

Panel Discussion: The Future of Prevention Science

DISCUSSANTS:

Deborah Temkin Cahill, *Child Trends*

Brittany Rhoades Cooper, *Washington State University*

Janean Dilworth-Bart, *University of Wisconsin-Madison*

Amir François, *The Annie E. Casey Foundation*

Grace Kindt, *Pennsylvania Department of Drug and Alcohol Programs*

I. **Given the discussions and conversations we've had today, and your own work, what are the most pressing issues and opportunities for the field of prevention science?**

Summary: understand context, fidelity with adaptations; partnership, relationships – how to develop, nurture, engage community partners in all aspects of the work and research process; rigorous methods, qualitative and quantitative; across the lifespan, broader than youth; branch into policy, evidence-based policy; operationalizing equity and youth voice – what is it, how do you do it, promotive factors; skepticism and imagination, keep communicating across dividing lines; be more specific, not general with our language (black and brown is ok to say, veterans, etc.); climate change; income equality; lean in to the hard stuff; think about the end, and how to sustain at the start

- a. **Deborah** – Context – came into prevention because of childhood experiences and the importance of future generations having a better future –
 - i. How do you actually prevent behaviors? What are contextual factors?
 - ii. Must go one step further to understand kids are in context where skills are not end-all for prevention.
 1. Societal barriers disproportionately affecting youth (race, orientation, etc.)
 2. Struggle with fidelity vs. adaptation to who are the clients to address systemic inequalities (e.g., LGBTQ youth)
 - a. '08 – '20 where not LGBTQ restricting laws were passed
 - b. '20 bills passed directly targeting LGBTQ communities
 - i. LGBTQ at high risk for suicide, mental illness, etc.
 - ii. Must address context they are in to give the skills needed for current trends
- b. **Brittany** – Community partners being put at the front. SPR is updating standards of knowledge in prevention science.
 - i. Partnerships and relationship building cross-sector and cross-disciplinary. This is not new to the field, but many training

programs do not focus on building partnerships. Must have on-the-job experiences to learn.

1. This is needed at all stages of prevention research.
 - ii. What makes prevention science different and unique? The use of rigorous methods (e.g., RCT) alongside less well accepted qualitative, community centered, and community driven. Expansion of what rigorous methodology looks like beyond traditional quantitative methods.
- c. **Grace** – Stands in the area where research meets practice. Historically, SUD prevention is focused on youth and how to help youth. Adults do not have as many programs. There is not a workforce to implement these programs. “Grow from beginning to end”
- i. Evidence-based policies at the local level alongside state and federal levels is needed. There are many evidence-based programs, but there needs to be support from higher levels or organization.
- d. **Amir** – operationalizing equity and youth voice. Casey foundation uses influence to provide opportunities for youth and families. Getting other funders and institutions together can change minds.
- i. Equity is important to implement through collaboration with academic universities to understand key areas (stakeholder engagement, youth voice, authentic collaboration) to push through risk factors with protective factors.
 - ii. Having diverse voices has been at the forefront to providing equity implementation and influence people in different areas.
 1. How many people you talk to, what people you talk to, and how generalizable is the information?
- e. **Janean** – Need conversations for context on what is current in society. DEI has been made out to look as a negative. Same situation happened in SEL, vaccines, etc. Must keep skepticism and imagination to stay ahead of the curve.
- i. Communicating across lines despite differences of opinions.
 - ii. University workers have been reassigned due to policies barring DEI initiatives in Wisconsin.
 - iii. DEI also includes veterans, nontraditional adults, individuals with disabilities
 - iv. Look at who is benefiting from these initiatives (e.g., rural communities) and how essential services are in those areas

f. Responses from panel:

- i. **Deborah** - It is time to lean into DEI and not retreat. Identify needs and programs right for communities. LGBTQ in Florida who cannot be affirmed face different problems than children in other states where they can be affirmed
- ii. **Amir** – institutionalizing sustainability and focusing on the final pieces. Must do more than empower youth and get them motivated then not be able to support them throughout the process. Ensuring all stakeholders understand the ideas so they are sustainable.

II. What infrastructure do we need as a field to take advantage of these opportunities and build a more impactful and equitable science?

Summary: understand what is already there, state-level and community-level; more direct contact with policy-makers; where does the money go; pay and compensate community partners; need for multiple types of evidence; culturally relevant and reflexive, strengths-based data, asset-based data; easy to consume results; create opportunities for researchers and community members to come together to talk, example of quarterly meeting with state and other partners and research partners; curricular changes across universities; build local evaluation capacity; community-based and community-defined evidence; be careful not to overuse or overdemand evidence;

- a. **Brittany** – must understand what the context and landscape is in prevention, and how this varies from state to state.
 - i. You can build on what is there and identify gaps and existing work. Learn about the context beyond science. What is the local community’s capacity to support prevention. Most action happens at the state and community level.
 - ii. Need for multiple types of evidence. The combination of evidence – research evidence, contextual evidence, and experiential evidence – that allows more effective and sustainable suggestions for addressing community needs.
 - iii. Bidirectional nature of research and practice to have research questions relevant to what the community needs. Creating opportunities for researchers and workforce to talk and collaborate about prevention needs.
- b. **Deborah** – What is the policy context? Learn how government officials use research. Policy maker communication -- is important to speak in their

language and focus on solutions solution. Must address governmental priorities

- i. There are many prevention providers who must be trained properly, yet the training is not long enough to properly train the diversity of prevention providers.
 - ii. Youth must be included in aspects of research (e.g., cell phone technology) as biggest issues facing youth today.
- c. **Janeane** – Increased funding during historical events, but money needs to be tracked to see where it is going. How can the money be equally distributed to communities to address their unique needs. Community members should also be funded for their time when partnering with communities to provide equity and value their conversation in the project.
 - i. Workforce and introduction to prevention coursework in academia, including undergraduate and community colleges.
 - ii. Be more intentional with the education provided. Outreach and scholarship give decision makers and business leaders reasons on why funding is needed in specific areas.
- d. **Grace** – Prevention workforce (prevention specialist) with people who are trained in education, yet there are multiple areas such as media, communication, mobilizing, etc., where we try to train more to teach one person all the skills needed. Workforce should be built up to have pipelines of people in other disciplines to bridge the gap to implement a broad array of activities without one person doing it all.
 - i. How does research get into the community? Do you read the email or understand the research article? Can you apply this information accurately? Learning how the pipeline of translation form academics to decision makers to communities.
- e. **Amir** – Data that is more culturally relevant and reflexive while also being rigorous. Data doesn't always focus on what the participant thinks, wants, or needs. Ethnic identity data can be used to build programs and increase engagement. Data must be prevalent and brought into the traditional data outcomes.
 - i. Using data for empowerment instead of deficit.

III. Ideas in prevention not asked about.

- a. **Deborah** – how artificial intelligence is going to change the nature of research and technical assistance. How will this be used in communities? AI in juvenile justice system to make determinations on if youth should be adjudicated. What biases are in the algorithm? AI – implications for research, teaching, use and misuse

- b. **Grace** – infrastructure related – how to build local coalition capacity to equip communities with abilities or resources to understand if they are really achieving desired outcomes.
- c. **Amir** – Evidence is huge. Making sure to collect data in all areas possible while making evidence simplified. Worried about only making decisions that have evidence-base while some decisions do not have existing evidence.
- d. **Brittany** – SAMHSA is thinking about restarting NREPP. What kind of evidence should be incorporated?
 - i. Community defined evidence – how can community-based evidence be valued alongside traditional evidence?

IV. What are you all most optimistic about that they have seen in prevention science?

- a. **Deborah** – optimistic about where things are headed with combining large datasets and multigenerational datasets.
 - i. Understanding longer term effects of work everyone is doing.
 - ii. Progress seen in the first half of career and progress that is to come.
 - iii. More education opportunities at all levels that can expand knowledge of research and community engagement.
 - iv. More solicitations for mixed-methods and participatory research. Inclusion of qualitative data for more context around findings.
- b. **Brittany** - excited about students attracted to prevention science at all levels to see how they can each make a difference. Prevention fellowship that allows graduates to work at the state-level to learn about policies, funding distribution, etc., to provide a pipeline into the prevention workforce.
- c. **Grace** – rich fabric of people and passion in prevention science that has developed a foundation for prevention science.
- d. **Amir** – The amount of people trained in prevention science that requires people to work in fields beyond academics with opportunities for those graduates.