

Solutions for Treatment Expansion Project (STEP)

Year One Interim Evaluation Report

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Prepared for Futures Associates, Inc.

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Table of Contents

EXECUTIVE SUMMARY	i
INTRODUCTION	1
Overview of the STEP Initiative.....	1
Purpose	2
Goals and Objectives	2
Outcomes	3
EVALUATION DESIGN	3
Evaluation Research Questions.....	3
Year One Data Collection Strategies	4
Document Reviews	4
Observational Methods	4
Survey Research.....	4
Structured Interviews.....	5
FINDINGS	5
Modifications to Project Plan and Initial Objectives.....	5
Year One Accomplishments.....	7
Spokesperson Training	8
Survey Methodology and Content	8
Results	8
Key Informant Interviews.....	11
Participants and Interview Content.....	11
Background Information	12
Role and Involvement with STEP.....	12
Looking Ahead	14
Lessons Learned.....	15
SUMMARY.....	18
Year Two Recommendations.....	19
CONCLUSION	21
APPENDICES	
Appendix A: Spokesperson Training Follow-up Survey	22
Appendix B: Key Informant Interview Protocol.....	23

EXECUTIVE SUMMARY

The Solutions for Treatment Expansion Project (STEP) is currently underway in two large geographical regions within San Diego County. Its original purpose was to find a solution to combating NIMBY-ism (i.e., “Not In My Back Yard”) against residential alcohol and drug treatment programs. In early 2006, Futures Associates, Inc. was awarded a grant through The California Endowment to continue the STEP policy advancement preparedness work begun several years ago. As part of the current initiative, project staff and regionally based core planning groups are working to streamline the process for individuals and groups intending to site a treatment facility within a community. More specifically, STEP is advocating for changes to modify the Conditional Use Permit (CUP) application process for residential alcohol and drug treatment programs throughout San Diego County through the strategic advancement of a policy by local STEP team members to their local governments to adopt the STEP Addendum to the CUP Application for Residential Alcohol and Drug Treatment Programs.

Over the two-year term of the project, STEP’s policy advancement aims are to be achieved through a number of key strategies such as: ongoing data collection and application; establishment of core Regional STEP Teams; regular meetings to share information and lessons learned; use of assessment/readiness forms; regionally based trainings for Regional STEP Team members; development of a STEP briefing book; generation of media pieces; identification of influential local governments and officials; and development of a comprehensive tool kit intended for dissemination to providers and counties in California.

STEP Purpose, Goals and Objectives

STEP is a data-driven policy initiative intended to counter negative perceptions regarding licensed residential alcohol and drug treatment programs. The purposes of the initiative are to:

- (1) increase public awareness through media and public education efforts regarding the contributions of licensed residential alcohol and drug treatment programs relative to safe communities;
- (2) empower community members to influence a shift in perception among local decision makers to one that includes a role for licensed residential treatment programs in their communities; and
- (3) prepare community members to advance the STEP policy agenda of the proposed Addendum to the CUP Application to local governments in San Diego County in two pilot regions: North County and East County.

The two primary goals of the STEP initiative are to prepare two Regional STEP Teams in San Diego County with 3-5 primary spokespersons/representatives from each regional area and to train spokespersons to advance a policy of adopting STEP’s Addendum to the CUP Application for Residential Alcohol and Drug Treatment Programs. The objectives identified for the initiative are to: create a policy agenda for each region; develop a strategic plan for policy promotion in each region; design a media plan for each region; convene quarterly project briefings in each region; convene the Regional STEP Teams at least three times during the funding period; and develop a tool kit to facilitate the replication of local STEP advocacy efforts.

Evaluation Design

A comprehensive formative evaluation design is being used to assess the implementation and outcomes of the STEP initiative. The evaluation approach is participatory, with key stakeholders involved in the design of data collection tools and interpretation of findings. The evaluation research questions were designed to assess what, if any, modifications were made to the project's initial goals, objectives, and outcomes; whether any challenges were encountered during STEP's implementation process; whether STEP achieved its goals, objectives, and intended outcomes; and to identify the primary lessons learned so that the information could be shared for the benefit of others.

The evaluation plan relied primarily on qualitative data collection strategies such as document reviews, participant observations, open-ended surveys and key informant interviews. During year one of the project, a thorough review was made of all information/publications developed since the beginning of the project and during STEP's initial funding period. Evaluators observed the North County Spokesperson Training and all but one of the North County and East County Regional STEP Team meetings. Feedback was obtained from Spokesperson Training participants through an online survey assessing overall levels of satisfaction and suggestions for improving future trainings. In-depth interviews were conducted with STEP staff and additional key informants from each of the Regional STEP teams, local government agencies, and treatment providers considering a CUP.

Findings

Modifications to Project Plan and Initial Objectives

A few modifications to the initial project plan and stated objectives were deemed necessary once STEP began its implementation process. Initially, the project proposed to identify at least 10 members to participate in three regional core planning groups (i.e., within the North County Inland, North County Coastal, and East County regions). As STEP moved forward with the project, the three planning groups for each region were condensed into two with the North County Coastal and North County Inland combining to form one group. The East County group has remained the same in structure. STEP staff also decided to change the name of the Core Planning Groups to Regional STEP Teams. A new term "Local Government Planning Groups" (LGPG) was defined to represent a core group of 2-3 people in each local government charged with determining readiness and advancing strategy. A representative of each local government (or LGPG representative) would participate on the Regional STEP Team for their region. These structural changes likely will result in greater numbers of persons actually engaged in strategic planning through the LGPGs. At the same time, it may reduce the number of individuals participating on each of the two Regional STEP Teams.

Toward the end of 2006, STEP staff became aware of the potential applicability of Fair Housing Laws to its project goals and overall purpose. Futures Associates/STEP staff negotiated a small Consulting Agreement with the Fair Housing Council of San Diego to assist in sorting through both the Fair Housing Law and case law relevant to siting residential treatment programs. According to STEP staff, by the end of the first program year it was quite evident that the implications of Fair Housing Law will require STEP Project re-engineering which will be conducted during early 2007.

Year One Accomplishments

During the first eight months of STEP's implementation, the following important accomplishments have been made: regional STEP Teams have been established in both North County and East County, a local Government Readiness Form (LGRF) denoting key persons and contact information has been developed, a comprehensive STEP Briefing Book was created, a training needs inventory was completed, and a Regional Spokesperson Training was conducted with North County STEP advocates.

Regional STEP Spokesperson Training Survey Results

Overall, participants rated the Spokesperson Training very positively. In fact, all attendees (100%) indicated that the training had been a valuable experience and that they would recommend the training to others. Participants commented that the most useful aspect of the training was the value in knowing the relevant data/statistics and how to best present the information about STEP to varying groups/officials. Participants' suggestions to improve future trainings included building in an opportunity to role-play and practice what they had learned.

Key Informant Interview Findings

Common themes regarding the importance of the STEP initiative centered around: (1) the need to establish a CUP addendum in the local government jurisdictions in San Diego County, (2) the difficulty getting treatment centers sited, and (3) the insufficiency of residential treatment centers to meet the demand. The next most common theme involved a need to raise awareness about the benefits of treatment centers in order to combat negative stereotypes. In order to advance the project's objectives, key informants from North and East County reported meeting with city officials, attending STEP meetings and offering their input, building community support, working to raise awareness about the project and related issues, and talking with other STEP advocates.

All of the key informants indicated that they planned to continue their involvement with STEP in the year 2007, and all will have a role in moving the initiative forward. Factors informants believed were necessary for STEP to achieve its purposes included: standardizing the CUP Addendum processes across local governments, broad community education using STEP research and data to change community perceptions about residential treatment centers, additional meetings and communication with local governments, increased media advocacy, and determining the impact of the Americans with Disabilities Act Fair Housing Laws on the STEP initiative.

STEP staff identified a few challenges encountered during the first year, such as needing greater access to really good data mapping, having time to really focus on the media component of the project, and the best ways to respond to course diversions while continuing to move forward in a positive way. When asked what their area of focus would be for year two, the staff saw that media advocacy was critical. They also realized that the planned media approaches outlined in the first year would need to be redesigned to incorporate the implications of Fair Housing Law and case law. STEP staff also will be focused on encouraging the LGPGs to speak with their local government representatives, completing the environmental proximity scan, and developing a STEP tool kit.

Summary and Year Two Recommendations

At the completion of its first year of implementation, the STEP initiative is on track in meeting its goals and objectives. A number of significant accomplishments have been made, including the establishment of viable Regional STEP Teams committed to the project, delivery of a comprehensive training, and development of an extensive Briefing Book for spokespersons to use as a reference for their community advocacy efforts. STEP staff and members of the Regional STEP Teams also worked on creating and defining a policy agenda tailored to each region. Additionally, a significant amount of time was devoted to pertinent research and data gathering.

In addition to progress made toward the achievement of project goals and objectives, a tremendous strength of the project is the levels of dedication, passion and willingness to move the project forward among all involved. This is evident not only among STEP staff but also among the Regional STEP Team members and LGPGs. The STEP initiative is comprised of highly informed, motivated, and well-intended individuals who work very well together. Feedback from Regional STEP Team members, as well as from treatment providers and local government representatives, is very positive toward STEP staff and its leadership. Based on evaluative data, all STEP advocates/spokespersons appear very clear on what aspects of their strategies are working and are able to make course corrections to increase the success of the project.

Although members of the STEP initiative agreed that it is too early to say definitively whether STEP is having its intended impact, many were able to point to signs of early progress. A number of key informants made comments such as “Things are definitely moving forward” and “We’ve certainly made forward steps.” Examples of project success so far included the number of community members talking about the work of STEP, positive feedback from several representatives from city governments, and promising information that appears applicable to STEP in the Fair Housing Amendment. A couple of individuals also pointed out that, at the very least, they have begun to develop a data-driven model for policy advancement regarding licensed residential treatment programs that is intended to be shared with others.

Based on the formative evaluation of STEP, the following are suggested to facilitate the achievement of stated goals, objectives and intended outcomes: conduct a planning session in each region with Regional STEP Team and LGPG members (early 2007), spend additional time and energy focused on East County (early 2007), use survey feedback to shape future trainings (early 2007 and ongoing), and convene the North and East County Regional STEP Teams (late 2007).

Conclusion

As mentioned, STEP is on track toward accomplishing its objectives and intended outcomes. Critical areas of focus over the coming year will be the development and implementation of an effective media campaign, working strategically in each region, integrating the necessary changes to incorporate Fair Housing implications, and staying focused despite the evolving and organic nature of such a pioneer initiative. Although STEP is intended to be highly collaborative in structure, the evaluators suggest that additional keys to effective continued implementation of the project include clear and consistent communication from staff to the Regional STEP Teams and LGPG representatives regarding next steps, timelines, and even to some extent, direction.

INTRODUCTION

In May 2006, EVALCORP Research & Consulting was contracted by Futures Associates, Inc. to design and conduct an evaluation of the Solutions for Treatment Expansion Project (STEP), a two-year policy advancement preparedness initiative funded in part by The California Endowment and administered by Futures Associates, Inc. The following report summarizes the activities, accomplishments, and evaluation findings relative to the STEP initiative from February 2006 through December 2006. Also included are recommendations for consideration as STEP moves forward into its second year of implementation.

Overview of the STEP Initiative

The Solutions for Treatment Expansion Project (STEP) is currently underway in two large geographical regions within San Diego County. Funded initially in 2001 through Proposition 36 funds, STEP began as a contract with the Institute for Public Strategies (IPS) through the San Diego County Department of Alcohol and Drug Services. Its original purpose was to find a solution to combating NIMBY-ism (i.e., “Not In My Back Yard”) against residential alcohol and drug treatment programs. A great deal of important preparatory work (i.e., pertinent data accumulation and analysis, community involvement, and message formation) took place during its initial funding period¹. Unfortunately, however, budget cuts in Prop 36 funds led to a discontinuation of STEP in 2003.

In early 2006, Futures Associates, Inc. was awarded a grant through The California Endowment to continue the STEP policy advancement preparedness work begun several years ago. As part of the current initiative, project staff and regionally based core planning groups are working to demystify and streamline the process for individuals and groups intending to site a treatment facility within a community. More specifically, STEP is advocating for changes to modify the Conditional Use Permit (CUP) application process for residential alcohol and drug treatment programs throughout San Diego County by the strategic advancement of a policy by local STEP team members to their local governments to adopt the STEP Addendum to the CUP Application for Residential Alcohol and Drug Treatment Programs. According to STEP staff, the value of modifying the CUP process for residential treatment programs is that the new application format will provide planners and elected officials with information and data necessary to make a considered determination for each application. Moreover, CUP applicants will benefit from the modified process as well, since the changes STEP is intending to bring about will open a process currently deemed difficult, if not impossible, to navigate.

The environmental change strategies of applied research and data collection, community organization, and media advocacy are built into the STEP initiative to support the preparation and strategic planning activities necessary for policy advancement. Over the two-year term of the project, STEP’s policy advancement aims are to be achieved through a number of key strategies such as:

- Ongoing data collection and application;
- Establishment of core Regional STEP Teams;
- Regular meetings to share information and lessons learned;
- Use of assessment/readiness forms;
- Regionally based trainings for Regional STEP Team members;

¹ STEP related resources and publications developed during its initial funding period are available online at http://www.publicstrategies.org/goodneighbor_home.htm.

- Development of a STEP briefing book;
- Generation of media pieces;
- Identification of influential local governments and officials; and
- Development of a comprehensive tool kit intended for dissemination to providers and counties in California.

Many of the above listed strategies are in process or have been implemented successfully. Additional information regarding what has been accomplished to date is discussed in the Findings section of this report.

Purpose

In short, STEP is a data-driven policy initiative intended to counter negative perceptions regarding licensed residential alcohol and drug treatment programs. The overall purposes of the initiative are to:

- ✓ increase public awareness through media and public education efforts regarding the contributions of licensed residential alcohol and drug treatment programs relative to safe communities;
- ✓ empower community members to influence a shift in perception among local decision makers to one that includes a role for licensed residential treatment programs in their communities; and
- ✓ prepare community members to advance the STEP policy agenda of the proposed Addendum to the CUP Application to local governments in San Diego County in two pilot regions: North County and East County.

Goals and Objectives

Two primary goals have been established for the STEP initiative, these are: (1) to prepare two Regional STEP Teams in San Diego County, with 3-5 primary spokespersons/representatives from each regional area, and (2) to train spokespersons to speak to local governments to advance a policy of adopting STEP's Addendum to the CUP Application for Residential Alcohol and Drug Treatment Programs. The overall project objectives are to:

1. Establish **Regional STEP Teams** (i.e., East County and combined North County Inland and North County Coastal) to create and define a policy agenda tailored to their region, and to become active advocates to advance the policy agenda by being spokespersons at city council and/or county planning meetings. Develop a training needs inventory and STEP briefing book, and provide training as needed to all planning group members.
2. Develop a **strategic plan** for policy promotion in each region. Incorporate new and updated data, changes in local governments, new health and safety policy initiatives, and identification of those local governments and officials who can provide the best leverage in influencing peers in neighboring jurisdictions.
3. Design a **media plan** for each region, targeting both decision-makers and community members with key messages relating to the need for CUP revision and the benefits of treatment facilities. Generate at least five media pieces each year to increase community awareness and promote the STEP policy agenda.
4. Convene **quarterly project briefings** in each region to monitor progress, revise and provide additional training, and amend strategic and media plans based on newly identified policy influences and reaction to previous media coverage.

5. **Convene the Regional STEP Teams** at least three times during the funding period to share data and lessons learned, refine and coordinate media strategies, and identify opportunities to leverage one another's work.
6. Develop a **tool kit** for the replication of the STEP advocacy efforts for dissemination to other advocates in California. The toolkit will include tips for crafting effective media messages, training components, and challenges/successes of working in community planning groups. This toolkit is to be disseminated to at least 50 providers/counties in California.

Outcomes

In addition to the project goals and objectives, three project outcomes were defined and are listed below:

1. Inclusion of objective data to inform decision-making among local governments for Conditional Use Permits (CUPs) to expand licensed residential treatment in the targeted communities.
2. Increased competency of identified community partners and collaboratives in the target regions to be advocates for supporting the adoption of a streamline CUP process.
3. Shift in community perceptions among residents and elected officials on the role of substance abuse providers as a community asset.

EVALUATION DESIGN

A comprehensive formative evaluation design is being used to assess the implementation and outcomes of the STEP initiative. The purpose of a formative evaluation is to help shape a project's development and strengthen the implementation of newer or pilot initiatives, such as STEP, through the use of evaluative data fed back to stakeholders at regular intervals. The evaluation approach is participatory; thus, key stakeholders are involved throughout the process and take part in critical activities such as the design of data collection tools, identification of key informants to participate in data gathering processes, and interpretation of findings.

Evaluation Research Questions

The primary questions investigated through the current evaluation include:

- What changes or modifications were made to the project's initial goals, objectives, outcomes, and/or implementation plan?
- Were any challenges/barriers/opposition encountered during the STEP's implementation? If so, how were they overcome?
- To what extent did STEP achieve its goals, objectives, and intended outcomes?
- What were the primary lessons learned and what are recommendations for replication of similar initiatives in the future?

These questions will be answered fully in the Year Two Final Evaluation report for the project. However, data are presented in the Findings section of the current report that begin to inform all of the evaluation research questions posed above.

Year One Data Collection Strategies

Various strategies are being employed to collect evaluative data and answer the research questions posed for the study. Given the emerging nature of the project, along with STEP's objective to disseminate learnings and findings from the initiative with other counties and providers, it was determined that an evaluation plan relying primarily on qualitative inquiry and data collection techniques would be most useful to project stakeholders and effective in documenting what occurred as the project evolved. More specifically, the evaluation plan designed for year one of the project called for the following data collection strategies: document reviews, observational methods, survey research, and structured interviews.

Document reviews

Thorough reviews of all project related documents have taken place since the beginning of the project, as well as an examination of publications/information developed during STEP's initial funding period. Examples of the types of documents/materials that have been used to inform the evaluation include: STEP Issue Briefings, Fact Sheets, a series of STEP Project Guides, the STEP Briefing Book, Local Government Readiness Forms, STEP's proposal submitted to The California Endowment for funding, the 1st Interim Grant Report Form to The California Endowment, all Regional STEP Team meeting agendas and minutes, North County Spokesperson Training materials, the STEP Addendum to CUP Application, pertinent research literature and data collected by STEP staff, and a copy of a recently developed Op Ed media piece.

Observational Methods

The evaluators have participated in all but one of the Regional STEP Team meetings held this year. During each of the meetings, the evaluators participate unobtrusively and make evaluative observations. Following each meeting, a set of "Evaluator Process Notes" are developed and shared with STEP staff. This information serves as a running log chronicling the activities, accomplishments, and any challenges experienced by the Regional STEP Team, and are intended to supplement the information contained in the minutes for each meeting developed by the STEP Project Manager. Similarly, the evaluators attended and developed a set of process notes for the Spokesperson Training held in North County.

Survey Research

A questionnaire was developed to obtain feedback from attendees of the Spokesperson training held in Vista, CA (North County) in August 2006. The survey contained 17 open- and closed-ended items that assessed the extent to which the training was perceived as relevant and informative to participants. The survey also was used to measure the types of things that participants had learned, which components of the training were deemed most and least useful, whether attendees had applied what they had learned, whether they would recommend the training to others, and to obtain any suggestions to improve future trainings. The survey was administered online approximately two months following the training, which allowed for the assessment of whether participants had been able to use/apply what they had learned. A copy of the survey is included in Appendix A.

Structured Interviews

A Key Informant Protocol was developed for the year one series of structured interviews. In addition to three STEP staff, key informants identified to participate in the interviews included representatives from each of the Regional STEP Teams, local government, and treatment providers considering a CUP. A total of 20 questions comprised the interview protocol, all of which were open-ended. Questions asked during the interview were categorized into one of four sections, which included: (1) Background Information, (2) Role and Involvement with the STEP Initiative, (3) Looking Ahead, and (4) Lessons Learned. An additional set of nine questions was developed for and asked only of STEP staff. Questions asked of project staff centered on changes to project goals/objectives, any challenges experienced implementing the project to date, the ways in which any identified obstacles/challenges were overcome, and what their key areas of focus will be during the second year of the project. In addition, staff was asked to comment on the progress made towards the achievement of activities/tasks described in their funded proposal.

All of the interviews completed with Regional STEP Team Members, local government and treatment providers were conducted by phone. The three interviews with STEP staff were conducted in person and each was interviewed separately from one another. A copy of the interview protocol is included in Appendix B.

FINDINGS

The following sections highlight the findings from the evaluation data collection strategies employed. First, we discuss several modifications to the initial stated goals of the project along with their rationale. Second, significant accomplishments are outlined. Third, the results of the training follow-up survey are presented. Lastly, findings from the key informant interviews are presented.

Modifications to Project Plan and Initial Objectives

Although there still remains the same number of project objectives, a few modifications to the project plan and initial stated objectives were deemed necessary once STEP began its implementation process.

Initially, the project proposed to identify at least 10 members, including treatment providers and community residents, to participate in three regional core planning groups (i.e., within the North County Inland, North County Coastal, and East County regions). The idea was that the three regionally based core planning groups would be responsible for creating and defining a policy agenda tailored to their region.

As STEP moved forward with the project, two modifications were made to the core planning groups. First, the three planning groups for each region were condensed into two. Based upon North County's history of working together through the North County Alcohol and Other Drug (NCATOD) meetings involving both prevention and treatment providers, and direct requests made by RST members of STEP staff, the North County Coastal and North County Inland combined to form one group. The East County group has remained the same in structure. A second change has been in name. Rather than calling them Core Planning Groups, STEP found it more useful to deem them Regional STEP Teams (RSTs). The two RSTs operate in North and East County and work to develop strategies for policy advancement in their region.

Specifically, they determine which local government will present the adoption of the CUP Addendum, which RST resources can be applied to more than one local government, and apply lessons learned in one city/county area to others that may benefit from them.

STEP staff also had originally thought that the regional planning group would be the core planning group for strategy and operations of the project within that region; however, as they moved forward and began working with the Local Government Readiness Form designed for the project, it became clear that the core planning had to take place within each local government. Therefore, it was decided that core teams of 2-3 people would be identified and developed within each local government in each region. A new term “Local Government Planning Groups” (LGPG) was defined to represent the core group of people in each local government charged with determining readiness and advancing strategy. It was also decided that a representative of each local government (or LGPG representative) would participate on the RST for their region, which will be involved in strategizing for the region (e.g., determining which local government would be first to present the adoption of the CUP Addendum or find out what shared/combined resources could be applied to more than one local government). As of June 2006, STEP had identified persons to lead core teams in each local government in Oceanside, Vista, San Marcos, Escondido, Poway and the North Inland Unincorporated county area. The LGPGs in North County, with the exception of the City of Vista, were formed using representatives of the two San Diego County Alcohol and Drug Services contract prevention providers operating in those areas, both of which signed MOUs with STEP. Specifically, they are: The North Inland Community Prevention Program (NICPP) and Tri-City Collaborative (which is part of the North Coastal Prevention Coalition). The City of Vista is represented on both the STEP RST and LGPG by the Director of the City of Vista’s Weed and Seed Program.

While STEP had originally proposed 10 members on three Core Planning Teams, the changes made in structure likely will result in greater numbers of persons actually engaged in strategic planning through the LGPGs. At the same time, it may reduce the number of individuals participating on each of the two RSTs.

STEP is moving more slowly in East County, compared with North County. Original discussions with the East County’s community partner, the El Cajon Collaborative (ECC), were based on the idea that the ECC would serve as the RST. After some time, both the ECC and STEP discovered that this was not feasible. Even though the ECC has contacts and representation from other East County local governments, it was determined that it would be stretching its bounds to act as a coordinating body for a project operating in all East County governments. Thus, it was decided that the East County ATOD group would serve as the RST.

An additional modification in East County, compared with how North County operates, is that in East County, all health and safety initiatives are advanced through each local government’s collaborative. While STEP has informal agreements with persons who would like to serve on each of the four East County cities’ LGPGs, those cannot be confirmed until the collaborative for each city confirms its participation.

STEP also proposed the design of a media plan for each region which would include generating a minimum of five media pieces each year. These media pieces are important for increasing community awareness and promoting the STEP policy agenda. One draft media piece, an Op Ed, has been developed thus far. Additionally, plans are in place to develop media pieces for year two. Examples of planned media include:

- ✓ Radio pieces by Kenny Goldberg, KPBS Health Reporter: (1) San Diego County Alcohol and Drug Services RFP for young adults issued twice this year to date has had no response since providers believe they cannot get a CUP for a site to house the program, and (2) begin to promote the notion that it should be no more difficult for a treatment provider to get a CUP than for a business to get a CUP to sell alcoholic beverages.
- ✓ Sandi Dolbee, Union Tribune Ethics and Religion Editor: Develop 1-2 pieces on the ethics of politicians making it relatively easy for alcohol outlets to operate in their community, often over the objections of community residents.
- ✓ Several letters to the editor of local newspapers.

In addition, we learned from STEP staff that a media plan for each region (North and East) will be developed during the first quarter of 2007.

Year One Accomplishments

A number of important accomplishments have been made during the first eight months of STEP's implementation, examples of which are listed below:

- **Regional STEP Teams Established.** Both the North and East County have in place a core group of members working to advance the aims of the STEP initiative. Although the North County RST has been more active compared with the East County RST during year one, it is expected that the East County group will become more active early in year two of the project.
- **Local Government Readiness Form (LGRF) Developed.** This form was designed for use in each region for strategic policy advancement purposes. The form denotes key persons, by name and title, who may be most influential or helpful in advancing the STEP initiative. Also included is a place to include contact information for each individual, as well as space to include previous health and safety policy promotions that could impact the perception of STEP. According to STEP staff, the LGRF has been useful in East County in helping to make the project seem less daunting to LGPG members. In North County, the form has been a useful tool in guiding the LGPG members' local strategic planning efforts.
- **Training Needs Inventory Completed.** Prior to developing the content of the North County Spokesperson Training, STEP staff conducted an in-person training needs inventory with members of the North County RST. This process took place over the course of several regular RST planning meetings.
- **Regional STEP Training Conducted.** STEP staff developed and led three-hour training in August 2006 with members of the North County RST. Attendees were provided information regarding how to best communicate to local decision makers about the need for residential treatment centers. Lessons learned thus far in the project also were shared with trainees. In addition, an explanation of treatment terminology was provided, as well as helpful "talking points" that could be used when talking about STEP to local policy- and decision-makers. The project's history and formation of STEP was discussed, along with the purpose, goals, and objectives of the initiative. Trainees were presented with pertinent data and research, and were updated on the environmental "proximity scans" taking place. Relevant ARJIS crime statistics also were presented. All of the attendees worked on the formulation of an effective 30-second "elevator speech" that could be used with local government officials they intended to meet with regarding STEP. The training was interactive and allowed time for Q and A, observations, and participant feedback on the training.
- **STEP Briefing Book Created.** As part of the materials developed for use during (and after) the Regional STEP Training, a STEP Briefing Book was developed. This publication is a

comprehensive 28-page document containing information covered during the training, along with all of the data and 'helpful hints' about how best to inform decision makers about the importance of STEP. The Briefing Book serves as a useful reference or go-to guide following the training.

- **Fair Housing Amendment.** During the last several months of 2006, STEP became aware of the potential applicability of Fair Housing Laws to protect its goals. Research into the subject led to a realization that more expert help was needed. STEP negotiated a small Consulting Agreement with the Fair Housing Council of San Diego to assist in sorting through both the Fair Housing Law and the case law relevant to siting residential treatment programs. According to STEP staff, by the end of the first program year it was quite evident that the implications of Fair Housing Law will require STEP Project re-engineering which will be conducted during early 2007.

Spokesperson Training

As mentioned, STEP staff conducted a Spokesperson Training in August 2006. A total of 17 persons attended, most of whom were members of the North County RST and the remainders were from countywide efforts. This training served as the first of several planned for the project.

Survey Methodology and Content

In order to determine the impact of the training on participants, as well as to learn how best to improve future trainings, an online survey was designed and administered to participants. Approximately two months following the training, a list of participants was generated by the STEP Project Manager and provided to the evaluators so that the survey link could be sent via email to potential respondents. A total of nine people were identified as being most appropriate to complete the survey. Although more than nine persons had attended the training, not all of them were core RST members – and it was determined that only those attendees who were going to work directly with their LGPGs would be asked to complete a survey. A total of eight surveys were returned, resulting in an 89 percent response rate.

The content of the survey included 10 likert-scale items asking respondents to indicate their levels of agreement about things such as the clarity of training objectives, presenters' level of knowledge, usefulness of materials/handouts, relevance to participants' individual needs, and so forth (see Appendix A). A five-point scale was used to obtain agreement levels (i.e., ranging from strongly agree to strongly disagree). In addition to the closed-ended survey items, a total of seven open-ended items were included. The open-ended survey questions assessed what was most and least useful about the training, length of involvement, recent examples of having used what was learned, the capacity (or role in the RST) in which participants were engaged with STEP, and suggestions for improving future trainings. One item also was included to allow respondents to share any additional input or comments.

Results

Overall Findings. Overall, participants rated the training very positively. In fact, all attendees (100%) indicated that they would recommend the training to others involved with, or thinking of becoming involved with, the STEP initiative. Also, 100 percent of the survey respondents agreed that the training had been a valuable experience.

Ratings on Training Content. Similar to the overall positive findings, the vast majority of ratings on all items assessed were highly positive. As seen in Table 1, all (100%) of the training participants either *strongly agreed* or *agreed* that the objectives were clear, that the presenters were knowledgeable about the STEP initiative, that the presenters were easily understood, and that the training contributed to their ability to explain the benefits of residential treatment centers to others. Most agreed that the training materials/handouts were useful, that it was relevant to their needs, that it helped them better understand the background and purpose of STEP, and that it contributed to their ability to share research/data regarding residential treatment centers; however, for these items, between 12 and 38 percent of participants responded neutrally.

Table 1. Levels of Agreement Regarding Training Content

Item	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The objectives of the training were clear.	12%	88%	0%	0%	0%
The presenters were knowledgeable about the STEP initiative.	100%	0%	0%	0%	0%
The presenters communicated in a way that was easy to understand.	88%	12%	0%	0%	0%
The training materials/handouts were useful.	38%	50%	12%	0%	0%
The content of the training was relevant to my individual needs.	25%	38%	38%	0%	0%
The training helped me to better understand the history and purpose of STEP.	50%	38%	12%	0%	0%
The training contributed to my ability to share relevant research and data pertaining to residential treatment centers.	25%	63%	12%	0%	0%
The training contributed to my ability to effectively explain to others the benefits of residential treatment centers in their communities.	50%	50%	0%	0%	0%

Most Useful Aspects of Training. In order to ensure that future trainings meet the needs of STEP spokespersons, participants were asked to share what they felt was most useful to them about the training. A majority of participants pointed to the value in knowing the relevant data and statistics. Some of the comments included:

- “Information on where crime happens (i.e., it happens around alcohol outlets not treatment centers).”
- “Seeing the graphs and statistics showing the locations of the treatment facilities and the locations of bars/liquor outlets, and the related crime statistics.”
- “The mapping in the respective community as a tool.”
- “The data and current statistics.”
- “The data was current and accurate.”

Several others commented about the usefulness of discussions on how to best present the information about STEP to varying groups/officials. They noted, in particular, that it was helpful to learn to focus on the benefits of STEP and which pitfalls to steer clear of (e.g., defending the efficacy of treatment, etc.). A couple of respondents mentioned the usefulness of understanding existing community perceptions regarding residential treatment centers, including the many misperceptions held. One respondent mentioned the value of the comprehensive presentation on the STEP purpose and history.

Examples of Applying Information Learned During the Training. In order to understand whether and how trainees were using the information presented during the training, respondents were asked to provide recent examples of having applied information learned to outside activities. Two persons did not respond at all to this question. Of those who did, two indicated that they had not yet had the opportunity to apply lessons learned in the training to the field. Responses from the four persons who did share how/where they had applied the information were:

- “At a community meeting where some city officials were present, I was able to talk about the difference in licensed care vs. community care, in an informal manner, thanks to the training from STEP.”
- “In an effort to brief the board of directors of the agency I operate, I used data and techniques presented at the training. It was very useful and opened long-needed discussions on our efforts to expand our residential treatment center.”
- “I’ve just shared with community members/neighbors in a casual environment about the misperceptions that exist about residential treatment facilities within communities.”
- “I have provided a general overview of the project to co-workers.”

Least Useful Aspects of Training. About half of the respondents had little or nothing to say when asked what was least useful to them about the training, stating that “nothing was useless.” Of those who mentioned something, one individual stated, “The mapping was of little use for my communities.” Another mentioned that some of the terminology used could have been clearer so that the person could explain STEP more succinctly if questioned by an official regarding what it was about. Lastly, one person mentioned having been to numerous presentations on STEP, and therefore, had experienced some redundancy. This same individual, however, pointed out that, “For those who have not been involved as long, I think all of the information was relevant.”

Suggestions for Improvement. In an effort to develop future trainings that are maximally useful to participants, the survey asked respondents to provide any suggestions that they had to improve STEP related trainings. Half of the respondents offered no suggestions. Of those who did offer suggestions, the most frequently mentioned theme was to provide an opportunity during the training for participants to role-play and practice what they had learned. One person added that part of the role-playing should include handling resistance and some of the barriers that they likely would encounter. Another theme noted was for STEP to let participants know their expectations (i.e., answer the question “How does STEP want us to work?”). One participant suggested conducting feedback surveys closer to the actual training. Another suggested the development of a ‘lay person version’ of the training that is shorter and could be used to engage other community members in the initiative.

Length and Capacity of Involvement. In order to better understand participants’ role and involvement with STEP, they were asked to indicate how long they have been involved with STEP and to describe their role in the initiative. More than half of respondents reported having been involved with STEP for six months. Other answers ranged from two months to 36 months. When asked about their role with the initiative, most people reported that they participate in STEP meetings, offer suggestions, and/or work with city officials and present them with information. Some people act as community organizers, garnering community support for the initiative. A couple of respondents stated that they have not yet participated in any activities relating to the STEP initiative. Specific comments were:

- “As a community organizer and liaison for key people in my communities.”
- “I’m ready to help recruit spokespeople who are in recovery, but this need has not yet arisen.”
- Attending meetings and trainings, offering suggestions of community leaders to speak with.”
- “Key volunteer assisting in presenting STEP to city officials and community members.”
- “I have gone through the Spokesperson Training and presented with Deborah Parker to the Chair of the Ramona Planning Group which resulted in an invitation to present to the full Planning Group in February 2007.”
- “I have participated in program meetings and had an initial meeting with the Planning Director for Vista.”
- “Very little at this point. I was able to participate with Deborah for a presentation.”

Additional Comments. The final item on the survey welcomed any additional comments or input about the training. The majority of participants had no additional comments. One person added that the program is moving along nicely. Another mentioned that the information presented during the training was clear, factual, and easy to understand. Another respondent commented that the STEP initiative is a “... much needed addition to the entire CUP process with the added benefit of educating decision makers on the importance of placing such sites in their communities.”

Key Informant Interviews

Qualitative interviews with STEP project staff and other key informants were conducted near the end of the first year (i.e., in November and December 2006). The purpose of the interviews was to obtain perceptions, experiences, lessons learned, and information about moving forward during the second year of project implementation.

Participants and Interview Content

In addition to three STEP staff members, a total of 13 additional key informants were identified and invited to participate in the interviews to inform the evaluation; specifically, seven individuals from North County and six representatives from East County. Key informants from each region consisted of RST members, treatment providers considering a CUP application, and local government officials. Thus, a broad range of perspectives are reflected in the interview responses.

Of those identified to participate, all were contacted by the evaluators several times inviting them to take part in the interviews. All but one person in each region participated, resulting in a total of 14 completed interviews (3 staff interviews and 11 key informant interviews with regional representatives) The two individuals who did not participate from the East/North County regions were unable to do so due to unavailability/scheduling conflicts. Interviews with STEP staff took place in-person, while the interviews with all others were done via telephone. Each interview took between 45 to 90 minutes to complete.

The interview protocol developed for the evaluation consisted of 20 open-ended items, divided into several categories: (1) Background Information, (2) Role and Involvement with STEP, (3) Looking Ahead, and 4) Lessons Learned. One additional set of questions was asked only of

STEP Staff, most of which focused on progress toward meeting STEP goals and objectives. See Appendix B for a copy of the interview protocol.

Analyses of all completed interviews revealed that, for the most part, there were no substantial or systematic differences in response patterns. This was true for almost every item covered during the interviews. Where notable differences were observed (i.e., by region or between staff and regional key informants) they are pointed out specifically in the sections that follow. Unless otherwise noted, the findings from the interviews reflect the perspectives of staff and all key informants in North and East County.

Background Information

Respondents were first asked general questions regarding why a STEP initiative was needed, what the intended purpose(s) of the initiative were, and how much time it would take to achieve the intended purpose(s) of STEP.

Need for the Initiative. The three most frequent themes observed regarding the need for STEP centered around: (1) the need to establish a CUP addendum in the local government jurisdictions in San Diego County, (2) the difficulty getting treatment centers sited, and (3) the insufficiency of residential treatment centers to meet the demand. The next most common theme involved a need to raise awareness about the benefits of treatment centers in order to combat negative stereotypes. One individual also noted that the STEP initiative was necessary to support enhanced media attention on the issue of residential treatment center placement.

Purpose. The need for STEP within the county related to responses about the stated purposes of the initiative. Over half of all the responses indicated that the purpose of STEP is to establish a CUP Addendum for local government so that there is a systematic way to process applications across jurisdictions in San Diego County. Other responses mentioned changing perceptions to reduce the stigma associated with drug and alcohol treatment centers. Several interviewees felt that the purpose of STEP was to raise awareness about the benefits of treatment centers in order to combat negative stereotypes. Two persons also believed an important aspect and purpose of the STEP initiative is to increase the number of available treatment centers.

Timeframe for Achieving STEP's Purpose. The most frequent responses about how long it will take for STEP to reach its intended purposes were either "I don't know, it's hard to say" or "between 2 and 5 years." A few people thought that that STEP could achieve its intended purposes within about one year. One of the general themes noted among those who provided a specific timeframe was that part of how long it will take depends on "how quickly things get off the ground."

Role and Involvement with STEP

In order to put responses in additional context, several items were asked of interviewees to obtain a better sense of their history and motivation for becoming involved with the project. Interviewees also were asked a number of questions about the specific role, types of activities engaged in as a STEP advocate, and whether they had knowledge of any opposition to the STEP initiative.

Motivation to Participate. As far as when respondents first began participating in the project, a majority (over 70%) indicated that they had been involved with STEP since it was first funded in 2001, and then became involved again when funding returned in 2006. The remainder began participating with STEP for the first time in the spring of 2006. When asked about how they became involved with STEP, answers generally fell into one of three categories: (1) the individual was contacted by the Project Manager and invited to take part in the project, (2) the respondent was part of a group or agency already working on the issue, or (3) he or she was an employee of Futures Associates. As for what motivated them to participate, a number of reasons were provided. The most common answer involved the fact that STEP appeared to be an innovative concept that looked at the issue of treatment expansion as a policy/local government issue. Persons having prior experiences with and knowing the value of community based treatment centers was also frequently mentioned. Others shared that they became involved “in order to help” or for “personal reasons.”

Activities to Support the Project. In order to advance the project’s objectives, key informants from North and East County provided a number of examples of things they engage in order to support the initiative. Some of the more common activities included meeting with city officials, attending STEP meetings and offering their input, building community support, working to raise awareness about the project and related issues, and talking with other STEP advocates. Perhaps not surprisingly, STEP staff mentioned participating in activities similar to their community partners, but also have the responsibilities associated with: initiating meetings, conducting research, gathering pertinent data, brainstorming and strategizing, conducting proximity scans around existing residential treatment centers, developing and delivering presentations, meeting with stakeholders (e.g., local workgroups), conducting trainings, supporting RST members and others involved in each region, doing outreach and making contacts with influential persons, and providing general oversight for the project as a whole. Additionally, a number of North/East County key informants and STEP staff stated that they also have promoted the policy agenda by working directly with city officials, recovery centers, and planning groups specific to their regions (e.g., in Oceanside, Escondido, Ramona, Vista, and El Cajon). Some of the specific collaboratives, associations, and/or treatment centers mentioned by name were: North Inland Community Prevention Program (NICPP), Tri-City/North Coastal Prevention Collaborative, East County Community Change Project (Neighborhood Safety Workgroup), the El Cajon Collaborative, City of Vista’s Weed and Seed Program, Alcohol and Drug Service Providers Association (ADSPA), The Fellowship Center, and the McAllister Institute.

Opposition. As part of the interviews, respondents also were asked to reflect on whether they were aware of any direct opponents or critics of STEP. Respondents agreed that there were no direct or organized groups of opponents to STEP. Summarizing some of the somewhat indirect opposition, one interviewee pointed out, “There are not any critics to the project itself, but might be some opponents to the CUP addendum, yet they’re not opposed to the STEP initiative.” A few respondents noted the opposition experienced within the community of Oceanside (i.e., mobile home park residents/homeowners). In collaboration with The Fellowship Center, which is seeking to place a residential treatment center near a mobile home park, STEP advocates conducted several presentations to local residents in an effort to curb some of the resistance expressed.

Looking Ahead

Based on the activities engaged in and experiences that interviewees have had to date, questions were asked of them to obtain insights that could inform STEP efforts during its second implementation year. Respondents were asked about their future role in STEP, factors that will be necessary for the project's success, the types of things that still need to happen to facilitate enhanced community readiness for adopting the STEP objectives, what kinds of "success criteria" key informants hold, and whether they have any evidence of project impact at this point.

Role Moving Forward. All of the key informants indicated that they plan to continue their involvement with STEP in the year 2007, and will have a role in moving the initiative forward. The specific roles that the regional key informants intend to play include: serving as an advocate in their respective communities, working with their local planning departments, providing information to city councils/officials, and strategizing with other STEP LGPG and RST members. STEP staff intend to play similar roles, yet also will be involved in: ongoing project management and oversight; data collection and research; crafting media pieces; completing the proximity scan; documenting the continued implementation of the project; and pulling together all of the pieces necessary for designing a toolkit (i.e., for the replication of the STEP advocacy efforts for dissemination to other advocates in California).

Factors Necessary for Success. Key informants also were asked to look ahead and come up with a list of factors that they believed would be necessary for STEP to achieve its intended purposes. A variety of answers were provided, such as:

- ✓ Media advocacy, including the development of a media plan/campaign.
- ✓ Standardizing CUP Addendum processes across local governments and getting overall policy approval procedurally (rather than project-specific).
- ✓ The ability to demonstrate the positive impacts that treatment centers are having on a specific community through presentations and other means.
- ✓ Broad community education using STEP research and data to change community perceptions about residential treatment centers.
- ✓ Continuing to look into how the Americans with Disabilities Act Fair Housing Laws can help STEP meet its objectives.
- ✓ Additional meetings and communication with local governments.
- ✓ Documenting the process we have used and identifying lessons learned, especially for project replicability.

Community Readiness. In addition to general factors that are important to STEP's success, key informants were asked to comment on what things needed to still happen to help get their communities ready to adopt the purpose and objectives of STEP. More than half of respondents believed that a crucial element in preparing the community was effective presentations by STEP spokespersons to facilitate the acceptance of available data and research (e.g., the telephone survey of residents living within two miles of alcohol residential treatment centers conducted by the SDSU Social Science Research Labs and the survey assessing property values of houses near treatment centers conducted by a licensed real estate agent in the areas of Escondido, Chula Vista, Oceanside, Lemon Grove and San Diego). Other things mentioned by respondents that will assist in the "community readiness" process included keeping city officials/local government representatives informed about STEP, getting additional STEP advocates "on board", and possibly some type of external event such as heavy media coverage following the denial of a requested CUP by a reputable treatment center. STEP staff also indicated a need for

additional STEP Spokesperson trainings, concentrated efforts in East County, and media/news coverage of the project.

Indicators of Success. Respondents were asked how they would know whether STEP had achieved its intended outcomes and/or to list their own “success criteria” for the project. Responses fell into 1 of 4 categories. Below is the list of responses to this question along with the percentage of responses:

1. CUP Addendum added to a local government body (35%).
2. Seeing a new residential treatment center granted a CUP (30%).
3. Media coverage about STEP (20%).
4. People start listening to STEP spokespersons and their perceptions about treatment centers begin to change (15%).

Evidence of Impact. A majority (more than 60%) of respondents agreed that it was too early in the process to determine whether STEP was having its intended impact. Respondents who offered some evidence pointed to early signs that support the idea that STEP is beginning to demonstrate its presence and impact. The following are examples of evidence provided:

- ✓ Community members in East County are talking about STEP.
- ✓ Positive feedback from Escondido, Vista and Oceanside city government officials.

Lessons Learned

The STEP initiative officially began in May of 2006 and this “Lessons Learned” section draws from experiences during the initial eight months of project implementation. While it is still relatively early in the project’s implementation, it is important to draw on lessons learned because of the key objectives of STEP; namely, the development of a toolkit for dissemination to other providers and counties within California. Thus, questions were asked of interviewees regarding whether there were changes to STEP objectives since the project began, what the implementation process has been like, and what types of advice might be shared with others seeking to carry out a similar initiative. Key informants from North and East County also were asked two additional questions regarding their perceptions of STEP staff.

Modifications to Project Objectives. Interviewees for the most part agreed that the STEP objectives as they understood them have remained the same since they began participating with the project. A few people mentioned that the objectives remained the same but “they were working on a new element to the project [American with Disabilities Act fair housing law], and they seem to be adjusting to new information as it is retrieved.” One person was not sure if the objectives had remained the same since they began working on the initiative. Due to the fact that STEP staff has more involvement with the specific objectives as identified in the grant proposal and subsequent interim grant reports, their responses are discussed separately. Staff members agreed that there have been some adjustments to the initial objectives. These adjustments included shifting from focusing on three regional planning groups to two regional planning groups (renamed Regional STEP Teams), working with planning departments rather than city officials, and adding specific instructions about filling out CUP applications to the toolkit. In addition, 2-3 persons have been identified in the cities of Oceanside, Vista, San Marcos, Escondido, Poway and the North Inland unincorporated areas as members of “Local

Government Planning Groups (LGPG)” to advance the policy agenda in their respective local governments.

Implementation Process. Reflecting on the initiative’s progress thus far, interviewees were asked to comment on whether there was anything that could have made the initiative proceed more smoothly. While not everyone had suggestions, themes observed among those who offered ideas included:

- Providing more coordination and clarity regarding how exactly we should be working to advance the CUP Addendum.
- Making the CUP Addendum more front and center.
- Working more in East County and consider having East County learn from activities in North County.
- Beginning to identify spokespersons in East County.
- Conducting more forward planning related to meetings so that more people could attend.
- Involving decision-makers earlier in the process, rather than coming to them after-the-fact.
- Not having the break in funding would have helped.

Advice for Others Desiring to Implement a Similar Initiative. Respondents provided the following advice when asked for suggestions to assist the implementation of a similar initiative in another city/county/region. The most frequently occurring piece of advice was to “use the relevant data and research” in the community to present the residential treatment center expansion issue objectively; some interviewees noted specifically the telephone survey of residents living near treatment centers and/or the property values survey. A few advised others to emphasize to local government officials that a CUP Addendum streamlines the treatment center CUP request process and makes their jobs easier. Although each was mentioned only once, several other pieces of advice that could be useful to those choosing to take on a similar initiative were:

- ✓ Spend time building relationships in the community.
- ✓ Do community-based assessment work to know what people currently think and to gauge their readiness, and go from there.
- ✓ Involve city planning departments very early in the project’s planning process.
- ✓ Keep the focus on community health and safety, and remind people that the CUP Addendum is a way to promote community well being.
- ✓ If possible, having an environmental prevention effort already underway within the county (city or region) makes it easier to garner support and find advocates for a similar initiative.

Perceptions of STEP Staff. Two questions, asked only of North and East County Key informants, were included to obtain a sense of STEP staff’s leadership qualities, as well as anything that was needed from them at this point in the project. Specifically, key informants were asked: (1) What do you need from STEP staff to effectively carry out your work relative to STEP? and (2) What has been most effective about the STEP staff thus far?

Relative to what was needed, notable differences were found among the responses from North County key informants in comparison to their East County counterparts. In North County, 5 of 6 respondents stated that they “needed nothing” from STEP staff to carry out their work. One

person mentioned: “More consistent communication and updates about the progress of the initiative.” In East County, 5 of 5 interviewees specified what they needed from STEP staff in order to carry out their duties:

- ✓ “Organization and coordination.”
- ✓ “I need good communication. Explain what you are looking for and what my role should be and I will assist in any way I can.”
- ✓ “Tell us when opportunities are developing so we can move our people into it to utilize our assistance.”
- ✓ “Continue patience. Garner more participation. Bring us more research.”
- ✓ “Just to continue to be open and I will provide help and advice whenever needed.”

Key informants also were asked to indicate what they deemed to be most effective about STEP staff and their leadership thus far in the project. A number of the respondents pointed to STEP staff’s levels of knowledge and ways in which they present information. Several commented on how sensitive they are to the environment that everyone is operating in. Others commented about the fact that STEP staff is open, creative, very informed, and that staff appreciates the uniqueness of each community. A number of respondents also commented specifically about the skills and qualities of Project Manager, Deborah Parker:

- “Deborah Parker is very knowledgeable, well-connected, tackles the issue in a variety of ways, is a valuable asset, enthusiastic and contagious.”
- “Deborah’s manner. She talks with you, not at you.”
- “Deborah is very committed, passionate and quick to grasp new ideas and approaches. Every conversation I have with her has been very valuable with giving and receiving information, and I appreciate that.”
- “Charisma that draws people to Deborah, including her history with the issue, connections in the county, reputation, and ability to articulate the project.”

Other comments about STEP staff’s qualities and leadership abilities included:

- “They are extremely knowledgeable, great assets to the project. They take time to look at all of the issues, they are enthusiastic, positive and work hard to improve the outcomes of this project.”
- “Their willingness to participate in our process already in place while working with us, and they are not trying to reinvent the wheel.”
- “Their intelligence, leadership, communication skills, facts and proof, out-of-the-box thinking, and they are proactive.”
- “They have a willingness to stay open-minded as the information comes their way. Clear and focused presentations that are well articulated.”
- “Earl and Deborah are a nice balance, they are a good team.”

Obstacles/Challenges. STEP staff was asked two questions to identify any challenges or obstacles that the project had encountered during its first year, and to find out what attempts were made to respond to them. Staff mentioned a few challenges, such as the desire to have greater access to really good data mapping, having time to really focus on the media component of the project, and the best ways to respond to natural (smaller) course diversions while continuing to move forward in a positive way. None of the obstacles were perceived as insurmountable. In fact, responses from staff about how these types of things are dealt with included: seeking additional resources, handling each of the issues as they arise, trying different

strategies, and knowing when to continue vs. when to stop and try something else that could work.

Year Two Areas of Focus. One additional question asked only of staff centered on what their key areas of focus would be during the next 12 months. Although staff was aware that media advocacy was critical, they also realized that the planned media approaches outlined in the first year were no doubt rendered moot by the implications of Fair Housing Law and case law. Once those changes are made in the beginning of Year Two, the media campaign also will be redesigned. Other areas of focus will be: encouraging the LGPGs to speak with their local government representatives, completing the proximity scan and working on the toolkit development.

SUMMARY

At the completion of its first eight months of implementation (i.e., as of December 2006), the STEP initiative is on track in meeting its goals and objectives. A number of significant accomplishments have been made, including the establishment of viable Regional STEP Teams committed to the project. Additionally, a comprehensive training, based on an inventory of identified needs, was held to further develop RST spokespersons in the North County region, and two additional trainings are planned for early 2007 (i.e., one in East County and an additional training in North County). STEP staff developed a very comprehensive Briefing Book and supplemental materials. This information was provided to spokespersons to serve as a reference for their community advocacy efforts and when meeting with policymakers or influential government officials. STEP staff and members of the RSTs also worked on creating and defining a policy agenda tailored to each region. A significant amount of time also was devoted to pertinent research and data gathering during the first STEP implementation year, the findings of which have been shared with STEP community partners.

STEP development in East County is not as far along as in North County due to two factors. First, the original assumption that the El Cajon Collaborative would act as the RST turned out not to be practical for the entire East County. It took a few months working with the East County ATOD group to get their agreement to act as that body. Second, all four East County cities have collaboratives, unlike North County. Anyone seeking to advance a health policy recommendation needs to work through those collaboratives, something STEP staff were unaware of. Therefore, presentations had to be scheduled with those collaboratives before work could begin in those areas.

In addition to these more tangible activities and progress made toward the achievement of project goals and objectives, a tremendous strength of the project (which the evaluators have observed and heard firsthand) is the levels of dedication, passion and willingness to move the project forward among all involved. This is evident not only among STEP staff but also among the RSTs and LGPGs. The STEP initiative is comprised of highly informed, motivated, and well-intended individuals who work very well together. Moreover, most of those involved in the current STEP initiative also were participating several years ago. It is noteworthy that even with a two-year gap in funding, these individuals have chosen to participate again. All of those involved in STEP appear to have a clear sense of the project's purpose and objectives, and made useful and concrete suggestions about strategies for moving forward during the year ahead. Feedback from RST members, as well as from treatment providers and local government representatives, is very positive toward STEP staff and its leadership. One final comment on the individuals involved, which is based on evaluative data collected through

participation in numerous meetings, conversations with project staff and the series of key informant interviews conducted, is that all STEP advocates/spokespersons appear very clear on what aspects of their strategies appear to be working or not working. Furthermore, they are able to make course corrections and do what is necessary (even if it means changing direction) to increase the likelihood of overall project success.

The first training held in North County was rated very positively. According to survey results following the training, every attendee perceived the training to have been a valuable experience and would recommend attending a similar training to those currently participating in (or thinking of becoming involved with) the STEP initiative. A number of training participants commented on specific components of the training that were most useful, some of which included, seeing the relevant data and statistics, learning effective talking points, gaining a better understanding of myths and misperceptions, knowing the types of issues to avoid in effectively communicating about the project, and obtaining tips on presenting to or communicating with various groups (city officials, residents, etc.). Perhaps most importantly, a number of training participants reported having used what was learned to speak with city officials, community members, co-workers, agency board of directors, and others about treatment centers, current misperceptions, and the importance of STEP in ways they could not prior to attending the STEP training.

Although most members of the STEP initiative agreed that it is too early to say definitively whether STEP is having its intended impact, many were able to point to signs of early progress. A number of persons, during the key informant interviews, made comments such as “Things are definitely moving forward” and “We’ve certainly made forward steps”. Examples of project success so far included the number of community members talking about the work of STEP, positive feedback from several representatives from city governments, and promising information that appears applicable to STEP in the Fair Housing Amendment. A couple of individuals also pointed out that, at the very least, they have begun to develop a data-driven model for policy advancement regarding licensed residential treatment programs that is intended to be shared with others.

Year Two Recommendations

The following are suggested to facilitate the achievement of stated goals, objectives and intended outcomes, and are based on information gleaned through the varied types of evaluation strategies employed as part of the year one formative evaluation of STEP.

- **Conduct a planning session in each region with RST members and LGPG representatives (early 2007).**

STEP holds regular meetings with RST members to share emerging issues and lessons learned, and to keep those involved in the initiative up to date. It is recommended that one of the first meetings should be set aside for regionally focused strategic planning activities (or perhaps even city focused in East County). Some of the things that could be discussed and decided upon are priorities for each quarter, with timelines and assigned responsibilities. It likely will be very beneficial, given the numerous tasks that STEP RSTs can and do engage in, to determine what needs to happen first (e.g., meetings or presentations, additional data gathering, etc.). It also would be helpful to enroll a “champion” for each larger task. That individual would be responsible for the remainder of the project for keeping the rest of the RST abreast of progress and communicating what types of assistance is needed from other regional team members. In effect, it is suggested that setting aside several hours at the start of the

second project year to divide up tasks for 2007 and begin developing the necessary steps for accomplishing them, will have long-term effects. It is believed that doing this type of planning in collaboration with the RSTs will produce “more coordination and clarity regarding how exactly we should be working to advance the CUP Addendum” that was asked for during the key informant interviews. Meeting dates for the remainder of the year also can be determined and calendared, along with markers or milestones for each task.

➤ **Spend additional time and energy focused on East County (early 2007).**

STEP has admittedly been more heavily focused with activities and representatives of the North County RST during the first project year. While things have evolved perhaps differently than first anticipated in East County, early 2007 would be an ideal time to assess where things are at in East County and what, if anything, needs to happen to maximize the willingness of people who want to move STEP forward there. Through the key informant interviews, we learned that all of the East County STEP advocates are more than willing to do what is necessary to move STEP forward and have asked for greater levels of organization, coordination, communication, and more time explaining to East County RST members what is needed from them and/or what their role should be.

➤ **Use participant feedback to shape future trainings (early 2007 and ongoing).**

Overall, the North County Spokesperson training was very effective and rated highly. A number of suggestions are available, that if applied to future trainings, could serve to make the training even more applicable and useful to current and potentially untapped STEP spokespersons. The suggestions stem from observations made during the actual training (i.e., according to evaluator documented process notes) and the online follow-up survey.

One of the suggestions made verbally by participants at the end of the training, as recorded through evaluator documented observations, was that time for role playing and practicing the “talking points” be built into the training agenda. Also, several trainees felt it would be a good idea for future trainings to include a more in-depth review of the CUP Addendum. Others mentioned that spending time reviewing the CUP process from cities (i.e., within each of the North and East County regions) would be helpful. Several suggestions also were offered especially for the piece on the proximity scan. Trainees felt that it would be helpful to answer the following questions about the proximity scan in greater detail: Why is it so important to this project? What are the objectives we’re trying to accomplish with the proximity scan? How will the findings be used? Will the findings be part of media pieces? Does this overlap with ARJIS?

Data collected through the training follow-up survey suggest that it would be helpful to begin future trainings asking participants what they would like to get out of the training. Listing responses on the board could serve as a useful guide in ensuring that questions get answered, even if not everything can be covered in one session. STEP staff will know where people are at and have a better sense of what people’s needs are to ensure that what is covered meets individual/specific participant needs. Other suggestions were to be sure to communicate the relevance of the mapping piece very clearly, and to build into the training the expectations that STEP has of its advocates. Based on feedback from the survey, future trainings will include a paper feedback questionnaire at the end of the training rather than waiting until some time has elapsed.

➤ **Convene the North and East County RSTs (late 2007).**

Although the two RSTs may currently be in different places with unique regionally specific priorities, it is recommended that the two groups be convened at least once. Likely, bringing the two groups together would likely be most effective if done in late summer or early fall of 2007. This way both regions will have had a number of months to work heavily focused in their own respective regions. Coming together would be beneficial for several reasons: (1) to share lessons learned, particularly about what “doesn’t work”, (2) to share successes after having been involved in the project for about 18 months in the current funded initiative, (3) to coordinate on any media pieces remaining to be developed, (4) to identify any opportunities to leverage one another’s work, and (5) to inform the development of the toolkit. Given that the work of STEP, including all of the tools, media pieces, etc are to be packaged for replication in a toolkit, bringing the two groups together would be a useful supplemental forum for capturing what occurred throughout the project. Information shared back and forth between the two regions also would be very informative for the evaluation.

CONCLUSION

As mentioned, STEP is on track toward accomplishing its objectives and intended outcomes. Critical areas of focus over the coming year will be the development and implementation of an effective media campaign, working strategically in each region, integrating the necessary changes to incorporate Fair Housing implications, and staying focused despite the evolving and organic nature of such a pioneer initiative. No apparent lack exists in expertise, commitment, or willingness to “do what it takes” among all those involved in the project, which is clearly an important strength of the project given its reliance on community based advocates. Although STEP is intended to be highly collaborative in structure, the evaluators suggest that additional keys to effective continued implementation of the project include clear and consistent communication from staff to the RSTs and LGPG representatives regarding next steps, timelines, and even to some extent, direction.

Appendix A. Spokesperson Training Follow-up Survey

Solutions for Treatment Expansion Project (STEP) North County Spokesperson Training Participant Follow-up Survey

Thank you again for attending the recent STEP Spokesperson Training held at the Vista Library. Your participation and input is critical to the ongoing success of the STEP Initiative. In order to determine how well the training met your needs and to improve future trainings, we ask that you take a few minutes to complete the following brief survey.

Please note that this survey is one component of an ongoing comprehensive evaluation of the STEP initiative. The evaluation is being carried out by EVALCORP, an independent research and evaluation consulting firm contracted by Futures Associates. All of your responses will be kept confidential and reported only in aggregate form to STEP staff. We appreciate your willingness to answer all of the items as honestly as possible. Thank you in advance for your time and feedback -- it is greatly appreciated.

Closed-ended Survey Items	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The objectives of the training were clear.					
The presenters were knowledgeable about the STEP initiative.					
The presenters communicated in a way that was easy to understand.					
The training materials/handouts were useful.					
The content of the training was relevant to my individual needs.					
The training helped me to better understand the history and purpose of STEP.					
The training contributed to my ability to share relevant research and data pertaining to residential treatment centers.					
The training contributed to my ability to effectively explain to others the benefits of residential treatment centers in their communities.					
I would recommend this training to others involved with (or thinking of becoming involved with) the STEP initiative.					
Overall, the training was a valuable experience.					

Open-ended Survey Items

1. What was most useful to you about the training?
2. Please provide any recent examples of your having used/applied information that you learned during the training:
3. What, if anything, was least useful to you about the training?
4. What suggestions do you have to improve future STEP related trainings?
5. About how long have you been participating in the STEP initiative (number of months)?
6. In what capacity have you participated in STEP?
7. We welcome any additional input or comments:

Appendix B. Key Informant Interview Protocol

Overview and Informed Consent

[THE FOLLOWING IS TO BE READ AT THE START OF EACH INTERVIEW]

Deborah Parker, the Project Coordinator of the Solutions for Treatment Expansion (STEP) Project, recommended that we speak with you to obtain your perceptions and experiences regarding the STEP project being conducted in the North and East County regions in San Diego County.

The interviews are one component of an overall evaluation of the STEP initiative, a project funded through the California Endowment. The evaluation is being carried out by EVALCORP Research & Consulting, an independent applied research and evaluation firm contracted by Futures Associates to measure the implementation and resulting outcomes of the STEP initiative.

The purpose of the interviews are:

- (1) To document the implementation of the initiative thus far, and
- (2) To learn from those most involved with STEP about their experiences and lessons learned to date.

Please know that your participation is voluntary. Also – all of the information collected through the interviews will be reported in aggregate form – that is, nothing you say will be quoted or attributed to you without your express permission.

The interview is expected to take about 45 minutes to an hour to complete.

Thank you in advance for your participation -- your time and input are greatly appreciated.

Do you have any questions of me before we begin?

Proceed to begin interview →

STEP Initiative Process Evaluation - Key Informant Interview Protocol

Date: _____ Interviewer Initials: _____
Respondent: _____ Agency: _____
Title: _____ Department: _____

Region: North/North Inland East County STEP staff Other _____

Member of: North/North Inland Regional STEP Team East County Regional STEP Team

General role in STEP Initiative: _____

I. Background Information

1. From your perspective, why was there a need for the STEP initiative?
2. As you understand it, what is/are the intended purpose(s) of the STEP initiative?
3. How much time do you think it will take to achieve that/those purpose(s)?

II. Role and Involvement with the STEP Initiative

1. When did you first start participating in STEP?
2. How did you first become involved with the STEP initiative?
3. What motivated you to participate/get involved in STEP?
4. What are some specific examples of the types of things you do in support of the STEP initiative? (e.g., attend meetings, talk with community members, advocate with local government, etc.)
5. Which individuals/groups/agencies do you work with directly to promote the objectives of the STEP initiative? (e.g., local government, law enforcement, community orgs, media, treatment, etc.)
6. Who, or which agencies/groups, do you consider to be the strongest allies of the STEP initiative?
7. Are there any critics or opponents of STEP that you're aware of? If yes, who? Why are they opposed?

III. Looking Ahead

1. Looking ahead, what factors/criteria do you believe will be necessary for the STEP initiative to be effective (i.e., achieve its intended purpose)?
2. Will you have a role in these factors? If so, what will your role be?
3. How will you know that the STEP initiative is working or has made an impact (i.e., what are your "indicators of success" for STEP)?
4. What types of things still need to happen in order to help get the community "ready" to adopt the objectives of the STEP initiative?

IV. Lessons Learned

1. As you understand it/them, have the STEP objectives remained the same since you began participating in this initiative?

2. Is there anything you feel that could have made the STEP initiative process proceed more smoothly thus far? (*probe: need for greater resources, additional training, more coordination/cooperation, too much opposition, things were tried that didn't work, etc.*)
3. What advice would you give to another city/county/region to help them implement a similar initiative?
4. Do you have any evidence at this time that the STEP initiative is having its intended outcome/impact? Please explain.

[Q5 & Q6 below ask only of Regional STEP Teams, not STEP staff]

5. What has been most effective about the STEP leadership (Futures Associates staff) thus far?
6. What do you need from STEP leadership/Futures Associates staff to effectively carry out your work relative to STEP?

STEP Staff Addendum [FOR STEP STAFF ONLY]

1. How have the objectives/goals of the STEP initiative changed since project implementation began in February 2006? Why were these changes necessary?
2. What obstacles/challenges have been experienced thus far in carrying out the initiative?
3. How were these obstacles/challenges overcome or what attempts were made to address them?
4. What will be your key areas of focus (what types of things will you be working on) during the next 12 months?

Please comment on progress/achievement regarding each of the following:

Note: these were pulled directly from the "STEP Goals, Objectives, Activities & Tasks Table"

A. Create & define a policy agenda tailored to each region	July-August	2006
B. Develop a training needs inventory and STEP briefing book	June	2006
C. Train people in each local government	Aug-October	2006
D. Develop a strategic plan for policy promotion in each region/Incorporate new & updated data (into strategic plan)	June	2006
E. Design a media plan for each region (inventory of STEP-Related issues, refine key message, promote media)	June	2006