforts and provide evidence of science-based prevention efforts distributed by the Safe and Drug-Free Schools Initiative • Language about youth development and mentoring integrated by Sen. Alpert's office 		<ul style="list-style-type: none"> • Proposition 49 passed

Table 2 (continued)

	<i>Increase State Capacity</i>	<i>Improve Process</i>	<i>Change Structures</i>	<i>Enhance Strategies</i>	<i>Increase Resources</i>	<i>Increase Public Support</i>
Connecticut	<ul style="list-style-type: none"> Continued statewide polling on prevention to test public support and to help develop effective language to describe prevention Held a statewide Prevention Conference Educated state leaders about prevention Began a statewide media campaign 	<ul style="list-style-type: none"> Began using indicators and benchmarks for prevention across agencies Identified all programs that facilitate prevention 	<ul style="list-style-type: none"> Saw launching of activities of State Prevention Council Continued linking with community leaders, local governments, and the school community to promote prevention policy and practices 	<ul style="list-style-type: none"> Partnered to provide enhanced early childhood programs Continued to strengthen primary prevention policies (e.g., school readiness, literacy, early child care and education, after-school programs) 	<ul style="list-style-type: none"> Had additional funds allocated to school districts to start/expand after-school programs Obtained foundation funding 	<ul style="list-style-type: none"> Partnered with Research! America to conduct a statewide poll on prevention attitudes Forged a relationship with Public TV to plan educational efforts on prevention using broadcast media Produced special public events focusing on prevention Began the Miss America Anti-Bullying Program Continued public engagement initiatives to improve public understanding

Table 2 (continued)

	<i>Increase State Capacity</i>	<i>Improve Process</i>	<i>Change Structures</i>	<i>Enhance Strategies</i>	<i>Increase Resources</i>	<i>Increase Public Support</i>
Iowa	<ul style="list-style-type: none"> • Developed language of Youth Development (YD) through the design of the YD Results Framework • Provided cross-system training on state initiatives to state personnel • Devised a strategic plan for Youth Involvement • Created a Data Source Map with links to outcome data • Created website with YD resources (e.g., grants, events, data tools) • Trained 18 facilitators to provide YD training • Provided ongoing YD training to organizations, state systems, and youth • Compared state agency requirements for community planning 	<ul style="list-style-type: none"> • Provided opportunities for youth involvement through monthly dialogues between state agencies and youth • Changed distribution of funding in certain participating agencies (e.g., change of CJJP to an allocation process) • Incorporated YD framework in local grant applications in certain participating agencies • Conducted a state-community dialogue to identify barriers to YD 	<ul style="list-style-type: none"> • Added a youth track component to governor's conference on volunteer service, with youth input • Implemented FACITS, a new online information system that unifies data from IHITS, JJ, and IA Youth Survey 	<ul style="list-style-type: none"> • Promoted YD and involvement through various existing programs • Held Youth Engagement Conference, which allowed community-level and state-level employees who work with youth to enhance knowledge by exchanging ideas with youth and with one other 	<ul style="list-style-type: none"> • Received monies and technical resources from the Family and Youth Services Bureau, National Governors' Association, and Iowa Workforce Development 	<ul style="list-style-type: none"> • Conducted a state-community dialogue to identify barriers to YD • Established network with local civic engagement youth initiatives

Table 2 (continued)

	<i>Increase State Capacity</i>	<i>Improve Process</i>	<i>Change Structures</i>	<i>Enhance Strategies</i>	<i>Increase Resources</i>	<i>Increase Public Support</i>
Kentucky	<ul style="list-style-type: none"> Continued to develop the embedding team and strategic plan Developed a relationship with the National Guard Held an Embedding Team strategic working retreat Cosponsored a statewide cross-generational conference on youth crime prevention Sponsored a state-wide Meth/Oxycontin conference Provided prevention training with NCPC for local leaders Developed a survey of state police and schools Held a legislative breakfast Developed a working research and consultation relationship with universities Began development of a database of violence, crime, and substance abuse prevention services provided in the state 	<ul style="list-style-type: none"> Had team members serve on Youth Development Task Force Had team members serve on Agency for Substance Abuse Policy (ASAP) task forces Added new members to Embedding Team to fill gaps in talent pool Began the development of a state data matrix 	<ul style="list-style-type: none"> Made contacts with legislative aides who can relay the Embedding Team agenda to legislators 		<ul style="list-style-type: none"> Received monies from Justice Cabinet Received monies from the Army National Guard, Governor's Highway Safety Program, Youth Crime Watch of America, and corporate sponsors Worked with Kentucky ASAP to coordinate resource distribution 	<ul style="list-style-type: none"> Distributed notices of funding available to members and interested organizations and communities Cosponsored a statewide cross-generational conference on youth crime prevention Developed a communication/public awareness plan for the Embedding Initiative Identified constituency groups and supported legislative change in the areas of crime, violence, and substance abuse prevention

Table 2 (continued)

	<i>Increase State Capacity</i>	<i>Improve Process</i>	<i>Change Structures</i>	<i>Enhance Strategies</i>	<i>Increase Resources</i>	<i>Increase Public Support</i>
Oregon	<ul style="list-style-type: none"> • Obtained an Executive Order that further strengthens SB 555 • Provided technical assistance to county planning teams • Trained local communities on comprehensive community planning strategies 	<ul style="list-style-type: none"> • Modeled a systems approach for local efforts • Developed comprehensive community plans 		<ul style="list-style-type: none"> • Developed the Oregon's Children's Plan 		

5.3 Approaches to State Systems Change

State teams chose several general approaches to changing state systems in order to make prevention a priority and the preferred method for addressing social problems. Some goals for change were specific to prevention, whereas other goals were related to more general changes in the way states do business, applicable to other areas for which states have responsibility.

All embedding teams attempted to make multiple types of changes. Analysis of the goals and activities of all six teams identified six major types of change in state governments and their environments attempted during the first year; these six major types of change held consistent for the second year:

- To increase state *capacity* to prevent crime, violence, and substance abuse (e.g., by improving data quality and access, training state personnel);
- To improve the *process* states use to plan and implement prevention programs (e.g., by instituting outcomes-based systems, changing decision-making relationships between state and local entities and passing legislation that mandates cooperation among agencies, such as in Oregon and Connecticut.);
- To change state organizational *structures* (e.g., by forming new departments, committees, and commissions; establishing partnerships among existing work groups; or changing functions of existing bodies);
- To enhance the *strategies* embedding teams use to prevent violence, crime, and substance abuse (e.g., by promoting specific prevention programs or policy responses);
- To increase *resources* for prevention (e.g., by providing monies for efforts); and
- To raise *public support* (e.g., by enhancing awareness and knowledge).

A more detailed discussion of accomplishments of the states in regards to these types of changes is described in the next section of this report.

5.4 Accomplishments in Year Two

The Embedding Initiative has completed its second year of formal operations and is expected to continue with NCPC support at a reduced funding level in the future. NCPC will continue to provide other supports (e.g., meetings, conference calls, e-mail announcements). The theory of change illustrates how the embedding process is expected to unfold and identifies expected immediate, short- and long-term outcomes of the process. These outcomes have been tracked and monitored over the duration of the Initiative.

Embedding teams achieved several goals in Year Two; Table 2 shows the accomplishments of the past year according to NCPC staff, state participants, and other sources. The accomplishments are organized according to the six approaches to state systems change presented in the previous section. Teams continued to be successful in building their relationships and capacity. Several activities and accomplishments during Year One led to new activities and accomplishments in Year Two. Almost all of the state teams made significant progress in terms of capacity and advancing the embedding of

prevention in the state. State financial crises continued to put embedding teams in defensive positions (holding to past achievement) and limited, but did not stop, progress.

Increased State Capacity

Capacity refers to having the knowledge, skills, resources, and relationships necessary to accomplish one's goals. Embedding team activities continued to target specific elements of capacity building, including: enhancing team membership, increasing awareness, improving knowledge and skills among practitioners, and improving data quality and access.

Enhancing team membership. Almost all of the embedding teams worked to enhance their membership and relations among members. Membership was generally stable, but some state teams, such as the California Team, worked to expand membership to include higher level state government staff. Other states sought to broaden their membership outside of state government; for example, Connecticut, added business leaders to its Team, and Kentucky developed a very active partnership with the state's National Guard.

Increasing awareness and knowledge of prevention. Most of the embedding teams continued to improve awareness and knowledge of prevention issues among key stakeholders, such as policy makers, practitioners, and state team members themselves. Few of the embedding teams believe that they developed sustained efforts. Efforts included the following:

- Connecticut engaged the media through a conference and several follow-up events and co-hosted a statewide prevention conference;
- California held a youth development summit in collaboration with the National Academy of Science, as well as a violence prevention conference and conferences on policy and effective practices;
- Oregon held a Prevention Conference in November for local agencies and communities regarding comprehensive physical and behavioral health risk prevention to be implemented under Senate Bill 555. Representatives from other states attended;
- Two well-publicized and well-attended conferences on substance abuse prevention were held in Kentucky; and
- Iowa held several events designed to increase awareness and knowledge of prevention, including youth development forums, Youth Service Day, and activities to involve youth in policy discussions and decisions.

Developing a common language and frameworks for prevention. Several embedding teams concentrated on developing a common language of prevention and conceptual frameworks to help guide state and local practitioners. The California Embedding Team developed a set of Common Prevention Principles that is now being promoted by the Department of Education and the Attorney General's Office. In Arizona, the Team developed a logic model that is intended for use by local communities. Iowa developed their Youth Development Framework. Kentucky chose to use a public health framework that includes the full range of prevention perspectives represented on the team.

Improving data quality and access. The embedding teams made improved access to data a priority; access to data will make it possible for teams to assess the need for, and delivery of, prevention efforts, and to determine effective practices in prevention. For example, in Oregon, communities built upon mapped prevention-related information from prior years to prioritize and identify strategies to improve the health and well-being of their residents. The Arizona Team (Arizona Prevention Research Center) developed an electronic database of prevention-related indicators and evidence-based prevention practices. Kentucky, in conjunction with university faculty and staff, are developing a data matrix that will be used for planning and assessment. Iowa maintained its Youth Development website with information on youth development policies, planning tools, funding opportunities, and links to resources. In addition, the Iowa Embedding Team, in conjunction with other state organizations, plans to administer the Iowa Youth Survey statewide.

Improved the Process for Planning and Implementing Prevention

The way the state plans and implements prevention strategies is critical to embedding prevention. Major changes in relationships with local governments and communities with regard to funding, planning, implementation, and accountability were important accomplishments for embedding teams. Although greater responsibility was given to local entities, these entities also were expected to be more accountable for prevention outcomes in their communities. Greater flexibility in the use of state funding was promoted in order to improve implementation.

Improving collaboration. A major emphasis of all state teams was relationship building and improved collaboration among state and local agencies. Teams in Arizona, California, and Iowa worked with other state agencies to develop a common grant application and allocation process. In Oregon, state agencies agreed upon a set of outcomes for comprehensive community plans, and they continue to strengthen their relations with local communities. In Connecticut, the Team helped the state budget agency gather local input on the state plan and budget for prevention. Oregon developed a communications plan that will facilitate communication among its counties. The Kentucky team developed strong ties to relevant executive agencies and is proceeding to develop links to both the legislature and local organizations.

Increasing citizen and youth participation. State teams, such as those in Oregon, California, and Connecticut, continued to increase the involvement of local citizens in the prevention planning and policy process. Iowa made great strides in involving youth in policy-making and other decision-making bodies. The states have seen increasing youth involvement as important to their embedding process:

- California convened a Youth Development Summit;
- Kentucky held two prevention conferences that included youth. The National Guard provided eight Guardsmen to operate their mobile Confidence Course for the young participants; and
- Iowa, as part of their Collaborative for Youth Development (ICYD), held youth development forums to engage youth in decision making, and had a Youth Service Day that emphasized youth involvement in civic activities.

Changed State Structures

Embedding teams made fewer efforts to change state structures during the second year. Nevertheless, certain teams experienced successes, for example:

- The Connecticut Embedding Team assisted the operations of a high-level State Prevention Council composed of state commissioners by working in partnership to measure the level of commitment to prevention in existing programs; and
- California merged its Drug Free Schools and Healthy Start Initiatives to maximize the impact of these resources.

Furthermore, state Embedding teams were successful in strengthening the structures developed in prior years particularly by increasing the number and stature of its members. Almost all the states added members who represented high level administrators of key departments and added new agencies to their membership. Through this and other activities, relations among structures were reported to have improved. In Kentucky for example, a new committee structure has been developed that addresses the long range goals of the Embedding Initiative including: Website Committee; Data and Research Committee; Prevention Practice (Program) Committee; Policy Committee; Funding Strategy Committee; and Public Relations Committee.

Enhanced Prevention Strategies

Most of the embedding teams worked to enhance prevention strategies by promoting either particular prevention approaches or particular policy responses.

Promoting particular prevention approaches. Although all state teams emphasized the idea of using previously successful strategies, some of the teams actively promoted particular prevention programs, for example:

- California's Team helped revise the Young Men as Fathers Curriculum to reflect a stronger prevention focus;
- Connecticut's Team continued to promote the implementation of primary prevention policies regarding school readiness, early child care, and after-school programs; and
- All the states provided educational and training sessions mentioned previously in this report.

Promoting policy responses. A few embedding teams focused on legislation and other policy actions to support prevention. For example, Oregon's governor issued an executive order mandating greater cooperation by state agencies with the State's major prevention legislation (SB555). Youth development and mentoring language was introduced as part of a state statute in California.

Increased Resources

While state resources decreased, a number of embedding teams obtained increases in federal financial funding for prevention as a result of this Initiative. Arizona's Team reported assisting the state in acquiring \$180 million in prevention and prevention-related

funds. In Connecticut, the team was able to assist the state's Prevention Council in identifying the amount of money it spends on prevention and to allocate monies to prevention programs. The Connecticut Team also was successful in having additional funds allocated to local school districts for after-school programs. Kentucky and Iowa were successful in obtaining additional funds from state and national sources.

Increased Public Support

In Year Two, more of the embedding teams embarked on efforts to educate the public regarding prevention. The Connecticut team continued to work on engaging the media in the coverage of prevention; the success of this effort is documented in the media analysis reported in section six of this report. Iowa conducted a state-community dialogue on barriers to youth development. Kentucky developed a communications/public awareness plan. The campaign to pass Proposition 49 (promoting the importance of after-school programs and state funding for these programs) in California was a highly visible prevention awareness campaign throughout the state. Community forums and trainings in Iowa, California, and Kentucky provided avenues to increase state capacity related to, as well as public support for, prevention.

6. MEDIA ANALYSIS

The relationship between the media and public attitudes has been of interest to researchers, administrators, and politicians for a number of years. It was originally believed that media coverage influences public attitudes in a unidirectional manner (McLeod, Kosocki & Pan, 1991). More recent research calls this notion into question. It now appears that the relationship is quite complicated, with the media influencing individuals and individuals influencing the content of the public media.

Regardless of the nature of the relationship between the media and the public in general, the content of the media may demonstrate what issues are important to state opinion leaders. This is particularly the case with material found on the editorial pages, where key leaders are given the opportunity to analyze issues and express their opinions.

6.1 Method

Sources

A number of different media could have been selected for analysis. Newspapers were chosen because of their breadth and depth of coverage and their importance to policy makers (Goldstein, 1997). A clipping service (Burrell's) was provided with a list of key terms and was instructed to select material from the editorial and Op-Ed sections of the included papers, with the exception of letters to the editor. The readers were provided with general guidance regarding the nature of the articles being sought, with instructions to err on the side of inclusion. All papers in the six embedding states were included.

Time Period

The searches were performed from March 2002 through the end of December 2002.

Terms

The terms used in the search process combined the word *prevention* with other key words related to crime, violence, and substance abuse. In addition, terms that reflect prevention concepts (e.g., *school readiness*) were included to capture relevant articles without the term *prevention*. Excluded from the search were articles on *Kosovo*, *war crimes*, *terrorism*, *Palestine*, and *September 11th*.

Relevancy

The staff of ASDC screened the editorials and articles received for relevancy. Not all articles with key words were determined to be relevant. The key to the determination of relevancy was the meaning of the term *prevention*. The process began with a basic understanding of what type of article was relevant; then, as problematic articles were encountered, new rules were developed and added to the decision-making process.

Analysis

Content analysis (Altheide, 1996; Krippendorff, 1981; Lacy & Riffe, 1996; Potter & Levine-Donnerstein, 1999) was performed to determine additional characteristics of the retrieved articles. Among the characteristics determined were *focus* and *relevance*. Only relevant articles were included in the analysis.

Inter-rater reliability

Inter-rater reliability was checked at two points in the process, though formal scores were not computed. After early returns were coded, cross-checks were performed and disagreement was found. Relevancy criteria were developed to provide a basis for judgment. These criteria were modified as problem cases were identified.

6.2 Findings

Number of newspapers

Table 3, below, displays the number of newspapers used to search for articles in each state. The number of newspapers searched offers a partial reflection of the total number of newspapers in the state; for example, Connecticut and California each has more newspapers than most other states in the nation.

Table 3: Number of Newspapers by State

State	Number of Newspapers Used in Search
Arizona	4
California	43
Connecticut	54
Iowa	9
Kentucky	3
Oregon	2

Table 4, below, displays the most common subjects addressed in the articles found in each state. These subjects reflect which issues each state takes into consideration when prevention-related topics are covered in the media. For example, this table suggests that key leaders in Iowa believe that lowering the legal blood alcohol limit from .10 to .08 is an important part of prevention efforts in their state, whereas other states may not share this opinion, since articles on blood alcohol limits did not show up in other state newspapers. Table 4 also may indicate where state definitions of prevention overlap; note that at least four states include after-school programs for children in their discussions on prevention-related topics (the other two may recognize the importance of after-school programs, as well, even if these views were not expressed in newspapers).

Table 4: Number of Articles, by Major Subject Categories by State

State	Violence	Drinking	Drugs	Prop 49	.08 ¹	Funds	Smoking	AS ²	PS ³	Bullying
AZ	1		3					1		
CA	9	5		23		31	2	25	26	
CT		14	9			17		5	9	3
IA					3	2		2		
KY		3								
OR										

¹ Changing the legal blood alcohol limit from .10 to .08

² After-school programs

³ Preschool programs

Summary findings

California had a wealth of editorial topics, but in the two months preceding the elections, coverage of Proposition 49 dominated the other prevention-relevant topics. Most of the editorials took a stance against Proposition 49, stating that it was a good concept but would be poorly executed. In November 2002, Proposition 49 was passed by California's electorate.

Connecticut also had a wide range of topics. In addition to teen drinking and drug use, bullying was a topic of interest in Connecticut that was not found in other states. School readiness also was a prevalent issue, as were program budget cuts.

Iowa's most significant prevention-related topic was lowering the blood-alcohol limit from .10 to .08; lowering the legal limit would not only serve as a potential deterrent to driving while intoxicated, it also would bring the state into compliance with federal regulations for obtaining funding. Iowa papers also focused on state budget cuts for youth development and published an article describing a teen drug and alcohol survey.

Kentucky's few articles all focused on underage drinking, with special focus on binge drinking and strategies to prevent underage drinking.

Arizona covered a variety of topics within few articles. These topics included drugs, domestic violence, and the D.A.R.E. program.

Oregon papers did not publish any prevention-focused articles. One article contained information on protecting children from violence, but this article did not meet the definition of *prevention* used in screening retrieved articles.

7. FACILITATORS TO THE EMBEDDING INITIATIVE

The following section describes factors reported by the embedding teams as facilitating their efforts to embed prevention.

7.1 Facilitating Factors

The following factors were found in the first year evaluation to support efforts to embed prevention and continued to play an important role during the second year:

Top Leadership Support

Leadership support was perceived to be a critical facilitating factor by states whose teams had strong support from leaders such as the governor, key legislators, agency leaders, and others. Four of the six state teams frequently cited some level of support for prevention efforts from their governor during the past year (one less than the prior year). Many participants expressed concern about the stability of these efforts as new administrations take over state government during Year Three. Strong leadership support for prevention was associated with higher levels of communication about prevention and increased legitimacy of prevention efforts. It also had a direct impact on the type and success of policy changes proposed by legislators and state agency heads.

Policy Entrepreneurs

A driving force behind past and current accomplishments identified by the evaluation team has been the work of policy entrepreneurs (Mintrom, 2000), generally dedicated civil servants who have developed the skills and relationships to work with state government leaders to promote and implement policy innovations. These individuals have held several positions in state government, often in different departments, and have relationships with all levels of management across departments and agencies. They have learned to “work the system” in order to make things happen. These individuals serve as both formal and “shadow” leaders of the state teams. They have continued to play an important role in state efforts. In some states, where the embedding team’s work is more established, these “entrepreneurs” have taken a less visible role and have been watching at a distance in case their help is needed.

Existing Relationships among State and Local Agencies

Relationships among agencies have been a critical facilitator to change. All the state teams cited existing relationships—among state agencies, between state and local organizations, with policy makers, and among themselves—as critical to their efforts. Many embedding team members have worked together over time, and all the state teams cited developing new relationships and deepening existing ones as important by-products of the Embedding Initiative. Embedding teams from smaller states felt that their limited population sizes facilitated establishing relationships. Relationships were perceived to facilitate

communication and the ability of state teams to accomplish cross-agency agendas. Embedding teams continue to make relationship building (and maintenance) major informal and formal activities.

State Experience with Crime and Violence

Policy makers' and citizens' reactions to school shootings, high-profile youth murders, and high crime rates appear to be shifting over time. Although these reactions had led to "tough on crime" measures in some states in the past, many participants felt they were now contributing to an increased interest in prevention. There also is a new concern over the high cost of incarceration. As a result, policy makers and the public appear to be more willing to consider prevention as a policy option. The costs associated with these issues have been a driving force for an increased attention to and debate over prevention in some states, especially because of their current fiscal crises.

Access to Knowledge on Prevention

Access to information on effective and cost-effective prevention strategies was seen as critical to efforts to promote prevention. Many of the participants mentioned an increase in the availability of information regarding best practices in prevention from federal and state projects and other sources as factors that promoted prevention. Such information served to sharpen the focus of prevention efforts, improve communication, and increase the legitimacy of prevention efforts. As noted previously in this report, there has been a significant increase in the number of educational programs to increase the knowledge of effective prevention programs during Year Two.

Administrative and Legislative Policy Mandates

Legislation and administrative policies greatly enhanced the embedding process. When systems-change efforts were mandated by legislation, the forces of law created strong incentives for state agencies and other stakeholders to act. The legislative mandate provided credibility and acted as a catalyst to the efforts. In Connecticut and Oregon, executive orders by the governor contributed to the embedding efforts. Policy decisions by state agency heads also made significant contributions.

However, some states, such as Kentucky and Iowa, fearing that there was not sufficient legislative support for prevention programs, chose to continue developing relationships in an informal way, rather than making legislators aware of programs that might be targeted for cuts. Further, the California team reported that, despite public support for Propositions 10, 36 and 49, there was little support for change in the legislature.

There is a down side during times of fiscal problems. State efforts based primarily on funding are very susceptible to changes in economic conditions as will be discussed later in this report.

In addition to the facilitating factors identified during the first year, two others emerged during Year Two:

Nongovernmental and Quasi-governmental Facilitators

In four of the six states, independent nongovernmental organizations and/or consultants facilitated and coordinated the embedding process. In a fifth state, a state-chartered commission was the lead organization. These organizations, while seen in most cases as having less political clout than governmental entities, were effective because of being seen as independent and less political. Often, they were better able to bridge relations among state agencies than were agencies within the executive branch.

Focused and Incremental Agendas

State Teams reported in almost all cases the importance of picking the right focal points for advancing the embedding effort, then being able to build upon these points. Themes such as youth development and an emphasis on violence prevention were viewed as opportunities to embed prevention. Teams built upon such themes, linking these existing themes to other initiatives they wished to promote.

Other Changes Since the Year One Report

There were three facilitating factors from last year there were mentioned less often; most likely because participants believed they are historical facilitators already known to the evaluation team:

- Lessons learned and legitimacy from past efforts;
- Balance of power between state and local governments; and
- National dialogue about prevention.

7.2 Benefits from this Initiative

State embedding teams identified a consistent range of benefits of participating in the Embedding Prevention Initiative in both years of this evaluation:

Prestige of Participating in a National Initiative

Embedding teams reported that participating in a national effort provided additional credibility to their efforts to promote prevention in their respective states. The Initiative, in effect, brought a national banner to state efforts. Most of the state teams believed that the support of a national organization such as NCPC significantly contributed to the perceived legitimacy of their state efforts. Several states received letters of support for grant applications and state initiatives, such as a letter endorsing Connecticut's Bill 886 which supported the State Prevention Council and the development of investment priorities. In California, NCPC testified before the Little Hoover Commission in support of prevention efforts.

New Language and Approaches

The NCPC Embedding Initiative allowed states to describe their efforts with new language and through a new framework. These changes resulted in new attention to "old"

issues, and the establishment of new partnerships within existing efforts. New language served to increase communication about efforts, to bring in new constituents, and to increase the legitimacy of efforts. As an example, the various partners in Iowa agreed that ‘prevention is youth development and youth development is prevention,’ thus linking agencies that previously had differing perspectives.

Flexible Funds and Direction

Most of the embedding teams reported that the ability to use NCPC funds in a flexible manner was helpful. They were pleased that NCPC allowed them to shape their own directions and efforts, rather than imposing restrictions on team approaches to embedding prevention. The lack of restrictions enabled embedding teams to fill gaps in existing efforts and to direct resources as needed. Most often, funds were used to facilitate and support the embedding teams. States, such as Oregon, with freezes on travel were able to use NCPC funds to attend conferences and workshops that benefited prevention activities of the state.

Not Driven by Funding

Most of the funds provided under the Initiative were used to facilitate or otherwise support state teams. Availability of funding for this purpose was considered rare. Initiative funding was relatively low, as compared to funding provided through other similar efforts occurring in several states (e.g., State Incentive Grants provided by the Center for Substance Abuse Prevention). Embedding teams found it easier to focus on building relationships and pursuing efforts in the best interests of their respective states, because they did not have to deal with how to spend large amounts of money. Kentucky noted that in the past, funding and the competition for funding had gotten in the way of cooperation.

Opportunities to Learn from Other States

All state Teams commented on the value of learning from the experience of other Teams, reporting that such learning provided both personal and practical support. The meetings that brought state embedding teams together provided a forum to facilitate this learning. Teams reported that these meetings helped increase participants’ knowledge and skills regarding prevention and systems-change efforts. Additionally, NCPC supported peer-to-peer meetings such as the Oregon Prevention Conference which brought together agencies and communities around issues of comprehensive physical and behavioral health risk prevention to be implemented under Senate Bill 555.

Technical Support Provided

Overall, the embedding teams found that the resources provided by NCPC were helpful. They appreciated NCPC’s collection and synthesis of large quantities of information: many participants found it difficult to manage and learn from all the national information sources, and NCPC screening made this large supply of information more accessible to state team members. Teams also stated that it was helpful to have a direct link to someone at a national office. Individual discussions with NCPC staff helped several embedding team members gain better perspectives on their efforts. Informational conference calls with guest presenters on relevant topics were well-attended and valued.

8. CHALLENGES TO THE EMBEDDING INITIATIVE

This section describes challenges encountered by the embedding teams in their efforts to embed prevention; efforts were greatly affected by state context, especially economic and other trends. Generally, the challenges of Year One were still present in Year Two, though, in most cases, to a lesser extent

Worsening Fiscal Condition of States

The dominant and overarching challenge in both Year One and Year Two resulted from the major financial problems facing the states; these problems only increased in magnitude during Year Two. While, as noted previously, state embedding teams experienced some success in obtaining and maintaining federal funds, states lost significant amounts of their own funding. In many states, the federal government is the major source of funding for crime, violence, and substance abuse prevention; embedding team members reported a substantial amount of time spent protecting existing efforts and structures.

The extent to which fiscal crises have affected states does vary. Some state representatives reported that the success of their embedding would not require new funding, but rather, improvements in the relationships and cooperation around the use of existing funds. These states had focused on developing changes through informal relational methods (e.g., collaborating on curriculum development) and were more resilient to the financial crises of their state. The state's financial crises have been a greater setback to those states working on formal legislative changes that often require funding. Many interviewees also reported that budget cuts and the threat of significant additional budget cuts undermined cooperation among agencies and, in some cases, increased competition.

All the state teams were concerned that the remaining prevention programs will continue to be at particular risk. Their concerns are based on two main observations. First, prevention is not well protected in state budgets and is relatively easy to cut. Second, in times of crisis, short-term needs often are given priority over long-term prevention efforts. Reduced resources were seen as having a negative effect on state capacity to undertake prevention activities and as potentially moving the attention of communities, leaders, and the public away from prevention. Some interviewees, however, expressed less concern with the budget cuts, noting that much of the state funding for prevention comes from more stable federal sources.

Some states are facing particular problems, such as the Iowa Program Elimination Commission, which has a goal of eliminating non-core governmental functions. While prisons and education are clearly identified as core functions, prevention is often not seen in the same light.

Maintaining Political Support

Most of the state participants considered it difficult to obtain legislative or political support for prevention efforts, though there are exceptions. Even when legislators or governors supported and passed particular legislation or programs, the interviewees stated

that it was difficult to maintain support for initiatives once under way. They attributed this difficulty in part to the short-term incentives of the political system, which discourage efforts that have predominantly long-term payoffs. Term limits on legislators were perceived to exacerbate this short-term focus and to increase the need for ongoing communication and education around prevention. Lack of strong political support was believed to reduce communication regarding prevention in the state as well as the legitimacy of state efforts.

In some cases the embedding teams help maintain continuity of knowledge, regarding policy and politics, that can facilitate advancement of the goals of prevention. The Arizona Embedding Team used its knowledge of the political process to seek the removal of legislation from consideration, so that it could be rewritten with the input of the new administration, which they perceived to be more prevention friendly.

Categorical and Short-Term Funding

All of the state participants felt that fragmented, categorical funding streams from federal and state sources created administrative and technical barriers to systemic change and comprehensive prevention efforts. These requirements often limited stakeholders' abilities to blend monies or combine efforts, resulting in multiple fragmented efforts. Many state prevention efforts are funded by short-term grants. They ebb and flow, depending on grant availability. Short-term grants also make it difficult to ensure that prevention activities will be sustained. They reduce states' capacity to develop comprehensive, coordinated prevention approaches. These funding sources, especially at the state level, became very vulnerable to national and state level economic declines during Year Two.

Iowa has established the Decategorization (Decats) process, whereby local Decats boards are able to direct limited funding streams based on community needs assessments. In a similar way, Oregon is using the planning process at the county level to facilitate the sharing of funds. This provides flexibility, which is particularly important during budget crises.

The Stability of Existing Prevention Systems

The embedding teams all reported that vested interests and concerns about preserving the status quo reduced the willingness of state agency heads to make changes and slowed the process of change. At the same time, state systems did sometimes change at rapid rates. For example, during the first year of the Initiative, the human services departments of two embedding states underwent dramatic restructuring. The embedding teams must contend with both a constantly changing environment and an environment adverse to change.

Access to Information on What Works and Has Promise

It is difficult to advocate for prevention without sufficient information on the effectiveness of strategies (i.e., what has been proven to achieve desired outcomes). Although access to information on what has been shown to work in experimental or quasi-experimental evaluations is needed, given the relatively small number of such evaluations, it is also important to know about strategies and programs that show promise and continue to test them.

Arizona has proposed the introduction and expansion of best practices identified by the BluePrints program. In Iowa, the ICYD website (<http://www.icyd.org>) provides links to best practices. Connecticut Embedding Team members have stated that because of the high education level and business orientation of many of its citizens, best practices must be used if the team is to gain public support.

Insufficient Resources for Implementing System Change

Participants from all states noted that systems-change efforts required additional resources from all relevant agencies. For the most part, resources for these types of activities (e.g., meetings, collaboration, advocacy, etc.) were not allocated within either state or local budgets. The largest resource needed was people's time for collaboration and planning purposes. The grants provided by NCPC significantly helped address this challenge, particularly in facilitating the state team development and collaboration. Several states have used NCPC funds to hire an additional staff person (e.g., Iowa) or consultant (e.g., Kentucky) to facilitate the collaboration process.

Getting Everyone to Participate and Collaborate

The embedding team efforts require collaboration across public and private institutions. In each state, some state and local agencies were reluctant to join. This reluctance was attributed to agency resistance to sharing funds and power, and to change in general. This was particularly true education agencies in some states. Because education often gets support in bad economic times, education officials were often loath to align with programs that might be cut.

Changing Skills and Organizational Capacities

Embedding team members in all the states noted that efforts to plan systems change and maintain such a system require state personnel to develop new knowledge, skills, and organizational capacities. New skills and capacities could include: assessing systems and planning change; developing outcomes-based accountability systems; and planning, implementing, and evaluating comprehensive planning processes. These skills and capacities often are not adequately developed among states and communities. Some states have sought to develop new skills by actively seeking new team members with the specialized skill necessary. In the case of Kentucky, a public relations expert was brought on to the team and a media specialist is being sought. In other states, such as Oregon, conferences and workshops are conducted where peer-to-peer sharing and skill development can occur.

Limited Availability of Data and the Lack of Coordinated Data Systems

All the embedding teams reported that they did not have sufficient data to assess needs and to determine what prevention programs were under way at the local and state levels. The lack of such data created technical challenges to conducting needs assessments, planning programs, and allocating resources. Most of the embedding teams believed that better data would help them make a stronger case for prevention—improving efforts to communicate the importance of prevention and the legitimacy of prevention efforts as well as providing additional evidence to engage communities and develop constituencies. Information on cost effectiveness and benefits were frequently requested.

Connecticut has completed a summary of all government programs involved in prevention, even if not as a primary function. Arizona is well on its way to completion of a state prevention database. Kentucky has the development of a data matrix as a primary goal for Year Three. Further, several states are conducting specialized surveys to gather needed information, such as a police survey in Kentucky and Youth Risk Behavior surveys in Iowa and Arizona.

Prevention and Youth Development Concepts are Difficult to Explain

Defining prevention and youth development presents challenges to the Initiative. All the embedding teams expressed difficulties developing a common language to communicate the meaning of prevention and youth development to stakeholders in the system. This difficulty had a direct impact on efforts to communicate about prevention, the perceived legitimacy of prevention, obtaining legislative support, and efforts to build constituents and engage communities.

Difficulties Marketing Prevention

The embedding efforts are facing a dilemma that confronts all prevention activities-- how do you make the avoidance of problems compelling enough to act on? How can prevention compete for resources and attention when there are people needing treatment, there is a need for greater protection from terrorism, increasing prison costs, and a need to maintain basic services? Prevention does not evoke the fear and concern that other pressing needs do, until there is a tragedy, and even then, public response is limited. State participants suggested that it is important to actively convey to legislators and the public how prevention can be cost-effective as well as in their self-interest.

State agencies do not have the resources or capacity to market prevention and promote healthy development as important state responsibilities. The growing relationship with local public television stations begun in Connecticut has the potential to improve public awareness and support. Further, the Media Roundtable held in January 2003 and the Miss America Anti-Bullying campaign are additional ways that Connecticut is beginning to market prevention. Instead of attempting to gain support by saying that the state desires to change the behavior of violent youths, Connecticut is saying that the government wants to protect the youth of the state. This is believed to be a perspective that all citizens can appreciate.

Limitations on State Government Personnel to Influence Legislation and other Decision-Making Processes

State agency representatives reported that they had limited ability to influence legislation and decision-making processes. The sense of efficacy to make changes and flexibility to change roles are very important among the embedding teams in order to foster systemic changes. The ability to advocate positions and initiatives to legislative and other decision makers is very important. Although there are limits, other state participants have to be able to educate legislators and advocate for prevention. It appears that commissions, by design, have had more ease and capacity for education and advocacy activities. Universities and private organizations can also have the ability to advocate and have been valuable

partners to state agency staff for that purpose. In Kentucky, access to legislators is difficult, so the Embedding Team has begun to develop relationships with legislative aides, who have the expertise and access to influence the legislators.

Underdeveloped Constituency for Prevention

The state embedding teams have not been able to identify and engage a broad range of constituencies for prevention across the state. There are several representatives of agencies, organizations, and elected officials outside of state government among state team members. There have been limited efforts by some state teams to engage greater constituencies, such as National Crime Prevention Coalitions, child welfare and mental health groups, teacher and parent associations, religious organizations, business associations, and public health advocates. Connecticut, through State Prevention Council, is encouraging the Connecticut Conference of Municipalities to examine ways to address prevention legislation at the local level. Some state teams have also held public meetings, but these activities generally have produced few strategies for engaging local groups in state embedding efforts.

Elections and New State Leadership

Four states had gubernatorial elections during Year Two. In two of these four states, new governors were elected; in the other two, the incumbent was reelected. Prior to the elections in these four states, embedding teams tended to remain reluctant to begin any major initiatives, or to expand relations with, or commitments from, administration officials. In the states in which new governors were elected (Arizona and Oregon), embedding team members must establish new relations and educate new staff regarding their efforts. In both cases, the new governors are likely to be sympathetic to embedding prevention; nevertheless, both new governors must establish their administrations, as well as develop relationships and increase their knowledge of the issues, all of which takes time.

9. LESSONS LEARNED

The Initiative has completed its second year. Lessons learned from both years are listed below. These lessons are drawn directly from the ongoing experiences of national and state participants and the evaluation team.

9.1 Lessons for National Support of Embedding Initiatives

National Support Can Sometimes Be a Catalyst and Add Legitimacy for Efforts

All of the embedding teams stated that participation by NCPC, a national organization, brought additional legitimacy to state-level efforts in prevention. NCPC's participation provided a spotlight and added impetus to state-level efforts. NCPC's conferences, their meetings with governors or legislative and administrative leaders have often stimulated and supported state efforts.

Each State Needs to Be Able to Develop Its Own Approach Based on Their Past Efforts and Relationships

State context played a critical role in shaping the development and systemic effects of embedding efforts; the areas in which an embedding team initially focused its efforts depended in large part on the history of prevention efforts in the state, the current state structure and activities, and the relationships among the players who assumed responsibility for the new effort. The broad latitude (i.e., noncategorical model) NCPC provided to state teams allowed the teams to develop their own agendas and to use funding in ways that fit their particular needs and context. This flexibility extended to broad discretion in the use of NCPC funds. Using two states as examples, Kentucky takes a drug abuse and violence prevention perspective and started from scratch. Connecticut, on the other hand, while still interested in drug abuse and violence prevention, is more focused on child development and has a more developed program.

Lead Organization and Team Facilitators Influence the Approach to Embedding, Form Needs to Follow Function

The structural location of the lead organization influenced the approach taken by its Team. Commissions, because of their advisory roles, tended to emphasize policy changes and implementation. Embedding efforts based in an agency appeared to work more directly on interagency collaboration. When organizations outside of state government were engaged, state team activities tended to reflect the lead organization's expertise (e.g., research or training). The lead organization's credibility, capacity, and relations were seen as critical elements for positive outcomes. Many of the persons interviewed noted the importance of selecting the correct lead organization, one capable of handling the functions for facilitating and leading the state embedding efforts, as well as promoting the values and vision of embedding team.

Peer Support Networking Is Helpful and Takes Time to Establish and Maintain

Over the first two years of the Initiative, state teams began to use one another more and more as resources to inform and improve their respective prevention efforts. Development of cross-state learning took time, because the embedding teams had to understand one another's efforts before they could begin to identify linkages. By the end of the first year, however, most of the state teams cited cross-state learning as a valuable component of the Initiative. In Year Two, team participants continued to value the candor, sharing, and real life examples they gained for those exchanges. Telephone, e-mail, and in-person exchanges all encouraged peer support. Face to face meetings at conferences and in other venues were considered most effective. Oregon provides an example of this; their November Prevention Conference, intended for local agencies and communities, was opened to participation by representatives from other state embedding teams.

States Need More Information about Effective and Cost-Effective Practices

In their efforts to promote prevention as a policy of choice, all the embedding teams expressed a need for more information on effective and cost-effective strategies. State representatives recognized the importance of providing this information to leaders, legislators, and the public, as well as the importance of conveying information about other

benefits of prevention and the promotion of well-being. Teams reported that topical conference calls and resource emails provided by NCPD contributed to their knowledge of best practices. State embedding teams expressed a strong need for greater access to information on proven effective strategies as well as formal and informal policies that can embed prevention.

9.2 Lessons for State Teams Trying to Embed Prevention in State Policy and Practice

Build and Maintain Relationships

Many interviewees continued to cite the critical need for collaboration and other cross-agency efforts to promote prevention. Such collaboration was considered essential, given that the causes of social problems cut across agency responsibilities. Orienting the state government to prevention through collaboration is an enormous challenge. Moreover, relationship building takes time, occurring at the individual level in informal ways, then extending to informal and formal relations among agencies and organizations. Tension may occur at points when participants from varying disciplines work together for the first time. Taking time to establish relationships and collaboration, however, produces results; the state teams all reported informal changes in relationships and new efforts established through these relationships. The Iowa Collaboration for Youth Development (www.icyd.org) demonstrates this type of cross-agency cooperation, with partners from government agencies, local organizations, and research organizations.

Combine Formal Policy Changes and Informal Collaborations for the Most Resilient Embedding Strategies

State budget cuts undermined the work of some state embedding efforts that were based on legislative or administrative decisions that would cost the state additional funds. The elimination of these formal programs almost obliterated the effects of the embedding effort to secure the funds. Informal collaborations among agencies were more resilient because they were “not on the radar” of cost conscious legislators or administrators. Successful embedding efforts need to have a diverse collection of formal and informal strategies. The Kentucky Embedding Team was particularly concerned about having a diverse number of strategies to embed prevention. As part of their strategy, they are developing relationships with legislative staff who often maintain their positions, even when the composition of the legislature changes. Thus, they are in a position to help maintain continuity of the embedding effort from legislature to legislature.

Communicate with and Engage the Public

Communicating with members of the public, emphasizing how programs benefit them and those they care about, is necessary. Proposition 49 in California showed how direct communication with the public can activate interest in prevention, in spite of the opposition of opinion leaders such as the state’s major newspapers.

Recruit and Retain Leadership at Multiple Levels

Successful embedding requires support from both formal and informal leadership. Political and bureaucratic leaders provide the decision-making power at a broad level, while

mid-level managers who oversee day-to-day decisions and resource allocation hold knowledge and skills about achieving results at the practical level. Tangible support—not simply nominal support—at both levels of power can contribute significantly to the successful integration of prevention into systemic functioning. In their embedding efforts, state teams engaged an increasing number of higher state government leaders, as well as leaders from local government, nonprofit organizations, and the private sector. Connecticut has attracted active embedding team members from the legislative branch, the executive branch, and the private sector, including health services, social services and the business community. These members represent different bureaucratic levels and are from a variety of different communities and areas of the state.

Attend to the State Context for Successful Planning

State activities and successes depended greatly on the state context—the culture, economic health, and political nature of the state. Success often occurred with understanding of these contextual facilitators and barriers, allowing for planning of activities accordingly. For example, budget crises often resulted in agencies’ focusing on the expedient, sidelining embedding projects which were viewed as optional or a “frill.” Conversely, if political leaders value specific projects, working to tie embedding efforts to these projects could be an important segue to success. In Kentucky, the state’s concern with methamphetamine and oxycontin provide an opportunity for the embedding team to garner support by conducting a meth/oxycontin conference, which was supported by state agencies, and the Kentucky National Guard.

Recognize that Systems Change Takes Time and Resources

Participants from all the states emphasized that the process of making change within the state government is slow and requires considerable time and patience. In addition, collaboration across agencies necessitates spending considerable time on communication and negotiation. Although all embedding teams were gradually pushing forward a systems-change agenda in prevention, they noted that the largest resource needed for systems-change was staff time, and warned that adequate resources were not specifically allocated for this type of work.

Engage People Throughout the State and Local System in Systems-Change Efforts

Systems-change efforts necessitate a wide range of skills (e.g., leadership, advocacy, analysis, communication) and relations. Many of the embedding teams included highly experienced members with diverse skills who helped facilitate their efforts. All the sites agreed that senior leadership support was critical for efforts to promote prevention; implementation of prevention efforts, however, depended upon the participation of state agency staff and local communities. On the basis of their contexts, state teams began embedding at different levels of the system; some started at the top (policy level) and some at the middle (agency level). Regardless of the starting point, it was necessary to access high-level decision makers, as well as those implementing the policies. The first steps reported by state team leaders are to identify who is already out there working on prevention and then build up. Oregon has determined the orientation and priorities of its counties, the depth and quality of programs available in counties, and the risk factors found in each county. Using this information, they can target both funds and technical assistance. They can

also make counties aware of what information and accountability will be necessary for them to receive assistance.

Recognize that a Changed System Requires New Skills Throughout the System

A changed system requires that those implementing the change develop new skills. This is true of embedding teams, as well as of state actors and local stakeholders; efforts must be made to build capacity among all players in the system. Particular agencies always will play a role in implementing aspects of programs, regardless of how much collaboration exists within the state system. Addressing internal capacity building within state agencies, among local stakeholders, and in state teams is critical, even in a cross-agency collaborative effort. Capacity also needs to be developed at the local level to embed state level changes. The Kentucky Substance Abuse Prevention office is currently providing training for each new community based agency that seeks support or funding.

Struggle with Clarifying Vision, Language, and Framework

All the embedding teams struggled with efforts to communicate their agenda to their own members and to others in the state. Several state teams made concerted efforts to formally define their approach. Given the difficulties of defining an abstract concept such as prevention, embedding team members acknowledged that they may never attain full consensus; however, they found value in the conversation itself and reported that conversation facilitated their efforts to communicate both internally and externally.

Focus on Building Systems Capacity, Not Individual Capacity

To embed an approach in state policy and practice requires fundamental change in the structure of state government. Although informal partnerships among individuals are easier to establish than are formal relationships among organizations, the former are more subject to change and are not enough to sustain prevention efforts following personnel or funding changes. To ensure long-term program viability, responsibility for efforts must reside within the system, not with specific individuals or entities. The system must include a strong internal ability to provide ongoing education, networking, and professional development. The developmental progression of embedding may emphasize informal change initially; systemic embedding, however, occurs only with the ability of an advancement to outlive changes in staffing and administration. Oregon's SB 555 and the recent Executive Order mandating cooperation among state agencies provide the state with a structure that will exist, regardless of the level of funding available.

Develop Collaborative Leadership to Promote Collaboration

Many of the embedding teams struggled with the development of leadership for a collaborative effort, slowing their embedding efforts in the pursuit of collaborative leadership. Nevertheless, team representatives described shared leadership as essential.

Engage and Educate the Public

Many interviewees emphasized the need for systematic education campaigns, similar to publicity campaigns launched to sell products. Typically, prevention efforts are fragmented and poorly marketed to decision makers. State teams suggested publicizing

successes, targeting groups with decision-making power, and highlighting the flaws of failing to provide prevention efforts on a broad scale. Recognizing successes not only provides examples of productivity, but encourages stakeholders to believe that continued change is possible, as well. Recognizing that a failed public relations campaign would be disastrous for the embedding effort, Connecticut has convened a media roundtable to organize and optimize future public relations efforts.

Promote Communication among Stakeholders

Given the complexity of the work of embedding prevention, stakeholders in change must inform each other and funders regarding challenges, progress, and strategic planning efforts. Teams used face-to-face meetings, phone conferences, bulletins, and electronic mail to facilitate communication. Websites, such as those owned by NCPC (www.ncpc.org) and ICYD's (www.icyd.org) are also used to facilitate communication among participants.

Use Prevention-Embedding Initiatives to Promote Change in Other Areas

Efforts to embed prevention can provide a good platform to leverage other state changes. Many of the strategies employed to promote prevention by the states (e.g., comprehensive community planning, common requests for proposals, evidence-based programs) are not specific to prevention. Rather, these tools also could advance other changes, such as promoting efficiency, cross-stakeholder dialogue, or treatment. Further, gathering a team of state leaders often produced non-prevention-related changes; the increased discussion of topics among stakeholders, coupled with the spirit of shared commitment to addressing state problems, resulted in leaders identifying ways to address challenges outside of the original scope of the Embedding Initiative. Connecticut Team members reported that they are taking the idea of best practices to their own agencies for use where appropriate.

Engage and Build Constituencies for Prevention

Systemic changes in state functioning require strong constituencies supporting change. Embedding stakeholders must engage and work to build constituencies to support prevention. Organizing efforts may benefit from approaching groups already collaborating around central issues in the state, for example, groups dealing with domestic violence, substance abuse, or gun control. For example, an embedding team collaborated with local Crime Prevention Coalitions to promote their activities to state policy makers. Similarly, developing and utilizing existing comprehensive community efforts could provide an arena to promote action at the local level and to strengthen one's support base for change. Harnessing these common interests can make a powerful argument to policy makers regarding the importance of one's cause.

Strategize in Planning Change Incrementally

Embedding teams must be strategic in planning how to change the system. Team efforts indicated the need to engage in state politics, and ask the hard questions regarding context, allies, and enemies. Seeking the perspective of consultants outside the team's immediate support network, such as in Kentucky, may be a useful tactic. In Kentucky, both

the team leader and the public relations specialist are consultants from outside state government.

10. CONCLUSION

The second year of the Embedding Initiative saw a continuation of both successes and challenges. Embedding teams made significant accomplishments, especially given economic crises in each of the participating states. NCPC contributed to these accomplishments, providing a strong national support system valued as a resource by and for all state teams. In spite of uncertainties regarding national and state funding for their efforts, all embedding team members interviewed expressed an unwavering belief in the continuation of their work.

The evaluation team found converging information that the efforts across five of the six states have continued to embed prevention as it has been conceptualized by participants in this national initiative. The evaluation team was able to see that these states are changing according to the theory of change presented. State embedding teams have targeted activities to affect the levers of change and there have been positive changes in the adoption indicators at the state level. Given the state budget crises, which had a major effect on embedding efforts, the survival of most efforts undertaken by the teams is another indicator of the degree to which prevention is embedded or institutionalized within the states.

The national support provided by NCPC increased the capacity of the state embedding teams in several ways as noted in this report. The embedding teams are still at the early stages of their efforts, with some indication that prevention continues to be adopted, but not sufficiently institutionalized at the state and local levels. These successes, but large and small, showed an increased momentum for almost all state embedding efforts after two years of technical assistance and relatively limited financial support. The continued support by NCPC will further enhance the capacity to embed prevention within these states. The state financial crises may become opportunities for state teams to work together to advance prevention programming and funding at the state and national levels. There are several opportunities to advance this work at the national and state levels as well as advancing the evaluation of such efforts.

Opportunities at the National Level

New national strategies, such as public information and media strategies, need to be further encouraged and supported. The national stature, capacity, and track record of NCPC provides an invaluable platform for a national public information campaign on the importance of increased support for prevention at the state level. This can include public service announcements, editorials, national events and speaking engagements, and other ways to sue national media to draw greater public support.

NCPC can also have a greater impact by linking with similar national efforts to expand the states' participation in this Embedding Initiative. The Advisory Committee for this initiative is a great beginning of a collation that can be the initial leadership for a national movement to provide greater support for prevention as the primary approach for addressing social problems.

The need for useable information on cost effective prevention strategies is generally needed and has been reported as a major barrier. This type of activity is best generated at the national level, but also needs the infrastructure to reach the states and local communities. The Center for Substance Abuse's Center for the Advancement of Prevention Technology with Regional Prevention Centers is a learning opportunity for such an infrastructure. NCPC and its national partners can encourage further funding for the development and dissemination of prevention technology across a number of social problem and service areas. Because of the interrelatedness of these social problems (e.g. crime, substance abuse and violence) and integrated and coordinated approach to this system are essential.

Opportunities at the State Level

State embedding teams have not significantly expanded their relations with the judicial system. This issue was raised in the Year One report. NCPC has encouraged these relations at its semi-annual conferences and through other mechanisms. Collaboration across branches of government may be particularly challenging, and judicial systems may be perceived to have a relative small role in prevention, when in fact their role may be quite significant (e.g. using alternatives to sentencing). Greater effort and engagement of the leaders in the state judicial systems is needed.

Engaging the public and statewide organizing to advocate for prevention are two of the greatest underdeveloped components (Levers of change) of the embedding strategies. There have been some important initial efforts to better understand and engage the public through media (i.e. Connecticut), but a great deal still needs to be done. None of the states have developed a large regularly active statewide advocacy organization that involves numerous local constituents of prevention (e.g. crime prevention, public health, law enforcement, social work, domestic violence, child protection and advocacy, mental health, education practitioners as well as parent, civic, and other voluntary organizations).

Legislators interviewed generally did not believe there was public demand for prevention. Yet public support for prevention has rarely been tapped and there are reasons to believe it can be successful. Two prevention related initiatives in California passed with strong public support, despite the state's poor financial condition and a perceived lack of public support by state agency representatives that were interviewed for this evaluation. These initiatives appear to have been success because of the high level of of the support and organization backing the initiative. The public can be engaged and supportive of increased spending if there is an appropriate strategy.

Rarely did embedding teams initiate or actively support legislation. The evaluation team acknowledges the limits of state agencies in this regard, but also recognizes that this void needs to be robustly filled in order for embedding to have the greatest impact and sustainability. Lessons learned from the tobacco control movement, through such national efforts as the American Stop Smoking Intervention Study Trials (ASSIST), can be very useful in supporting the development of statewide advocacy coalitions to support prevention.

Finally, major informational and research needs at the state and local levels still remain as mentioned previously. A broad spectrum of practitioners, administrators, and legislators have strongly stated the need for a simple comprehensive source for information of proven effective strategies, policies, and prevention methods. They have also expressed the need for information on the cost-benefit effectiveness of different prevention strategies. Information on benchmarks for judging best practices in prevention programming has also been requested. The state capacity to evaluate prevention programming also needs enhancement. There is an equal need for the states to have the capacity to provide assistance to local governments and organizations to obtain and use this information.

Opportunities for Evaluation

The evaluation of initiatives such as this one are generally accepted as daunting, but essential endeavors. This was clearly the message of the Embedding Initiative's Evaluation Advisory Committee convened during the first year. They are large in scope, broad in focus, and difficult to evaluate using traditional evaluation standards and methods. The appropriate methodologies for large systems change evaluations are emerging, however they are still judged by funders and many in the scientific community by standards with limited applicability having been developed for agricultural research. The so-called "gold standard", experimental designs, have been successful at the individual level of analysis, but cannot be applied to efforts whose "subjects" are as large, complex, and limited in numbers as a state. States cannot be assigned to experimental and control conditions with the same validity as individuals. Therefore new methods as well as measures are needed. This initiative provides an opportunity to advance the methods and measures that can be used this type of systems change initiative.

NCPC and its national and state partners can help advance the evaluation of systems change evaluation by educating funders and other policy members on the importance and potential of such evaluations. Funders and their scientific advisors need to be educated on the scientific validity of other evaluation methodologies (e.g. cross case designs). Funders have also approached evaluations of systems change efforts quite paradoxically: while applauding the need for broad-based long term approaches to system changes, evaluations are expected to be focused and show short term results.

There has been little exchange of advances in the methodology and measures for evaluating systems change initiatives. To the knowledge of the evaluation team, there have been no recent national conferences sharing and "cataloging" the advances these methodologies and measures. Presentations on these topics dot the conferences of professional associations. Funders will sometimes convene small "by invitation only" groups. Annual national meetings on the evaluation of systems change for promoting prevention would contribute greatly to the advance our knowledge and these types of evaluations and enhance these initiatives.

The evaluation team has found our work on this initiative to be both challenging and fulfilling. NCPC has engaged the evaluators as part of their learning process and as way to keep them accountable. It has modeled a relationship that has used the evaluation to strengthen national and state efforts through conference presentations and consultation.

NCPC has also insisted on direct feedback, rigorous methods, and honest verifiable information. The evaluation team feels confident that our relationship with NCPC has produced an enhanced initiative and an evaluation of the highest integrity

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Appendix A

Demographic, Economic, and Political Context Tables

Table A. Demographic Characteristics

	Arizona	California	Connecticut	Iowa	Kentucky	Oregon	National
Total Population⁶	5,130,632	33,871,648	3,405,565	2,926,324	4,041,769	3,421,399	281,421,906
Population Growth '90-'00, %	40	14	4	5	10	20	13
National Rank	2	19	47	43	29	11	--
Age¹							
Below 18 Years, %	27	27	25	25	25	25	26
Education¹							
High School Graduate or Beyond, %	81	77	84	88	74	85	82
Bachelor's Degree or Beyond, %	24	27	31	22	17	25	25
Race/Ethnicity¹							
Latino Heritage, %	25	32	9	3	2	8	13
European American, %*	64	47	78	93	89	84	69
African American, %*	3	6	9	2	7	2	12
Asian American, %*	2	11	2	1	1	3	4
American Indian or Alaska Native, %*	5	1	A	A	A	1	1
Two or more races, %*	2	3	2	1	1	2	2
Foreign Born, %	13	26	10	3	2	7	11
Income¹							
Median Household Income	\$40,558	\$47,493	\$53,935	\$38,230	\$33,672	\$40,915	\$41,443
National Rank Per Capita Income	32	14	1	33	45	23	--
Population Living Below Poverty Level, %	16	14	8	11	17	13	13
Urbanicity¹							
Urban Population, %	88	93	79	61	52	70	75

* This value excludes people of Latino descent.

¹ US Census Bureau, 1990.

Table B. Economic Indicators

	Arizona	California	Connecticut	Iowa	Kentucky	Oregon	National
Economic Development Report Card¹							
Overall Performance, 2001	C	C	A	B	D	C	--
Employment Status,²							
In Labor Force, %	61	62	67	70	61	65	66
Unemployment Rate, %	7	4	4	4	6	4	5

¹ This is an economic development report based on more than 70 economic indicators. The Performance measure looks at Employment, Earnings and Job Quality, Equity, Quality of Life, and Resource Efficiency. Corporation for Enterprise Development, n.d..

² US Census Bureau, 2000

Table C. Government Infrastructure

	Arizona	California	Connecticut	Iowa	Kentucky	Oregon
Budget¹						
State Expenditures, 1999						
Education, %	33	33	22	37	33	31
Public Welfare, %	17	25	20	20	24	20
Health and Hospitals, %	6	7	10	8	6	7
Highways, %	11	4	5	12	9	7
Corrections, %	5	3	3	2	2	4
Other, %	28	28	40	21	26	31
Per-Capita Expenditure, 1999	\$2,988	\$4,033	\$4,635	\$3,597	\$3,731	\$4,211
Revenue from Federal to State Government, '98-'99	\$3,393,482	\$31,149,968	\$3,141,429	\$2,377,788	\$3,847,378	\$3,469,463
Revenue from Federal to Local Government, '98-99	\$558,885	\$4,804,840	\$309,467	\$219,611	\$331,155	\$737,459
Executive						
Political Party Affiliation	Republican	Democrat	Republican	Democrat	Democrat	Democrat
Years in Office (as of 2002)	5	3	7	3	7	7
Legislative						
General ²						
Bicameral General Assembly	Annually	Year round two-year session with recess	Annually	Annually	Annually	Biennially
Term Limits	Yes (4 terms)	Yes (Senate 2; House 3)	No	No	No	No
House of Representatives						
Number & Political Party Affiliation ³	60 (36 R; 24 D) [¥]	80 (50 D, 30 R)	151 (100 D; 51 R)	100 (56 R, 44 D)	100 (66 D, 34 R)	60 (32 R, 27 D, 1 I)
Term Length in Years	2	2	2	2	2	2
Senate						
Number & Political Party Affiliation	30 (15 R; 15 D)	40 (26 D, 14 R)	36 (21 D; 15 R)	50 (30 R, 20 D)	38 (20 R, 18 D)	30 (16 R, 14 D)
Term Length in Years	4	4	2	4	4	4

¹ US Census Bureau, 2000

² Congressional Quarterly, 1999. <http://www.state.ct.us/>

³ National Conference of State Legislators, 2001.

[¥] R = Republican; D = Democrat; I = Independent.

Table D. Adult Crime, Incarceration, and Substance Use

	Arizona	California	Connecticut	Iowa	Kentucky	Oregon	National
Crime Rates, 2001¹							
Crime Index Rate	6077	3903	3118	3301	2938	5044	4161
National Rank	50	22	11	15	8	42	--
Incarceration Rates							
Under Jail Supervision Rate, 1999 ²	224	284	--	110	396	227	256
Incarceration Rate, 2000 ³	515 ¹	474	398 ⁺	276 ¹	373	316	478
Substance Use							
Smokes Cigarettes Currently, 2000, % ⁴	19	17	20	23	31	21	23
Had 5 or More Drinks on an Occasion, 1999, % ⁴	26	26	24	33	29	24	29
Alcohol Consumption Per Capita, 1998 ⁵	2.6	2.2	2.2	1.9	1.7	2.3	2.2

¹ Number of reports of murder, non-negligent manslaughter, forcible rape, robbery, aggravated assault, burglary, larceny-theft, motor vehicle theft and arson per 100,000 residents. FBI Uniform Crime Report, 1999.

² Rate of people in jail per 100,000 residents. Bureau of Justice Statistics, 2001.

³ Rate of people in prison per 100,000 residents. Bureau of Justice Statistics, 2001.

¹ Population figures are based on custody counts.

⁺ Prisons and jails form one integrated system. Data include total jail and prison population.

⁴ Center for Disease Control, n.d.

⁵ Gallons of ethanol, based on population age 14 and older. National Institute on Alcohol Abuse and Alcoholism, n.d.

Table E. Youth Risk Indicators

	Arizona	California	Connecticut	Iowa	Kentucky	Oregon	National
Deaths, 1998							
Death Rate by Accident, Homicide, & Suicide ¹	67	47	42	46	62	52	54
National Rank	34	12	7	11	31	19	--*
Juvenile Offenders							
Arrest Rate for Violent Crimes, 1999 ²	316	498	339	267	516	203	366
National Rank [§]	30	42	34	22	43	14	--
Rate in Public Facilities, 1997 ³	239	386	436	222	190	319	256
National Rank	27	46	48	20	16	42	--*
Arrest Rate for Driving Under the Influence, 1998 ⁴	95	49	--*	95	--*	73	68
School Achievement							
High School Drop Outs, 1998, % ⁵	17	9	9	7	11	13	9
National Rank	49	23	23	9	36	45	--*
Substance Use Among High School Students, 1999⁶							
Used Cigarettes Frequently, %	26 [§]	27 [§]	15	19	24	11	17
Engaged in Episodic Heavy Drinking, %	45 ^α	30	28	40	37	30	32
Used Marijuana Currently, %	25	26	28	19	24	21	27
Used Cocaine Currently, %	5	5	4	3	4	2	4
Weapon Possession Among High School Students							
Carried a Weapon (e.g., knife, gun, club), %	--*	16	16	15	22	14	17

¹Rate per 100,000 youth ages 15-19. Annie E. Casey Foundation, 2001.

²Rate for every 100,000 Persons aged 10-17. OJJDP, 2000.

[§] Four states are without data so the ranking is out of 46.

³Rate per 100,000 youth aged 10 through the upper age of original juvenile court jurisdiction in each State. OJJDP, 1997.

⁴Rate for every 100,000 persons aged 10-17. OJJDP, 2001

* Data not available at time of inquiry.

⁵Rate for youth aged 16-19. Annie E. Casey Foundation, 2001.

⁶ Arizona information from Arizona Criminal Justice Commission, n.d.; California information from California School Health Connections, 1999; Oregon information from Oregon Department of Public Health, n.d.; and Connecticut, Iowa, Kentucky and National information from Center for Disease Control, 2000.

[§] Percent of high school students reporting use in the last month.

^α High school students reporting having had one or more drinks on one or more occasions in the last 30 days.

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