A Brief Sampling of Successful Applications since the Community Readiness Model Development in 1995

Drug Use

Over 150 rural and ethnic communities have utilized this model to develop prevention strategies addressing substance use appropriate to their cultures and community values and norms.

Example: Early in development of the model, our trainers were asked to train community groups in addressing solvent abuse on native reserves in Canada. Out of this training, solvent action teams were developed for each of the provinces in Canada to address this critical community issue. These solvent action teams are currently supported by the provinces and are an ongoing part of the Canadian response to substance use problems.

Alcohol Use

Example: In a frontier state, in a community where there was extensive alcohol abuse problems among adults and youth, one woman utilized the model to develop community support to reduce public alcohol use and violence related to alcohol abuse. After four years of efforts by this one woman and others who joined her, over one fourth of the adults in the community had entered treatment and it was voted into bylaws of the community government that it was not allowable to have persons in positions of authority who were chronic alcohol abusers.

Child Abuse

Example: The National Children's Alliance used the model for development of cultural competency within the organization. They subsequently recommended utilization of the model to their regional child advocacy centers for addressing child abuse. These regional centers disseminated the model to local advocacy centers.

Head Injury

Example: A research project aimed at reducing head injuries from farming and recreational pursuits in rural communities in Colorado utilized the model to identify beginning readiness level and target interventions appropriately. Over a one year period, efforts in all participating communities increased in their level of readiness and awareness has increased significantly.

Intimate Partner Violence

- Example: One community in a southern state had significant problems with intimate partner violence, but the problems were not being addressed by law enforcement or any other agency in a constructive manner. Two women learned about and utilized the model to garner support within the community to actively address the issue. A direct result of their efforts was a change in the chief elected law enforcement official to one more supportive of domestic violence intervention who created a domestic violence advocate position within his department. The local newspaper is also publishing the names of domestic violence offenders and resources available for victims and perpetrators. The community now has an annual domestic violence conference. It took this grassroots group motivated by two individuals two years to move the readiness of this community from denial to preparation. The community is currently at a stabilization stage and still moving forward.
- Example: The Centers for Disease Control and Prevention Injury Prevention asked us to train their Domestic Violence Community Response teams from all across the US in utilizing the Community Readiness Model to carry out their community work.

• Environmental Trauma

Example: A western Native American tribe was immobilized by grief. There were widespread health problems and fatalities associated with cancer resulting from radiation contamination of their tribal lands from testing of atomic bombs. Fifteen year old girls were dying from breast cancer. As a result of efforts following the model introduction, they initiated mobile mammogram vans at high schools for early detection, pamphlets of early symptoms of cancer; efforts to get the groundwater cleaned to prevent future problems and restore the traditional plants and animals to the reservation. These efforts were written up in a national magazine article.

HIV / AIDS

HIV/AIDS is a very emotional topic as well. The Tri Ethnic Center has utilized the Community Readiness model to examine attitudes about HIV/AIDS prevention in forty communities and across four ethnicities. The project gained a great deal of valuable knowledge about community perception and ideas for early prevention.

• Transportation Issues

- Example: A national transportation group utilized the model in developing plans for building highways and bridges on tribal lands. This application is still in the evaluation stages.
- Example: We are currently working with the transportation engineers and the planning and development staff of a city to help them with their plans to reduce the amount of traffic on streets in the city. This is a western city with little in the way of public transportation, so this is a difficult issue. They are considering going to voters for funding for long range plans and are interested in using the model, but prior to that, they are evaluating the possibility of doing a Community Readiness assessment to be sure that the community is ready for this type of initiative since they cannot go to the voters again with such a thing for some time.

Cultural Competency

Example: This was a very unique application of the model because it was the first time that it was applied within an organization. The community was defined as the employees within the organization and the goal was to make the organization more culturally competent. However, the administration realized that because cultural competency is a very sensitive topic and has a high potential for touching those emotional chords in people, that they had to proceed carefully. They believed that the model gave them the structure that they needed to move forward and gain and maintain the support of the employees. They applied the model, utilized the workshop to develop strategies based on their readiness level and have developed many creative ideas to improve the level of cultural competency. They highly recommend that other agencies use the model for similar projects.

• Environmental / Weather Conditions

Foresters, climatologists, and environmental consultants are applying the model in working with communities on a variety of environmental issues.

Example: A climatologist is proposing to use the model to help communities cope with the effects of major heat waves on health, particularly among the elderly.

Animal Control Issues

Example: A group in Georgia is funded by the Centers for Disease Control to utilize the Community Readiness Model to reduce injuries from dog bites. They are using the model to develop community support for animal control and devise strategies acceptable and compatible for the culture of their community.

Suicide

Example: Eight months ago, a native Alaskan woman came to our Center looking for help. She had heard of the model at a conference she attended in Colorado and left the conference to come to the Center to get more information. Their village of 600 had had 18 suicides in the past six months. While she was visiting with the team at the Center, she was unaware that her own nephew committed suicide that afternoon. She desperately wanted someone from the Center to come to their village and train them on how to use the model to stop the suicides. We were able to locate travel funding from a CDC project at CSU and went almost immediately to their village. We were expecting approximately 15-20 people from the village to attend the training, if that many, given the short amount of time for preparation. We were overwhelmed when we stepped into the community center and there were almost 100 Native people, young and old. They told us that it was the first time that six villages had come together to work on something, but they did so because they didn't want to lose another youth to suicide. They were a grief stricken audience. It's hard to describe how difficult and expensive it is for them to travel from village to village. There are no roads and the only way in is by small six seater airplanes or barging down the river if it isn't frozen. Once they arrive, there are no hotels, so it's necessary to find a family that is willing and has the room to keep you. Yet these people found a way to be there. Initially, the people spoke of their grief and their losses and talked about how they were unable to look forward because of the pain in their hearts. The outer walls of the community center were lined with elders who had come in to support the effort – most couldn't hear what was going on, some were blind, yet they sat there from eight in the morning until eleven at night to offer their caring and their support. The benches were hard, yet their stamina came from the heart. The model was presented and the people divided into village groups. They used the model to assess their village's stage of readiness, then to identify their strengths and resources. They later talked about how grateful they were to find those strengths because they had forgotten them or didn't recognize them as strengths. Then each village developed an action plan to stop suicide using the resources in their respective villages. Someone from the outside might think they had no resources given that the villages are so small and have no clinics or shelters or the usual entities that we consider to be resources. Their resources came from their volunteerism, their culture, and their creativity. The youth were also there and formed their own group to develop strategies to offer support to friends in school. Each village stood and shared with the others the strategies that they had

developed. They were motivated and once again, hopeful. They said that they no longer felt helpless. It was a very moving experience. The entire group then made a big circle and, again, using the model, worked together to brainstorm an action plan to keep inter-village communication and support going. A woman from the State office had attended the gathering and was so impressed by the efforts and results that she offered each of the six villages \$2,000 to begin working on their strategies. Another woman donated her 80 acres of allotment land for a treatment center. We are still receiving monthly updates on what they continue to accomplish. They were very motivated to make changes and save their children from suicide and because of that, they were able to move from a lower stage of readiness to a higher stage in two days. But their greatest accomplishment and their greatest joy is that they have had NO suicides since they developed their action plans eight months ago!

Program Evaluation

Numerous programs have utilized the Community Readiness assessment for evaluation of community-wide efforts. They assess readiness both before and after interventions to determine extent of change and/or progress made.

Example: One Native program in Oklahoma developed a program to improve services to children with serious emotional disturbances and their families. The assessment process not only offered them an accurate baseline assessment as to where they were at the beginning of the project, but also provided essential qualitative data on the existing service system and the attitudes and perceptions of the consumers. They utilized the Community Readiness model in developing their interventions to inform people of the project, gain their support and identify strengths and resources from the consumer point of view. This project included ten counties. Their pre assessment clearly showed that the counties farthest from resources had lower readiness stages than those closer to resources. Their interventions in the counties were consistent with each county's readiness level. In their post assessment, two years later, all counties had moved ahead at least one and sometimes, two stages of readiness. The community support for the project was and is overwhelming. Community members and service providers are invested in the project because they feel the project was invested in them. The staff succeeded in getting the community invested in the project by listening to and utilizing interventions suggested by consumers and service providers. But, equally rewarding to the staff was the fact that they were able to provide evidence of their progress by using the Community Readiness Model assessment.

Grant Making Organizations

Resources of grant making organizations need to be utilized in a way that maximizes impact in the most efficient manner possible. Grant making organizations have utilized the model to quickly assess whether or not proposed projects stand a chance of success in a given community based on the readiness of the community to address the issue of the project. Many times they recommend the grantee utilize the model to work with the community in developing the infrastructure and support that will make it possible to implement projects. Too often good projects fail. It is often not because the ideas were not innovative or sound, but because efforts were more advanced than what the community is ready to accept

Research

Research into the effects of programs in schools, communities, etc., often involves having a control group of schools or communities who do not receive the program to be sure that any changes observed in the target school or community are not due to some external environmental factor having little or nothing to do with the program being implemented such as critical events, national trends, national media campaigns, etc.

Example: A project underway in 16 communities across the country utilized Community Readiness Assessment to prescreen communities before they were recruited so that all communities participating in the study were at an equivalent readiness level with respect to the issue being addressed.