

IPFS Tri-Ethnic Community Readiness Assessment Process

This process developed at the Tri-Ethnic Center to assess how ready a community is to address an issue. The basic premise is that matching an intervention to a community's level of readiness is absolutely essential for success.

Resources

Community Readiness Manual is very helpful with foundation information on how to do the survey.

Deliverable Submission Process

IPFS Coordinators will need to submit the Tri-Ethnic Readiness Assessment Results document on page 9 (one document for each priority) by June 30, 2015 to Julie Hibben, IPFS Project Director via email at julie.hibben@idph.iowa.gov. Former SPF SIG funded counties will only need to complete interviews/submit the Tri-Ethnic Readiness Assessment Results document for the youth binge drinking priority.

Interview Process

Instructions: Identify a minimum of six individuals per IPFS priority (underage drinking with youth ages 12-20 and binge drinking with youth ages 12-20) in your county to interview. Do not interview the same individuals for both priorities, current members of the coalition or Collaboration Council, persons directly subcontracted to provide services or individuals interviewed during the SPF SIG Project. Individuals may represent any of the following:

- Schools/universities
- City/county government
- Law enforcement/probation
- Health and medical professionals
- Social services
- Mental health services
- Clergy or spiritual community
- Community at large
- Youth

Interview Questions

1. Using a scale from 1-10, how much of a concern is this issue in your community (with 1 being “not at all” and 10 being “a very great concern”)? Please explain. (NOTE: this figure between one and ten is NOT figured into your scoring of this dimension in any way – it is only to provide a reference point.)

A. Knowledge About the Issue

2. How knowledgeable are community members about this issue? Please explain. (Prompt: For example, dynamics, signs, symptoms, local statistics, effects on family and friends, etc.)

3. What type of information is available in your community regarding this issue?

4. What local data are available on this issue in your community?

5. How do people obtain this information in your community?

B. Community Efforts (programs, activities, policies, etc.)

and

C. Community Knowledge of Efforts

6. Please describe the efforts that are available in your community to address this issue. (B)

7. How long have these efforts been going on in your community? (B)

8. What does the community know about these efforts or activities? (C)

9. What are the strengths of these efforts? (C)

10. What are the weaknesses of these efforts? (C)

11. Is there any planning for efforts/services going on in your community surrounding this issue? If yes, please explain. (B)

12. What formal or informal policies, practices and laws related to this issue are in place in your community, and for how long? (Prompt: An example of “formal” would be established policies of schools, police, or courts. An example of “informal” would be similar to the police not responding to calls from a particular part of town, etc.) (B)

13. How does the community view these policies, practices and laws? (B)

D. Leadership

14. Who are the "leaders" specific to this issue in your community?
15. Using a scale from 1 to 10, how much of a concern is this issue to the leadership in your community (with 1 being "not at all" and 10 being "of great concern")? Please explain. (NOTE: this figure between one and ten is NOT figured into your scoring of this dimension in any way – it is only to provide a reference point.)
16. How are these leaders involved in efforts regarding this issue? Please explain. (For example: Are they involved in a committee, task force, etc.? How often do they meet?)
17. Would the leadership support additional efforts? Please explain.

E. Community Climate

18. Are there ever any circumstances in which members of your community might think that this issue should be tolerated? Please explain.
19. How does the community support the efforts to address this issue?
20. What are the primary obstacles to efforts addressing this issue in your community?
21. Based on the answers that you have provided so far, what do you think is the overall feeling among community members regarding this issue?

F. Resources for Prevention Efforts (time, money, people, space, etc.)

22. To whom would an individual affected by this issue turn to first for help in your community? Why?
23. What is the community's and/or local business' attitude about supporting efforts to address this issue, with people volunteering time, making financial donations, and/or providing space?
24. Are you aware of any proposals or action plans that have been submitted for funding that address this issue in your community? If yes, please explain.
25. Do you know if there is any evaluation of efforts that are in place to address this issue? If yes, on a scale of 1 to 10, how sophisticated is the evaluation effort (with 1 being "not at all" and 10 being "very sophisticated")? (NOTE: this figure between one and ten is NOT figured into your scoring of this dimension in any way – it is only to provide a reference point.)

26. Are the evaluation results being used to make changes in programs, activities, or policies or to start new ones?

Optional Questions:

B. Community Efforts

and

C. Community Knowledge

1. Using a scale from 1-10, how aware are people in your community of these efforts (with 1 being "no awareness" and 10 being "very aware")? Please explain. (NOTE: this figure between one and ten is NOT figured into your scoring of this dimension in any way – it is only to provide a reference point.) (C)

2. Who do these programs serve? (Prompt: For example, individuals of a certain age group, ethnicity, etc.) (B)

3. Would there be any segments of the community for which these efforts/services may appear inaccessible? (Prompt: For example, individuals of a certain age group, ethnicity, income level, geographic region, etc.) (B)

4. Is there a need to expand these efforts/services? If not, why not? (B)

5. Are there segments of the community for which these policies, practices and laws may not apply? (Prompt: For example, due to socioeconomic status, ethnicity, age, etc.) (B)

6. Is there a need to expand these policies, practices and laws? If so, are there plans to expand them? Please explain. (B)

F. Resources for Prevention Efforts (time, money, people, space, etc.)

8. On a scale from 1 to 10, what is the level of expertise and training among those working on this issue (with 1 being "very low" and 10 being "very high")? Please explain. (NOTE: this figure between one and ten is NOT figured into your scoring of this dimension in any way – it is only to provide a reference point.)

9. Do efforts that address this issue have a broad base of volunteers?

10. How are current efforts funded? Please explain.

Scoring Community Readiness Interviews for a Complete Assessment

Scoring is an easy step-by-step process that gives you the readiness stages for each of the six dimensions. The following pages provide the process for scoring. There is a scoring worksheet on page 7-8. Ideally, two people should participate in the scoring process (**the interviewer should not assist with scoring**) in order to ensure valid results on this type of qualitative data. Many Comprehensive Substance Abuse Prevention Grant staff have been trained in this process and could possibly help with scoring. Here are step-by-step instructions:

- Working independently, both scorers should read through each interview in its entirety before scoring any of the dimensions in order to get a general feeling and impression from the interview. Although questions are arranged in the interview to pertain to specific dimensions, other interview sections may have some responses that will help provide richer information and insights that may be helpful in scoring other dimensions.
- Again, working independently, the scorers should read the anchored rating scale for the dimension being scored. Always start with the first anchored rating statement. Go through each dimension separately and highlight or underline statements that refer to the anchored rating statements. If the community exceeds the first statement, proceed to the next statement. In order to receive a score at a certain stage, all previous levels must have been met up to and including the statement which the scorer believes best reflects what is stated in the interview. In other words, a community cannot be at stage 7 and not have achieved what is reflected in the statements for stages 1 through 6.
- On the scoring sheet on pages 10-11, each scorer puts his or her independent scores in the table labeled INDIVIDUAL SCORES using the scores for each dimension of each of the interviews. The table provides spaces for up to six key respondent interviews.
- When the independent scoring is complete, the two scorers then meet to discuss the scores. The goal is to reach consensus on the scores by discussing items or statements that might have been missed by one scorer and which may affect the combined or final score assigned. Remember: Different people can have slightly different impressions, and it is important to seek explanation for the decisions made. Once consensus is reached, fill in the table labeled
- COMBINED SCORES on one of the scoring sheets. Add across each row to yield a total for each dimension.

- To find the CALCULATED SCORES for each dimension, take the total for that dimension and divide it by the number of interviews. For example: If two scorers have the following combined scores for their interviews:
- Interviews #1 #2 #3 #4 #5 #6 TOTAL
- Dimension A 3.5 5.0 4.25 4.75 5.5 3.75 26.75
TOTAL Dimension A $26.75 \div \# \text{ of interviews } 6 = 4.46$
- Repeat for all dimensions, and then total the scores.
- To find the OVERALL STAGE OF READINESS, take the total of all calculated scores and divide by the number of dimensions (6). For example:
Dimension A: 4.46
Dimension B: 5.67
Dimension C: 2.54
Dimension D: 3.29
Dimension E: 6.43
Dimension F: 4.07
 $26.46 \div 6 = 4.41$
- The result will be the overall stage of readiness of the community. The scores correspond with the numbered stages and are “rounded down” rather than up, so a score between a 1.0 and a 1.99 would be the first stage, a score of 2.0 to 2.99 would be the second and so forth. In the above example, the average 4.41 represents the fourth stage or Preplanning.
- Finally, under comments, write down any impressions about the community, any unique outcomes, and any qualifying statements that may relate to the score of your community.

Community Readiness Assessment Scoring Sheet

Scorer: _____

Date: _____

INDIVIDUAL SCORES: Record each scorer's independent results for each interview for each dimension. The table provides spaces for up to six interviews.

Interviews #1 #2 #3 #4 #5 #6
 Dimension A
 Dimension B
 Dimension C
 Dimension D
 Dimension E
 Dimension F

COMBINED SCORES: For each interview, the two scorers should discuss their individual scores and then agree on a single score. This is the COMBINED SCORE. Record it below and repeat for each interview in each dimension. Then, add across each row and find the total for each dimension. Use the total to find the calculated score below.

Interviews #1 #2 #3 #4 #5 #6 TOTAL
 Dimension A
 Dimension B
 Dimension C
 Dimension D
 Dimension E
 Dimension F

CALCULATED SCORES: Use the combined score TOTAL in the table above and divide by the number of interviews conducted. Add the calculated scores together and enter it under total.

Stage
 Score
 TOTAL Dimension A ____ ÷ # of interviews ____ = ____
 TOTAL Dimension B ____ ÷ # of interviews ____ = ____
 TOTAL Dimension C ____ ÷ # of interviews ____ = ____
 TOTAL Dimension D ____ ÷ # of interviews ____ = ____
 TOTAL Dimension E ____ ÷ # of interviews ____ = ____
 TOTAL Dimension F ____ ÷ # of interviews ____ = ____

Average Overall Community Readiness Score: ____

OVERALL STAGE OF READINESS: Take the TOTAL calculated score and divide by 6 (the number of dimensions). Use the list of stages below to match the result with a stage of readiness. Remember, round down instead of up.

TOTAL Calculated Score ___ ÷ 6 = ___

Score Stage of Readiness

- 1 No Awareness
- 2 Denial / Resistance
- 3 Vague Awareness
- 4 Preplanning
- 5 Preparation
- 6 Initiation
- 7 Stabilization
- 8 Confirmation / Expansion
- 9 High Level of Community Ownership

COMMENTS, IMPRESSIONS, and QUALIFYING STATEMENTS about the community

Tri-Ethnic Readiness Assessment Results – Clayton County

Instructions: After completing the Tri-Ethnic Readiness Assessment interviews, document the results in each section below and email this document to Julie Hibben, IPFS Project Director by June 30, 2015. Please note that the action interviews, scoring sheets need to be kept on file for the duration of the IPFS Project and shared with the IPFS supervisor.

Priority: Underage Binge Drinking

Interviews: (only include sector or position, not names)

1. Student
2. Municipal Office
3. Education
4. Juvenile Court Services
5. Faith
6. Health Care

Calculated Scores: Use the combined score TOTAL agreed upon by scorers and divide by the number of interviews conducted. Add each calculated score together and enter the total under the average overall county readiness score.

TOTAL Dimension A 22 ÷ # of interviews 6 = 3.7

TOTAL Dimension B 13 ÷ # of interviews 6 = 2.2

TOTAL Dimension C 16 ÷ # of interviews 6 = 2.7

TOTAL Dimension D 13 ÷ # of interviews 6 = 2.2

TOTAL Dimension E 16 ÷ # of interviews 6 = 2.7

TOTAL Dimension F 20 ÷ # of interviews 6 = 3.3

Average Overall County Readiness Score: 16.8

Overall Stage of Readiness: Take the TOTAL calculated score and divide by 6 (the number of dimensions). Remember to round down instead of up.

TOTAL Calculated Score 16.8 ÷ 6 = 2.8

Stage of Readiness:

Stage 2: Resistance/Denial - At least some community members recognize that it is a concern, but there is little recognition that it might be occurring locally.

Comments, impressions and qualifying statements about the county:

- Stage 2 mostly because people do not know the definition and don't understand the risks. The problem needs to be identified and known.
- 'Little information available' is an accurate description of binge drinking because there seems to be very little information for the public to access
- Most information is directed toward underage drinking, not binge drinking specifically
- Community members feel there is more efforts surrounding drinking and driving verses binge drinking
- There are few prevention efforts in this area, only resources for problems that have occurred
- 'Raising awareness' is identified as a need and 'Cultural norms' are identified as an obstacle
- Leadership is the highest dimension because several possible resources were identified, although laws are the only resource that seems to be firmly in place. Community leaders would be supportive of further efforts, but seem to lack direction.