# What are the funding and program requirements for coalitions?

CPWI coalitions must have or provide the following:

- Members who represent at least eight sectors of the community, such as youth serving organizations, law enforcement, parent, school, healthcare professionals, business, faith-based organizations, and youth.
- One school-based prevention education series for students in the middle or high school.
- A prevention group facilitated at school.
- Identification and referral services at the middle/high school.
- At least one additional direct service prevention program:
- For contracts under SAMHSA Block Grant funds (SABG), 60% of programs must be Evidence-Based Practices found on the Excellence in Prevention Strategy list <a href="http://www.theathenaforum.org/learning\_library/ebp">http://www.theathenaforum.org/learning\_library/ebp</a>
- For contracts under Dedicated Marijuana
   Funds (DMA), 85% of funds must be used for
   Evidence-Based or Research Based Programs
   and 15% of funds can be used for Promising
   Programs from the DMA CPWI Enhancement and
   Expansion List <a href="http://www.theathenaforum.org/l1502PreventionPlanImplementation">http://www.theathenaforum.org/l1502PreventionPlanImplementation</a>
- At least one environmental strategy, such as policy development or activities to reduce access and availability of alcohol and marijuana.
- A public awareness campaign.
- Local decision-making by the coalition for assessment and strategic planning.
- Participation in local and state evaluation (the Washington State Healthy Youth Survey).

## How do we know that prevention works?

Over 60 prevention programs and policies have been shown through rigorous research to prevent substance use problems.

An evaluation by Washington State University shows that CPWI is meeting its goals: 95% of programs implemented between July 2015 and June 2016 had positive results in delaying the first use of alcohol or other drugs, reducing use, decreasing risk factors and/or increasing protective factors. Between 2008 and 2016, communities in Cohort 1 showed improvements in all family and community risk factors. Evaluation results also showed significant decreases in 10th grade substance use outcomes:

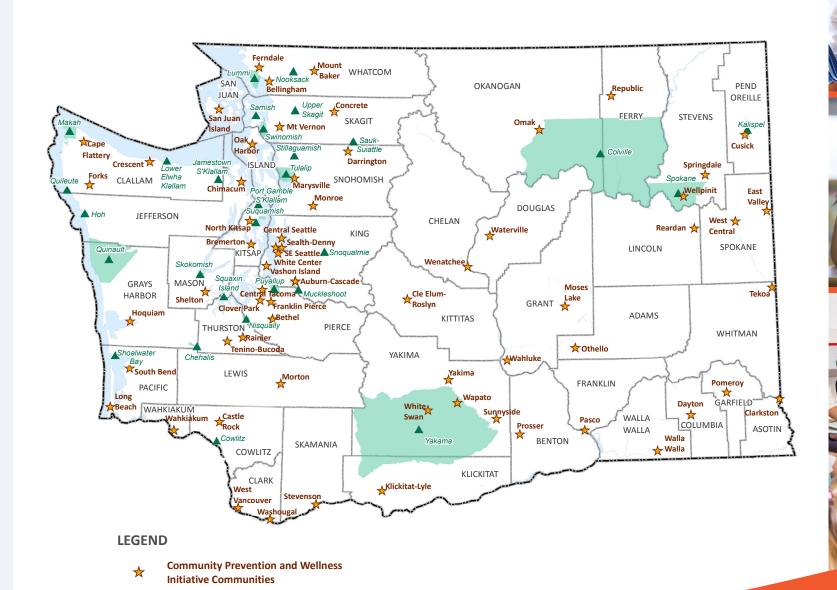
- Alcohol use and binge drinking down 42%
- Cigarette use down 49%
- Marijuana use down 11%

On a statewide level, the Washington State
Healthy Youth Survey (HYS) monitors the
health of students, evaluates the impact of our
prevention efforts, and shows the links between
substance use and education outcomes. Since
2006, past-month use of alcohol among 10th
graders has dropped from 33 percent to 20
percent, and binge drinking has been reduced
by half - from 20 percent to 11 percent.



#### Partners for Healthy Communities

DBHR supports prevention services in the following communities and tribes:



#### For more information contact:

Tribal prevention and wellness

Tribal lands

Sarah Mariani, *Behavioral Health Administrator, Office of Behavioral Health and Prevention* 360.725.3774 or Sarah.Mariani@dshs.wa.gov www.TheAthenaForum.org





### Empowering communities to create healthy changes

Alcohol and other drug abuse can erode the health and safety of communities. This is why effective prevention services are vital for every community. When we prevent early use of alcohol and other drugs, we also prevent the far reaching and high costs of substance abuse and addiction. These costs include:

- Child abuse and neglect
- Other forms of violence
- Unemployment and poverty
- Crime
- Avoidable medical care

Through the Community Prevention and Wellness Initiative (CPWI), we support communities in creating sustainable, healthy changes by investing in prevention planning and practices that lead to the best possible outcomes.

# What are the risks of underage use of alcohol, marijuana and other drugs?

Children and teens who use alcohol and marijuana are at higher risk than adults for developing short and long-term physical, developmental, and emotional problems. This is because their brains are still developing and are more sensitive than adults to the effects of drug abuse. Children who use alcohol and marijuana are more likely to:

- Develop addiction
- Fail in school
- Engage in risky sexual behavior
- Be seriously or fatally injured
- Have depressive feelings or thoughts of suicide

#### What is the Community Prevention and Wellness Initiative?

In 2011, the DSHS Division of Behavioral Health and Recovery launched the Community Prevention and Wellness Initiative (CPWI) to provide substance abuse prevention services and strategies through local coalitions in high-need communities.

Communities are an effective organizing force for bringing evidence-based policies and programs to scale to improve public health.

CPWI is a community- and school-based model for delivering prevention programs and strategies to reduce underage use of alcohol, marijuana, tobacco, and other drugs. This model uses a data-informed, community-level decision making process to determine root social and emotional causes that predict problem behaviors.

CPWI aligns with the federal Department of Health and Human Services' National Prevention Strategy to increase the health of individuals and communities. The strategy focuses on:

- · Building healthy and safe community environments
- Expanding quality preventive services in clinical and community settings
- Empowering people to make healthy choices
- Eliminating health disparities

The CPWI model allows us to better target and leverage limited public resources, increasing our ability to gain the best possible outcomes for communities. This more collaborative approach is expected to provide the long-term support needed for positive community change.



#### What are our goals and priorities?

The goal of CPWI is to support proven prevention strategies and sustainable funding that will have long-term, positive impacts on families and communities. Prevention programs and strategies seek to change beliefs, attitudes, and behaviors in order to delay initiation and reduce use of alcohol, tobacco, marijuana, and other drugs.

CPWI is committed to supporting high-need, traditionally underserved prioprity populations to address health disparities throughout the state. By focusing resources on the highest-need populations, we will see a greater decrease in problem behaviors state-wide.

CPWI's highest priorities are to prevent and reduce alcohol and marijuana use among 8th and 10th grade students, improve academic performance, and reduce juvenile crime.

### How are coalitions formed and what is their role?

A coalition is a formal arrangement for cooperation and collaboration between groups or sectors of a community. Each group retains its identity, but all agree to work together toward a common goal of building a safe, healthy, and drug-free community. Members bring the perspective of the group of people or organization they represent to the coalition and function on behalf of those they represent to carry out strategies for the local community. Members act within their own sphere of influence, enlarging the coalition's ability to create needed change and implement multiple strategies.

Coalition members engage in planning and implementing the coalition's Strategic Plan by participating in workgroups, reviewing plan drafts, developing strategies, leading/facilitating the implementation of strategies and activities in the Plan, and determining the functioning of the coalition.

## How does CPWI support healthier communities?

CPWI provides community coalitions with funding and training, as well as technical assistance for coordination, assessment, strategic planning, implementation, and evaluation of prevention services needed in their communities. This support helps communities build on their past successes and better measure how well prevention programs are meeting goals.

CPWI communities receive funding to:

- Implement evidence-based programs for youth and families
- Change community norms to reduce risk factors (such as early first use of drugs)
- Increase protective factors (such as youth who feel connected to their families, school and peers).

#### Some of the ways CPWI is already making a difference in communities include:

- Providing education to youth, parents, community members, and policy makers about the power of prevention.
- Local ordinances have been passed that reduce youth access and exposure to alcohol.
- Coalitions are working to raise awareness in their communities about the consequences of alcohol and other drug abuse.
- Students are learning how alcohol advertising can influence their decisions, and how to make healthy choices.
- Parents are learning skills to increase family bonding.
- There is more collaboration among school and community groups.
- Young people have more opportunities to be involved in positive activities.
- Students participating in the school-based program
   Project Success had a 37% decrease in binge drinking,
   a 44% decrease in marijuana use, and a 28% increase
   in passing their classes.

#### How are communities funded and chosen?

CPWI is funded by a federal block grant, discretionary grant, and the State Dedicated Marijuana Account.
Funds are provided to the Office of Superintendent of Public Instruction to place Prevention/Intervention Specialists in schools to support community coalitions.
As more funding becomes available, CPWI will expand to additional communities.

Funding is focused in communities experiencing high levels of underage drinking, marijuana and opioid use, crime, unemployment, and school failure. Communities are chosen based on their needs and their readiness to successfully address them.

