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Assessing Prevention Capacity & Implementing Change

An evidence-informed and evidence-based Bullying Prevention Capacity Assessment and Change Package

HRSA
Maternal & Child Health

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INTRODUCTION

Approximately 21 percent of youth ages 12 through 18 reported being bullied at school in the United States during the 2014–15 school year, which translates to millions of youth being affected each year. Research shows that the results of bullying have serious, lasting effects, and prevention can improve the physical and mental health, safety, and well-being of children and their families.

The Health Resources and Services Administration (HRSA) has been actively working in bullying prevention since 2001. HRSA's National Bullying Prevention Initiative works to develop and share research, guidance, and resources at the national, state, and local levels. To engage State Health Departments (SHDs) in bullying prevention, HRSA established bullying prevalence as a new national performance measure (NPM) for the Maternal and Child Health Block Grant program in 2015. Sixteen states and jurisdictions have chosen the bullying prevention NPM and are actively working to reduce the prevalence of bullying among youth.

To provide guidance to state health departments and stakeholders, HRSA is pleased to present "Assessing Capacity for Bullying Prevention and Implementing Change," an evidence-informed and evidence-based resource that includes the Bullying Prevention Capacity Assessment and Change Package. This resource was created to help SHDs and others working to prevent bullying to assess the current capacity to address bullying and to determine where there may be gaps and needs. An extensive review of the evidence (See Appendix) was conducted to find the best measurements of organizational capacity and methods to prevent bullying, which provided the foundation for this resource. The "Assessing Capacity for Bullying Prevention and Implementing Change" package was also pilot tested during the formative stages, providing even greater guidance as to what will be most helpful for those working on bullying prevention at the community-level.

The Bullying Prevention Capacity Assessment was created to help SHDs or other stakeholders to determine where their efforts are in relation to best practices in bullying prevention, to help guide the implementation of effective bullying prevention activities and programs. If used over time SHDs or other stakeholders can measure their capacity to "move the needle" on bullying prevention. The Change Package examines evidence-informed and evidence-based drivers that build organizational strength to effect change and strategies that support prevention efforts. Together, the two tools:

- Set a baseline measurement of assessed bullying prevention capacity
- Provide evidence-informed and evidence-based approaches to improve bullying prevention efforts
- Measure change over time with regard to bullying prevention

For more information about the HRSA bullying prevention initiative, see https://mchb.hrsa.gov/maternal-child-health-initiatives/bullying-prevention. For more information about bullying see www.StopBullying.gov.

SECTION 1

Bullying Prevention
Capacity Assessment User Guide

Bullying Prevention Capacity Assessment User Guide

The *Bullying Prevention Capacity Assessment* includes questions that will help those using the tool to assess the current state of prevention, to help guide the implementation of effective bullying prevention activities and programs. The User Guide provides an orientation to this resource, how to take and score the assessment, and how to use the information it yields with the Change Package.

The assessment instrument:

- Helps users to rate their capacity to strengthen bullying prevention.
- Offers flexibility, working in a variety of environments including state health departments, schools, communities, and other organizations working with kids.
- Provides informed perspective to plan and implement policies, programs, and practices to prevent bullying.

The Bullying Prevention Capacity Assessment measures readiness and capacity to implement existing priority programs or activities for supporting bullying prevention; it also helps to prioritize, improve or change these efforts.

Who should be involved? The assessment can be completed by one person or as a group. Consider whose perspective will be helpful and who will be involved to use the results for change.

How long will the assessment take? Generally, it will take about one hour to complete the assessment. If you are working with a group and there is productive dialog along the way, it may take longer.

Why are there different focus areas in the assessment? The different focus areas serve as domains in which bullying prevention efforts will be most effective. The focus areas will help you to determine what change actions will be most helpful to address needs and gaps. This assessment includes the following focus areas:

- Partnering with schools, community agencies, or coalitions;
- Partnering with other state agencies or organizations;
- Providing training or disseminating information to stakeholders in prevention;
- Identifying and reporting bullying incidents;
- Identifying, facilitating, and implementing evidence-based interventions for bullying prevention;
- Identifying and disseminating information for groups at increased risk of bullying; and
- Including other areas that support prevention.

How is capacity measured? The assessment is designed to measure your readiness and capacity for changes that will help to prevent bullying. Capacity measures include:

- Prevention experience and expertise
- Established vision and objectives
- Communication networks and channels of outreach
- Decision-making authority to facilitate and implement change
- Available personnel and resources
- Other needed resources

Completing the Assessment

Score your agency's strength in that area. If a group is completing the assessment, an average score for each question will give you an overall sense of your identified gaps and needs.

Scoring and interpreting

To determine your capacity for each of the focus areas, rate your strengths within the following categories on a scale from 0 to 3 (where 0=None; 1=Minimal; 2=Moderate; and 3=High). The scoring guide is based on responses to sections 1-6. If responding to "optional items," do not include the response in the overall scoring. The total for each focus area will range from 0-18, which will assess your organization's **Area Capacity Score**[1].

- 0-6 = lower capacity
- 7-12 = moderate capacity
- 13-18 = higher capacity

The first time you complete the assessment, it will serve as a benchmark for future evaluations. After you have used the Change Package or implemented other prevention efforts, the assessment can be used again to measure change and progress in your agency's readiness and capacity for bullying prevention.

Linking Assessment Results to Evidence-Based Action

Once you have identified key areas of need with regard to prevention, the next step is to identify evidence-informed and evidence-based practices and approaches to fill the gaps. In addition to the Change Package concepts, the Appendix "Evidence-Based and Evidence-Informed Programs and Practices for Bullying Prevention: A Review of the Evidence on Bullying Prevention" was created to explore what might work best for your agency, school, organization, or community.

[1] Scores and ranges are meant for internal comparative purposes only and are not based on established norms. The assessment is designed to be flexible to meet specific needs.

SECTION 2

Bullying Prevention
Capacity Assessment

1. Partnering with Schools, Community Agencies, or Coalitions *Our team works closely with community partners (e.g., schools, public agencies, service providers, coalitions, other stakeholders) to support bullying prevention.*	
1.a. Experience / expertise *Our team draws on experience and expertise in similar initiatives to contribute to these community partnerships*.	
1.b. Clear vision /objectives *Our team's partnership contributions are based on clear objectives and vision.*	
1.c. Communication networking *Our team has regular and responsive two-way communication with community partners concerning bullying prevention.*	
1.d. Decision-making authority *Our team has the knowledge, authority, and discretion to make mutual decisions with community partners.*	
1.e. Personnel resources *Our staff has sufficient hours and expertise to fulfill our partnership roles.*	
1.f. Other necessary resources *Our team has other resources (e.g. funding, travel, equipment, materials) needed to fulfill our partnership roles.*	
Area 1 Capacity Score:	

2. Partnering with Other State Agencies *Our team works directly with state agency partners to support bullying prevention.*	
2.a. Experience / expertise *Our team draws on experience and expertise in similar initiatives when partnering with other state agencies to support bullying prevention.*	
2.b. Clear vision / objectives *Our team's partnership contributions with other state agencies is based on clear objectives and vision.*	
2.c. Communication networking *Our team has regular and responsive two-way communication with state agency partners.*	
2.d. Decision-making authority *Our team has the knowledge, authority, and discretion to make mutual decisions with state agency partners.*	
2.e. Personnel resources *Our staff has sufficient hours and expertise to fulfill our state agency partnering roles.*	
2.f. Other necessary resources *Our team has other resources (e.g. funding, travel, equipment, materials) needed to fulfill our state agency partnering roles.*	
Area 2 Capacity Score:	

3. Information Dissemination and Providing Training to Others **(e.g., state officials, state grantees, school officials, parents, children/youth)** *Our team disseminates information / training concerning bullying prevention to state and community stakeholders, including public agencies, schools, community organizations, and community members.*	
3.a. Experience / expertise *Our team draws on experience and expertise in similar initiatives when disseminating information/ training concerning bullying prevention to state and community stakeholders*	
3.b. Clear vision / objectives *Our team disseminates information / training concerning bullying prevention based on clear objectives and vision.*	
3.c. Communication networking *Our team has regular and responsive two-way communication with recipients of information and training.*	
3.d. Decision-making authority *Our team has the knowledge, authority, and discretion to make decisions about information dissemination and training.*	
3.e. Personnel resources *Our staff has sufficient hours and expertise to fulfill information dissemination / training objectives.*	
3.f. Other necessary resources *Our team has resources (e.g. funding, travel, equipment, materials) needed to fulfill our information dissemination / training objectives.*	
Area 3 Capacity Score:	

4. Facilitating the Identification and Reporting of Bullying and Cyberbullying Incidents *Our team has the information, knowledge, technology, information and other resources to facilitate identifying and reporting bullying incidents.*	
4.a. Experience / expertise *Our team draws on experience and expertise in similar initiatives when facilitating the identification and reporting of bullying incidents.*	
4.b. Clear vision / objectives *Our team works to facilitate the identification and reporting of bullying incidents based on clear objectives and vision.*	
4.c. Communication networking *Our team has regular and responsive two-way communication with other stakeholders related to the facilitation of identifying and reporting bullying incidents.*	
4.d. Decision-making authority *Our team has the knowledge, authority, and discretion to make decisions about identifying and reporting bullying incidents.*	
4.e. Personnel resources *Our staff has sufficient hours and expertise to fulfill objectives related to facilitating the identification and reporting of bullying incidents.*	
4.f. Other necessary resources *Our team has resources (e.g. funding, travel, equipment, materials) needed to fulfill our objectives concerning identifying and reporting bullying incidents.*	
Area 4 Capacity Score:	

5. Identifying and Implementing Evidence-based Interventions *Our team supplies information, resources and/or supports for the identification and implementation of evidence-based bullying prevention programs and policies.*	
5.a. Experience / expertise *Our team draws on experience and expertise in similar initiatives when identifying and implementing evidence-based bullying prevention interventions*	
5.b. Clear vision / objectives *Our team identifies and implements evidence-based bullying interventions based on clear objectives and vision.*	
5.c. Communication networking *Our team has regular and responsive two-way communication with other stakeholders about identifying and implementing evidence-based bullying prevention interventions.*	
5.d. Decision-making authority *Our team has the knowledge, authority, and discretion to identify and implement evidence-based bullying prevention interventions*	
5.e. Personnel resources *Our staff has sufficient hours and expertise to identify and implement evidence-based bullying prevention interventions.*	
5.f. Other necessary resources *Our team has resources (e.g., funding, travel, equipment, material) needed to identify and implement evidence-based interventions.*	
Area 5 Capacity Score:	

6. Identifying and Disseminating Information, Programs, Services for Groups at Increased Risk of Bullying (e.g., LGBTQ populations, children with disabilities, child immigrants and refugees, etc.) *Our team works to inform and support development and implementation of bullying prevention services to populations at higher risk of bullying victimization.*	
6.a. Experience / expertise *Our team draws on experience and expertise in similar initiatives when identifying and disseminating resources for groups at increased risk of bullying*	
6.b. Clear vision / objectives *Our team identifies and disseminates resources for groups at increased risk of bullying based on clear objectives and vision.*	
6.c. Communication networking *Our team has regular and responsive two-way communication with other stakeholders to identify and disseminate resources for groups at increased risk of bullying.*	
6.d. Decision-making authority *Our team has the knowledge, authority, and discretion to make decisions about identifying and disseminating resources for groups at increased risk of bullying.*	
6.e. Personnel resources *Our staff has sufficient hours and expertise to identify and disseminate resources for groups at increased risk of bullying.*	
6.f. Other necessary resources *Our team has resources (e.g., funding, travel, equipment, material) needed to fulfill our objectives concerning identifying and disseminating information, programs, and services.*	
Area 6 Capacity Score:	

7. Other Area of State Health Department Contribution (Optional) *Our Department works on other bullying prevention activities of importance to our state.* *Other areas may include: bullying prevention legislation, public policy, regulations, bullying prevention in medical (or other) service provider systems, promoting comprehensive bullying prevention approaches in disciplinary actions and/or enforcement, etc.*	
7.a. Experience / expertise *Our team draws on experience and expertise in similar initiatives when…*	
7.b. Clear vision / objectives *Our team uses clear objectives and vision when…*	
7.c. Communication networking *Our team has regular and responsive two-way communication related to...*	
7.d. Decision-making authority *Our team has the knowledge, authority, and discretion to….*	
7.e. Personnel resources *Our staff has sufficient hours and expertise to….*	
7.f. Other necessary resources *Our team has resources (e.g., funding, travel, equipment, material) needed to fulfill our objectives concerning…..*	
Other Area Capacity Score: *This score is to recognize other contributions, but is not to be included in the Total Area Capacity Score.*	

TOTAL AREA CAPACITY SCORE SUMMARY	
1. Partnering with Schools, Community Agencies, or Coalitions	
2. Partnering with Other State Agencies	
3. Information Dissemination and Providing Training to Others	
4. Facilitating the Identification and Reporting of Bullying and Cyberbullying Incidents	
5. Identifying and Implementing Evidence-based Interventions	
6. Identifying and Disseminating Information, Programs, Services for Groups at Increased Risk of Bullying	
Total Area Capacity Score:	

The total for each focus area will range from 0-18, which will assess your organization's **Area Capacity Score**.

- 0-6 = lower capacity
- 7-12 = moderate capacity
- 13-18 = higher capacity

Bullying Prevention Portfolio: A Quick Glance at What is in Place

Once the area capacity score is determined, it can be helpful to review some of the evidence-informed and evidence-based drivers to bullying prevention. The following checklist of primary and secondary drivers can be used to easily note what is already in place and to identify drivers where evidence-informed and evidence-based strategies might be helpful. These drivers are based on the Driver Diagram in the next section, that was created as the basis for concepts in the Change Package. The higher the capacity, the more the Change Package can be utilized to find concepts and considerations to address gaps and promote change.

Primary Drivers	Primary Drivers In Current Portfolio	Secondary Drivers	Secondary Drivers In Current Portfolio
PD1: Creation of strong partnerships across agencies, organizations, and programs to support the development and implementation of statewide approaches to bullying prevention		**SD1:** Rules, protocols, and policies for bullying prevention that are consistently implemented and enforced across agencies, organizations, and programs	
		SD2: Task forces, committees, coalitions, and campaigns that support implementation of bullying prevention strategies	
PD2: Active engagement of health care professionals in bullying prevention to reduce the adverse health outcomes (physical and psychosocial) associated with bullying		**SD1:** Information and training on bullying and bullying prevention provided to health care professionals	
		SD2: Training and guidance provided to health care personnel in identifying and providing appropriate referrals and treatment for youth impacted by bullying	
PD3: Development and implementation of community-wide approaches that promote norms and a culture of safety, support, and respect		**SD1:** Community stakeholders educated and engaged in coordinated bullying prevention efforts	
		SD2: Staff and volunteers in child and youth-serving organizations and programs throughout the community trained in evidence-based bullying prevention strategies	
		SD3: Appropriate procedures implemented for monitoring and reporting of bullying incidents that occur in after-school programs and other out-of-school, community-based settings	
		SD4: Information on bullying and bullying prevention integrated into professional and continuing education programs for educators, health and mental health providers, and social workers	

Primary Drivers	In Current Portfolio	Secondary Drivers	In Current Portfolio
PD4: Fostering of school communities with positive climates that are free of bullying		**SD1:** Promotion of whole-school, multi-tiered and evidence-based approaches to bullying prevention	
		SD2: Information dissemination and training on bullying prevention and evidence-based strategies, for school personnel and support for implementing evidence-based programs with fidelity	
		SD3: Facilitation of mechanisms for school monitoring, reporting of bullying incidents, and appropriate responses for all involved	
		SD4: Education for youth on bullying prevention and engagement of youth in school climate initiatives and bullying prevention activities	
PD5: Development and reinforcement of safe and supportive family environments that foster positive social skills and resiliency		**SD1:** Support for parents and caregivers to teach their children positive interpersonal skills, social competence, and model positive and supportive, nonviolent relationships	
		SD2: Engagement of parents, other family members and caregivers in school-based bullying prevention efforts	

SECTION 3

Bullying Prevention
Change Package and Driver Diagram

Introduction:

The bullying prevention Change Package provides guidance to state health departments in determining bullying prevention strategies and enhancing partnerships to support bullying prevention efforts in schools, health care settings, communities, and with families and caregivers. The strategies and programs included in the Change Package support actions with regard to: training and dissemination on bullying prevention information and evidence-based programs; partnerships across agencies and other entities; and facilitating the identification, reporting, and response to bullying incidents. The Change Package will be most useful after the Bullying Prevention Capacity Assessment is completed.

The Change Package includes strategies and programs that are evidence-informed or evidence-based, that align with state Maternal and Child Health and Injury and Violence Prevention programs, are feasible for state health departments to implement, and are capable of generating sustainable change and improvement. In identifying strategies and programs for inclusion in the Change Package, we reviewed the Stopbullying.gov website and the following best practice registries: the University of Colorado Boulder-Institute for Behavioral Science's Blueprints for Healthy Youth Development, the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Registry of Evidence-based Programs and Practices (NREPP), the National Institute of Justice's CrimeSolutions.gov, and the Institute of Education Science's What Works Clearinghouse. We also reviewed reports including: *Preventing Bullying Through Science, Policy, and Practice*, Chapter 5: Preventive Interventions, from The National Academies of Sciences, Engineering, and Medicine (Rivara & Le Menestrel, 2016; DOI: 10..17226/23482) and the Strengthen the Evidence (STE) for Maternal and Child Health Programs: National Performance Measure 9 Bullying Evidence Review from the Women's and Children's Health Policy Center at Johns Hopkins University (Lai et al., 2016).

The Strengthen the Evidence (STE) Base for Maternal and Child Health Programs aims to provide support to State Title V Maternal and Child Health Programs in developing evidence-informed and evidence-based State Action Plans. The STE conducts critical reviews of the evidence of effectiveness of possible strategies to address the National Performance Measures (NPM) of the Title V Block Grant program. The purpose of these evidence reviews is to identify evidence-informed and evidence-based strategies that State Title V programs can consider to address the NPM on bullying. In 2016, STE published its evidence review on bullying (Lai et al., 2016). The evidence review categorized bullying interventions along a continuum from Evidence Against (least favorable) to Scientifically Rigorous (most favorable). Some interventions may be challenging to implement in the context of complex public health systems with limited resources. State Health Departments (SHDs) or other stakeholders need support in identifying strategies that, while not proven effective through an academic evaluation, are still informed by evidence and more feasible to implement. This Change Package was created as a complementary resource to the STE Evidence Review to meet this challenge. Title V agencies are encouraged to consult both resources in their bullying prevention programming efforts, with a long-term movement toward implementing "Scientifically Rigorous" interventions.

The Change Package is an action-oriented document that presents a "theory of change" to inform and advance state-level work in bullying prevention. It contains change ideas, i.e., action steps that enable states to translate research into practice and improve the effectiveness of their bullying prevention efforts by implementing proven strategies and testing innovations. Within the Change Package, we have provided a crosswalk between the change ideas, which relate to building partnerships and working with health care professionals, communities, schools, and families, and the intervention components identified in the STE report, which relate to communities, schools, classrooms, parents/families, and youth. We have also adapted the evidence continuum used in the STE report to help states understand how we identified each change idea, while also making clear that we used a broader methodology than the STE report. The categories used in the Change Package are:

- Moderate Evidence – identified as effective in the best practices registries we reviewed
- Expert Opinion – supported by prevention strategies on Stopbullying.gov and/or in other policy or position statements from expert organizations
- Emerging Evidence – identified as promising in the best practices registries that we reviewed
- Innovation – informed by evidence and expert opinion but sufficiently distinct to be considered an innovation.

A Resources column is also included in the Change Package. This column includes links to webpages and articles that provide information related to the change ideas.

The contents of the Change Package are illustrated in a separate document called a Driver Diagram, which provides a simplified, schematic display. The Driver Diagram makes it easier to see and map the connections among all of the elements of the Change Package.

The Change Package is comprised of primary drivers, secondary drivers, and change ideas. Primary drivers are major systems or processes that impact bullying prevention, while secondary drivers represent components of the primary drivers that provide further direction in selecting prevention strategies. Change ideas are specific evidence-informed and evidence-based strategies or programs that are the building blocks of a comprehensive approach to bullying prevention. Change ideas are not intended to be implemented as one-time efforts or in isolation. Successful change implementation and "moving the needle" on bullying prevention will most effectively happen when multiple change ideas from across the Change Package are strategically selected.

The Bullying Prevention Capacity Assessment will provide a good starting point to identify gaps and priority areas in your state's bullying prevention efforts. Analyzing data, plans, and priorities can help to determine which combination of primary drivers addresses the most urgent needs related to bullying prevention and where the greatest potential is to improve prevention and measurable reductions in bullying. **To maximize results, a minimum of 2 primary drivers, 4 secondary drivers, and 8 to 10 change ideas should be selected to achieve measurable results**. The results from the Bullying Prevention Capacity Assessment will help to determine the current capacity to support a wide range of bullying prevention activities. Created as companion pieces, the Bullying Prevention Capacity Assessment and Change Package align to determine key focus areas and drivers.

Once primary drivers have been selected, the same methodology should be used to carefully assess which secondary drivers and which change ideas are most critical to achieve bullying prevention. Selecting change ideas that reinforce one another will create synergy and a multiplier effect on prevention efforts. It may be useful to ask:

- What change ideas are already in place?
- Are there gaps in these bullying prevention efforts?
- Are there opportunities to scale up successful change?

The Bullying Prevention Capacity Assessment will help users to answer these questions.

To illustrate how to select specific bullying prevention strategies and programs in the Change Package, the example below shows a selection pathway. If the Bullying Prevention Capacity Assessment score indicates that more could be done to increase capacity to partner with community agencies and coalitions, disseminate information, and provide training, then the state may decide to focus some of its efforts on:

- → *Primary Driver 3: Development and implementation of community-wide approaches that promote norms and a culture of safety, support, and respect*. Within this primary driver, the state may select
  - → *Secondary Driver 1: Community stakeholders educated and engaged in coordinated bullying prevention efforts*. Then the following change ideas might be selected:
    - → *Change Idea 2: Hold public forums in collaboration with community stakeholders to raise public awareness about the problem of bullying and to develop a shared consensus about the community's role in prevention,*
    - → *Change Idea 3: Engage stakeholders in the creation of a diverse and inclusive coalition charged with coordinating bullying prevention efforts across neighborhoods and sectors of the community*.
    - → *Change Idea 4: Convene key stakeholders in selected communities to develop Community Action Plans using the Communities that Care prevention system*.
  - → *Secondary Driver 3: Appropriate procedures implemented for monitoring and reporting of bullying incidents that occur in after-school programs and other out-of-school, community-based settings*. Then the following change ideas might be selected:
    - → *Change Idea 1: Assist communities in conducting assessments of where bullying is occurring*.
    - → *Change Idea 2: Provide guidance to communities on how to enhance monitoring in settings where bullying is occurring.*
    - → *Change Idea 3: Provide sample materials to educate community members and organizations on how to respond when bullying occurs in non-school settings and how these incidents can be reported.*

This Change Package constitutes a theory of how to prevent bullying and maps the elements of a coordinated, system-wide approach to bullying prevention. Because the understanding of bullying and knowledge of how to prevent it are both still evolving, particularly with respect to cyberbullying and preventing bullying among vulnerable populations, the Change Package will be revised and updated periodically to reflect new information about promising and proven practices for bullying prevention.

Driver Diagram

Primary Driver	Secondary Driver	Change Ideas
PD1: Creation of strong partnerships across agencies, organizations, and programs to support the development and implementation of statewide approaches to bullying prevention	**SD1:** Rules, protocols, and policies for bullying prevention that are consistently implemented and enforced across agencies, organizations, and programs	1. Collaborate with community health centers, hospitals, and clinics to develop and implement protocols for providing anticipatory guidance on bullying prevention during child and adolescent wellness visits 2. Partner with schools to establish mission statements and codes of conduct that support positive and safe school environments 3. Conduct outreach to child care and preschool programs and facilities to help them develop and implement bullying prevention rules and policies 4. Conduct outreach to youth sports programs/leagues and after-school programs to assist coaches and youth development staff in developing and implementing bullying prevention rules and policies 5. Work with the lead agency responsible for implementing your state's bullying prevention law to assist with implementation and enforcement of the law 6. Partner with Child Death Review (CDR) teams to ensure that bullying is considered during the review of child and adolescent deaths and that CDR team members are informed about evidence-based bullying prevention strategies and can incorporate these strategies into recommendations as appropriate
	SD2: Task forces, committees, coalitions, and campaigns that support implementation of bullying prevention strategies	1. Work with schools to establish and convene School Safety Committees to coordinate and oversee a whole-school approach to bullying prevention that utilizes evidence-based practices 2. Convene and/or actively participate in a statewide bullying prevention task force, committee, or coalition to provide ongoing coordination of bullying prevention efforts 3. Educate the public and policymakers about the public health approach to bullying prevention by presenting at meetings of task forces, coalitions, and committees 4. Increase state-wide awareness of bullying and understanding of bullying prevention strategies through active participation in National Bullying Prevention Month
PD2: Active engagement of health care professionals in bullying prevention to reduce the adverse health outcomes (physical and psychosocial) associated with bullying	**SD1:** Information and training on bullying and bullying prevention provided to health care professionals	1. Collaborate with state chapters of professional associations of health care providers, such as the American Academy of Pediatrics and associations of school psychologists, school-based health centers, and school nurses to develop and provide information and trainings on bullying and bullying prevention to their members 2. Conduct outreach to health care organizations (e.g., hospitals, community health centers, clinics) to raise awareness of the need for health care providers to address bullying behaviors and increase understanding of the harmful physical and mental health consequences of bullying 3. Provide training to health care personnel on bullying and bullying prevention, including the harmful biological and psychosocial effects of bullying and the role of health care professionals in preventing bullying
	SD2: Training and guidance provided to health care personnel in identifying and providing appropriate referrals and treatment for youth impacted by bullying	1. Provide training to health care personnel on identification, assessment, and treatment for children and adolescents who may be involved in bullying so that interventions can be delivered appropriately 2. Collaborate with health care organizations (e.g., hospitals, community health centers, and clinics) to ensure that providers screen children and adolescents for bullying risk factors during wellness visits 3. Collaborate with health care organizations (e.g., hospitals, community health centers, and clinics) to support the use of Connected Kids: Safe, Strong, Secure (2006), which is the American Academy of Pediatrics' primary care violence prevention protocol, and of evidence-based programs, such as the Triple P System and the Incredible Years 4. Ensure that mental health care providers are trained in the use of evidence-based interventions, such as Brief Strategic Family Therapy, Functional Family Therapy, and Multi-systemic Therapy, to assist parents/caregivers in addressing child and adolescent behavior problems 5. Facilitate connections among health and mental health professionals and school personnel to ensure that both schools and health care providers are equipped to provide appropriate referrals for youth impacted by bullying, i.e., both youth who are bullied and those who bully 6. Work with school psychologists, nurses, counselors, and social workers to ensure their participation in the development and implementation of school-based bullying prevention policies and programs
PD3: Development and implementation of community-wide approaches that promote norms and a culture of safety, support, and respect	**SD1:** Community stakeholders educated and engaged in coordinated bullying prevention efforts	1. Organize information sessions (e.g., town hall meetings, webinars) for community stakeholders, such as policymakers, school boards, non-profit boards, parent groups, businesses, and faith-based organizations, to educate them about the problem of bullying and evidence-based strategies for bullying prevention 2. Hold public forums in collaboration with community stakeholders to raise public awareness about the problem of bullying and to develop a shared consensus about the community's role in prevention 3. Engage stakeholders in the creation of a diverse and inclusive coalition charged with coordinating bullying prevention efforts across neighborhoods and sectors of the community 4. Convene key stakeholders in selected communities to develop Community Action Plans using the Communities that Care prevention system
	SD2: Staff and volunteers in child and youth-serving organizations and programs throughout the community trained in evidence-based bullying prevention strategies	1. Provide bullying prevention information and trainings to staff in child care and preschool programs 2. Provide bullying prevention information and trainings to staff and volunteers in after-school programs 3. Provide bullying prevention information and trainings to coaches and volunteers in youth athletic leagues and other youth sports programs

Driver Diagram (continued)

Primary Driver	Secondary Driver	Change Ideas
PD3 (continued): Development and implementation of community-wide approaches that promote norms and a culture of safety, support, and respect	**SD3:** Appropriate procedures implemented for monitoring and reporting of bullying incidents that occur in after-school programs and other out-of-school, community-based settings	1. Assist communities in conducting assessments of where bullying is occurring 2. Provide guidance to communities on how to enhance monitoring in settings where bullying is occurring 3. Provide sample materials to educate community members and organizations on how to respond when bullying occurs in non-school settings and how these incidents can be reported 4. Educate after-school and other youth-serving programs on actions that can be taken to make these environments safer for youth who are bullied 5. Educate the public on additional steps that can be taken around reporting cyberbullying (reporting to law enforcement, to social media sites, to schools if the bullying is affecting students' wellbeing at school)
	SD4: Information on bullying and bullying prevention integrated into professional and continuing education programs for educators, health and mental health providers, and social workers	1. Conduct outreach to schools of medicine, nursing, social work, and education to ensure that they include bullying identification, intervention, and prevention in their curricula 2. Create an accessible clearinghouse of approved informational materials, training materials, and course curricula on bullying and bullying prevention for use by universities and associations of health and social service professionals
PD4: Fostering of school communities with positive climates that are free of bullying	**SD1:** Promotion of whole-school, multi-tiered and evidence-based approaches to bullying prevention	1. Participate in or convene a state working group on school-based bullying prevention to monitor use and implementation of evidence-based strategies and make recommendations for increased adoption of these strategies 2. Work with schools to establish and convene School Safety Committees to coordinate and oversee a whole-school approach to bullying prevention 3. Facilitate the establishment of school district committees or subcommittees to examine existing bullying prevention efforts and identify missing elements to ensure that whole-school approaches are being used 4. Support schools in incorporating evidence-based bullying prevention approaches at multiple grade levels and into school anti-bullying policies 5. Assist schools in how to integrate bullying prevention into existing programs and supports, leading to a coordinated system of support
	SD2: Information dissemination and training on bullying prevention and evidence-based strategies, for school personnel and support for implementing evidence-based programs with fidelity	1. Provide information sessions for school district personnel to highlight evidence-based strategies that can be implemented in school settings; discuss resources (e.g., staff time, expenses, classroom time) necessary for implementation and how to get buy-in for whole-school approaches 2. Provide information sessions on student populations particularly vulnerable to being bullied (e.g., sexual minority youth, youth with disabilities, racial/ethnic minorities) or to bullying others (e.g., youth with histories of trauma or aggression) in school and other settings and associated evidence-based strategies that incorporate the elevated risk among these populations 3. Provide information on school climate initiatives, positive behavioral support, and social emotional learning (SEL) programs which can cultivate climates where bullying is less likely to occur, such as the Good Behavior Game, Second Step Violence Prevention Curriculum, and Promoting Alternative Thinking Strategies 4. Provide information on how to teach digital citizenship and incorporate cyberbullying prevention into existing health, technology, and bullying prevention programs; Consider programs specifically designed to address cyberbullying such as ConRed and Cyber Friendly schools 5. Provide training for teachers on how to talk about bullying in classroom lessons, classroom management techniques, and how to foster safe and supportive classroom environments 6. Provide models for training for all school staff, including teachers, administrators, office staff, cafeteria staff, bus drivers, coaches, etc. to ensure all staff encourage positive norms and know how to respond to bullying incidents
	SD3: Facilitation of mechanisms for school monitoring, reporting of bullying incidents, and appropriate responses for all involved	1. Participate in or convene a state working group that addresses school-based policies and best practices for monitoring and reporting bullying incidents and ways schools can respond quickly and effectively to support all involved 2. Assist schools in conducting bullying assessments at regular intervals to determine when and where bullying occurs, which populations of students are more likely to be involved, and the types of bullying (e.g., school, cyber) that are prevalent among students 3. Assist schools in conducting periodic school climate assessments; provide sample tools and guidance on administration and analysis 4. Provide school administrators with model bullying incident report forms and procedures for adaptation and use in their schools 5. Provide a model for training school staff in intervening in bullying incidents and responding effectively to reported incidents, both face-to-face and online 6. Provide sample materials to raise student and parent awareness of procedures for reporting bullying incidents and appropriate use of the reporting system 7. Train schools regarding their roles in addressing incidents of cyberbullying and what is required by law in your state
	SD4: Education for youth on bullying prevention and engagement of youth in school climate initiatives and bullying prevention activities	1. Support schools in developing and implementing classroom sessions at which students learn about the definition of bullying, the harmful effects of bullying, what to do if they witness a bullying incident, and how they can contribute to a positive school climate 2. Support schools in implementing social emotional learning and school climate initiatives that involve students to establish positive norms where students are proactive bystanders and intolerant of bullying among their peers, such as the Good Behavior Game, Second Step Violence Prevention Curriculum, and Promoting Alternative Thinking Strategies. 3. Provide models for programs that enhance connections between youth and school adults so that students are comfortable seeking help in instances where bullying is occurring (e.g., advisory programs)

Driver Diagram (continued)

Primary Driver	Secondary Driver	Change Ideas
PD5: Development and reinforcement of safe and supportive family environments that foster positive social skills and resiliency	**SD1:** Support for parents and caregivers to teach their children positive interpersonal skills, social competence, and model positive and supportive, nonviolent relationships	1. Increase implementation of evidence-based family-focused interventions that provide training and support to parents to prevent aggression and problem behaviors (e.g., Incredible Years, Raising Healthy Children, Coping Power) 2. Increase implementation of evidence-based programs that specifically target families with youth at risk of bullying involvement due to histories of trauma or demonstrations of problem behavior that often co-occur with bullying, such as aggression, academic problems and delinquency (e.g., Brief Strategic Family Therapy, Family Check-Up/Adolescent Transitions Program, Family Functional Therapy); provide enhanced support to such families 3. Increase the number of statewide strategies and programs to reduce youth violence, using the CDC Striving to Reduce Youth Violence Everywhere (STRYVE) strategies (e.g., strengthen youths' skills, parental training, reducing immediate risk for violence, vitalizing communities and creating safe places, engaging partners, and using data) 4. Provide enhanced support for families with youth that may be particularly vulnerable to bullying, including LGBTQ youth, youth with disabilities, and immigrant or refugee youth 5. Encourage family meals and other opportunities for connection within families so that youth may feel more comfortable disclosing involvement in bullying and be buffered from the negative consequences of bullying
	SD2: Engagement of parents, other family members and caregivers in school-based bullying prevention efforts	1. Hold bullying prevention information sessions and distribute materials to parents/caregivers to increase awareness of school-based bullying prevention efforts. 2. Hold information sessions that include specific information on cyberbullying prevention/intervention and teaching digital citizenship to expand the role that parents play in cyberbullying prevention (e.g., monitoring, rule-setting, positive and ongoing communication) 3. Support schools in getting buy-in and cooperation from parents by providing sample communications materials to enhance the delivery of prevention information through letters from teachers, newsletters, and information on the school website; create a toolkit with sample materials 4. Ensure that parents/caregivers whose children are involved in bullying (whether they are bullied, bully other children, or both) are given constructive consultations with school administrators and referred to appropriate counseling services to address the negative emotional consequences of bullying, e.g., Bully-Proofing Your School 5. Train parents in how to effectively communicate concerns about bullying to schools and how to be actively involved in school-based prevention efforts

Change Package

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD1: Creation of strong partnerships across agencies, organizations, and programs to support the development and implementation of statewide approaches to bullying prevention	**SD1:** Rules, protocols, and policies for bullying prevention that are consistently implemented and enforced across agencies, organizations, and programs	1. Collaborate with community health centers, hospitals, and clinics to develop and implement protocols for providing anticipatory guidance on bullying prevention during child and adolescent wellness visits 2. Partner with schools to establish mission statements and codes of conduct that support positive and safe school environments 3. Conduct outreach to child care and preschool programs and facilities to help them develop and implement bullying prevention rules and policies 4. Conduct outreach to youth sports programs/leagues and after-school programs to assist coaches and youth development staff in developing and implementing bullying prevention rules and policies 5. Work with the lead agency responsible for implementing your state's bullying prevention law to assist with implementation and enforcement of the law 6. Partner with Child Death Review (CDR) teams to ensure that bullying is considered during the review of child and adolescent deaths and that CDR team members are informed about evidence-based bullying prevention strategies and can incorporate these strategies into recommendations as appropriate	American Academy of Pediatrics. Committee on Injury, Violence, and Poison Prevention. (July 2009). "Role of the Pediatrician in Youth Violence Prevention". *Pediatrics*. 124(1):173. Bright Futures, 4th edition National Bullying Prevention Month | PACER's National Bullying Prevention Center Positive Behavioral Interventions and Supports Stopbullying.gov A History of Bullying Prevention Month Stopbullying.gov Policies & Laws Stopbullying.gov School Safety Committees Set Policies & Rules |Stopbullying.gov Stopbullying.gov Understanding the Roles of Early Education and Childcare Providers in Community-wide Bullying Prevention Efforts Stopbullying.gov Understanding the Roles of Elected Officials in Community-wide Bullying Prevention Efforts	1.Community 2. Community; School – school rules 3. Community 4. Community – outreach will include presentations / meetings with coaches and youth development staff and may also include trainings, events, and distribution of promotional items 5. Community – enforcement may include presentations / meetings with community officials (school boards, administrators, police), training, events, media campaigns (print materials, radio, TV), and distribution of promotional items) 6. Community – meetings / presentations with community officials (school boards, administrators, police)	1. Expert Opinion (anticipatory guidance) – American Academy of Pediatrics (June 11, 2009). Role of the Pediatrician in Youth Violence Prevention. *Pediatrics*. 124(1):393-402. 2. Expert Opinion -- Stopbullying.gov Set Policies and Rules 3. Expert Opinion – Stopbullying.gov Understanding the Roles of Early Education and Childcare Providers in Community-wide Bullying Prevention Efforts 4. Innovation 5. Expert Opinion – Stopbullying.gov Policies & Laws 6. Innovation
	SD2: Task forces, committees, coalitions, and campaigns that support implementation of bullying prevention strategies	1. Work with schools to establish and convene School Safety Committees to coordinate and oversee a whole-school approach to bullying prevention that utilizes evidence-based practices		1. School – bullying committee 2. Community – presentations / meetings with community officials (school boards, administrators, police) 3. Community – presentations / meetings with community officials	1. Expert Opinion – Stopbullying.gov School Safety Committees; (whole school approach) *Preventing Bullying Through Science, Policy, and Practice*, Chapter 5: Preventive Interventions, from The National Academies of Sciences, Engineering, and Medicine (NASEM) (Rivara, & Le Menestrel, 2016; DOI: 10.17226/23482. Pp. 219-220.

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD1 (cont.): Creation of strong partnerships across agencies, organizations, and programs to support the development and implementation of statewide approaches to bullying prevention	**SD2 (cont.):** Task forces, committees, coalitions, and campaigns that support implementation of bullying prevention strategies	2. Convene and/or actively participate in a statewide bullying prevention task force, committee, or coalition to provide ongoing coordination of bullying prevention efforts 3. Educate the public and policymakers about the public health approach to bullying prevention by presenting at meetings of task forces, coalitions, and committees 4. Increase state-wide awareness of bullying and understanding of bullying prevention strategies through active participation in National Bullying Prevention Month		4. Community – event, media campaign (print materials, radio, TV), and distribution of promotional items	2. Expert Opinion – Stopbullying.gov Understanding the Roles of Elected Officials in Community-wide Bullying Prevention Efforts 3. Expert Opinion – Stopbullying.gov Understanding the Roles of Elected Officials in Community-wide Bullying Prevention Efforts 4. Expert Opinion – Stopbullying.gov A History of Bullying Prevention Month

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD2: Active engagement of health care professionals in bullying prevention to reduce the adverse health outcomes (physical and psychosocial) associated with bullying	**SD1:** Information and training on bullying and bullying prevention provided to health care professionals	1. Collaborate with state chapters of professional associations of health care providers, such as the American Academy of Pediatrics and associations of school psychologists, school-based health centers, and school nurses to develop and provide information and trainings on bullying and bullying prevention to their members 2. Conduct outreach to health care organizations (e.g., hospitals, community health centers, clinics) to raise awareness of the need for health care providers to address bullying behaviors and increase understanding of the harmful physical and mental health consequences of bullying 3. Provide training to health care personnel on bullying and bullying prevention, including the harmful biological and psychosocial effects of bullying and the role of health care professionals in preventing bullying	American Academy of Pediatrics. Committee on Injury, Violence, and Poison Prevention. (July 2009). "Role of the Pediatrician in Youth Violence Prevention". *Pediatrics*. 124(1):173. American Academy of Pediatrics. *Connected Kids: Safe, Strong,Secure Clinical Guide*. Spivak H, Sege R, Flanigan E, Licenziato V. eds. Elk Grove Village, IL: American Academy of Pediatrics; 2006. Cimino, J., Forrest, L., Smith, B. J., & Stainback-Tracy, K. (2007). Evidenced-based Competencies for Promoting Social and Emotional Development and Addressing Challenging Behavior in Early Care and Education Settings. Project BLOOM Professional Development Steering Committee report. International Association of Chiefs of Police. Preparing and Responding to Cyberbullying: Tips for Law Enforcement Rossen, E., & Cowan, K. C. (2012). A Framework for School-wide Bullying Prevention and Safety [Brief]. Bethesda, MD: National Association of School Psychologists. Safe Schools and Pennsylvania Statewide Afterschool/Youth Development Network (PSAYDN). Bullying Prevention in Out-of-School and Afterschool Settings. Stopbullying.gov Assess Bullying and Bullying Prevention and Response Training and Continuing Education Online Program Stopbullying.gov Protecting Youth from Bullying: The Role of the Pediatrician Stopbullying.gov Roles for Health and Safety Professionals in Bullying Prevention and Intervention Stopbullying.gov Understanding the Roles of Health and Safety Professionals in Community-wide Bullying Prevention Efforts Stopbullying.gov Understanding the Roles of Recreation Leaders in Community-wide Bullying Prevention Efforts Tuck, C., Cagginello, J.B., & Rose, K.C. et al. National Association of School Nurses. *School Violence, Role of the School Nurse in Prevention*. (Adopted June 2013).	1. Community (health care organizations / professionals) – presentations / meetings and trainings 2. Community (health care organizations / professionals) – presentations / meetings 3. Community (health care organizations / professionals) -- training	1. Expert Opinion – Stopbullying.gov Understanding the Roles of Health and Safety Professionals in Community-wide Bullying Prevention Efforts 2. Expert Opinion – American Academy of Pediatrics (June 11, 2009). Role of the Pediatrician in Youth Violence Prevention. *Pediatrics*. 124(1):393-402 3. Expert Opinion – Stopbullying.gov Protecting Youth from Bullying: The Role of the Pediatrician
	SD2: Training and guidance provided to health care personnel in identifying and providing appropriate referrals and treatment for youth impacted by bullying	1. Provide training to health care personnel on identification, assessment, and treatment for children and adolescents who may be involved in bullying so that interventions can be delivered appropriately 2. Collaborate with health care organizations (e.g., hospitals, community health centers, and clinics) to ensure that providers screen children and adolescents for bullying risk factors during wellness visits		1. Community (health care organizations / professionals) – training 2. Community (health care organizations / professionals) – presentations / meetings 3. Community (health care organizations / professionals) – training	1., 2.,and 5. Expert Opinion – Stopbullying.gov Roles for Health and Safety Professionals in Bullying Prevention and Intervention; American Medical Association May 3, 2002 Educational Forum on Adolescent Health: Youth Bullying; Tuck, C., Cagginello, J.B., & Rose, K.C. et al. National Association of School Nurses. *School Violence, Role of the School Nurse in Prevention*. (Adopted June 2013).

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD2 (cont.): Active engagement of health care professionals in bullying prevention to reduce the adverse health outcomes (physical and psychosocial) associated with bullying	**SD2 (cont.):** Training and guidance provided to health care personnel in identifying and providing appropriate referrals and treatment for youth impacted by bullying	3. Collaborate with health care organizations (e.g., hospitals, community health centers, and clinics) to support the use of *Connected Kids: Safe, Strong, Secure* (2006), which is the American Academy of Pediatrics' primary care violence prevention protocol, and of evidence-based programs, such as the Triple P System and the Incredible Years 4. Ensure that mental health care providers are trained in the use of evidence-based interventions, such as Brief Strategic Family Therapy, Functional Family Therapy, and Multi-systemic Therapy, to assist parents/caregivers in addressing child and adolescent behavior problems 5. Facilitate connections among health and mental health professionals and school personnel to ensure that both schools and health care providers are equipped to provide appropriate referrals for youth impacted by bullying, i.e., both youth who are bullied and those who bully 6. Work with school psychologists, nurses, counselors, and social workers to ensure their participation in the development and implementation of school-based bullying prevention policies and programs	**Program resources:** Triple P System* "A public health approach to reach all parents in a community to enhance parental competence and prevent or alter dysfunctional parenting practices, thereby reducing family risk factors both for child maltreatment and for children's behavioral and emotional problems." Triple P is delivered to parents "in 1-10 or more sessions tailored to the severity of the family's dysfunction and/or child's behavioral problems." *Blueprints for Healthy Youth Development:* ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective*** Incredible Years *Blueprints for Healthy Youth Development:* ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP:* ***3.6-3.7/4.0*** Brief Strategic Family Therapy "A short-term, problem-focused therapeutic intervention targeting children and adolescents 6 to 17 years old, that improves youth behavior by eliminating or reducing drug use and its associated behavior problems and that changes the family members' behaviors that are linked to both risk and protective factors related to substance use." *SAMHSA Model Program (Lawner, E.K. and Terzian, M.A., ChildTrends, What Works for Bullying Programs: Lessons from Experimental Evaluations of Programs and Interventions, October 2013, Publication #2013-39),* ***NREPP: 3.0-3.4/4.0*** Functional Family Therapy "A short-term family therapy intervention and juvenile diversion program helping at-risk children and delinquent youth to overcome adolescent behavior problems, conduct disorder, substance abuse and delinquency." *Blueprints for Healthy Youth Development:* ***Model****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective*** Multisystemic Therapy "A juvenile crime prevention program to enhance parenting skills and provide intensive family therapy to troubled teens and delinquent teens that empower youth to cope with the family, peer, school, and neighborhood problems they encounter - in ways that promote prosocial behavior while decreasing youth violence and other antisocial behaviors." *Blueprints for Healthy Youth Development:* ***Model Plus****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP:* ***2.9-3.2/4.0***	4. Community (health care organizations / professionals) – training 5. Community (health care organizations / professionals) – training 6. Community (health care organizations / professionals) – presentations / meetings and School – bullying committee and reporting & response system	3. Expert Opinion -- American Academy of Pediatrics (June 11, 2009). Role of the Pediatrician in Youth Violence Prevention. *Pediatrics*. 124(1):393-402 4. Moderate Evidence – Brief Strategic Family Therapy is a SAMHSA Model Program. Functional Family Therapy is rated a model by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, and effective by OJJDP Model Programs. Multi-systemic Therapy is rated a model plus by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, effective by OJJDP Model Programs, and a 2.9-3.2/4.0 by NREPP. 6. Expert Opinion -- Rossen, E., & Cowan, K. C. (2012). A Framework for School-wide Bullying Prevention and Safety [Brief]. Bethesda, MD: National Association of School Psychologists

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD3: Development and implementation of community-wide approaches that promote norms and a culture of safety, support, and respect	**SD1:** Community stakeholders educated and engaged in coordinated bullying prevention efforts	1. Organize information sessions (e.g., town hall meetings, webinars) for community stakeholders, such as policymakers, school boards, non-profit boards, parent groups, businesses, and faith-based organizations, to educate them about the problem of bullying and evidence-based strategies for bullying prevention 2. Hold public forums in collaboration with community stakeholders to raise public awareness about the problem of bullying and to develop a shared consensus about the community's role in prevention 3. Engage stakeholders in the creation of a diverse and inclusive coalition charged with coordinating bullying prevention efforts across neighborhoods and sectors of the community 4. Convene key stakeholders in selected communities to develop Community Action Plans using the Communities that Care prevention system	Working in the Community | Stopbullying.gov Communities that Care "The Communities That Care (CTC) prevention system is a community-level intervention that mobilizes stakeholders to collaborate on selecting and implementing evidence-based prevention programs designed to prevent youth problem behaviors, such as substance abuse and delinquency. CTC is installed in communities through a series of six training events delivered over the course of 6-12 months by certified CTC trainers." *NREPP:* ***3.2-3.6/4.0*** Hahn, S. and Reiney, E. (2015). Engaging Communities in Bullying Prevention. Stopbullying.gov Blog. Srabstein, J., Joshi, P., & Due, P. et al. (2008). "Prevention of Public Health Risks Linked to Bullying: A Need for a Whole Community Approach". *International Journal of Adolescent Medicine and Health*. 20(2):185-199.	1. Community – presentations / meetings, events 2. Community – events 3. Community – presentations / meetings 4. Community – presentations / meetings	1. Innovation 2. Innovation 3. Innovation 4. Moderate Evidence – Communities That Care is rated as 3.2-3.6 in NREPP
	SD2: Staff and volunteers in child and youth-serving organizations and programs throughout the community trained in evidence-based bullying prevention strategies	1. Provide bullying prevention information and trainings to staff in child care and preschool programs 2. Provide bullying prevention information and trainings to staff and volunteers in after-school programs 3. Provide bullying prevention information and trainings to coaches and volunteers in youth athletic leagues and other youth sports programs		1. Community – training 2. Community – training 3. Community - training	1. Expert Opinion -- Cimino, J., Forrest, L., Smith, B. J., & Stainback-Tracy, K. (2007). Evidenced-based Competencies for Promoting Social and Emotional Development and Addressing Challenging Behavior in Early Care and Education Settings. Project BLOOM Professional Development Steering Committee report. 2. Expert Opinion -- Safe Schools and Pennsylvania Statewide Afterschool/Youth Development Network (PSAYDN).

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD3 (cont.): Development and implementation of community-wide approaches that promote norms and a culture of safety, support, and respect					Bullying Prevention in Out-of-School and Afterschool Settings. 3. Expert Opinion – Stopbullying.gov Understanding the Roles of Recreation Leaders in Community-wide Bullying Prevention Efforts
	SD3: Appropriate procedures implemented for monitoring and reporting of bullying incidents that occur in after-school programs and other out-of-school, community-based settings	1. Assist communities in conducting assessments of where bullying is occurring 2. Provide guidance to communities on how to enhance monitoring in settings where bullying is occurring 3. Provide sample materials to educate community members and organizations on how to respond when bullying occurs in non-school settings and how these incidents can be reported 4. Educate after-school and other youth-serving programs on actions that can be taken to make these environments safer for youth who are bullied 5. Educate the public on additional steps that can be taken around reporting cyberbullying (reporting to law enforcement, to social media sites, to schools if the bullying is affecting students' wellbeing at school)		1. Community – reporting & response system 2. Community – reporting & response system; identification and monitoring of / increased supervision in targeted areas 3. Community – training, events, and distribution of promotional items 4. Community – training, events, and distribution of promotional items 5. Community – training, events, and distribution of promotional items	1. Expert Opinion – Stopbullying.gov Assess Bullying and Bullying Prevention and Response Training and Continuing Education Online Program 2. Innovation 3. Innovation 4. Expert Opinion -- Safe Schools and Pennsylvania Statewide Afterschool/Youth Development Network (PSAYDN). Bullying Prevention in Out-of-School and Afterschool Settings 5. Expert Opinion – International Association of Chiefs of Police. Preparing and Responding to Cyberbullying: Tips for Law Enforcement; Stopbullying.gov

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD3 (cont.): Development and implementation of community-wide approaches that promote norms and a culture of safety, support, and respect	**SD4:** Information on bullying and bullying prevention integrated into professional and continuing education programs for educators, health and mental health providers, and social workers	1. Conduct outreach to schools of medicine, nursing, social work, and education to ensure that they include bullying identification, intervention, and prevention in their curricula 2. Create an accessible clearinghouse of approved informational materials, training materials, and course curricula on bullying and bullying prevention for use by universities and associations of health and social service professionals		1. Community – presentations / meetings 2. Community	1. Expert Opinion -- American Academy of Pediatrics (June 11, 2009). Role of the Pediatrician in Youth Violence Prevention. *Pediatrics*. 124(1):393-402. 2. Innovation
PD4: Fostering of school communities with positive climates that are free of bullying	**SD1:** Promotion of whole-school, multi-tiered and evidence-based approaches to bullying prevention	1. Participate in or convene a state working group on school-based bullying prevention to monitor use and implementation of evidence-based strategies and make recommendations for increased adoption of these strategies 2. Work with schools to establish and convene School Safety Committees to coordinate and oversee a whole-school approach to bullying prevention 3. Facilitate the establishment of school district committees or subcommittees to examine existing bullying prevention efforts and identify missing elements to ensure that whole-school approaches are being used 4. Support schools in incorporating evidence-based bullying prevention approaches at multiple grade levels and into school anti-bullying policies. Examples of programs include: Bully-Proofing Your School, Olweus Bullying Prevention Program, and Safe & Civil Schools Positive Behavioral Interventions and Support Model. 5. Assist schools in how to integrate bullying prevention into existing programs and supports, leading to a coordinated system of support	Stopbullying.gov Best Practices in Bullying Prevention and Intervention Stopbullying.gov Bullying and LGBT Youth Stopbullying.gov Educate about Bullying Prevention at School | Stopbullying.gov Assessment | Stopbullying.gov Engage Parents and Youth | Stopbullying.gov Build a Safe Environment | Stopbullying.gov Educate Students and School Staff | Stopbullying.gov **Other resources on bullying prevention in schools:** *K. Raggozino & M. Utne O'Brien. Collaborative for Academic, Social, and Emotional Learning (CASEL) and the Social and Emotional Learning Research Group at the University of Illinois at Chicago. (2009). Social and Emotional Learning and Bullying Prevention* *Preventing Bullying Through Science, Policy, and Practice*, Chapter 5: Preventive Interventions, from The National Academies of Sciences, Engineering, and Medicine (NASEM) (Rivara, & Le Menestrel, 2016; DOI: 10.17226/23482	1. School – bullying committee 2. School – bullying committee 3. School – bullying committee 4. School 5. School	1. Innovation 2. Expert Opinion -- Stopbullying.gov School Safety Committees 3. Innovation 4. Emerging Evidence – Bully-Proofing Your School is rated promising by CrimeSolutions.gov. The Olweus Bullying Prevention Program is rated promising by Blueprints for Healthy Youth Development. The Safe & Civil Schools Positive Behavioral Interventions and Support Model is rated a 2.0-3.6/4.0 by NREPP. 5. Expert Opinion – Stopbullying.gov Best Practices in Bullying Prevention and Intervention; (whole school approach) *Preventing Bullying Through Science, Policy, and Practice*, Chapter 5: Preventive Interventions, from The National Academies of Sciences, Engineering, and Medicine (NASEM) (Rivara, & Le Menestrel, 2016; DOI: 10.17226/23482 pp. 219-220.

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD4 (cont.): Fostering of school communities with positive climates that are free of bullying	**SD2:** Information dissemination and training on bullying prevention and evidence-based strategies, for school personnel and support for implementing evidence-based programs with fidelity	1. Provide information sessions for school district personnel to highlight evidence-based strategies that can be implemented in school settings; discuss resources (e.g., staff time, expenses, classroom time) necessary for implementation and how to get buy-in for whole-school approaches 2. Provide information sessions on student populations particularly vulnerable to being bullied (e.g., sexual minority youth, youth with disabilities, racial/ethnic minorities) or to bullying others (e.g., youth with histories of trauma or aggression) in school and other settings and associated evidence-based strategies that incorporate the elevated risk among these populations 3. Provide information on school climate initiatives, positive behavioral support, and social emotional learning (SEL) programs which can cultivate climates where bullying is less likely to occur, such as the Good Behavior Game, Second Step Violence Prevention Curriculum, and Promoting Alternative Thinking Strategies 4. Provide information on how to teach digital citizenship and incorporate cyberbullying prevention into existing health, technology, and bullying prevention programs; Consider programs specifically designed to address cyberbullying such as ConRed and Cyber Friendly schools 5. Provide training for teachers on how to talk about bullying in classroom lessons, classroom management techniques, and how to foster safe and supportive classroom environments	*Strengthen the Evidence for Maternal and Child Health Programs: National Performance Measure 9 Bullying Evidence* Review, from the Women's and Children's Health Policy Center at Johns Hopkins University (Lai et al., 2016) Lawner, E.K. and Terzian, M.A., ChildTrends, *What Works for Bullying Programs: Lessons from Experimental Evaluations of Programs and Interventions*, October 2013, Publication #2013-39), National Education Association. (2012). Bullying Prevention in Public Schools: An NEA Policy Brief Susan M. Swearer, Dorothy L. Espelage, Scott A. Napolitano. (2012) *Bullying Prevention and Intervention: Realistic Strategies for Schools*. Guilford Press. **Examples of evidence-based, multi-tiered programs implemented in schools:** Bully-Proofing Your School "A comprehensive, school-based intervention designed to reduce bullying and school violence, and increase knowledge about school safety for students and parents. BPYS is implemented in a classroom setting and includes three major components: 1) heightening awareness of bullying; 2) teaching protective skills for handling bullying, resisting victimization, and helping potential victims; and 3) creating a positive school climate by promoting a "caring majority" that focuses on bystander behavior." *CrimeSolutions.gov:* ***Promising***	1. School – teacher / staff training 2. School – teacher / staff training 3. School – teacher / staff training 4. School – teacher / staff training 5. School – teacher / staff training 6. School – teacher / staff training	1. Innovation 2. Innovation 3. Emerging Evidence – K. Raggozino & M. Utne O'Brien. Collaborative for Academic, Social, and Emotional Learning (CASEL) and the Social and Emotional Learning Research Group at the University of Illinois at Chicago. (2009). Social and Emotional Learning and Bullying Prevention. The Good Behavior Game is rated promising by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, effective by OJJDP Model Programs, and 3.1-3.2/4.0 by NREPP. Second Step is rated effective by CrimeSolutions.gov and promising by NREPP. Promoting Alternative Thinking Strategies is rated a model program by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, effective by OJJDP Model Programs, and 2.6-3.2/4.0 by NREPP. 4. Emerging Evidence – ConRed and Cyber Friendly Schools are among the programs discussed in *Preventing Bullying Through Science, Policy, and Practice*, Chapter 5: Preventive Interventions, from The National Academies of Sciences, Engineering, and Medicine (NASEM) (Rivara, & Le Menestrel, 2016; DOI: 10.17226/23482. pp. 217-219.

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD4 (cont.): Fostering of school communities with positive climates that are free of bullying	**SD2 (cont.):** Information dissemination and training on bullying prevention and evidence-based strategies, for school personnel and support for implementing evidence-based programs with fidelity	6. Provide models for training for all school staff, including teachers, administrators, office staff, cafeteria staff, bus drivers, coaches, etc. to ensure all staff encourage positive norms and know how to respond to bullying incidents	Olweus Bullying Prevention Program "A bullying prevention program that includes schoolwide, classroom, individual, and community strategies that create a safe and positive school climate, improve peer relations, and increase awareness of and reduce the opportunities and rewards for bullying behavior. This anti-bullying program offers activities designed for use in elementary, middle, junior and high schools." *Blueprints for Healthy Youth Development:* ***Promising,*** *also reviewed in Strengthen the Evidence* Safe & Civil Schools Positive Behavioral Interventions and Support Model "A multicomponent, multitiered, comprehensive approach to schoolwide improvement. Integrating applied behavior analysis, research on effective schools, and systems change management theory, the intervention is an application of positive behavior support (PBS), a set of strategies or procedures designed to improve behavior by employing positive and systematic techniques." *NREPP:* ***2.0-3.6/4.0*** **Examples of programs implemented in schools specifically to enhance school climate:** Good Behavior Game "A classroom behavior management game providing a strategy to help elementary teachers reduce aggressive, disruptive behavior and other behavioral problems in children, particularly highly aggressive children, while creating a positive and effective learning environment." *Blueprints for Healthy Youth Development:* ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP:* ***3.1-3.2/4.0****.* See also: http://paxgoodbehaviorgame.promoteprevent.org/ Second Step®: A Violence Prevention Curriculum\		5. Expert Opinion -- Stopbullying.gov Educate about Bullying 6. Expert Opinion – National Education Association. (2012). Bullying Prevention in Public Schools: An NEA Policy Brief.
	SD3: Facilitation of mechanisms for school monitoring, reporting of bullying incidents, and appropriate responses for all involved	1. Participate in or convene a state working group that addresses school-based policies and best practices for monitoring and reporting bullying incidents and ways schools can respond quickly and effectively to support all involved 2. Assist schools in conducting bullying assessments at regular intervals to determine when and where bullying occurs, which populations of students are more likely to be involved, and the types of bullying (e.g., school, cyber) that are prevalent among students 3. Assist schools in conducting periodic school climate assessments; provide sample tools and guidance on administration and analysis 4. Provide school administrators with model bullying incident report forms and procedures for adaptation and use in their schools 5. Provide a model for training school staff in intervening in bullying incidents and responding effectively to reported incidents, both face-to-face and online 6. Provide sample materials to raise student and parent awareness of procedures for reporting bullying incidents and appropriate use of the reporting system		1. Community – presentations / meetings; School – teacher / staff meeting 2. School – reporting & response system 3. School – reporting & response system 4. School – reporting & response system 5. School – reporting & response system 6. School – reporting & response system 7. School – reporting & response system	1. Innovation 2. Expert Opinion – Stopbullying.gov Assess Bullying 3. Expert Opinion -- Bullying Prevention in Public Schools: An NEA Policy Brief. 4. Innovation 5. Expert Opinion – Stopbullying.gov Understanding the Roles of School Administrators in Community-Wide Bullying Prevention Efforts 6. Innovation 7. Innovation

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD4 (cont.): Fostering of school communities with positive climates that are free of bullying	**SD3 (cont.):** Facilitation of mechanisms for school monitoring, reporting of bullying incidents, and appropriate responses for all involved	7. Train schools regarding their roles in addressing incidents of cyberbullying and what is required by law in your state	"A universal prevention program designed to reduce impulsive and aggressive behavior in children and adolescents by increasing their social competency skills. Students are taught to reduce impulsive, high-risk, and aggressive behaviors and increase their socioemotional competence and other protective factors. The program is composed of three grade-specific curricula: preschool/kindergarten (Pre-K), elementary school (grades 1–5), and middle school (grades 6–8)." *CrimeSolutions.gov: **Effective**, NREPP: **Promising**, also reviewed in Strengthen the Evidence* Promoting Alternative Thinking Strategies "A classroom-based social emotional learning program for elementary students to reduce aggression and behavior problems in children. The PATHS curriculum teaches skills in five conceptual domains: self-control, emotional understanding, positive self-esteem, relationships, and interpersonal problem solving." *Blueprints for Healthy Youth Development: **Model**, CrimeSolutions.gov: **Effective**, OJJDP Model Programs: **Effective**, NREPP: **2.6-3.2/4.0*** **Programs to address cyberbullying:** Coping Power "Coping Power is a 16-month program delivered during the 5th and 6th grade school years. Children attend 22 group sessions in 5th grade and 12 group sessions in 6th grade." *Blueprints for Healthy Youth Development: **Promising**, CrimeSolutions.gov: **Promising**, OJJDP Model Programs: **Promising*** Cyber Friendly Schools "A whole-school, online cyberbullying prevention and intervention program that is based on a social-ecological approach and considers the many factors that influence students' vulnerability to cyberbullying at multiple levels." *NASEM, also reviewed in Strengthen the Evidence*		
	SD4: Education for youth on bullying prevention and engagement of youth in school climate initiatives and bullying prevention activities	1. Support schools in developing and implementing classroom sessions at which students learn about the definition of bullying, the harmful effects of bullying, what to do if they witness a bullying incident, and how they can contribute to a positive school climate 2. Support schools in implementing social emotional learning and school climate initiatives that involve students to establish positive norms where students are proactive bystanders and intolerant of bullying among their peers, such as the Good Behavior Game, Second Step Violence Prevention Curriculum, and Promoting Alternative Thinking Strategies. 3. Provide models for programs that enhance connections between youth and school adults so that students are comfortable seeking help in instances where bullying is occurring (e.g., advisory programs) 4. Promote the use of inclusive curricula and establishment of student groups such as Gay Straight Alliances or similar groups focused on supporting diversity and encouraging inclusiveness within school environments		1. Classroom – presentation / meeting / information session, adult-led curricular activities 2. Classroom – adult-led curricular activities 3. School – teacher / staff training 4. Classroom – adult-led curricular activities; School	1. Expert Opinion – Stopbullying.gov Educate about Bullying 2. Moderate Evidence – K. Raggozino & M. Utne O'Brien. Collaborative for Academic, Social, and Emotional Learning (CASEL) and the Social and Emotional Learning Research Group at the University of Illinois at Chicago. (2009). Social and Emotional Learning and Bullying Prevention. The Good Behavior Game is rated promising by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, effective by OJJDP Model Programs, and 3.1-3.2/4.0 by NREPP. Second Step is rated effective by CrimeSolutions.gov and promising by NREPP. Promoting Alternative Thinking Strategies is rated a model program by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, effective by OJJDP Model Programs, and 2.6-3.2/4.0 by NREPP. 3. Innovation 4. Expert Opinion – Stopbullying.gov Bullying and LGBT Youth

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD5: Development and reinforcement of safe and supportive family environments that foster positive social skills and resiliency	**SD1:** Support for parents and caregivers to teach their children positive interpersonal skills, social competence, and model positive and supportive, nonviolent relationships	1. Increase implementation of evidence-based family-focused interventions that provide training and support to parents to prevent aggression and problem behaviors (e.g., Incredible Years, Raising Healthy Children, Coping Power) 2. Increase implementation of evidence-based programs that specifically target families with youth at risk of bullying involvement due to histories of trauma or demonstrations of problem behavior that often co-occur with bullying, such as aggression, academic problems and delinquency (e.g., Brief Strategic Family Therapy, Positive Family Support-Family Check-Up/Adolescent Transitions Program, Functional Family Therapy); provide enhanced support to such families 3. Increase the number of statewide strategies and programs to reduce youth violence, using the CDC Striving to Reduce Youth Violence Everywhere (STRYVE) strategies (e.g., strengthen youths' skills, parental training, reducing immediate risk for violence, vitalizing communities and creating safe places, engaging partners, and using data) 4. Provide enhanced support for families with youth that may be particularly vulnerable to bullying, including LGBTQ youth, youth with disabilities, and immigrant or refugee youth 5. Encourage family meals and other opportunities for connection within families so that youth may feel more comfortable disclosing involvement in bullying and be buffered from the negative consequences of bullying	How to Talk about Bullying | Stopbullying.gov CDC Striving to Reduce Youth Violence Everywhere (STRYVE) Incredible Years "The parent training series targets high-risk parents and children as well as those children displaying behavior problems. Program protocols include prevention and treatment versions of intervention with dosage adjusted according to family and child risk factors." *Blueprints for Healthy Youth Development:* ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 3.6-3.7/4.0* Raising Healthy Children "A preventive intervention with teacher, parent, and child components, designed to promote positive youth development by enhancing protective factors, reducing identified risk factors, and preventing problem behaviors and academic failure…Parent training and involvement includes five-session parenting group workshops, selected topic workshops, and in-home problem-solving sessions." *Blueprints for Healthy Youth Development:* ***Promising****, CrimeSolutions.gov:* ***Promising*** Coping Power "The Parent component teaches parents skills to manage stress, identify disruptive child behaviors, effectively discipline and reward their children, establish effective communication structures, and manage child behavior outside the home." *Blueprints for Healthy Youth Development:* ***Promising****, CrimeSolutions.gov:* ***Promising****, OJJDP Model Programs:* ***Promising***	1. Parent / Family – training, consultation 2. Parent / Family – training, consultation 3. Community – presentations / meetings, training, events; Parent / Family – notification / information materials 4. Parent / Family – consultation 5. Parent / Family – notification / information materials, consultation	1. Emerging Evidence – The Incredible Years is rated promising by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, effective by OJJDP Model Programs, and 3.6-3.7/4.0 by NREPP. Raising Healthy Children is rated promising by Blueprints for Healthy Youth Development and promising by CrimeSolutions.gov. Coping Power is rated promising by Blueprints for Healthy Youth Development, promising by CrimeSolutions.gov, and promising by OJJDP Model Programs. 2. Moderate Evidence -- Brief Strategic Family Therapy is a SAMHSA Model Program. Positive Family Support-Family Check-Up is rated promising by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, and effective by OJJDP Model Programs. Functional Family Therapy is rated a model by Blueprints for Healthy Youth Development, effective by CrimeSolutions.gov, and effective by OJJDP Model Programs. 3. Expert Opinion – CDC STRYVE 4. Expert Opinion -- National Association of School Psychologists. (2012). Bullying Prevention and Intervention in Schools: Position Statement.

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD5 (cont.): Development and reinforcement of safe and supportive family environments that foster positive social skills and resiliency	**SD1 (cont.):** Support for parents and caregivers to teach their children positive interpersonal skills, social competence, and model positive and supportive, nonviolent relationships		Brief Strategic Family Therapy "A short-term, problem-focused therapeutic intervention targeting children and adolescents 6 to 17 years old, that improves youth behavior by eliminating or reducing drug use and its associated behavior problems and that changes the family members' behaviors that are linked to both risk and protective factors related to substance use." *SAMHSA Model Program (Lawner, E.K. and Terzian, M.A., ChildTrends, What Works for Bullying Programs: Lessons from Experimental Evaluations of Programs and Interventions, October 2013, Publication #2013-39), NREPP:* ***3.0-3.4/4.0***		5. Emerging Evidence – Bradshaw, C.P. (2015). Translating Research to Practice in Bullying Prevention. American Psychologist. (70)4:322-332. Involving Families and Communities, p. 326.
	SD2: Engagement of parents, other family members and caregivers in school-based bullying prevention efforts	1. Hold bullying prevention information sessions and distribute materials to parents/caregivers to increase awareness of school-based bullying prevention efforts. 2. Hold information sessions that include specific information on cyberbullying prevention/intervention and teaching digital citizenship to expand the role that parents play in cyberbullying prevention (e.g., monitoring, rule-setting, positive and ongoing communication) 3. Support schools in getting buy-in and cooperation from parents by providing sample communications materials to enhance the delivery of prevention information through letters from teachers, newsletters, and information on the school website; create a toolkit with sample materials 4. Ensure that parents/caregivers whose children are involved in bullying (whether they are bullied, bully other children, or both) are given constructive consultations with school administrators and referred to appropriate counseling services to address the negative emotional consequences of bullying, e.g., Bully-Proofing Your School	Positive Family Support-Family Check-Up "A family-based, 3-tiered intervention that targets adolescent problem behavior at the universal, selected, and indicated levels. Goals are to reduce problem behavior and risk for substance abuse and depression, improve family management practices and communication skills as well as adolescents' self-regulation skills and prosocial behaviors." This program includes a Family Resource Center and was formerly called the Adolescent Transitions Program. *Blueprints for Healthy Youth Development:* ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective*** Functional Family Therapy "A short-term family therapy intervention and juvenile diversion program helping at-risk children and delinquent youth to overcome adolescent behavior problems, conduct disorder, substance abuse and delinquency." *Blueprints for Healthy Youth Development:* ***Model****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective***	1. Parent / Family – notification / information materials 2. Parent / Family – notification / information materials 3. Parent / Family – notification / information materials 4. Parent / Family – consultation 5. Parent / Family – training	1. Expert Opinion – Stopbullying.gov Understanding the Role of Parents and Caregivers in Community-wide Bullying Prevention Efforts; Bradshaw, C.P. (2015). Translating Research to Practice in Bullying Prevention. American Psychologist. (70)4:322-332. Involving Families and Communities, p. 326.; Lawner, E.K. and Terzian, M.A., ChildTrends, *What Works for Bullying Programs: Lessons from Experimental Evaluations of Programs and Interventions*, October 2013, Publication #2013-39), 2. Expert Opinion – Stopbullying.gov Understanding the Role of Parents and Caregivers in Community-wide Bullying Prevention Efforts 3. Innovation 4. Expert Opinion – National Association of School Psychologists. (2012). Bullying Prevention and Intervention in Schools: Position Statement.

Primary Driver	Secondary Driver	Change Ideas	Resources	STE Intervention Themes	Evidence Continuum (Adapted from STE)
PD5 (cont.): Development and reinforcement of safe and supportive family environments that foster positive social skills and resiliency	**SD2 (cont.):** Engagement of parents, other family members and caregivers in school-based bullying prevention efforts	5. Train parents in how to effectively communicate concerns about bullying to schools and how to be actively involved in school-based prevention efforts			5. Expert Opinion -- Stopbullying.gov Understanding the Role of Parents and Caregivers in Community-wide Bullying Prevention Efforts; Bradshaw, C.P. (2015). Translating Research to Practice in Bullying Prevention. American Psychologist. (70)4:322-332. Involving Families and Communities, p. 326.

* Excerpts of program descriptions are taken from the source underscored in the program title.

APPENDIX

Evidence-Based and Evidence-Informed Programs and Practices for Bullying Prevention: A Review of the Evidence on Bullying Prevention

Evidence-Based and Evidence-Informed Programs and Practices for Bullying Prevention: A Review of the Evidence on Bullying Prevention

As an initial step in preparation for the development of a bullying prevention change package, a list of evidence-informed and evidence-based programs and practices was compiled that utilized a public health approach to bullying prevention. This list will be used as a basis for guiding the development of the change package and may also be adapted to serve as an additional resource to accompany the change package. In creating this list, we took a broad approach gathering information on programs and practices that were directly related to bullying prevention, but also included relevant programs which had outcomes related to bullying but were not specifically designed as bullying prevention programs (for example, programs designed to prevent school violence). In addition, we included programs and practices with promising or favorable evidence as reflected by their inclusion in various registries of evidence-based programs. Not all of these programs have been evaluated rigorously through experimental studies. Our aim was to compile a broader list of programs and practices that show promise as evidence-informed or evidence based in order to inform the development of the change package and provide a range of strategies that states may choose to pursue.

In compiling the list of programs and practices, we reviewed the following registries of best practices: the University of Colorado Boulder-Institute of Behavioral Science's Blueprints for Healthy Youth Development, the Substance Abuse and Mental Health Services Administration's (SAMHSA) National Registry of Evidence-based Programs and Practices (NREPP), the National Institute of Justice's CrimeSolutions.gov, and the Institute of Education Science's What Works Clearinghouse. We also reviewed the following reports: *Preventing Bullying Through Science, Policy, and Practice*, Chapter 5: Preventive Interventions, from The National Academies of Sciences, Engineering, and Medicine (NASEM) (Rivara, & Le Menestrel, 2016; DOI: 10.17226/23482) as well as the *Strengthen the Evidence for Maternal and Child Health Programs: National Performance Measure 9 Bullying Evidence* Review, from the Women's and Children's Health Policy Center at Johns Hopkins University (Lai et al., 2016). Programs that targeted traditional bullying, other forms of school violence, and programs designed to prevent cyberbullying are included in this list. Programs that target multiple settings are listed more than once. The source of the quoted program description is listed first in the italicized reviews for each program.

Community and After-School Settings

Al's Pals: Kids Making Healthy Choices

"The program has been implemented in approximately 4,000 early childhood classrooms, in more than 700 elementary schools, in more than 250 school districts. An additional 700 preschools, child care centers, Head Start programs, after-school programs, faith-based programs, and other community-based child-serving organizations have used the intervention."
NREPP: 2.9-3.0/4.0

Bringing in the Bystander

"The Bringing in the Bystander program is typically implemented over 4.5 hours during the course of several sessions, but an abbreviated 90-minute version is also available. A booster session may be delivered after 2 months. The program's content is made up of several elements that work to increase awareness of sexual and intimate partner violence, and to promote prosocial attitudes and behaviors aimed at preventing and intervening in such instances."
CrimeSolutions.gov: ***Promising***

Communities that Care

"The Communities That Care (CTC) prevention system is a community-level intervention that mobilizes stakeholders to collaborate on selecting and implementing evidence-based prevention programs designed to prevent youth problem behaviors, such as substance abuse and delinquency. CTC is installed in communities through a series of six training events delivered over the course of 6-12 months by certified CTC trainers."
NREPP 3.2-3.6/4.0

Incredible Years

"A teacher classroom management program that provides teachers with classroom management strategies (positive and proactive teaching techniques, positive teacher-student relationships, and supportive teacher-parent relationships) to manage difficult and inappropriate child behavior problems, while promoting social, emotional, and academic competence."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 3.6-3.7/4.0*

Positive Action

"The program has been used in school settings, before- and after-school programs, social service agencies, detention centers, home schooling, youth programs, family and juvenile justice agencies, correctional institutions, probation and parole settings, mental health and welfare agencies, faith-based organizations, public housing developments, and other programs specifically for high-risk, at-risk, special-needs, and disadvantaged individuals, families, schools, and communities, including court-mandated family groups."
CrimeSolutions.gov: ***Effective****, Blueprints for Healthy Youth Development:* ***Model****, What Works Clearinghouse:* ***Positive***

Promoting Alternative Thinking Strategies

"A classroom-based social emotional learning program for elementary students to reduce aggression and behavior problems in children. The PATHS curriculum teaches skills in five conceptual domains: self-control, emotional understanding, positive self-esteem, relationships, and interpersonal problem solving."
Blueprints for Healthy Youth Development: ***Model****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 2.6-3.2/4.0*

Raising Healthy Children

"Parent training and involvement include five-session parenting group workshops, selected topic workshops, and in-home problem-solving sessions. Topics for parent training include family management skills and 'How to Help Your Child Succeed in School.'"
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Promising***

SNAP® Under 12 Outreach Project

"A multisystemic intervention for boys under age 12 displaying aggressive and antisocial behavior problems." Includes boys group and individual befriending and mentoring.
CrimeSolutions.gov: ***Effective***

Triple P System

Triple P is delivered to parents "in 1-10 or more sessions tailored to the severity of the family's dysfunction and/or child's behavioral problems."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective***

Family and Parent

Brief Strategic Family Therapy

"A short-term, problem-focused therapeutic intervention targeting children and adolescents 6 to 17 years old, that improves youth behavior by eliminating or reducing drug use and its associated behavior problems and that changes the family members' behaviors that are linked to both risk and protective factors related to substance use."
SAMHSA Model Program (Lawner, E.K. and Terzian, M.A., ChildTrends, What Works for Bullying Programs: Lessons from Experimental Evaluations of Programs and Interventions, October 2013, Publication #2013-39), NREPP: 3.0-3.4/4.0

Bully-Proofing Your School

From CrimeSolutions.gov, "Parents are offered information through newsletters and are given a consultation if their children are victims or perpetrators of bullying."
CrimeSolutions.gov: ***Promising***

Coping Power

"The Parent component teaches parents skills to manage stress, identify disruptive child behaviors, effectively discipline and reward their children, establish effective communication structures, and manage child behavior outside the home."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Promising****, OJJDP Model Programs:* ***Promising***

Functional Family Therapy

"A short-term family therapy intervention and juvenile diversion program helping at-risk children and delinquent youth to overcome adolescent behavior problems, conduct disorder, substance abuse and delinquency."
Blueprints for Healthy Youth Development: ***Model****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective***

Incredible Years

"Three training programs are available for parents of babies and toddlers (up to 30 months), preschoolers (3-5 years), and school-age children (6-12 years)… The programs focus on strengthening parent-child interactions and relationships, reducing harsh discipline, and fostering parents' ability to promote children's social, emotional, and language development."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 3.6-3.7/4.0*

Multisystemic Therapy

"A juvenile crime prevention program to enhance parenting skills and provide intensive family therapy to troubled teens and delinquent teens that empower youth to cope with the family, peer, school, and neighborhood problems they encounter - in ways that promote prosocial behavior while decreasing youth violence and other antisocial behaviors."
Blueprints for Healthy Youth Development: ***Model Plus****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 2.9-3.2/4.0*

Positive Action

"The program is designed to improve youth academics, behavior, and character, and can be used by schools, families, or communities. PA uses an audience-centered, curriculum-based approach to increase positive behaviors and decrease negative ones." *CrimeSolutions.gov:* ***Effective****, Blueprints for Healthy Youth Development:* ***Model****, What Works Clearinghouse:* ***Positive Effect***

Positive Family Support-Family Check-Up

"A family-based, 3-tiered intervention that targets adolescent problem behavior at the universal, selected, and indicated levels. Goals are to reduce problem behavior and risk for substance abuse and depression, improve family management practices and communication skills as well as adolescents' self-regulation skills and prosocial behaviors." This program includes a Family Resource Center and was formerly called the Adolescent Transitions Program.
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective***

Promoting Alternative Thinking Strategies

"A classroom-based social emotional learning program for elementary students to reduce aggression and behavior problems in children. The PATHS curriculum teaches skills in five conceptual domains: self-control, emotional understanding, positive self-esteem, relationships, and interpersonal problem solving."
Blueprints for Healthy Youth Development: ***Model****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 2.6-3.2/4.0*

Raising Healthy Children

"Parent training and involvement includes five-session parenting group workshops, selected topic workshops, and in-home problem-solving sessions. Topics for parent training include family management skills and 'How to Help Your Child Succeed in School.'"
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Promising***

SNAP® Under 12 Outreach Project

"A multisystemic intervention for boys under age 12 displaying aggressive and antisocial behavior problems." Includes boys group and individual befriending and mentoring.
CrimeSolutions.gov: ***Effective***

Triple P System

Triple P is delivered to parents "in 1-10 or more sessions tailored to the severity of the family's dysfunction and/or child's behavioral problems."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective***

Health Care Environments

Brief Strategic Family Therapy

"A short-term, problem-focused therapeutic intervention targeting children and adolescents 6 to 17 years old that improves youth behavior by eliminating or reducing drug use and its associated behavior problems and that changes the family members' behaviors that are linked to both risk and protective factors related to substance use."
SAMHSA Model Program (Lawner, E.K. and Terzian, M.A., ChildTrends, What Works for Bullying Programs: Lessons from Experimental Evaluations of Programs and Interventions, October 2013, Publication #2013-39) NREPP: 3.0-3.4/4.0

Functional Family Therapy

"A short-term family therapy intervention and juvenile diversion program helping at-risk children and delinquent youth to overcome adolescent behavior problems, conduct disorder, substance abuse and delinquency."
Blueprints for Healthy Youth Development: ***Model****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective***

Incredible Years

"Three training programs are available for parents of babies and toddlers (up to 30 months), preschoolers (3-5 years), and school-age children (6-12 years)… The programs focus on strengthening parent-child interactions and relationships, reducing harsh discipline, and fostering parents' ability to promote children's social, emotional, and language development… Each program includes protocols for use as a prevention program or as a treatment program for children with conduct problems and attention-deficit/hyperactivity disorder."*Blueprints for Healthy Youth Development:* ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 3.6-3.7/4.0*

Multisystemic Therapy

"A juvenile crime prevention program to enhance parenting skills and provide intensive family therapy to troubled teens and delinquent teens that empower youth to cope with the family, peer, school, and neighborhood problems they encounter - in ways that promote prosocial behavior while decreasing youth violence and other antisocial behaviors."
Blueprints for Healthy Youth Development: ***Model Plus****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 2.9-3.2/4.0*

Raising Healthy Children

"Parent training and involvement include five-session parenting group workshops, selected topic workshops, and in-home problem-solving sessions. Topics for parent training include family management skills and 'How to Help Your Child Succeed in School.'"
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Promising***

Triple P System

Triple P is delivered to parents "in 1-10 or more sessions tailored to the severity of the family's dysfunction and/or child's behavioral problems."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective***

Schools

4th R Curriculum

"An interactive classroom curriculum that aims to reduce youth dating violence by addressing youth violence and bullying, unsafe sexual behavior, and substance use." *CrimeSolutions.gov:* ***Promising****, NREPP: 2.6-3.0/4.0*

Al's Pals: Kids Making Healthy Choices

"A school-based prevention program that seeks to develop social-emotional skills such as self-control, problem-solving, and healthy decision-making in children ages 3-8 in preschool, kindergarten, and first grade."
NREPP: 2.9-3.0/4.0

Bully-Proofing Your School

"A school-based intervention program focused on reducing instances of bullying and victimization, while increasing the safety of students in grades 3–5."
CrimeSolutions.gov: ***Promising***

Cognitive Behavioral Intervention for Trauma in Schools

"A 10-session group intervention provided by mental health professionals to reduce children's post-traumatic stress disorder (PTSD), depression and anxiety resulting from exposure to violence. Also included are 1-3 individual child sessions, 2 optional parent sessions, and a teacher educational session."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 3.0-3.4/4.0*

ConRed Program

"A theory-driven program designed to prevent cyberbullying and improve cyberbullying coping skills."
See abstract at: http://www.ijcv.org/index.php/ijcv/article/viewArticle/250
NASEM, also reviewed in Strengthen the Evidence

Coping Power

"Coping Power is a 16-month program delivered during the 5th and 6th grade school years. Children attend 22 group sessions in 5th grade and 12 group sessions in 6th grade."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Promising****, OJJDP Model Programs:* ***Promising***

Cyber Friendly Schools

"A whole-school, online cyberbullying prevention and intervention program that is based on a social-ecological approach and considers the many factors that influence students' vulnerability to cyberbullying at multiple levels."
NASEM, also reviewed in Strengthen the Evidence

Good Behavior Game

"A classroom behavior management game providing a strategy to help elementary teachers reduce aggressive, disruptive behavior and other behavioral problems in children, particularly highly aggressive children, while creating a positive and effective learning environment." See also: http://paxgoodbehaviorgame.promoteprevent.org/
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 3.1-3.2/4.0.*

Incredible Years
"A teacher classroom management program that provides teachers with classroom management strategies (positive and proactive teaching techniques, positive teacher-student relationships, and supportive teacher-parent relationships) to manage difficult and inappropriate child behavior problems, while promoting social, emotional, and academic competence."
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 3.6-3.7/4.0*

KiVa Antibullying Program

"An elementary school-based program to reduce school bullying and victimization. The program was designed for national use in Finnish schools." See abstract at: http://www.tandfonline.com/doi/abs/10.1080/15374416.2013.787623
CrimeSolutions.gov: ***Promising****, Blueprints for Healthy Youth Development:* ***Promising****, also reviewed in Strengthen the Evidence*

The Leadership Program's Violence Prevention Project
"A school-based prevention program, targeting 12 and 16 year olds, designed to prevent violence by enhancing conflict-resolution skills."
Crimesolutions.gov: ***Promising****, NREPP: 3.4/4.0*

Media Heroes
"A universal, modularized, and theoretically based preventive intervention for the school context that builds on previous knowledge about potential risk and protective factors such as cognitive and affective empathy." This program includes teacher-led curricular activities including role-playing, debates, analyses of written stories, news and films, cooperative learning, and students-parent presentations. See abstract at: http://link.springer.com/article/10.1007/s11121-013-0438-y
NASEM, also reviewed in Strengthen the Evidence

No Trap! Program

"A school-based intervention, and utilizes a peer-led approach to prevent and combat both traditional bullying and cyberbullying."
NASEM, also reviewed in Strengthen the Evidence

Open Circle

"A curriculum-based program for youth in kindergarten through grade 5, is designed to strengthen students' social and emotional learning (SEL) skills related to self-awareness, self-management, social

awareness, interpersonal relationships, and problem solving and to foster safe, caring, and highly engaging classroom and school communities."
NREPP: 2.1-2.7/4.0

Olweus Bullying Prevention Program

"A bullying prevention program that includes schoolwide, classroom, individual, and community strategies that create a safe and positive school climate, improve peer relations, and increase awareness of and reduce the opportunities and rewards for bullying behavior. This anti-bullying program offers activities designed for use in elementary, middle, junior and high schools."
Blueprints for Healthy Youth Development: ***Promising,*** *also reviewed in Strengthen the Evidence*

Point Break

"A 1-day workshop for middle and high school students that aims to promote resiliency, break down educational and social barriers between youth, and ultimately, reduce campus violence by teaching the value of conflict resolution and respect for others."
NREPP: 2.1-2.4/4.0

Positive Action

"The program is designed to improve youth academics, behavior, and character, and can be used by schools, families, or communities."
CrimeSolutions.gov: ***Effective****, Blueprints for Healthy Youth Development:* ***Model****, What Works Clearinghouse:* ***Positive Effects***

Positive Family Support-Family Check-Up

"A family-based, 3-tiered intervention that targets adolescent problem behavior at the universal, selected, and indicated levels. Goals are to reduce problem behavior and risk for substance abuse and depression, improve family management practices and communication skills as well as adolescents' self-regulation skills and prosocial behaviors." This program includes a Family Resource Center and was formerly called the Adolescent Transitions Program.
Blueprints for Healthy Youth Development: ***Promising****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective***

Promoting Alternative Thinking Strategies

"A classroom-based social emotional learning program for elementary students to reduce aggression and behavior problems in children. The PATHS curriculum teaches skills in five conceptual domains: self-control, emotional understanding, positive self-esteem, relationships, and interpersonal problem solving."
Blueprints for Healthy Youth Development: ***Model****, CrimeSolutions.gov:* ***Effective****, OJJDP Model Programs:* ***Effective****, NREPP: 2.6-3.2/4.0*

Safe & Civil Schools Positive Behavioral Interventions and Support Model

"A multicomponent, multitiered, comprehensive approach to schoolwide improvement. Integrating applied behavior analysis, research on effective schools, and systems change management theory, the intervention is an application of positive behavior support (PBS), a set of strategies or procedures designed to improve behavior by employing positive and systematic techniques."
NREPP: 2.0-3.6/4.0

Safe School Ambassadors

"A bystander education program that aims to reduce emotional and physical bullying and enhance school climate in elementary, middle, and high schools. The program recruits and trains socially influential student leaders from diverse cliques and interest groups within a school to act as 'Ambassadors' against bullying."
NREPP: 1.8-2.0/4.0

Second Step®: A Violence Prevention Curriculum

"A universal prevention program designed to reduce impulsive and aggressive behavior in children and adolescents by increasing their social competency skills. Students are taught to reduce impulsive, high-risk, and aggressive behaviors and increase their socioemotional competence and other protective factors. The program is composed of three grade-specific curricula: preschool/kindergarten (Pre-K), elementary school (grades 1–5), and middle school (grades 6–8)."
*CrimeSolutions.gov: **Effective**, NREPP: **Promising**, also reviewed in Strengthen the Evidence*

SNAP® Under 12 Outreach Project

"A multisystemic intervention for boys under age 12 displaying aggressive and antisocial behavior problems." Includes boys group and individual befriending and mentoring.
*CrimeSolutions.gov: **Effective***

Success in Stages® Program

"A multicomponent, bullying intervention package that incorporated all students' involved—victims, passive bystanders, and bullies—to reduce the occurrences of bullying and create a climate of respect in school. SIS offered three different versions of the Build Respect, Stop Bullying® program, each of which was specifically tailored for elementary, middle, or high school students."
*CrimeSolutions.gov: **Promising***

Steps to Respect®

"A school-based antibullying program that teaches social and emotional management skills to elementary school students. The goal is to help improve relationships and buffer the detrimental effects of bullying."
*CrimeSolutions.gov: **Effective**, Blueprints for Healthy Youth Development: **Promising**, NREPP: 2.9-3.0/4.0*

Stop School Bullying (Greece)

"The Stop School Bullying program was a preventative school-based program for elementary school students in 4th through 6th grades, approximately between the ages of 9 and 12. The goal of the program was to increase awareness of the impact of bullying, increase empathy toward victims, and ultimately reduce rates of bullying and victimization."
CrimeSolutions.gov: ***Effective***

Too Good for Violence (TGFV)

"Promotes character values, social-emotional skills, and healthy beliefs in elementary and middle school students. The program includes seven lessons per grade level for elementary school (K–5) and nine lessons per grade level for middle school (6–8). All lessons are scripted and engage students through role-playing and cooperative learning games, small group activities, and classroom discussions."
What Works Clearinghouse: ***Potentially Positive Effects****, NREPP: 2.9/4.0*

Viennese Social Competence Program (ViSC)

"A primary preventive program that includes secondary prevention elements to reduce aggressive behaviors and bullying and to foster social and intercultural competencies in schools." Abstract found at: http://www.tandfonline.com/doi/abs/10.1080/15388220.2014.963231
NASEM, also reviewed in Strengthen the Evidence

Virginia Student Threat Assessment Guidelines

"A school-based manualized process designed to help school administrators, mental health staff, and law enforcement officers assess and respond to threat incidents involving students in kindergarten through 12th grade and prevent student violence. V-STAG is also designed to provide students involved in threat incidents with appropriate mental health counseling services, with parental involvement, and reduce the numbers of long-term school suspensions or expulsions and alternative school setting placements. V-STAG also aims to reduce in-school bullying infractions and provide a supportive school climate."
NREPP: 2.5-3.1/4.0

WITS Primary Program

"A community-based, schoolwide peer-victimization-prevention program aimed at children in grades 1 through 3 that targets socially competent behaviors and risks for peer victimization. The goal of the program is to create responsive communities that provide children with safe and positive choices when faced with peer conflicts and reliable adult assistance to ultimately prevent peer victimization."
CrimeSolutions.gov: ***Promising***

Additional Programs from *Strengthen the Evidence*

The following programs were reviewed in the *Strengthen the Evidence* report and are included in this document because they fall into the category of "evidence-informed" based on the evidence continuum, and they show some positive findings with respect to reductions in bullying victimization and/or perpetration. These programs were not found in any of the best practice registries reviewed.

Social Support System

A two-year, whole-school bullying intervention initiative. "A bullying reporting and response system" including "viewing of student-made video, interactive assemblies, class discussion, presentation of SSS to students and parents." Abstract: http://www.sciencedirect.com/science/article/pii/S0191491X11000034

Take the Lead

"A 16-session "teacher-led classroom curriculum designed to increase social competencies, including self-awareness, self-management, social-awareness, relationship skills, decision making, problem solving, and leadership." Abstract: http://onlinelibrary.wiley.com/doi/10.1111/josh.12047/full

Cyberprogram 2.0

"Adult-led sessions focused on reducing bullying/cyberbullying (identify and conceptualize bullying/cyberbullying; analyze consequences of bullying/cyberbullying; develop coping strategies and positive attributes) followed by discussion and guided reflection." Abstract: https://www.ncbi.nlm.nih.gov/pubmed/25633769

Creating a Safe School (CASS; The Ophelia Project)

A "whole-school, mentor-delivered intervention to promote socioemotional competence and decrease relational aggression (RA)" including staff training on effective strategies to reduce RA, "mentor-led classroom lessons to promote empathy and perspective taking, challenge beliefs about bullying behaviors, and provide opportunities to practice skills related to reducing RA and empowering bystanders to take positive stand against aggression" and a school task force to review policies, implement strategies to increase accountability, and raise awareness. Abstract: http://www.sciencedirect.com/science/article/pii/S0191491X11000034

Social Norms Intervention

Includes "print media posters displaying positive messages regarding bullying norms at each school based on results from pretest survey." Abstract: http://journals.sagepub.com/doi/abs/10.1177/1368430210398004

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