



LEADING
PREVENTION

Together / October
24-25, 2023



2023
Washington State
Prevention Provider Meeting

Agenda

8-9 a.m.	Registration & Check-In
9-9:30 a.m.	Welcome & Energizer Kendra Wilson Prevention System Manager
9:30-11:30 a.m.	Division of Behavioral Health and Recovery Statewide Updates Alicia Hughes Development and Strategic Initiatives Supervisor Sonja Pipek Tribal and CBO Services Supervisor Kasey Kates CPWI and School-Based Services Supervisor Sarah Mariani SUD Prevention and MH Promotion Section Manager
11:30 a.m.–noon	Networking Activity
noon-12:45 p.m.	Lunch (provided) & Table Prompts
12:45-1 p.m.	Transition back from lunch Welcome to new guests in attendance!
1-3 p.m.	State Prevention Enhancement (SPE) Policy Consortium Five-Year Strategic Plan Alicia Hughes Development and Strategic Initiatives Supervisor Sarah Mariani SUD Prevention and MH Promotion Section Manager Erika Jenkins Prevention System Manager Isaac Wulff Prevention System Manager
3-3:15 p.m.	Break
3:15-4 p.m.	Closing
4-4:30 p.m.	Networking
4:30-7 p.m.	Evening Meetings 4:30-5 p.m. Volunteer Meeting – Birch Ballroom 5-5:30 p.m. Chaperone Meeting – Maple Ballroom 5-6 p.m. Drug Free Communities (DFC) Meeting – Birch Ballroom 6-7 p.m. Prevention Leads Together – an informal gathering – Maple Ballroom

Energizer!

- Instructions: Fill in the blanks with words or phrases based on the categories provided. Once all the blanks are filled, add the entries to the story, then read the story aloud!



HCA / DBHR Updates: Alicia Hughes

- Coalition Leadership Institute Recap
- Workforce Development Efforts
 - Strategic planning
 - Needs assessment
 - Fellowship
 - Trainings and conferences
 - **Menti: 7673 1937**
- Healthy Youth Survey 2023 Updates



HCA / DBHR Updates: Sonja Pipek

- Community Based Organization (CBO) RFA
 - **Menti: 7673 1937**
- Tribal Prevention Programming
- 2024 Legislative Session Preparation
- Evidence-based Program Work
- Young Adult Programming
- Mental Health Promotion Programming



HCA / DBHR Updates: Kasey Kates

- **CPWI Strategic Planning**
- Implementation and Evaluation Efforts:
 - Coalition Assessment Tool
 - Community Survey
 - CPWI Evaluation
- Sustainability:
 - PFS 2023 grant
 - SOR grants

HCA / DBHR Updates: Kasey Kates

CPWI Strategic Planning Timeline

- October 2023: HYS implemented.
- Spring 2024: DBHR rolls out updated templates and coalitions get prepped.
- Spring 2024: HYS data available.
- Spring/Summer 2024: Coalitions submit updated Action Plan and Budget for programs and strategies to be implemented in SFY 2025
- June 2024: Communities receive Data Books.
- Summer 2024: Coalition Leadership Institute and/or other training focused on Strategic Planning including overview of Data Books.
- December 2024: Strategic Plan sent to DBHR staff for review.
- December–February 2025: Strategic Plan reviewed by DBHR staff, and any edits completed.
- February 2025: Strategic Plan final for programs and strategies implemented July 1, 2025, through June 30, 2026.
- *Please note, this is a tentative timeline for planning purposes only.*

HCA / DBHR Updates: Kasey Kates

- CPWI Strategic Planning
- Implementation and Evaluation Efforts:
 - Coalition Assessment Tool
 - Community Survey
 - CPWI Evaluation
- Sustainability:
 - PFS 2023 Grant
 - SOR Grants

HCA / DBHR Updates: Sarah Mariani

- **Celebrating Successes**
- Prevention System Overview
- Gratitudes

HCA / DBHR Updates: Sarah Mariani

- Celebrating Successes
- **Prevention System Overview**
- Gratitudes

Leading the Prevention System Together

- Be Thinking About:
 - How have you contributed to the WA prevention and promotion system?
 - What is something new you're learning about the system today?
 - Is there something we're discussing that you'd like to learn more about?

Behavioral Health Services Program Categories



Substance use disorder prevention and mental health promotion services



Prenatal through age 25 behavioral health treatment services



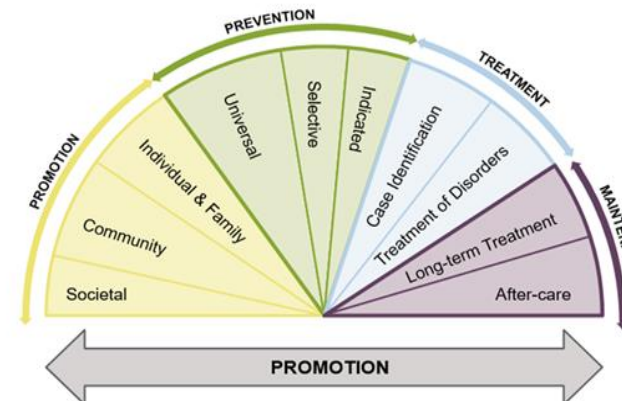
Mental health and substance use services



Problem gambling services



Recovery support services



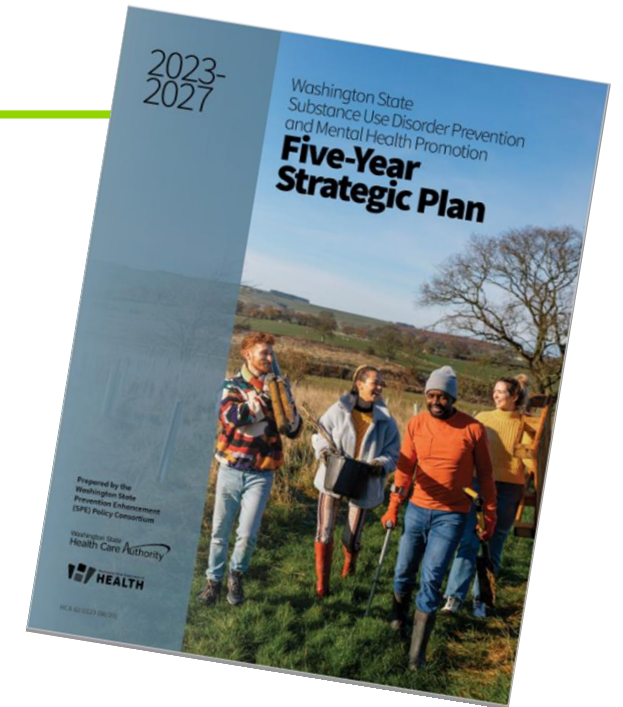
Key Collaborative Workgroups

Strategic Planning:

- ▶ State Prevention Enhancement (SPE) Policy Consortium and State Plan www.TheAthenaForum.org/spe
- ▶ Children and Youth Behavioral Health Work Group ([CYBHWG](#))

Information gathering:

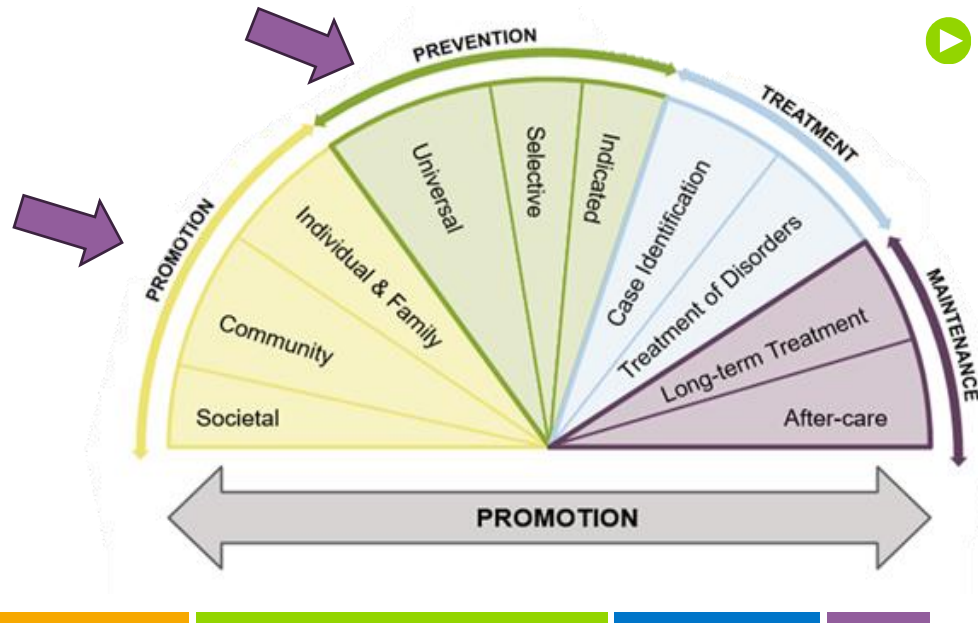
- ▶ Healthy Youth Survey (HYS)
<https://www.askhys.net/>
- ▶ Washington Young Adult Health Survey (WYAHS)
<https://sites.uw.edu/uwwyahs/>



Goal of Prevention and Promotion



- ▶ Build the health and wellness of individuals, families, and communities by delaying the onset of youth use, reducing youth substance use, preventing substance use disorder, and promoting mental health and wellbeing.



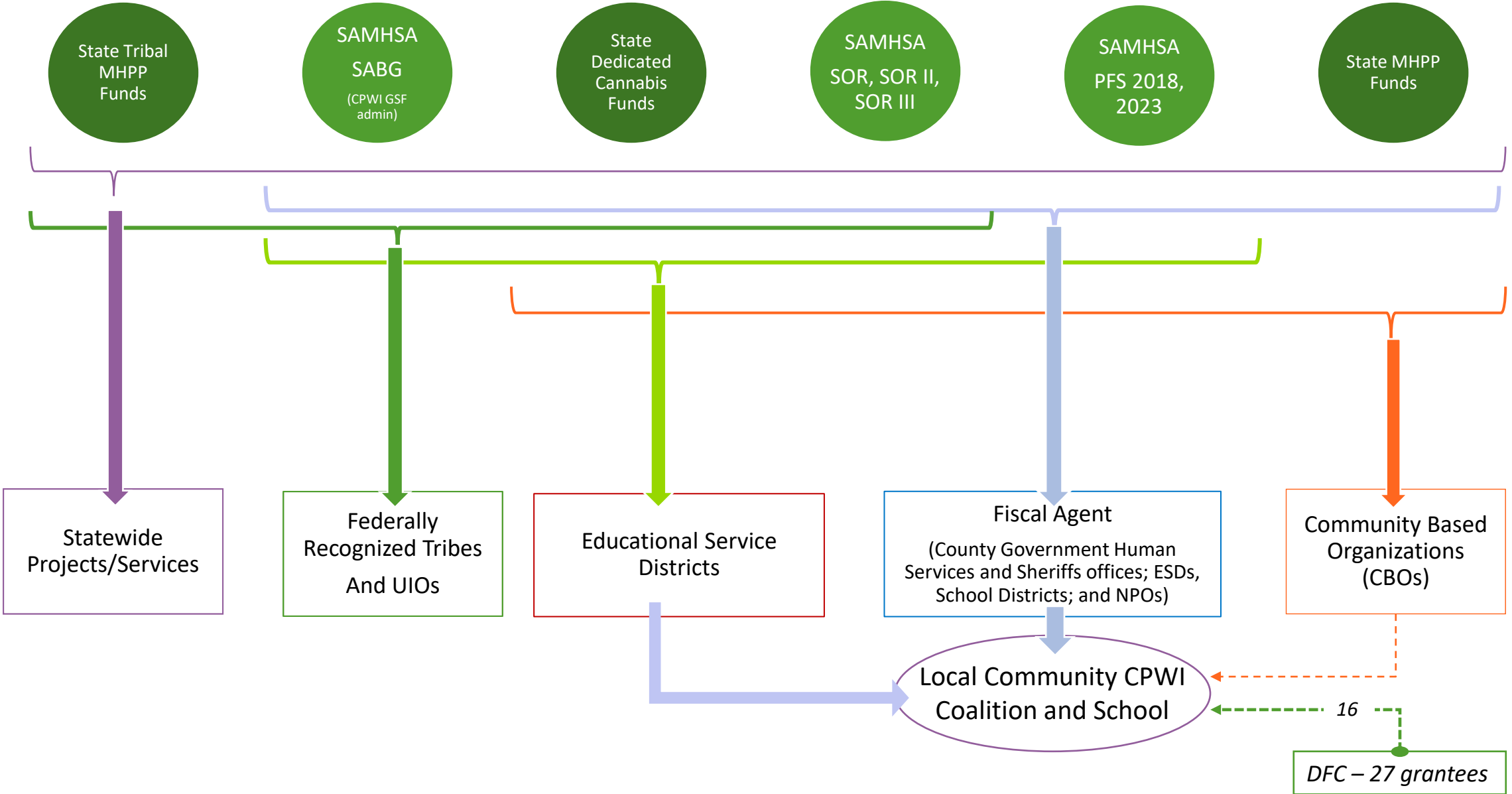
- ▶ We do this through our commitment to:

- ▶ State, Tribal, and local partners
- ▶ Communities with greater risk and higher need
- ▶ Research and evidence-based practices
- ▶ Outcomes

Overview of Prevention System



Washington State DBHR Funding Structure for Mental Health Promotion, Substance Abuse Prevention Services, and Early Intervention



Key Partnerships and Collaborations

- ▶ State Prevention Enhancement (SPE) Policy Consortium
- ▶ State Epidemiological Outcomes Workgroup
- ▶ Prevention Research Subcommittee
- ▶ Homeless Youth Task Force
- ▶ Action Alliance
- ▶ VA Governor's Challenge
- ▶ 988 Implementation Coalition
- ▶ Law Enforcement Mental Health Task Force
- ▶ Social Emotional Learning Advisory Committee
- ▶ Prevention Advisory Workgroup
- ▶ Prevention Voices
- ▶ College Coalition on Substance Misuse, Advocacy, and Prevention
- ▶ UW Social Develop Research Group and Alcohol and Drug Abuse Institute and WSU IMPACT Lab
- ▶ National Partnerships: CADCA, NASADAD, SAMHSA NAC, EBP Interstate workgroup; ATOD Section of the American Public Health Association; Collegiate Impaired Driving Collaborative

Data, Evaluation, and Research

- ▶ Healthy Youth Survey (HYS)
- ▶ Young Adult Health Survey
- ▶ Community Outcome and Risk Evaluation Information System (CORE)
- ▶ Minerva and SAPSIS online reporting systems
- ▶ Community Survey
- ▶ Research Briefs
- ▶ Using data to inform funding allocations and prevention services
- ▶ Evaluation and Outcomes



Prevention Research Briefs

Promotion and Prevention Local Services

▶ **Tribal Prevention Programming:**

- ▶ 27 Tribes implementing prevention programming.
- ▶ 2 Urban Indian Organizations

▶ **The Community Prevention and Wellness Initiative (CPWI):**

- ▶ Nearly 100 communities and schools identified as high risk across the state.
- ▶ Two-pronged approach: community coalitions and school-based prevention/intervention services.

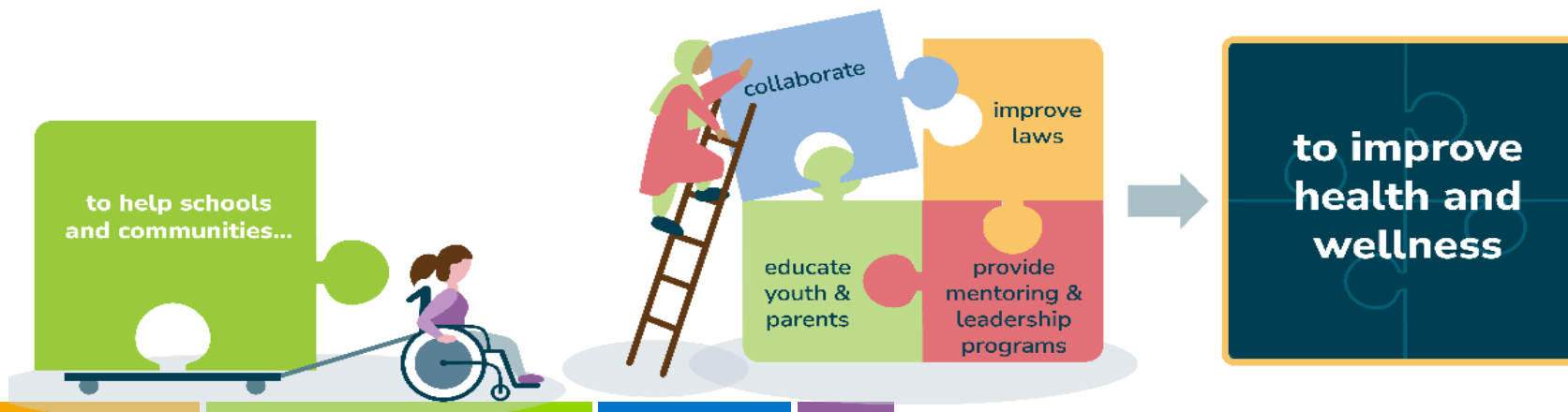
▶ **Community-Based Organizations (CBOs):**

- ▶ 21 CBOs in over 32 high-need communities
- ▶ SUD prevention and MH promotion/suicide prevention.

▶ **Young Adults Services (YA):**

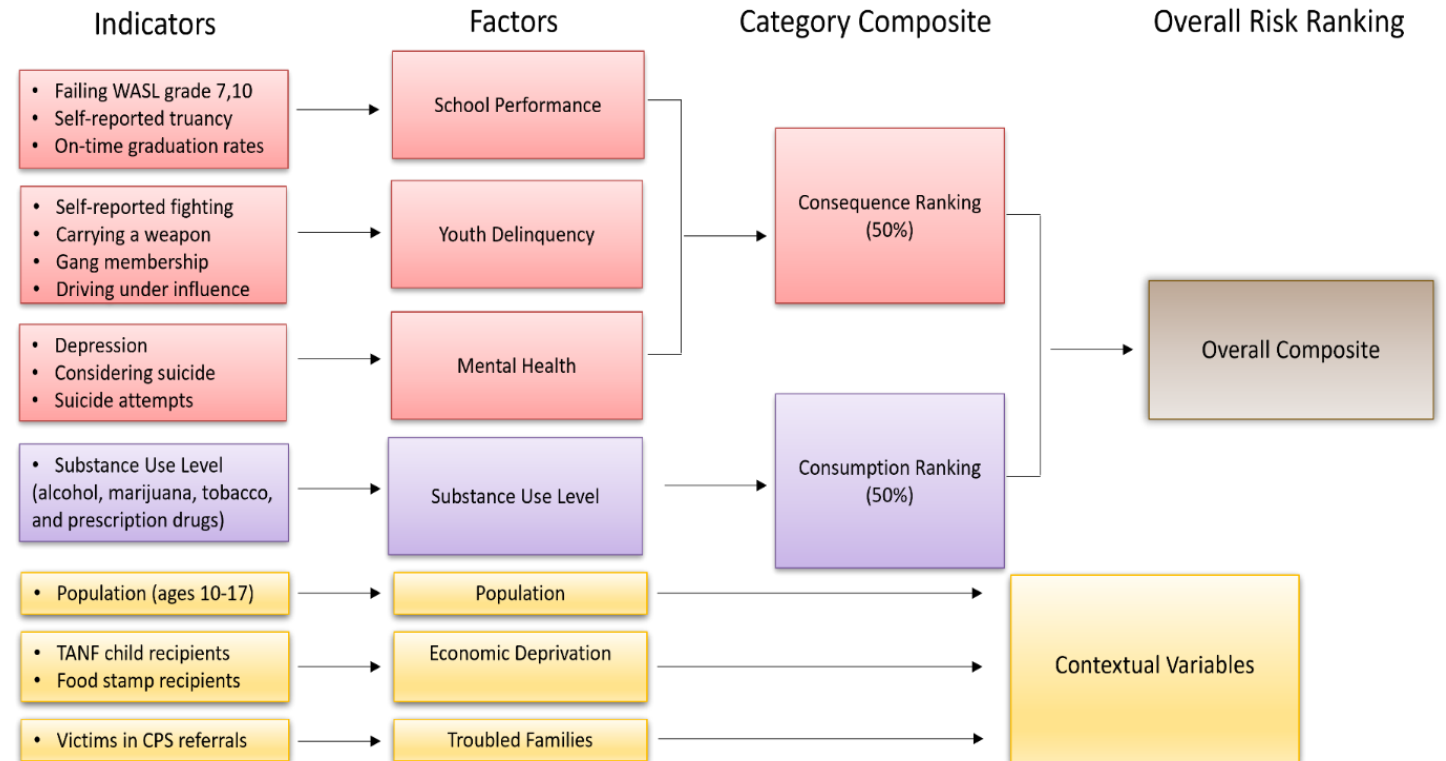
- ▶ First Year's Away from Home in 7 Universities
- ▶ Check-in with Yourself statewide online app

▶ **Prevention Evidence Based Programs Training**



Evaluating Risk and Need Among Communities

- ▶ Logic Model: Includes indicator (from surveillance data) as they contribute to composite risk score (and percentile ranking).
- ▶ Funding for promotion and prevention services is targeted to identified high-risk communities.
 - ▶ Targeted approach advances health equity and stretches funding.



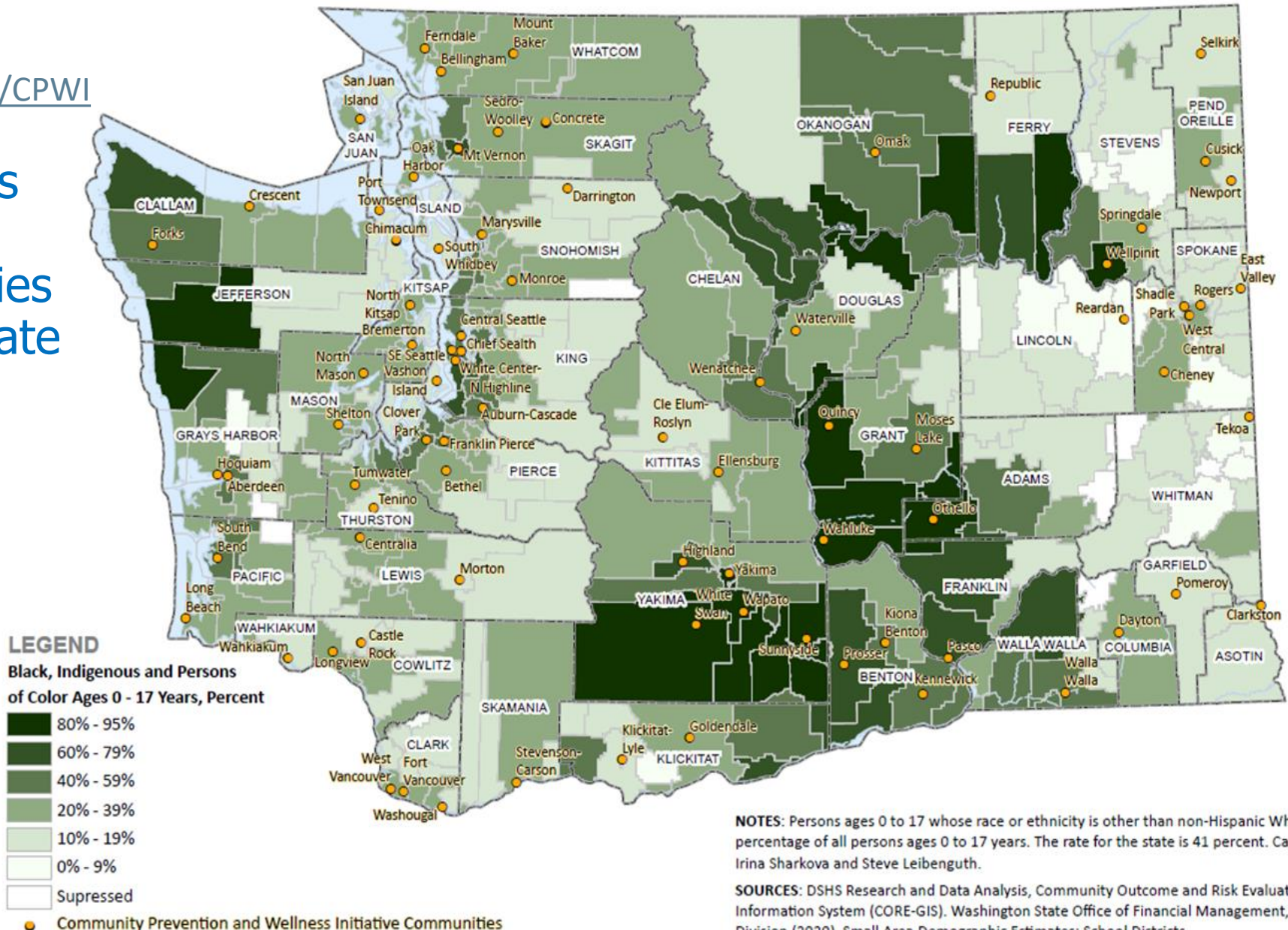
Black, Indigenous and Persons of Color, Ages 0 - 17 Years

as a Percentage of All Persons Ages 0 to 17 by School District, 2020

www.TheAthenaForum.org/CPWI

Prevention Services are Focused in Diverse Communities Throughout the State

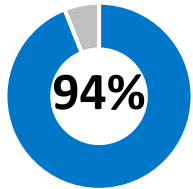
31 of 95 sites have over 40% BIPOC children and adolescence



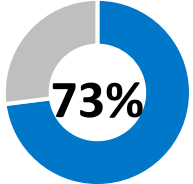
Prevention Works!

CPWI Community/School – Level Impact

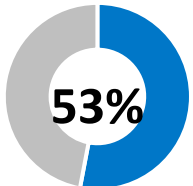
▶ Decreased Substance Use Indicators:



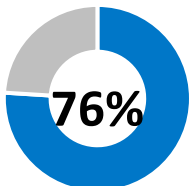
of CPWI sites had significant decreases or remained neutral across most substance use outcomes (>80%)



of CPWI sites showed reductions in **heavy drinking** among youth



of CPWI sites showed reductions in youth **access to alcohol**



CPWI sites showed reductions in youth **access to cigarettes**

▶ Improved School Outcomes:

- ▶ Improved graduation rate
- ▶ Decreased dropout out rate
- ▶ Improved grades

▶ Effectively Delay the Onset of Substance Use Between 6th Grade and 12th Grade

▶ Are Proven **Cost Beneficial**

Tribal Prevention and Wellness

▶ 27 Tribes Implementing Prevention Programming

▶ Programs Include:

- ▶ Healing of the Canoe
- ▶ Gathering of Native Americans
- ▶ Mentoring
- ▶ Cultural Activities

2021

Tribal and Urban
Indian Prevention
Professional

Joe Hipp

All Nations
Foundation



Joe takes a unique approach to suicide prevention among Native youth, drawing on his unique experiences and platform as a member of the Blackfoot Tribe. As a retired professional heavyweight boxer, Mr. Hipp founded the All Nations Foundation in Puyallup. Through All Nations, Mr. Hipp and others use boxing to help American Indian youth find connection and build resilience.

Community-Based Organization Grantees

- ▶ State funded CBOs serve communities with higher need and greater risk statewide through SUD prevention as well as MH promotion and suicide prevention programming
- ▶ Evidence-based, research-based, and innovative strategies implemented
- ▶ Funding through Dedicated Cannabis Account, Mental Health Promotion state funding, and State Opioid Response grants
- ▶ 22 current CBO grantees
 - ▶ Request for Applications (RFA) for new State Opioid Response grantees recently closed and applications are under review

Mental Health Promotion Programs

- ▶ Funding is general state funds provided by WA State Legislature to address mental health promotion and suicide prevention
- ▶ Programs and services are in alignment with the WA State Suicide Prevention Plan
- ▶ Required implementation:
 - ▶ At least one Youth Mental Health First Aid Training
 - ▶ At least one community awareness event
 - ▶ And direct service programming

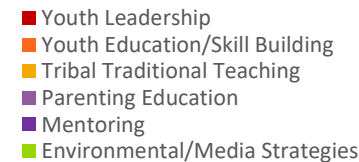
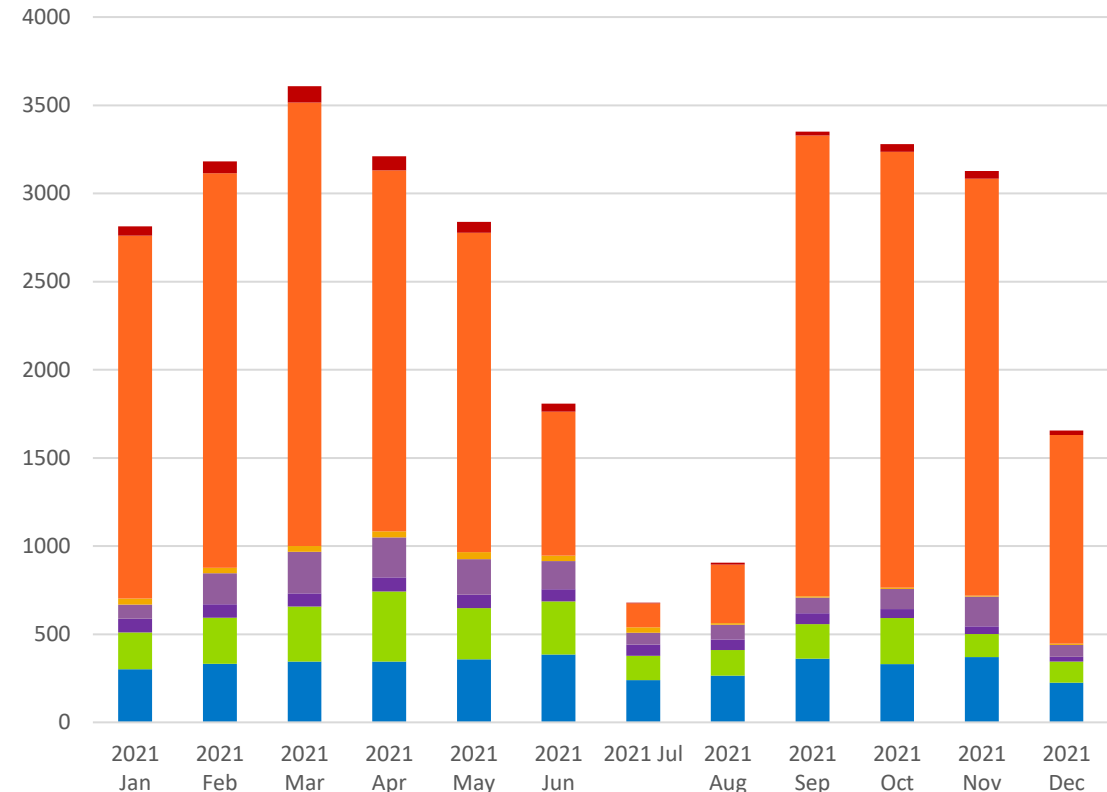
Young Adults

- ▶ **First Years Away From Home project**
 - ▶ WSU created a Handbook for parents and caregivers of first year on-campus students
 - ▶ Walks through how to stay engaged and supportive of transition young adults
 - ▶ Provides activities and resources to enhance engagement and support with student
- ▶ **Check-in With Yourself Application**
 - ▶ Application developed by UW to target young adults
 - ▶ Uses personalized feedback system to share social norming information and provide actionable steps paired with resources for improving healthy coping without substance use
- ▶ **College Coalition for Substance Abuse Prevention:**
 - ▶ Longest running young adult effort
 - ▶ Provides training and technical assistance to support colleges and universities

Prevention's Reach Across the State: All Funded Entities

▶ In SFY 2022

- ▶ 12,516 unique participants
- ▶ Combined Aggregate and Population reach > ~ 21m
- ▶ 21,416 services provided
- ▶ 954 programs
- ▶ 81.79% participants are in evidence-based programs (EBPs)



Education and Media Campaigns

Now that marijuana is legal for adults in Washington ...




A parent's guide to preventing underage marijuana use



Social Development Research Group

Extra Patrols On Now



**DRIVE HIGH
GET A DUI**



TEENS ARE UNDER THE INFLUENCE...OF YOU.
LEARN MORE AT STARTALKINGNOW.ORG

5 Things to Know

about marijuana use while pregnant or breastfeeding

Pregnancy and breastfeeding can be exciting and full of learning experiences for new moms. No two women have the same experience. Here are five things new moms should know about using marijuana. To learn more, visit LearnAboutMarijuanaWA.org

- 1** There are safer ways to manage pregnancy discomforts.

Morning sickness, stress, pain, and nausea can cause discomfort. If you have any of these symptoms, there are ways to manage them that don't harm your baby. Talk to your primary care provider for safer alternatives.
- 2** The chemical in marijuana that makes you feel "high" can transfer to your baby.


The active ingredient in marijuana, THC, can pass to your baby during pregnancy and breastfeeding. This can happen no matter how you use marijuana. Babies exposed to THC can have problems with feeding, paying attention, and learning. You may not see some effects until your child is older.
- 3** Smoking and storing marijuana in the home has risks.

Protect your children from secondhand smoke by only smoking outside, washing your hands, and changing clothes afterwards because smoke can linger. If you have marijuana products in your home, be sure to keep them locked up and out of reach of your children.
- 4** Marijuana can affect your ability to protect your baby.

Marijuana can impair your judgment, alertness, and reaction time. You need these skills to drive safely and tend to your baby's needs.
- 5** "Natural" does not mean safe.

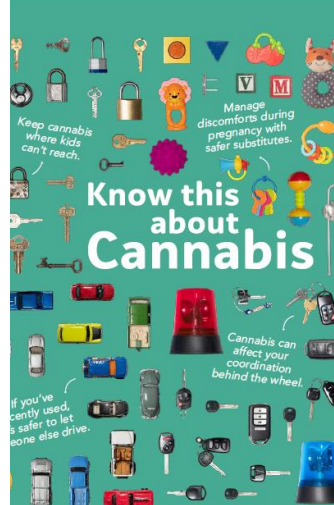
Marijuana has health risks for you and your baby. Just because it is a plant, does not mean it is safe to use while pregnant or breastfeeding.

For help quitting marijuana, call **Washington Recovery Helpline: (866) 789-1511**
For people with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD) / TTY call 711.



140-NorDOH March 2018

Know this about Cannabis



Keep cannabis where kids can't reach.



Manage discomforts during pregnancy with safer substitutes.

Cannabis can affect your coordination behind the wheel.

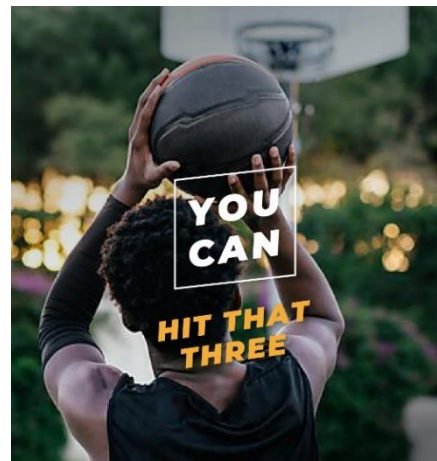
If you've recently used, it's safer to let someone else drive.

IT COMES TO CANNABIS IN A MINUTE, THERE'S A LOT TO KNOW.

Learn more about safe practices at KnowThisAboutCannabis.org

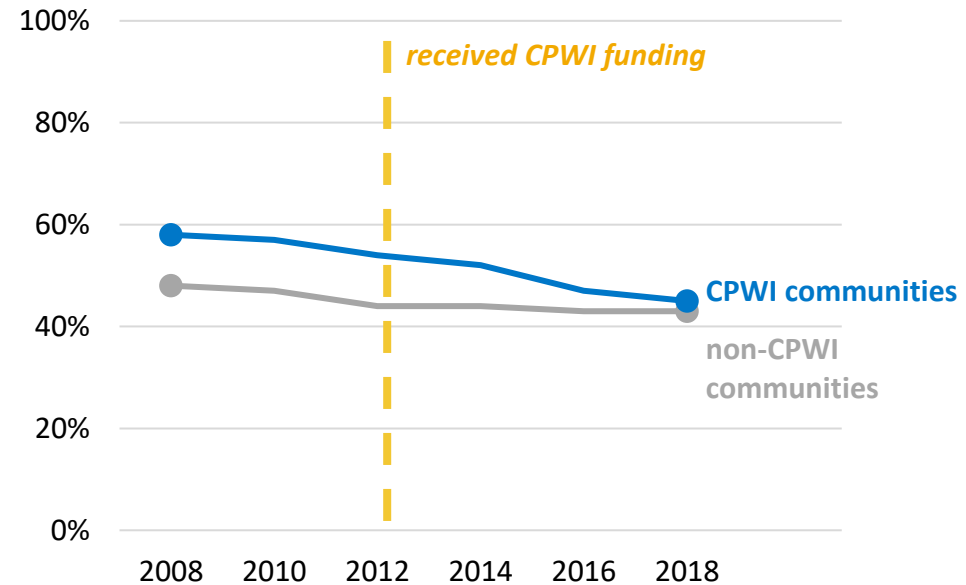
**YOU CAN
ACHIEVE YOUR DREAMS**



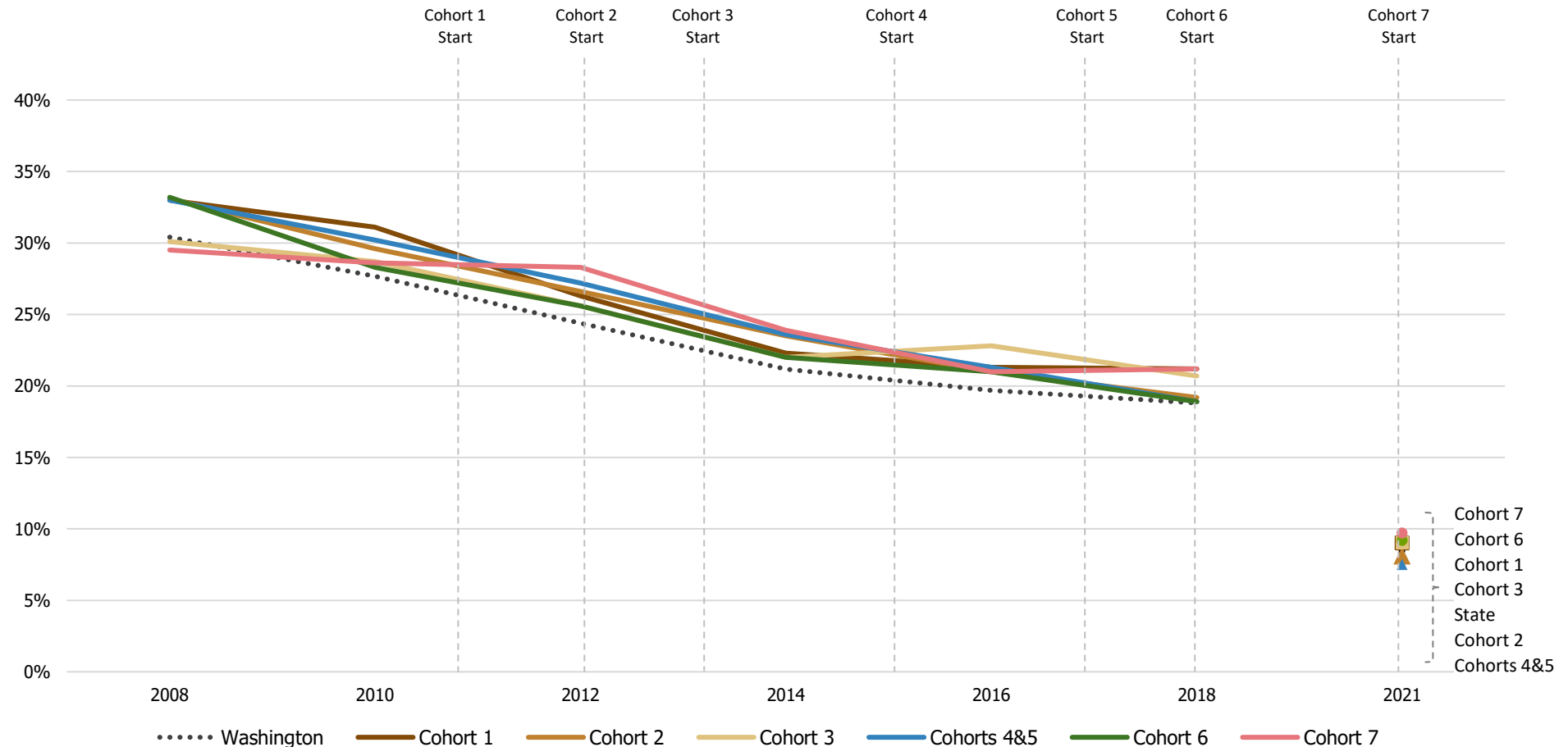
**YOU CAN
HIT THAT THREE**

Types of Comparisons

▶ CPWI Communities vs. Non-CPWI Communities

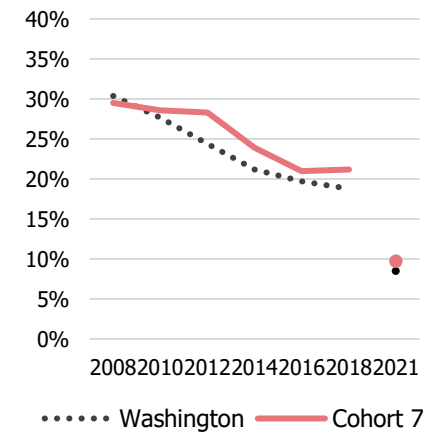
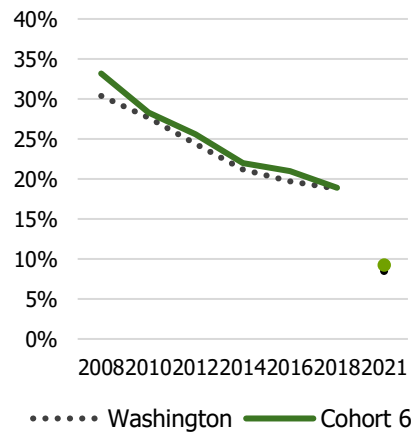
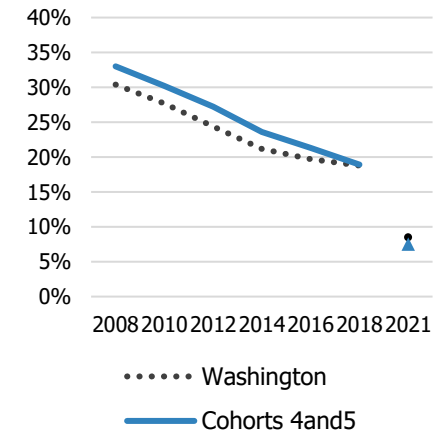
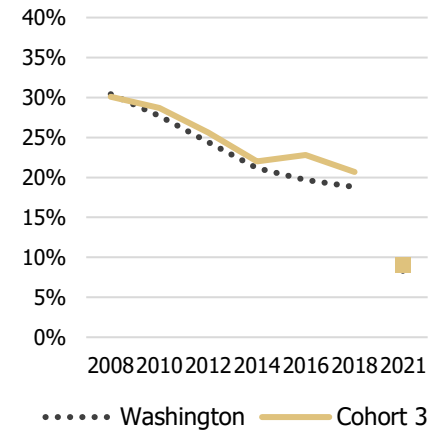
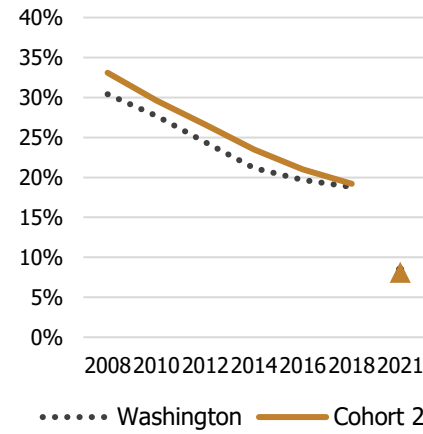
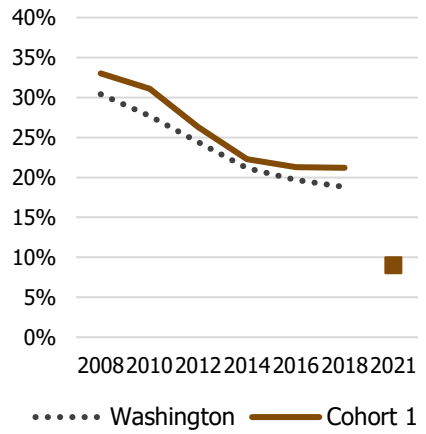


CPWI Communities Following WA State Trends: 10th Grade Rates of Alcohol Use in Past 30 Days are Decreasing



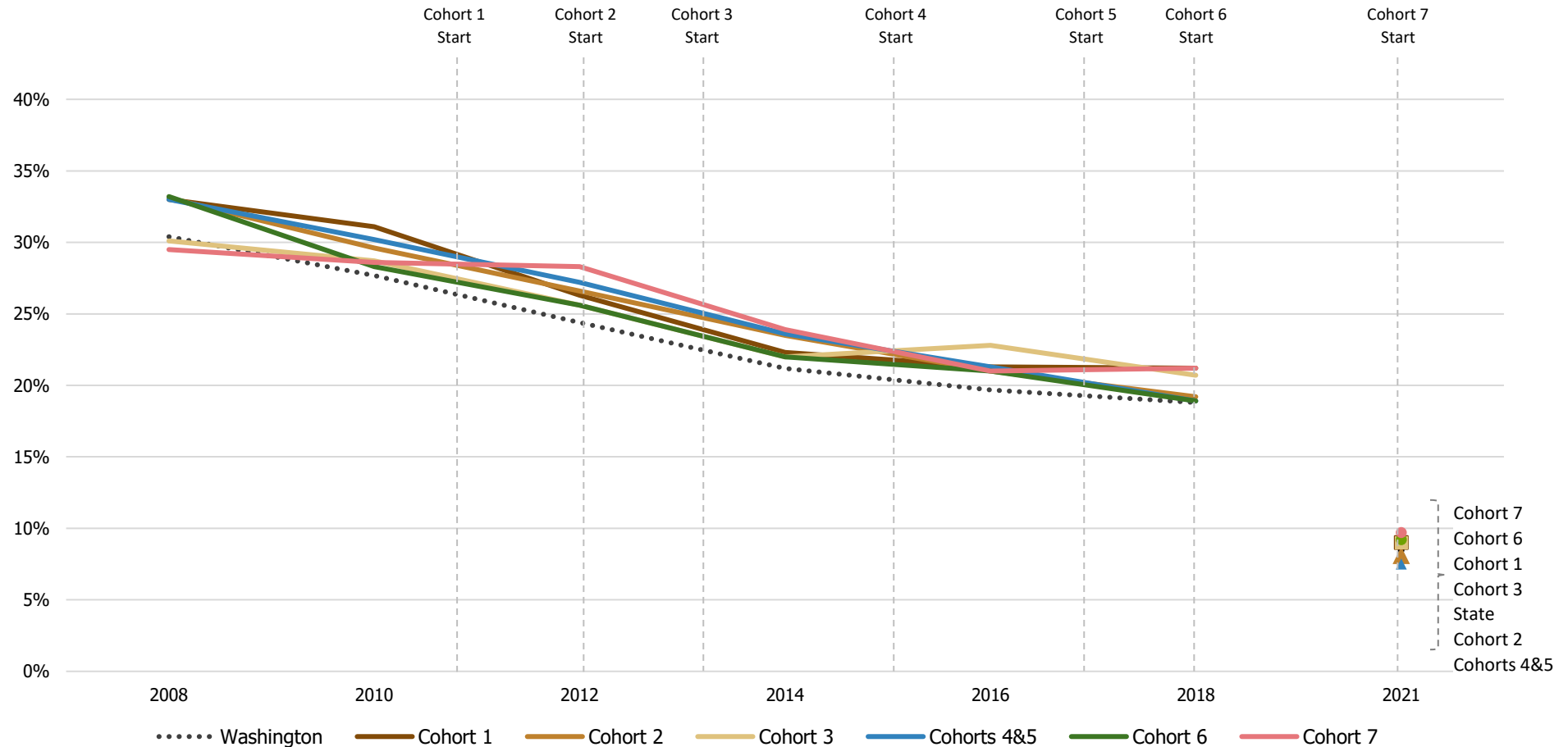
Data Source: HYS

CPWI Communities Following WA State Trends: 10th Grade Rates of Alcohol Use in Past 30 Days are Decreasing



Data Source: HYS

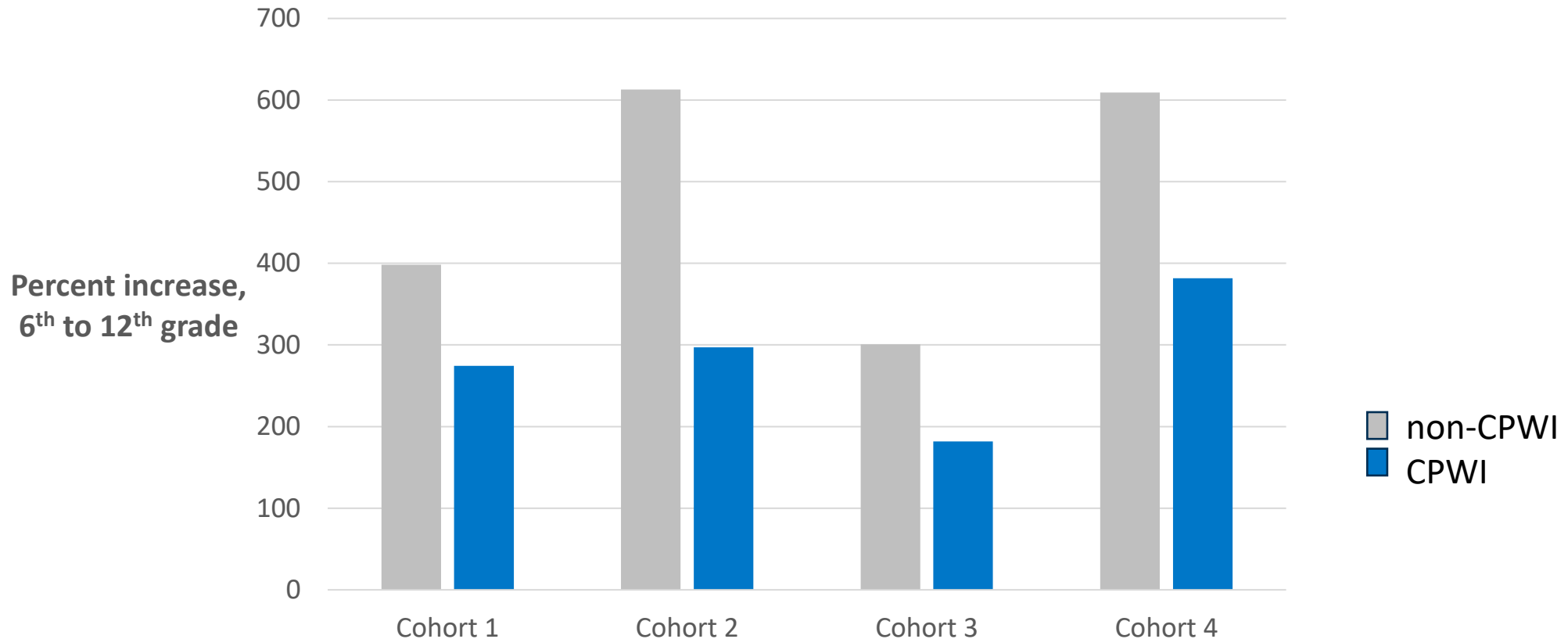
CPWI Communities Following WA State Trends: 10th Grade Rates of Binge Drinking are Decreasing



Data Source: HYS

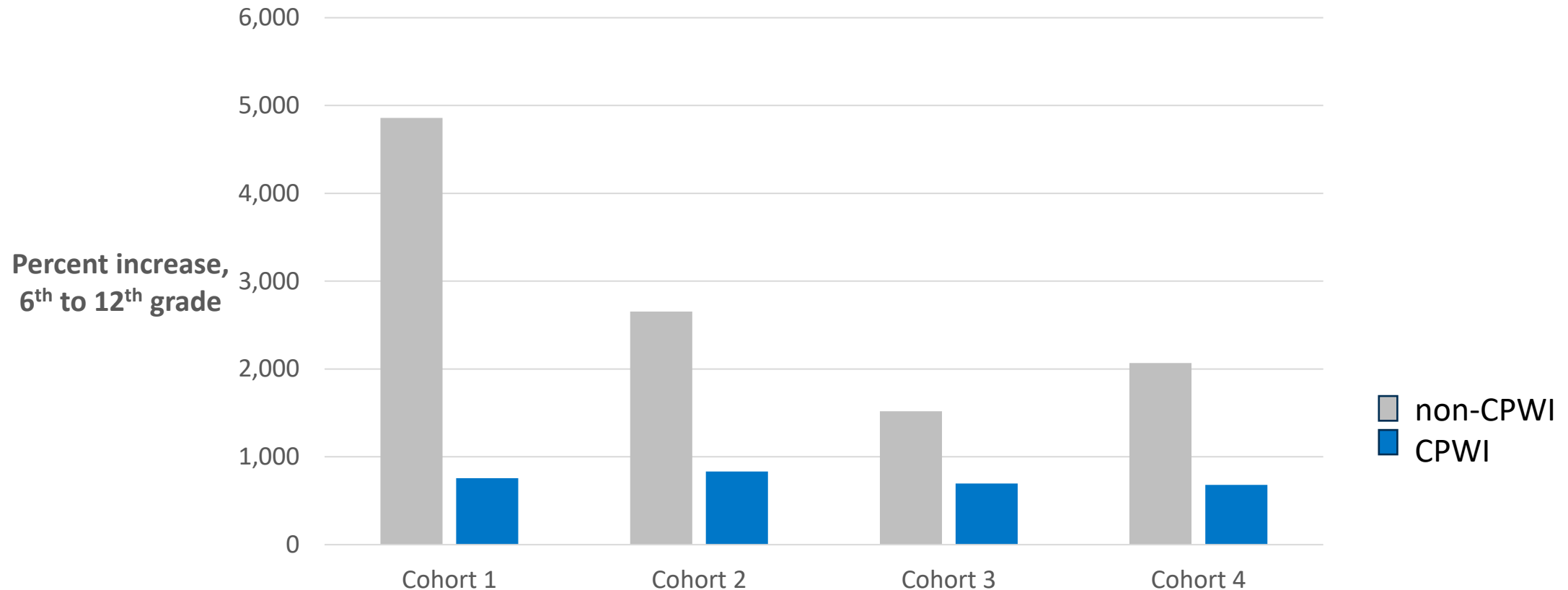
Effectively Delay the Onset of Substance Use Between 6th Grade and 12th Grade

Increases in Binge Drinking: non-CPWI vs. CPWI



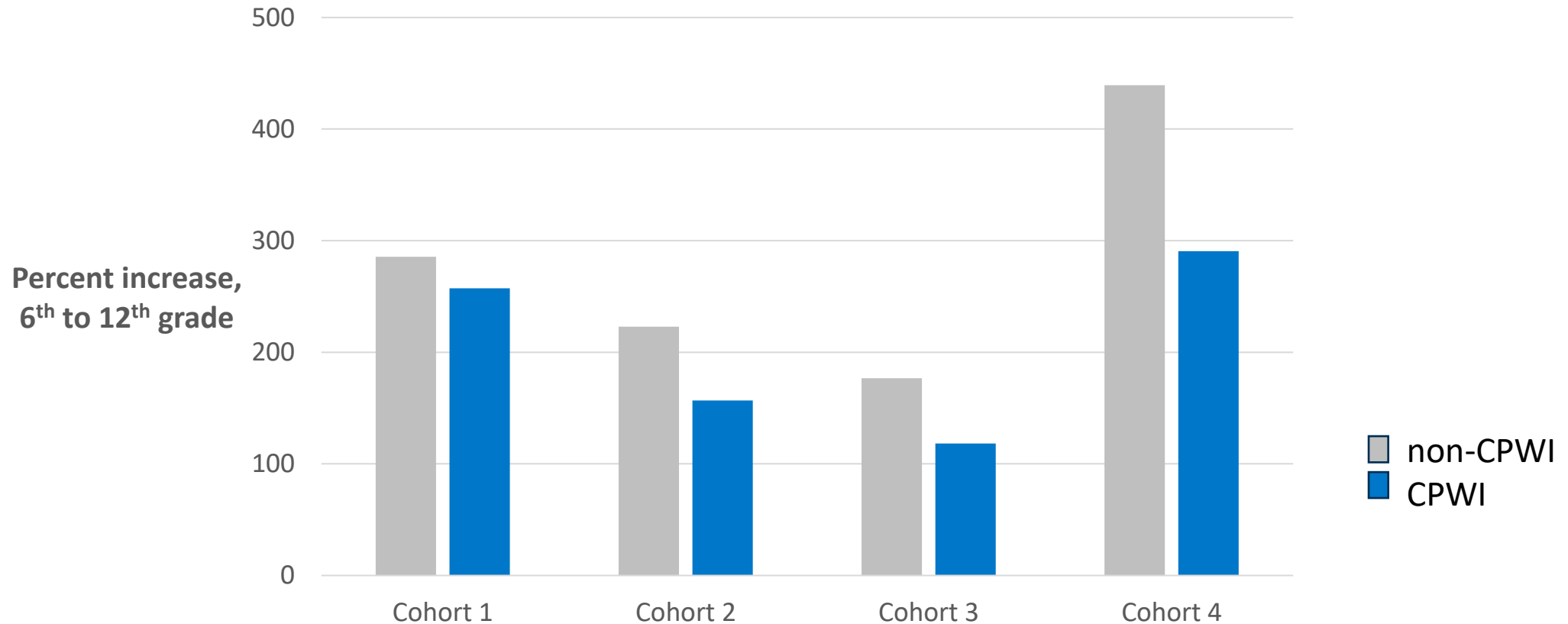
Effectively Delay the Onset of Substance Use Between 6th Grade and 12th Grade

Increases in Marijuana/Cannabis: non-CPWI vs. CPWI









Effectively Delay the Onset of Substance Use Between 6th Grade and 12th Grade

Increases in Cigarette Use: non-CPWI vs. CPWI



Evidenced-Based Programs and Benefit Cost

In SFY 18 and SFY 19, we estimate that our investments in these EBPs led to over \$124 million in benefits to society.

					
Communities that Care	Community-based Mentoring	Family Matters	Strengthening Families	Good Behavior Game	Positive Action
BC-86% NPV=\$2,617	BC-65% NPV= \$7,297	BC-73% NPV= \$1,460	BC-60% NPV = \$2540	BC-76% NPV=\$9.913	BC-94% NPV=\$30,096

Laws, Policies, and Norms Efforts

- ▶ Education on impacts of laws and rules and promotion of ensuring public health and safety are maintained or enhanced.
 - ▶ Limit access and availability
 - ▶ Limit advertising and marketing
- ▶ Resources, including research and data for decision-making.
- ▶ Support for MH promotion and SUD prevention services for local community and schools especially those with higher risk and need.
- ▶ Public Education and media strategies.
- ▶ Support local communities and school for healthy policies.

As we Look Ahead

▶ Priorities:

- ▶ Coordinated efforts among SPE Consortium and state partners
- ▶ Policy coordination and behavioral health reviews
- ▶ Stabilization and growth of services to communities and schools
 - ▶ Looking at additional BH areas including overlap with SUD, such as eating disorders
 - ▶ Expanding primary prevention and wellness services for young adults
 - ▶ Further integration of primary prevention, mental health promotion and wellness service delivery methods
 - ▶ Expansion of local services for community- and school-based services
 - ▶ Ongoing support for workforce development
 - ▶ Continue enhance data collection and use of data

HCA / DBHR Updates: Sarah Mariani

- ▶ Celebrating successes
- ▶ Prevention system overview
- ▶ **Gratitudes**

Networking Activity:

Hopes and Dreams Over the Next 10 Years

- For 5 minutes – individually write down on post-it notes what you hope to see in your coalition, community, or the field of prevention over the next 10 years.
- For 5 minutes – partner up at your table and share your ideas.
 - Also write down 1-2 action items that you could take to make these dreams come true!
- For 10 minutes – share out at your larger table all together.
- Place your post-its on the wall mural before/during lunch so we can see these beautiful hopes and dreams!

Lunch and Table Prompts

Key Leader Events & Town Halls coming up for CPWI and other providers:

- Discuss how you collaborate with providers in your area for these events..
 - Who is invited? What connection are you most proud of?
How are your SAPs, ESDs or CBOs involved?
- What do you have planned for this year/early next year?
 - Any novel ideas to share with each other?

A decorative border on the left and right sides of the slide, featuring colorful abstract shapes in shades of blue, purple, orange, and pink, arranged in a repeating pattern.

Welcome Back from Lunch!

Five-Year Strategic Plan Overview from the State Prevention Enhancement (SPE) Policy Consortium



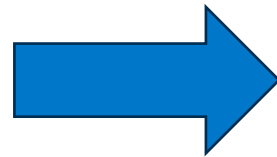
The Statewide 5-Year Strategic Plan

State Prevention Enhancement Policy Consortium

Agenda for Today

1:00-1:15	Introductions & Welcome Activity	Alicia Hughes, MA, CPP Prevention Supervisor, HCA Isaac Wulff, CPP Prevention System Manager, HCA
1:15-1:35	Purpose of the Strategic Plan Strategic Prevention Framework Model	Alicia Hughes, MA, CPP Prevention Supervisor, HCA
1:35-1:50	Overview of needs assessment & targets	Sandy Salivaras, PhD R+E Manager, HCA Tyler Watson, PhD R+E Manager, HCA
1:50-2:05	SPE Policy Consortium Action Plan	Sarah Mariani, CPP Section Manager, HCA Allen Christianson ...
2:05-2:35	SPE Workgroup Action Plans	Erika Jenkins, CPP Policy and Project Manager, HCA
2:35-2:50	Application of the Strategic Plan	Isaac Wulff, CPP Prevention System Manager, HCA
2:50-2:55	Final Reflections	Isaac Wulff, CPP Prevention System Manager, HCA
2:55-3:00	Closing	Alicia Hughes, MA, CPP Prevention Supervisor, HCA

Engagement Tips – SQRRR



Engagement Tips – SQRRR

▶ Survey

- ▶ Multiple quick scans. DON'T READ YET! Take a break afterwards, if possible.

▶ Question

- ▶ Form one or more questions in your mind. “What do they mean by _____?”

▶ Read

- ▶ Use the questions in your mind to guide your reading.

▶ Recite

- ▶ Verbalize what you have read, including answers to your questions.

▶ Review

- ▶ Check the content again to see if you were correct.

Purpose of the Strategic Plan & Strategic Prevention Framework (SPF) Model

What is the SPE Policy Consortium?

- ▶ Full Name
 - ▶ State Prevention Enhancement (SPE) Policy Consortium.
- ▶ Who can participate?
 - ▶ Any statewide organization working on preventing substance use disorder and/or promoting mental health.
- ▶ What do they do?
 - ▶ Inform – partners, funders, leaders
 - ▶ Support – workgroups and partners
 - ▶ Coordinate – reduce duplication and ensure system efficiency.



Mission, Vision, and Key Values

Mission: The SPE Policy Consortium, through partnerships and collaboration, will strengthen and support an integrated, statewide system of community-driven SUD prevention, behavioral and mental health promotion, and related themes.

Vision: A state where all individuals, families, youth, and communities can be as healthy as possible in a safe and nurturing environment.

Key values:

- ▶ Work collaboratively to produce a collective impact.
- ▶ Address health disparities and promote health equity.
- ▶ Make data-informed decisions.
- ▶ Honor current state and tribal resources, and ensure cultural competence, including honoring the Centennial Accord between the Federally Recognized Indian Tribes in Washington State and the State of Washington.
- ▶ Build community wellness.
- ▶ Support community-level initiatives.
- ▶ Consider the entire lifespan of the individual.
- ▶ Consider impacts of Health Care Reform and Indian Health Care Improvement Act.

Key Principles

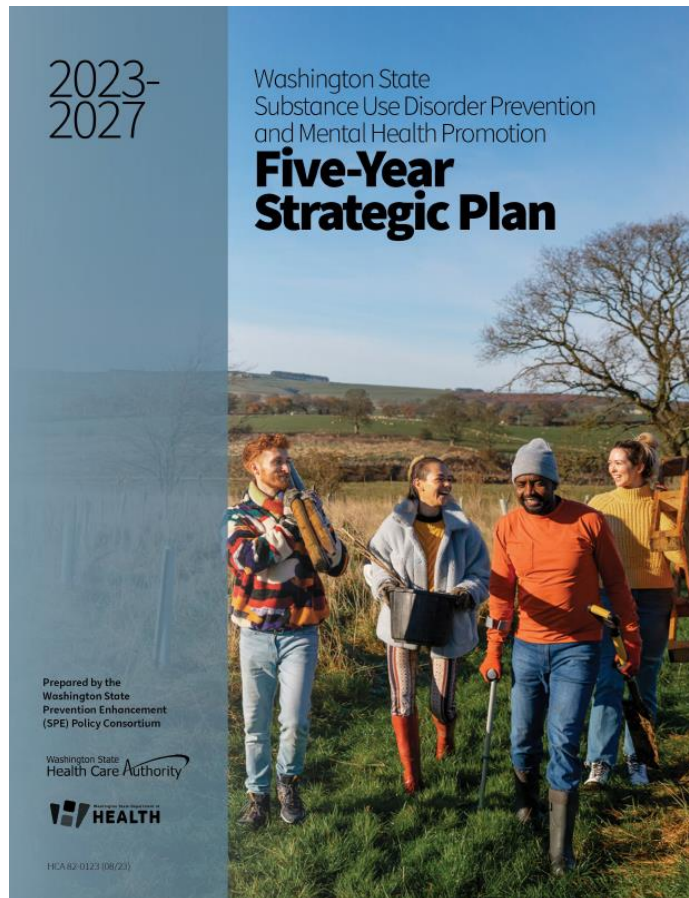
- ▶ We work to prevent youth access to alcohol and other drugs
- ▶ We work to educate the broader community
- ▶ We promote the inclusion and education of research in policymaking
- ▶ We implement programs that further the development of positive youth development
- ▶ We support public policies that support public behavioral health and safety

Where to Learn More...

The screenshot displays the ATHENA website interface. At the top left is the ATHENA logo with the tagline "The site for substance use disorder prevention and mental health promotion professionals and volunteers." A navigation menu includes "Home", "Headlines", "Prevention priorities" (circled in red), "Training", "Providers", "Prevention 101", and "Who's who". Below the menu are four content boxes: "News from DBHR", "All providers", "Announcements", and "Community library".

The right side of the screenshot shows a detailed view of the "Prevention priorities" page. The breadcrumb trail is "Home » State Prevention Enhancement (SPE) Policy Consortium". The main heading is "State Prevention Enhancement (SPE) Policy Consortium". A sidebar lists various prevention topics, with "State Prevention Enhancement (SPE) Policy Consortium" circled in red. The main content area describes the consortium's mission and lists priority areas, including "Cannabis use and misuse prevention". A "MEETING AGENDAS AND NOTES 2021" sidebar lists dates from January 11 to July 12 with links to meeting notes and presentations.

2023 Plan Preview



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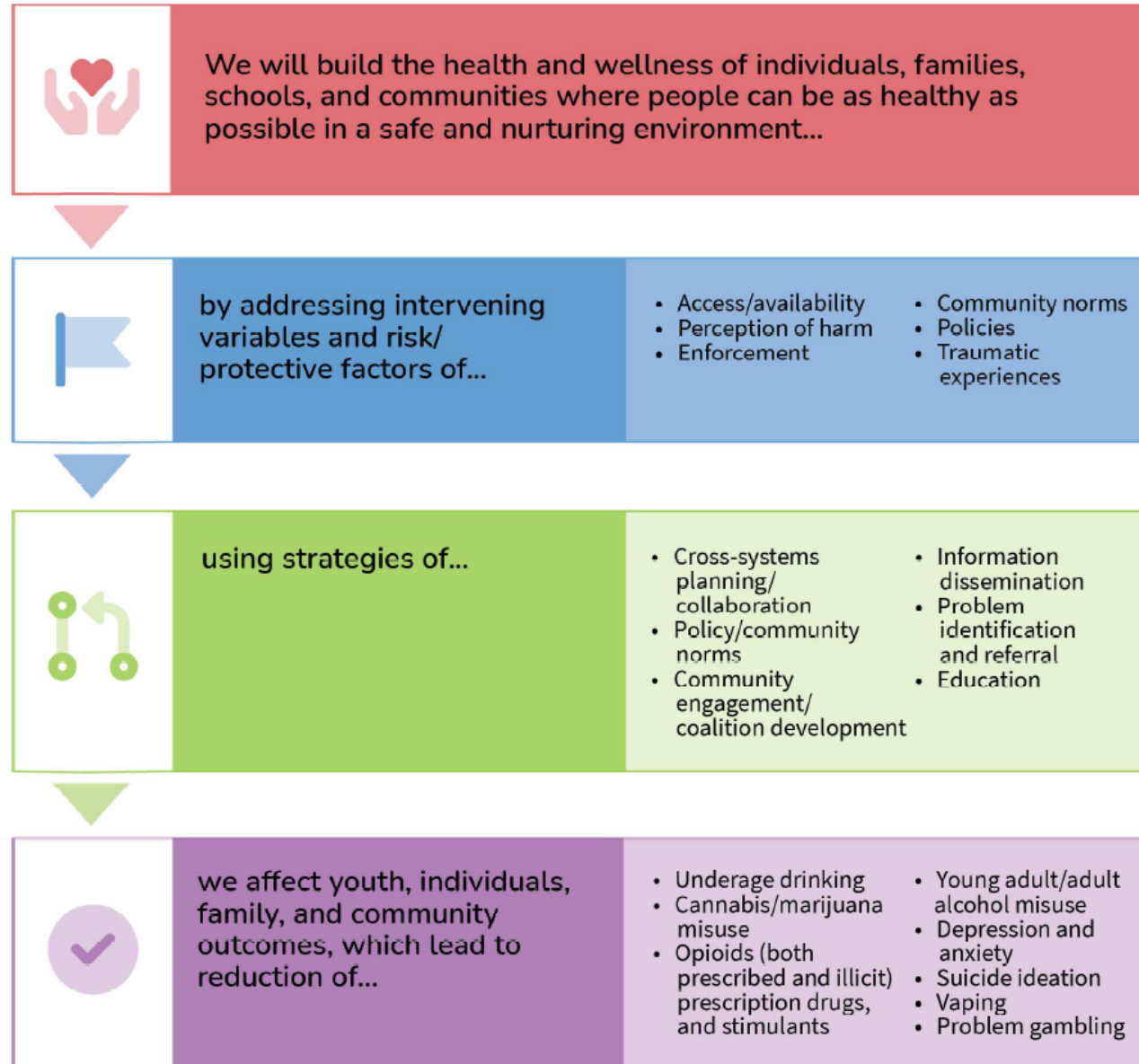
Executive Summary - Overview

- ▶ Mission, Vision, and Values
- ▶ Planning Process
- ▶ Key Elements Summary
- ▶ Strategic Objectives
 - ▶ Increase Collaboration
 - ▶ Data informed decisions
 - ▶ Environmental strategies
 - ▶ Increase commitment to EBPs
 - ▶ Support BH workforce development



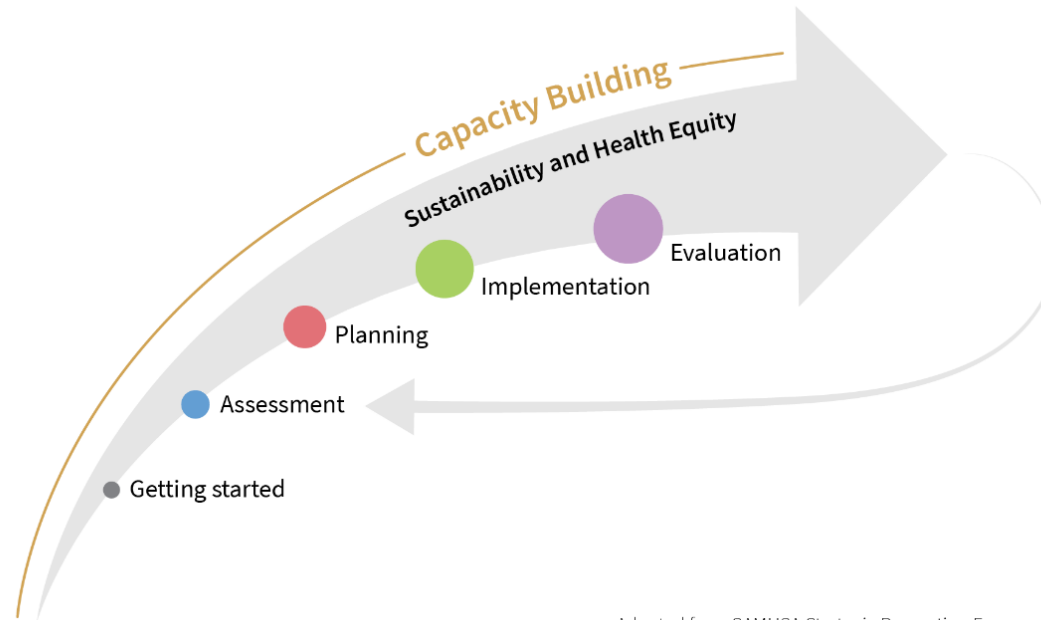
Summary of key elements

In summary



Strategic Prevention Framework (SPF)

- ▶ Capacity Building
- ▶ Assessment
- ▶ Planning
- ▶ Implementation
- ▶ Evaluation
- ▶ Sustainability
- ▶ Health Equity



Adapted from SAMHSA Strategic Prevention Framework

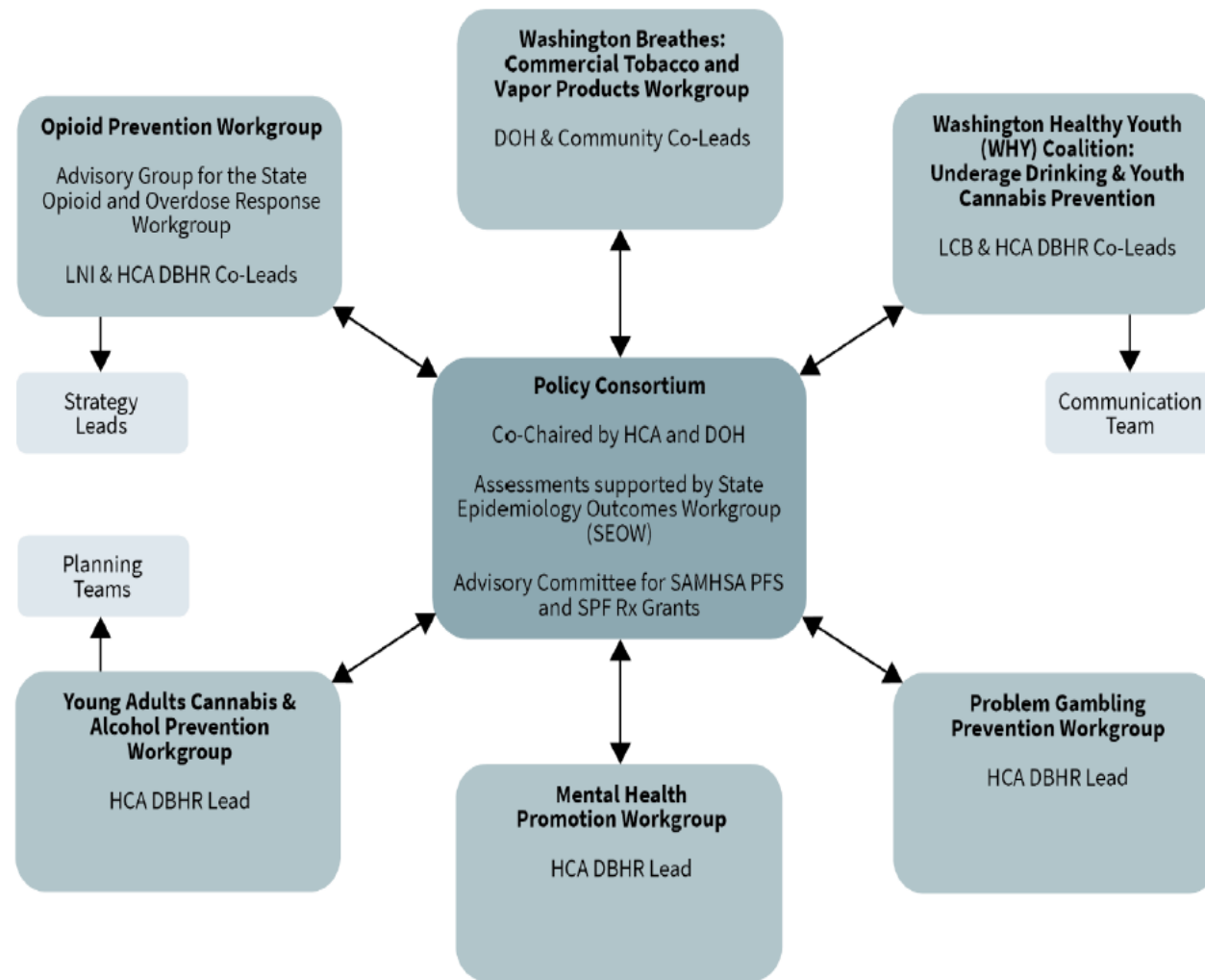
Getting Started and Capacity Building

- ▶ **Capacity building in membership**
- ▶ Capacity building in the prevention/promotion workforce
- ▶ Capacity building in service delivery

Workgroup Planning

- ▶ The SPE work is part of a larger effort

SPE Policy Consortium structure



SPE Policy Consortium Workgroups

- ▶ Mental Health Promotion and Suicide Prevention Workgroup
- ▶ Opioid Prevention Workgroup
- ▶ Problem Gambling Prevention Workgroup (to be created in 2023)
- ▶ Washington Breathes: Commercial Tobacco and Vapor Products Workgroup
- ▶ Washington Healthy Youth (WHY) Coalition: Underage Drinking & Youth Cannabis Prevention
- ▶ Young Adults Cannabis & Alcohol Prevention Workgroup

Getting Started and Capacity Building

- ▶ Capacity building in membership
- ▶ **Capacity building in the prevention/promotion workforce**
- ▶ Capacity building in service delivery

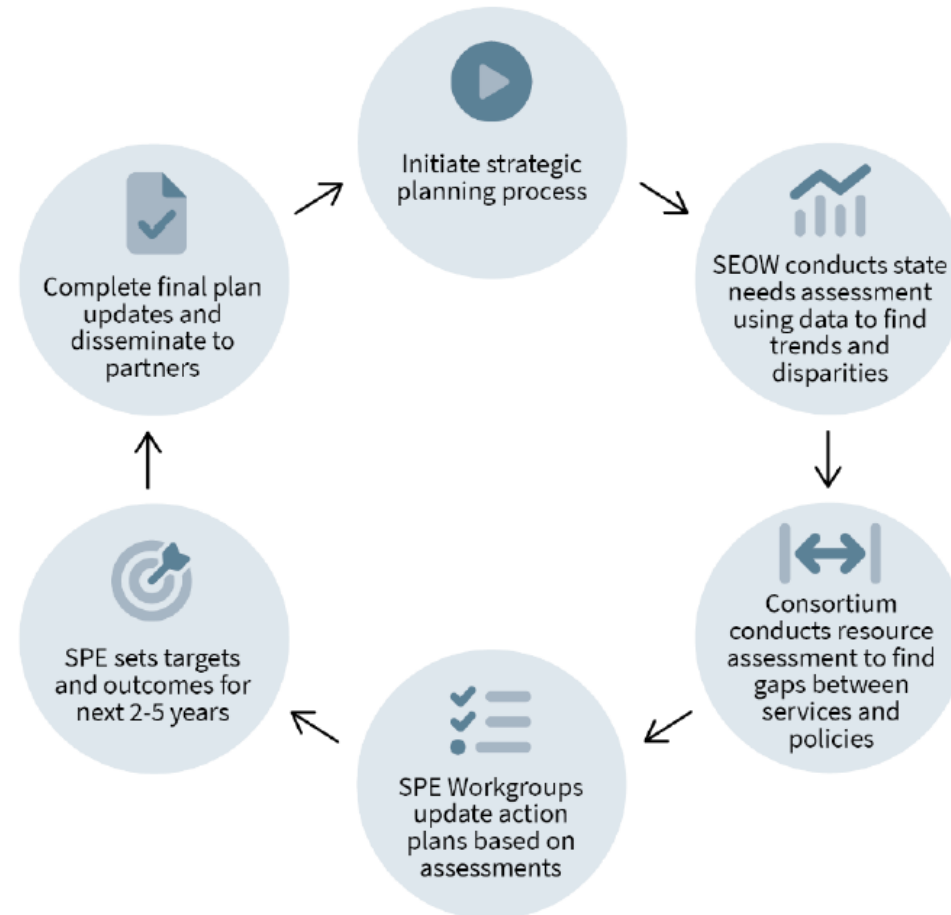
Getting Started and Capacity Building

- ▶ Capacity building in membership
- ▶ Capacity building in the prevention/promotion workforce
- ▶ **Capacity building in service delivery**

Assessment: Priority Areas

- ▶ Underage drinking
- ▶ Cannabis/marijuana misuse
- ▶ Opioids, both prescribed and illicit, other prescription drugs, and stimulants.
- ▶ Commercial tobacco misuse
- ▶ Young Adult/Adult – Alcohol misuse
- ▶ Depression and anxiety
- ▶ Suicide ideation
- ▶ Vaping
- ▶ Problem gambling

Planning



Timeline of the SPE Consortium and 5-Year Plan

October 2011	First Meeting of the SPE Consortium – Sue Grinnell (DOH) and Michael Langer (DBHR) presiding.
August 2012	First publication of the 5-Year Strategic Plan – Reinforced the use of the Strategic Prevention Framework (SPF) statewide.
Fall of 2017	First full update of the 5-Year Strategic Plan – David Hudson (DOH) and Sarah Mariani (DBHR) presiding.
Fall of 2019	Last update to the 5-Year Strategic Plan – Patti Migliore-Santiago (DOH) and Sarah Mariani (DBHR) presiding.
Present Day	October 2023 published new five-year plan

Implementation

- ▶ Continuing support for resources directed to prevention and promotion efforts statewide.
- ▶ Consortium and Workgroup action plans are implemented, tracked, and reported out on.

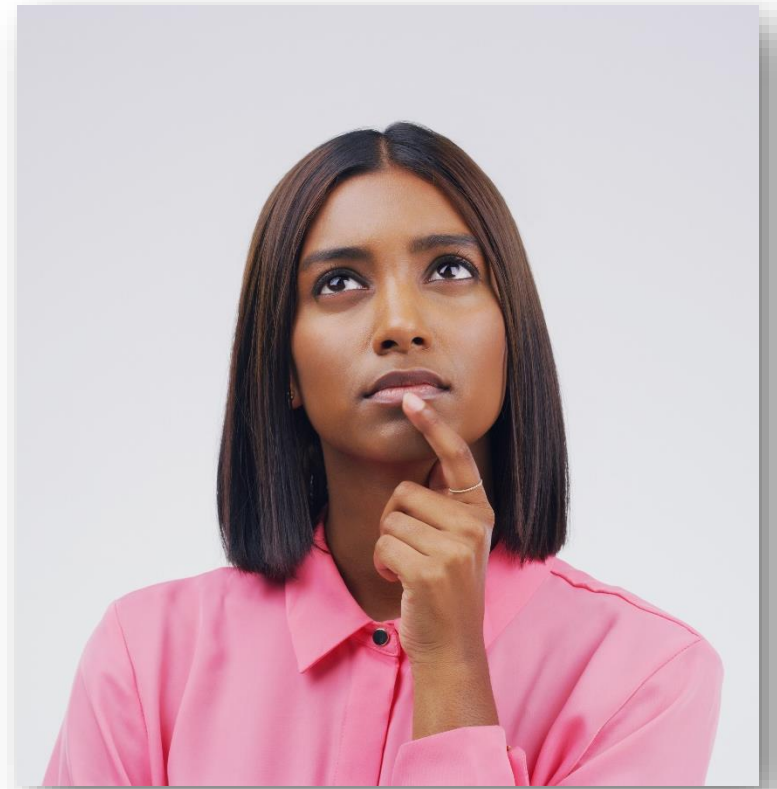
Evaluation

- ▶ Robust reporting systems from SPE Policy Consortium partner agencies/organizations.
- ▶ Tracking and analyzing data and outcomes from youth and young adult surveys in comparison to set targets.
- ▶ Tracking outcomes and progress on Consortium and Workgroup action plans.

Feedback Break - Mentimeter

- ▶ What surprises you so far about the SPE Strategic Plan?

- ▶ What are you looking forward to hearing more about today?



SPE Consortium Action Plan & Strategic Objectives

Strategic Plan Key Themes

SPE Consortium Mission Statement:

“The SPE Consortium, through partnerships, is working to strengthen and support an integrated statewide system of community-driven substance use disorder prevention, mental health promotion, and related issues.”

- ▶ Throughout the plan, emphasis on the following...
 - ▶ Health equity is top priority and discussed in all sections.
 - ▶ Discussion of possible pandemic point-in-time effect on data.
 - ▶ Clear connection between workgroup action plans and overall, SPE 5-year plan.

Strategic Objectives

- ▶ **Strategic Objective One:** Strengthen state collaboration to prevent initiation of substance use and promote mental health.
- ▶ **Strategic Objective Two:** Utilizing needs assessment data in Washington State, create and disseminate communication plans, campaigns, trainings, and resources to better serve populations in need.
- ▶ **Strategic Objective Three:** Implement environmental strategies to: reduce access and availability of substances; change community and social norms of substance use; and reduce stigma in accessing behavioral health services.
- ▶ **Strategic Objective Four:** Commit and dedicate efforts to implementing SUD prevention and mental health promotion programs to strengthen protective factors and reduce risk factors.
- ▶ **Strategic Objective Five:** Strengthen the long-term sustainability of the behavioral health promotion and SUD prevention workforce.

Strategic Objective One:

Strengthen state collaboration to prevent initiation of substance use and promote mental health.

Strategic Objective Two:

Utilizing needs assessment data in Washington State, create and disseminate communication plans, campaigns, trainings, and resources to better serve populations in need.

Strategic Objective Three:

Implement environmental strategies to: reduce access and availability of substances; change community and social norms of substance use; and reduce stigma in accessing behavioral health services.

Strategic Objective Four:

Commit and dedicate efforts to implementing SUD prevention and mental health promotion programs to strengthen protective factors and reduce risk factors.







Strategic Objective Five:

Strengthen the long-term sustainability of the behavioral health promotion and SUD prevention workforce.

Processing Break: 1 – 2 – 4 – All

- ▶ **One** = Think about what has been shared (1 minute).
- ▶ **Two** = Turn to your closest neighbor and share one thing you remember from the Plan and how it might affect your work (3 minutes).
- ▶ **Four** = Find another pair of folks and form a group of 4 to compare your discoveries (3 minutes).
- ▶ **All** = Raise your hand if your group of 4 has something that needs to be heard by the whole room (5 minutes).
 - ▶ *Or write down and enter on the Menti later!*

Needs Assessment & Targets

 Long-term Outcome Consequences 10-15 years	 Problem Areas 5-10 years	 Intervening Variables (Risk Protective Factors) 2-5 years	 SPE Consortium Partners' Strategies	 SPE Consortium Collaborative Strategies	 Evaluation Plan
Outcomes			Actions		
What is the problem?	Why?	Why here?	What are we going to do?	How can we do it together?	So what? How will we know?
<p>These problems...</p> <ul style="list-style-type: none"> • Chronic disease (ATOD Attributable Deaths - CHARS) • Crime (Alcohol/Drug –related arrests ages 10-25 - UCR) • Low graduation rates (HS On-time/Extended Graduation – OSPI) • Suicide (# of suicides/attempts ages 10-25 - CHARS) • Fatalities and serious injury from vehicle crashes (# Alcohol-Related Traffic Fatalities/Injuries ages 16-25 - WTSC) 	<p>These types of problem areas...</p> <ul style="list-style-type: none"> • Underage drinking (30-day use; problem use – HYS 10th grade) • Cannabis/marijuana misuse (30-day use – HYS 10th grade) • Any opioid/prescription drug misuse (30-day use– HYS 10th grade) • Commercial tobacco misuse (30-day use – HYS 10th grade) • Vaping (30-day use- HYS 10th grade) • Young adult/adult alcohol misuse (Use during pregnancy – PRAMS, YAHS) • Anxiety (Within last 2 weeks- HYS 10th grade) • Depression (Sad/Hopeless in past 12 months – HYS 10th grade) • Suicide ideation (Suicide ideation – HYS) • Problem gambling (Past 12 months - HYS 10th grade) 	<p>...specifically with these common factors...</p> <ul style="list-style-type: none"> • Access (Where get substance - HYS 10th grade) • Availability (Easy to get– HYS 10th grade) • Perception of harm (Risk of use– HYS 10th grade) • Enforcement (Get caught– HYS 10th grade) • Community norms (Laws/norms; harassment – HYS 10th grade; young adult use - NSDUH) • Hope scale (Agency and capacity - HYS 10th grade) 	<p>...can be addressed through these strategies...</p> <ul style="list-style-type: none"> • Cross-systems planning/collaboration 12 Agency/Orgs., 46 resources • Policy/community norms 12 Agency/Orgs., 46 resources • Education/alternatives 10 Agency/Orgs., 121 resources • Community engagement/coalition development 8 Agency/Orgs., 34 resources • Information dissemination 10 Agency/Orgs., 43 resources • Problem identification and referral 5 Agency/Orgs., 17 resources 	<p>...and working collaboratively on these strategies...</p> <ul style="list-style-type: none"> • Cross-systems planning/collaboration SPE Policy Consortium Membership, SPE Policy Consortium Workgroups, inter and intra agency collaborative projects • Information dissemination Public media, education, and/or awareness campaigns focused on problem areas • Policy/community norms Policy review, advocacy and promotion focused on problem areas • Education Professional development related to problem areas and strategies 	<p>...and we will track the key indicators listed for each of the outcomes (red, purple, blue columns) to measure our impact...</p> <p>Using state data sources: (see appendix for list of acronyms)</p> <ul style="list-style-type: none"> • HYS • CORE GIS (WTSC; PRAMS; LCB; CHARS) • BRFS • NSDUH • YAHS <p>Using strategy specific process data:</p> <ul style="list-style-type: none"> • Agency service data • Provider service data

Key Findings

- ▶ Overall, based on prevalence, misuse of **alcohol** is the most concerning substance issue among high school youth when compared to other substances. Alcohol use among youth and young adults has been on a decreasing trend.
- ▶ **Cannabis/Marijuana** ranks as the **2nd** most concerning substance misuse for youth. Cannabis/Marijuana use over the years continues to remain stable for high school youth. Among, youth aged 21-25, cannabis use has significantly increased.
- ▶ Commercial **tobacco** use by high school youth ranks **3rd** as a substance of concern. All forms of tobacco use (excluding E-cigarettes / Vape pen use) have continued to decline for high school youth and young adults.
- ▶ **Mental health** concerns are also prioritized as there is an increase in prevalence overtime in depression and suicide ideation, suicide planning, and suicide attempts among high school youth.

Substances Ranked from Highest to Lowest Prevalence

New Plan Ranking 2021

The table below summarizes findings from a review of substances up until 2021.

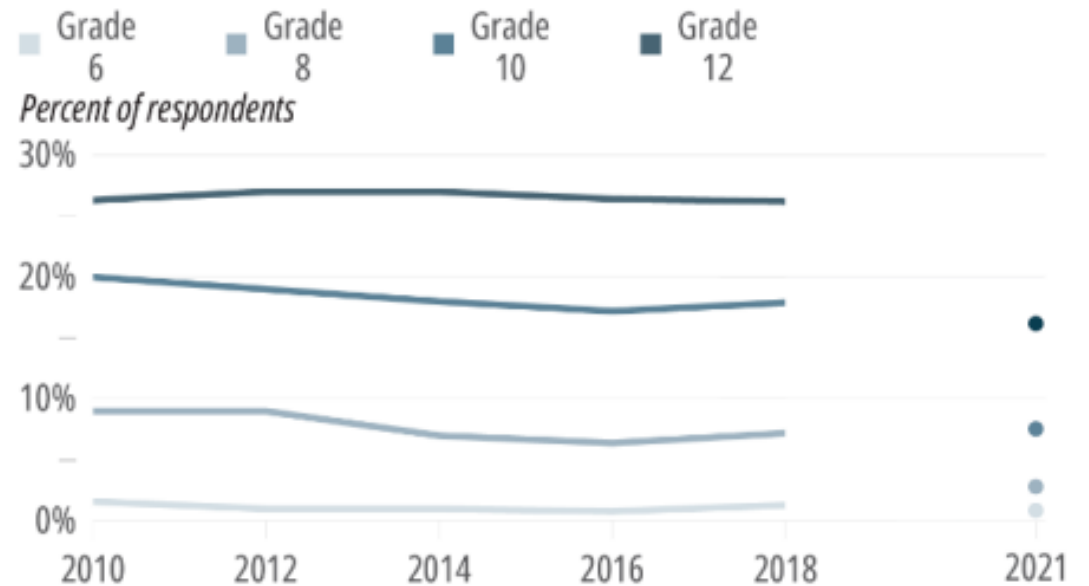
Trend: ↑ Increase | ↓ Decrease | ● No change

Ranking		Alcohol	Cannabis/ Marijuana	Tobacco ²	Opioid Misuse ³	Meth ⁴
Prevalence	Youth	1st	2nd	3rd	4th	5th
	Adults	1st	3rd	2nd	4th	5th
Change over time ¹	Youth	↓	●	↓	↓	●
	Adults	●	↑	↓ Age 18-25 ● Age 26+	↓ Age 18-25 ● Age 26+	●
Overall ranking		1st	2nd	3rd	4th	5th

Pandemic Effect

- ▶ The COVID-19 pandemic led to many changes in the lives of Washington youth
- ▶ HYS 2021 was likely influenced by the pandemic (e.g., decreased opportunity for socializing with peers)
- ▶ Trend data from before the pandemic and during/after the height of the pandemic should be interpreted with caution
- ▶ This is shown as a “break” in trend graphs
- ▶ HYS 2023 should help us determine which, if any, of the impacts will remain

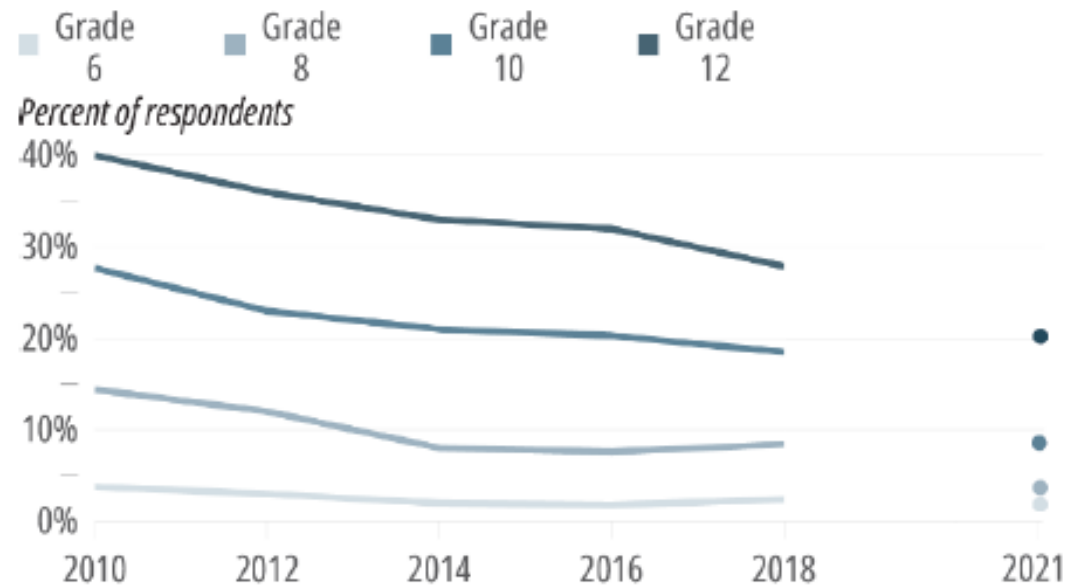
HYS Current (30-Day) Marijuana Use
2010-2021



Washington State Healthy Youth Survey; There is no connecting line between 2018 and 2021 to indicate caution should be used when comparing estimates between 2021 and prior years because of methodological changes for 2021. Due to these changes, significance testing between 2021 and prior years was not performed.

Alcohol Use Among Youth Continues to Decline

HYS Current (30-Day) Alcohol Use
2010-2021

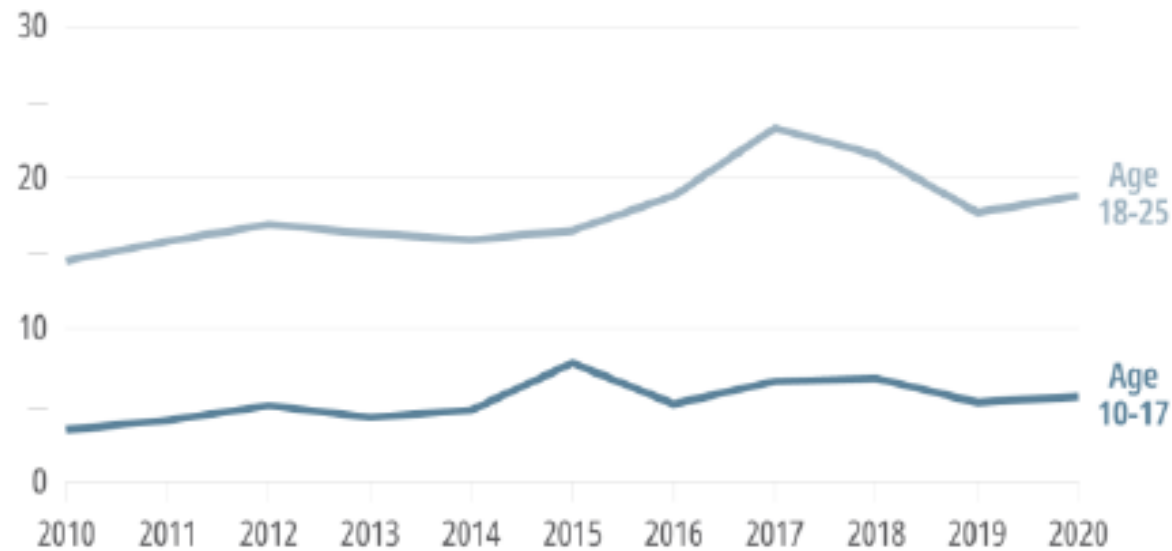


Washington State Healthy Youth Survey; There is no connecting line between 2018 and 2021 to indicate caution should be used when comparing estimates between 2021 and prior years because of methodological changes for 2021. Due to these changes, significance testing between 2021 and prior years was not performed.

Suicide Deaths Continue to Rise in Washington Youth

Suicide Death Rates by Age Group
Washington, 2010-2020

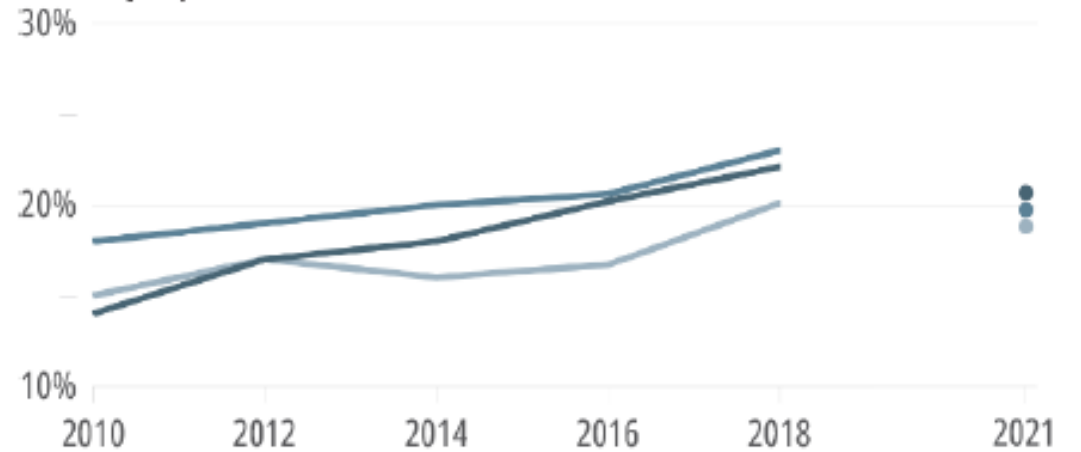
Rate per 100,000 population



Washington State Department of Health, Center for Health Statistics, Death Certificate Data

HYS Seriously Considered Suicide in Past 12 Months
2010-2021

■ Grade 8 ■ Grade 10 ■ Grade 12
Percent of respondents

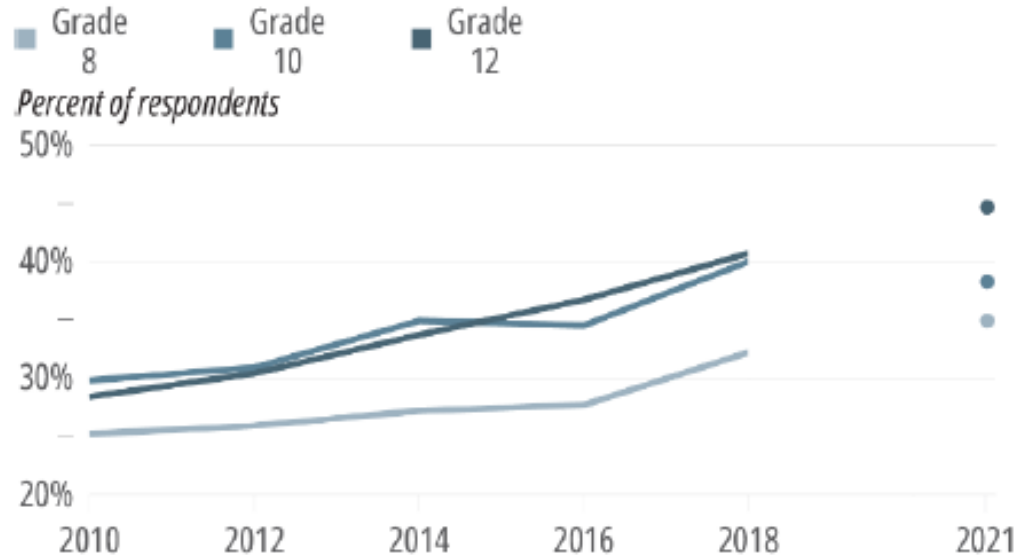


Washington State Healthy Youth Survey; There is no connecting line between 2018 and 2021 to indicate caution should be used when comparing estimates between 2021 and prior years because of methodological changes for 2021. Due to these changes, significance testing between 2021 and prior years was not performed.

A Large Proportion of Youth Report Feeling Sad or Hopeless in the Past 12 Months

HYS Sad or Hopeless Feelings Almost Every Day in Two-Week Period in Past Year

2010-2021



Washington State Health Youth Survey; There is no connecting line between 2018 and 2021 to indicate caution should be used when comparing estimates between 2021 and prior years because of methodological changes for 2021. Due to these changes, significance testing between 2021 and prior years was not performed.

Health Equity

- ▶ Significant mental disparities among female sex assigned at birth
- ▶ LGB students show disparities across all major indicators
- ▶ Students who self identify as disabled have significantly higher risk factors for problem behaviors
- ▶ Students who are unhoused are more than twice as likely to have attempted suicide
- ▶ Resource assessment shows that programs designed for LGB and disabled students are rare

Health disparities data

Health Disparities Data by Gender at Birth, Sexual Orientation, Disability Status, and Housing Insecurity, Washington State 10th Grade Students Subpopulation, 2021

Red highlighted data indicates a statistically significant difference at the p<0.05 level

Behavioral health problem	Gender at birth ¹		Sexual orientation (LGB) ²		Disability status ³		Housing insecurity ⁴	
	Female	Male	LGB	Hetero-sexual	Disability	No disability	Insecure housing	Secure housing
Smoked cigarettes in past 30 days	2.3%	1.6%	4.9%	1.1%	3.8%	0.8%	10.2%	1.7%
Drank alcohol in past 30 days	9.7%	7.0%	13.5%	7.2%	15.8%	6.3%	15.1%	8.1%
Used marijuana or hashish in past 30 days	7.9%	6.4%	13.9%	5.8%	11.5%	5.4%	16.6%	6.7%
Binge drinking in past 2 weeks	6.0%	4.9%	9.3%	4.8%	8.4%	4.7%	11.5%	5.1%
Pain killer use in past 30 days	1.2%	0.8%	2.3%	0.7%	3.0%	0.4%	4.0%	0.8%
Sad/hopeless in past 12 months	50.2%	25.4%	65.9%	29.0%	61.2%	28.5%	52.8%	36.5%
Suicide ideation	26.2%	12.6%	46.3%	11.5%	38.2%	13.0%	36.5%	18.5%
Suicide plan	20.8%	10.3%	34.8%	9.2%	30.5%	10.0%	26.0%	14.7%
Suicide attempt	11.6%	4.5%	20.9%	4.3%	18.2%	4.2%	16.3%	7.2%
Bullied in the past 30 days	16.3%	10.1%	23.1%	10.2%	25.7%	8.6%	21.7%	12.7%
Anxiety ⁵	55.0%	23.1%	67.5%	29.7%	61.8%	36.0%	47.2%	38.9%

2023 and 2025 Targets for Behavioral Health Problems

Alcohol use (10th grade)	HYS 2016	HYS 2018	HYS 2021	Target 2023	Target 2025
Drank alcohol in last 30 days	20.3%	18.5%	8.4%	15.0%	14.0%
Tobacco use (10th grade)	HYS 2016	HYS 2018	HYS 2021	Target 2023	Target 2025
Tobacco use in past 30 days (all tobacco, excluding e-cigarettes) ¹	10.2%	7.9%	3.5%	7.5%	7.1%
Smoked cigarettes in last 30 days	6.3%	5.0%	1.9%	4.8%	4.5%
Depression (10th grade)	HYS 2016	HYS 2018	HYS 2021	Target 2023	Target 2025
Sad/hopeless in past 12 months	34.5%	40.0%	38.1%	36.0%	34.1%

Audience Activity

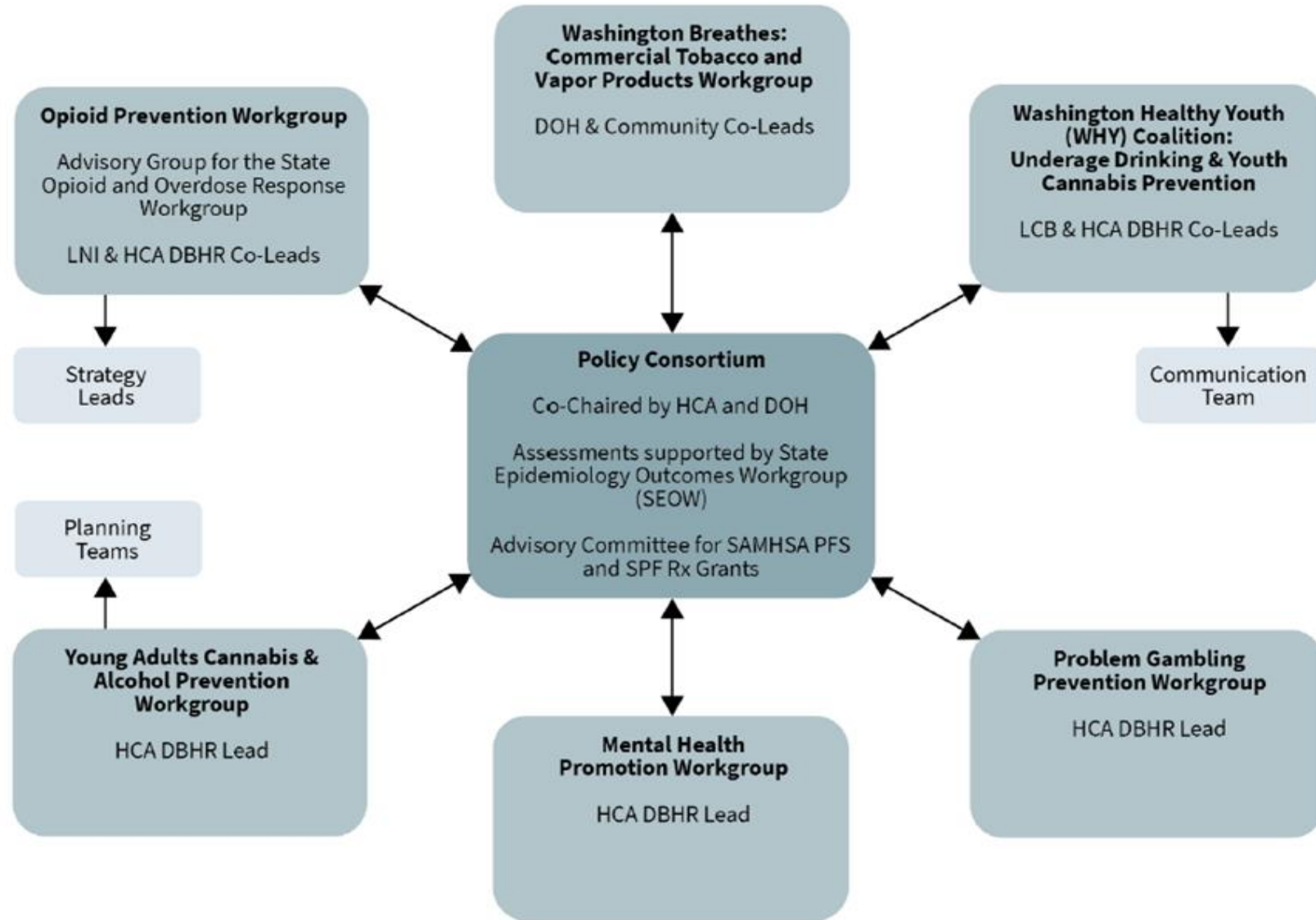
- ▶ Consider the health disparities highlighted in the needs assessment data
- ▶ Discuss the following with folks at your table:
 1. How has your community used data to address health disparities? Share any best practices, strategies, or success stories.
 2. How could your community better address health disparities in the future? What would be necessary or helpful to better address health disparities?

SPE Consortium Workgroups

SPE Policy Consortium Workgroups

- ▶ Mental Health Promotion and Suicide Prevention Workgroup
- ▶ Opioid Prevention Workgroup
- ▶ Problem Gambling Prevention Workgroup (to be created in 2023)
- ▶ Washington Breathes: Commercial Tobacco and Vapor Products Workgroup
- ▶ Washington Healthy Youth (WHY) Coalition: Underage Drinking & Youth Cannabis Prevention
- ▶ Young Adults Cannabis & Alcohol Prevention Workgroup

SPE Policy Consortium structure



Washington Healthy Youth (WHY) Coalition

(Underage Drinking and Youth Cannabis Prevention)

▶ Goals:

- ▶ Reduce percentage of 10th graders reporting they drank alcohol in the past 30 days from 20% in 2016 to 15% in 2023
- ▶ Reduce percentage of 10th graders reporting they used marijuana in the past 30 days from 17% in 2016 to 12% in 2023

▶ Data Measures:

- ▶ Underage Drinking – 30-day use; problem use. HYS
- ▶ Cannabis/Marijuana Use – 30-day use. HYS

▶ Strategies:

- ▶ Provide Educational Tools for parents, schools, others.
- ▶ Use data to inform strategies
- ▶ Expand membership
- ▶ Education and information sharing

Washington Breathes (WA Breathes)

(Commercial Tobacco/Vapor Product Prevention & Treatment)

▶ Goals:

- ▶ Improve health equity and community health
- ▶ Restore funding & comprehensive state program
- ▶ Eliminate underage commercial tobacco and vapor product use
- ▶ Improve cessation treatment
- ▶ Eliminate inequities
- ▶ Increase community-based data
- ▶ End commercial tobacco sales

▶ Data Measures:

- ▶ Commercial Tobacco Use – 30 day use. HYS
- ▶ Vapor Products Use – 30 day use. HYS

▶ Strategies:

- ▶ Promote new coalition and strategic plan
- ▶ Reduce disparities in use among key populations
- ▶ Leverage resources to support prevention and treatment

Opioid Prevention Workgroup

(Prevent opioid and substance misuse, and associated harms)

▶ Goals:

- ▶ Prevent misuse of opioids and other substances in communities, particularly among youth and young adults.
- ▶ Promote use of opioid prescribing best practices among health care providers.
- ▶ Increase the use of the Prescription Drug Monitoring Program
- ▶ Educate the public about the risks of opioid use, including overdose.
- ▶ Promote safe home storage and appropriate disposal
- ▶ Decrease the supply of illegal opioids

▶ Data Measures:

- ▶ Any opioid/prescription drug misuse – 30-day use. HYS
- ▶ Painkiller use – past 30 days. HYS.

▶ Strategies:

- ▶ Implement CPWI/SAPISP
- ▶ Fund CBO's in implementing EBPs
- ▶ Fund Tribes in providing culturally attuned programs
- ▶ Safe prescribing and utilization of PMP
- ▶ Public Education Campaigns

Mental Health Promotion and Suicide Prevention

▶ Goals:

- ▶ Statewide workgroup involving state and local organizations to focus on mental health promotion, suicide prevention strategies to implement SPE strategies.
- ▶ Build capacity across MHP system
- ▶ Seek new funding opportunities
- ▶ Share resources for MHP and Suicide Px

▶ Data Measures:

- ▶ Anxiety – within last 2 weeks. HYS
- ▶ Depression – sad/hopeless in last 12 months. HYS
- ▶ Suicide – Ideation; plan; attempt. HYS.

Young Adults Workgroup

Cannabis and Alcohol Misuse Prevention

▶ Goals:

- ▶ Increase statewide collaboration and partnerships with diverse partners.
- ▶ Public education Enhance young adults' critical knowledge about alcohol and cannabis and raise awareness of misuse
- ▶ Workforce development
- ▶ Promote the use of evidence-based screening/intervention best practices, resources and tools.

▶ Data Measures:

- ▶ Young Adult/Adult Alcohol Misuse – use during pregnancy. PRAMS, YAHS.
- ▶ Young adult alcohol use – use in past month. YAHS.
- ▶ Young adult recreational cannabis use – past year by age group. YAHS.

Problem Gambling Prevention

▶ Goals:

- ▶ Recent formation and organization
- ▶ 2022 Legislative Session delegated more resources to PG
- ▶ Significant support from tribal partners
- ▶ Will create full strategic plan by end of 2024

▶ Data Measures:

- ▶ Problem Gambling – last 12 months. HYS

Workgroup Action Plans – Common Themes

- ▶ Recruiting and Engagement
 - ▶ Membership is a top priority
- ▶ Research and Education
 - ▶ Data collection, analysis, and dissemination
- ▶ Workforce Development
 - ▶ Recruiting, training, and retention
- ▶ Policy Statements
 - ▶ Best practices - research and education

Workgroup Action Plans – Key Differences

▶ Scope of Work and Capacity

- ▶ Age of group, focal area, funding sources, and turnover all play a role.

▶ Data Availability

- ▶ Some issues are well researched and documented, others less so.

▶ Quality of Evidence

- ▶ Some strategies are much better understood than others due to available research studies.

Workgroup Accomplishments 2019-2023

▶ WHY Coalition

- ▶ Promoted good policy decisions by providing feedback to the Liquor and Cannabis Board
- ▶ Provided information on emerging issues and current research and data through presentations.
- ▶ Created a Fact Sheet on Delta-8

▶ Problem Gambling

- ▶ Joined SPE in 2022

Workgroup Accomplishments 2019-2023

▶ Young Adults

- ▶ Recruited new members for this workgroup
- ▶ Hosted a WA Higher Education Water Cooler Chat Session to gain understanding of prevention on college campuses
- ▶ Explored federal resources provided by National Drug Control Strategies and SAMHSA

Workgroup Accomplishments 2019-2023

▶ WA Breathes

- ▶ Release of Washington State’s 2021–2025 Commercial Tobacco Prevention & Control Five Year Strategic Plan
- ▶ Workgroup members participated in the “WA Tobacco Coalition & Partnerships Initiative” – now WA Breathes Coalition in 2021
- ▶ Washington State Attorney General settled with JUUL, which included payments over 4 years, which totaled to \$22.5 million dollars

Workgroup Accomplishments 2019-2023

▶ Opioid Prevention

- ▶ Multiple state opioid grants received: SOR, SOR II, SOR III, and SPF Rx supporting CPWI, SAPISP, CBOs, and Public Education Campaigns
- ▶ DOH launched the state's first pharmacy-based safe medication pilot program in 2020
- ▶ WSU received multiple grants for HRSA and SAMHSA for opioid and pain training for health profession students and clinics
- ▶ Bree Collaborative developed guidelines: Collaborative Care for Chronic Pain 2019, Low Back Pain 2019, and Long-term Opioid Therapy Recommendations 2020

Workgroup Accomplishments 2019-2023

▶ Mental Health Promotion & Suicide Prevention

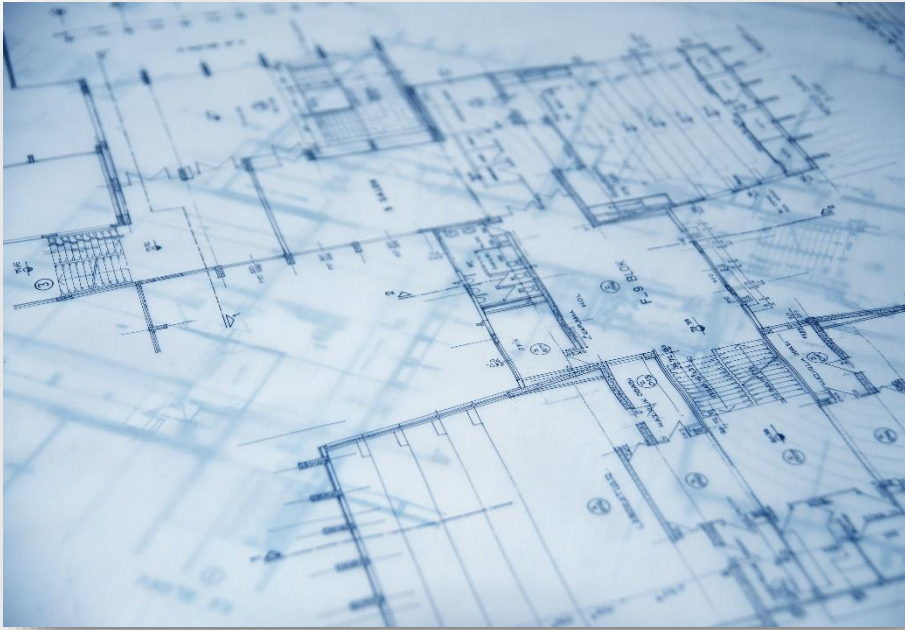
- ▶ \$900k of funding to implement 2 mental health triage teams to track individuals from hospital through to care
- ▶ First Years Away From Home program and Check-in with your self program were implemented
- ▶ Not a Moment Wasted SUD and Wellness Campaign was supported

Audience Activity

- ▶ Pick a workgroup from the list.
- ▶ With others at your table, create an elevator speech for that group.
- ▶ Things to consider to include:
 - ▶ Name of workgroup
 - ▶ Some goals of the workgroup
 - ▶ Examples of strategies they work on
 - ▶ Remember to mention it's Statewide!

Application of SPE Plan

How Can the SPE Plan Help You?



How Can the SPE Plan Help You?

▶ Next Steps – “Homework!”

- ▶ Create a workgroup to analyze the plan and determine how it supports your efforts locally, regionally, or statewide. Review things like...
 - ▶ **Data and Needs Assessment** – *Are the findings consistent with your local data? If not, why might that be? How can these findings support your own assessment work?*
 - ▶ **Program and Initiatives** – *What resources are discussed in the plan that you were unaware of? How can these programs or initiatives potentially benefit your work?*
 - ▶ **Increased Partnerships** – *Who could your organization or coalition reach out to? What could you offer them in return for assistance?*

How Can the SPE Plan Help You?

▶ Benefits to Your Work

- ▶ Grant application support through...
 - Reference materials
 - Alignment with larger efforts
 - Avoiding redundancy
- ▶ Template for local and regional strategic plans.
- ▶ Increase **Community Organization** through *Awareness*.

Discussion – What? So What? Now What?

With your table, discuss the following...

- ▶ **What?** – *What is the Statewide 5 Year Strategic Plan?*
- ▶ **So What?** – *Why is the plan important at a local, state, and national level?*
- ▶ **Now What?** – *How can we put this resource to good use in our communities?*

Final Reflections

Final Feedback - Mentimeter

- ▶ For the next revision of the Plan, I hope to see...
- ▶ In my work, I will use the SPE Strategic Plan to...



Thank You!

▶ Contact Information

- ▶ SPE Co-Chair: Sarah Mariani – sarah.mariani@hca.wa.gov
- ▶ SPE Co-Chair: Patti Migliore-Santiago - Patti.MiglioreSantiago@doh.wa.gov
- ▶ 5-Year Plan Lead: Erika Jenkins – erika.jenkins@hca.wa.gov
- ▶ SPE Staff:
 - Alicia Hughes – alicia.hughes@hca.wa.gov
 - Isaac Wulff – isaac.wulff@hca.wa.gov

Closing

Recap of today's All Provider Meeting

- DBHR Updates
- Hopes & Dreams share-out from the mural
- SPE Policy Consortium Strategic Plan

Thank you

Networking and Evening Meetings

- Use these last minutes to connect!
- Evening Meetings:
 - 4:30-5 p.m. Volunteer Meeting – Birch Ballroom
 - 5-5:30 p.m. Chaperone Meeting – Maple Ballroom
 - 5-6 p.m. Drug Free Communities (DFC) Meeting – Birch Ballroom
 - 6-7 p.m. Prevention Leads Together – an informal gathering – Maple Ballroom
- Enjoy your evening and we will see you tomorrow for day 1 of the Prevention Summit!