



SAPST evaluation survey results

Moorhead – June 2011

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Introduction

Wilder Research, with funding and assistance from the Minnesota Department of Human Services Alcohol and Drug Abuse Division (ADAD) and in collaboration with the Regional Prevention Coordinators (RPCs), is conducting an evaluation of the Substance Abuse Prevention Specialist Training (SAPST) to assess participant changes in knowledge, overall satisfaction with the training, and suggestions for improvements. The goal of SAPST is to assist participants to design and implement scientifically defensible prevention strategies. As a result of participating in this training, participants will be better able to:

- Understand the history of substance abuse and substance abuse prevention efforts in the U.S.,
- Define science-based prevention and understand its relevance,
- Identify effective prevention principles, programs, and strategies that have been evaluated using the scientific process,
- Use a systematic, scientific process to build effective prevention programs, and
- Determine the effectiveness of existing programs using the criteria described in the training.

The Minnesota Prevention Resource Center (MPRC) coordinates the logistics for the SAPS trainings conducted across the state, funded by and in collaboration with ADAD, and in collaboration with the RPCs. The RPCs conduct the trainings across the state.

Evaluation design

Because SAPST is an intensive 40-hour training, it was necessary to develop an evaluation that solicited feedback from participants at different stages of the training. The four components include information collected at the time of training registration; a daily survey; an overall survey; and a follow-up survey two months after the training. The evaluation gives participants an opportunity to confidentially offer their opinions on the training as a whole, including aspects of the training that participants find most helpful and areas where trainings could be improved. Trainers and other stakeholders felt it was important to gather feedback daily about specific training modules, as well as feedback about the training overall. Stakeholders were also interested in learning how training participants integrated SAPST into their work upon completion of the training.

In June 2011, the RPCs led a five-day SAPS training in Moorhead, Minnesota. This report summarizes the findings from three of four evaluation components, including: registration, overall end of training, and a two month follow-up. Daily evaluations are reviewed daily by trainers and modifications are made to the following days based on any feedback received. Daily evaluations are not reported in this report.

Characteristics of training participants

Most participants were female (73%) and there was a wide range of ages. Participants identified as White (73%), American Indian or Alaska Native (7%), or Black/African American (7%) (Figures 1-4).

1. Gender (N=15)

	% of participants
Female	73%
Male	20%
Refused to answer	7%

2. Age (N=15)

	% of participants
Under 18	-
18-21	7%
22-29	13%
30-39	13%
40-49	20%
50-59	20%
60 or older	13%
Refused to answer	14%

3. Race (N=15)

	% of participants
American Indian or Alaska Native	7%
Asian	-
Black/African American	7%
Native Hawaiian or Other Pacific Islander	-
White	73%
Refused to answer	14%

4. Ethnicity (N=15)

	% of participants
Hispanic	-
Not Hispanic	80%
Refused to answer	20%

Registration feedback

Before the training began, participants were asked what about their role/occupation, whether they were a member of a community coalition and the type areas they had experience doing prevention work. Many respondents (43%) indicated they were from an organization involved in reducing ATOD use, followed by schools (28%), and youth-serving organization (21%) (Figure 5).

Participants also identified their previous ATOD experience. Two-thirds (64%) of participants indicated experience with prevention program planning; half (50%) had previous experience with implementing prevention programming and seeking funding for prevention. A number of participants (36-43%) also had experience providing direct services to youth, community organizing, and working 'behind the scenes'. Fewer (7%) had experience with provide direct prevention to adults (Figure 6).

5. Role/Occupation (N=14)

	% of participants
Other organization involved in reducing ATOD use	43%
Schools	28%
Youth-serving organizations	21%
State, local, or tribal government	14%
Law enforcement agency	7%

6. ATOD Prevention Experience (may choose multiple areas)

	Percent of participants
Prevention program planning	64%
Implementing prevention programming	50%
Seeking funding for prevention programming	50%
Direct prevention service to youth	43%
Community organizing	43%
Working 'behind the scenes'	36%
Providing treatment services	29%
Direct prevention services to adults	7%
Other: Suicide prevention	7%
Other: Teaching, law enforcement	7%

Participants were also asked why they choose to attend the SAPS training and what they hoped to learn. Many participants mentioned expanding their knowledge around prevention and the recommendation by others as reasons for attending. Participants were looking to learn specific skills including community education tools, ways to lead trainings, effective prevention tools, and information for future classes (Figures 7 & 8).

7. Why did you choose to attend the SAPS training? (N=15)

It was recommended to me by [RPC]. I am currently in a new position and think it will be beneficial to me

To strengthen our program and increase our ability to reach the teens "before".

I feel that this training is specific to my current position as a school based Chemical Dependency Practitioner. IN the setting of 12-19 year olds in a school, I feel that the emphasis should be on early intervention and prevention as a treatment and recovery. I feel that all 8 modules will assist me in being a more affective Practitioner.

I think it's important for our community to have a cohort of people who are on the same page as far as prevention and prevention strategies go.

I am involved in the field of prevention and a member of the Bemidji Area Prevention Alliance which has a focus on the prevention of substance abuse.

It looks like a valuable training and comes highly recommended by the Clay County Collaborative.

Increase my knowledge of the history of prevention and current, effective practices.

Further my knowledge of substance abuse prevention.

The training looks intensive and thorough. I am a health educator and want the most recent information.

To learn additional information that will help our agency to assist our community in preventing RX drug abuse.

I am working with a broad based collaboration in Crow Wing Co to prevent alcohol abuse by youth (abuse figures are three times the state average).

I would like to gain more information and knowledge regarding evidence based ATOD prevention practices, policies and strategies.

Required.

Valuable information, will consider offering this as a college course at Ridgewater.

I would like to attend SAPST to further my education on ATOD and prevention techniques. I have a high interest in the area of ATOD and the prevention of its use and abuse. As a police officer, I have daily interactions with individuals that are suffering from addictions to ATOD, as well as young people that do not. I have an understanding of the short and long term effects that ATOD have on an individual. ATOD use starts at a young age, I am interested in learning about how community members (police, teachers, counselors, peers, etc.) can do to curb that. I understand that an individual's surroundings, upbringing, and development all factor into a person's decisions when it comes to the use or non-use of ATOD. I am interested in what types of influences, media sources, outreach programs, and other things that patrol officers have at their disposal in reference to ATOD prevention. It is my hope that if I am able to attend this training, that I will be able to use what is taught out on the streets and in further prevention techniques/programs in my community.

8. What do you hope to learn from the SAPS training? (N=12)

Effective programming. Tried and true approaches. Needs of today's teens.

I hope to learn and understand the current adolescent using trends; effective way to intervene in adolescents life's that are experimenting in DAOA and learn how DAOA affect adolescents with other mental health diagnoses.

The language of prevention and strategies that are effective.

Suggestions on effective prevention for substance abuse. I have an interest in best practices and evidence based programming.

Ways to improve effectiveness of current programming, historical context for current efforts, research-based recommendations.

The background of prevention and how to implement prevention into our business model.

I want to learn ways to help my students understand the subject area to a high degree.

Community education tools, ways to identify any problems and safe handling of RX drugs.

Skills and knowledge to lead a county-wide initiative to prevent alcohol abuse by youth and young adults.

I have just coordinated SAPST Training in the state of Ohio to our SPF SIG Sub-Recipient Grantees and I am interested to learn more about how Minnesota implements SAPST Training and the best way to build a similar system of training in our state.

Information for current classes and future classes.

As a police officer, I will be able to use my training in my everyday encounters with people. I will be able to talk with people on a one-on-one basis, as well as in larger groups. I will be able to use my training in different areas that I am involved in (ZAP, Police Explorers, etc.). I will be able to provide valuable tools and information, obtained through this course, to these different groups/individuals, who in turn can provide others with the same information. I will be able to assist outreach prevention groups and programs and assist them in their endeavors. I will not only be able to aggressive enforce the local, state, and federal laws surrounding ATOD, but will also be able to provide people with information that I have obtained in this course. I will be able to provide input on prevention ideas, programs, and discussions to other community members and leaders that may lead to further prevention success.

Overall feedback

Knowledge outcomes

Overall, participants said their knowledge increased across almost all training topics. The greatest percentage of participants indicated that their knowledge increased “a great deal” in the following areas: prevention program planning using SAMHSA’s Strategic Prevention Framework (80%), evaluation (77%), and needs assessments (67%). Over half of participants reported their knowledge increased “a great deal” in the areas of community readiness assessments (60%) risk and protective factors in substance abuse prevention, impact of drugs on adolescent brain development, and developmentally appropriate strategies (53% each). Fewer participants reported this with regard to their knowledge of ethics (39%), the role of media in prevention (33%), cultural context of prevention (27%), program sustainability (27%), and capacity building (20%) (Figure 9).

Overall, the majority of participants said they had learned “a lot” of new information and ideas through the training (67%). The remaining reported learning “some” (13%) and “a little” (20%) new information and ideas (Figure 10).

9. Degree of knowledge increase in specific areas (N=15)

Please indicate the degree to which your knowledge increased as a result of the SAPS training.	A great deal	Somewhat	Not at all	Not Applicable
Prevention program planning using SAMHSA’s Prevention Framework	80%	13%	7%	-
Evaluation	77%	23%	-	-
Needs assessments	67%	27%	7%	-
Community readiness assessments	60%	27%	13%	-
Risk and protective factors in substance abuse prevention	53%	47%	-	-
Impact of drugs on adolescent brain development	53%	40%	-	7%
Developmentally appropriate prevention strategies	53%	40%	-	7%
Media advocacy	47%	53%	-	-
Evidence-based prevention research	40%	60%	-	-
Logic model development	40%	53%	7%	-
Ethics	39%	54%	8%	-
The role of the media in prevention	33%	60%	7%	-
Cultural context of prevention	27%	73%	-	-
Program sustainability	27%	60%	13%	-
Capacity building	20%	67%	13%	-

Note: Row total may vary from 100% due to rounding.

10. Degree of new information/ideas learned through training (N=15)

How much new information or ideas did you receive in the training?

A lot of new information/ideas	67%
Some new information/ideas	13%
A little new information/ideas	20%
No new information/ideas	-

Most helpful areas

When asked about the most helpful aspect of SAPST, participants identified a variety of training topics including adolescent brain development, evaluation, and resources such as SPF and SAMSHA. Three participants mentioned networking opportunities as being very useful (Figure 11).

11. Most helpful aspect of the training (N=14)

Most helpful aspect of the training

Training topics

Adolescent brain development

Human development information.

SPF and all the parts.

The process of beginning a prevention program.

Prevention techniques, effects on development.

Evaluation resources, strong focus on assessment!

Tools/ strategies on evaluation and explain areas in more proficient manner.

Where to get info. SAMSHA, SPF, SIM info.

Manual for future use, meeting RCP.

A review of the big picture- some new resources to use.

Networking opportunities

Have "sisters/brothers" I can contact for more ideas, clarification, experience.

Learning from each other was very helpful.

Getting to know the other participants that I already knew a lot. But it was good to have it all put together.

Other

This training was great for me! I learned tons of information to use at my job!

Suggestions for improvement

Participants were asked to identify additional topics they would like to have discussed during the training. Participants' suggestions included more training on social media, specific populations, and examples of successful projects (Figure 12).

12. Additional topic suggestions (N=6)

Topics would have liked to discuss

Groups that work well with alcohol abuse- responsible drinking.

Information on drugs.

More of what works.

Tried and true activities- especially for trust building and engaging teens.

Using social media as tools in presentations.

Bring in more info/stats on native communities and how to specifically work with them

Participants also provided suggestions. Some examples included having subgroups be grouped by similar population and varying the type of media used in presentations (Figure 13).

13. Suggestions for improvement (N=11)

Suggestions for improving structure of training

Use more media and less lecture; most notable in the media/ad portion of the training.

Too much emphasis on small groups- it got monotonous.

I would have liked to see an example of a "whole" campaign or program in a community- someone's logic model.

Perhaps having subgroups with similar populations connect throughout the training to discuss practical application of information.

Bring in more info/stats on native communities and how to specifically work with them.

Sometimes it seemed as if the RPCs didn't have the experience to expand on the information in their scripts/ on powerpoint. I often thought of amateur training vs professional training this last day.

More consistent breaks.

In small groups certain individuals tend to take over- but I feel everyone did get to be heard.

Do group piece and culture quilt etc. earlier.

Presenters need to project voices.

Provide wireless internet.

Satisfaction

Overall, participants were satisfied with SAPST. All participants “strongly agreed” that they felt comfortable contributing to the discussion. Most participants also “strongly agreed” that there were enough opportunities to ask questions (93%) and that the trainers were knowledgeable (73%). More than half of the participants (60-67%) “strongly agreed” that the information presented in SAPST applies to their work, the information presented was useful, the location was comfortable, the training was well organized and they received sufficient training so that they can apply what they learned to their own work (Figure 14).

14. Overall satisfaction with training (N=15)

How much do you agree or disagree with the following statements?	Strongly agree	Agree	Disagree	Strongly disagree
Overall, I am satisfied with this training	60%	40%	-	-
I felt comfortable contributing to the discussion	100%	-	-	-
There were enough opportunities to ask questions	93%	7%	-	-
The trainers were knowledgeable	73%	27%	-	-
The information presented in SAPST applies to my work.	67%	33%	-	-
The information presented was useful	67%	33%	-	-
The location was comfortable.	67%	27%	7%	-
The training was well organized	67%	20%	7%	-
I received sufficient training so that I can apply what I learned to my own work	60%	33%	7%	-

Note: Row total may vary from 100% due to rounding.

Recommend to others

Each of the 15 training participants said that they would recommend the SAPS training to others. They mentioned that they would recommend the training for new professionals, students and as a refresher for anyone in the ATOD field (Figure 15).

15. Reasons participants would recommend training to other (N=6)

Reasons participants would recommend training to other

Covers everything in prevention.

This is an excellent foundation and/or refresher for anyone in the ATOD field.

Particularly for new professionals.

Even though some of this was a review for me I think it is valuable to put the puzzle pieces together.

Feel team of students would benefit.

Good.

Intention to obtain certification

Ten of the 15 training participants (73%) intended to obtain Certified Prevention Professional (CPP) certification after the completion of the training. A few participants reported that the certification would help with their credibility in their work, and a few others mentioned that it would help them attain future grant funding. One participant reported they did not know if they would obtain CPP certification because of the cost (Figure 16).

16. Reasons participants do or do not intend to obtain CPP certification (N=13)

Reasons participants do or do not intend to obtain CPP certification

Yes, plan to obtain CPP certification

To be able to contribute in my community- prevention strategies.

Job requirement and also for credibility with clients.

Contacts- more knowledgeable.

Funding- hope it will help "get more".

Help with coalition.

Credibility and grant writing.

Wanting to get on the other side of substance use.

Credibility.

Resume.

No, do not plan to obtain CPP certification

Costs too much, unless department paid for it.

N/A

Training follow-up

Using SAPST

Sixteen participants provided email or mail contact information for the follow-up portion of the SAPST evaluation. Participants were contacted via email or mail by Wilder staff to complete a short survey. A total of five participants completed the survey two months after the end of the training, for a response rate of 32 percent. The remaining participants did not respond to the survey. Due to the low response rate, caution is warranted in drawing conclusions from the follow-up data.

Three of the five respondents indicated that they had used the information learned in SAPST in their career. When asked how, respondents mentioned that they had shared information with their coalitions, other professionals, and students, and will use the materials when applying for a grant (Figure 17).

17. How participants had used information learned in SAPST (N=3)

Please provide one or two specific examples of how you have used what you learned in the training in your work.

"Structural" strategy needs emphasized with other coalitions members within annual 'brain storming'. Emphasis on specific risk factors for our teens (not assuming) and handling cultural diversity with Native population. The diversity of our coalition members including law enforcement, educators, businesses, parents, students and concerned community provide for decisions that will satisfy all of the community.

Knowledge of the SPF and the positive community norms campaigns have been important in conversations at work

I am using the material to apply for the SPF SIG grant. And will use it in promoting Social Host Ordinance promotion in the County

Respondents were asked to identify the SAPST modules they found to be most helpful in their work. Three out of the five respondents said that they found the prevention program planning, the introduction and history of ATOD and ATOD prevention and the using human development in prevention modules helpful. Two respondents each said that they found the prevention research, evaluation, the media in prevention and the ethics of prevention modules helpful. One respondent found the cultural context of prevention module helpful (Figure 18).

Satisfaction and suggestions for improvement

18. Most helpful SAPST module (N=5)

	# of participants
Prevention program planning	3
Introduction/History of ATOD and ATOD prevention	3
Using human development in prevention	3
Prevention research	2
Evaluation	2
The media and prevention	2
The ethics of prevention/Bringing it all together	2
Cultural context of prevention	1

In addition to identifying which of the modules were most helpful, respondents were asked to identify other features of the SAPST they found particularly helpful. Respondents cited the interaction with others including small group discussions, sharing diverse experiences and networking with other prevention professionals (Figure 19).

19. Other helpful aspects of SAPST (N=5)

Other than specific modules, what part(s) of the SAPST training did you find most helpful?

Interaction with others. I appreciated how much effort the trainers put in the preparation for the training.

Small group discussions on issues. The diversity of experiences leads to answers of questions not yet formed.

I enjoyed the multiple speakers to reduce listener burnout.

Strategic planning.

I really liked the networking opportunities that were available at the training.

Respondents were also asked how the SAPST could be modified to be more useful to their work. Respondents requested up to date video information on new drugs and examples of strategies from other coalitions (Figure 20).

20. Suggestions for improvement (N=3)

How could SAPST training be made more useful to your work?

Up to date video information - the new marijuana, club drugs.

Sharing of outcomes and 'tried-&-true' strategies from other areas/coalitions.

Don't know

Four of the respondents indicated that they would like additional training. Two said they were interested in learning more about prescription medications. One was interested in the point of view of specific teen sub-groups and another appreciated any general information as they were new to the field (Figure 21).

21. Requests for further information (N=4)

Would you like additional training related to youth alcohol, tobacco and other drug (ATOD) prevention?

Prescription drugs

Point of view of teens-'in' group, academic group, sport heads, lost teens, and middle of the road riders.

Prescription meds

New to the field. Any general knowledge is helpful to me.

One respondent provided additional comments about the SAPS training and shared their appreciation for the training and the trainings (Figure 22).

22. Additional Comments (N=1)

Please feel free to share any other comments about the SAPST training.

Presenters were excellent! They shared their stories which personalized the teachings and helped us to understand the issues further. It included time for self reflection and insight into 'others' experiences. When I first entered the room, I was a little overwhelmed by knowing all these people care so much about the teens and their future. Yes, God, the good people outnumber the bad.

Certified Prevention Professional certification

At the time of the follow-up survey, one of the participants had received the Certified Prevention Professional (CPP) certification. Three of the remaining four participants indicated that they intended to receive certification.

Recommendations

Based on the findings from this evaluation, Wilder Research has developed the following recommendations for improving SAPS training:

- Share more examples of successful strategies or methods that have had positive outcomes from other programs or coalitions.
- Clarify the CPP certification process for participants.
- Integrate more information about the latest trends in teen drug use throughout the training (i.e. prescription drugs) and be sure to let participants know that the data is up to date.
- Continue using SAPST evaluation data (from individual trainings and aggregated across trainings) to assess success of changes and identify additional areas of training strengths and opportunities.