

Chapter:	Service Delivery		
Title:	Prevention and Outreach		
Policy: <input checked="" type="checkbox"/> Procedure: <input type="checkbox"/>	Review Cycle: Triennial Author: Dir. Prevention and Outreach	Adopted Date: 10.2023 Review Date: 10.2023	Related Policies: Assessment of Community Need Adoption and Use of Best & Evidence-Based Practices Service Philosophy

Purpose:

Prevention and outreach are integral parts of the Hopeful Horizons’ (HHs’) service array. This policy outlines how prevention and outreach programs are adopted, deployed, and monitored to assure they produce desired outcomes.

Scope:

This policy applies to

- All HH Staff
- Selected HH Staff, as specified: Prevention and Outreach Program Staff
- HH Board Members
- HH Volunteers
- Other:

Policy:

HH prevention and outreach programs are specifically adopted and implemented to favorably impact the culture of violence that has become pervasive in society and in the communities we serve. HHs’ approach to prevention and outreach is adapted from best practice guidance provided by the Centers for Disease Control - [Social-Ecological Model](#) and as outlined in the following:

- A. **Planning:** The ongoing planning process for prevention and outreach activities shall include assessment of the communities’ current status and need for specific topics and approaches. HH prevention and outreach staff shall assess the needs in the context of existing resources, competencies, and capacity with the goal of creating a comprehensive prevention and outreach plan triennially. Capacity building and resource assessment may include support from community partners and stakeholders.
- B. **Partners and Key Stakeholders:** HH prevention and outreach staff shall identify key stakeholders and community partners to support violence prevention and outreach initiatives. Stakeholders and partners may serve as an important resource in connecting to target audiences or in building capacity and or competence.
- C. **Adoption of Sound Practices:** HH is committed to implementing prevention and outreach programs that demonstrate positive meaningful outcomes. When possible, HH shall adopt evidence-based practices (EBP) for prevention and outreach programs and activities. HH shall also consider prevention and outreach programs based on their:
 - **Conceptual fit:** A program or practice has a good conceptual fit if it directly addresses one or more of the priority factors driving a specific targeted problem and has been shown to produce positive outcomes for members of the focus population. To determine a conceptual fit, ask, “Will this program or practice have an impact on at least one of the priority risk and protective factors?”

- Practical fit: A program or practice has a good practical fit if it is culturally relevant for the focus population, the community has the will and capacity to support it, and it enhances or reinforces existing prevention activities. To determine a practical fit, ask, “Is this program or practice appropriate for our community?”

D. **Implementation:** Implementation of prevention and outreach programs shall assure fidelity to the EBP when required. Implementation shall be a planned approach and may include:

- Obtaining support: Leadership, key community stakeholder, and funder support are essential for a successful prevention or outreach program.
- Provider/Staff selection: Consider professional qualifications and experience, practical skills, as well as fit with the focus population.
- Provider/Staff Training: As required by the EBP or as necessary to assure the provider/staff competency and consistently implements the program.
- Clear Action Plan: Assures all key tasks are planned and implemented to assure successful program delivery and may include location planning, materials, food, audio-visual aids, equipment, etc.

E. **Monitoring and Evaluation:** HH prevention and outreach staff shall define and monitor process and outcome measures for each program conducted. Staff shall also monitor required measures as stipulated for adherence to an EBP or as stipulated by a grantor funding the program.

- Process evaluation answers the question, “Did we do what we said we would do?” Prevention planners use process evaluation extensively to assess the quality of implementation, keep implementation on track, and inform adjustments that can strengthen the effectiveness of their prevention efforts.
- Outcome evaluation measures the direct effects of a program or practice following implementation, that is, it determines whether the program or practice made a difference and, if so, what changed. An outcome evaluation might document changes in a population group’s knowledge, attitudes, skills, or behavior in both the short- and long-term.

Communication and Training:

The Board shall receive a copy of the policy at the time of periodic review and will have an opportunity to ask clarifying questions during the approval process. Employees and volunteers shall receive notice of the Board’s policy review and approval including notice of any substantive changes. The notice will provide a link to the policy located on the HH website.

Staff in HHs’ Prevention and Outreach program shall receive initial orientation and ongoing training in the philosophy behind and the implementation requirements for the specific program, activities and approaches adopted for use by the organization.

Definitions:

1. Culture of Violence Theory: The culture of violence theory addresses the pervasiveness of specific violent patterns within a societal dimension. The concept of violence being ingrained in Western society and culture has been around for at least the 20th century. Developed from structural violence, as research progressed, the notion that a culture can sanction violent acts developed into what we know as culture of violence theory today. Two prominent examples of culture legitimizing violence can be seen in rape myths and victim blaming. Rape myths lead

to misconstrued notions of blame; it is common for the responsibility associated with the rape to be placed on the victim rather than the offender.

2. Evidence Based Practices (EBP): service/treatment practices that have been researched academically or scientifically, been proven effective, and replicated by more than one investigation or study.

Other Related Materials:

Strengthening Families Program Procedure
Community Education and Outreach Procedure
Violence Prevention Program Procedure

References/Legal Authority:

[Addressing the Social and Cultural Norms That Underline the Acceptance of Violence, National Library of Medicine, 2018.](#)

[A Guide to SAMHSA’s Strategic Prevention Framework, SAMHSA, 2019](#)

[Implementing the Technical Package for Violence Prevention, Centers for Disease Control and Prevention, 2019.](#)

[Selecting Strategies and Approaches that Prevent Violence, The Division of Violence Prevention, Center for Disease Control and Prevention. Jan. 2019](#)

[Violence Prevention the Evidence, Changing the Culture of Social Norms That Support Violence, World Health Organization, 2009.](#)

Change Log:

Date of Change	Description of Change	Responsible Party
10.2023	This is a new policy.	N. Miller, Prog. Eval. Consultant in consultation with J. Morrall, Dir Prev. & Outreach