

# Applying Science. Advancing Practice.

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## Understanding the Interactive Systems Framework for Dissemination and Implementation

State public health agencies and sexual assault coalitions have developed prevention plans with goals and objectives to prevent first time perpetration of sexual assault as part of the Rape Prevention Education (RPE) program. These plans were intended to prepare the way for successful and sustainable implementation of evidence-based prevention programs. However, very few of these evidence-based programs exist for the prevention of sexual violence. This lag in the development of evidence-based programs continues to challenge both sexual violence prevention researchers and practitioners.

The public health approach to violence prevention (Figure 1) uses four steps to systematically define the problem, identify risk and protective factors, develop and test prevention strategies, and finally, ensure widespread adoption. This model assumes that the tested interventions will be used in the field, but it provides very little information on how this should be accomplished.

The Interactive Systems Framework (ISF) for Dissemination and Implementation was developed to address the “how to” gap that exists between scientifically determining what works and moving that knowledge into the field for the benefit of the public.

Those who work in the various fields of violence prevention are motivated to develop, evaluate, disseminate, and implement effective strategies for preventing violence with the goal of building a safer, healthier society. Ideally we would select programs, practices, or policies that have been proven to be effective—meaning there is strong, scientific evidence that they work.

### Applying Science. Advancing Practice.

**What is ASAP?** *Applying Science. Advancing Practice.* (ASAP) is a series of informational briefs created by CDC’s Division of Violence Prevention to help apply scientific knowledge to the practice of primary prevention of violence.

**Who is it for?** This series of ASAPs are written for state health departments and statewide sexual assault coalitions, the current support system for rape prevention education activities. Sharing with other violence prevention partners is encouraged.

**How will it help?** ASAP offers specialized, topic-specific information necessary for successful, sustainable violence prevention efforts. This particular series on sexual violence prevention is intended to provide information and resources for RPE grantees who provide prevention support to community-based prevention education activities.

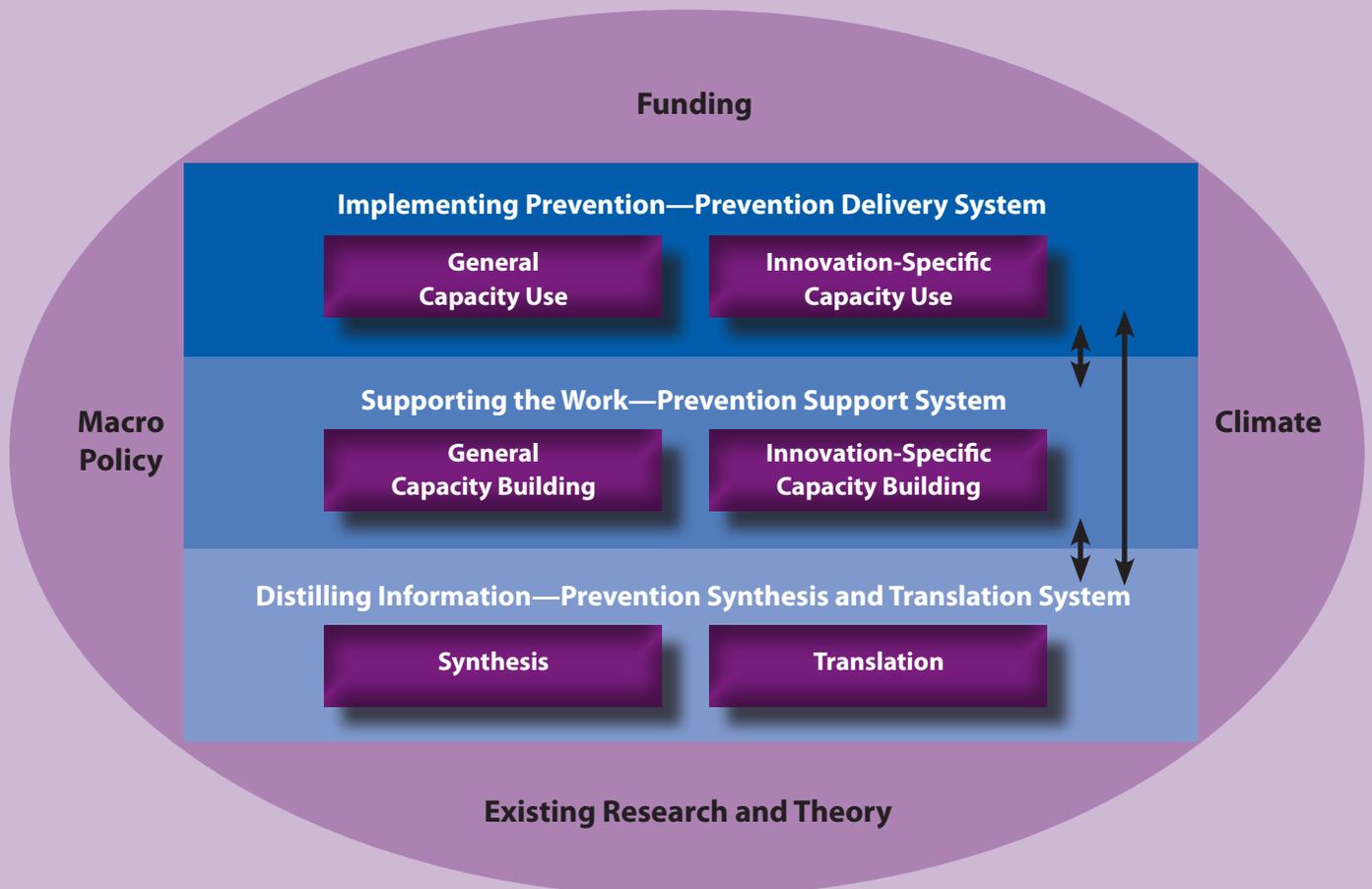
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Figure 1: The Public Health Approach to Violence Prevention and the ISF



The Interactive Systems Framework (ISF) for Dissemination and Implementation provides a framework for understanding how to address the gap between the third and fourth stages of the public health approach to violence prevention, often referred to as the research to practice gap.

Figure 2: The Interactive Systems Framework for Dissemination and Implementation



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The ISF was developed specifically with the fields of youth violence and child maltreatment prevention in mind, where much evidence has been gathered over the past several decades about what works and does not work. Despite this growing evidence, wide-spread use of these effective strategies has been less than ideal. The ISF resolves this by addressing some of these questions:

- How do we achieve the widespread use of effective practices, policies, and programs to prevent violence?
- What infrastructures or systems are necessary to ensure that dissemination and implementation are carried out successfully?
- How do organizations and practitioners build the capacity necessary to bring effective violence prevention strategies to scale community wide?

One advantage the ISF offers to the sexual violence prevention field is a well thought out, underlying process for how to move science to practice. By spending the time understanding these underlying processes now, the field will be better prepared to more rapidly move effective programs, practices, or policies into the hands of communities as they become available later.

## A Closer Look at the Interactive Systems Framework

Figure 2 shows the ISF and how it connects three systems to work together for successful dissemination and implementation of prevention innovations. The term “system” is used broadly to describe a set of activities that accomplish one of the three identified functions that make dissemination and implementation possible. These systems are:

### Prevention Synthesis and Translation System

Here scientific knowledge is distilled into understandable and actionable information. Research institutions, universities, and the Division of Violence Prevention (DVP) at CDC are all institutional examples of this system.

### Prevention Support System

This system supports the work of the other two systems through building capacity for carrying out prevention activities. Agencies like CDC, state health departments, or state sexual assault coalitions are often in the role of prevention support for grantees or local programs.

### Prevention Delivery System

This is where innovations are actually implemented or where “the rubber meets the road.” Community-based organizations often function in the role of the prevention delivery system.

As depicted in figure 2, these three systems work together and are embedded within an underlying context that influences decision-making and adoption of prevention strategies. These underlying conditions include: legislation that supports funding for sexual assault prevention, the best available theory and research related to the prevention of sexual assault, the community and/or organizational context in which sexual assault strategies are implemented and macro-level policy factors such as state or federal level budget constraints or legislative changes. These underlying considerations are graphically displayed as the climate in which the three systems exist, and all of these have an impact on successful dissemination and implementation. Each system within the ISF also builds upon or influences the functions of the other two systems. These relationships and influences are represented by the arrows that connect the systems to each other.

***“If we keep doing what we are doing, we will keep getting what we are getting.”***

***–Anonymous***

For sexual violence prevention, where the research evidence is scant and still being built, the ISF can be especially helpful. What the ISF can do is take what we do know about effective prevention principles and processes and distill that knowledge into understandable concepts through the Prevention Synthesis and Translation System. The Prevention Support System builds the capacity of local organizations to put these prevention principles and processes into practice. The Prevention Delivery System serves to strengthen and deliver prevention principles and processes on the ground.

To illustrate how the ISF would function in the prevention of sexual violence, consider the following examples of activities that may occur within each system:

## Distill (PSTS)

- Review and condense scientific literature on risk and protective factors for sexual violence.
- Translate research findings about risk and protective factors for sexual violence into user friendly language.

## Support (PSS)

- Build the capacity of local organizations to develop strong leaders, understand how to use data, or form long-lasting partnerships.
- Provide training and technical assistance about specific prevention strategies.

## Delivery (PDS)

- Implement sexual violence prevention strategies across a community.
- Support the spread and uptake of effective sexual violence prevention principles.
- Monitor and evaluate programmatic activities to further improve the program.

While the ISF includes activities or functions that are carried out by people in many different kinds of roles and within three distinct systems, these systems are working together to distill, support, and deliver prevention strategies. By understanding the functions of these three systems and how they work together, organizations, stakeholders, funders, and practitioners can communicate better and work together to disseminate and more effectively implement prevention strategies.

You may have noticed that in the example above, much of the RPE grantee roles and/or functions showed up in the Prevention Support System. This makes sense because as an RPE grantee, the role of state public health agencies and state-level sexual assault coalitions is to provide support for local programs to ensure they can implement rape prevention education at the community level. These support activities can be seen as an important link between taking scientifically derived information and putting it into practice.

Future editions of ASAP will focus on the PSS in more detail. Specifically, they will describe how to understand the capacities necessary for individuals and organizations (which are linked through systems) to prevent sexual violence and build healthier and safer communities.

## Key Terms

The following key terms are found throughout this brief.

**Capacity:** The ability, skills, and motivations to conduct and sustain prevention work at the individual, organizational, and systems level. The ISF views capacity as carrying out important functions in two distinct ways:

- **General Capacity** – a capacity to implement or improve any programmatic strategy or activity.
- **Innovation Specific Capacity** – a capacity needed to plan, implement, evaluate and sustain primary prevention strategies.

**Dissemination:** The intentional, targeted spreading of an innovation from the originators to the intended users that result in a targeted and facilitated process of distributing information and materials to organizations and individuals who want and can use them to improve health.

**Implementation:** A purposeful set of specific activities that result in individual or organizational use of an innovation.

**Innovation:** New prevention knowledge or information - product, practice, program, policy, idea, research findings, or results.

**Strategy:** An approach to address a problem such as the promotion of respectful relationships to reduce interpersonal violence.

**Synthesis:** A process for obtaining and summarizing scientifically derived information, including evidence of effectiveness (risk and protective factors, core elements, and key features, etc.).

**Translation:** The process of converting scientific and technically complex research into everyday language and applicable/actionable concepts in the practice setting.

## More Information

More information about the ISF can be found in the following article at [www.cdc.gov/ViolencePrevention/sexualviolence/translation.html](http://www.cdc.gov/ViolencePrevention/sexualviolence/translation.html):

Wandersman, A., Duffy, J., Flaspohr, P., Noonan, R., Lubell, K., Stillman, L., et al. (2008). Bridging the gap between prevention research and practice: The Interactive Systems Framework for Dissemination and Implementation. *American Journal of Community Psychology*, 41, 3-4.

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