A STUDY ON PREDICTORS OF PREVENTION PROGRAMS EFFECTIVENESS

Mihic, J., Novak, M., Hosman, C. University of Zagreb, Croatia, Maastricht University, The Netherlands EUSPR 2013., Paris With high-quality preventive interventions a wide variety of mental, emotional and behavioural problems of children and youth can be reduced including:

violence and delinquency (Botvin, Grifin and Nichols, 2006)
tobacco and alcohol use (Tobler and Stratton, 1997)
risk sexual behaviour (Kirby et al. 1994)
depression, anxiety and other emotional problems (Hawkins, Kosterman, Catalano, Hill and Abbott, 2005; Hosman et al., 2004).

MODERATLY EFFECTIVE

HIGHLY EFFECTIVE

NO IMPACT OR LOW IMPACT

UNDESIRABLE IMPACT

EVIDENCE ON INTERVENTION EFFECTIVENESS IS CRUCIAL

- Despite improvements in quality assessment research, not enough attention is given to quality assurance in order to maximize programs' effectiveness.
- Available scientific knowledge from earlier successful and unsuccessful trials to prevent MBE problems and to promote mental health offers learned lessons for designing and implementing effective programs.
- Determinants of an intervention's impact or effect are referred to as:

"effect predictors" or "effect moderators"

(Hosman and Engels, 1999; Raphael, 1999; Hosman, 1994).

program deliverers' training and support

clear goals and objectives

program fidelity

adaptation

intervention methods ...

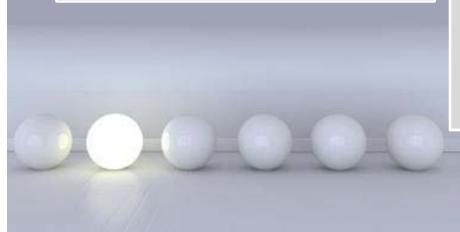
EEFECT PREDICTORS

theoretical background

infrastructural support from management

evaluation - high quality research methods

implementation quality



PROJECT »Preffi – Quality Assurance in the County of Istria«

TRAINING FOR PREVENTION

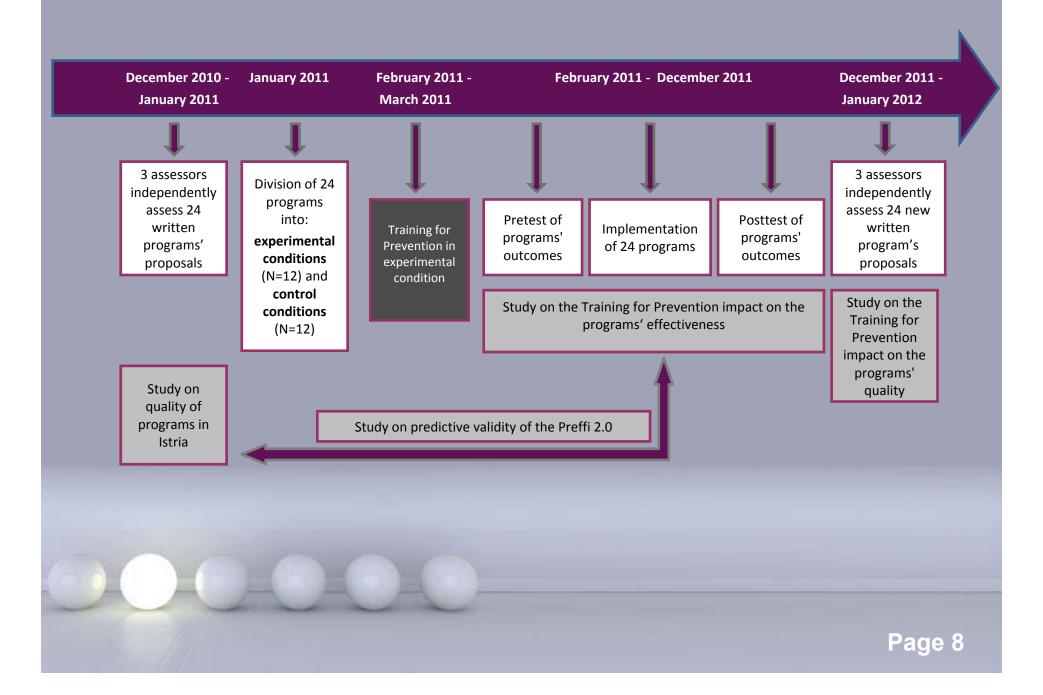
•Can the training on the principles of effective prevention increase programs' effectiveness?

WRITTEN PREVENTION PROGRAMS' PROPOSALS

•Can a quality of written program's proposal predict program's effectiveness?

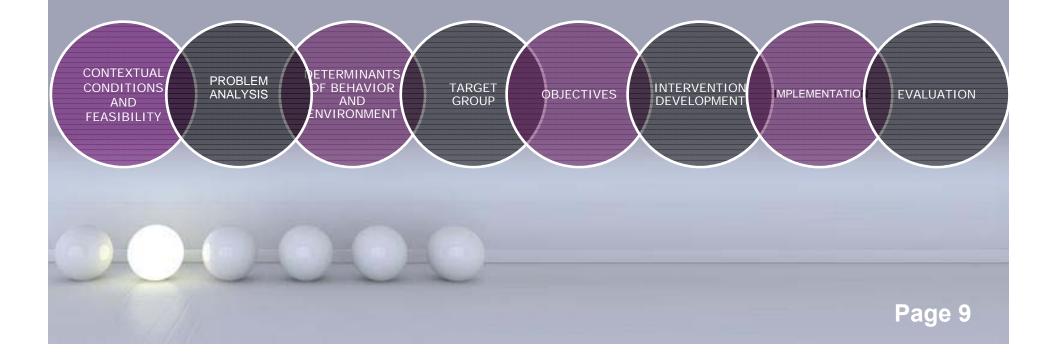
CODES OF THE PROGRAMS
(1) MH promotion through the theatre
(2) Mentoring program
(3) Parenting program I.
(4) Media literacy
(5) Training for the group leaders
(6) Substance abuse prevention for parents
(7) Substance abuse prevention for teachers
(8) Pa
(9) Pa • PARENTING PROGRAMS
(10) P • SUBSTANCE ABUSE
(11) SI PREVENTION PROGRAMS
(12) C • SOCIAL SKILLS DEVELOPMENT
(13) FI PROGRAMS
(14) P. • PROMOTION OF MH
(15) P
(16) Self-confidence training
(17) Substance abuse prevention
(18) Parenting program VI.
(19) Underage drinking prevention
(20) MH promotion through volunteerism
(21) MH promotion through dance
(22) Creative free time program II.
(23) Parenting program VII.
(24) Parenting program VIII.

Mental Health Promotion and Prevention Programs Involved Into a Study

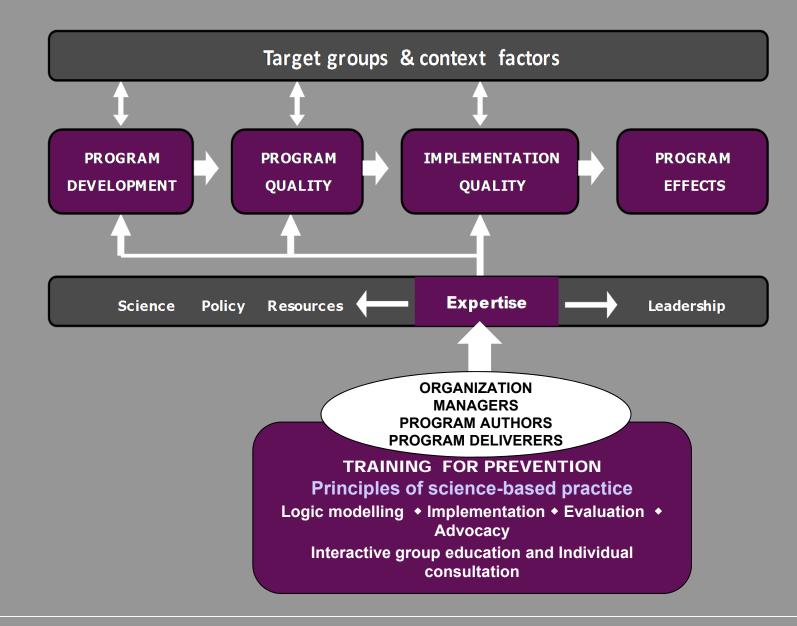


PREFFI 2.0 – Health Promotion Effect Management Instrument

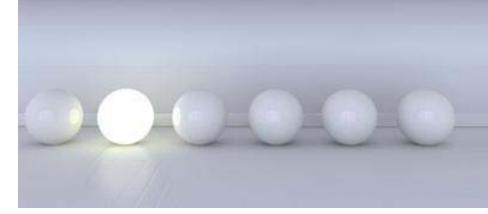
- developed by a group of experts from the Netherlands (Molleman et al., 2005a, 2005b)
- Instrument for assessing conditions for effectiveness and developing quality programs
- 39 quality criteria effect predictors, subdivided into 8 clusters:



MODEL OF A PROJECT

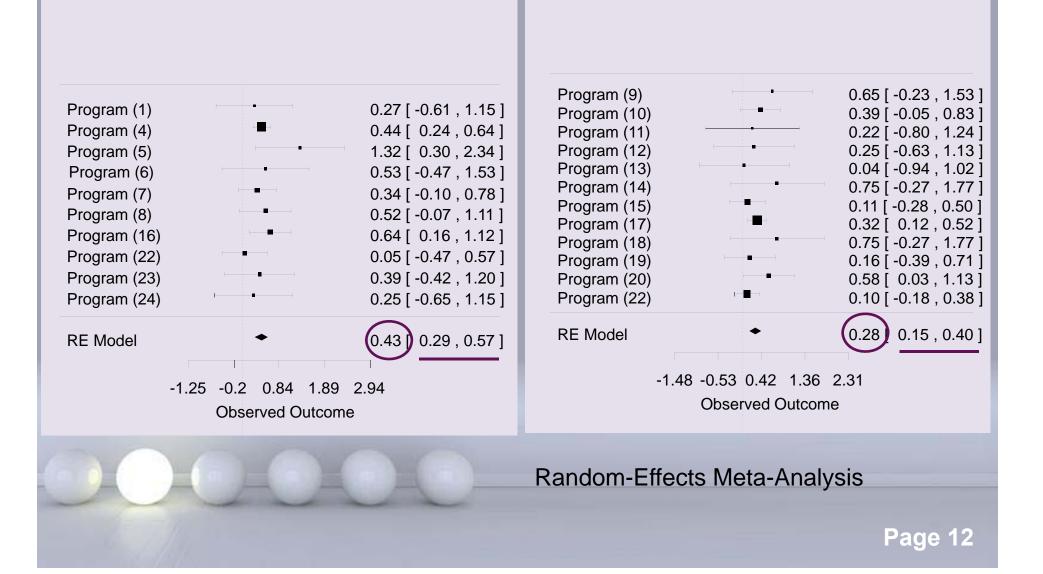


RESULTS AND CONCLUSIONS





INFLUENCE OF THE TRAINING FOR PREVENTION ON PROGRAMS' EFFECTIVENESS



INFLUENCE OF THE TRAINING FOR PREVENTION ON PROGRAMS' EFFECTIVENESS

Univariate Effects for Moderators

MODERATORS	β	SE	Z	p-value	95% CI
Training for prevention	0.15	.10	1.58	.11	(-0.04 - 0.34)
Alpha	0.01	.10	0.13	.90	(-0.18 – 0.21)
Aim of program	-0.02	.11	-0.21	.83	(-0.23 - 0.18)
Program's intensity	-0.11	.10	-1.08	.28	(-0.30 - 0.09)
Beginning of the program	-0.13	.14	-0.89	.37	(-0.40 - 0.15)

INFLUENCE OF THE TRAINING FOR PREVENTION ON PROGRAMS' QUALITY

Results of the Repeated Measures Analysis of Variance on Preffi Scores

CLUSTER 1 – "Contextual conditions and feasibility"								
SOURCE OF VARIABILITY	F	df	P					
Measurement	24.385	1	.000**					
Measurement x Group	.799	1	.383					
CLU	CLUSTER 2 - "Problem analysis"							
SOURCE OF VARIABILITY	F	df	p					
Measurement	5.769	1	.027*					
Measurement x Group	2.877	1	.106					
CLUSTER 3 – "De	terminants of behav	viour and environme	ent"					
SOURCE OF VARIABILITY	F	df	p					
Measurement	5.562	1	.029*					
Measurement x Group	6.457	1	020*					
CLUSTER 4 – "Target group"								
SOURCE OF VARIABILITY	F	df	P					
Measurement	4.934	1	.039*					
Measurement x Group	3.683	1	.070					

INFLUENCE OF THE TRAINING FOR PREVENTION ON PROGRAMS' QUALITY

CLUSTER 5 - "Objectives"							
SOURCE OF VARIABILITY	F	df	р				
Measurement	1.203	1	.286				
Measurement x Group	5.905	1	025*				
CLUSTER 6 - "Intervention development"							
SOURCE OF VARIABILITY	F	df	P				
Measurement	25.106	1	000**				
Measurement x Group	19.000	1	.141				
CLUSTER 7 - "Implementation"							
SOURCE OF VARIABILITY	F	df	P				
Measurement	49.517	1	.000**				
Measurement x Group	.964	1	.339				
CLUSTER 8 – "Evaluation"							
SOURCE OF VARIABILITY	F	df	Р				
Measurement	1.708	1	.207				
Measurement x Group	7.547	1	013*				
TOTAL PREFFI RESULT							
SOURCE OF VARIABILITY	F	df	Р				
Measurement	16.573	1	001**				
Measurement x Group	4.182	1	.055				

Programs' managers and deliverers involved in the Training, didn't achieve significantly higher total scores on the Preffi 2.0 comparing to the managers and deliverers from control condition.

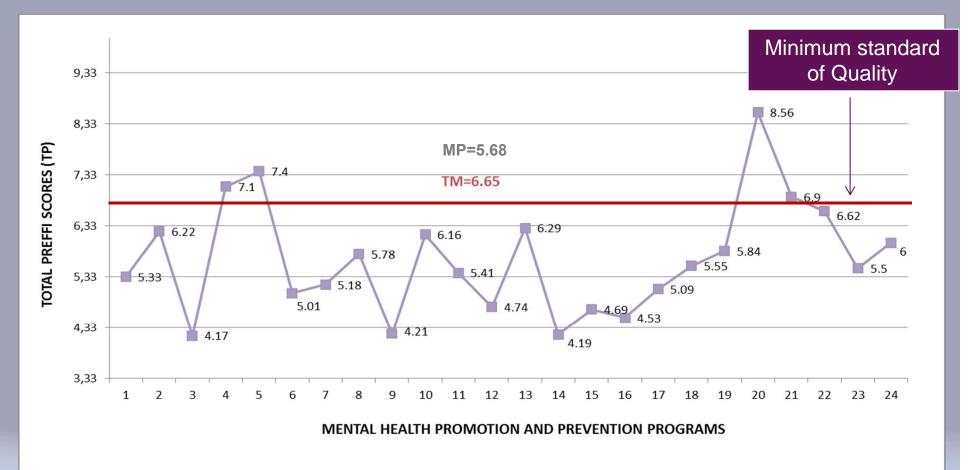
Training significantly improved the level of quality in which managers and deliverers:

•SELECT AND DESCRIBE THE DETERMINANTS OF BEHAVIOUR AND ENVIRONMENT which they want to influence with their programs,

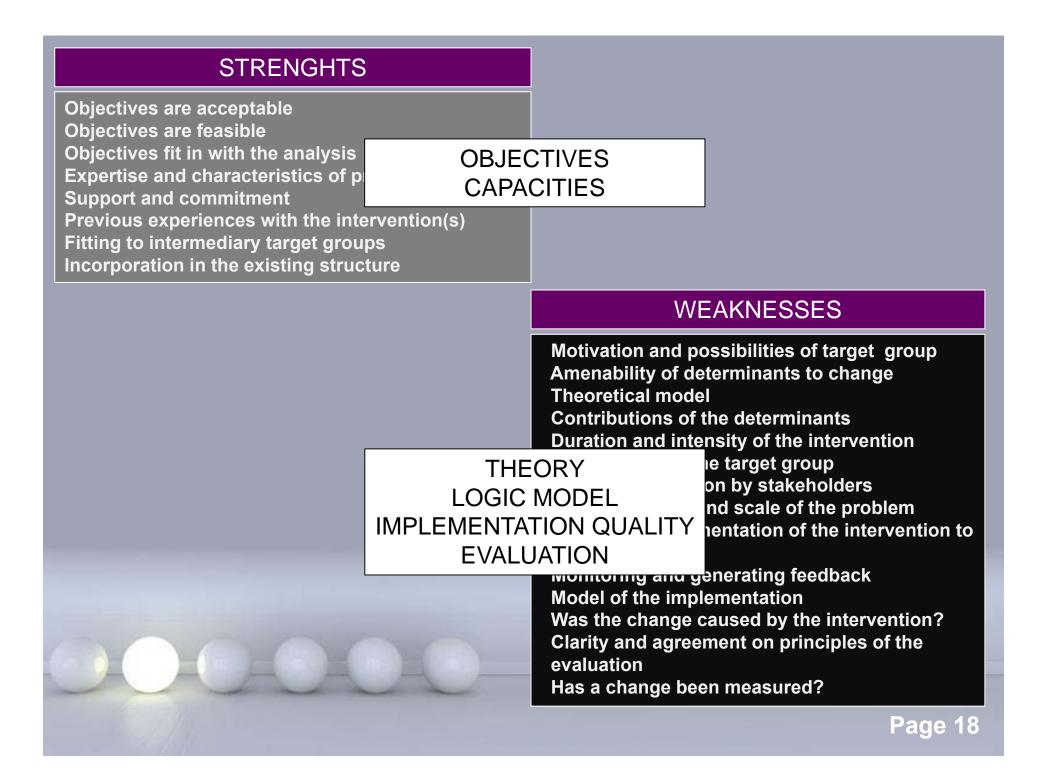
select and define the OBJECTIVES of their programs,

•plan and describe the EVALUATION process of their programs.

QUALITY OF MENTAL HEALTH PROMOTION AND PREVENTION PROGRAMS IN ISTRIA



MP= average mean of total Preffi scores for 24 programs TM= theoretical mean of possible total Preffi scores' range



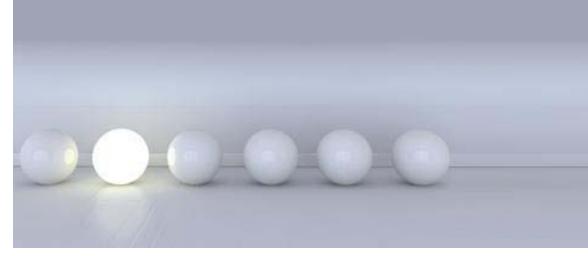
PREDICTIVE VALIDITY OF PREFFI 2.0

Partial Correlations between Programs' Scores on Preffi 2.0 and Effect Sizes

		CORRELATIONS									
		1	2	3	4	5	6	7	8	9	10
1	CLUSTER 1 "Contextual conditions and feasibility"										
2	CLUSTER 2 "Problem analysis"	.65**									
3	CLUSTER 3 "Determinants of behaviour and environment"	.70**	.67**								
4	CLUSTER 4 "Target group"	.74**	.61**	.61**	M	oderate	e, posi	tive lin	ear rel	lations	hip
5	CLUSTER 5 "Objectives"	.73**	.51*	.77**	.68**						
6	CLUSTER 6 "Intervention development"	.85**	.60**	.83**	.72**	.88**					
7	CLUSTER 7 "Implementation"	.82**	.44	.65**	.55*	.59**	.82**				
8	CLUSTER 8 "Evaluation"	.75**	.44	.69**	.58*	.64**	.80**	.90**			
9	TOTAL PREFFI 2.0	.92**	.74**	.88**	.80**	.84**	.95**	.84**	.84**		
10	EFFECT SIZE	.03	.05	.45*	08	.39	.28	.06	.09	.18	

Control Variables (Participation in the Training, Average Alpha of Outcome Measures and Program's Intensity)

- No significant correlation between total scores on Preffi 2.0 and the effect sizes of programs.
- Moderate, positive linear relationship between the third Preffi cluster scores "DETERMINANTS OF BEHAVIOUR AND ENVIRONMENT" and the effect sizes of programs.
- Moderate, positive linear relationship between scores on the fifth Preffi 2.0 cluster "OBJECTIVES" and the effect sizes of programs.



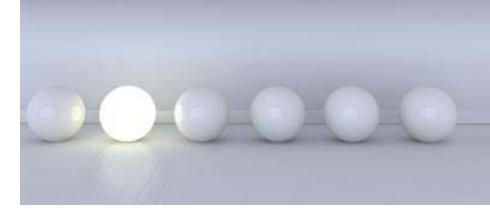
THIRD PREFFI CLUSTER – "DETERMINANTS OF BEHAVIOUR AND ENVIRONMENT" reflects:

the quality level of the program's theoretical model,
description of contributions of determinants to the problem,
amenability of factors to change and
the quality of how determinants are prioritized and selected.

FIFTH PREFFI CLUSTER-"OBJECTIVES" reflects:

if program's objectives are fitting in with the problem analysis,
if they are specific, specified in time and measureable,
if they are acceptable to the main stakeholders and feasible,
if objectives are considered achievable given the available resources, contextual conditions and intended period of time.

PRACTICAL RECOMMENDATIONS

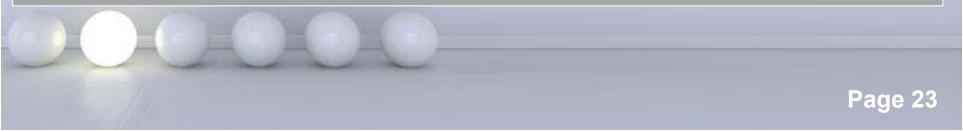


TRAINING FOR PREVENTION

- Tailored to the capacities and needs of different organizations, managers and implementers.
- Special attention should be given to the themes of "Determinants of behaviour and environment" and programs' "Objectives".

PREFFI 2.0

- Training for the instrument's users.
- Greater specification of effect predictors.
- Discussion with programs' developers and deliverers during assessment.
- The final Preffi 2.0 scores should be defined through their discussion and consensus of assessors.
- Development of Preffi 3.0.
- Provision of a digital version of Preffi.





RECOMENDATIONS FOR FUTURE STUDIES

Study on **experts' and practitioners' experiences** in using Preffi 2.0.

IMPROVED VERSION OF PREFFI – PREFFI 3.0

Study on **predictive validity** of improved version of Preffi.

International comparison studies.