

# Strategic Plan and Logic Models

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*Youth and Young Adult Bullying in Anchorage, Alaska*

**Prepared By**  
**Anchorage Collaborative Coalitions**

**For Review By**  
**State Of Alaska**  
**Department of Health and Social Services**  
**Division of Behavioral Health**

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**ANCHORAGE  
COLLABORATIVE  
COALITIONS**

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## **I. Vision**

Together creating communities where youth and young adults thrive and are resilient.

## **II. Acknowledgements**

The Anchorage Collaborative Coalition (ACC) Strategic Plan was written with assistance by Bright Solutions, CW Communications, and the three coalitions that make up the ACC: Alaska Injury Prevention Center, Anchorage Youth Development Coalition, Healthy Voices, Healthy Choices with Volunteers of America Alaska and Spirit of Youth. The ACC would like to thank the key partner's members who make up the above mentioned coalitions, along with all the community partners and individuals who gave significant and essential input and feedback into this process via survey's, focus group, and three community planning sessions.

The ACC used the findings from research conducted by University of Alaska Anchorage Center for Human Development, Brian Saylor and Associates (Brian Saylor) and Sunshine Consulting (Carisa Dwyer) to ensure we gathered data and researched "best fit" for ensuring the ACC was able to prioritize factors contributing to youth/young adult mental wellness as it relates to bullying in Anchorage. Your time, energy and skills allowed the ACC to choose appropriate strategies to meet our identified goals and objectives from the data and information collected for this project.

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### **III. Introduction**

In 2014, the State of Alaska's Department of Health and Social Services, Division of Behavioral Health (DBH) issued Comprehensive Behavioral Health Prevention and Early Intervention Services grants to coalitions across the State of Alaska. Within Anchorage, three coalitions were awarded funding: Anchorage Youth Development Coalition (AYDC) with The Alaska Injury Prevention Center (AIPC), Healthy Voices, Healthy Choices with Volunteers of America, and Spirit of Youth. In order to better serve the Anchorage community, the State asked AYDC, Healthy Voices Healthy Choices, and Spirit of Youth to combine resources and work together through the grant processes. Together these groups are working as the Anchorage Collaborative Coalitions (ACC).

#### **Division of Behavioral Health Grant**

The DBH presented grantees with three behavioral health conditions of interest: mental health, substance use, and suicide. Coalitions were to select one of these three behavioral health conditions as their priority area. After conducting a community assessment, coalitions were to identify a priority area, determine consequences relevant to the priority area, and define intermediate variables and contributing factors associated with the consequences based on assessment data. Community assessments such as this are the first step in utilizing the Substance Abuse and Mental Health Services Administration's Strategic Prevention Framework (SPF). Learning more about Anchorage, as well as understanding the prevalence and consequences of mental health, suicide, and substance abuse in Anchorage, allowed the ACC to strategically target and address relevant local conditions to be changed and improved. Once intermediate variables were prioritized, the coalition developed a logic model and plans for addressing the identified condition.

#### **Strategic Prevention Framework**

The SPF is a prevention model used by community coalitions to improve the behavioral health of their communities. The SPF takes a comprehensive approach to behavioral health and prevention and is rooted in principles of public health and community organizing. Strategies based on the SPF should address multiple levels including the individual, relationships, community and the environment. The SPF outlines a five step process: 1) Assessment, 2) Capacity Building, 3) Planning, 4) Implementation, and 5) Evaluation. The SPF places Cultural Competency and Sustainability at the core of this process, meaning that at each step of the SPF, coalitions should work to ensure their actions demonstrate cultural competence and that the work being done is sustainable.



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Note. Image retrieved from (Substance Abuse and Mental Health Services Administration)

### Anchorage Collaborative Coalitions

Each of the three ACC coalitions (AYDC, Healthy Voices, Healthy Choices, and Spirit of Youth) has a youth focus and, as such, the work of the ACC is focused on youth in Anchorage. The ACC defines youth to include youth and young adults ages 12-24.

In November 2014, the ACC issued a request for proposals for a contractor to conduct an assessment to evaluate behavioral health indicators and related demographic, social, economic, and environmental factors pertaining to youth and young adults aged 9-24 in Anchorage, Alaska. After a thoughtful review process, the ACC selected the UAA Center for Human Development (CHD) and a team of UAA researchers to work collaboratively with the ACC on a community assessment. Members of the UAA Assessment Team included researchers at CHD as well as additional university researchers from the Center for Behavioral Health Research and Services, the Department of Health Sciences, and the Justice Center.

The UAA Assessment Team began their work in January 2015. At the conclusion of the first phase, the ACC selected its priority issue, identified relevant consequences, potential intermediate variables and contributing factors, and identified additional data needs. During the second phase of the assessment, the CHD Team collected primary data to address knowledge gaps left by the existing data analysis. The new data enabled the ACC to prioritize the intermediate variable(s) with the strongest relationship to the selected priority issue, and most likely to affect the consequences amongst Anchorage youth.

## IV. Community Assessment Results

As part of the assessment, the ACC examined existing data, collected and analyzed new data, conducted youth focus groups, systematically reviewed existing prevention resources, interviewed members of the community, and involving members of the coalitions and the greater Anchorage community in the process.

### Findings

#### *Priority Issue*

The ACC found the status of mental health of Anchorage youth and young adults to be of particular concern and selected mental health as the priority issue of focus. Of particular concern were high rates and upward trends in youth reporting feelings of sadness, alone in life and hopelessness, which were operationalized as indicators of mental health. The data show that consequences of poor mental health result in suicidal behavior and ideation and substance abuse. The ACC defined its long term goal: to decrease conditions that lead to suicide and suicide attempts and increase those that lead to mentally healthy 12-24 year olds. The prioritized intermediate variable chosen was bullying, with special emphases on bullying in 9<sup>th</sup> grade and affecting 18-24 year olds. The community engaged processes and data supporting the prioritization are summarized below.

#### *Intermediate Variable*

According to the UAA Assessment Team's review of the focus groups, there is a direct link between poor mental health conditions (including feelings of alone in life, sadness, and hopelessness) and bullying. As they observed in their review, "This is an important finding as it suggests the two main variables the team examined are inextricably linked" (Heath, et al., 2015; Anchorage Collaborative Coalitions, 2016). This finding underscores the importance of the selection of this intermediate variable and these focus groups, and the data from other sources underscore the importance of selecting ninth grade youth and 18-24 year olds as the target populations for interventions.

Across several datasets and sources, bullying was significantly tied to poor mental health outcomes among youth in Anchorage. Analysis of YRBS data shows that ASD high school students who were bullied, either in school or electronically, were more likely to report that they seriously considered suicide, planned a suicide attempt, felt sad or hopeless, currently drink, and binge drink. Analysis of data from the YAS, a survey administered to 18-24 year olds living in Anchorage, shows that bullying, second only to stress, is a significant predictor of mental health status for young adults in Anchorage. Qualitative data from focus groups with youth aged 12-24 reflect the extent to which bullying influences the mental health of youth in those age groups. Together, these findings further reinforced the ACC intermediate variable choices of bullying in ninth grade and among 18-24 year olds. Furthermore, in the assessment of all the data

available, clear connections were made between bullying and suicide, substance use, and mental health issues.

### ***Bullying Definition***

In order to assess prevalence, incidence and consequences of bullying, it was necessary to have an operative definition of the word. Bullying is unwanted, aggressive behavior that involves a real or perceived power imbalance. The behavior is repeated, or has the potential to be repeated, over time. Bullying includes actions such as making threats, spreading rumors, attacking someone physically or verbally, and excluding someone from a group on purpose.

### ***Community Readiness***

The ACC Executive Committee coordinated an evaluation of the Anchorage community's ability to address the selected intermediate variables and priority issue to assess community readiness. Overall, the level of readiness in the Anchorage community was moderate for both the ninth grade population as well as 18-24 year olds. There were some slight differences in readiness between dimensions. With prevention programming coming in at the highest level of readiness: 6=initiation (ninth grade)/5=preparation (18-24 year olds), and community climate and knowledge about the problem falling to the bottom with a score of 4=preplanning (ninth grade)/3=vague awareness (18-24 year olds). In addition to variances within dimensions, there were also notable differences among sectors. Healthcare had the highest readiness rating of 6=initiation, with the other sectors scoring between stages 4=preplanning and 5=preparation.

As prescribed by the community readiness manual, with the majority of scores within the stages of preplanning and preparation the ACC will focus on raising awareness of concrete ideas about bullying and gathering existing information with which to plan more specific strategies in the planning stage of our efforts.

### ***Intervening/Contributing Factors:***

The data point to several notable factors that are associated with protecting against bullying, sadness/hopelessness, and suicide. As evidenced by both focus groups and the Young Adult Survey, individual factors such as optimism, self-esteem, and self-awareness are protective for bullying and sadness/hopelessness. That is, youth perceived individuals with higher self-esteem and self-awareness to be less impacted by bullying and also less likely to be bullied.

The Young Adult Survey showed that higher levels of optimism were associated with better mental health. Optimism is equally predictive of good mental health as being bullied or harassed is a risk factor for poor mental health. The protective factors included youth feeling like they matter to their community and youth having trusted relationships, both peer and adult.



Primary data for the 12-17 year-old age group primarily focused on the Youth Risk Behavior Survey (YRBS) School Climate and Connectedness survey (SCCS). According to YRBS strength of association findings, youth feeling like they matter to their community is the second ranked protective factor against bullying, feeling sad/hopeless, suicide ideation, and a planned attempt at suicide.

This was also evidenced in the focus group discussion, where youth elaborated on what it meant to matter in their community and the importance of feeling engaged in one's community. Regarding trusted relationships, YRBS data indicated the highest ranked protective factor against being bullied was having a teacher who cares. Having a teacher who cares also meant youth were less likely to feel sad or hopeless and less likely to consider or plan a suicide attempt.

Trusted adults were mentioned in focus groups as a resource and support, second only to peer relationships. Peers were highly regarded across focus groups as the first line of defense for bullying and mental health concerns. Individuals often said they would talk to and rely on their peers first before seeking adult or professional help. It is important to note that while youth in focus groups refer to peer relationships, there is no measure of peer relationships in YRBS.

In summary, it is demonstrated through a variety of means (i.e., secondary data, primary data, quantitative and qualitative data) that bullying, mental health, and suicide are not independent constructs. As a result, there are a number of risk and protective factors that are associated with at least two if not all three of these variables. Therefore, it would be highly beneficial and efficient to focus interventions and next steps on intermediate variables that cross the main variables of focus, thereby increasing the potential impact of the intervention. For example, having trusted relationships is a protective factor for bullying, sadness/hopelessness, and suicide, and therefore an intervention focused on establishing trusted relationships would potentially reduce bullying behaviors, feelings of depression, and suicide ideation/attempts.

## Future

The ACC used the results of its assessment to guide the strategic planning process. Identifying interventions that are appropriate to our level of readiness, built on strong data, and developed in conjunction with our community is essential. Toward that end, the ACC began developing a planning process in late February that drew on coalition members, people from the community, and youth from the identified age groups. The planning process yielded this strategic plan, which identifies implementing interventions and includes a final logic model reflecting the planning process. A cohesive evaluation strategy is in development that will ensure that the work we do effectively addresses the intermediate variables.

## V. Strategic Planning Methodology

### Introduction

DBH approved the ACC assessment document on February 17, 2016. (Anchorage Collaborative Coalitions, 2016) This review set in motion the strategic planning process. The ACC Executive Committee determined that the planning process would include an initial series of community meetings that would review and explain the assessment's findings and seek feedback on how those findings and recommendations might be more focused on specific interventions. Based on that determination, ACC would then identify key research areas reflecting community input, community readiness, and the assessment findings. These research areas, refined even further by the ACC Executive Committee, would then inform a research phase where professional researchers would be retained by ACC to identify evidence-based and other practices that might address each identified strategic intervention area.

Research findings would then be presented to community participants in an additional public meeting and further narrowed to those interventions that 1) were supported by research; 2) could be realistically addressed by the community; and 3) had a likelihood of being sustainable. These interventions were to then be presented to a stakeholder group that would include the ACC Executive Team, key members of each coalition, stakeholders, and members of the Evaluation team to identify up to six strategies using the SPF framework. Further meetings to refine those strategies would be conducted in individual strategic area work group meetings following the planning session. This process was effectively completed and those results follow.

### Strategic Planning Steps

The strategic planning process included a number of major steps. These are summarized below:

1. Develop vision statement (completed during the assessment process, this helped refine our focus and direction)
2. Community engagement and input to identify potential areas of intervention and research. The community was engaged to examine the assessment findings, proposed area of focus, and community readiness and resources, to determine the most potentially effective interventions.
3. Research of community and assessment-identified areas of focus.
4. Community and ACC review of research to identify community relevance, feasibility, cultural relevance and appropriateness, and sustainability of areas researched. This then led to the identification of specific strategy areas.
5. Strategic planning session, based on the SPF SIG and Strategic Plan Guidance Document (Feathers) models, to develop goal and objective statements; short, mid, and long term

outcomes; strategy components, outputs, and community resources for each strategy area.

6. Develop SMART (Smart, Measurable, Achievable, Relevant, and Time-bound) objectives for each goal -- What will change, for who, by how much, and when?
7. Provide templates for planning workgroups (developed around each strategy) describing the fit of each strategy to the community, including community readiness; target population; cost and feasibility; culture; and other elements.
8. Identify community resources needed for each strategy (human, technical, fiscal, and structural/linkages)
9. Develop strategy level logic models that include resources, outputs, strategy components, short-term outcomes (changes in knowledge, skills, attitudes, beliefs), medium-term outcomes (changes in behavior), and long-term outcomes (changes in bullying rates)
10. For each strategy discuss target groups including number of people served, plans for recruiting participants, and plans for retaining participants.
11. For each strategy discuss collaborative partners and community members needed to succeed, including the role for each partner.
12. For each strategy identify potential barriers and possible solutions to these barriers.
13. Develop action plans for each strategy, including strategy components, key activities, target completion dates, person responsible for overseeing activities, resources and materials needed, and location for activities.

### Strategic Planning Actions

The ACC Executive Team, working with numerous community partners and participants, coalition members, researchers, and professionals from the Center for Human Development (CHD), used the assessment document, community input, community readiness assessment, and research to identify six key strategies for addressing bullying within the 9<sup>th</sup> grade and the 18 – 24 year old populations. This process used modified forms of the SPF SIG model, the Strategic Plan Guidance model, and other strategic planning and community facilitation methods to develop SMART objectives, community and strategy level logic models, timelines, and other elements necessary to address the strategy areas.

The following chart summarizes the major actions of the planning process.

Date	Major Actions
February 17, 2016	Approval received of Community Assessment; vision statement was incorporated in this from earlier work. Planning began for community forums
March 8, 2016	First community forum held Issues further refined; key topical areas for research begin to be derived

March 14, 2016	AYDC forum held (“Why?” and “Why here?”)
March 16, 2016	ACC Executive Team narrowed its focus based on community input Initial research questions developed
March 30, 2016	Research questions finalized Researchers contracted
Month of May	Youth training in logic models and strategic planning conducted to prepare youth for planning process
May 10, 2016	Research completed and reviewed by ACC Executive Team
May 13, 2016	Community-level Logic Model drafted
May 16, 2016	Research presented to the public in a community forum Community appropriateness, capacity, and sustainability evaluated for ideas generated from research Initial strategy areas identified for further review and planning
Week of May 16	Further refining of strategies by ACC Executive Team and backbone contractors
May 23, 2016	Strategic planning session with ACC Executive Team, Coalition members, youth, some evaluation team members, and others Identified goals and objectives; long, mid, and short term outcomes; contributing elements; outputs; and, in some cases, timelines and resources.
May 24 – June 13, 2016	Further development of goals and objectives; long, mid, and short term outcomes; contributing elements; outputs; and timelines and resources Preliminary identification of evaluation goals
August 17, 2016	Completion of strategy level logic models
August 17, 2016	Identification of Evaluation methodology and some proposed measures for strategies Completion of submission to state in draft

## VI. Strategies

### Synopsis of Chosen Strategies

The Anchorage Collaborative Coalitions chose six strategies to address the intervening variables and contributing factors identified by the Anchorage Youth & Young Adults Community Behavioral Health Assessment.

#### ***Strategy 1: Infrastructure Development and Capacity Building***

ACC will continue to support coalition growth, development, and sustainability through directed infrastructure development and capacity building activities. This strategy aims to increase capacity within the ACC and the Anchorage community to address bullying, its contributing factor, and its consequences. Specifically through increased infrastructure and capacity, this aims to grow the amount of youth that feel they matter in the community, add local businesses and postsecondary institutions that adopt recommended policies, and increase the number of youth serving organizations using best practices to promote health and wellness and protective factors.

#### ***Strategy 2: Awareness and Social Norms Campaign for Middle and High Schools***

A citywide awareness campaign will be used to increase the community readiness scores of 4 in the dimensions of climate and knowledge about the problem. The campaign will aim to increase knowledge of bullying, awareness of its prevalence among middle- to high-school youth, and the negative consequences of bullying, reducing the stigma of reporting bullying and increasing awareness of associated proactive practices.

#### ***Strategy 3: Policy Education and Advocacy for Middle and High Schools***

During the Community Needs Assessment Phase, focus groups with youth and the community readiness interviews uncovered a need for clearer, more consistently followed policies for dealing with bullying behaviors in our schools and other institutions serving Anchorage middle school and high-school youth. This strategy will recommend evidence based bullying policies to Anchorage schools and other institutions serving Anchorage middle school and high-school youth.

#### ***Strategy 4: Expansion of Existing Programs For Youth Aged 12-18 Years Old***

This strategy is designed to expand existing youth, adult, and community programs to include life skills, bullying prevention, and consequence reduction (e.g. depression, substance use, suicide, etc.) Through this effort, youth, adults and community will have skills, strengths and resources needed to eliminate bullying and consequences of bullying. Specifically, this strategy will be accomplished by increasing protective factors with a focus on caring adults and increased parental engagement through expansion of the Start the Conversation program.

#### ***Strategy 5: Bystander Intervention***

Currently used around the United States, and with an existing presence in Alaska, the Green Dot bystander intervention program work prepares individual community

members to actively participate in the reduction of interpersonal violence. Specifically created to address domestic violence, Green Dot curriculum has broadened to help sexual violence, alcohol and drug-abuse, child abuse and bullying. This strategy will focus on the main goal of improvements in the behavioral health status of the target population of 18-24 year olds. Green Dot programming will be implemented within Anchorage's restaurant industry or other environments with concentrations of the target population, with the goal to reduce workplace bullying.

#### ***Strategy 6: Community Awareness and Outreach Campaign for Young Adults***

ACC will launch a targeted awareness campaign used to increase the community's knowledge of adult bullying and the consequences related to the issue of adult bullying. This strategy aims to increase the community readiness score of 3 (vague awareness) in the dimension of community awareness of the problem. Specifically, this strategy will address community awareness and understanding of adult bullying, its consequences, and resources available in the community.

Following is detailed information about each of the six strategies the Anchorage Collaborative Coalitions selected to implement to address bullying and the negative consequences of bullying among youth and young adults in Anchorage. Each strategy description includes the following: a description of the intermediate variables the strategy will address, the objectives ACC hopes to meet as a result of implementing the strategy, a narrative description of the activities that will be implemented as part of the strategy, the resources, both human and financial that will be used, and an implementation timeline.

### **Strategy 1: Infrastructure Development and Capacity Building**

#### ***Description***

Anchorage Collaborative Coalitions (ACC) will use infrastructure development and capacity building to support coalition growth, development and sustainability. This strategy aims to increase capacity within the ACC, our coalitions, and the Anchorage community to address bullying, its contributing factors, and its consequences.

This strategy is integral to building community support and helps us to accomplish the remaining five strategies to reduce and prevent bullying behavior and its consequences. Infrastructure development and capacity building includes these primary activities: 1) creating and implementing a plan to increase youth who feel like they matter in the community through coalition partners; 2) creating an advocacy plan to address policies, procedures, and practices addressing young adult bullying at work places and postsecondary institutions; and 3) building capacity of youth-serving organizations through targeted training and recommending best practices.

Building coalition capacity will support our coalition members to build resiliency, increase life skills and assets to reduce bullying and the consequences of bullying as they contribute to poor mental health of Anchorage area youth. At the Community Planning

sessions participants were clear that support should be given to programs/project that currently exist vs. developing new programs/projects and trying to fit them into the school/community. The ACC will first support programs/projects currently being conducted by coalitions that make up the ACC (Alaska Injury Prevention Center/Anchorage Youth Development Coalition, Healthy Voices, Healthy Choices and Spirit of Youth) that will contribute to the goal.

The objectives selected are supported by data and information contained in Growing Up Anchorage report and the ACC Community Assessment Anchorage Youth & Young Adults (Anchorage Collaborative Coalitions, 2016). Strength of Association Between Bullying and Behavioral Health Indicators shows youth who are bullied in school are 119% more likely to drink alcohol, 87% more likely to currently use marijuana, and 201% more likely to have feelings of sad and hopelessness and 189% more likely to seriously considered suicide (Heath, et al., 2015).

National data show that bullying is higher among 9<sup>th</sup> graders than in any other high school group. Twenty five percent (25%) of 9<sup>th</sup> grade students reported being bullied on school property and 16% reported being bullies electronically (cyber bullying). The most important program elements that were associated with a decrease in bullying were parent training/meetings, improved playground supervision, disciplinary methods, classroom management, teacher training, classroom rules, a whole school anti-bullying policy, school conferences, information for parents, and cooperative group work. In addition, the total number of elements and the duration and intensity of the program for teachers and children were significantly associated with a decrease in bullying (Saylor, 2016).

They recommend that anti-bullying programs should be designed to go beyond the scope of the school, and target wider systemic factors such as the family. Bullied children often do not communicate their problems to anyone while parents and teachers often do not talk to bullies about their conduct. This suggests that parent training and meetings are significantly related to a decrease in both bullying and victimization (Saylor, 2016).

#### Life Skills Training

One specific requirement of this review was to address life skills training. While there may be some differences in training curricula, there are some basic similarities (Kastner & Wyatt, 2009). The list of skills below were intended to address the needs of high-risk youth, most of the skills learned in a life skills training program appear to address bullying risk and protective factors (Anand & Ritu, 2015; Campbell-Heider, Tuttle, & Knapp, 2009; Tuttle, Campbell-Heider, & David, 2006).

Motivation for personal goals	Executive functioning skills
Independent living skills and self-reliance	Emotional awareness, reflection and regulation

Physical fitness and healthful habits	Academic skills
Social skills	Relationship skills and values
Moral behavior, integrity and character	Spirituality and a purposeful life

Through research of local and national policies dealing with bullying, the ACC will be able to recommend model policies for local institutions of higher education, employers of young adults and other organizations. The need for policy research for the 18-24-year-old age group was directly informed by the assessment findings, both locally and nationally. During our focus groups and community readiness survey, there were few resources available describing best practices and a low level of general awareness of this issue. Additionally, during our initial search both locally and nationally for any evidence-based programs, we found few examples. The policy research will allow our workgroup to build the best possible models for local organizations to address bullying outcomes.

### **Objectives**

Increase the capacity of Anchorage Collaborative Coalition (ACC) and the Anchorage community to address bullying, its contributing factors, and its consequences.

### **Resources**

The ACC will prioritize and look at potential resources in the community, such as human resources. Human resources include coalition staff, coalition members, coalition members' organizational resources such as staff and volunteers, interns and/or VISTA members, and others with the expertise and interest in capacity building.

Local agencies will be awarded a grant around the goals of increasing the number of youth that feel they matter to the community and increasing youth serving organizations using best practices. Advisory and training resources will be determined based upon need of knowledge and understanding of bullying and the consequences on individual's mental wellness. The ACC Executive Team and data and evaluation team will provide oversight to these programs, collecting status reports and evaluation data.

Healthy Voices, Healthy Choices will lead on developing an advocacy plan to address policies, practices, and processes (3P) for young adults, supported by other community members with 3P expertise and interest. Some key partners may include University of Alaska, Alaska Pacific University, local business leaders, and other places of higher learning (Job Corps, trade schools).

Anchorage Youth Development Coalition will lead in developing best practices for youth serving organizations to address bullying with the support from its coalition members.

### **Activities**

Infrastructure development and capacity building have several activities that will help support this strategy. See below.



- A. Research, develop, and implement a plan to increase the amount of youth who feel like they matter in the community. The ACC will convene a work group to research best and promising practices, collect youth and community input and data, and implement new efforts. Change will be measured through existing surveys and/or the questions from, YRBS, SCCS, as well as focus groups. Evaluation strategies will be determined based on existing methods in the appropriate best and promising practices
- B. Create an advocacy plan to address policies, procedures, and practices framework. The ACC will convene a work group to identify model policies that address young adult bullying for both workplaces and places of higher learning based on research findings. To build partnerships and champions in the community, we will conduct trainings and provide policy templates for adoption for workplaces and places of higher learning.
- C. Build capacity of youth-serving organizations through targeted training and supportive best practices. The ACC will work to increase programming that promotes skills, strengths and resources needed to promote health and wellness and protective factors. A workgroup engaging in participatory evaluation methods will develop shared measures so each selected agency will collectively contribute to the same goals and use the same evaluation methods, as well as work with and review the selected agencies.

### *Timeline*

<b>Component</b>	<b>Key Activities</b>	<b>Who is Responsible</b>	<b>End Date</b>
Increase youth that feel they matter in community	Conduct research	AIPC / Becky Judd	September 15, 2016
	Develop plan and process to support and fund coalition agencies	AIPC / AYDC	Ongoing
	Evaluate agency programs	ACC Evaluation Team	Ongoing
Increase youth serving organizations using best practices relevant to preventing bullying and its consequences	Form committee to identify best and promising practices	AYDC	October 1, 2016
	Choose partnering organizations	AYDC	December 1, 2016
	Implement plan	Community agencies	January 1, 2017
	Create evaluation metrics to assess success of programs	ACC Evaluation Team	January 1, 2018
Policies, practices and processes	Research and create 3P advocacy plan	HVHC	November 1, 2016
	Vet business partners and institutions of high learning	HVHC and ACC Executive Committee	January 1, 2016
	Develop and conduct trainings with	HVHC	May 1, 2017

	partners		
	Create evaluation metrics of programs in businesses and places of learning	ACC Evaluation Team	2017

## Strategy 2: Awareness and Social Norms Campaign for Middle and High Schools

### Description

Bullying prevention research consistently recommends developing a shared understanding of what bullying is and its impact (Stuart-Cassell, Bell, & Springer, 2011; Rivara & Le Menestrel, 2016; Gladden, Vivolo-Kantor, Hamburger & Lumpkin, 2014). The CDC defines bullying as “any unwanted aggressive behavior(s) involving an observed or perceived power imbalance and is repeated multiple times or is highly likely to be repeated” (Gladden, Vivolo-Kantor, Hamburger, & Lumpkin, 2014).

The CDC’s Stopbullying.gov Community Action Toolkit warns coalitions and planning groups that perceptions about bullying can have powerful influences on youth and adults and suggests groups will likely need to address some myths before implementing prevention strategies (U.S. Department of Health & Human Services, *n.d.*)

Research by Rivara & Le Menestrel (2016) supports the need for clear and consistent messaging on bullying:

Bullying, long tolerated by many as a rite of passage into adulthood, is now recognized as a major and preventable public health problem, one that can have long-lasting consequences. Those consequences—for those who are bullied, for the perpetrators of bullying, and for witnesses who are present during a bullying event—include poor school performance, anxiety, depression, and future delinquent and aggressive behavior. Federal, state, and local governments have responded by adopting laws and implementing programs to prevent bullying and deal with its consequences. However, many of these responses have been undertaken with little attention to what is known about bullying and its effects. Even the definition of bullying varies among both researchers and lawmakers... (Rivara & Le Menestrel, 2016)

Anchorage Collaborative Coalitions will launch a citywide awareness campaign to increase knowledge of factual issues of bullying and its negative consequences and promote clear and consistent messaging around bullying within middle and high school populations. We will be following the model prescribed by the Stopbullying.gov Community Action Toolkit.

Due to Anchorage 9<sup>th</sup> grade students reporting the highest level of bullying incidents the ACC will be using bullying among 9<sup>th</sup> graders as a target and proxy to measure the success of this campaign.

This strategy addresses the Intervening Variable: community perceptions, norms and knowledge about bullying. This awareness campaign aims to increase knowledge of what bullying is (by definition) and awareness of bullying's negative consequences. Ultimately the campaign will decrease the stigma surrounding reporting incidents of bullying.

According to the community readiness assessment conducted by the ACC in January of 2016 the overall level of readiness in the Anchorage community regarding bullying in the ninth grade population is currently moderate. There are some slight differences in readiness between dimensions with prevention programming coming in at the highest level of readiness: 6=initiation and community climate and knowledge about the problem falling to the bottom with a score of 4=preplanning.

This awareness campaign strategy is intended to increase the community readiness score for the dimension of the community climate score of 4 (preplanning) as well as the dimension of knowledge about the problem 4 (preplanning).

### **Objectives**

Objective 1: There will be an increase from baseline in the number of “reporters and supporters” (youth, parents, teachers, school administrators, after-school providers, clergy) who understand what bullying is after completion of the awareness campaign.

Objective 2: There will be a decrease from baseline in the number of middle and high school students who self-report that there is stigma around reporting bullying after completion of awareness campaign.

### **Activities**

A. Research baseline – Utilizing the APAY survey currently being conducted ACC will become better aware of the baseline among Anchorage adults of their attitudes, beliefs and knowledge regarding bullying among middle and high school students are. This information will allow us to evaluate the success of our campaign. The ACC will also partner with ASD classrooms to conduct participatory evaluation within the high school population regarding attitudes, beliefs and knowledge regarding bullying.

B. Message development by students at local high schools specific to their schools and diverse perspectives – Coalition partners will work with Anchorage high schools to allow students to develop messages in their own words regarding the definition of bullying

and the seriousness of its consequences. These messages will assist our effort to be culturally competent in our language and depictions, as the diverse student base of the district will develop them. An added benefit will be discussion among students, and thereby raising awareness regarding about bullying.

C. Determine methods - Methods to be considered include social media platforms, radio, YouTube, Pandora, promotional materials, and a presence at various community events throughout the city. Media methods will be selected based on the target audience for each message.

D. Meetings with local leaders- ACC Coalition members and leadership will meet with local leaders such as Assembly members, staff in the Mayor's office, Principals, student council members, Church leaders, and Community Council members to discuss bullying and its serious consequences.

### **Resources**

**Human Resources.** To carry out this strategy, the coalition will form an Awareness Campaign Workgroup chaired by an ACC member, facilitated by staff, and that will include media/communications specialists, youth (aged 15-18), and volunteers.

**Financial Resources.** Grant funds from FY16 through FY18 will be utilized. Estimates have been accomplished to ensure feasibility. Cash matches may be contributed to the campaign in FY17 and FY18.

### **Timeline**

<b>Key Activities</b>	<b>Who is responsible</b>	<b>End Date</b>
The 9 <sup>th</sup> grade awareness campaign workgroup will develop a detailed plan for this strategy. This plan will include the details of who, what, where, and how the campaign will be conducted.	9th grade awareness campaign Workgroup	October 1, 2016
Message developed and methods determined	Workgroup	January 1, 2016
Meet with local leaders	ACC Executive Committee	February 1, 2016, Ongoing
Launch awareness campaign	ACC and partners	March 1, 2016, Ongoing

### Strategy 3: Policy Education and Advocacy for Middle and High Schools

#### *Description*

Focus groups with youth as well as the community readiness interviews conducted during the community needs assessment phase, uncovered a need in Anchorage for clearer, more consistently followed policies for dealing with bullying behaviors in our schools and other institutions serving Anchorage middle-school and high-school youth (Anchorage Collaborative Coalitions, 2016; Heath, et al., 2015).

In addition, the ACC found that most state laws, including Alaska's, do not follow research-based definitions of bullying (Sacco, Silbaugh, Corredor, Casey, & Doherty, 2012). Without a proper definition of bullying it is virtually impossible for a school or school district to properly address the issue.

According to the National Academies of Science, "law and policy can play a significant role in strengthening state and local efforts to prevent, identify, and respond to bullying" (Rivara & Le Menestrel, 2016).

The US Department of Education (DOE) recommends school districts adopt policies with broadly defined, explicit definitions of prohibited behavior that contain mechanisms to ensure accountability. In addition, the Department indicates that states with best practice model policies provide: (a) enumeration of protected groups; (b) investigations and use of written records; (c) mental health referrals; and (d) transparency and monitoring. These elements will be explored as possible policy recommendations (Stuart-Cassell, Bell, & Springer, 2011).

Research conducted for the Journal of American Medical Association Pediatrics showed that "students in states with at least 1 DOE legislative component in the antibullying law had a 24% (95% CI, 15%-32%) reduced odds of reporting bullying and 20% (95% CI, 9%-29%) reduced odds of reporting cyberbullying compared with students in states whose laws had no DOE legislative components (Hatzenbuehler, Schwab-Reese, Ranapurwala, Hertz, & Ramirez, 2015).

National data show that bullying is higher among 9<sup>th</sup> graders than in any other high school group. Twenty five percent (25%) of 9<sup>th</sup> grade students reported being bullied on school property and 16% reported being bullies electronically (cyber bullying). The most important program elements that were associated with a decrease in bullying were parent training/meetings, improved playground supervision, disciplinary methods, classroom management, teacher training, classroom rules, a whole school anti-bullying policy, school conferences, information for parents, and cooperative group work. In addition, the total number of elements and the duration and intensity of the program for teachers and children were significantly associated with a decrease in bullying (Saylor, 2016).

This strategy will recommend evidence based bullying policies to Anchorage schools and other institutions serving Anchorage middle-school and high-school youth. ACC will promote evidence based model policies for local institutions interacting with 9th grade communities.

This group will follow the policy development model developed by Scotland's Anti-Bullying Service which recommends an inclusive approach to policy making. Policies developed using this approach are more likely to be successful, as those implementing and receiving the policies have greater ownership due to being consulted in the development of the policies (RespectMe Scotland's Anti-Bullying Service, *n.d.*). This approach will ensure that the recommendations we are making are the most effective to this end.

### **Objectives**

- (1) Develop evidence-based, clear and consistent, culturally appropriate policy recommendations for dealing with bullying behaviors including cyber-bullying, in our schools and other institutions serving Anchorage middle school and high-school youth.
- (2) Evidence-based, clear, consistent, policies for dealing with bullying behaviors, including cyber-bullying, will be recommended to Anchorage schools and other institutions serving Anchorage middle-school and high-school youth.

### **Activities**

The Policy Education and Advocacy strategy is focused around building knowledge within ACC to vet create and recommend model policies to local groups serving 9<sup>th</sup> grade youth. The majority of the tasks will be overseen by the workgroup created to carry out the primary activities for the strategy. Each member of the workgroup will be selected to maximize the effect of the model policies through the Anchorage community. Members will include ACC staff, school and non-profit organizations.

Primary strategy activities include:

- A. Recruit and convene strategy workgroup with key Anchorage community members.
- B. Launch process evaluation
- C. Review existing local policies as well as National evidence based bullying policy recommendations.
- D. Assess for diversity and fit
- E. Consult and vet with partners.
- F. Work with local youth groups to help inform and lead the strategy.
- G. Provide model evidence-based policies for dealing with bullying and cyber bullying behavior to Anchorage schools and other institutions serving Anchorage middle school and high-school youth with model evidence-based policies for dealing with bullying and cyber bullying behavior
- H. Ongoing assessment of policy adoption and consistency of implementation

### Resources

Several partners will serve as resources to ensure this strategy's success by contributing to the workgroup. Key stakeholders from youth serving organizations and Anchorage schools will develop model policies based on research. These partnerships will increase the likelihood of achieving this strategy's objectives. A few example partnerships are:

- Youth serving organizations and their youth to help develop realistic and inclusive policies to accompany best practices research.
- You are Not Alone
- Members of the planning process
- Anchorage Youth Court
- AYDC members
- Spirit of Youth's Teen Advisory Council
- Healthy Voices, Healthy Choices

We will rely on ACC's evaluator to conduct a thorough process evaluation of this strategy area in order to assess quality of the group's planning and outreach and to assess barriers to policy adoption.

### Timeline

<b>Key Activities</b>	<b>Who is Responsible</b>	<b>End Dates</b>
Invite participants into Workgroup	SOY / Deb Casello	September 1, 2016
Launch process evaluation	Evaluator	October 1, 2016
Review existing policies and best practices	Workgroup	November 1, 2016
Assess for diversity and fit and consult partners	Workgroup	December 15, 2016
Identify key schools and youth-serving organizations	Workgroup	January 1, 2017
Present recommendations	ACC Executive Committee	2017, Ongoing
Evaluation of programs	ACC Evaluation Team	2018

## Strategy 4: Expansion of Existing Programs For Youth Aged 12-18 Years Old

### Description

Strategy 4 is designed to expand existing youth, adult, and community programs to include life skills, bullying prevention, and consequence reduction (e.g. depression,

substance use, suicide, etc.) Through this effort, youth, adults and community will have skills, strengths and resources needed to eliminate bullying and consequences of bullying.

The ACC strategy is to build resiliency, increase life skills and assets to reduce bullying and the consequences of bullying as they contribute to poor mental health of Anchorage area youth. Specific assets to be improved include Family Support and Positive Family Communication, Increased Time at Home, and Increased Resistance Skills. This strategy will be accomplished by increasing protective factors through focusing on caring adults, increased parental engagement, and providing parents with tools and resources for appropriately responding to bullying issues..

At the Community Planning sessions participants were clear that support should be given to programs and projects that currently exist rather than developing new programs/projects and trying to fit them into the school and community. The ACC will focus on expanding the “Start the Conversation” project, which the AYDC and HVHC coalitions have collaborated on in the past.

#### **Data Support**

The objectives selected are supported by data and information contained in Growing Up Anchorage report and the ACC Community Assessment Anchorage Youth & Young Adults (Anchorage Collaborative Coalitions, 2016, p. 57).

Parents are often unaware of the severity of bullying in their child’s school, and do not know how to help (Harcourt, Jasperse, and Green, 2014). Parent involvement and support is a protective factor for bullying. Poor parent child communication is related to victimization. Victimization is related to negative parenting, which includes less communication, warmth and affection (Lereya, Samara and Wolke, 2013). Youth are often skeptical of seeking help from their parents regarding bullying (Perren et al., 2012).

National data show that bullying is higher among 9<sup>th</sup> graders than in any other high school group. Twenty five percent (25%) of 9<sup>th</sup> grade students reported being bullied on school property and 16% reported being bullies electronically (cyber bullying). The most important program elements that were associated with a decrease in bullying were providing information to and training for parents.

Recommendations for anti-bullying programs should be designed to go beyond the scope of the school, and target wider systemic factors such as the family. Bullied children often do not communicate their problems to anyone while parents and teachers often do not talk to bullies about their conduct. This suggests that parent training and meetings are significantly related to a decrease in both bullying and victimization (Farrington and Ttofi, 2009).



### *Start the Conversation at Family Meals*

A body of empirical evidence suggests significant associations between the frequent family meals (i.e., 5 or more per week) and a number of improved youth health and behavioral health outcomes. These include positive family relationships (Franko et al. 2008) and enhancing parent-child communication (Fulkerson et al., 2010), as well as positive identity development (Fulkerson et al. 2006). Frequent family meals also are found to reduce youth risk behaviors including reduced depression, self-harm (Eisenberg et al., 2004; Fiese, Foley, & Spagnola, 2006; Fulkerson et al., 2009), and aggression (Griffin et al., 2000).

Goldfarb and colleagues (2015), explain that, "the routine aspects of the meal environment, such as the positive exchange of ideas, ***discussion of sensitive issues*** (emphasis added), problem-solving, and family closeness, serve to mediate the relationship between frequent family meals and healthier adolescent adjustment" (p. 134). In other words, the literature suggests that what happens at family mealtimes, beyond the act of eating, may offer protective effects in the prevention of a variety of health and behavioral health youth risk factors (Skeer & Ballard, 2013).

In one UK study, Levin, Kirby, and Currie (2012) utilized data from the 2006 Health Behaviour in School-Aged Children Survey (similar to the U.S. Youth Risk Behavior Survey) that included 18,834 middle and high school students. Frequent family meals were inversely associated with a number of youth risk factors, including being bullied. Results of another recent study conducted by Elgar and fellow researchers (2014) found that family dinners have a positive effect on adolescent mental health and are likely to be protective of the harmful consequences of adolescent cyberbullying. This study may provide guidance for evaluation methods to measure STC success.

In an attempt to harness the positive impact of the family meal, in 2012 the AYDC and HVHC coalitions developed *Start the Conversation @ Family Meals* (STC) project to encourage family dinnertime conversations as a means of reducing youth substance use and increase academic success. The group has now distributed over 5,000 kits to families of middle school students across Anchorage.

The impact of this effort was evaluated by Cho and Garcia (2014) using a pre- posttest survey of parents who reported statistically significant increases in the number of weekly meals they had with their children; however, mealtime conversation quality, which did increase very slightly, did not show a statistically significant difference.

The ACC now hopes to use STC as an intervention for reducing youth bullying. This is also based on several existing bullying educator and parent toolkits that provide specific information about defining, identifying, intervening, and reporting of bullying.

Family meals in and of themselves should not be considered causal to improved youth outcomes, but a tool that caregivers can better understand the importance of connecting, openly communicating with, and supporting youth's well-being. Going forward, the ACC will review existing bullying education and parent-targeted kits to better adapt the STC kits with specific education and conversations starters relevant to bullying.

### **Objectives**

1. Increase the quantity of quality time spent between parents/caregivers and youth.
2. Increase youth willingness to talk to parents about bullying.
3. Increase parent feeling of self-efficacy in their ability to respond to bullying.

### **Activities**

Increase parent/caregiver knowledge about and quantity of quality time spent with youth as it impacts mental wellness over baseline. Evaluation will be conducted through the existing and improved Start the Conversation methodology.

A. Develop appropriate bullying information for the STC toolkit and evaluation methods.

C. Promote the Start the Conversation toolkit and train implementers on the project. Frequent communication with implementers before, during, and after distribution is critical in ensuring they

D. Involve coalition members on outreach and implementation of STC toolkits to reinforce the purpose and best uses of the toolkit.

E. Expand implementation and evaluation of STC toolkits to appropriate programs, projects and events. This includes in considering expanded populations within the community to reach key demographics as well as foster care families, faith communities, and more.

Sustainability: provide toolkit for a nominal fee that will sustain the program. Pursue designation of Start the Conversation as a Best Practice.

### **Resources**

#### **Human Resources**

The Anchorage School District has agreed to distribute the STC packet and conversation cards to Middle School Students throughout Anchorage. The ACC workgroup/executive team/data & evaluation team will provide oversight to this program, collecting status reports and evaluation data.

### Financial resources

Estimates for both FY17 and FY18 expenditures have been made to ensure feasibility. A 10% cash match from the local agencies selected to implement and manage this strategy is required.

### Timeline

<b>Key Activities</b>	<b>Who is Responsible</b>	<b>End Date</b>
Evaluate past STC programs, including for cultural relevancy	ACC Evaluation Team	February 1, 2017
Develop bullying information for toolkits	AYDC/HVHC	April 1, 2017
Promote and train on use of Start the Conversation kits	AYDC/HVHC	August 1, 2017
Distribute Start The Conversation kits	AYDC/HVHC	June 30, 2018
<i>Distribute Start the Conversation to Middle School and Community wide with information that addresses quality time spent by parents/caregivers to their children/youth and provides bullying prevention resources</i>		

## Strategy 5: Bystander Intervention

### Description

Currently used around the United States, and with an existing presence in Alaska, the Green Dot bystander intervention program work prepares individual community members to actively participate in the reduction of interpersonal violence (Burke, 2016). Specifically created to address domestic violence, Green Dot curriculum has broadened to help sexual violence, alcohol and drug-abuse, child abuse and bullying.

Green Dot works on the premise that each individual holds the power to impact their community through small acts of intervention, social justice and awareness. Through Green Dot's training, participants learn easy methods that address the current barriers that stop a bystander from intervening during a violent act (Green Dot, 2010).

Bystander intervention has been recommended by two leading scientific organizations. The World Health Organization has included bystander intervention in its suite of programs for reducing violence against children (WHO, 2016). Recently the National Academy of Sciences (2016) endorsed bystander intervention programs such as Green Dot to reduce bullying rates throughout the United States. Green Dot Anchorage agrees that bystander intervention is an effective strategy for addressing bullying behaviors (J. Dale, personal communication, August 3, 2016).

Focusing on the main goal of improvements in the behavioral health status of the target population of 18-24 year olds, Green Dot programming would be implemented within

Anchorage's restaurant industry or other environments with concentrations of the target population, with the goal to reduce workplace bullying.

Green Dot curriculum centers on engaging community leadership to achieve the most social influence. By teaching bystanders how to overcome the main barriers that prevent them from intervening in a potential violent or negative situation, Green Dot allows situations to disperse in a positive, safe manner.

### *Literature Support*

Green Dot uses social diffusion theory to start a social movement, empowering individuals within communities to actively take a role in helping fellow neighbors (Green Dot, 2010). Green Dot acknowledges found barriers to bystander intervention, including diffusion of responsibility, the evaluation apprehension, pluralist ignorance (Latane & Darley, 1970), and confidence in skills and modeling (Bryan & Test, 1967). By teaching methods to easily overcome these barriers, Green Dot empowers individuals to intervene in possibly violent or negative situations. The National Academy of Sciences (2016) states, "some research points to an opportunity to better engage bystanders, who have the best opportunity to intervene and minimize the effects of bullying" (National Academy of Sciences, 2016, p. 5-6).

The Green Dot program works to engage bystanders, which has been applied to bullying particularly in youth. The curriculum in Green Dot offers strategies that are easy to apply to any situation in which the bystander can actively diffuse or prevent a violent interaction. In many situations, bystander intervention, particularly by peers, is shown to reduce the occurrence of bullying or interpersonal violence. Denny et al (2014) found that in New Zealand high schools, peer intervention (in comparison to teachers or other administrators) most drastically impacted bullying rates.

Some research has directly tested the applicability and performance of Green Dot within the target population of 18-24 years old. Coker et al (2011, 2015) trained a portion of college students aged 18-26 in Green Dot practices and found compared to a control group with no bystander intervention training, Green Dot trainees engaged in "significantly more bystanders behaviors and observing more self-reported active bystander behavior scores of students".

Although Green Dot is still expanding without much formal evaluation, its application to prevent interpersonal violence of all forms is gradually becoming widely accepted. In Alaska, Green Dot has been used in Nome and other rural communities to combat interpersonal violence caused by alcohol abuses. In Anchorage, Mayor Berkowitz trained municipal employees in Green Dot practices to help lower crime rates (Slater, 2015). Outside of city employees, Green Dot training has never been applied to a formal industry.

Based on its potential to reduce bullying, Strategy 5 will initially be applying Green Dot practices within the restaurant sector, with the final goal of possible application within the tourism industry as a whole. A study by Mathisen, Einarsen and Mykletun (2008) of the Scandinavian restaurant industry examined the prevalence of bullying and its impacts. They found “bullying prevails in the restaurant industry” with negative association to “job satisfaction, commitment, employees’ perceptions of creative behavior, and external evaluations of restaurant creativity level, and positively related to burnout and intention to leave the job” (Mathisen, Einarsen and Mykletun, 2008, p. 59). As Anchorage and Alaska’s restaurant industries employ many employees in the 18-24 year old age range, Strategy 5 plans to use a series of Anchorage based restaurants to target this population and reduce bullying. In turn this reduction or awareness of methods to target interpersonal violence will result in improvements in the behavioral health status of the target population.

### **Objectives**

The main objective of the Green Dot program is to decrease the number of young adults (18-24 years old) who report experiencing at least one kind of bullying or harassment.

### **Activities**

- A. Convene Alaska Green Dot staff and leading stakeholders to modify Green Dot to address bullying prevention and racial equity in 18 to 24 year old food service workers.
- B. To secure the agreement of the restaurant industry or a similar sector and Anchorage residents interested in racial justice in which 18-24 year olds are concentrated.
- C. Provide Green Dot bystander intervention training to selected target groups.
- D. Evaluate the effectiveness of the training in changing knowledge. Attitudes and beliefs about the value and effectiveness of bystander intervention in preventing incidents of bullying and racism.
- E. Identify areas of additional support and expansion of the initiative, possibly to additional groups.

### **Resources**

Currently, the Anchorage Collaborative Coalitions are working to use financial resources from the State of Alaska focused on improvements in the behavioral health status of 18-24 year olds and reduce the impact of racial inequity. With the support of the Anchorage Injury Prevention Coalition and the First Alaskans Institute, evaluators hope to find Green Dot programming acts as an already developed tool to enhance our community’s workplace environments. As well, because of the interface between restaurant employees and the community at large, any reduction in bullying or harassment within that industry should spread. Other resources include partnerships

with the Anchorage Collaborative Coalitions, Snow City Café and participating restaurants, Alaska Pacific University students and faculty and Green Dot of Alaska.

- Green Dot Anchorage
- First Alaskans Institute
- Restaurant industry leaders
- Restaurant industry employees
- Evaluators (including APU students and faculty)
- Business Associations

### *Timeline*

<b>Key Activities</b>	<b>Who is Responsible</b>	<b>End Date</b>
Convene Alaska Green Dot staff and leading stakeholders, and focus group. Summarize findings in report.	AIPC / Brian Saylor	August 25, 2016
Adapt Green Dot training curriculum for bullying and racial equity.	AIPC / Brian Saylor	September 1, 2016
Train restaurant and food service employees	AIPC / Brian Saylor	October 1, 2016
Complete preliminary evaluation of short-term outcomes associated with the training program	AIPC / Brian Saylor	November 1, 2016
Expand training opportunities to additional groups.	ACC Executive Committee	December 1, 2016
Offer trainings to additional groups.	AIPC / Brian Saylor	Ongoing 2017

### *Resources*

Currently, the Anchorage Collaborative Coalitions are working to use financial resources from the State of Alaska focused on improvements in the behavioral health status of 18-24 year olds and reduce the impact of racial inequity. With the support of the Anchorage Injury Prevention Coalition and the First Alaskans Institute, evaluators hope to find Green Dot programming acts as an already developed tool to enhance our community's workplace environments. As well, because of the interface between restaurant employees and the community at large, any reduction in bullying or harassment within that industry should spread. Other resources include partnerships with the Anchorage Collaborative Coalitions, Snow City Café and participating restaurants, Alaska Pacific University students and faculty and Green Dot of Alaska.

- Green Dot Anchorage
- First Alaskans Institute
- Restaurant industry leaders
- Restaurant industry employees
- Evaluators (including APU students and faculty)
- Business Associations

## Strategy 6: Community Awareness and Outreach Campaign for Young Adults

### *Description*

ACC will launch a community wide awareness campaign used to increase the community's knowledge of adult bullying and the consequences related to the issue of adult bullying.

Bullying is a serious issue for 18-24 year olds and emerged as the intermediate variable that had a very strong correlation with mental health; a stronger correlation, in total, than any other that was examined. According to the ACC's new data, bullying emerged as a crucial issue to mental health in this age group. The following findings clearly demonstrated the prevalence of bullying among young adults 18-24 years old in Anchorage and its connection to mental health (Heath, et al., 2015, p. 78).

- In the YAS, which gathered data from young adults aged 18-24, 29.4% of respondents reported they had been verbally bullied in the past year, and 17.1% reported they had been cyber bullied in the past year (Heath et al., 2015). Overall, more than a third (36.2%) reported experiencing at least one kind of bullying or harassment (verbal, physical, or cyber) during the past year. Notably, many respondents volunteered additional information and described bullying experiences "in elementary school" or "10 years ago" (Heath, et al., 2015; Brank, Hoetger, & Hazen, 2012).
- Results from the YAS indicate that being bullied or harassed is associated with reduced mental health. When placed in a model with other factors, bullying was found to have a greater relationship to mental health than social support, feeling like one matters to the community, race, sexual orientation, and other factors (Heath et al., 2015). Its negative effect is equal to the positive effect of optimism.
- Bullying can have several long-term health consequences for victims, perpetrators, and bystanders (Brank, Hoetger, & Hazen, 2012; Haynie, et al., 2001; Hinduja & Patchin, 2010). Documented effects on perpetrators of bullying include alcohol and drug abuse as adults, getting into fights, vandalism, dropping out of school, early sexual activity, criminal convictions, traffic citations, and abusive behavior toward partners as adults (Vanderbilt & Augustyn, 2010). In one large-scale study, data from the 2007 National Survey of Children's Health were reviewed and children aged 6-17 with a diagnosis of depression, anxiety, or ADHD were found to be more than three times as likely to engage in bullying behavior (Benedict, Vivier, & Gjelsvik, 2015). The study examined a total of 63,997 children who had data for both parental reported mental health and bullying status nationwide and found that the diagnosis of a mental health disorder is strongly associated with being identified as a bully (Heath, et al., 2015).

Additionally, this strategy correlates with the following indicators in the State of Alaska Healthy Alaska 2020 Priorities: #7 Reduce Alaskan deaths from suicide and #15 Reduce the number of Alaskans experiencing alcohol dependence and abuse (Read & Dickey, 2015).

According to the community readiness assessment conducted by the ACC in January of 2016 the overall level of readiness in the Anchorage community regarding bullying for adults ages 18-24 year old population is currently moderate. There are some slight differences in readiness between dimensions with prevention programming coming in at the highest level of readiness: 6=initiation and community climate and knowledge about the problem falling to the bottom with a score of 4=preplanning.

This awareness campaign strategy is intended to increase the community readiness score for the dimension of the community climate score of 4 (preplanning) as well as the dimension of knowledge about the problem 4 (preplanning).

### **Objectives**

There will be an increase from baseline in the percent of community members who understand the dynamics of adult bullying after completion of awareness campaign. (Community Readiness scores)

### **Resources**

#### **Human Resources**

The ACC will form an Awareness Campaign workgroup chaired by an ACC member, facilitated by staff and that will include media/communications specialist (some contracted), local representatives from media sector of the AIPC/AYDC, SOY and HVHC coalitions, young adults (18-24) and other community members. Bullying experts from outside organizations will be asked to assist in the development of the campaign message and plan.

#### **Financial Resources**

Grant funds from FY16 – FY18 will be utilized along with in-kind/cash match value from coalition members associated with Media Sector.

### **Activities**

- A. Develop Message – Based on what is learned during meetings the campaign group will develop and messages and methods of delivery. Messages developed will be based on the data from the needs assessment as well as additional formative information gathered.
- B. Determine Methods – Methods to be considered include social media platforms, promotional materials, a series of newspaper articles and presences at various community events throughout the Anchorage bowl. Methods will be determined by each messages' focused population and marketing research.
- C. Develop Detailed Plan – Based on the messages and delivery method selected, the workgroup will write a plan to be approved by the ACC executive committee. This plan will include details of who, what where and how the campaign will be conducted along with the overall cost associated with the plan.
- D. Implement Plan – The approved plan will be carried out by the workgroup, contractors, and coalition members that make up the ACC (HVHC, SOY, AIPC/AYDC).



The plan will be reviewed and modified annually to ensure goals associated with this strategy are being met.

#### *Timeline*

<b><i>Key Activities</i></b>	<b><i>Who is Responsible</i></b>	<b><i>End Date</i></b>
Recruit workgroup members	HVHC	September 1, 2016
Develop specific messages and campaign strategy	Workgroup	October 15, 2016
Determine methods of dissemination (newspaper, PSA, social media, outreach events, etc.)	Workgroup/contractor(s)	December 1, 2016
Develop detailed plan to be approved by the ACC (include details of who, what, where, and how the campaign will be conducted)	Workgroup/contractor(s)	February 1, 2017
Launch awareness campaign	Workgroup	March 1, 2017

## VII. Infrastructure Needs

ACC recognizes that implementing the six identified strategies requires maintaining current infrastructure components, augmenting some of these components, and identifying new elements necessary for fulfilling the goals and objectives identified through the community strategic planning process. While many of these needs are repeated in the short strategy summaries above, below is a brief iteration of these needs.

**Building internal coalition evaluation capacity.** Coalition members played a crucial role in the assessment process. Many received IRB certification and evaluation training, which prepared them to assist with focus groups and other original data gathering efforts. This will continue to be an essential part of our ongoing participatory evaluation efforts and will contribute to long-term sustainability of efforts.

**Ensuring continuation of current data collection efforts.** Currently the Anchorage School District (ASD) collects YRBS data and coalition partners collect other information research such as the Adult Perceptions of Anchorage Youth (APAY) survey. These need to be maintained and, when evaluation requires it, similar survey processes need to be developed for years where these measures are not available.

**Developing new data sources where data is missing.** Not all areas covered in our strategies have consistent data sources. Where identified in our planning process, new data sources need to be developed and collection needs to be institutionalized.

**Developing sustainable, evidence-based approaches for awareness and policy efforts.** ACC recognizes that long-term, effective efforts at developing and sustaining community awareness of bullying and consistent and effective policies to address bullying behaviors are essential to our long-term effort of reducing bullying and improving mental health in our community. Consequently, sustainable, evidence-based approaches to awareness and school and work place policies are essential to our efforts.

**Developing and updating model policies and guides for best practices for addressing bullying behaviors.** Not only is it important to develop the approaches, we need to develop guides that can be used by others and that have a protocol for updating that keeps them relevant. This could become a vibrant community resource in the long-term.

**Developing an anti-bullying champion award program for those who have created a model bully-free workplace or school environment.** This program effort is loosely an infrastructure need, as it will require a long-term commitment to sustain it when these funding efforts end. However, this should be an output of this process.

**Continued support and buy-in from youth serving organizations and other community partners.** While all three coalitions that comprise ACC have a broad reach into the youth-serving community, inclusion of new and existing organizations must continue on a sustainable level. Partnerships are essential to many of these strategies and so efforts to institutionalize partnership relationships should be developed and maintained.

**Continued support for youth-reaching efforts that help build resiliency, life skills and assets.** Efforts like HVHC's Emerging Youth Leadership Academy, AYDC's Start The Conversation, and Spirit of Youth's Que Pasa page are essential components of our information delivery system for youth. These need to be sustained and expanded with informed, evidence based approaches that help build youth resiliency, and create the conditions in which youth and young adults are comfortable reporting bullying behaviors.

**Continued development of youth-serving organizations' employers and institutions of higher learning capacities to provide skills to address, and knowledge of bullying.** It has been and will continue to be a priority to develop the skills and knowledge of coalition member organizations and other youth serving entities to know and be prepared to address bullying behaviors as well as growing protective factors within the adults as well as youth. Several strategies address the need to continuously develop this capacity. This is a critical component to sustainability for efforts as well.

## VIII. Cultural Responsiveness

The Anchorage Collaborative Coalitions (ACC) contracted the Young Women's Christian Association (YWCA) to provide consultative services, reviewing the cultural responsiveness of our processes of data collection and community planning for the Anchorage community. The YWCA has extensive expertise and knowledge regarding the diversity of cultures within our community and the considerations such diversity requires. The YWCA participated throughout the assessment and planning phases to ensure the ACC's assessment and planning processes were carried out according to the State of Alaska SPF fidelity checklist.

Examples of the services the YWCA provided:

- Attended Anchorage Collaborative Coalitions (ACC) Planning Meetings, Implementation Meetings, and Evaluation Meetings, including the Planning, Implementation, and Evaluation workgroup meetings, and other meetings as requested.
- Provided an updated intercultural sensitivity checklist for use by the teams during planning and implementation.
- Participated in the review of proposed planning and implementation work to identify potential cultural competency gaps.
- Provided written feedback and recommendations on cultural responsiveness of ACC strategies, materials, and actions.
- Participated and continues to participate in an ongoing dialogue regarding YWCA Alaska recommendations for cultural responsiveness of ACC strategies, actions, and materials.
- Incorporated YWCA Alaska cultural responsiveness recommendations into ACC strategies, actions, and materials as appropriate.

As a result of the work conducted by the YWCA, the ACC has been able to include input from a variety of community groups and individuals. In our surveys, focus groups and planning meetings the executive team of the ACC made sure that we meaningfully included various ethnicities, genders, age groups as well as those individuals who are at greater risk of being bullied i.e. LGBTQ, religious groups, and individuals with disabilities in our processes. By including members from the various populations we have been able to ensure support and involvement from our community members and as the ACC moves forward in implementing strategies and activities that will increase mental wellness among youth and young adults in our community we are ensuring buy in and ownership from these various stakeholders and partners in our community.

## IX. Evaluation

Evaluation is necessary to determine if the strategies employed by ACC are effective at accomplishing their stated objectives and goals. ACC identified the importance of effective evaluation early in its planning process and understood that an evaluation team should be established to observe the actual strategic planning process and to inform the ACC Executive Team on possible directions in strategy level evaluation. An initial core team was identified from members of the Assessment Committee (which oversaw the initial assessment phase of the plan). This team was augmented with members drawn from each coalition and members of target age groups. All participants in the Evaluation Team either participated in, or observed, the strategic planning process. This team includes Marcia Howell (AIPC/AYDC), Karen Zeman (SOY), Lindsey Hajduk (AYDC), Marney Rivera (UAA), Logan Daniels (HVHC), Joy Clark (VOA), Sylvia Craig (AYDC/AIPC), Will Hurr (BGC), and Val Clark (YWCA). The group was staffed by backbone managers, Tom Begich and Sarah Sledge.

Following completion of strategy level logic models, the Evaluation Team met to set parameters for how each strategy group would develop its evaluation measures. Overall the Evaluation Team first identified a need for a professional evaluator to guide the participatory evaluation process. It was determined that this evaluator would have the following overall responsibilities:

- Meet with each strategy core group (which includes coalition and affected group members) on a regular basis to ensure that they are conducting their appropriate measures and are engaged in defining measurement processes
- Work with each strategy core group to identify both individual strategies and some collective measures for short, mid and long term outcomes
- Identify components for an MIS system to report on measures at both the strategy and community level
- Understanding that strategy core groups would establish certain measures that they would be responsible for collecting information on, the evaluator will be responsible for ensuring that information is being collected and presented in a timely and accurate manner.
- Identify broader community tools that could be used to measure effectiveness of the overall strategies.

No timeline was established for hiring this position, though this will likely occur in September/October, 2016.

The ACC planning process identified six strategies to address the intervening variables and contributing factors identified by the Anchorage Youth & Young Adults Community Behavioral Health Assessment. These strategies include infrastructure development and capacity building, awareness campaigns, policy changes, expanding existing programs to

include bullying prevention resources, and bystander intervention. Awareness campaigns were further divided into the two target age groups – 9<sup>th</sup> grade and 18 – 24 year old persons. It is anticipated that the core planning teams for each strategic area – those persons that developed the plans – would become the leads for broader teams for each strategy area. These teams would be comprised of persons who are diverse, represent the constituent coalitions, and include target populations. Each team would have responsibility for developing tools for measuring change and effectiveness beyond those already available at the community level. Some ideas to help guide each strategy area are presented below.

### ***Infrastructure Development and Capacity Building***

This strategy focuses on a need to strengthen the infrastructure and capacity of both the Anchorage Collaborative Coalitions and businesses and youth-serving organizations in the community at large to address bullying, its contributing factors, and its consequences. In some measure this is tied in to the activities of each strategy, but this strategy specifically addresses three areas: 1) Increasing the number of youth who think they matter in their community; 2) ensuring local businesses and postsecondary educational institutions adopt policies on bullying recommended by ACC; and 3) increasing the number of youth-serving organizations using best practices that promote skills, strengths, and resources needed to promote health and wellness and protective factors.

While measuring an increase in the percentage of youth who feel they matter can be done through the YRBS and School Climate and Connectedness Survey, additional tracking methods will have to be developed to measure the other factors. These could answer questions such as:

- Do local businesses employ policies that address bullying?
- Do local businesses and youth-serving organizations understand youth and adult bullying and recommended policies?
- Do youth serving organizations provide skills training that promote health and wellness?

The strategy level teams will all be asked to be aware of the infrastructure and capacity strategy progress as this either directly or indirectly will have an impact on each strategy area and certainly on broader measures of community readiness. This strategy will also involve the development and evaluation of appropriate training for businesses and youth serving organizations.

### ***Awareness and Social Norms Campaigns***

#### ***Middle and High School Campaign***

There are broader questions to be addressed through community level measures that might be found in documents such as the YRBS (or YRBS questions asked through a non-YRBS process), Adult Perceptions of Anchorage Youth survey of adults and young adults in the community (APAY), and the School Climate and Connectedness survey, as well as use of social media such as SOY's Que Pasa page. These questions might include:

- Does the community know what bullying is?
- Does the community know the consequences of bullying?
- Does the community believe it can make change in bullying behavior?

Such measures would be able to start from baseline data through these same surveys conducted over these past two years.

#### Middle and High School and Young Adult Campaign

Other questions might be established by the strategy area teams for both awareness campaigns such as:

- Are community members advocating for bullying prevention?
- How have we, or how might we, reduce the stigma of reporting bullying?
- How do we measure the perception of the importance of reporting bullying?
- Do observers or direct victims recognize the benefits of reporting?

Additional measures could also be part of phone or other surveys to target populations that test levels of knowledge regarding bullying.

The strategy level teams will be asked to identify other elements related to the focus of an awareness campaign that they may want to measure and which they can participate in measuring. These two teams will likely work closely together to ensure that, where possible, measurements are similar and consistent, and collection of data is non duplicative.

### *Policy Education and Advocacy*

#### 18-24 Year Old Policy Education and Advocacy

The evaluation process for this strategy area will be mainly focused on outputs as this is essentially a research and training strategy.

Some potential measures to consider here are:

- Number of evidence based or working policies identified.
- Effectiveness of existing policies (what exists, are they working?)
- Strategy area teams reviewing all policies – recently identified and new proposals – to determine whether or not policies are relevant to target group (remember, target group are part of the team as are those effected such as businesses, legal community, etc...).
- Strategy area teams designing criteria for a policy recommendation process (should there be multiple identified policies)

Other questions to consider for measuring outputs would include:

- Were trainings developed?
- How many trainings did we hold?
- How many persons/businesses/post-secondary institutions/organizations participated?
- Did people learn from policies?
- Was there a voiced intention to adopt new policies by participants?
- Did they have an understanding of adult bullying behavior after training?

These questions could be developed and collected by the strategy level team and added into the MIS.

#### **Middle School and High School Policy Recommendations and Advocacy**

The school age policy strategy area (9<sup>th</sup> grade) is likely to be similar to the 18-24 year old process, but significantly shorter in its conduct as more information is readily available in this area. Similar questions would be addressed.

In addition to these questions, throughout the process broader questions on effective collaboration would also be measured within each strategic area. These would include questions such as:

- Who is working together?
- How effective is their collaboration?
- Do organizations understand what best practices are?

#### **Expand Existing Programs**

This strategy area represents efforts to improve communication between youth and parents/caregivers initially within the context of Start the Conversation, an AIPC/AYDC effort. It also involves an expansion of the Start the Conversation program both in reach and content (adding significant elements of bullying discussion to the content). Internally ACC will examine the reach and impact of Start the Conversation and its content.

Some actions and questions that will need to be addressed by this strategic area team include:

- A review of existing evaluation methodology for Start the Conversation and a determination to redesign evaluation measures to reflect content change
- Identification of bullying elements to be added to Start the Conversation
- Developing a process for how to expand the Start the Conversation
- Identifying elements of long term sustainability for Start the Conversation

#### **Bystander Intervention**

For this strategy area, the ACC will assess if implementing Green Dot results in fewer young adults reporting experiencing bullying or harassment. Indicators for evaluating outcomes will include an increase in the number of 18-24 year old restaurant workers who believe in the value and effectiveness of bystander intervention in preventing bullying, and a decrease in the number of young adults who report experiencing at least one kind of bullying or harassment. These outcomes will be measured using target group survey developed by the strategic area team as well as through re-administration of the Young Adult Survey used by the ACC in Fall 2015.

#### **Community Level Change**

Finally, throughout the process, ACC and its strategy level teams will work with the evaluator to develop more thorough community readiness processes that look at the populations of focus (18 – 24 year olds and school-age youth) in more depth, and seek a



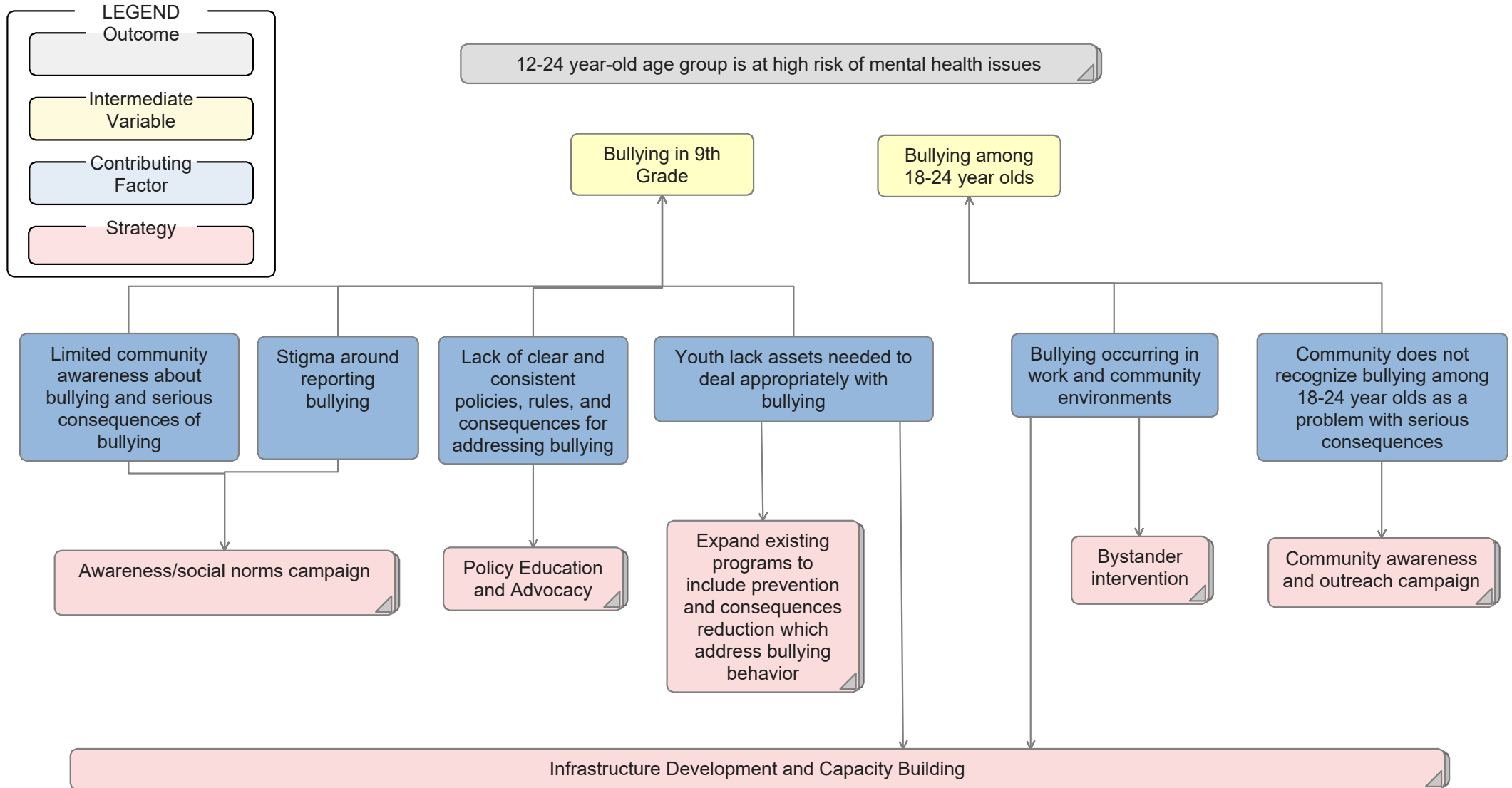
greater diversity of voices. This will not only include the continued application of community readiness surveys, but also likely will include focus groups, and area wide evaluation measures with existing survey tools (described above). Working with all five teams, the ACC Executive team, and the evaluator, ACC will also explore other measures that might be developed at a communitywide level to ensure that these identified

## **X. Management Information System**

To ensure this plan is fully implemented, appropriately monitored by the coalition, and ultimately successful, the coalition will develop an Excel workbook to serve as our Management Information System (MIS). This workbook will contain a tab for each strategy activity, providing the appropriate action list of the what, who, when, and how details that will be continuously updated throughout the implementation of the plan. This workbook will be used to develop monthly progress charts to keep coalition members informed, and also for quarterly reports to the state.

Both the MIS and the progress charts will be maintained in and shared through Dropbox, which is already in use by the coalition. Project folders will be set up in Dropbox for each strategy and/or strategy activity and will contain final (for record-keeping) and working documents. All members of the workgroup or agency managing the strategy or strategy activity will have access to the applicable folders and be able to update working documents. Members will have the ability to electronically collaborate and each workgroup will also meet on a recurring basis in person. The details of how often each will meet will vary between workgroups depending on availability and workload. Attendance will be kept for all workgroup meetings and actions updated in the MIS either in real time or shortly after meeting.

# XI. Logic Models



12-24 year-old age group is at high risk of mental health issues








ACC 2016 Community Assessment Indicators

- 26.5% youth reported feeling sad or helpless for two wks or more (2013 YRBS)
- 23.4% youth feeling alone in life (2013 YRBS)
- 18.8% of 18-24 year olds reporting depressive disorder (BRFSS 2013)
- 24% of young adults 18-25 in Anchorage who report having any mental illness in past year (2010-2012 NSDUH)
- 27% of ASD ninth grade students reported being bullied in school. (YRBS 2013)
- ASD students in grades 9-12 who are bullied at school are 201% more likely to feel so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities (YRBS 2003-2013)
- ASD students in grades 9-12 who are electronically bullied are 210% more likely to feel sad or hopeless (YRBS 2003-2013)
- ACC community readiness scores in community climate and knowledge about the problem of 4=preplanning (ninth grade)
- Seventy-five percent of adults surveyed reported they were not knowledgeable (36%) or only somewhat knowledgeable (39%) about bullying among Anchorage youth (APAY Survey 2015)
- Focus groups with middle and high school students identified lack of clarity and understanding of bullying, including its prevalence and meaning
- Community readiness interviews indicated that youth believe reporting bullying would cause them to be further bullied
- Focus groups and community readiness interviews identified need in Anchorage for clearer, more consistently followed policies for dealing with bullying behaviors in our schools and other institutions serving Anchorage middle-school and high-school youth
- ASD students in grades 9-12 who report their school has clear rules and consequences for their behavior are 29.1% less likely to have been bullied in school (YRBS 2003-2013)
- ASD students in grades 9-12 who report talking to their parents about school every day are 26.2% less likely to feel sad or hopeless (YRBS 2003-2013)
- ASD students in grades 9-12 who report having 1 or more adults they are comfortable seeking help from are 28.3% less likely to have been bullied in school and 37.9% less likely to have been electronically bullied (YRBS 2003-2013)
- ASD students in grades 9-12 who strongly agree/agree that they feel they matter to people in their community are 32.6% less likely to have been bullied in school (YRBS 2003-2013)
- 36.2% of young adults 18-24 surveyed reported experiencing at least one kind of bullying or harassment (verbal, physical, or cyber) during the past year (YAS 2015)
- Bullying was found to have a greater relationship to mental health among 18-24 year olds than social support, feeling like one matters to the community, race, sexual orientation, and other factors (YAS 2015)
- ACC community readiness scores in community climate and knowledge about the problem of 3=vague awareness (18-24 year olds)








## Do the capacity building activities increase the community's ability to address bullying? ▲





### Indicators of progress toward outcomes

-  Best and promising practices for increasing youth feelings of mattering to their community are identified through research
-  Coalition develops a plan informed by research
-  Coalition implements plan
-  Number of work group meetings
-  Number and quality of work group participants (diversity, across sectors)
-  Documented recommendations for local policies
-  Training to local businesses and postsecondary institutions on recommended policies is delivered






### Indicators for evaluating outcomes

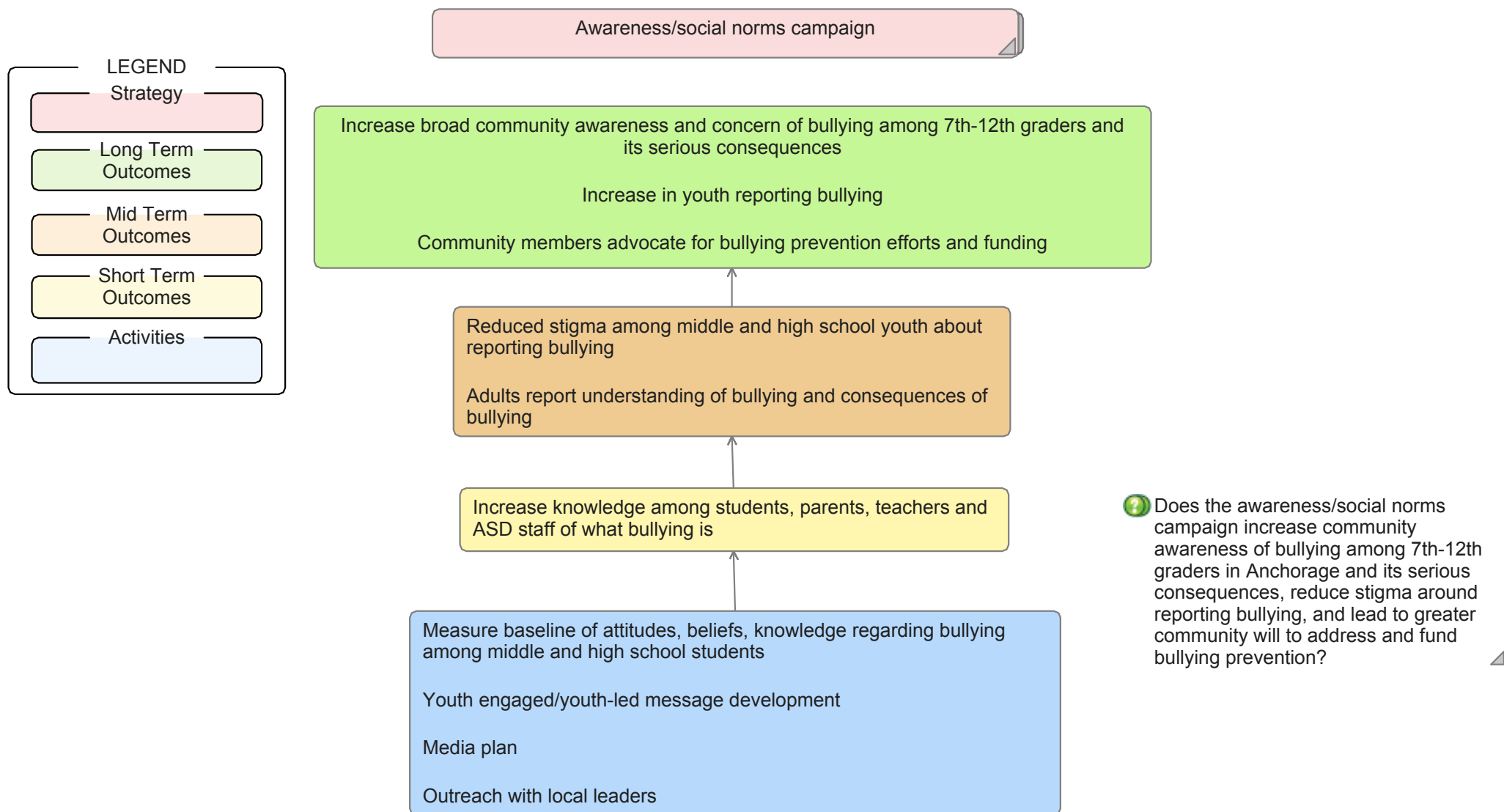
-  Local businesses and colleges report understanding of adult bullying behavior and recommended policies
-  Number and percent of local businesses and postsecondary institutions that adopt recommended policies
-  Youth-serving agencies developed shared goals, measures, and evaluation methods around increasing youth assets and skills
-  Increase number of youth-serving organizations using programming that promotes skills, strengths, and resources needed to promote health and wellness and protective factors
-  Increase % of youth who feel they matter in community

### Tools for monitoring progress toward outcomes

-  Documentation of research; identification of best/promising practices
-  Collection of data; track participation
-  Completed plan
-  Evaluation plan in place; indicators and evaluation methods are identified

### Tools for evaluating outcomes

-  Post-training evaluation
-  Collection of data; track participation
-  Documentation of developed goals, measures, and evaluation methods
-  Implement and track evaluation methods
-  2017 YRBS



❓ Does the awareness/social norms campaign increase community awareness of bullying among 7th-12th graders in Anchorage and its serious consequences, reduce stigma around reporting bullying, and lead to greater community will to address and fund bullying prevention?

#### Indicators of progress toward outcomes

- 📊 Number of awareness campaigns conducted
- 📊 Number of youth involved in development of campaigns
- 📊 Number of individuals who report seeing/hearing campaign messages
- 📊 Number of meetings with community leaders
- 📊 Number of events/town halls
- 📊 Results from assessments of events/town halls
- 📊 Increase in community resources to address bullying behavior

#### Indicators for evaluating outcomes

- 📊 Number/percent of Anchorage residents who are able to correctly define bullying behavior
- 📊 Number/percent of Anchorage residents who are knowledgeable about community efforts for bullying prevention
- 📊 The "Community Climate" Community Readiness score increases from baseline of 4
- 📊 Number/percent of Anchorage residents who are knowledgeable about the issue of bullying
- 📊 Decrease from baseline in the number of middle and high school students who self-report that there is stigma around reporting bullying after completion of awareness campaign
- 📊 Increase number of youth reporting bullying

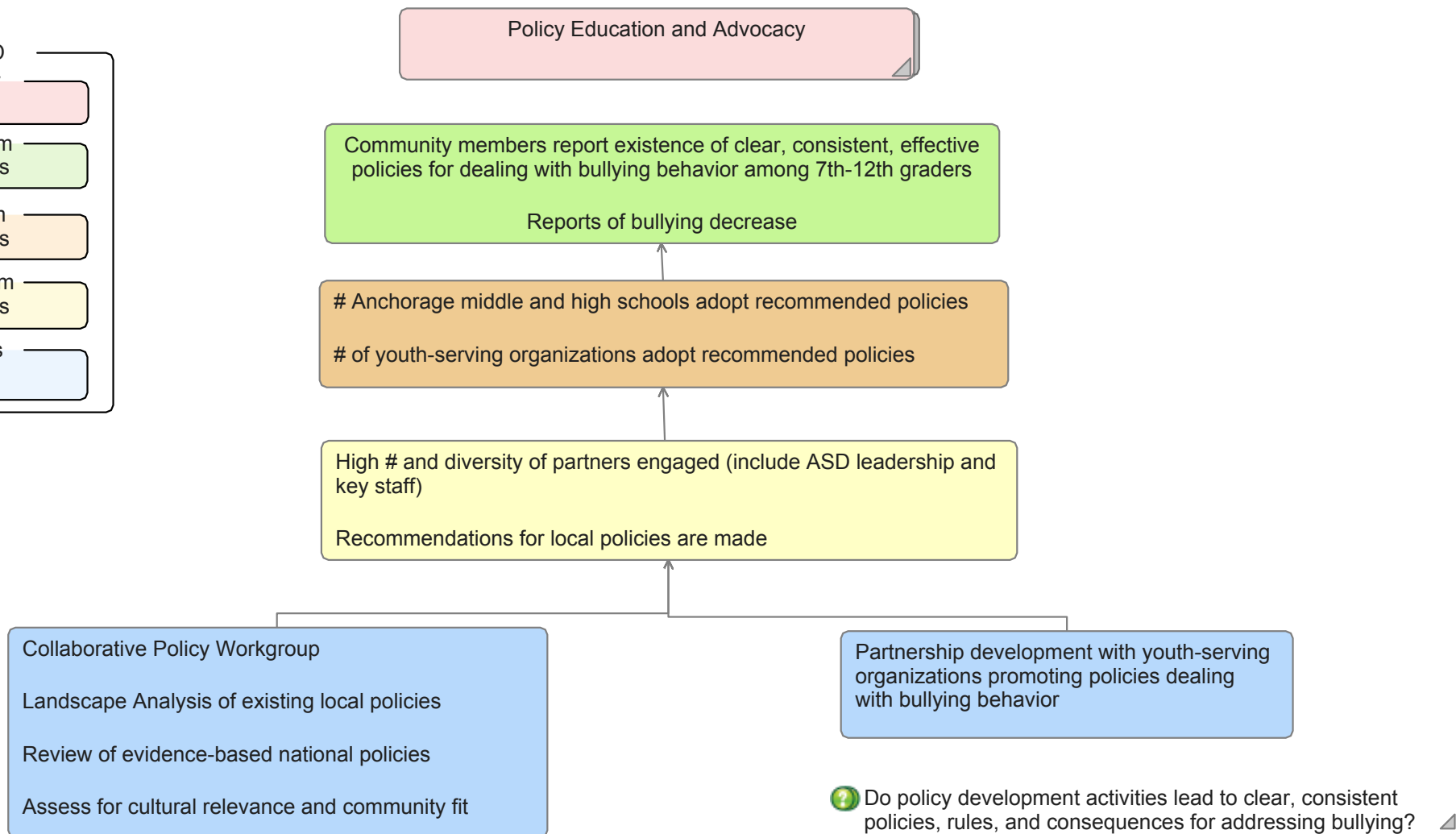
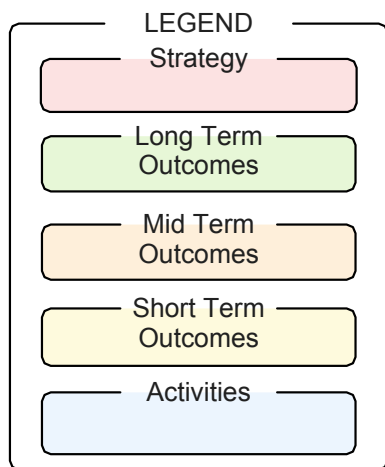
#### Tools for monitoring progress toward outcomes

- 📄 Collection of data
- 📄 Community perception survey
- 📄 Resource assessment  
Note: Building upon assessment conducted for needs assessment

#### Tools for evaluating outcomes

- 📄 Focus groups
- 📄 Community Readiness Assessment
- 📄 Community perception survey
- 📄 ASD Disciplinary Reports
- 📄 AIPC Phone Survey





## ❓ Do policy development activities lead to clear, consistent policies, rules, and consequences for addressing bullying?



### Indicators of progress toward outcomes

- 📊 Number of work group meetings
- 📊 Number and quality of work group participants (diversity, across sectors, includes ASD leadership and staff)
- 📊 Documented recommendations for local policies
- 📊 Number of meetings/presentations with organizations and leaders

### Indicators for evaluating outcomes

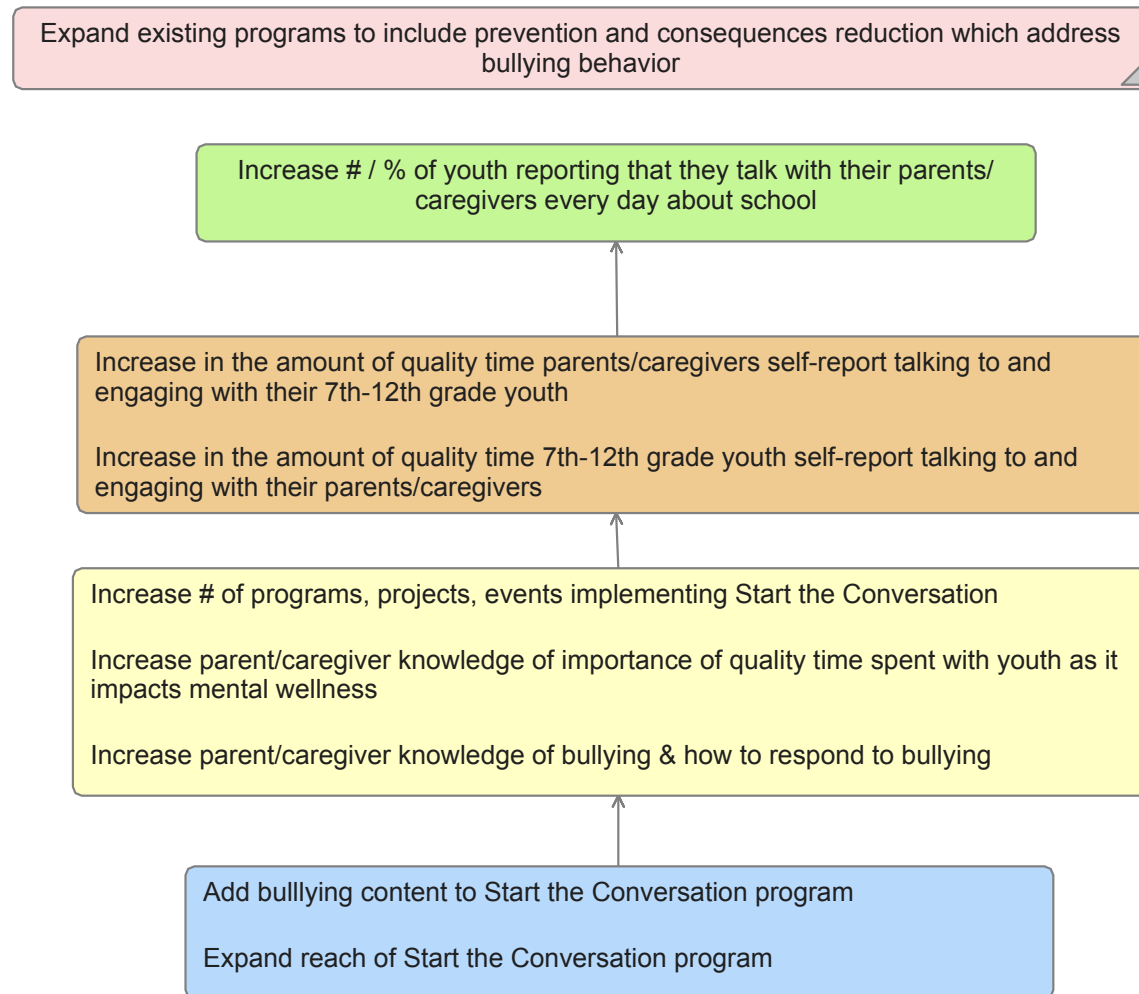
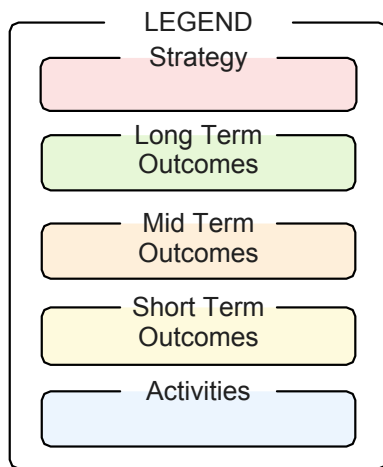
- 📊 Number of schools adopting recommended policies
- 📊 Number of youth-serving organizations adopting recommended policies
- 📊 Community members report existence of clear, effective policies for dealing with bullying behavior among 7th-12th graders that are consistently enforced.
- 📊 Youth development agency staff and ASD employees report existence of clear, effective policies for dealing with bullying behavior among 7th-12th graders that are consistently enforced.
- 📊 Increase number of youth reporting bullying

### Tools for monitoring progress toward outcomes

- 📄 Collection of data; track participation

### Tools for evaluating outcomes

- 📄 Collection of data; track policy adoption
- 📄 Community Readiness Assessment
- 📄 Interviews, surveys or focus groups with youth development agency staff and ASD personnel.
- 📄 2017 YRBS: ASD students in grades 9-12 who report their school has clear rules and consequences for their behavior;
- 📄 ASD Disciplinary Reports



❓ Does expanding existing programs lead to increase in youth engagement with parents/caregivers? ▲

## ❓ Does expanding existing programs lead to increase in youth engagement with parents/caregivers?

### Indicators of progress toward outcomes

- 📊 Appropriate bullying content is developed and added to toolkit
- 📊 Outreach and promotion occurs
- 📊 Implementers have knowledge necessary to successfully deliver Start the Conversation program
- 📊 Number of coalition members engaged in outreach and promotion
- 📊 Increase in number of existing programs, projects, events implementing Start the Conversation

### Indicators for evaluating outcomes

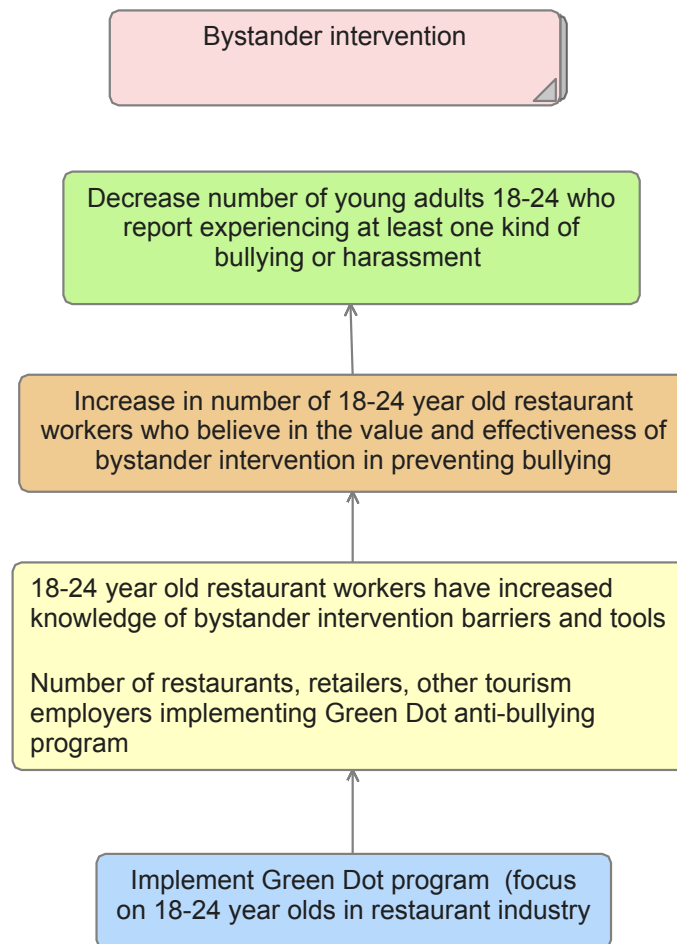
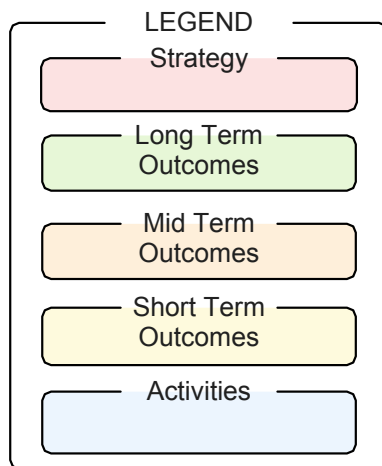
- 📊 Increase parent/caregiver knowledge of importance of quality time spent with youth as it impacts mental wellness
- 📊 Increase parent/caregiver knowledge of bullying and consequences of bullying
- 📊 Increase in the amount of quality time parents/caregivers self-report talking to and engaging with their 7th-12th grade youth
- 📊 Increase in the amount of quality time 7th-12th grade youth self-report talking to and engaging with their parents/caregivers
- 📊 Increase # / % of youth reporting that they talk with their parents/caregivers every day about school

### Tools for monitoring progress toward outcomes

- 📊 Toolkit reflects new content
- 📊 Collection of data
- 📊 Training delivered; post-training evaluation

### Tools for evaluating outcomes

- 📊 Pre/post survey of parents/caregivers
- 📊 Pre/post survey of 7th-12th grade youth
- 📊 2017 YRBS



Does implementing the Green Dot program result in fewer young adults reporting experiencing bullying or harassment?

## ❓ Does implementing the Green Dot program result in fewer young adults reporting experiencing bullying or harassment?

### Indicators of progress toward outcomes

- 📊 Baseline on nature and extent of bullying and racism among target group
- 📊 Implementation issues identified
- 📊 Green Dot program and training adapted for bullying and racial equity
- 📊 Number of trainings delivered; number of participants
- 📊 Trainees have increased knowledge about bystander intervention barriers and tools
- 📊 Number of meetings/presentations with restaurant, retailer, tourism industry employers/associations
- 📊 Number of restaurants, retailers, other tourism employers implementing Green Dot anti-bullying program

### Indicators for evaluating outcomes

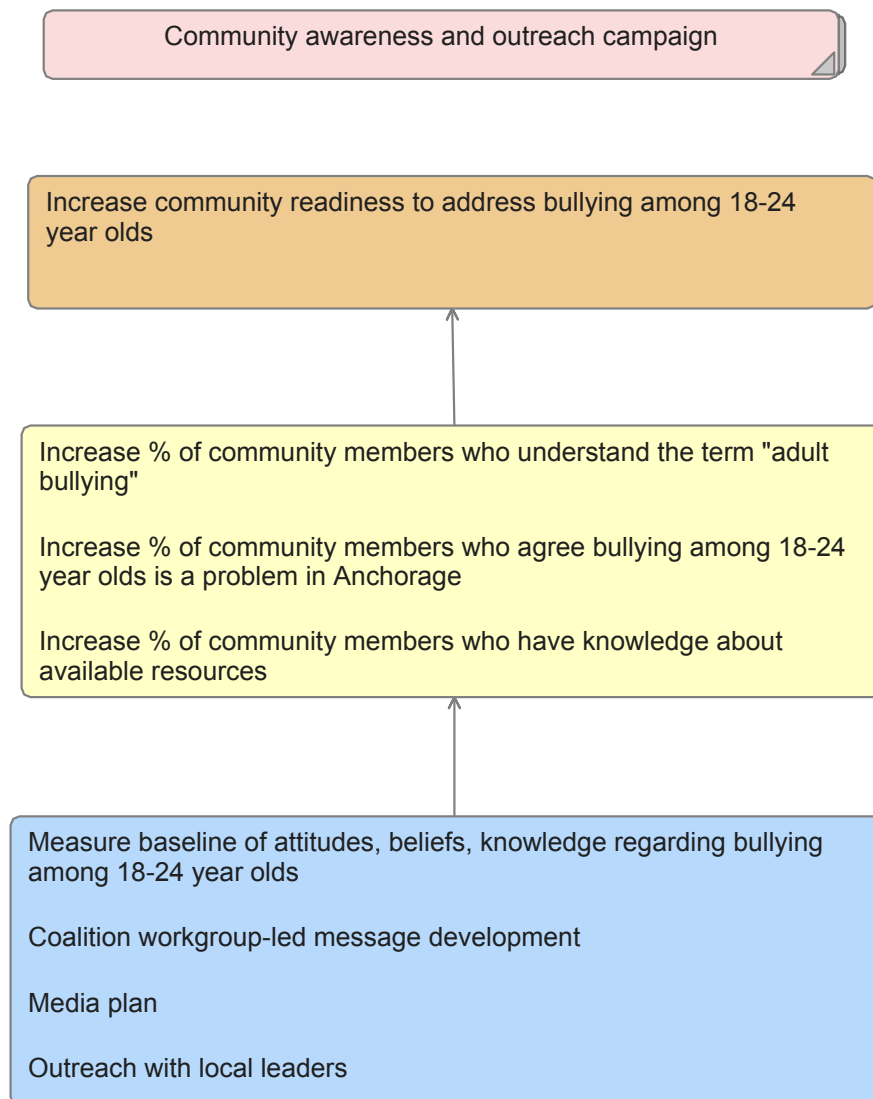
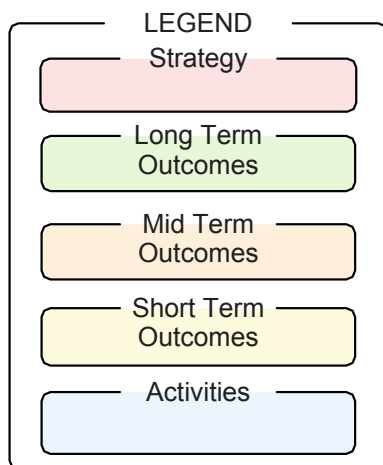
- 📊 Increase in number of 18-24 year old restaurant workers who believe in the value and effectiveness of bystander intervention in preventing bullying
- 📊 Decrease number of young adults 18-24 who report experiencing at least one kind of bullying or harassment

### Tools for monitoring progress toward outcomes

- 📄 Stakeholder meeting; report
- 📄 Focus group of restaurant and food service workers
- 📄 Program and training materials updated
- 📄 Collect data and track participation
- 📄 Pre/post training assessments

### Tools for evaluating outcomes

- 📄 Target group survey
- 📄 Young Adult Survey



❓ Does the community awareness campaign increase community awareness of bullying among young adults in Anchorage and its serious consequences and increase community readiness to address bullying prevention?

❓ Does the community awareness campaign increase community awareness of bullying among young adults in Anchorage and its serious consequences and increase community readiness to address bullying prevention? ▲

Indicators of progress toward outcomes

- 📊 Baseline of attitudes, beliefs, knowledge regarding bullying among 18-24 year olds
- 📊 Number of awareness campaigns conducted
- 📊 Number of coalition members involved in development of campaigns
- 📊 Number of individuals who report seeing/hearing campaign messages
- 📊 Number of meetings with community leaders

Tools for monitoring progress toward outcomes

- 📄 Community Readiness Interviews
- 📄 Young Adult Survey (YAS) 2015
- 📄 Focus Groups
- 📄 Collection of data

Indicators for evaluating outcomes

- 📊 Increase % of community members who understand the term "adult bullying"
- 📊 Increase % of community members who agree bullying among 18-24 year olds is a problem in Anchorage
- 📊 Increase % of community members who have knowledge about available resources
- 📊 The "Community Climate" Community Readiness score increases from baseline of 3
- 📊 The "Knowledge about the Problem" Community Readiness score increases from baseline of 3

Tools for evaluating outcomes

- 📄 Community Readiness Assessment
- 📄 Community perception survey
- 📄 Resource assessment  
Note: Building upon assessment conducted for needs assessment



## XII. Works Cited

- Anand, M., & Ritu., &. (2015). Life skill training for youth problems and adjustment. *Journal of the Indian Academy of Applied Psychology* , 41 (2), 314.
- Anchorage Collaborative Coalitions. (2016). *Community Behavioral Health Assessment Report, Anchorage Youth & Young Adults*. Anchorage.
- Benedict, F., Vivier, P., & Gjelsvik, A. (2015). Mental health and bullying in the United States among children aged 6 to 17. *Journal of Interpersonal Violence* , 41 (1), 110-6.
- Brank, E., Hoetger, L., & Hazen, K. (2012). Bullying. *Annual Review of Law and Social Science* , 8, 213-30.
- Bryan, James H. and Test, Mary A. (1967, August). Models and helping: naturalistic studies in aiding behavior. *Journal of Personality and Social Psychology*, 6.4.1, 400-407. <http://dx.doi.org/10.1037/h0024826>
- Burke, Jill. (2016, June 30). 'Green Dot ' campaign explores crime prevention as social movement. *Alaska Dispatch News*. Retrieved from <http://www.adn.com/alaska-news/article/green-dot-campaign-explores-crime-prevention-social-movement/2014/05/12/>.
- Campbell-Heider, N., Tuttle, J., & Knapp, T. R. (2009). CE Feature: The effect of positive adolescent life skills training on long term outcomes for high-risk teens. *Journal of Addictions Nursing* , 20 (1), 6-15.
- Coker, Ann, et al. (2011). Evaluation of Green Dot : an active bystander intervention to reduce interpersonal violence on college students across three campuses. *Violence Against Women*, XXI(XII), 1507-1527.
- Coker, Ann, et al. (2015). Evaluation of Green Dot Bystander Intervention to reduce sexual violence on college campus. *Violence Against Women*, XX(X), 1-20.
- Cook-Craig, Patricia G; et al. (2014). From Empower to Green Dot : successful strategies and lessons learned in developing comprehensive sexual violence and primary prevention programming. *Violence against Women*, 1-17.
- Cook-Craig, Patricia G.; et al. (2014). Challenge and opportunity in evaluating a diffusion-based active bystanding prevention program: Green Dot in high schools. *Violence against Women*, 1-24.
- Denny, Simon; Peterson, Elizabeth R.; Stuart, Jaimee; Utter, Jennifer; Bullen, Pat; Fleming, Theresa; Ameratunga, Shanthi; Clark, Terryann and Milfont, Taciano. Bystander intervention, bullying and victimization: a multilevel analysis of New Zealand high schools. *Journal of School Violence*, 14.3, 245-272.
- Elgar, F., Napoletano, A., Saul, G., Dirks, M., Craig, W., Poteat, V., Hold, M., & Koenig, Brian (2014). Cyberbullying victimization and mental health in adolescents and the moderating role of family dinner. *JAMA Pediatrics*, 168 (11), 1015-1022. doi:10.1001/jamapediatrics.2014.1223.

- Farrington, D.P., & Ttofi, M.M. (2009). School-based programs to reduce bullying and victimization. *Campbell Systematic Reviews*, 6
- Gladden R.M., Vivolo-Kantor A.M., Hamburger M.E., Lumpkin C.D. (2013). *Bullying surveillance among youths: Uniform definitions for public health and recommended data elements, version 1.0.*, Retrieved from: <http://www.cdc.gov/violenceprevention/pdf/bullying-definitions-final-a.pdf>.
- Green Dot of Alaska. (2015-16). Barriers. Green Dot of Alaska. Retrieved from <http://greendotalaska.com/barriers/>.
- Green Dot, etc, Inc. (201). Overview. Retrieved from [https://www.livethegreendot.com/gd\\_overview.html](https://www.livethegreendot.com/gd_overview.html).
- Green Dot, etc, Inc. (2010). Scientific Basis of GREEN DOT , etc. Retrieved from [https://www.livethegreendot.com/gd\\_research\\_sciencebystander.html](https://www.livethegreendot.com/gd_research_sciencebystander.html).
- Green Dot, etc, Inc. (2010). The GREEN DOT etc. Strategy. Retrieved from [https://www.livethegreendot.com/gd\\_strategy.html](https://www.livethegreendot.com/gd_strategy.html).
- Harcourt, S., Jasperse, M., & Green, V.A. (2014). "We were sad and we were angry": a systematic review of parents' perspectives on bullying. *Child & Youth Care Forum*, 43, 373–391.
- Haynie, D., Nansel, T., Eitel, P., Crump, A., Saylor, K., Yu, K., et al. (2001). Bullies, victims and bully-victims: Distinct groups of at-risk youth. *Journal of Early Adolescence* , 22 (1), 29-49.
- Hatzenbuehler, M., Schwab-Reese, L., Ranapurwala, S., Hertz, M., Ramirez, M. (2015). Associations Between Antibullying Policies and Bullying in 25 States. *JAMA Pediatrics*,; 169 (10): e152411 DOI: 10.1001/jamapediatrics.2015.2411
- Heath, K., Garcia, G., Hanson, B., Rivera, M., Hedwig, T., Moras, R., et al. (2015). *Growing Up Anchorage: Anchorage youth and young adult behavioral health and wellness assessment*. University of Alaska Anchorage: Center for Human Development.
- Hinduja, S., & Patchin, J. (2010). Bullying, cyberbullying and suicide. *Archives of Suicide Research* , 14 (3), 206-21.
- Kastner, L., & Wyatt, J. (2009). *Getting to Calm: Cool-headed strategies for raising tweens and teens*. Retrieved May 2016, from ParentMap: [www.parentmap.com/article/ten-life-skills-for-teens](http://www.parentmap.com/article/ten-life-skills-for-teens)
- Latane, Bibb and Darley, John. (1970). The unresponsive bystander: why doesn't he help?. New York, NY: Appleton-Century Crofts.
- Lereya, S.T., Samara, M., & Wolke, D. (2013). Parenting behavior and the risk of becoming a victim and a bully/victim: A meta-analysis study. *Child Abuse & Neglect*, 37, 1091–1108.
- Mathisen, Gro Ellen; Einarsen, Stale; and Mykletun, Reidar. (2008, February). The occurrences and correlates of harassment in the restaurant sector. *Scandinavian Journal of Psychology*, 49.1, 59-68.
- Perren, S., Corcoran, L., Cowie, H., Dehue, F., Garcia, D., Mc Guckin, C., et al. (2012). Tackling cyberbullying: review of empirical evidence regarding successful

- responses by students, parents, and schools. *International Journal of Conflict and Violence*, 6, 283–293.
- Read, E., & Dickey, M. (2015). *Healthy Alaskans 2020*. Anchorage: State of Alaska.
- RespectMe: Scotland's Anti-Bullying Service. (n.d.). *Policy through to practice – Getting it right*, Retrieved from:  
[http://www.respectme.org.uk/\\_literature\\_120651/Policy\\_through\\_to\\_Practice\\_-\\_getting\\_it\\_right](http://www.respectme.org.uk/_literature_120651/Policy_through_to_Practice_-_getting_it_right)
- Rivara, F., & Le Menestrel, S. (2016). *Preventing bullying through science, policy and practice*. Washington, DC: The National Academies Press.
- Rivara, Frederick, and Le Menestrel, Suzanne. (N.P.) Preventing bullying through science, policy and practice. National Academies Press. DOI: 10.17226/23482. Retrieved from <http://www.nap.edu/23482>.
- Sacco, D., Baird Silbaugh, K., Corredor, F., Casey, J.A., & Doherty, D. An overview of state anti-bullying legislation and other related laws. Cambridge, MA: Berkman Center Research; 2012. Report no. 2013-4.
- Saylor, B. (2016). *A review of the effectiveness of bullying prevention and intervention programs*. Discussion, Alaska Injury Prevention Center, Anchorage.
- Slater, J. (2015, July 16). Mayor Ethan Berkowitz brings Green Dot training to municipal employees. *KVTA Alaska*. Retrieved from <http://www.ktva.com/mayor-ethan-berkowitz-brings-green-dot-training-to-municipal-employees-809/>.
- Stuart-Cassell, V., Bell, A., & Springer, J. F. (2011). Analysis of State Bullying Laws and Policies. U.S. Department of Education, Office of Planning, Evaluation and Policy Development Policy and Program Studies Service. Folsom: EMT Associates, Inc.
- Substance Abuse and Mental Health Services Administration*. (n.d.). Retrieved January 2016, from SAMHSA: <http://www.samhsa.gov/spf>
- Tuttle, J., Campbell-Heider, N., & David, T. (2006). Positive adolescent life skills training for high-risk teens: Results of a group intervention study. *Journal of Pediatric Health Care*, 20 (3), 184-191.
- U.S. Department of Health & Human Services. (n.d.). *Bullying Prevention Training Center*. Retrieved August 3, 2016, from StopBullying:  
<http://www.stopbullying.gov/prevention/training-center/>
- Vanderbilt, D., & Augustyn, M. (2010). The effects of bullying. *Paediatrics & Child Health*, 20 (7), 315-20.
- World Health Organization (2016) INSPIRE: Seven Strategies for Ending Violence Against Children, p. 40, WHO Press, Geneva, Switzerland.