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Chapter 12

DEVELOPING A COMPREHENSIVE, EVIDENCE-BASED STRATEGY FOR VIOLENCE PREVENTION: LESSONS LEARNED FROM ALBERTA, CANADA

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ABSTRACT

. Many of the precursors of domestic violence emerge in childhood and adolescence when the skills and behaviors that govern relationships are acquired. Subsequently, supporting the development of healthy relationship skills among children and youth is a key lever for primary prevention of domestic violence. Social and emotional learning (SEL) provides a helpful and complementary framework for violence prevention, as it focuses on developing the core processes by which children and youth learn to regulate emotions, care for others, develop healthy relationships, and make good choices. In the province of Alberta, Canada, this approach is currently being implemented and tested through a population-based, multi-level strategy designed to promote socio-emotional learning in youth and create the socio-cultural resources and supports required to ensure success of the strategy.

INTRODUCTION

The Alberta Healthy Youth Relationships Strategy (AHYR) is comprised of seven interventions aimed at multiple levels, including individual, family, community and system level. Now three years into implementation, the AHYR Strategy is a rich case example, one

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that offers insights for other jurisdictions interested in developing a comprehensive approach to primary prevention of domestic violence. This chapter describes the first three years of implementation of the AHYR Strategy starting with a description of the development of the strategy, which began with the identification of an evidence-based program (the Fourth R [Relationship]). Comprised of school and community programs, the Fourth R has been shown to decrease dating violence, reduce peer violence among maltreated youth, and increase peer resistance skills. Research suggests that effective primary prevention strategies extend well beyond individual and programmatic interventions. For this reason, six other interventions were designed to promote family, community and system level change. These include: the development of parent resources; coordination of school-based and local programs; local leadership development and cohort training; development of curricula to train teachers; policy development and advocacy; and the development of a mechanism for ongoing coaching and technical support for adults that work with youth. This chapter outlines each of the interventions comprising the AHYR Strategy, and highlights the successes, challenges and learnings associated with each.

Development of the Alberta Healthy Youth Relationships Strategy

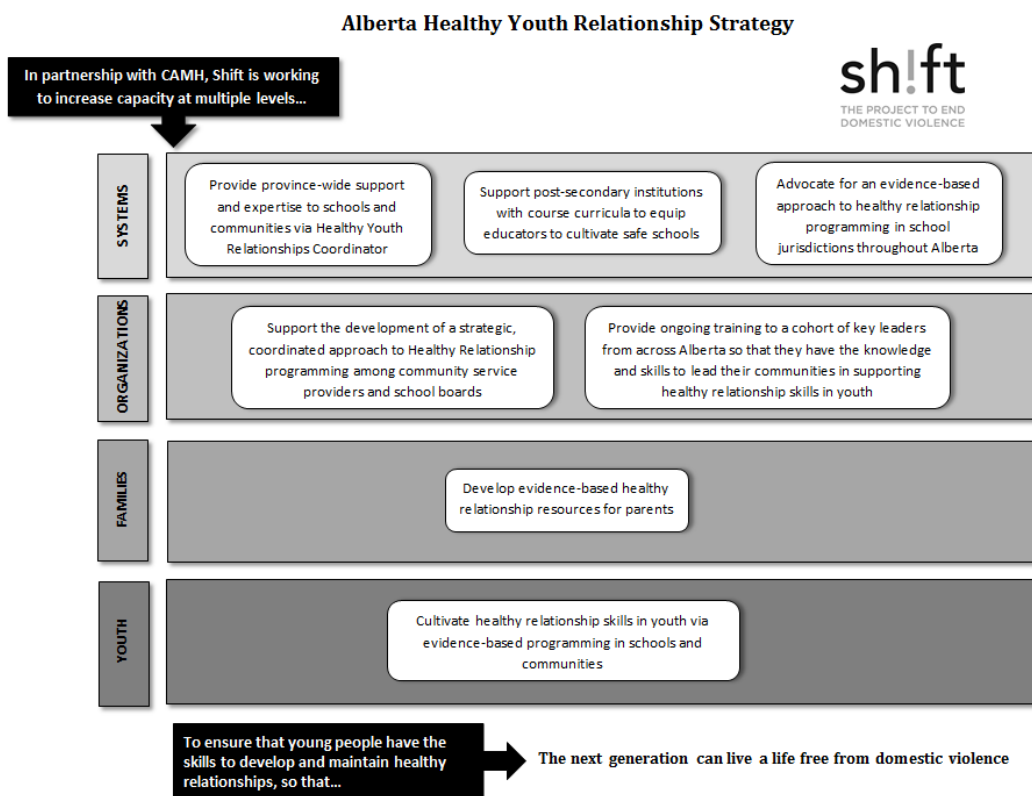
The AHYR Strategy is led by Shift: The Project to End Domestic Violence (www.preventdomesticviolence.ca). Located in the Faculty of Social Work at the University of Calgary in Alberta, Canada, Shift is a primary prevention initiative designed to stop domestic violence before it starts by developing, implementing and scaling up best and promising primary prevention practices and strategies in partnership with researchers, government, systems and civil society. Spanning the intersection between the academy, community and government, Shift is uniquely positioned to promote evidence-based policy and practice, and support broad-based social change. Shift focuses its efforts on policy, legislative, systems, and community change, exploring from multiple entry points the issue of preventing domestic violence.

Shift worked with several partners in developing and implementing the AHYR Strategy, including the Government of Alberta (GOA) and the Centre for Addiction and Mental Health Prevention Science (CAMH) in London, Ontario. Strategy development began with the identification of a best practice program: The Fourth R. The Fourth R is an SEL initiative that includes a range of healthy relationships programs developed for school and community settings for grades 7 to 12. It is based on the contention that relationship skills can be taught the same way as many other academic or athletic skills – through breaking down the steps and giving youth lots of guided practice (Wolfe, Jaffe, and Crooks 2006).

The Fourth R team has published numerous studies evaluating the program and its implementation. The initial cluster Randomized Controlled Trial (RCT) included over 1700 students aged 14 to 15 years. Students were surveyed before receiving programming, and 2.5 years after the program. Results indicated higher rates of physical dating violence perpetration among control (i.e., standard health education) versus intervention (i.e., Fourth R) students at follow-up, and showed that the intervention impact was greater for boys than girls (Wolfe et al., 2009). The Fourth R has also been shown to improve condom use in sexually active boys compared to their counterparts in the control condition (Wolfe et al., 2009) and enhance peer resistance skills (Wolfe, et al., 2012).

Beyond the universal impacts of the Fourth R, there is evidence that the program might have a protective impact for particularly vulnerable youth. Analysis of the RCT data indicated that there was a school-level protective effect for youth with a history of multiple forms of maltreatment with respect to lowering the likelihood of violent delinquency (Crooks et al., 2007). Furthermore, this buffering effect was still evident at the two-year follow-up (Crooks et al., 2011). Similarly, a quasi-experimental evaluation of the Fourth R in Alaska found a similar pattern of increased benefits for youth with significant histories of maltreatment and other adverse experiences (Siebold et al., 2014). These findings provide a promising indication that not only is the Fourth R beneficial for all youth, it may be particularly beneficial for youth who are at highest risk to perpetrate violence based on their own histories of victimization.

The Fourth R is also recognized as a best practice by a number of organizations in the US, including SAMHSA’s National Registry of Evidence-based Programs and Practices, The Office of Juvenile Justice and Delinquency Prevention’s Model Programs Guide, and CASEL. The Public Health Agency of Canada has similarly endorsed the program through its Best Practices Portal. It was the endorsement of these evidence-based review organizations that brought the Fourth R to the attention of Shift.



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Figure 1. Alberta Healthy Youth Relationships Strategy.

Working in partnership with the Government of Alberta (GOA) and CAMH, and supported by many local funders, Shift developed a strategy to scale up the Fourth R program across school jurisdictions throughout the province. However, the team soon realized that a programmatic response, while necessary, was not sufficient to achieve the scope and scale of change required to reduce rates of dating violence. Complex and intractable social problems cannot be solved by focusing solely on interventions at the individual level; the social environments within which individuals are embedded (i.e., families, communities, organizations, and institutions or systems) must also support changes to attitudes, beliefs, knowledge and behaviors if those changes are to last (Bronfenbrenner 1977; Dozois 2014). This is why most models for creating social change emphasize the need for a multi-dimensional approach. For example The Spectrum of Prevention, a key primary prevention model, focuses on activities at multiple levels, including: strengthening individual knowledge and skills; promoting community education; educating service providers and practitioners; fostering coalitions and networks; changing organizational practices; and influencing policy and legislation (Davis, Fugie Parks, and Cohen 2006).

Drawing on the Spectrum of Prevention model, and based on a growing understanding of the key levers for population change, the team developed interventions at multiple levels (Figure 1). These interventions were designed to complement the Fourth R program and embed supports for SEL within families, communities and systems.

This chapter describes the first three years of implementation of the AHYR Strategy, including highlights, challenges and lessons learned.

METHOD

This descriptive study is based on findings from a developmental evaluation of the AHYR Strategy. Developmental evaluation is appropriate in situations characterized by high uncertainty, emergence, social complexity and innovation because it supports a more flexible approach to learning and development than traditional evaluation methods typically provide (Quinn Patton 2011). The AHYR Strategy is highly complex and necessarily emergent as it must be responsive to changing political, social and economic contexts in order to be effective and sustainable. As such, developmental evaluation is the most appropriate approach for this initiative.

The developmental evaluation of the interventions described in this chapter drew on a variety of data sources, including: 1) Program data; 2) Evaluator's field notes (observational data); 3) Written descriptions of key developments and learnings submitted monthly by Shift team members; 4) Select correspondence; and 5) Meeting summaries. In addition, the Developmental Evaluator conducted three rounds of interviews with those involved in developing and implementing the AHYR Strategy – one in November 2012, one in May 2013, and a third in September 2013. Four team members were interviewed at each time interval, including: the Brenda Strafford Chair in the Prevention of Domestic Violence; the Provincial Healthy Youth Coordinator for Alberta; the National Education Coordinator for Fourth R (CAMH); and the process and outcome research consultant. Responses to interview questions were documented in written notes, and those notes were coded both during and after the data collection process to identify broader patterns and themes related to key

developments, challenges, opportunities, and learnings. A member check was conducted after each round; each time, a summary report was written and participants were given the opportunity to correct or extend the findings as appropriate.

In addition to developmental evaluation of the broad strategy, implementation and satisfaction data were systematically collected for the programmatic elements of the strategy (Fourth R and the parenting component). First, implementation data were collected from educators each year to measure the implementation quality and modifications made. The survey used for this purpose has been utilized previously to measure implementation successes, challenges and modifications on a national basis (Crooks, Chiodo, Zwarych, Hughes, and Wolfe 2013). Second, data were collected to assess the uptake and satisfaction of the parent components. To assess the webinars we were able to look at number of viewers, and a small number of parents ($n = 10$) provided feedback through an online survey that was linked to the webinar. In addition, a parent focus group ($n = 7$) was conducted during which the webinars were shown and discussed. The feasibility of the homework assignments was assessed in a small pilot with four schools. Teachers tracked completion rates and parents answered questions about their satisfaction, perceived relevance, and intention to discuss healthy relationships topics with their children in the future.

RESULTS

Highlights and Challenges from Selected Interventions

The AHYR Strategy is comprised of seven interventions. In this section, we describe each of the interventions, and discuss some of the successes and challenges faced in the first three years of implementation (2013-2015).

Intervention One: Cultivate Healthy Relationship Skills in Youth via Evidence-Based Programming in Schools and Community-Based Programs

In partnership with CAMH and the GOA, Shift has been working to scale up the Fourth R program across Alberta, with a goal of targeting 50,000 grade 7, 8 and 9 students over five years. The curricula for each grade level are aligned with the Alberta Education Health and Life Skills Program of Studies outcomes. The core components include three or four units (depending on the grade level): 1) Personal Safety and Injury Prevention, 2) Healthy Growth and Sexuality, 3) Substance Use and Abuse (in grades 7 and 8), and 4) Healthy Eating. Teachers receive a detailed lesson plan and supporting materials for each unit. A wide variety of interactive teaching strategies are used to cover topics within these units, in order to engage youth and help them develop critical thinking skills. The Fourth R lessons and units are taught in sequence, with each lesson building upon the skills presented in earlier lessons. Duration of programming ranges from 28 lessons (45 minutes each) in grades 7 and 8 to 21 lessons (75 minutes each) in grade 9.

Teachers participate in professional development prior to implementing Fourth R resources and strategies. Professional development includes training modules that address

critical social determinants of violence and related risk behaviours, as well as the impact of exposure to violence on youth. Teachers are also provided with the opportunity to actively participate in many of the interactive strategies they will use in the classroom to engage students in partner, small group and whole class activities. High quality training is essential in promoting implementation quality, preferably coupled with a feedback component (Han and Weiss 2005). Within the Fourth R specifically, teachers' perceived preparedness to implement the programming following training has emerged as a major predictor of whether teachers have continued to implement the program with fidelity, even two to seven years after training (Crooks et al., 2013).

In addition to schools, community-based organizations are a key site for healthy relationships programming. The Fourth R includes a community-delivered program called Healthy Relationships Plus Program (HRPP). The HRPP includes 15 sessions designed for youth age 13-18 to learn a variety of healthy relationship skills such as active listening, assertive communication, and apologizing. It also helps youth recognize the differences between unhealthy and healthy relationships and what factors influence decision-making. Shift is working with youth-serving agencies to deliver HRPP in community settings throughout Alberta.

Successes, Challenges and Learnings for Intervention One

The provincial strategy was designed with a scale-up target of 50,000 students (grade 7 to 9) over five years. In the first three years of the strategy, significant strides have been made towards that goal. To date, almost 500 teachers and over 24,000 youth have been trained in 208 schools across 18 school divisions in the Fourth R. Successes include the sheer numbers involved with the scale-up and the high levels of satisfaction expressed by educators. However, good scale-up involves more than numbers (Coburn 2003). Data based on teacher self-report of the lessons and activities completed suggest that, overall, implementation quality has been highly variable and many teachers are not implementing the whole program. Furthermore, the number one identified challenge to implementation is lack of time, even though the number of hours for the program falls well within the required 50 hours for health class that is provided as a provincial directive. In many cases, feedback from teachers suggests that health classes are not being timetabled to match the provincial guidelines. Teachers tend to modify the program by dropping components rather than by strategically altering the curricula. These challenges are not unique to Alberta and have been identified by stakeholders across the country in a study looking at barriers to scale-up (Chiodo, Exner-Cortens, and Crooks 2014). This pattern is also consistent with others' findings that adaptations that occur in the field tend to be reactive and based on logistics, and as such do not typically align with a program's goals and theory (Moore, Bumbarger, and Cooper 2013). Shift is currently testing a number of strategies to improve fidelity, including the provision of more intensive coaching and support and more follow-up with teachers.

Intervention Two: Develop Evidence-Based Healthy Relationship Resources for Parents

A set of parent resources and supports were designed to complement the Fourth R school-based curricula in order to reinforce healthy relationship skills at home. The purpose of the Fourth R parent-level intervention is to increase parents' understanding of the Fourth R and develop a consistent vocabulary and skills for discussing healthy relationships with their children.

Research suggests that it is difficult to engage parents of adolescents in violence prevention activities. Parents have many demands on their time, and they may see their role as less important in their adolescents' socialization compared to when their children were younger (Steinberg 2001). The three parenting components that were developed and piloted for the Alberta strategy were developed with these challenges in mind; each was then evaluated to assess comparative feasibility and uptake. The first approach utilized homework assignments that required collaboration between students and a parent or guardian to complete. The second approach featured the development and dissemination of brief webinars, with a focus on educating parents about adolescent development and highlighting how the Fourth R school-based programming aligns with developmental needs. The third approach was an in-person workshop to teach parents about the Fourth R and provide strategies and skills for supporting healthy relationships with their children. The in-person workshops were created based on the success of previous Fourth R media literacy workshops for parents, which were shown to successfully teach monitoring and media literacy strategies to parents (Broll, Crooks, Burns, Hughes, and Jaffe 2013).

Successes, Challenges and Learnings for Intervention Two

Uptake for the homework assignments in the first two years of implementation was excellent. In the pilot year, data from the six teachers in the homework pilot schools indicated that more than 80% of parents and students completed the assignments. Results from the accompanying survey showed that parents found the assignments relevant and helpful. High rates of completion could be attributed to any number of factors, including: 1) ease of access (i.e., parents can complete the assignments at home); 2) perceptions related to homework as something important and compulsory; 3) opportunity for parents to engage with their youth (versus the two other options that were designed for parents to do on their own). Shift and CAMH will continue to explore promising ways to engage busy parents as reinforcement of the Fourth R skills at home is crucial.

The webinars were also well received by those who participated, but they have not gained as much momentum as we had anticipated. Despite advertisements and additional promotional efforts at schools, we have had fewer than 100 views for both webinars since they became available last year. Because they present such a low-cost option, we will continue to explore barriers to uptake for online modules as a parent-level intervention. The in-person workshops were not an effective way to engage parents due to difficulties with recruitment. The two pilot workshops each attracted approximately 15 parents, which is typical for this type of event. Unlike the webinars, the workshops are resource intensive and will not be a feature of the scale-up moving forward due to costs and workload.

Intervention Three: Support the Development of a Strategic, Coordinated Approach to Healthy Relationship Programming among Community Service Providers and School Boards

The literature on coordinated school-based violence prevention programming focuses on coordination of training and teaching efforts with local resources (i.e., community-based services such as women's shelters, theatre programs, etc.), provision of special resources in individual schools (such as trauma-focused counseling) and specialized personnel that can appropriately liaise between schools and community-based programs (e.g., a coordinator position that can link schools to appropriate violence prevention programming) (Tutty et al., 2005). What the literature fails to explore is how a wide range of organizations, such as government, schools, non-profit organizations, funders and other stakeholders, can work together to develop a local coordinated and strategic approach to violence prevention for children and youth.

A few jurisdictions are beginning to understand the importance of such efforts and have explored ways to develop more comprehensive and coordinated approaches to school-based violence prevention (State of Victoria 2009; VicHealth 2012). Drawing on lessons from the Partners in Prevention initiative in Australia (VicHealth 2012) and applying them to the Alberta context, Shift convened the two largest school systems in Calgary, along with 14 community-based agencies (collectively offering 24 unique prevention programs) and local funders, to develop a strategic and coordinated approach for violence prevention with youth at the local level (Wells, Claussen, Abboud, and Pauls 2012). The purpose of this initiative was to support community-based providers to implement programming that would complement and align with Fourth R, both within schools and in community-based settings. It was also designed to ensure a more intentional approach to the distribution of evidence-based programming in schools so that significant gaps could be addressed across the city. Partners agreed to the approach and identified a three-step plan. First, Shift conducted a review of the literature for best and promising practices for violence prevention/healthy relationships programming for children and youth. At the same time, Shift conducted a scan of the current violence prevention and healthy relationship practices and programs in Calgary offered by schools and community-based organizations. Primary prevention programs were assessed against a checklist to collect information on their dosage, program theory, level of change, and other factors. Finally, the group worked together to develop a local action plan for the strategic development, implementation and distribution of violence prevention programming in schools.

Successes, Challenges and Learnings for Intervention Three

The completion of a local program matrix that outlined the available evidence-based programs within a geographic base provided a way for community-based organizations to assess the impact of their contributions in this area and identify gaps throughout the school jurisdictions. In addition, the matrix indicated that high-risk populations were significantly under-served, which resulted in the development of a plan to better support these vulnerable youth. Several changes were made as a result of this work. In one case, to avoid redundancy

in schools that were implementing Fourth R, a community-based organization chose to stop working with youth in grade 7 to 9 and instead focus their resources on grades 10 to 12, where little programming was available. In another case, an organization assessed its programming against the principles of evidence-based programming identified in the scan, and initiated a process that will result in the redesign of its program offerings.

The biggest challenge in maintaining this coordinated approach and advancing further implementation is to keep the interest and engagement of community-based organizations. Another challenge is the sense of attachment that some funders and service providers appear to maintain for programs that have no evidence of effectiveness and are not designed to align with best practice principles. These attachments are often mired in long organizational and programmatic histories, which can prove to be an obstacle to implementing change. Maintaining a coordinated approach is further complicated by the different philosophies with which organizations approach their work. These philosophies often guide program delivery and may not necessarily be congruent with those of another organization. The coalescence of these challenges fosters the continued funding of ineffective, overlapping programming, which represents an opportunity cost in that it is an inefficient use of resources and in some cases prevents the implementation of more effective programming.

Intervention Four: Provide Ongoing Training to a Cohort of Key Leaders from across Alberta so that they Have the Knowledge and Skills to Lead Their Communities in Promoting and Building Healthy Youth Relationship Skills

While schools are a key site for the development of healthy relationship skills, it is

While schools are a key site for the development of healthy relationship skills, it is critical to reinforce these skills in community settings. With this in mind, Shift worked in partnership with PREVNet and CAMH to train 12 experienced facilitators throughout Alberta to support the implementation of evidence-based practices for promoting healthy youth relationships in their communities. The purpose of this intervention was to create community alignment with the principles of Fourth R and best practices in violence prevention programming throughout Alberta.

Referred to as “Master Trainers,” the goal of this cohort was two-fold: 1) To develop the capacity of the Master Trainers to champion evidence-based practice more broadly and train others who work with youth throughout their community, 2) To develop a Community of Practice of thought leaders who would develop more coordinated approaches between schools and community-based organizations regionally. The cohort was brought together twice a year for two-day training sessions. The content of these sessions included: evidence-based programs and practices (including the Fourth R Healthy Relationships Plus Program (HRPP) and PREVNet’s evidence-informed Healthy Relationship Training Module (HRTM)); leadership development; strategic planning; community development; and evaluative thinking. Master Trainers were expected to facilitate 2-3 HRPP or HRTM workshops per year, and were supported with coaching and guidance from the Healthy Youth Relationships Coordinator. They also had access to an online forum which offered resources and real-time support.

Successes, Challenges and Learnings for Intervention Four

To date 342 adults have been trained in the HRPP and 4,275 youth in Alberta have experienced the specialized program. In addition 401 adults have been trained in the HRTM. The feedback we received from these students and adults has been tremendously positive.

However, while a large number of adults have been trained, the majority of trainings have been conducted by the Provincial Coordinator and not the team of Master Trainers. The Master Trainers required more intensive, consistent coaching than the Shift team had anticipated. While some were able to deliver HRPP and HRTM workshops with the training provided, they required far more support to take a deliberate leadership role within their communities to support local, strategic and coordinated efforts to violence prevention.

Furthermore, the strategy was impeded by significant challenges associated with turnover and sustained engagement. In the first two years, the project lost eight out of the 12 Master Trainers due to position changes, goodness of fit issues, and workload expectations. Changes were made to the recruiting and selection process after the first year to ensure that the training opportunity was offered to those candidates who demonstrated stronger facilitation skills and values that aligned with Shift's primary prevention agenda, as well as those that had stronger organizational support. Another key challenge was time. Four days of training per year was not sufficient to cultivate the confidence and expertise required for senior practitioners to implement the newly acquired skills and content. The need for ongoing coaching and support, as well as more training days, was quickly identified.

Intervention Five: Provide Province-wide Support and Expertise to Schools and Communities via Healthy Youth Relationships Coordinator

Without a system in place to support delivery, best practices are unlikely to be faithfully implemented and sustained (Duncan, Durlak, and Wandersman 2012). Critical to the AHYR Strategy, then, was the development of a Coordinator position, someone who could support the development and implementation of a strategic, coordinated and comprehensive approach to promoting and building healthy youth relationships across Alberta. With funding from the GOA, Shift seconded a former teacher who had been working with one of Alberta's largest school boards to support the integration of Fourth R within schools in that district. (She has since left the team for another position, and has been replaced by another former educator, one who has vast experience with Fourth R including leading an RCT). The Coordinator has been critical in helping to support uptake and fidelity of Fourth R throughout Alberta, and has played a key role in the implementation of the parenting, Master Trainer cohort, and post-secondary interventions. She also works with educators, community service providers, school boards, evaluators, policy makers and funders to provide coaching, technical expertise and ongoing learning opportunities; increase awareness of evidence-based practices related to healthy youth relationships; manage ongoing data collection and stakeholder feedback; and support coordination and collaboration across the province.

Successes, Challenges and Learnings for Intervention Five

Both women who served as the AHYR Coordinator were familiar with the school system, and this insider knowledge and experience was invaluable in helping to create buy-in among educators. The Coordinators were able to speak the language of educators and understand how to navigate the education system. This capacity has been critical to moving the strategy forward. The role has also helped to support uptake and programmatic fidelity, with the Coordinator collecting data to understand how Fourth R is being implemented and tailoring her coaching and support to schools and community-based leaders accordingly.

A challenge is that the AHYR Strategy is provincial in scope, and the level of training and support needed often exceeds the capacity of one person to manage and deliver. Research suggests that a more comprehensive approach to training and technical support would likely increase implementation quality of the school and community-based programs. One study found that teachers' perceptions of being prepared to implement the Fourth R program after training more than doubled the likelihood of high-quality implementation (Crooks et al., 2013). This speaks to the importance of putting in place a system to identify those who either report low self-efficacy following training or are observed to have difficulties early in implementation. Other researchers have found that early monitoring and consultation doubled implementation fidelity for teachers implementing a comprehensive literacy program (Greenwood, Tapia, Abbott, and Walton 2003). One of the few randomized control trials to include different training and technical assistance conditions found that comprehensive technical assistance (composed of on-site coaching and web-based support in addition to the usual workshop) produced better implementation fidelity than the usual workshop alone, although the longer-term impact of this difference is still under investigation (Rohrbach, Gunning, Sun, and Sussman 2010). However, these approaches are resource-intensive, and funding for the project is limited.

Intervention Six: Support Post-Secondary Institutions with Course Curricula to Equip Educators to Cultivate Safe Schools

A programmatic approach to the development of healthy relationship skills in schools is more likely to be effective if the educators themselves have the knowledge and skills required to ensure a safe, healthy and just learning environment (Domitrovich and Greenberg 2009; Kallestad and Olweus 2003). With this in mind, Shift collaborated with the Faculty of Education at the University of Calgary to develop Advancing Healthy and Socially Just Schools and Communities, a graduate-level, four-course interdisciplinary certificate program. The objective of this program is to equip educators, social workers, health care providers, and other community service workers with the knowledge, skills, and confidence necessary to develop safe and caring learning environments inside and outside of formal school settings for all young people. The program has been in development for two years, and will be offered for the first time during the summer semester 2015. Part of the program content was adapted from a course for pre-service teachers that the Fourth R team developed in Ontario, Canada that has been offered over the past decade at Western University. The research team has also met with deans of education faculties from other post-secondary institutions in Alberta about the prospect of offering a similar course.

Successes, Challenges and Learnings for Intervention Six

It is too early to comment on the successes and challenges of the Advancing Healthy and Socially Just Schools and Communities course because it has not yet been piloted, but there are successes and challenges evident in the planning and development stages. The cross-disciplinary nature of the offering is both a strength and a challenge. Working with career professionals from across faculties provides an opportunity to develop a common vocabulary and set of objectives with respect to violence prevention; at the same time, the logistics of coordinating two university department and faculties has proven to be a very time-intensive venture. Moving ahead, the program will only be offered with sufficient enrollment, which can be difficult to achieve with new programs that are not well known. Down the road, it would be ideal to have these types of courses integrated into all of these professional faculties as mandatory courses at the pre-service level; however, in the Ontario example it took nine years to move from an optional course to a mandatory part of pre-service training because of a range of Human Resources, funding, and political considerations.

Intervention Seven: Advocate for an Evidence-Based Approach to Healthy Relationship Programming in School Jurisdictions throughout Alberta

Using a bottom-up approach by working with individual schools to implement evidence-based healthy relationship programming is critical; however, it is equally important to cultivate readiness, understanding, and political will at a systems level. Over the past three years, Shift has invested considerable efforts in developing a robust relationship with the GOA's Ministry of Human Services and was active in helping them redesign their family violence policy framework. The new framework, entitled Family Violence Hurts Everyone: A Framework to End Family Violence in Alberta (Government of Alberta 2013) included key elements of Shift's AHYR Strategy. Shift has been working to develop a similar relationship with the Ministry of Education. A key objective is to work with the provincial government to develop an integrated approach to healthy relationships skills so that socio-emotional learning is integrated into the Alberta education curriculum from kindergarten to grade twelve. In 2014, when the Ministry of Education was in the process of redesigning the Alberta curriculum and amending the Education Act, Shift had an opportunity to present a briefing that outlined recommendations for ways that SEL principles could be integrated at both the legislative and curricula levels.

Successes, Challenges and Learnings for Intervention Seven

The partnership with the Ministry of Human Services has been mutually beneficial: the Ministry has had access to expertise and research on the prevention of domestic violence, while Shift has had access to advice on the best way to work with government, including how to frame and time policy and funding requests. One of the biggest successes associated with Shift's partnership with the Ministry was a new funding allocation of \$29 million by the GOA

to support the new family violence framework in the 2014/15 budget, including funding to support scaling of the Fourth R and the AHYR Coordinator position.

While Shift has made significant progress in its relationship with the Ministry of Human Services, the team is still working to develop a relationship with the Ministry of Education. In Alberta, the Ministry of Education does not endorse specific evidence-based programs, and individual teachers or principals are given full discretion to deliver health programming in the manner they deem fit. Thus, the Ministry has been reluctant to endorse Fourth R and other evidence-based programs. However, bullying prevention is a key priority for the Ministry, and this can be leveraged to promote the importance of integrating SEL principles within the Alberta school curriculum.

CONCLUSION

This chapter has outlined the components, successes and challenges of the first three years of the AHYR Strategy. There are several limitations to the data presented. First, there are still no outcome data for the Fourth R with youth in Alberta, and the evaluations to date have all been conducted by, or in partnership with, the program developers. Second, the interview data from the developmental evaluation were all gathered from individuals who are key stakeholders in the strategy. These individuals know the strategy intimately, but may also be disposed to bias because they are so closely involved. Finally, we are early in the strategy, and the impacts of the different strategies will only become more apparent with the passage of time.

These limitations notwithstanding, the data and examples provided in this chapter highlight the emerging impact of a multi-stakeholder, collaborative approach to preventing violence. The Healthy Youth Relationships Strategy represents Shift's best thinking to this point. However, as the team continues to develop its understanding of the individual, family, organizational, and systemic factors that support or constrain the development of healthy relationship skills in children and youth, Shift will continue to refine current strategies and develop new ones. Thus, the strategy is a living document, one that is intended to reflect our ongoing learning about the best ways to support healthy youth relationships in Alberta.

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