





Community Readiness Results 2019



iribai Prevention initiative





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Tri-Ethnic Community Readiness Report

Report Date: April 8, 2019

The Tribal Prevention Initiative (TiPI) facilitated the Tri-Ethnic Center for Prevention Research's Community Readiness Assessment (CRA) tool¹ and process in February 2019. TiPI conducted eleven interviews with key respondents regarding the following two issues identified in the TiPI grant.

- 1. Binge Drinking Ages 12-20
- 2. Prescription Drug Misuse and Abuse Ages 12-25

Each of the issues noted above were scored on four dimensions. The key questions for each dimension are as follows:

Community Knowledge of Efforts

How much does the community know about current programs and activities?

Leadership

What is leadership's attitude toward addressing the issue?

Community Climate

What is the community's attitude toward addressing the issue?

Community Knowledge of the Issue

How much does the community know about the issue?

The results of this report give the community readiness levels for each of the three issues as well as goals and general strategies appropriate for each level in order to move prevention efforts forward.

See the Appendices for an explanation of the Stages of Community Readiness.

¹ For more information on the Community Readiness Assessment Tool see the Appendices.



Issue: Binge Drinking Ages 12-20

Overall Community Readiness Score: 3.49 Vague Awareness

Most feel that there is a local concern, but there is no immediate motivation to do anything about it. Statements that are often true for communities at this stage include the following.

- •A few community members have at least heard about local efforts, but know little about them.
- •Leadership and community members believe that this issue may be a concern in the community. They show no immediate motivation to act.
- •Community members have only vague knowledge about the issue (e.g. they have some awareness that the issue can be problem and why it may occur).
- •There are limited resources (such as a community room) identified that could be used for further efforts to address the issue.

Scores by Dimension Binge Drinking

	Readiness Level	Readiness Stage	Description
Dimension A (Community Knowledge of Efforts)	3.71	Vague Awareness	Some community members have any knowledge about local efforts addressing the issue. Community members may have misconceptions or incorrect knowledge about local efforts (e.g. their purpose or who they are for).
Dimension B (Leadership)	3.63	Vague Awareness	Leadership believes that this issue may be a concern in the community. It may not be seen as a priority. They show no immediate motivation to act.
Dimension C (Community Climate)	3.55	Vague Awareness	Some community members believe that this issue may be a concern in the community, but it is not seen as a priority. They show no motivation to act.
Dimension D (Community	3.13	Vague Awareness	At least some community members have vague knowledge about the issue, having heard of the issue, but little else. Among some community members, there may be misconceptions about the issue. Community members may be somewhat
Knowledge of Issue)			aware that the issue occurs locally.
Average	3.49	Vague Awareness	Most feel that there is a local concern, but there is no immediate motivation to do anything about it.



Actions for increasing the readiness level to initiate programs/efforts

Typically, it's best to target actions to the dimensions with the lowest readiness levels first as these low readiness levels will be obstacles in achieving your goals. Raising the lowest dimension's level of readiness would increase all other dimensions at the same time even if they have higher ratings.

The community's lowest dimension score is a 3.13 for Dimension D (Community Knowledge of the Issue).

Here are some example actions recommended by the community readiness model for readiness levels up to stage 3:

No Awareness

- •One-on-one visits with community leaders and members. Pay particular attention to the details of these visits (message, communicator, etc.)
- •Visit existing and established unrelated small groups to inform them of the issue.
- •Get individuals in your social network excited and solicit their support be creative! Give them ideas and information that they can post on their Facebook page or other outlets.
- •Collect stories of local people who have been affected by this issue in this community and find creative ways to disseminate these.
- •Conduct an environmental scan to identify the community's strengths, weaknesses, opportunities, and threats.

Denial/Resistance

- Continue actions from previous stage.
- Put information in church bulletins, club newsletters, respected publications, Facebook, etc.
- •Distribute media articles that highlight issue in the community.
- •Communicate strategically with influencers and opinion leaders.

Vague Awareness

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- · Continue actions from previous stages.
- Present information at local community events and unrelated community groups. Don't rely on just facts. Use visuals and stories. Make your message "sticky".
- · Post flyers, posters, and billboards.
- Begin to initiate your own events (e.g., potlucks) to present information on this issue. But they must be fun or have other benefits to potential attendees.
- Publish editorials and articles in newspapers and on other media with general information but always relate the information to the local situation.



Issue: Prescription Drug Misuse and Abuse Ages 12-25

Overall Community Readiness Score: 3.51 Vague Awareness

Most feel that there is a local concern, but there is no immediate motivation to do anything about it. Statements that are often true for communities in this stage include the following.

- •A few community members have at least heard about local efforts, but know little about them.
- •Leadership and community members believe that this issue may be a concern in the community. They show no immediate motivation to act.
- •Community members have only vague knowledge about the issue (e.g. they have some awareness that the issue can be problem and why it may occur).
- •There are limited resources (such as a community room) identified that could be used for further efforts to address the issue.

Scores by Dimension Prescription Drug Misuse and Abuse

	Readiness Level	Readiness Stage	Description
Dimension A (Community Knowledge of Efforts)	3.39	Vague Awareness	Some community members have any knowledge about local efforts addressing the issue. Community members may have misconceptions or incorrect knowledge about local efforts (e.g. their purpose or who they are for).
Dimension B (Leadership)	3.81	Preplanning	Leadership believes that this issue may be a concern in the community. It may not be seen as a priority. They show no immediate motivation to act.
Dimension C (Community Climate)	3.03	Vague Awareness	Some community members believe that this issue may be a concern in the community, but it is not seen as a priority. They show no motivation to act.
Dimension D (Community Knowledge of Issue)	3.82	Vague Awareness	At least some community members have vague knowledge about the issue, having heard of the issue, but little else. Among some community members, there may be misconceptions about the issue. Community members may be somewhat aware that the issue occurs locally.
Average	3.51	Vague Awareness	Most feel that there is a local concern, but there is no immediate motivation to do anything about it.



Actions for increasing the readiness level to initiate programs/efforts

Typically, it's best to target actions to the dimensions with the lowest readiness levels first as these low readiness levels will be obstacles in achieving your goals. Raising the lowest dimension's level of readiness would increase all other dimensions at the same time even if they have higher ratings.

Your communities lowest dimension score is a 3.03, Dimension C (Community Climate).

Here are some example actions recommended by the community readiness model for readiness levels up to stage 3:

No Awareness

- •One-on-one visits with community leaders and members. Pay particular attention to the details of these visits (message, communicator, etc.)
- •Visit existing and established unrelated small groups to inform them of the issue.
- •Get individuals in your social network excited and solicit their support be creative! Give them ideas and information that they can post on their Facebook page or other outlets.
- •Collect stories of local people who have been affected by this issue in this community and find creative ways to disseminate these.
- •Conduct an environmental scan to identify the community's strengths, weaknesses, opportunities, and threats.

Denial/Resistance

- Continue actions from previous stage.
- Put information in church bulletins, club newsletters, respected publications, Facebook, etc.
- Distribute media articles that highlight issue in the community.
- •Communicate strategically with influencers and opinion leaders.

Vague Awareness

- Continue actions from previous stages.
- Present information at local community events and unrelated community groups. Don't rely on just facts. Use visuals and stories. Make your message "sticky".
- ·Post flyers, posters, and billboards.
- •Begin to initiate your own events (e.g., potlucks) to present information on this issue. But they must be fun or have other benefits to potential attendees.
- Publish editorials and articles in newspapers and on other media with general information but always relate the information to the local situation.



Comparing Changes in CRA Scores

Using historical TiPI data, we compared CRA scores from 2017 and 2019. Scores indicate an increase in community readiness to support prevention to address binge drinking/underage drinking and prescription drug abuse.

Binge Drinking CRA Scores by Year

	2017	2019
Knowledge of Efforts		
	1.83	3.71
Leadership	3.32	3.63
Community Climate		
	3.24	3.55
Knowledge of Issue		
	4.08	3.13
Overall Binge		
Drinking CRA Score	3.12	3.49

Figure 1 shows a 11% overall increase in CRA scores to address binge drinking from 2017 to 2019 (3.49 vs. 3.12).

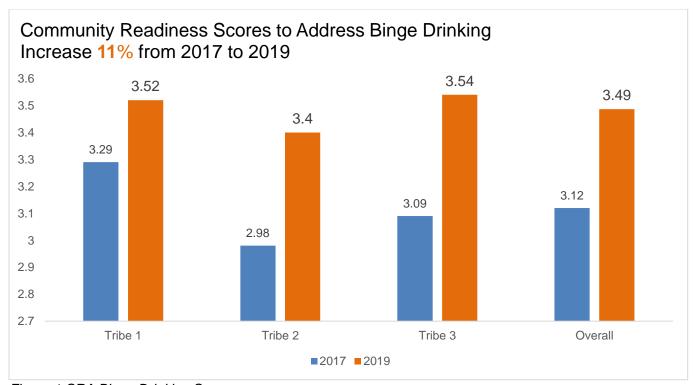


Figure 1 CRA Binge Drinking Scores



Prescription Drug Abuse and Misuse by Year

	2017	2019
Knowledge of Efforts		
•	2.20	3.39
Leadership	3.63	3.81
Community Climate		
-	3.48	3.03
Knowledge of Issue		
	3.77	3.82
Overall Rx Score		
	3.27	3.51

Figure 2 shows a 7% overall increase in CRA scores to address prescription drug misuse and abuse from 2015 to 2019 (3.51 vs 3.27).

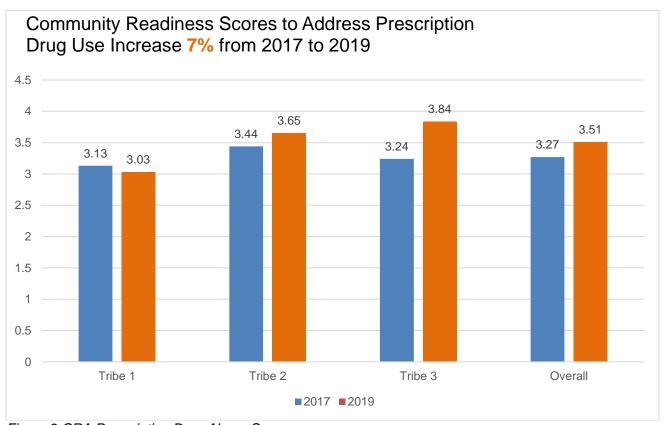


Figure 2 CRA Prescription Drug Abuse Scores



Appendix

What is the Tri- Ethnic Community Readiness Model?

The Community Readiness Model is a method for assessing the level of readiness of a community to develop and implement prevention and other intervention efforts.

It defines nine stages of Community Readiness ranging from "no awareness" of the issue to "high level of community ownership" of the issue. A complete list of the Stages of Community Readiness and explanation of each stage can be found at the end of this report.

The Community Readiness Model was developed by the Tri-Ethnic Center for Prevention Research at Colorado State University based on extensive research and testing in communities. Its validity and reliability have been demonstrated in numerous communities and for a wide range of issues.

The Community Readiness Model identifies specific characteristics related to different levels of problem awareness and readiness for change. The model is a step-by-step system for developing an effective prevention strategy that gives a clear map of the prevention/intervention journey. It is also issue-specific, community-specific, culturally specific and, most important, quantifiable.

The Community Readiness Model process includes:

- 1. Identifying the issue(s).
- 2. Defining the community.
- 3. Conducting key respondent interviews.
- 4. Scoring the interviews to determine readiness level

What are the four dimensions of community readiness that were used?

Community readiness is multi-dimensional and reflect key factors that influence a community's preparedness to take action on an issue. The four dimensions that were used for this assessment include:

- 1. Community Knowledge of Efforts
- 2. Leadership
- 3. Community Climate
- 4. Community Knowledge about the Issue

A community can be at different stages for each of the dimensions. All dimensions are used to obtain a final community readiness score for the particular issue being addressed. However, the individual dimensions are more telling when making the decision where and how to develop your strategies.



What is a key respondent and what is a key respondent interview?

A *key respondent* is an individual who is knowledgeable about the community, but not necessarily a leader or decision-maker. He/she is involved in community affairs and knows what is going on. Using a cross-section of individuals ensures that a more complete and accurate measure of the level of community readiness for the issue in question can be obtained.

Key respondent interviews for this assessment encompassed 13 questions per issue for a total of 26 for the entire interview, and 11 key respondents were interviewed.

The interview questions provided information about *four dimensions of the community readiness* for the targeted issues. The interviews were recorded and transcribed, then scored.

Scoring

Interviews are scored one at a time, and each is scored separately by two people following specific instructions. The various dimensions are identified based on statements and references in each interview, and each dimension receives a score from 1 to 9 according to a dimension-specific scale. Once an interview has been scored twice, the scorers meet to review and to arrive at a consensus score for each dimension for each interview. The consensus scores for each dimension are then averaged across all interviews from a particular community, resulting in four dimension-specific scores for each community. These are then averaged across the four dimensions, resulting in a final community readiness score which indicates the specific stage of readiness for a particular issue in a particular community.



Stages of Community Readiness TiPI

STAGE	DESCRIPTION
1. No Awareness	Issue is not generally recognized by the community or leaders as a problem (or it may truly not be an issue).
2. Denial / Resistance	At least some community members recognize that it is a concern, but there is little recognition that it might be occurring locally.
3. Vague Awareness	Most feel that there is a local concern, but there is no immediate motivation to do anything about it.
4. Preplanning	There is clear recognition that something must be done, and there may even be a group addressing it. However, efforts are not focused or detailed.
5. Preparation	Active leaders begin planning in earnest. Community offers modest support of efforts.
6. Initiation	Enough information is available to justify efforts. Activities are underway.
7. Stabilization	Activities are supported by administrators or community decision makers. Staff are trained and experienced.
8. Confirmation/ Expansion	Efforts are in place. Community members feel comfortable using services, and they support expansions. Local data are regularly obtained.
9. High Level of Community Ownership	Detailed and sophisticated knowledge exists about prevalence, causes, and consequences. Effective evaluation guides new directions. Model is applied to other issues.

