

***Building Prevention Infrastructure to Reduce Delinquency, Violence and Substance Use:
Communities that Care***

Due to the success of concerted investments in child health, more children are surviving into adolescence and the burden of disease has shifted to non-communicable diseases often produced by behavioral health problems including tobacco, alcohol and other drug use, violence, risky sexual behavior, unsafe driving and mental health problems. These behavioral health problems, often begun in adolescence, increase risk for illness and death throughout adulthood. Over the last 40 years, longitudinal studies have identified potential causes of these behavior problems, often called risk and protective factors. Prevention scientists have designed and rigorously tested preventive interventions to reduce known risk factors and enhance protection. These studies have identified effective preventive interventions. Widespread installation of tested and effective preventive interventions could have significant public health impact. Despite the progress of prevention science, tested, effective prevention programs are not widely implemented in communities. If the discoveries of prevention science are to impact behavioral health in the twenty-first century, communities need to build prevention infrastructure across multiple sectors to take full advantage of these recent developments.

This presentation will describe why community coalitions might be effective way to build prevention infrastructure, and which community-coalition approaches have been tested and found to be effective. One of these approaches to building prevention infrastructure, Communities that Care (CTC), has been developed over the past 20 years through its partnership with communities, states and the federal government. This approach builds prevention infrastructure to guide communities to choose, install, and monitor tested and effective preventive interventions to address elevated risks and suppressed protective factors affecting youth. CTC process and outcomes from a 24 community randomized trial will be described. Web streamed training in CTC is available through the University of Washington's Center for CTC (communitiesthatcare.net).