



# *Assessing Program Fidelity and Adaptations*



These materials were created with funding provided by the Connecticut Department of Mental Health and Addiction Services (DMHAS), contract number 1670-4402.

*This toolkit was developed by Michele Cummins, Social Science Research and Evaluation (SSRE), Chelsey Goddard, M.P.H., Education Development Center, Inc. (EDC), Scott Formica, (SSRE), David Cohen, (EDC), and Wayne Harding, Ed. M, Ph. D (SSRE).*

*The authors gratefully acknowledge the contributions of Dianne Harnad, Carol Meredith, and Cheryl Stockford of DMHAS.*

## USING THE REPORT ON FIDELITY AND ADAPTATIONS

Fidelity assessment is a process designed to help program implementers, evaluators, funders, and developers assess changes or adaptations made to a program upon implementation. It can also help implementers anticipate potential adaptations and assist funders in evaluating the appropriateness of such changes.

### Why was this tool created?

The term *fidelity* refers to the “agreement (concordance) of a replicated program or strategy with the specification of the original” (CSAP/DSS, 2001). The term *adaptation* is used to describe any changes or departures from the methodology enlisted in the original implementation of the program or strategy. Assessing fidelity is essential to understanding program impact, and a careful account of how a program was adapted is essential in guiding future attempts at successful implementation. Experience from field-trials (Brounstein 2003, Durlak 1998, Botvin et al., 1995) indicates that adaptations in the form of additions, deletions, and modifications are likely to occur, with potential for either positive or negative consequences.

While instruments exist to track implementation fidelity for some science-based prevention programs, Backer (2001) points out that most studies of program implementation and fidelity concern single administrations of programs at the local level, rather than large-scale implementations at the state or federal level. Additionally, most efforts aimed at assessing fidelity have also focused solely on the replication of existing, individual “model” programs. There has been no standardized, comprehensive, precise, and easy-to-use method for funders, evaluators, or program personnel to assess program fidelity across different program types.

To begin addressing this gap, we developed (1) a universal fidelity tool and (2) a suggested companion process for incorporating fidelity into all aspects of prevention program design, funding, implementation, and evaluation. This work is based on a review of relevant literature, existing instruments such as those generated as part of the Center for Substance Abuse Prevention’s (CSAP) State Incentive Grant (SIG) funding in various states (e.g., Virginia, Connecticut, New Mexico, Minnesota, Vermont), and data on program adaptations collected from 24 Massachusetts SIG programs (Formica and Harding, 2001).

### What are the advantages to this approach?

Our approach to examining program fidelity and adaptations has five critical features:

- 1. It treats fidelity assessment as a long-term process.** Fidelity assessment should begin when a program is first funded and/or implemented and continue throughout implementation. A long-term approach to assessment involves having applicants detail anticipated modifications (if they are implementing an existing program), funders use this information as part of the application review process, and projects request permission for anticipated modifications during

implementation and conduct regular (e.g., every six months) assessments of fidelity to proposed programs.

2. **It distinguishes between “original program” fidelity and fidelity to a “proposed program.”** According to Durlak (1998) and Botvin et al (1995), most implementations are either adaptations or innovations. Yet, some innovations are planned, while others are not. This tool can be used to compare actual implementation—including adaptations—with what was proposed on the funding application.
3. **It is comprehensive, but uncomplicated.** To be useful, a tool must be complex enough to capture all major program changes, yet simple enough to facilitate completion. This tool strikes an effective balance, making it useful to program implementers, funders, and evaluators.
4. **It tracks evaluation changes.** Even when a program is implemented with high fidelity, changes in evaluation procedures (e.g., reduction in sample size) can reduce or enhance the chances of finding significant outcomes. The tool collects information about overall changes/adaptations to the proposed evaluation plan, as well as specific changes to the evaluation design that occur as a result of programmatic changes.
5. **It asks “why?”** By categorizing types of changes and reasons for the changes (e.g., having to truncate the number of sessions of a program due to school scheduling issues or financial restrictions), it becomes possible to group potential adaptations among different types of prevention programs (e.g., mentoring programs, school-based programs) and anticipate probable adaptations before new implementations begin.

### **How can this tool and process help me?**

The Report on Program Fidelity and Adaptations benefits multiple audiences.

#### **Funders can . . .**

- ensure that money is being spent appropriately (i.e. that grantees are doing what they were funded to do.)
- encourage grantees to consider adaptations during the application phase.
- determine whether fidelity should be to the “program” or what was “proposed.”
- *more accurately attribute outcomes to the actual program.*

#### **“Model” program developers can . . .**

- Ensure that their program is being implemented as designed.
- Learn about and disseminate information on effective adaptations.

#### **“Innovative” program developers can . . .**

- create an implementation plan.
- understand necessary/beneficial adaptations.

- *more accurately attribute outcomes to the actual program.*

#### **Program implementers can . . .**

- select a program that is appropriate to the organization's or community's needs and resources.
- anticipate, plan, implement, and track appropriate and beneficial adaptations.
- contribute to the knowledge-base about effective and ineffective adaptations.
- *more accurately attribute outcomes to the actual program.*

#### **Evaluators can...**

- create a realistic and accurate evaluation plan.
- modify the evaluation to accommodate adaptations.
- contribute to the knowledge-base about effective adaptations.
- *more accurately attribute outcomes to the actual program.*

#### **How should I use this tool?**

The tool can be used throughout program planning and implementation.

- At the application stage, applicants can complete the tool to detail anticipated adaptations.
- While implementation is in progress, the program coordinator, in collaboration with other project and evaluation staff, should complete the tool regularly (e.g., every six months) to track adaptations.
- The tool can also be used throughout implementation as a guide for grantees to ask permission to modify their proposed program.

## REPORT ON PROGRAM FIDELITY AND ADAPTATIONS INSTRUCTIONS

### **Purpose of the tool**

The primary purpose of this tool is to track the number, type, and rationale for programmatic changes—and corresponding evaluation changes—made during the course of program implementation.

### **How to complete the tool**

The tool is organized into seven main sections.

*Purpose and Instructions.* This section reviews the tool’s purpose (to track programmatic and evaluative changes), why the tool is important (modifications may lead to different outcomes than those expected if the program were implemented as planned), and instructions for use (e.g., that you will need to complete one set of the tool for each major program component/intervention).

*Administrative Information.* This section obtains information such as the name of the program being implemented (including the name of the model/promising program, if applicable), name of agency or organization implementing the program, contact information for person(s) completing the tool, and date the form is completed.

*Goals and Objectives.* This section asks respondents to (1) list their current program goals and objectives and (2) identify and explain any changes (additions/deletions/modifications) made to these during the period covered by the report.

*Evaluation Information.* This section asks respondents to (1) describe their current evaluation plan and (2) identify and explain any changes (additions/deletions/modifications) made to the design during the period covered by the report.

*Program Components.* This section asks respondents to identify the major components of their program, including: component description, type (universal/selected/indicated), domain, target information (age, race/ethnicity, gender, other), and purpose. It is important to note that one set of the “Detailed Assessment of Adaptations” forms (see below) should be completed for **each** of the major program components/interventions identified in this section. For example, if the two main aspects of your program were a school-based peer leadership component and a mentoring component, you would complete one set of forms for each of these two components (there is a space at the bottom of the forms to identify each component). This is done to allow the tool to be used with projects that involve multiple components or interventions without confounding adaptations across interventions.

*Further Instructions and Glossary of Terms.* This section describes how to complete the “Detailed Assessment of Adaptations” and provides a reference for key terms used in the tool, such as definitions for the possible “primary reasons” for reported changes.

*Detailed Assessment of Adaptations.* This section leads respondents through a step-by-step assessment of programmatic (and resulting evaluative) changes. This is the core of the instrument. It is here that respondents detail any changes that they have made to their program during the reporting period and any resulting changes to their evaluation. The tool is organized into five main areas that contain related issues. The areas and topics covered are as follows:

1. **WHAT** is the nature of the component/intervention?
  - a. Content of sessions
  
2. **HOW** is the component/intervention delivered?
  - a. Duration of intervention
  - b. Delivery method of intervention
  - c. Number of sessions
  - d. Length of sessions
  - e. Order of sessions
  - f. Frequency of sessions
  - g. Materials
  
3. **TO WHOM** is the component/intervention delivered?
  - a. Target Population – Number of participants
  - b. Target Population – Characteristics (age, gender, ethnicity, risk level, geography, etc.)
  - c. Target Population – Recruitment/retention methods
  
4. **WHERE** is the component/intervention delivered?
  - a. Setting/location (class setting, after-school setting, home, community center, etc.)
  
5. **WHO** delivers the component/intervention?
  - a. Delivery Agents – Number of staff/volunteers
  - b. Delivery Agents – Training required/provided
  - c. Delivery Agents – Characteristics (age, gender, ethnicity, experience, role, etc.)
  - d. Delivery Agents – Recruitment/retention method

Respondents are first asked whether they made a change to the specific programmatic aspect listed, such as “Duration of intervention” under “HOW is the component/intervention delivered?” If they check “Yes,” they provide the following additional information.

- *Date that the change occurred.* This information is used to track adaptations over time during the course of a program; examine how the timing of a change may affect program outcomes; if a program has multiple cycles, determine during which cycle the change took place; and, identify when adaptations are likely to occur across various programs.

- *The primary reason for the change.* This involves an appraisal of the primary reason for a program modification using six categories: recipient issues, program provider issues, community issues, setting issues, evaluation issues, and sustainability. The categories, along with some examples, are listed below.

**Recipient Issues** (cultural norms, demographics, etc.)

“We were able to recruit fewer youth than anticipated because many parents did not approve of the subject matter being addressed in some of the sessions.”

**Program Provider Issues** (staff recruitment/retention issues, costs, etc.)

“We didn’t have the required number of mentors for the number of youth, so mentors were unable to spend as much time with each youth as the program required.”

**Community Issues** (political climate, traumatic incident, community norms, etc.)

“We had to eliminate two sessions because the community did not think the subject matter of this content was a priority.”

**Setting Issues** (policies, scheduling, facilities, etc.)

“The location of the program was changed from a school to a community center. We felt that we would have better luck recruiting participants in the community than in the school because our agency has a very strong relationship with the center.”

**Evaluation Issues** (sample size requirements, resources, reporting schedule, etc.)

“The principal would not allow us to collect data on students’ sexual behaviors so we eliminated some questions from the model program survey.”

**Sustainability Issues** (potential funding leverage, community buy-in, etc.)

“A key community stakeholder threatened to withdraw her support for the program unless the content of two sessions was modified.”

- *A description of the programmatic change and why it occurred.* This narrative provides qualitative information on the cause and nature of adaptations and provides a valuable record for funders, researchers, and implementers.
- *Report of resulting changes to the evaluation.* This includes two parts: (1) an assessment of whether any modifications were made to the evaluation design to accommodate the programmatic change and (2) a description of changes to the evaluation design or a rationale for why such changes were not necessary.

The following page contains an example of a completed section of the tool. This is followed by a copy of the full “Report on Program Fidelity and Adaptations.”

## SAMPLE COMPLETED ASSESSMENT TOOL

Major topic area (see full list above under "Potential Areas of Change Covered...").

Specific aspects of program/project fidelity (see full list above under "Potential Areas of Change Covered...").

Asks respondents to choose whether they have changed this aspect of their component/intervention during the reporting period. They can indicate (1) that it "does not apply" to their component/intervention, (2) that they have made "no" changes, or (3) that they have made at least one change. If they indicate that they have made a change, they are asked to detail the change(s) in the space below.

**Date of Change** – Because the tool is designed to cover a range of time (e.g., six months), it is important to identify exactly when a change occurred in order to: track adaptations over time during the course of a program; examine how the timing of a change may affect program outcomes; if a program has multiple cycles, determine during which cycle the change took place; enable funders to identify when adaptations are likely to occur across various programs.

**Primary Reason** – Involves an appraisal of the primary reason behind a program modification using six categories – recipient issues (cultural norms, demographics, etc.), program provider issues (staff recruitment/retention issues, costs, etc.), community issues (political climate, traumatic incident, community norms, etc.), setting issues (policies, scheduling, facilities, etc.), evaluation issues (sample size requirements, resources, reporting schedule, etc.), and sustainability (potential funding leverage, community buy-in, etc.). The quantitative nature of this data allows users to easily categorize and summarize the impetus behind changes both within and across programs.

**Description of Programmatic Change** – Respondents provide detail on how and why a programmatic change occurred. The narrative provides qualitative information on the cause and nature of adaptations and provides a valuable record for funders, researchers, and implementers.

**Description of Evaluation Change** - Respondents provide detail on whether the programmatic change being reported led to a modification of the original evaluation design.

### SAMPLE COMPLETED SECTION

**2. HOW is the component/intervention delivered?**

**2c. Number of Sessions**  Does not apply  
 No changes  
 Yes, there were changes – Complete the information below for each change in this area during the reporting period.

---

CHANGE

**Date of Change** 05/23/03

**Primary Reason** (check one)  Recipient Issues  Program Provider Issues  Community Issues  Setting Issues  Evaluation Issues  Sustainability Issues

**Describe the change and your rationale for making it. Essentially, explain (1) what the aspect used to be, (2) what it is now, and (3) why it changed.**

The original curriculum was designed with 10 sessions. Due to standardized testing at the end of the school year, we had to eliminate the final two sessions addressing conflict resolution.

**Was it (or will it be) necessary to modify your evaluation design to accommodate this programmatic change?**  No  Yes  
 •If "No," describe why no changes are necessary. If "Yes," describe what evaluation change(s) have been or will be made.

The questions/scales in our pre/posttest instrument designed to measure changes in conflict resolution skills will be omitted from analyses. The date of the posttest administration will also be re-scheduled to an earlier date.

---

**2d. Length of Sessions**  Does not apply  
 No changes  
 Yes, there were changes – Complete the information below for each change in this area during the reporting period.

---

CHANGE

**Date of Change** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Primary Reason** (check one)  Recipient Issues  Program Provider Issues  Community Issues  Setting Issues  Evaluation Issues  Sustainability Issues

**Describe the change and your rationale for making it. Essentially, explain (1) what the aspect used to be, (2) what it is now, and (3) why it changed.**

**Was it (or will it be) necessary to modify your evaluation design to accommodate this programmatic change?**  No  Yes  
 •If "No," describe why no changes are necessary. If "Yes," describe what evaluation change(s) have been or will be made.

# Report on Program Fidelity and Adaptations

---

## PURPOSE AND INSTRUCTIONS

The purpose of this document is to assess any changes to your proposed program. Tracking changes is important because modifications may lead to different outcomes than those that would be expected if the program were implemented as originally designed.

Fill out information on the cover page; then complete one set of the attached forms for each of your major program components/interventions. For example, if the two main aspects of your program were a school-based peer leadership component and a mentoring component, you would complete one set of forms for each of these two components. We have left room for one change under each heading; in an instance when you have more than one change, you can photocopy that particular page.

## ADMINISTRATIVE INFORMATION (write in)

<b>Program Name</b> (if applicable, include name of model/promising program)	
<b>Administrative Organization Name</b>	
<b>Name of Person Completing the Form</b> (contact person)	
<b>Address of Person Completing the Form</b>	
<b>Phone Number of Person Completing the Form</b>	
<b>E-mail Address of Person Completing the Form</b>	
<b>Date Form Completed</b>	

## GOALS AND OBJECTIVES

1. List the current goals and objectives of your project.

2. Were any changes (additions/deletions/modifications) made to these goals and objectives during this reporting period?  No  Yes

a. If you answered "Yes," identify each goal or objective that was changed, explain the change, and explain the rationale for the change.

## EVALUATION

3. Provide a summary of your evaluation design for this program. Include a description of your process evaluation and outcome evaluation activities, instruments, and measures.

4. Were any changes (additions/deletions/modifications) made to the evaluation design during this reporting period?

No     Yes

a. If you answered "Yes," identify each change, explain the change, and explain the rationale for the change.

## PROGRAM COMPONENTS

5. Describe each of the major program components of your project. We have left room for information on three components. If you need more room, reproduce this sheet and attach it to the packet.

---

### Program Component Description:

**Type(s):**  Universal (general population)  Selected (high risk group)  Indicated (diagnosed or apparent risks in participant referred)

**Target(s) – Domain:**  Youth  Family  School  Community  Workplace  Healthcare  Other \_\_\_\_\_

**Target(s) – Age:**  No distinction  Early Childhood (0-4)  School Age (5-11)  Early Adolescent (12-14)  Teenagers (15-17)  
 Young Adults (18-24)  Adults (25-54)  Seniors (55+)

**Target(s) – Race/Ethnicity:**  No distinction  American Indian or Alaska Native  Asian  Black or African American  Hispanic or Latino  
 Native Hawaiian or Other Pacific Islander  White  Other \_\_\_\_\_

**Target(s) – Gender:**  No distinction  Female  Male

**Purpose(s):**  Improve knowledge/awareness  Improve skills  Increase involvement in healthy alternatives  Change norms  
 Change policies  Change laws  Improve enforcement  Mobilize community  Build collaboration  
 Improve problem identification and referral  Improve access to/quality of care  Other \_\_\_\_\_

---

### Program Component Description:

**Type(s):**  Universal (general population)  Selected (high risk group)  Indicated (diagnosed or apparent risks in participant referred)

**Target(s) – Domain:**  Youth  Family  School  Community  Workplace  Healthcare  Other \_\_\_\_\_

**Target(s) – Age:**  No distinction  Early Childhood (0-4)  School Age (5-11)  Early Adolescent (12-14)  Teenagers (15-17)  
 Young Adults (18-24)  Adults (25-54)  Seniors (55+)

**Target(s) – Race/Ethnicity:**  No distinction  American Indian or Alaska Native  Asian  Black or African American  Hispanic or Latino  
 Native Hawaiian or Other Pacific Islander  White  Other \_\_\_\_\_

**Target(s) – Gender:**  No distinction  Female  Male

**Purpose(s):**  Improve knowledge/awareness  Improve skills  Increase involvement in healthy alternatives  Change norms  
 Change policies  Change laws  Improve enforcement  Mobilize community  Build collaboration  
 Improve problem identification and referral  Improve access to/quality of care  Other \_\_\_\_\_

---

### Program Component Description:

**Type(s):**  Universal (general population)  Selected (high risk group)  Indicated (diagnosed or apparent risks in participant referred)

**Target(s) – Domain:**  Youth  Family  School  Community  Workplace  Healthcare  Other \_\_\_\_\_

**Target(s) – Age:**  No distinction  Early Childhood (0-4)  School Age (5-11)  Early Adolescent (12-14)  Teenagers (15-17)  
 Young Adults (18-24)  Adults (25-54)  Seniors (55+)

**Target(s) – Race/Ethnicity:**  No distinction  American Indian or Alaska Native  Asian  Black or African American  Hispanic or Latino  
 Native Hawaiian or Other Pacific Islander  White  Other \_\_\_\_\_

**Target(s) – Gender:**  No distinction  Female  Male

**Purpose(s):**  Improve knowledge/awareness  Improve skills  Increase involvement in healthy alternatives  Change norms  
 Change policies  Change laws  Improve enforcement  Mobilize community  Build collaboration  
 Improve problem identification and referral  Improve access to/quality of care  Other \_\_\_\_\_

## REPORT OF PROGRAM CHANGES

Complete one set of the attached forms for each of your major program components/interventions (identified in the previous section). For example, if the two main aspects of your program were a school-based peer leadership component and a mentoring component, you would complete one set of forms for each of these two components.

Write in the name of the individual component at the bottom of each page of the corresponding set of forms.

You should complete the forms as follows:

- Identify whether you made a change to the specific programmatic aspect listed, such as “Duration of intervention” under “HOW is the component/intervention delivered?”. The aspects being examined are:
  1. **WHAT** is the nature of the component/intervention?
    - a. Content of sessions
  2. **HOW** is the component/intervention delivered?
    - a. Duration of intervention
    - b. Delivery method of intervention
    - c. Number of sessions
    - d. Length of sessions
    - e. Order of sessions
    - f. Frequency of sessions
    - g. Materials
  3. **TO WHOM** is the component/intervention delivered?
    - a. Target Population – Number of participants
    - b. Target Population – Characteristics (age, gender, ethnicity, risk level, geography, etc.)
    - c. Target Population – Recruitment/retention methods
  4. **WHERE** is the component/intervention delivered?
    - a. Setting/location (class setting, after-school setting, home, community center, etc.)
  5. **WHO** delivers the component/intervention?
    - a. Delivery Agents – Number of staff/volunteers
    - b. Delivery Agents – Training required/provided
    - c. Delivery Agents – Characteristics (age, gender, ethnicity, experience, role, etc.)
    - d. Delivery Agents – Recruitment/retention method

If you report that a change has taken place, you are asked to provide the following additional information.

- *Date that the change occurred* – Provide your best assessment.
- *The primary reason for the change* – Involves an appraisal of the primary reason for a program modification using six categories: recipient issues, program provider issues, community issues, setting issues, evaluation issues, and sustainability. The categories, along with some examples, are listed below.

1. **Recipient Issues** (cultural norms, demographics, etc.)
    - We were able to recruit fewer students than anticipated because many parents did not approve of the subject matter being addressed in some of the sessions.
    - We translated some of the program materials into Spanish because some of the recipients didn't speak English.
  2. **Program Provider Issues** (staff recruitment/retention issues, costs, etc.)
    - We didn't have the required number of mentors for the number of students, therefore mentors were unable to spend the required amount of time with each student.
    - The key staff person for delivering the conflict resolution session was out unexpectedly, therefore we had to alter the order in which the sessions are delivered.
  3. **Community Issues** (political climate, traumatic incident, community norms, etc.)
    - We had to eliminate two sessions because the community did not think the subject matter of this content was a priority.
    - We had to adapt the content of the session on alcohol and sexual risk taking because the community did not feel comfortable addressing this subject matter.
  4. **Setting Issues** (policies, scheduling, facilities, etc.)
    - We only completed seven out of eight sessions because the school was closed for a snow day.
    - The location of the program was changed from a school to a community center. We felt that we would have better luck recruiting participants in the community than in the school because our agency does not have a strong relationship with the schools.
  5. **Evaluation Issues** (sample size requirements, resources, reporting schedule, etc.)
    - We only had enough money to evaluate an eight-session program so we cut the program from ten to eight sessions.
    - The principal would not allow us to collect data on students' sexual behaviors so we eliminated some questions from the model's survey.
  6. **Sustainability Issues** (potential funding leverage, community buy-in, etc.)
    - The school's new principal felt that class time should be focused on basic skill building and won't make a commitment to continue our program once seed money runs out.
    - A key community stakeholder threatened to withdraw her support for the program unless we changed the content of two of the sessions.
- *A description of the programmatic change and why it occurred* – This narrative provides qualitative information on the cause and nature of adaptations and provides a valuable record for funders, researchers, and implementers.
  - *Report of resulting changes to the evaluation* – This includes both (1) an assessment of whether any modifications were made to the evaluation design to accommodate the programmatic change and (2) a description of changes to the evaluation design or a rationale for why such changes were not necessary.

We have left room for one change under each heading; in an instance when you have more than one change, you can photocopy that particular page.



**2b. Delivery Method**  *Does not apply*  
 *No changes*  
 *Yes, there were changes* – Complete the information below for each change in this area during the reporting period.

**CHANGE**

•Date of Change \_\_\_\_/\_\_\_\_/\_\_\_\_  
 •Primary Reason (check one)  *Recipient Issues*  *Program Provider Issues*  *Community Issues*  *Setting Issues*  *Evaluation Issues*  *Sustainability Issues*  
 •Describe the change and your rationale for making it. Essentially, explain (1) what the aspect used to be, (2) what it is now, and (3) why it changed.

•Was it (or will it be) necessary to modify your evaluation design to accommodate this programmatic change?  *No*  *Yes*  
 •If “No,” describe why no changes are necessary. If “Yes,” describe what evaluation change(s) have been or will be made.

**2c. Number of Sessions**  *Does not apply*  
 *No changes*  
 *Yes, there were changes* – Complete the information below for each change in this area during the reporting period.

**CHANGE**

•Date of Change \_\_\_\_/\_\_\_\_/\_\_\_\_  
 •Primary Reason (check one)  *Recipient Issues*  *Program Provider Issues*  *Community Issues*  *Setting Issues*  *Evaluation Issues*  *Sustainability Issues*  
 •Describe the change and your rationale for making it. Essentially, explain (1) what the aspect used to be, (2) what it is now, and (3) why it changed.

•Was it (or will it be) necessary to modify your evaluation design to accommodate this programmatic change?  *No*  *Yes*  
 •If “No,” describe why no changes are necessary. If “Yes,” describe what evaluation change(s) have been or will be made.







**3c. Target Population – Recruitment/Retention Methods**

- Does not apply
- No changes
- Yes, there were changes – Complete the information below for each change in this area during the reporting period.

CHANGE

- Date of Change \_\_\_\_/\_\_\_\_/\_\_\_\_
- Primary Reason (check one)  Recipient Issues  Program Provider Issues  Community Issues  Setting Issues  Evaluation Issues  Sustainability Issues
- Describe the change and your rationale for making it. Essentially, explain (1) what the aspect used to be, (2) what it is now, and (3) why it changed.

- Was it (or will it be) necessary to modify your evaluation design to accommodate this programmatic change?  No  Yes
- If “No,” describe why no changes are necessary. If “Yes,” describe what evaluation change(s) have been or will be made.

**4. WHERE is the component/intervention delivered?**

**4a. Setting/Location** (class setting, after-school setting, home, community center, etc.)

- Does not apply
- No changes
- Yes, there were changes – Complete the information below for each change in this area during the reporting period.

CHANGE

- Date of Change \_\_\_\_/\_\_\_\_/\_\_\_\_
- Primary Reason (check one)  Recipient Issues  Program Provider Issues  Community Issues  Setting Issues  Evaluation Issues  Sustainability Issues
- Describe the change and your rationale for making it. Essentially, explain (1) what the aspect used to be, (2) what it is now, and (3) why it changed.

- Was it (or will it be) necessary to modify your evaluation design to accommodate this programmatic change?  No  Yes
- If “No,” describe why no changes are necessary. If “Yes,” describe what evaluation change(s) have been or will be made.

**5. WHO delivers the component/intervention?**

5a. Delivery Agents – Number of Staff/Volunteers  Does not apply  
 No changes  
 Yes, there were changes – Complete the information below for each change in this area during the reporting period.

**CHANGE**

•Date of Change \_\_\_\_/\_\_\_\_/\_\_\_\_

•Primary Reason (check one)  Recipient Issues  Program Provider Issues  Community Issues  Setting Issues  Evaluation Issues  Sustainability Issues

•Describe the change and your rationale for making it. Essentially, explain (1) what the aspect used to be, (2) what it is now, and (3) why it changed.

•Was it (or will it be) necessary to modify your evaluation design to accommodate this programmatic change?  No  Yes  
 •If “No,” describe why no changes are necessary. If “Yes,” describe what evaluation change(s) have been or will be made.

5b. Delivery Agents – Training Required/Provided  Does not apply  
 No changes  
 Yes, there were changes – Complete the information below for each change in this area during the reporting period.

**CHANGE**

•Date of Change \_\_\_\_/\_\_\_\_/\_\_\_\_

•Primary Reason (check one)  Recipient Issues  Program Provider Issues  Community Issues  Setting Issues  Evaluation Issues  Sustainability Issues

•Describe the change and your rationale for making it. Essentially, explain (1) what the aspect used to be, (2) what it is now, and (3) why it changed.

•Was it (or will it be) necessary to modify your evaluation design to accommodate this programmatic change?  No  Yes  
 •If “No,” describe why no changes are necessary. If “Yes,” describe what evaluation change(s) have been or will be made.



## References and Resources

Backer, T.E. (2002). Finding the balance: Program fidelity and adaptation in substance abuse prevention. Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention.

Backer, T.E. (2001). Finding the balance: Program fidelity and adaptation in substance abuse prevention. Rockville, MD: Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP).

Botvin, G.J., Baker, E., Dusenbury, L., Botvin, E.M., & Diaz, T. (1995). Long-term follow-up results of a randomized drug abuse prevention trial in a white middle-class population. *Journal of the American Medical Association*, 273, 1106-1112.

Brounstein, P. (2003). The continuing adventures of fidelity & adaptation. Presentation on March 5, 2003. Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention.

CSAP's Decision Support System (Prototype 4.0). (2001). Website: <http://www.preventiondss.org/>. Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention.

Cummins, M., Goddard, C., Formica, S., Cohen, D., Harding, W. (2002). An approach to assessing the fidelity of prevention programs. Presented at the 10<sup>th</sup> Annual Meeting of the Society for Prevention Research, Seattle, WA, May-June 2002.

Durlak, J.A. (1998). Why program implementation is important. *Journal of Prevention & Intervention in the Community*, 17(2), 5-18.

Formica, S. and Harding, W.M. (2001). Documentation of adaptations to science-based programs implemented by MassCALL sub-recipient communities. Massachusetts Collaboration for Action, Leadership, & Learning (MassCALL), Massachusetts Department of Public Health, Bureau of Substance Abuse Services, Boston, MA.

Hallfors, D. and Godette, D. (2002). Will the "principles of effectiveness" improve prevention practice? Early findings from a diffusion study. *Health Education Research: Theory & Practice*. 17(4):461-470.

King, J.A., Morris, L.L., and Fitz-Gibbon, C.T. (1987). How to assess program implementation. Thousand Oaks, CA: Sage Publications.

National Center for the Advancement of Prevention. (2003). A process for encouraging fidelity and tracking adaptations to benefit science-based programs and strategies – State of Massachusetts (draft report). Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention, NCAP.

Schinke, S., Brounstein, P. and Gardner, S. (2002). Science-based prevention programs and principles, 2002. DHHS Pub. No. (SMA) 03-3764. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration.

**Health and Human Development Programs  
Education Development Center, Inc.  
55 Chapel Street  
Newton, MA 02458-1060  
☎ 888-332-2278  
FAX: 617-244-3436  
[www.hhd.org](http://www.hhd.org)**