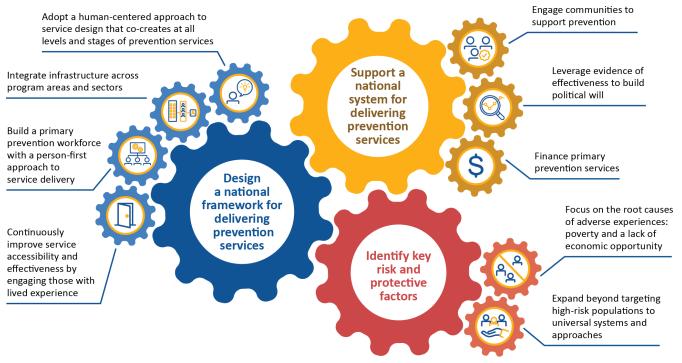




Advancing Primary Prevention in Human Services: Key Considerations for Administrators and Practitioners In August 2022, the U.S. Department of Health and Human Services held a convening focused on increasing the use of primary prevention in human services systems. Participants considered the opportunity for human services to shift from *responding* to families after they are in crisis to *preventing* the crisis before it occurs. Participants indicated that incorporating primary prevention into human services delivery can uproot the causes of adverse outcomes by reducing risk factors and promoting protective factors, thereby creating the safety and stability needed to avoid adverse experiences in the first place. This brief highlights key considerations for program administrators and other practitioners.

## THEMES AND RECOMMENDATIONS FROM THE CONVENING

To advance the use of primary prevention<sup>1</sup> in human services, convening participants noted that we need to develop a national framework for delivering prevention services. This framework should promote equity by co-creating services with the individuals and communities served. A critical part of this framework will be creating a workforce for delivering prevention services that includes people with lived experience. Figure 1 presents key considerations that emerged at the convening related to (1) designing this national framework and corresponding workforce for delivering prevention services and (2) supporting this framework with buy-in from policymakers, the public, and funders.



#### Figure 1. Key themes and recommendations

<sup>&</sup>lt;sup>1</sup> Primary prevention services include programs, policies, or other strategies that aim to prevent adverse outcomes from occurring by promoting protective factors and reducing risk factors.

# **KEY CONSIDERATIONS FOR ADMINISTRATORS AND PRACTITIONERS**

This section describes select recommendations from the convening for program administrators and other practitioners. More detail on these and other recommendations are available in the convening summary brief: https://aspe.hhs.gov/reports/primary-prevention-convening-brief.



### Build a primary prevention workforce with a person-first approach to service delivery

Convening participants stressed the need to build a primary prevention workforce consisting of people who come from the communities that programs will serve. Creating this workforce will require:

- Creating an inclusive work environment, including eliminating educational or legal barriers to employment
- Offering resources and supports, including fair compensation, reasonable workloads, and mental health and trauma support
- Providing training in:
  - Risk and protective factors
  - Person-first and trauma-informed approaches to service delivery
  - Diversity, equity, access, and inclusion
  - Antidiscrimination and implicit bias

# Continuously improve service accessibility and effectiveness by engaging those with lived experience

By consulting people with lived experience, service providers can better identify and dismantle barriers to access. Possibilities for improving accessibility include streamlining services, processes, and applications; sharing data across programs; and measuring need rather than income to determine eligibility. Convening participants also underscored the importance of regularly engaging people with lived experience to inform service delivery, evaluation, and improvement.



# Engage communities to support prevention

Implementing a new primary prevention infrastructure will require public buy-in, achieved in part by co-creating with communities, employing a workforce with lived experience, and ensuring that service delivery follows a person-first approach. Additionally, administrators and practitioners can also engage with and educate the public and service providers about the value of primary prevention. For example, the public will need a better understanding of the science of early childhood. Engendering buy-in might also require appealing to a community's self-interest by demonstrating that primary prevention can advance the well-being of all, not just those who receive services.

# **NEXT STEPS**

The Office of the Assistant Secretary for Planning and Evaluation will hold a series of roundtables to advance select ideas that emerged from the convening. Discussions will inform additional considerations and next steps to build and support a framework for integrating primary prevention into human services policy and programs.

# FOR MORE INFORMATION

This is one in a series of briefs highlighting key considerations from the U.S. Department of Health and Human Services Convening on Advancing Primary Prevention in Human Services. For other briefs in this series, see <a href="https://aspe.hhs.gov/primary-prevention-human-services">https://aspe.hhs.gov/primary-prevention-human-services</a>.

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#### Office of the Assistant Secretary for Planning and Evaluation

200 Independence Avenue SW, Mailstop 447D Washington, D.C. 20201

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#### **ABOUT THE AUTHORS**

Lauren Akers is a Senior Researcher at Mathematica. Jennifer Tippins is an Analyst at Mathematica. Susan Hauan is a Senior Advisor for Human Services Policy at ASPE. Miranda Lynch-Smith is the Senior Official Performing the Duties of the Assistant Secretary for Planning and Evaluation and the Deputy Assistant Secretary for Human Services Policy at ASPE.

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