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# Guide to Select Promising and Model Crime Prevention Programs - 2012

**Fall 2012**

**NATIONAL CRIME PREVENTION CENTRE / CENTRE NATIONAL DE PRÉVENTION DU CRIME**

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## Introduction

Using the most recent findings from research on offending trajectories and related risk factors, and findings from thorough studies of crime prevention programs, Public Safety Canada's National Crime Prevention Centre (NCPC) has developed a funding approach for community projects based on the use of model and promising programs. This approach has several objectives, including developing knowledge on effective programs in Canada and sharing this knowledge with policy makers and practitioners across the country. Knowledge of the programs' impact on reducing offending behaviour and the factors leading to their successful implementation are of particular importance. It is hoped that the knowledge acquired will contribute to the sustainability of interventions that demonstrate positive results, are cost-effective and realistic to implement.

With regard to the Fall 2012 Call for Letters of Intent (the Call), the NCPC has chosen to focus on selected promising and model programs that are directly related to the three priority issues for the Call.

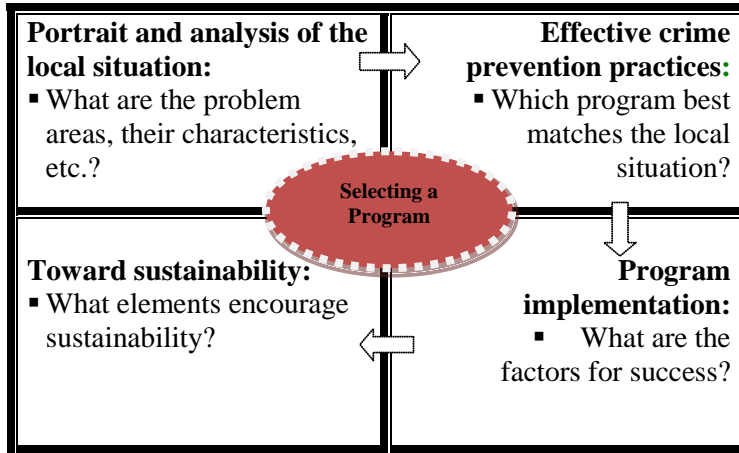
Letters of Intent (LOI) submitted under this Call will need to indicate which of the nine promising and model programs the applicants intend to implement. This raises the question of how applicants choose a program that best fits their circumstances. What criteria should be taken into account? Selecting a program for potential implementation requires significant investment of time and thought.

Few studies have been conducted on the process for selection of a program or on the criteria that influence or guide this decision. Evaluation studies are largely results-based (e.g. in terms of crime reduction) and very rarely focus on implementation considerations.

This Guide was created with this in mind. Although not exhaustive, it presents some key considerations and questions designed to help people make the most informed decisions possible when selecting a program for implementation in their community.

The following figure shows the four (4) main areas that will be explored in this guide.

Figure 1. Matrix of the key steps for selecting a crime prevention program



The sections that follow provide a more in-depth look at each of these four main areas.

## Portrait and Analysis of the Local Situation

The first step in a crime prevention approach is the development of a local portrait/diagnostic, also called environmental scan or strategic assessment, using a variety of data collection methods.<sup>i</sup> This portrait will provide an overview of the local reality, the nature and characteristics of existing crime and delinquency, the characteristics of the populations involved, the contributing factors, the services already in place and the resources available in the community.

The importance of this local analysis cannot be underestimated. Lack of understanding of the realities can result in the selection of the wrong type of prevention program to implement. If the nature, characteristics and extent of the problems are poorly defined, the selected program might not target the right client population, or even worse, could lead to inappropriate interventions. Not only could the program, whether promising or model, fail to

### **Analysis of the local situation:**

The portrait of the local situation provides a clear overview of the target population, emerging risk behaviours or problem situations, risk factors and the context in which they occur. Even more important is the fact that this assessment should indicate what seems to influence people to make the decision to adopt risky behaviours. The portrait must also provide an inventory of resources and programs in the community.

### **Portrait and analysis of the local situation: sample questions**

- Among the three priorities of this call, which is the most significant for my community?
- What is the nature and extent of this problem?
- Are there times and/or specific areas where the problematic behaviours occur more often?
- What are the characteristics of the population associated with this problem?
- What are the risk factors (proximal and distal)?
- What services (direct or related) are currently available to address this problem?

generate the expected results, it could be counter-productive. Research on correctional interventions in communities has demonstrated that intervening with people who do not need support (for example, low-risk offenders) can have negative repercussions.

As indicated in the document “*Funding Priorities of the National Crime Prevention Strategy - 2012*” (see <http://www.publicsafety.gc.ca/prg/cp/fnd-prts-eng.aspx>), NCPC has identified three priority issues: 1) preventing violence among youth aged 12 to 17 years; 2) preventing Aboriginal youth delinquency in urban centres (aged 6-17 years); and, 3) preventing school-based bullying. These priorities have been identified based on consultations with various groups, official statistics and literature on the main risk factors associated with offending trajectories.

All three of these priorities might be relevant in a community. For the Call, it is necessary to focus on one of the three priority areas. The work to conduct an analysis of the community context is critical to determine which priority will be the focus for the application. Sources of data and information that will help develop this portrait of



the community include: police reports, health and social service reports, educational system reports and socio-economic reports and data. There may be many sources of information to consult and it is important that information and data used to make these decisions is recent, as objective as possible and backed by sound data collection methods.

Once the main priority issue has been identified, gathering information to fully understand the nature and characteristics of the people and circumstances involved is the next step. For example, knowing such things as the age, gender and ethnicity of the youth who engage in violent behaviour is critical to choosing a program. Similarly, knowing where youth spend their time, when violent behaviour takes place and any other factors related to incidences of violence will help to select a program that has the best chances of changing the behaviours.

Before making a decision on the program to propose for implementation, it is also important to know what services and resources are currently provided and available in the community. An inventory of existing resources and programs relevant to the issue and population being focused on is valuable from a number of perspectives. It can help to identify gaps in services currently available, can reduce duplication of work and can help to identify potential partners for a new initiative in the community. Every crime prevention program requires specific resources and it is only with a thorough understanding of what is available that an informed decision can be made about what programs are realistic in any given community context.

In summary, some key questions to guide the development of a local portrait are provided in the box above.<sup>ii</sup> By using these questions along with others people in the community will think of and examining the sources of information available to help answer them, one of the programs identified by NCPC may start to stand out as a good fit. Describing the fit between the program selected and the information collected provides the rationale for the selection and is a key component of what is required on the LOI for the Call.

## Effective Crime Prevention Practices

As part of the Call, NCPC has selected only certain programs for replication; a total of nine (9) programs (Table 1). Appendix A provides an overview of each program and a detailed description of the programs is included in the document entitled “*Implementation Fact Sheets on Promising and Model Crime Prevention Programs – 2012*” (see <http://www.publicsafety.gc.ca/prg/cp/mplmtn-fctsht-eng.aspx>). These programs were selected using a standardized process that analyzed the scientific literature available on the various programs as it related to the priority issues identified. This process is described in Appendix B.

Table 1—Promising and model programs under this funding call – 2012

Preventing violence among youth aged 12 to 17 years	Preventing Aboriginal youth delinquency in urban centres*	Preventing school-based bullying
	<ul style="list-style-type: none"> <li>▪ Project Venture</li> </ul>	
	<ul style="list-style-type: none"> <li>▪ The Ally Intervention Program</li> </ul>	<ul style="list-style-type: none"> <li>▪ The Ally Intervention Program</li> </ul>
<ul style="list-style-type: none"> <li>▪ Aggression Replacement Training (ART)</li> <li>▪ Leadership and Resiliency Program (LRP)</li> <li>▪ Stop Now and Plan (SNAP)</li> <li>▪ Strengthening Families Program (SFP)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Aggression Replacement Training (ART)</li> <li>▪ Leadership and Resiliency Program (LRP)</li> <li>▪ Stop Now and Plan (SNAP)</li> <li>▪ Strengthening Families Program (SFP)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Aggression Replacement Training (ART)</li> <li>▪ Leadership and Resiliency Program (LRP)</li> <li>▪ Stop Now and Plan (SNAP)</li> <li>▪ Strengthening Families Program (SFP)</li> </ul>
<ul style="list-style-type: none"> <li>▪ Functional Family Therapy (FFT)</li> <li>▪ Multidimensional Family Therapy (MDFT)</li> <li>▪ Multisystemic Therapy (MST)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Functional Family Therapy (FFT)</li> <li>▪ Multidimensional Family Therapy (MDFT)</li> <li>▪ Multisystemic Therapy (MST)</li> </ul>	

\*The priority “Preventing Aboriginal youth delinquency in urban centres” refers to children and youth aged 6 to 17 years living in areas with around 30,000 residents or more.

The literature identifies three (3) main categories of variables to be taken into account when selecting a program:

1. Suitability and alignment of the program;
2. Quality and adaptability of the program;
3. Organizational capacities and resources.

## 1. Suitability and Alignment of the Program

The suitability and alignment of the program is the first main category of factors and can be divided into three subgroups of variables:<sup>iii</sup>

- a) Suitability with the lead organization;
- b) Suitability with risk factors;
- c) Suitability with target group.

The box below shows examples of questions in relation to these three subgroups of variables.

### **Suitability and alignment of the program: examples of questions**

- How do the goals and objectives of the program reflect those of your organization?
- Is the program suitable (in terms of duration and intensity) to be effective for potential participants?
- Do the potential participants have the time to fully participate in the program?
- Has the program already produced effective results in a similar group of participants?
- How does the program complement other programs and services?

### **a) Suitability with the lead organization**

Although it seems obvious, the selected program's alignment with the mission of the lead organization is often neglected.<sup>iv</sup> The lead organization is the organization taking a leadership role in applying for funding and in the implementation of the proposed program.

The more the program is in line with the organization's philosophy and organizational values, the better the chances are that the program will be accepted by staff and others in the community. Similarly, the more the program is designed to reach a clientele already known by the organization, the better the chances are that the right clientele will be reached. Another factor to consider is how the program will complement the other programs provided by the lead organization or other organizations. New programs implemented in a community should address the gaps and provide services to reach needs that are not met.

This complementarity will help develop a comprehensive approach, which, in the long term, could lead to interventions that are more effective and durable.

### **b) Suitability with risk factors**

The second alignment component looks at how well a program addresses the level and complexity of the risk factors present for the participants. A key consideration is the duration and intensity of the program. Reducing the impact of certain risk factors (e.g. substance abuse or impulsivity) requires interventions that are long enough to change attitudes or behaviours in participants. Understanding the main risk factors present and what types of interventions are suitable to address them is a main element for the selection of an appropriate program. Program requirements will thus be reviewed based on what is known of the risk factors and populations targeted.

### c) Suitability with target group

The last component related to suitability and alignment is the fit with the characteristics of the target group. Every program is developed and designed to work in certain settings and with specific populations. For example, it will be different working with youth in school compared to street youth. The issue is to increase the likelihood that those targeted will participate for the full length required to achieve the expected changes. In other words, the degree of effort required to participate fully in the program for the required amount of time must correspond to the effort that the target group is able to put in. For example, what are the chances that vulnerable youth will participate in a long-term program with regular meetings? It is also important to ask whether the time and place of meetings suit the target audience.

Another important element to consider is the adaptation of a given program to the culture and values of the target population. Except for few culturally-based programs, the majority of evaluated preventive interventions have not been developed on ethno-cultural dimensions. And when culturally appropriate programs have been evaluated, few used rigorous evaluation standards. Note also that in many cases, if a community wishes to modify the program culturally, adaptations must be introduced with the consent and under the supervision of the program's developers.

## 2. Quality and Adaptability of the Program

The program's quality and adaptability is the second main category of factors that is taken into account when selecting a promising or model program.

With regard to the quality of programs, those that have been selected as part of this funding call have already demonstrated their quality and have been tested and validated.

Regardless, these programs have either limited or no testing in Canada. The adaptability of the program refers to the degree of flexibility allowed in the local implementation of the program against compliance to the original program.<sup>v</sup> While the faithful replication of the main elements of the original program in the implementation and the delivery of services plays a big role in achieving the expected results of the program,<sup>vi, vii</sup> there is no clear consensus on how an evidence-based program can be modified to meet the needs of the community.

### Examples of adaptation types

#### Acceptable adaptations:

- Modify the language: translate / modify terminology used;
- Replace original images so they more closely resemble youth and their families;
- Replace cultural references;
- Add elements to the content, supported by research, to make the program more attractive to participants.

#### Risky or unacceptable adaptations:

- Reduce number/length of sessions and/or duration of the program;
- Eliminate key messages / competencies and skills that participants must acquire;
- Modify the theoretical approach;
- Use personnel or volunteers that are not adequately trained or qualified;
- Use fewer employees than what is recommended.

According to a report published by *What Works*,<sup>viii</sup> the program's suitability and adaptability should be addressed based on the acceptable types of adaptation rather than risky types of adaptation that could affect the program's potential success. The box above, which is taken from this report, gives examples of acceptable and risky adaptations. Either way, it is important to communicate with the developers of the program before making changes, regardless of their nature.

### 3. Organizational Resources and Capacities

#### **Organizational resources and capacities: examples of questions**

- What are the costs associated with the implementation of the program, training and purchase of the documents/licence?
- Are there staff capable of implementing this program in the organization? What qualifications are recommended or required? How many employees are needed? What is the recommended ratio of staff to participants in the program?
- Can the program be implemented in the time allotted?
- What are the chances the program will be maintained in the future?
- Which partners would like to, or must be involved?

Organizational resources and capacities is the third category of factors to be taken into account when selecting a promising and model program.

The analysis of organizational resources and capacities is too often underestimated. Promising and model programs vary in their complexity and in the level and type of effort and resources they require. All programs cannot be implemented everywhere, and it is important to consider organizational resources and capacities.

Implementing an evidence-based program requires investments with respect to money, time and human resources. Sometimes even material investments are needed. Even if the program has a high degree of suitability and alignment, if the lead organization and its partners lack the necessary resources and capacities, the chances of getting the expected results are limited.

Various organizational factors facilitate the implementation of a high-quality program, such as:

- Operational capacity: for example, qualified personnel, good staff retention, training and supervision, monitoring system in place;
- Financial capacity: for example, appropriate financial controls, qualified personnel to monitor and report financial information;
- Previous experience in the implementation of similar programs;
- Sound partnerships and networks in the community.

In summary, taking into account a program's alignment with the potential participants' realities and needs, with the objectives and resources of the lead organization, with the environment and community context and understanding the degree of program adaptation needed creates a solid foundation for the selection of a program.

## Program Implementation

Not all programs present the same degree of complexity, and their implementation will therefore be affected. Special attention needs to be focused on a few key implementation components.

The first consideration is the recruitment and retention of participants. The programs available to select from are prevention programs designed for at-risk populations (secondary prevention). The interventions are not designed for all youth (universal) and, therefore, a key implementation consideration is how to make sure the right clientele is reached. Given their circumstances and histories, at-risk youth and children are often difficult to attract to new programs. During program implementation, the systematic use of risk assessment tools is very important to ensure the right youth are being reached with the program and its interventions. The NCPC has made a number of these tools available (*Tools to Identify and Assess the Risk of Offending Among Youth*; see <http://www.publicsafety.gc.ca/prg/cp/pmsnmdl/2010-tls-roay-eng.aspx>). This is important not only to intervene with those who need it, but also to respect their privacy and avoid further stigmatization.

In addition, because participation in these programs is voluntary, thought may need to be given to incentives in order to maintain the level of commitment necessary from participants. Such incentives might include transportation assistance or recreational activities to enhance interventions that are often more psychosocial in nature.

The second component of implementation to be looked at is staff recruitment and training. The lead organization may already have qualified staff, but more often than not, people will need to be recruited and trained for the delivery of the specific program. It is essential to ensure that staff delivering the program have the tools, skills and support they need for success.

The third essential aspect is partnerships. Whether because participants will be referred by other organizations (e.g. the police or child welfare services) or because the intervention can be delivered only in partnership with an institution (e.g. a school), implementation of a program must include partnerships with various organizations. Partnerships will lead to greater collective expertise, but also mean processes will be more cumbersome and more time consuming. For example, protocols or memorandums of understanding may be required to clearly articulate roles and responsibilities or to ensure appropriate sharing of information with consideration for privacy legislation.

The fourth key component in implementation is data collection. The NCPC funds and evaluates time-limited projects in order to build a base of Canadian knowledge on effective crime prevention practices. The minimum evaluation required for each funded project is an assessment of its implementation based primarily on the systematic and rigorous collection of data on participants, interventions, partners, costs, etc. In some cases, the NCPC will also fund a study to evaluate project impacts, especially the reduction of key behaviours (violence, bullying, crime). The lead organization will therefore have to anticipate being involved in a rigorous evaluation process. The NCPC offers the lead organizations various types of tools for performance tracking and evaluation. The performance tracking tools monitor the program's development and help identify where changes need to be made, while the tools for evaluating the implementation

process and results will detail the program's results and implementation context.

## Toward sustainability

While it may seem surprising, sustainability is an aspect that needs to be considered when choosing a program for implementation. Not all successful programs have the same likelihood of being incorporated into or combined with existing systems or of receiving sustainable funding. When a program is selected, consideration needs to be given to whether it could be maintained and included in the organization's structure once the demonstration funding ends. Some programs may fit into organizational structures more easily than others. The cost of the program, while not the only variable, is an important factor since it seems that programs requiring a major financial investment are more likely to be discontinued after the funding runs out.

But sustainability is not only a matter of funding:<sup>ix</sup> it also entails creating and maintaining the momentum needed for change by reorganizing and optimizing resources.

As described in a toolkit developed by the Institute for Educational Leadership,<sup>x</sup> sustainability is a multidimensional concept encompassing a variety of resources, actions and processes. It may be reflected in a number of ways:

- The institutionalization of all or part of a program;
- Momentum that mobilizes and leads to a reorganization (for example, in provided services);
- The continuation of all or components of the project as a separate entity within the larger service system, through an ongoing funding arrangement;
- The transformation of policies, governance structures, fiscal arrangements and service practices in place.

### **Working Toward Sustainability: Examples of Questions**

- What does institutionalizing this program entail?
- What resources are available and what resources are needed to maintain the program?
- Could resources be pooled with some partners?
- What mix of potential solutions is needed to maintain, if not increase, the level of resources required to carry on the activities?
- What potential challenges can already be envisaged, and what might be the solutions?
- Are there any precedents that could provide inspiration for sustaining this program?

## Appendix A – Overview of Promising and Model Programs Selected for the 2012 Call

For each of promising and model programs selected under this call for funding, a brief overview of the main dimensions to be taken into consideration during the selection process for the program is provided below. For more details, please refer to the Implementation Fact Sheets.

<b>1. Aggression Replacement Training (ART)</b>	
<b>NCPC Priority</b>	<ul style="list-style-type: none"> <li>▪ Preventing violence among youth aged 12 to 17 years</li> <li>▪ Preventing Aboriginal youth delinquency in urban centres</li> <li>▪ Preventing school-based bullying</li> </ul>
<b>Description</b>	<ul style="list-style-type: none"> <li>▪ A multidimensional psycho-educational intervention designed to promote pro-social behavior in chronically aggressive and violent adolescents using techniques to develop social skills, emotional control, and moral reasoning.</li> </ul>
<b>Target Group</b>	<ul style="list-style-type: none"> <li>▪ Boys and girls, 12-17 years old</li> </ul>
<b>Setting</b>	<ul style="list-style-type: none"> <li>▪ Community-based</li> <li>▪ Juvenile justice</li> <li>▪ Mental health</li> <li>▪ Schools</li> <li>▪ Social services</li> </ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"> <li>▪ Dependent on setting and implementing organization: teachers, youth workers or counsellors, direct line staff, etc.</li> </ul>
<b>Program Components</b>	<ul style="list-style-type: none"> <li>▪ Social skills training</li> <li>▪ Anger control training</li> <li>▪ Training in moral reasoning</li> </ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"> <li>▪ Reduce aggressive behaviour</li> <li>▪ Improve anger control</li> <li>▪ Build social skills and social competencies</li> <li>▪ Enhance moral reasoning</li> </ul>



## 2. Functional Family Therapy (FFT)

<b>NCPC Priority</b>	<ul style="list-style-type: none"><li>▪ Preventing violence among youth aged 12 to 17 years</li><li>▪ Preventing Aboriginal youth delinquency in urban centres</li></ul>
<b>Description</b>	<ul style="list-style-type: none"><li>▪ Multistep and phasic intervention that include engagement (to reduce the risk of early dropout), motivation (to change maladaptive beliefs and behaviours), assessment (to clarify interpersonal behavior and relationships), behaviour change (including skills training for youths and parents), and generalization (in which individualized casework is used to ensure that new skills are applied to functional family needs).</li></ul>
<b>Target Group</b>	<ul style="list-style-type: none"><li>▪ Boys and girls, 11 to 18 years old</li><li>▪ Youth's family</li></ul>
<b>Setting</b>	<ul style="list-style-type: none"><li>▪ Clinics</li><li>▪ Community-based</li><li>▪ In-home</li><li>▪ Juvenile justice</li><li>▪ Mental health</li><li>▪ Schools</li><li>▪ Social services / child welfare</li></ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"><li>▪ 3-8 clinicians/therapists (master's degree in a relevant field and/or relevant training and experience) – one of whom becomes the on-site supervisor (must have master's degree)</li></ul>
<b>Program Components</b>	<ul style="list-style-type: none"><li>▪ Youth training</li><li>▪ Parental training / parenting skills training</li><li>▪ Family training / parent-child process</li><li>▪ Individualized assessment and intervention plan</li><li>▪ Family case management</li></ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"><li>▪ Reduce the negativism associated with families at risk</li><li>▪ Strengthen ties within the family</li><li>▪ Improve parent's ability</li><li>▪ Develop positive behaviours</li></ul>

### 3. Leadership and Resiliency Program (LRP)

<b>NCPC Priority</b>	<ul style="list-style-type: none"><li>▪ Preventing violence among youth aged 12 to 17 years</li><li>▪ Preventing Aboriginal youth delinquency in urban centres</li><li>▪ Preventing school-based bullying</li></ul>
<b>Description</b>	<ul style="list-style-type: none"><li>▪ School- and community-based program for students that enhances youths' internal strengths and resiliency while preventing involvement in substance use and violence.</li></ul>
<b>Target Group</b>	<ul style="list-style-type: none"><li>▪ Boys and girls, 14 to 19 years old</li></ul>
<b>Setting</b>	<ul style="list-style-type: none"><li>▪ Community-based</li><li>▪ Schools</li></ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"><li>▪ Program manager (experienced clinician with master's degree in a related field),</li><li>▪ Program leaders (significant experience working with youth, bachelor's degree in a related field),</li><li>▪ Volunteers (help with out-of-school programming)</li></ul>
<b>Program Components</b>	<ul style="list-style-type: none"><li>▪ Resiliency groups</li><li>▪ Community/service learning</li><li>▪ Alternative/adventure activities</li></ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"><li>▪ Increase perceptions of competence and self-worth</li><li>▪ Reduce disciplinary actions in school</li><li>▪ Increase knowledge of and negative attitudes about substance abuse and violence</li></ul>

#### 4. Multidimensional Family Therapy (MDFT)

<b>NCPC Priority</b>	<ul style="list-style-type: none"> <li>▪ Preventing violence among youth aged 12 to 17 years</li> <li>▪ Preventing Aboriginal youth delinquency in urban centres</li> </ul>
<b>Description</b>	<ul style="list-style-type: none"> <li>▪ Comprehensive and multisystemic family-based outpatient or partial hospitalization (day treatment) program for substance-abusing adolescents, adolescents with co-occurring substance use and mental disorders, and those at high risk for continued substance abuse and other problem behaviors such as conduct disorder and delinquency.</li> </ul>
<b>Target Group</b>	<ul style="list-style-type: none"> <li>▪ Boys and girls, 11 to 18 years old</li> <li>▪ Youth's family</li> </ul>
<b>Setting</b>	<ul style="list-style-type: none"> <li>▪ Community-based</li> <li>▪ Hospitals</li> <li>▪ In-home (birth family, adoptive and/or foster home)</li> <li>▪ Mental health</li> <li>▪ Residential treatment programs / residential care facilities</li> <li>▪ Schools (alternative schools)</li> </ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"> <li>▪ At least 2 full-time therapists (master's degree in a related field),</li> <li>▪ 1 part-time case manager (bachelor's degree and/or relevant experience),</li> <li>▪ 1 part-time supervisor (possible for a therapist to also function as a supervisor)</li> </ul>
<b>Program Components</b>	<ul style="list-style-type: none"> <li>▪ Comprehensive assessment (identify problem areas/strengths, focal areas and goals of therapy)</li> <li>▪ Treatment modules (youth's interpersonal and intrapersonal functioning, parenting practices, parent/adolescent bonding and relationships, communication)</li> <li>▪ Reinforcement and preparation for next stage of development</li> </ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"> <li>▪ Reduce substance abuse and behavioural problems</li> <li>▪ Improve family functioning</li> </ul>

## 5. Multisystemic Therapy (MST)

<b>NCPC Priority</b>	<ul style="list-style-type: none"><li>▪ Preventing violence among youth aged 12 to 17 years</li><li>▪ Preventing Aboriginal youth delinquency in urban centres</li></ul>
<b>Description</b>	<ul style="list-style-type: none"><li>▪ Intensive, family-based treatment approach for improving the antisocial behavior of serious juvenile offenders. MST seeks to reduce youth criminal activity and other kinds of negative behavior (for example, drug abuse) in a cost-effective way.</li></ul>
<b>Target Group</b>	<ul style="list-style-type: none"><li>▪ Boys and girls, 12 to 17 years old</li><li>▪ Youth's family</li></ul>
<b>Setting</b>	<ul style="list-style-type: none"><li>▪ Juvenile justice</li><li>▪ Mental health and social services (for delivery in-home and in community)</li><li>▪ Schools</li></ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"><li>▪ 2-4 trained therapists (master's degree, or bachelor's degree and 5 years of relevant clinical experience)</li><li>▪ Supervisor to oversee the work of the therapists</li></ul>
<b>Program Components</b>	<ul style="list-style-type: none"><li>• Cognitive Behavioral Treatment</li><li>• Pragmatic family Therapies</li><li>• Parent Training</li><li>• Individualized assessment and intervention plan</li></ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"><li>▪ Decrease rates of antisocial behaviour</li><li>▪ Decrease mental health problems for serious juvenile offenders</li><li>▪ Reduce long-term rates of re-arrest</li><li>▪ Reduce out-of-home placements</li></ul>

## 6. Project Venture

<b>NCPC Priority</b>	<ul style="list-style-type: none"> <li>Preventing Aboriginal youth delinquency in urban centres</li> </ul>
<b>Description</b>	<ul style="list-style-type: none"> <li>Outdoor experiential youth development program based on traditional values such as family, learning from the natural world, spiritual awareness, service to others, and respect.</li> </ul>
<b>Target Group</b>	<ul style="list-style-type: none"> <li>Aboriginal boys and girls in grades 5 through 9</li> </ul>
<b>Setting</b>	<ul style="list-style-type: none"> <li>Schools</li> <li>Community-based</li> </ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"> <li>1 full time coordinator</li> <li>Educational staff (may be part-time and should have a bachelor's degree or relevant experience working with youth)</li> <li>Support staff (community cultural "experts", Elders, positive community role models, Project Venture graduates)</li> <li>Strong partnership with local school board</li> </ul>
<b>Program Components</b>	<ul style="list-style-type: none"> <li>Classroom-based activities</li> <li>Outdoor activities</li> <li>Adventure camps and treks</li> <li>Community-oriented service learning</li> </ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"> <li>Decrease depression and aggressive behaviour</li> <li>Delay initiation of substance use</li> <li>Reduce frequency of illegal drug use / alcohol</li> <li>Improve school attendance</li> </ul>

## 7. Stop Now and Plan (SNAP)

<b>NCPC Priority</b>	<ul style="list-style-type: none"> <li>▪ Preventing violence among youth aged 12 to 17 years</li> <li>▪ Preventing Aboriginal youth delinquency in urban centres</li> <li>▪ Preventing school-based bullying</li> </ul>
<b>Description</b>	<ul style="list-style-type: none"> <li>▪ Cognitive behavioural multi-component family-focused program that provides a framework for effectively teaching children and their parents self-control and problem-solving skills.</li> </ul>
<b>Target Group</b>	<ul style="list-style-type: none"> <li>▪ Boys/girls, aged 6 to 11 years old</li> <li>▪ Boys/girls, aged 12 to 17 years old</li> <li>▪ Gender sensitive</li> </ul>
<b>Setting</b>	<ul style="list-style-type: none"> <li>▪ Child care establishments</li> <li>▪ Clinician's office</li> <li>▪ Community-based</li> <li>▪ In-Home</li> <li>▪ Mental health</li> <li>▪ Schools</li> <li>▪ Social services</li> </ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"> <li>▪ 1 full-time senior staff person (with clinical and administrative skills)</li> <li>▪ 1-2 full-time family workers (parent group leaders)</li> <li>▪ 2 full-time child workers (children group leaders)</li> <li>▪ Other part-time staff as appropriate</li> </ul>
<b>Program Components</b>	<ul style="list-style-type: none"> <li>▪ Child/youth social skills training</li> <li>▪ Parent skills training/parent management training</li> <li>▪ Individualized family counseling</li> <li>▪ School advocacy</li> </ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"> <li>▪ Reduce aggressive and anti-social behaviour</li> <li>▪ Prevent future delinquency</li> <li>▪ Teach anger and impulse control in both children and their parents</li> <li>▪ Teach children effective behavioural skills for reducing aggressive and delinquent behaviour</li> </ul>

## 8. Strengthening Families Program

<b>NCPC Priority</b>	<ul style="list-style-type: none"> <li>▪ Preventing violence among youth aged 12 to 17 years</li> <li>▪ Preventing Aboriginal youth delinquency in urban centres</li> <li>▪ Preventing school-based bullying</li> </ul>
<b>Description</b>	<ul style="list-style-type: none"> <li>▪ Family skills program design to increase family strengths and resilience and reduce risk factors for problem behaviors in high-risk children, including behavioral, emotional, academic, and social problems. Builds on protective factors by improving family relationships, parenting skills, and the youth's social and life skills.</li> </ul>
<b>Target Group</b>	<ul style="list-style-type: none"> <li>▪ Boys and girls, 6 to 11 years old</li> <li>▪ Boys and girls, 12 to 16 years old</li> <li>▪ Youth's family</li> </ul>
<b>Setting</b>	<ul style="list-style-type: none"> <li>▪ Churches</li> <li>▪ Community mental health centres</li> <li>▪ Drug treatments centres / drug courts</li> <li>▪ Homeless shelters</li> <li>▪ Housing projects</li> <li>▪ Recreation centres</li> <li>▪ Schools</li> <li>▪ Social services (family/youth services agencies)</li> </ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"> <li>▪ 2 group leaders for parents (trained, strong presentation and facilitation skills, experience working with target population)</li> <li>▪ 2 group leaders for children (trained, strong presentation and facilitation skills, experience working with target population)</li> <li>▪ 1 site coordinator</li> </ul>
<b>Program Components</b>	<ul style="list-style-type: none"> <li>▪ Child/youth skills training sessions</li> <li>▪ Parent skills training sessions</li> <li>▪ Family practice sessions</li> </ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"> <li>▪ Reduce problem behaviors, delinquency and alcohol and drug abuse</li> <li>▪ Improve social competencies</li> <li>▪ Increase school performance</li> <li>▪ Decrease child maltreatment</li> <li>▪ Increase family functioning and parenting skills</li> </ul>

## 9. The Ally Intervention Program

<b>NCPC Priority</b>	<ul style="list-style-type: none"> <li>▪ Preventing Aboriginal youth delinquency in urban centres</li> <li>▪ Preventing school-based bullying</li> </ul>
<b>Description</b>	<ul style="list-style-type: none"> <li>▪ Multimodal intervention program intended for youths who exhibit behavioural problems at school and at home and are considered to be at risk of school and social maladjustment that was designed to enrich the repertoire of social and interpersonal problem-solving skills for these individuals</li> </ul>
<b>Target Group</b>	<ul style="list-style-type: none"> <li>▪ Boys and girls, aged 8 to 12 years old</li> <li>▪ Parents/guardian</li> </ul>
<b>Setting</b>	<ul style="list-style-type: none"> <li>▪ Schools</li> </ul>
<b>Staffing Requirements</b>	<ul style="list-style-type: none"> <li>▪ Professionals in the school setting (teachers, psycho-educators and case workers)</li> <li>▪ Steering committee composed of school staff members</li> <li>▪ Service providers from social services agencies</li> </ul>
<b>Program Components</b>	<ul style="list-style-type: none"> <li>▪ Child skills training</li> <li>▪ Parent skills training</li> </ul>
<b>Outcome Areas</b>	<ul style="list-style-type: none"> <li>▪ Enhance students' potential Enhance parents' potential</li> <li>▪ Enhance communication and consistency between the various caseworkers working with the children</li> </ul>



## Appendix B – Selection process for promising and model programs

Under this call for funding, the NCPC adopted a rigid process for the selection of promising and model programs. The selection process was based on a list of criteria: four (4) mandatory criteria and three (3) additional criteria. In total, the NCPC reviewed and analysed 32 programs on the basis of the following criteria:

### **Mandatory criteria**

The four mandatory criteria were developed on the basis of the key principles of evidence-based crime prevention. During analysis of the programs, as soon as one of the criteria was not met by a program, that program was eliminated.

1. At a minimum, the program must achieve results supported by scientific evaluation standards and fit the definition of a promising or model program. Based on this criterion, innovative programs were automatically excluded.
2. The program must be in keeping with one of the NCPC's priorities for 2012 and must be considered a secondary or tertiary prevention program. Based on this criterion, universal programs or programs addressing an issue that did not fit in with the NCPC's priorities were automatically excluded.
3. Technical assistance must be available from the program developers. Having access to technical assistance from the program developers is considered one of the key factors in the success of evidence-based programs. Based on this criterion, programs where it was difficult or impossible to contact the developers were excluded.
4. The program must have tools to facilitate program implementation and delivery of services/interventions (for example, implementation manual, risk assessment tools, tracking tool).

### **Asset criteria**

When programs met the mandatory criteria, three additional criteria were assessed; the purpose of those criteria was not to draw distinctions between programs, but merely to add information:

1. The level of effort required to implement the program: The purpose of this aspect was to gain a better understanding of the program's complexity and assess some of the key components often associated with major challenges (for example, program requiring specialized staff, program being implemented over a period of several years, partnerships requiring adjustments to roles). A level-of-required-effort continuum was developed to ensure that the programs selected reflected the various levels of effort and complexity.
2. Knowledge of the implementation of this program and results in a Canadian context is already available. Because this call was specially targeted, it was preferable, but not mandatory, that the program have already demonstrated positive results in a Canadian context.
3. Program tools and other implementation and tracking material are already available in both official languages.

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## Endnotes

<sup>i</sup> For an example of this type of document, consult the *Guide Book on Local Safety Audits*; this document is available at <http://efus.eu/en/topics/tools-and-methods/audits-and-evaluation/efus/654/>.

<sup>ii</sup> Examples of questions presented in this box are based on the community assessment tool developed by the National Native American AIDS Prevention Center. For more information, consult the following site: [http://www.nnaapc.org/resources/toolkit/module\\_4/module48.html](http://www.nnaapc.org/resources/toolkit/module_4/module48.html).

<sup>iii</sup> This division and the examples of questions presented in this section are based on the report prepared by Small, S.A., Cooney, S.M., Eastman, G., & O'Connor, C. (2007). *Guidelines for selecting an evidence-based program: Balancing community needs, program quality, and organizational resources*.

<sup>iv</sup> *Guidelines for Selecting an Evidence-Based Program*.

<sup>v</sup> Dusenbury L. et al. (2003). "A review of research on fidelity of implementation: implications for drug abuse prevention in school settings," in *Health Education Research*, 18 (2), 237-256; Crosse S. et al. (2011). *Prevalence and Implementation Fidelity of Research-Based Prevention Programs in Public Schools - Final Report*. U.S. Department of Education

<sup>vi</sup> Mihalic S. and al. 2008. *Implementing the LifeSkills Training drug prevention program: factors related to implementation fidelity*.

<sup>vii</sup> Roger Przybylski (2008). *What Works: Effective Recidivism Reduction and Risk-Focused Prevention Programs*. RKC Group, 2008

<sup>viii</sup> Wisconsin team at the University of Wisconsin–Madison.

<sup>ix</sup> National Center for Chronic Disease Prevention and Health Promotion (Division of Adult and Community Health). *A Sustainability Planning Guide for Healthy Communities*.

<sup>x</sup> Institute for Educational Leadership. *Building Sustainability in Demonstration Projects for Children, Youth and Families* – Toolkit Number 2 – Systems Improvement Training and Technical Assistance Project. OJJDP.