Building Bridges:
Continuing Momentum and
Facilitating Change on Your Campus

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Points to Discuss

• A quick overview of barriers to implementing effective interventions
• Promoting and impacting change on campus
• Inspiring others

Possible Barriers to Implementing Effective Interventions on College Campuses

• Barriers can exist to dissemination, adoption, implementation, and maintenance (Rogers, 1995)

Source: Larimer, Kilmer, and Lee, 2005
Possible Barriers to **Dissemination** in Implementing Effective Interventions

- Published findings appear in journals not oriented to clinicians (Sobell, 1996)
  - Often, little description of steps needed to apply a treatment or intervention
- Some publications or evaluations are not “user friendly” (Backer, 2000)

Source: Larimer, Kilmer, and Lee, 2005

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Possible Barriers to **Adoption** in Implementing Effective Interventions

- Reactions from key individuals involved in the process (DeJong and Langenbahn, 1996)
- Diversity of opinion around how to proceed
  - Could lead to difficulty in committing

Source: Larimer, Kilmer, and Lee, 2005

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Possible Barriers to **Adoption** in Implementing Effective Interventions

- Unreasonable expectations (Liddle, et al., 2002)
- Insufficient “buy-in” (Liddle, et al., 2002)
- Not enough time working with directors, administrators, staff, or students

Source: Larimer, Kilmer, and Lee, 2005
Possible Barriers to Implementation in Implementing Effective Interventions

• Proper training of those delivering a program

• A tendency to “reinvent” innovations (Rohrbach, D’Onofrio, Backer, & Montgomery, 1996)

Source: Larimer, Kilmer, and Lee, 2005

Possible Barriers to Implementation in Implementing Effective Interventions

• Organizational factors (Simpson, 2002)
  ▫ Resources, issues impacting effective delivery, attitudes among leaders, etc.

• Resistance among staff familiar and comfortable with a prior approach (Liddle, et al., 2002)

Source: Larimer, Kilmer, and Lee, 2005

Possible Barriers to Maintenance in Implementing Effective Interventions

• Therapist drift (i.e., issues of fidelity)

• Need for ongoing assessment and continued training

Source: Larimer, Kilmer, and Lee, 2005
Possible Administrative Barriers in Implementing Effective Interventions

• Tendency to move toward “next best thing”
  ▫ One approach being pursued at the expense of another

• Concern that directing attention or funds toward a behavior indicates that “problem” exists

Source: Larimer, Kilmer, and Lee, 2005

Thoughts, Points for Discussion, Questions

• How do we effectively put findings in people’s hands?
• Whose responsibility is this?
• How do we make research findings “digestible”?
• Look for opportunities to utilize existing expertise and skills across research domains, counseling centers, health centers, or elsewhere.
• The key is to consider what will help to get you where you want to go.

Top Things I Wish Someone Had Told Me Before I Started My Job

• Identify what helps you tell your story most effectively.
  ▫ Identify ways to best make a case for and/or measure the impact of what you’re doing.
  ▫ What shows progress toward your goals?
  ▫ If using surveys, ask questions that will help provide answers you’re looking for.
  ▫ Be aware of time frames.
  ▫ Get at issues of interest in multiple ways.
Top Things I Wish Someone Had Told Me Before I Started My Job

• Once you’ve started measuring impact, try to find the answer to the question, “Do your data do you justice?”
  ▫ Look for outliers
  ▫ Think critically about your findings (maintain a healthy skepticism)
  ▫ Analyze your data in a way that best detects and is sensitive to change.
  ▫ Beware of categorical results…for example…

Categorical summaries

• Consider these data:
  ▫ 85% are below criteria for depression on a screening measure in which the cutoff is 8
  ▫ 15% are above this cutoff of 8
• If a number of students who are above the cutoff reduce their score from 20 to 10, they’re still nevertheless in the 8 or more group.
• If a number of students who are below the cutoff reduce their score from 7 to 2, they’re still nevertheless in the 7 or less group.
• These changes will not be detected!

Top Things I Wish Someone Had Told Me Before I Started My Job

• Any one thing we do is a part of an overall puzzle.
  ▫ Consider where your particular piece fits
  ▫ Identify the other pieces on your campus when considering a strategic plan
  ▫ Find the missing pieces when examining “next steps”
**Top Things I Wish Someone Had Told Me Before I Started My Job**

- Find “the hook” that will engage key stakeholders, get people interested in what you’re discussing, and inspire change.
- Retention
- Saving money
- Alumni relations
- Student success
- Public impression
- Reducing work load for staff
- Reducing stress load for staff
- Liability management
- Risk management

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**Top Things I Wish Someone Had Told Me Before I Started My Job**

- Though we all speak different languages across various fields, we’re all on the same team and ultimately, we probably all mean the same thing.
- Get to know those other “key” words and phrases.
- Make sure people know your words and phrases.
Top Things I Wish Someone Had Told Me Before I Started My Job

- Don’t reinvent the wheel.

Top Things I Wish Someone Had Told Me Before I Started My Job

- It’s o.k. for things to be a work in progress.

Implications for your own campus

- Learn from each others projects.
- Learn from your own work.
- Consider approaches as part of overall strategic plan.
- Reduce barriers to implementation.
- Importance of evaluating efforts.
- Continue to evaluate strategies targeting other health issues, particularly given overlap between multiple domains.
Thank you!

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