Communities That Care
Sustained Effects on Youth Outcomes

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Our Funders and State Collaborators

**Funders**

- National Institute on Drug Abuse
- Center for Substance Abuse Prevention
- National Institute of Mental Health
- National Institute on Alcohol Abuse and Alcoholism
- National Institute on Child Health and Human Development

**State Collaborators**

- **Colorado** DHS Alcohol & Drug Abuse Division
- **Illinois** DHS Bureau of Substance Abuse Prevention
- **Kansas** Dept. of Social & Rehabilitation Services
- **Maine** DHHS Office of Substance Abuse
- **Oregon** DHS Addictions & Mental Health Division
- **Utah** Division of Substance Use & Mental Health
- **Washington** Division of Behavioral Health & Recovery
The Communities That Care Prevention System

Develops community capacity to:

• Build a coalition of diverse stakeholders.
• Assess and prioritize risk, protection, and health and behavior outcomes.
• Increase protection and address priority risks with tested, effective preventive interventions.
• Sustain high fidelity implementation of preventive interventions to reach all those targeted.
The Communities That Care System

Get Started
Get Organized
Create a Plan
Develop a Profile
Implement and Evaluate

Creating Communities That Care
The Communities That Care Operating System

- Community readiness assessment.
- Identification of key individuals, stakeholders, and organizations.

Get Started

Implement and Evaluate

Create a Plan

Develop a Profile

Creating Communities That Care

Get Organized
The Communities That Care Operating System

Get Started

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- Training key leaders and board in CTC
- Building the community coalition.
The Communities That Care Operating System

Get Started

Get Organized

Develop a Profile

Create a Plan

Implement and Evaluate

Creating Communities That Care

• Collect risk/protective factor and outcome data.
• Collect information on community resources
• Construct a community profile from the data.

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• Collect information on community resources
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The Communities That Care Operating System

Creating Communities That Care

- Define outcomes.
- Prioritize factors to be targeted.
- Select tested, effective interventions.
- Create action plan.
- Develop evaluation plan.

Get Started

Get Organized

Create a Plan

Develop a Profile
The Communities That Care Operating System

- Form task forces.
- Identify and train implementers.
- Sustain collaborative relationships.
- Evaluate processes and outcomes.
- Adjust programming.

Get Started

Get Organized

Create a Plan

Develop a Profile

Creating Communities That Care

Implement and Evaluate
CTC Logic Model

CTC Training & Technical Assistance → CTC Coalition Functioning & Capacity

- Adoption of Science-Based Prevention
- Community Collaboration for Prevention
- Community Support for Prevention
- Community Norms
- Social Development Strategy

→ Appropriate Selection & Implementation of Tested, Effective Prevention Programs

→ Decreased Risk & Enhanced Protection

→ Positive Youth Outcomes
Community Youth Development Study Design

- A community randomized trial of CTC
- 24 communities in 7 states
  - Washington, Oregon, Utah, Colorado, Kansas, Illinois, Maine
- Communities matched in pairs within state
  - Randomly assigned to CTC or control condition
  - 12 intervention and 12 control communities
- CYDS communities are small, incorporated towns with clear community names and boundaries
  - Population size 1,500 to 41,000 (average ~15,000)

Hawkins et al. (2008), Brown et al. (2009)
CTC Towns: Coalition of Stakeholders

- Received 6 CTC Trainings

- Collected Data on Local Levels of Risk and Protection

- Prioritized Risk and Protective Factors to Address

- Implemented tested prevention policies and programs from CTC menu
Youth Development Survey (YDS)

- Annual survey of panel recruited from the Class of 2011.
- Active, written parental consent
  - Consent rate: 76.1% in CTC and 76.7% in control communities
- Final longitudinal sample: $N=4407$
- Self-administered questionnaire
  - Grades 5-10: Paper and pencil
  - Grade 12: 74% paper and pencil; 26% online completion
YDS Sample Composition

Sex
- Male: 50%
- Female: 50%

Race/Ethnicity
- White: 64%
- Hispanic: 20%
- Black: 3%
- Native: 5%
- Asian/Pacific Islander: 2%
- Other: 5%
YDS Response Rates*

* Of the active still-living sample

Response rates do not differ by condition.

Of the active still-living sample

<table>
<thead>
<tr>
<th>Grade</th>
<th>Eligible</th>
<th>Surveyed</th>
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<tbody>
<tr>
<td>Grade 6</td>
<td>4407</td>
<td>4390</td>
</tr>
<tr>
<td>Grade 7</td>
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<td>4240</td>
</tr>
<tr>
<td>Grade 8</td>
<td>4405</td>
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<td>4403</td>
<td>4135</td>
</tr>
<tr>
<td>Grade 12</td>
<td>4398</td>
<td>4068</td>
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</tbody>
</table>

Number of students

SOCIAL DEVELOPMENT RESEARCH GROUP
UNIVERSITY of WASHINGTON
School of Social Work
CYDS Timeline: Youth Outcomes

April ‘03
Start of Study

Spring ‘06
3 years of CTC
2nd year of programs

Grade 7
Targeted risk
Delinquency (initiation)

Spring ’07
4 years of CTC
3rd year of programs

Grade 8
Delinquency (initiation & prevalence)
Alcohol (initiation & prevalence)
Cigarettes (initiation)
Binge drinking (prevalence)
Smokeless tobacco (initiation & prevalence)

Spring ’08
Completed Year 5 of the study
End of CYDS funding and TA

Spring ’09
No CYDS funding or TA for 1 year

Grade 10
Targeted risk
Delinquency (initiation & prevalence)
Violence (prevalence)
Alcohol (initiation)
Cigarettes (initiation & prevalence)

Spring ’11
No CYDS funding or TA for 3 years

Grade 12

Effects of CTC on Initiation of Behavior Problems-Grade 8

In the panel, by grade 8 youth in CTC communities were:

- 33% less likely to start Smoking Cigarettes
- 32% less likely to start Drinking
- 25% less likely to start engaging in Delinquent Behavior

...than those from control communities.
Effects of CTC on Current Behavior in Grade 8

• Eighth graders in the panel in CTC communities
  – 23% less likely to drink alcohol currently
  – 37% less likely to “binge” drink (5 or more drinks in a row).
  – Committed 31% fewer different delinquent acts in past year
    …than those from control communities.
Benefits of CTC Compared to Costs – Grade 8 Results

Benefits & Costs Per Youth

<table>
<thead>
<tr>
<th>Benefit Item</th>
<th>Participant</th>
<th>Taxpayer</th>
<th>Other</th>
<th>TOTAL</th>
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<tbody>
<tr>
<td>Smoking</td>
<td>$671</td>
<td>$140</td>
<td>--</td>
<td>$812</td>
</tr>
<tr>
<td>Delinquency</td>
<td>--</td>
<td>$2,033</td>
<td>$2,405</td>
<td>$4,438</td>
</tr>
<tr>
<td>Total Benefits</td>
<td>$671</td>
<td>$2,173</td>
<td>$2,405</td>
<td>$5,250</td>
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<td>Costs</td>
<td>($991)</td>
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<td>Net Present Benefit</td>
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<td>$4,259</td>
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<td>Benefit-Cost Ratio</td>
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<td>$5.30</td>
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CTC returns $5.30 for every $1.00 invested.

Kuklinski et al. (2012)
Sustained Effects after Six Years of CTC (Grade 10)

- In the panel, compared to controls, 10th graders from CTC communities had

  - Lower levels of targeted risk factors.
  - Less initiation of delinquent behavior, alcohol use, and cigarette use.
  - Lower prevalence of past-month cigarette use.
  - Lower prevalence of past-year delinquency
  - Lower prevalence of past-year violence.

(Hawkins et al., 2012, Archives of Pediatrics and Adolescent Medicine)
CYDS Timeline: Youth Outcomes

April ‘03
Start of Study

Spring ‘06
3 years of CTC
2nd year of programs

Grade 7
Targeted risk
Delinquency
(initiation)

Spring ‘07
4 years of CTC
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Grade 8
Delinquency
(initiation & prevalence)
Alcohol
(initiation & prevalence)
Cigarettes
(initiation)
Binge drinking
(prevalence)
Smokeless tobacco
(initiation & prevalence)

Spring ‘08
Completed Year 5 of the study
End of CYDS funding and TA

Grade 10
Targeted risk
Delinquency
(initiation & prevalence)
Violence
(prevalence)
Alcohol
(initiation)
Cigarettes
(initiation & prevalence)

Spring ‘09
No CYDS funding or TA for 1 year

Grade 12

Spring ‘11
No CYDS funding or TA for 3 years

?
Research Question

- Does CTC continue to reduce adolescent substance use, delinquency, and violence?

<table>
<thead>
<tr>
<th>Year</th>
<th>Grade</th>
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<tr>
<td>2003</td>
<td>Grade 5</td>
</tr>
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<td>2004</td>
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<td>2005</td>
<td>Grade 7</td>
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<td>2006</td>
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<td>2007</td>
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<table>
<thead>
<tr>
<th>Year</th>
<th>Year 6</th>
<th>Year 7</th>
<th>Year 8</th>
<th>Year 9</th>
<th>Year 10</th>
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<tr>
<td>2009</td>
<td>2010</td>
<td>2011</td>
<td>2012</td>
<td>2013</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Grade</th>
<th>Age 19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 12</td>
<td></td>
</tr>
<tr>
<td>Grade 10</td>
<td>-</td>
</tr>
</tbody>
</table>

Randomization & Training

- Implementation (supported)
- Sustainability (unsupported)
Analysis

- Multi-level models to account for nested data:
  - 4407 Students
  - 24 Communities
  - 12 Matched Pairs
- Adjustment for student and community characteristics
  - Students: Age, race, ethnicity, parental education, religious attendance, rebelliousness.
  - Community: Student population, % of students receiving free/reduced price school lunch.
- Missing data approach:
  - 40 imputed data sets
  - Results averaged using Rubin’s rules
Cumulative initiation of ALCOHOL use

$N = 3459$ non-initiators at baseline (78.5% of total sample).
Cumulative initiation of CIGARETTE use

*N = 4050 non-initiators at baseline (91.9% of total sample).*

- Control
- CTC

Grade 5: 10%
Grade 6: 18%
Grade 7: 26%
Grade 8: 30%
Grade 9: 34%
Grade 10: 40%
Grade 12: 57%

p < .05
Cumulative initiation of MARIJUANA use

N = 4394 non-initiators at baseline (99.7% of total sample).
Initiation of other drug use

- No significant differences by condition in initiation of:
  - Binge drinking
  - Smokeless tobacco use
  - Inhalant use
  - Nonmedical use of prescription drugs
  - Other illicit drug use (including ecstasy, cocaine, psychedelics, and stimulants)
How many times in the past year (12 months) have you ...?

1. stolen something worth more than $5?
2. purposely damaged or destroyed property that did not belong to you (not counting family property)?
3. taken something from a store without paying for it?
4. been arrested?
5. attacked someone with the idea of seriously hurting them?
6. beat up someone so badly that they probably needed to see a doctor or a nurse?
7. carried a handgun?
How many times in the past year (12 months) have you ...?

1. stolen something worth more than $5?
2. purposely damaged or destroyed property that did not belong to you (not counting family property)?
3. taken something from a store without paying for it?
4. been arrested?
5. attacked someone with the idea of seriously hurting them?
6. beat up someone so badly that they probably needed to see a doctor or a nurse?
7. carried a handgun?
Cumulative initiation of DELINQUENCY

N = 3464 non-initiators at baseline (78.6% of total sample).

- **Control**
- **CTC**

Grade 5: 17%  
Grade 6: 13%  
Grade 7: 31%  
Grade 8: 41%  
Grade 9: 50%  
Grade 10: 58%  
Grade 11: 64%  
Grade 12: 67%

*p < .05*
Cumulative initiation of VIOLENCE

N = 4006 non-initiators at baseline (90.9% of total sample).
Past-Year Prevalence in Grade 12

- No significant differences by condition in past-year prevalence of:
  - Alcohol use
  - Cigarette smoking
  - Marijuana use
  - Delinquency
  - Violence
Past-Month Prevalence in Grade 12

• No significant differences by condition in past-month use of:
  – Alcohol
  – Binge drinking (past 2 weeks)
  – Cigarettes
  – Marijuana
  – Smokeless tobacco
  – Inhalants
  – Prescription drugs
  – Other illicit drugs (including cocaine, psychedelics, and stimulants)
Prevalence of Past-Month ECSTACY Use

Control  CTC

Ecstasy (Grade 12)

p < .05

1.4%  2.6%
Conclusions

• 8 years after CTC implementation and 3 years after study-provided resources ended:
  – CTC continued to prevent the initiation of alcohol use, smoking, delinquency, and violence through 12th grade.
  – CTC did not produce sustained reductions in levels of risk or current prevalence of substance use, delinquency, or violence.
Communities across the US are using CTC
All materials needed to implement Communities That Care have been placed in the public domain and are available for downloading at:

http://www.communitiesthatcare.net

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