Applying Science. Advancing Practice.

A S A P

Putting Knowledge into Action to Prevent Violence

The Enhanced Evaluation and Actionable Knowledge project is part of an intra-agency agreement between CDC and the Substance Abuse and Mental Health Services Administration (SAMHSA). The purpose of this project was to engage three Garrett Lee Smith Memorial Act grantees* in a process to create products that apply evaluation findings to strengthen suicide prevention practice.

Research to identify what works to prevent violence has been growing for many years. While the evidence of effective strategies is steadily increasing, there is a gap between knowledge that has been generated through studies and evaluations and application of these findings to improve violence prevention practice. Efforts to address this gap are commonly referred to as translation, turning knowledge into action, knowledge transfer, or creating actionable knowledge. Actionable knowledge is the creative intersection between "what" we know and "how" to use what we know in everyday practice (Tenkasi and Hay, 2004). Actionable knowledge can also help build research-based evidence on program effectiveness by strengthening violence prevention programs and increasing their readiness for rigorous evaluation and research.

> *"To be actionable, knowledge must go beyond knowledge for its own sake, and it must lead to behavior change in the form of choice (guiding decisions) or implementation (guiding actions)."*
>
> *—(Blood, 2006)*

Key Principles. Creating actionable knowledge is a process with one primary goal in mind: to bring findings from research and evaluation to the practice-experts within communities who are implementing evidence-based prevention strategies. Research has identified key principles for evidence-based knowledge transfer and exchange. These principles are also important for developing actionable knowledge.

- **What?** Actionable knowledge offers clear, compelling ideas for action backed by a body of rigorous research which points to a best practice or proven strategy. Begin with the simple question: "What do we (the authors, the researchers, the people who have the knowledge?) want our audience (parents, youth, decision makers, etc.?) to do with this information?"

- **Who?** This refers to the audience mentioned above. Who do you want to take the action?

- **How?** Actionable knowledge should be interactive and connect the information to practice in some way. How should the message be delivered so your audience is likely to act on the information?

- **With What Effect?** How will you know the actionable knowledge worked? How can you measure this?

* The three Enhanced Evaluation Actionable Knowledge grantees were 1) Tennessee Lives Count 2) Maine Youth Suicide Prevention Program and 3) the Native American Rehabilitation Association of the Northwest (NARA-NW).

CDC

Connecting the "What" to the "How." Sound research or evaluation findings are critical to inform the "action" of actionable knowledge. The most important thing for the creation of actionable knowledge itself is connecting these research/evaluation findings (or the what) to the actions that will impact community change (or the how). This is achieved with simple, basic facts, derived from research or evaluation findings, combined with practical action steps for applying this new knowledge (see table on page 2).

What does this look like?
The Centerstone Research Institute (CRI) conducted an evaluation of gatekeeper training (the Tennessee Lives Count project) for suicide prevention and developed a detailed report outlining the evaluation design and findings. In order to make these findings more actionable, CRI gathered feedback from people who would be impacted by changes to gatekeeper training and developed an action-oriented toolkit (including checklists, worksheets, surveys, wallet cards, etc.) to help practitioners select, implement and evaluate gatekeeper training programs that fit best in their setting.

Focus, Focus, Focus. Actionable knowledge should be narrowly focused on a specific action to be taken by a specific audience. This specificity often means that only some of the research findings are relevant for one particular actionable knowledge product. Many distinct and unique actionable knowledge products may come from a single research/evaluation report. During the development of any actionable knowledge, one should always check that the information being relayed speaks to the desired action. Any information outside of this narrow focus only distracts from the ultimate goal. Keep the communications and materials brief and simple.

What does this look like?
The Maine Youth Suicide Prevention Program (MYSPP), which implemented and gathered evaluation data on a school-based youth suicide prevention program, found that schools lacked the capacity to keep track of, maintain, and use early identification and referral data for students identified as being at-risk for suicide. From there, MYSPP developed a data entry template for schools to use to streamline communication and increase referrals of at-risk youth to needed services. In order to make their evaluation findings actionable, MYSPP had to focus their actionable knowledge product on one key piece of those findings.

The Life Is Sacred Native Youth Suicide Prevention Program, a collaborative youth suicide prevention program that included tribal leaders and community members in the program development and evaluation processes, was facilitated by the Native American Rehabilitation Association of the Northwest, Inc. (NARA-NW). This project made its program evaluation findings actionable by developing culturally-appropriate tools for tribal leaders, youth serving professionals, and parents of tribal/Native youth. Their example is provided as a guide on the next page. In the blank space provided, begin thinking about your own actionable knowledge.

References

Blood, M. R. (2006). Only You Can Create Actionable Knowledge. Academy of Management Learning &Education, 5(2), 209-212

Centers for Disease Control and Prevention(2008) Strategic Direction for Suicide Prevention: Promoting Individual, Family, and Community Connectedness to Prevent Suicide Behavior. http://www.cdc.gov/violenceprevention/pdf/Suicide_Strategic_Direction_Full_Version-a.pdf

Tenkasi, R. V., & Hay, G. W. (2004). Actionable Knowledge and Scholar-Practitioners: A Process Model of Theory-Practice Linkages. Systemic Practice and Action Research, 17(3), 177-206.

A S A P

	EXAMPLE	YOUR EXAMPLE
	Research: As stated in CDC's Strategic Direction for Suicide Prevention, family connectedness is associated with lower risk in youth for non-suicidal self-harm, suicidal ideation, suicide plans, and non-fatal suicidal behavior.	*Which finding is most valuable to inform the action?* (Research/Evaluation finding informing actionable knowledge. NOTE: It may be one specific finding from a much broader piece of research.)
What? (Action)	Strengthen connection between parents/caregivers and youth by increasing opportunities for family-focused activities.	*What do you want your audience to do with the new knowledge?*
Who?	Parents/caregivers of at-risk youth.	*Who has the most opportunity to take action?*
How?	Through electronic and hard copy materials that can be used in presentations and interactions with parents/caregivers.	*What is the best way to communicate with the audience?*
Effect	Increase in the number of activities youth report sharing with their family. (Pre and post intervention)	*Once action has been taken, what do you hope will be the result?* (An activity, behavior change, etc.)
Result: Actionable Knowledge Product	Life is Sacred Starter Kit* for tribal organizations interested in strengthening the connection between parents/caregivers and youth through increasing the opportunities for family-focused activities.	*What is the product?*

* The Life is Sacred Starter Kit includes a Family Brochure with dissemination talking points for family serving professionals, and Introduction to Suicide Prevention Electronic Presentation Template Policy Makers and Community Members

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