



PROJECT EXPERIENCE

BAI CORE COMPETENCY MATRIX				
PROJECTS	SURVEY DEVELOPMENT	SAMPLING	ANALYSIS	EVALUATION
SUBSTANCE ABUSE				
Project Fuerza Planning Grant		X		
NM BHSD	X	X	X	X
Project Youth Connect – Costa Mesa	X	X	X	X
Stop Short of Addiction – Spanish Language Program	X	X	X	X
Project SAFE – San Antonio Family Enhancement	X	X	X	X
HIV/AIDS				
Project Youth Connect – Santa Ana	X	X	X	X
Youth Adelante	X	X	X	X
Joven Noble – Male Involvement Program	X	X	X	X
Project HEAL	X	X	X	X
Institute for Women’s Health– Targeted Capacity Expansion	X	X	X	X
MENTAL HEALTH				
Center for Multicultural Development	X	X	X	X
Latina Youth Development Project	X	X	X	X
NIMH-SBIR Program	X	X	X	X
PROJECT EVALUATION				
New Mexico State Incentive Grant	X	X	X	X
Texas State Incentive Grant	X	X	X	X
California State Incentive Grant	X	X	X	X
Project Bienestar	X	X	X	X
Sunrise Community Counseling Ctr	X	X	X	X
Orange County Bar Project	X	X	X	X
SW Region Behavioral Health Conference Evaluation	X	X	X	X
New Mexico Mental Health Transformation (TSIG)	X	X	X	X
Youth Transitional Intervention Prog.	X	X	X	X
CAPACITY BUILDING & TECHNICAL ASSISTANCE				
OWH Model Mentorship 2005-06	X	X	X	X
CULTURAL COMPETENCE & POLICY ANALYSIS				
The California Endowment (TCE)			X	

SUBSTANCE ABUSE

PROJECT FUERZA:

NOVEMBER 2003 – PRESENT

The *FUERZA Project* is a selective intervention to target those individuals who are at greater risk for substance abuse. Implementation will occur during the second year, allowing year one to be fully designated to planning. Targeted individuals are identified based on the number of risk factors for substance abuse to which they may have been exposed. This approach was taken by the *Greater Alliance of Prevention Services (GAP)* that provided prevention information in a culturally relevant manner; alternative activities for youth to help them learn about their culture; a social competence component on peer leadership groups; educational groups for parents to learn about child development; and involvement of community leaders in the development of a community action plan that promotes substance abuse prevention (Department of Health and Human Services, 2002). The theoretical rationale for the *FUERZA Project* is to reduce the risk factors among the targeted high-risk youth while enhancing the protective factors across multiple domains.

NEW MEXICO BHSD – SUBSTANCE ABUSE PREVENTION:

APRIL 2004 – PRESENT

As a result of the effective prevention programming and evaluation system, New Mexico Department of Health/Behavioral Health Services Division was awarded monies for an additional initiative in April of 2004. This initiative, funded by the Substance Abuse and Mental Health Services Administration (SAMHSA)/ Center for Substance Abuse Prevention (CSAP) focused on implementing evidence-based substance abuse preventions programs directed at reducing risks and promoting resiliency and school preparedness. Participants include children ages 0 to 6, (NM 0-6) inclusive of families and communities.

Service providers selected a variety of science-based curricula to implement in their communities. BAI's role was to continue to develop an evaluation plan. New service providers or sub-recipients were added to this initiative, therefore training and Technical Assistance also continued. This NM 0-6 initiative will start its second year of service to NM youth and families in July of 2004.

PROJECT YOUTH CONNECT (PYC) – COSTA MESA:

OCTOBER 1998 – PRESENT

This project is an extension of the PYC designed for the Orange County Bar Foundation in Santa Ana and demonstrates BAI's evaluation expertise interviewing very young Latina women, within their own environment, to fulfill the requirements important to conducting a process evaluation. PYC Costa Mesa is a unique mentoring program targeting younger high-risk Latina girls, ages 9-15, residing in the city of Costa Mesa, California. The program serves approximately 173 youth/families during an 18-month period. The goal of the program is to reduce and/or delay substance abuse and HIV/AIDS-STDs infection among youth who are participating in the program. The intervention focus is on strengthening school bonding and academic performance, life management skills, and promoting family formation, family bonding, and family functioning.

STOP SHORT OF ADDICTION – SPANISH LANGUAGE PROGRAM:

OCTOBER 2003 – PRESENT

Funded by the California Endowment and the Unihealth Foundation, the PSSOA is a program designed by the Orange County Bar Foundation conjunctively with BAI. The main program goals are to prevent substance abuse, criminal activity and mental health problems in Latino adolescents (male and female), ages 12-17, and their families. The targeted participants are identified as currently using alcohol and/or drugs by a law enforcement agency, parent or family member, school official, or a community agency. A total of 250 high-risk Latino youth (10 in the start-up year and 60 in years 2-5) living in economically strained communities dealing with acculturation issues and exposure to crime and/or violence will be recruited throughout the project. Program objectives are to reduce drug and alcohol use, criminal involvement, and emotional behavioral problems, while increasing prevention and improving school bonding, academic performance, and family and peer functioning.

Intervention activities are organized in 3 pre-therapy sessions and 8 family system drug treatment sessions based on four models: Strategic Therapy (Salvador Minuchin), Family systems (Virgilia Satir), Functional Family Therapy (Alexander & Parsons) and the Brief Strategic Family Therapy (Jose Szapoznick). Youth are evaluated on demographic information, CSAT/GPRA questionnaire on drug and alcohol use, education, employment, and attitudes and beliefs of drug use. Parents are evaluated on demographic information, Stress (using the Hispanic Stress Inventory), and youth behavior (using SIPA). The effectiveness of the program is based on comparing information collected at baseline, post-test (around 6 months) and follow-up (12 months). This program demonstrates BAI's cultural competence and expertise in diagnosing social conditions of high risk, minority youth as well as an expertise in designing and implementing programs, providing input on outreach and recruitment, and providing training to staff on data collection, scientific methods, and scientific based models for treatment and prevention.

PROJECT SAFE – SAN ANTONIO FAMILY ENHANCEMENT:

OCTOBER 2002 – PRESENT

Funded by the SAMHSA Center for Substance Abuse Treatment (CSAT), the University of Houston developed Project SAFE to focus on the expansion of outreach, prevention, and treatment capacity for high-risk, HIV/AIDS-STDs, criminal activity, and gang affiliated youth from the ages 12 to 17. The program utilizes three community based organizations (Guadalupe Community Center, YWCA of San Antonio and JOVEN) in Texas to provide drug treatment and social services to high-risk Mexican American youth in three distinct *barrios* in the Hispanic community.

Program objectives are to conduct community based outreach and recruitment, improve school bonding, academic performance, family bonding, family and peer functioning, and to reduce gang identification, gang involvement, and HIV/AIDS-STDs risks. The evaluation of the program effectiveness consists on a quasi-experimental study that compares random assigned control and treatment groups. The evaluation of the program is based on comparing information between control and comparison groups collected at baseline, post-test (6 months) and follow-up (12 months). BAI is the external evaluator of this program and is supporting the Houston University on designing the program, entering and analyzing data for GPRA and the internal database to evaluate the program effectiveness.

HIV/AIDS

PROJECT YOUTH CONNECT (PYC) – SANTA ANA:

OCTOBER 1998 – PRESENT

Funded by SAMHSA CSAP through the Orange County Bar Foundation, PYC is a culturally sensitive mentoring program created for young Hispanic girls and their mothers in the city of Santa Ana, California. This project demonstrates BAI's evaluation skills including an annotated literature review, site visits, protocol development, interviews, and data analysis work. The program uses a science-based, family mentoring approach to prevent high-risk behaviors, substance abuse, HIV/AIDS, STDs, and unwanted pregnancies in a high-risk population of young Hispanic women (ages 12-17). PYC promotes family and school bonding, education on each family preservation topic, as well as teaching these young women life management skills. Individual and group mentoring are the primary strategies to reach these goals. The program also works to improve family communication and women's negotiation skills with male partners, including strategies for encouraging male condom use. The program serves approximately 178 youth and their mothers during each 10-month period. Recent data analysis performed by BAI researchers show that PYC has proven effective in minimizing risk factors (impulsivity, conduct disorder, etc.) and maximizing protective factors (i.e., bonding with families, HIV knowledge, condom use negotiation with partners, etc.) to prevent high-risk behaviors and HIV/AIDS-STDs infection in young Latinas of Santa Ana, CA.

YOUTH ADELANTE:***OCTOBER 2001 – PRESENT***

Funded by SAMHSA CSAP, the Youth Adelante program is a ten-week substance abuse & HIV prevention program for middle school youth in the San Fernando Valley. BAI evaluates the effectiveness of the curriculum to improve youth well-being and family bonding while decreasing stress and reducing conflict within the family. The proposed study is a three-year project, targeting to date 153 youth and their parents. Youth range in age from 12-14 and include both males and females. Youth are referred to the program by school staff. Youth criteria are based on recent history of mild to moderate behavioral problems, contacts with school police or law enforcement, possession of alcohol and drug substances, excessive absences and/or promiscuous behavior.

Process evaluation identifies barriers to program implementation, track modifications to the intervention, document the extent of satisfaction with cultural relevance of the Youth Adelante Project; and monitor the effects of the proposed interventions and dosage. The evaluations are mostly qualitative in nature, however, has not excluded the use of quantitative information (i.e., client satisfaction). All data has been collected for both youth and their parents at baseline, posttest (6 month), and follow-up (12-months) measurement points for each cohort. Data entry is conducted at the Behavioral Assessment, Inc. office.

JOVEN NOBLE – MALE INVOLVEMENT PROGRAM:***OCTOBER 1997 – PRESENT***

This project demonstrates BAI's expertise in evaluation research that especially calls upon our use of logic models, site visit protocol development, and site visit interviews in conducting a process evaluation. The main goal of the Male Involvement Program, a federally funded research project by the Bienvenidos Family Services & Children's Center, Inc., is to prevent and reduce unplanned pregnancies, promote abstinence, and improve male reproductive health and responsibility among participating high risk or at risk males. The project focus is to increase participating male and/or families' knowledge of sexually transmitted disease prevention, HIV prevention, family planning methods, male family planning services (i.e., increasing the use of contraceptives and safe sex practices), and to increase community involvement in the prevention of unplanned pregnancies. The program also works with and involves the parents or adult caregiver, offering them the above education with an emphasis on the family unit focused on improving parental skills and supervision, as well as family communication on reproductive health and healthy relationships. The project is divided into three Tiers. Tier I is a ten-session core Joven Noble Curriculum serving a total of 120 males and 60 parent/adults per year. Evaluation will occur as a qualitative/quantitative questionnaire both at baseline and upon exit with dosage being tracked during each session. Tier II is a two session Joven Noble crash course on male reproductive health for males between the ages of 14 to 24. A total of 400 males will receive this curriculum per year. Evaluation will be assessed on a voluntary basis at the end of the sessions with a three-page qualitative/quantitative questionnaire. Tier III will service 2140 males per year between the ages of 14-24. These males will receive numerous materials regarding male reproductive health. They will also be invited to the male clinic for testing on STI's and HIV/AIDS. Sign-in sheets will be collected to track the number of males reached and to identify which events attracted more males. A one-page qualitative/quantitative male satisfaction questionnaire will be distributed to assess those males who have received services from the clinic.

PROJECT HEAL:***OCTOBER 1997 – PRESENT***

In this Center for Substance Abuse Prevention (CSAP) funded program, a federally funded program by (SAMHSA), designed to provide substance abuse and HIV/STD prevention services to both young men and women and their parents or guardians, BAI is performing a process evaluation that includes site visits, site administration, staff training, data collection, and database management activities. Participants are provided with a one-year substance abuse and HIV/STD education program, family counseling, and family and youth activities. Project curriculum promotes family formation, positive family communication, parenting techniques, physical and psychological effects of alcohol, tobacco, and drugs, HIV/STD transmission, risk

reduction, and safer sex practices (including abstinence, contraception, and teen pregnancy prevention). To help evaluate the progress of each participant, each member is given three questionnaires/surveys distributed at the beginning of the educational group, at 6 months, and again at 12 months.

INSTITUTE FOR WOMEN'S HEALTH: TARGETED CAPACITY EXPANSION (TCE HIV)

OCT 1997 – PRESENT

Originally funded as the Instituto Para La Salud Femenina to provide comprehensive treatment service for Latina women residing in East and Southeast Los Angeles who engage in high-risk behaviors and/or are HIV positive, this project was refunded by SAMHSA as the Institute for Women's Health Targeted Capacity Expansion (TCE) – HIV Project. The program demonstrates BAI's culturally sensitive approach to site visit work and process evaluation competencies. Participants are provided a one-year Drug Treatment and Education Program that includes baseline, 6-month, and 12-month follow-up phases. BAI is providing a process evaluation that requires site visits and home visit follow-up data collection interviews with difficult to reach, at-risk populations. Program services included high-risk behavior prevention, substance abuse treatments, HIV/AIDS related services, as well as psychologist in-home assessment and counseling. The program curriculum emphasizes relapse prevention, physical and psychological effects of engaging in high-risk behaviors, HIV/STD/Hepatitis C transmission, risk reduction, and safer sex practices (including contraception, pregnancy prevention, and abstinence). In addition, project participants are provided with community based recovery services and outpatient treatment for substance abuse and HIV/AIDS prevention. The project also provides outreach, case management, parent-child interaction activities, transportation, respite childcare, and a drop-in center. A marriage and family counselor is also on site to provide mental health services, counseling on healthy relationships, healthy marriages, recovery classes, preventive education classes for children, and parenting classes to enhance parenting skills and communication.

The evaluation of this treatment program will be conducted by BAI using the local site-specific qualitative/quantitative questionnaires and the GPRA tool (developed by SAMHSA), which are provided in both English and Spanish. Evaluation takes place at baseline, 6-months, and a 12-month follow-up. A total of 55 women per year will be assessed for the duration of a five-year project. BAI developed the local data codebook and database and has trained an on-sight data collector for convenience and accuracy to the program.

CAPACITY BUILDING AND ORGANIZATION DEVELOPMENT

THE MODEL MENTORSHIP PROGRAM FOR STRENGTHENING ORGANIZATIONAL CAPACITY TO DELIVER HIV/AIDS SERVICES (MENTORS)

OCTOBER, 2004 – 2005

This program was funded by the Office of Women's Health. The primary intent was to improve community-based (CBO) and women's service organization's (WSO) capacity to deliver HIV/AIDS prevention services to minority women in both rural and urban communities. Behavioral Assessment, Inc. (BAI) provided mentorship services for two protégé organizations:

- 1) *Chambers & Associates, LLC, a For-Profit, Minority-Owned Business, located in the Southern rural community of Grand Chain, Illinois*
- 2) *Mujeres Unidas Contra el Sida, a Non-Profit Community-Based Organization, located near the center of San Antonio, Texas.*

The four main areas of capacity building for each protégé were delivered through quarterly site visits In addition to monthly conference calls and regular e-mail contacts with both agencies. Both organizations actively participated in identifying the four areas of need, however, BAI extended mentoring services to include several additional capacity building areas that were identified as areas of need by both BAI and each of the protégés. BAI and both protégés determined that mentorship/training in these additional areas of need would strengthen capacity for both agencies prior to their beginning direct services with their clients. BAI conducted an assessment of each protégé's needs in the areas of administration (Fiscal Management), Technology, and Marketing, using the Strengths, Weaknesses, Opportunities and Threats

Analysis (SWOT) Assessment Tool at three data collection points (e.g. baseline, midyear and at program completion). The results of the SWOT analysis identified areas of capacity building that needed improvement, and helped to establish goals.

This project demonstrates BAI's professional skills in the areas of capacity building, organizational development, technical assistance and training. BAI strengthened the capacity of these two protégés in the areas of management, fiscal policies, board development, program management, and developing viable community partnership, as well as areas that increase the sustainability of the organizations.

THE MODEL MENTORSHIP PROGRAM FOR STRENGTHENING ORGANIZATIONAL CAPACITY TO DELIVER HIV/AIDS SERVICES (MENTORS) ***OCTOBER, 2005 – 2006***

Behavioral Assessment, Inc. (BAI) provided mentorship services for two Protégé organizations:

- 1) *Inner Summit Inc., a non-profit organization, located in Decatur, Georgia*
- 2) *Vision Leadership Institute, a non-profit organization, located in Columbia, South Carolina.*

The primary intent of this program, funded by the Office of Women's Health, was to improve capacity to deliver HIV/AIDS prevention services to minority women in both rural and urban communities.

BAI conducted the Strength, Weakness, Opportunities & Threats (SWOT) assessment of each Protégé's needs in the areas of administration (fiscal management), technology, and marketing. BAI and both Protégés determined that these areas of need would strengthen capacity for both Protégés before they begin direct services with their clients under the OWH Mentorship program.

BAI assisted both Protégés in successfully achieving their goals for this OWH project through Technical Assistance, on-site training, weekly support and follow-up, and continuous assessment of their needs and accomplishments. In addition, BAI conducted regular bi-weekly conference calls, e-mail contact (as necessary) and regularly scheduled site visits.

This project demonstrates BAI's professional skills in the areas of capacity building, organizational development, technical assistance and training. BAI targets capacity of these two protégés in the areas of Curriculum Development, Funding, Board development, Technology, Volunteer Planning, and developing viable community partnership, as well as areas that increase the sustainability of the organizations.

MENTAL HEALTH

CENTER FOR MULTICULTURAL DEVELOPMENT (CMD): ***OCTOBER 1997 – PRESENT***

The Center for Multicultural Development received funding for a Cultural Competence project by The California Endowment (TCE). The overall goal of the project is to assess 7-counties for cultural competence in mental health. The assessment plan was to assess three levels: systems, organizational, and the clinical levels in order to establish the "Best Practices" and create a template on Cultural Competence. The template will then serve as a means to make policy changes within the mental health system. BAI was contracted to evaluate the above evaluation process. Process data (e.g. agendas, instruments, training materials, etc.) and outcome methodologies were also applied (e.g. development of questionnaires- on site and via phone interviews, observations, etc.).

LATINA YOUTH DEVELOPMENT PROJECT: ***OCTOBER 2002 – PRESENT***

Funded by the Esperanza Del Pueblo Community Services, this project focuses on the unique issues faced by Latino youth who are at most risk of engaging in problem behaviors such as those with a parent who is incarcerated, children of substance abusers and youth who have recently immigrated. Family participants will seek support and consensus from key stakeholders in Central Oklahoma. All the instruments used in this project have been formatted by BAI.

The long-term objective of this research program is to develop an innovative stress assessment tool for Hispanic adolescents. A SBIR Phase I study will determine the feasibility of a Phase II study to further validate and norm a commercial adolescent version of the Hispanic Stress Inventory (HSI-A). The target participants of this program are Hispanic adolescents. The program will specifically aim to: 1) identify the salient conceptual psychosocial stress domains; 2) specify discrete domain-specific stressor events and their appraisal for clinical and non-clinical samples that include immigrant, language and ethnic origin subgroups; 3) generate a pool of closed-ended stressor and appraisal items formatted in a Likert style to be included in the HSI-A draft tool; 4) evaluate the content validity of the HSI-A for each adolescent conceptual stress domain.

A cross-sectional, multi-stage research design with multi-site, multi-method and multi-measure features will be applied. Stage 1 will telephone interview an expert panel in order to identify the conceptual and relevant psychosocial stress domains. Stage 2 will use focus group interview methods. A stratified sample of middle school and high school students and clinical clients will be selected (N=250) to participate in focus groups (N=30) from the research sites of Trenton, New Jersey and San Fernando, California. Stage 3 will conduct qualitative analysis of the telephone data to generate a logically interconnected pool of items. In Stage 4 the content validity will be evaluated using Cohen Kappa statistic of inter-rater agreement and an item analysis. The feasibility of the Phase II study will be determined by multiple criteria that includes: obtaining targeted number of participants; adequate representation from the sub-groups of ethnic populations and consensus among expert panel on HSI item content as evidenced by a Cohen Kappa of 0.70 or higher. Ultimately, the HSI-A will be advertised and supplied to the mental health care field where it will have relevance as an early warning mental health-screening tool to improve diagnostic formulation.

PROGRAM EVALUATION

NEW MEXICO STATE INCENTIVE GRANT & PREK-6

OCTOBER 1998 – PRESENT

The State of New Mexico's Department of Health, Behavioral Services Division is dedicated to providing a comprehensive system of prevention services that is community driven, strategically focused, research based and culturally relevant to individuals, families and communities in New Mexico. These services are designed to contribute to the health, safety and economic well-being of people in New Mexico by reducing the incidence of alcohol, tobacco and other drug abuse. BAI was awarded a contract by the state of New Mexico Department of Health/Behavioral Health Services Division to provide professional evaluation & training services to the State. BAI's expertise in this area is aiding the State of New Mexico in the development of an effective, science based prevention system. BAI has served as the lead evaluator for the New Mexico State Incentive Grant (NMSIG) project since 1998. BAI was hired to develop and facilitate the implementation of a comprehensive process and outcome evaluation plan for New Mexico that included a multi-level assessment of state, community, and local sub-recipient prevention activities. In evaluating these activities an evaluation plan was developed that implemented methods to document the state level activities and the accomplishments associated with the SIG, and all sub-recipients. The NMSIG initiative began in October of 1998 and was scheduled to be completed in September of 2003. The goals of this initiative include the development of state of the art prevention technologies for youth ages 12-17 with a focus on ethnic minority youth and high-risk females. Nineteen service providers or sub-recipients were funded to provide model prevention programming to youth across the state. Service providers were at liberty to choose a science-based program to implement in their communities. Due to the variety of programming in the state, NMSIG required an external evaluator to assist in the evaluation of the local process or curricula. The next tier that NMSIG developed was that of the statewide evaluation process. BAI's role included the development, monitoring, collecting and reporting of instruments utilized by all service providers. Those

contributing to this process included local service providers, local evaluators, state department staff, and state-wide evaluators. As a result of this process, a statewide evaluation plan was implemented. Such activities include gathering input from local and state providers, training and TA to service providers and local evaluators, choosing and/or developing evaluation instrument/s, piloting and testing instrument/s, organizing data collection and sharing outcomes with service providers and community.

The program was successfully completed and renewed for an additional two-year term in June of 2003. The renewed contract was awarded with an additional initiative that focused on a younger population and their families, Pre-Kindergarten to sixth grade (PreK-6). This program continued to develop culturally appropriate prevention programming and evaluation services in New Mexico.

TEXAS STATE INCENTIVE GRANT:

SEPTEMBER 2002 – SEPTEMBER 2006

Through funding by the Texas SAMHSA CSAP, The Texas Commission on Alcohol and Drug Abuse (TCADA) formed the Texas State Incentive Programs (TSIP), to implement science based prevention efforts for youth, ages 12-17 years old and improve the nature and quality of prevention services. This program demonstrates BAI's expertise in prevention, evaluation, training, technical assistance, and developing a state of the art logical data management system. The scope and nature of the TCADA / TSIP is comprehensive with intermediate and long-term impact. Using a quasi-experimental design, BAI implemented a core outcome evaluation tool and a high tech, web based data management system for local evaluators was developed in a pre-post data collection approach to determine changes in a variety of risk factors, protective factors, alcohol, tobacco, and other drug use outcomes. A multi site evaluation methodology was used in order to allow for a comprehensive statewide assessment to be conducted.

Technical assistance is provided on issues related to prevention evaluation implementation, data collection, data analysis and report preparation in order to increase the capacity of the State and local communities to engage in meaningful self-assessment and evaluation. BAI also assists in preparing a series of published manuscripts that emphasize various prevention approaches and findings generated from the TCADA database. These publications provided the prevention field with useful information on statewide planning, development of evaluation systems, outcome findings, and information on culturally relevant prevention strategies, particularly those aimed at Hispanic and Native American populations.

CALIFORNIA STATE INCENTIVE GRANT:

NOVEMBER 2003 – PRESENT

In cooperation with the U.S. Department of Health and Human Services, Center for Substance Abuse Prevention (CSAP), California has been awarded a State Incentive Grant that will use evidence-based prevention and early intervention programs to reduce binge drinking in youth and young adults in California. BAI was brought in to evaluate these efforts. The Goals of the project are to develop and implement a comprehensive prevention strategy, develop sustainable programs using science-based prevention practices that focus on youth and young adults (ages 12-25), and reduce binge drinking among youth and young adults (ages 12-25) by 50 percent in five years.

California baseline studies have established that binge drinking is a serious problem among California's youth which lead to threats in the long-term development and well being, increased incidence of traffic crashes, and problem behaviors including violence, suicide, and educational failure. This behavior also affects the broader community of California and therefore the California State Incentive Grant is highly focused on creating a program to address this problematic behavior.

PROJECT BIENESTAR:

OCTOBER 2001 – PRESENT

The Pinal Hispanic Council, through federal funding, implements the three year Proyecto Bienestar program in the rural cities and towns of Eloy, Casa Grande, Coolidge, Florence, Picacho, and Arizona City in Pinal County, Arizona. Projects objectives include: 1) Developing a Recovery Community ALIANZA (Alliance), consisting of individuals in recovery and their

family members, 2) Training Alliance members, 3) Implementing a public education campaign, 4) Developing a Consumer Affairs Department within the agency structure, 5) Training community stakeholders, 6) Implementing Public Policy Initiatives, and 7) Conducting a needs assessment.

SUNRISE COMMUNITY COUNSELING CENTER SAMHSA-CSAP PROJ. OCT 2005 - PRESENT

Sunrise Community Counseling Center, Inc. (SCCC) and Behavioral Assessment, Inc. will design and implement a 5-year program that integrates health services delivery and epidemiological monitoring in the SPA4 Metro area on Los Angeles County (LAC).

The program will target Latino and re-entry youth aged 12-17 incarcerated for gang-related activities. The goal of the program is to build the capacity of SCCC to provide substance abuse prevention intervention, HIV and hepatitis prevention and screening among Latino youth who have been through the state juvenile detention system due to their gang affiliation and are reentering the community in a post incarceration phase. The program will work with these youth and their families. The program also includes community stakeholder and epidemiological monitoring activities that will be an essential part of the evaluation.

The program has the following specific objectives: 1) To enhance the existing substance abuse prevention and treatment program of SCCC to serve gang affiliated and reentry Latino youth and to build agency capacity for effective substance treatment for this population; 2) To build capacity among SCCC and BAI's community stakeholder partners, (CCNP, YMCA, CARECEN, Inner City Law Center, Los Angeles Police Department, Los Angeles Public School District East Los Angeles Alternative Education Center, New Economics for Women, Los Angeles STD Program) in recognizing substance abuse issues and in providing wrap-around and supportive services for re-entry youth aged 12-17 in substance abuse prevention and identification of high risk behavior that could lead to HIV and hepatitis infection; 3) To provide substance abuse treatment/prevention services using Brief Strategic Family Therapy (BSFT) model to high-risk reentry gang affiliated youth aged 12-17. The design and implementation of the BSFT will include a needs assessment of the target population that will include community epidemiological data. This needs assessment will be utilized to build a component in the BSFT model that will address specific issues in substance abuse, HIV and hepatitis prevention.

ORANGE COUNTY BAR FOUNDATION SAMHSA-CSAP PROJECT OCTOBER 2005 - PRESENT

The Orange County Bar Foundation Project uses the *Stop Short of Addiction* substance abuse intervention model to include integrated HIV/Hepatitis prevention education and counseling, testing, and referral services for a target population of hard to reach Latino and re-entry youth in Orange County, California that have been identified as abusing alcohol/drugs and are at high risk of HIV/AIDS and Hepatitis. The purpose of the project is to reduce the spread of substance abuse, which increases the risk for HIV/AIDS, Hepatitis, and other infectious diseases among Latino and re-entry youth populations. The project provides integrated substance abuse and HIV/Hepatitis prevention services in a culturally competent manner to the target population. The Orange County Bar Foundation targets Latino youth, males and females, ages 12-18, in Orange County, CA that are at high risk of substance abuse and HIV/Hepatitis infection. These youth have been identified as currently using alcohol and/or drugs by law enforcement agencies, parent/family members, school officials, a community agency, or by the County's juvenile detention facilities as re-entering the Orange County population.

The Orange County Bar Foundation's model program, Stop Short of Addiction, includes: 1) clinical intake assessment; 2) substance abuse prevention sessions; 3) ethnic-specific, science-based Brief Strategic Family Therapy, and 4) Case management and referral services. All program services are provided in Spanish, in a culturally appropriate and sensitive manner. The project will incorporate components of the HIV/Hepatitis prevention curriculum from our current CSAP and CDC approved programs, *Project Youth Connect* and *Hermana Project*, to the existing Stop Short of Addiction program services. Access is provided to HIV and Hepatitis C testing, pre/post counseling, and referrals to Hepatitis A/B immunization services.

The proposed project will fill the gap in existing community services by providing substance abuse, HIV, and Hepatitis prevention services that address the unique needs of underserved

populations of Latino and re-entry youth. To effectively plan, deliver, and sustain our proposed services, the Orange County Bar Foundation will engage in the five steps of SAMHSA's Strategic Prevention Framework by: 1) Conducting a community needs assessment; 2) Building local capacity and mobilizing community resources; 3) Using the documented community needs assessment to develop a comprehensive strategic plan; 4) Implement evidence-based substance abuse, HIV, and Hepatitis prevention interventions; and 5) Monitoring and evaluating project effectiveness.

NEW MEXICO MENTAL HEALTH TRANSFORMATION EVALUATION (TSIG) OCT 2006- PRESENT

Behavioral Assessment, Inc. (BAI) was contracted to evaluate Year Two of the New Mexico Mental Health Transformation – State Incentive Grant project. New Mexico is one of 7 States that has successfully competed to win a Substance Abuse and Mental Health Services Administration (SMHSA) Center for Mental Health Services (CMHS) a Mental Health Transformation State Incentive Grant (T SIG) to implement the goals set forth in the New Freedom Commission (NFC) Final Report. Through this award, NM has emerged as a forerunner state in the transformation of the American mental health system. The long-term evaluation goal is to assess how effective the MHT SIG is in transforming NM from a fragmented, non-evidence-based patchwork of mental health services characterized by large disparities into a single behavioral health service delivery system in which funds are well managed, recovery and resiliency are supported, mental health is promoted and mental illness prevented or reduced and consumers participate fully in the life of their communities. BAI's short term goal of the evaluation is to consult with the area Leads and other state evaluation agents in the development of feasible evaluation plans for the T SIG activities targeting each of 6 goals for mental health transformation outlined by the NFC. This project demonstrates BAI's professional skills in the areas of large-scale evaluation, systems change and transformation, expertise in working with integrated data management systems, and in designing & managing multi system, state-level evaluation projects.

YOUTH TRANSITIONAL INTERVENTION PROGRAM: AN EVALUATION PRESENT

Behavioral Assessment, Inc. (BAI) was contracted to evaluate and assess the efficiency and the effectiveness of this program to assist incarcerated Orange County youth and their families, as they transition out of detention facilities and reestablish themselves in their home, school, and community environments. The program offers intensive, individualized aftercare services designed to prevent youth from penetrating further into the juvenile justice system and to improve their pro-social behaviors, school performance, and family bonding. The evaluation is measuring mandatory outputs such as aftercare services, staff training, number of youth served and individual dosage. Mandatory outcomes are also being assessed including juvenile offender recidivism and incarceration, CSAT GPRA Client performance in the areas of substance use, family/living conditions, education, employment, income, crime and criminal justice status, mental/physical health and treatment. In addition, the Stress Index for Parents of Adolescents will be administered to the parents or caregivers participating in the family therapy services program.

CULTURAL COMPETENCY & POLICY ANALYSIS

THE CALIFORNIA ENDOWMENT (TCE)

PRESENT

Policy Analysis Study of the Cultural Competency Challenges Related to the Implementation of California Mental Health Act in Three Central Valley Counties

This study in 3 California Central Valley counties (Fresno, Tulare, Monterey) delivers policy analysis recommendations and technical assistance to The California Endowment (TCE). This project provides TCE with a better understanding the cultural competency challenges facing Latino communities in the three counties today. The project reviews best and evidence-based behavioral health practices relevant to Latinos. It also provides technical assistance to Latino community-based organizations providing behavioral health services for the accessing of resources made available by the new California Mental Health Act. The study assesses community understanding of the available science based practices and establishes a mechanism for interchange between county mental health agencies and community voices. Three key mental health policy questions provide the focus of the study: 1) What is the current status of the Mental Health Services Act and its impact on the underserved Latino individuals and communities in Central Valley counties in the State of California? ; 2) What are the current “evidence based, promising practices and/or evidence informed programs” that may serve as models in this time of transformation of the county mental health delivery system that specifically relate to the early screening and the identification and treatment of methamphetamine and related problems that are burdening the system? ; 3) Based on a comprehensive policy analysis of the state of the art of the mental health delivery system for Latino behavioral health, what will be required for the “transfer of technology” from TCE program officers that will assist them in making informed decisions on funding for the next 10 years

