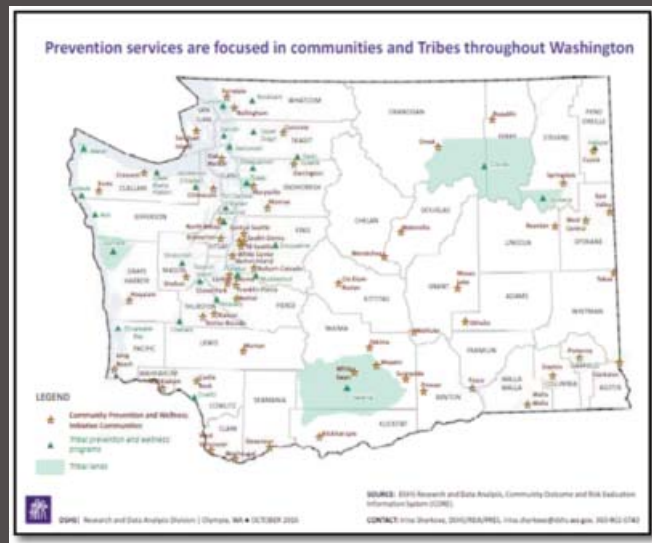


# CADCA / DBHR Community Prevention & Wellness Initiative Coordinator Training



Olympia, WA  
October 17-20, 2017



PowerPoint Slides



# Community Prevention & Wellness Initiative Coordinator Training

Washington State Department of Social and Health Services

**October 17 - 20, 2017**

**CADCA / DBHR**

**Community Prevention & Wellness Initiative Coordinator Training**



Prevention services are located in communities and tribes throughout Washington

Building Safe, Healthy, and Drug Free Communities 

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## Objectives



Participants will be able to:

- Establish an effective, action-oriented coalition
- Use tools and techniques to implement the CPWI Planning Framework
- Take specific steps to build cultural competence throughout the CPWI Planning Framework
- Identify and access resources and technical assistance
- Network with other Coalition Coordinators

Building Safe, Healthy, and Drug Free Communities  2

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## Agenda



Day 1: Tuesday, October 17, 2017

- Welcome and Introductions
- Overview: Role of a Coalition
- Getting Started
- Coalition Capacity
- Networking Activity
- Close



Building Safe, Healthy, and Drug Free Communities  3

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# Community Prevention & Wellness Initiative Coordinator Training


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Community Prevention & Wellness Initiative

## Agenda

Day 2: Wednesday, October 18, 2017

- Community Meeting
- Capacity (continued)
- Community Assessment
- Networking Activity
- Close



Building Safe, Healthy, and Drug Free Communities  4

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Washington State Department of Social and Health Services

Community Prevention & Wellness Initiative

## Agenda

Day 3: Thursday, October 19, 2017

- Community Meeting
- Planning
- Implementation
- Evaluation
- Networking Activity
- Close



Building Safe, Healthy, and Drug Free Communities  5

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Community Prevention & Wellness Initiative

## Agenda

Day 4: Friday, October 20, 2017

- Community Meeting
- Review and Discussion
- Taking It Home / Planning
- Evaluation
- Celebration and Close



Building Safe, Healthy, and Drug Free Communities  6

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# Community Prevention & Wellness Initiative Coordinator Training

Washington State Department of Social and Health Services

## Partners



Washington State  
Department of Social  
& Health Services  
*Transforming lives*



CADCA®  
Community Anti-Drug Coalitions of America

*Building Safe, Healthy, and Drug Free Communities* 

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## Introductions

1. Your Name
2. Community / Coalition Name
3. 1 Key Point (AHA!) from the Orientation Webinars
4. Expectations for this Training
5. A **"SUPERPOWER"** you have or would like to have



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## Overview: Role of a Coalition



Public Health Approach    Environmental- and Individual-Focused Strategies    Community Engagement    Planning Framework

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# Community Prevention & Wellness Initiative Coordinator Training

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## Public Health Approach

Community Coalition

Agent  
Risk Factors  
(Intervening Variables)

Host

Agent  
Environment

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## Public Health Approach

Agent?

Host?

Environment?

Strategies?

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## Public Health Approach

Example

Agent = Flu

Host = 10 year old George

Environment = School

Strategies?

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# Community Prevention & Wellness Initiative Coordinator Training

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## Public Health Approach



**Example**

**Agent = Cocaine**

**Host = 21 year old Nicole**

**Environment = Local Bar**

**Strategies?**

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Community Prevention & Wellness Initiative

## Public Health Approach

What drugs are being abused? → **Agent**  
 How are the drugs being abused? → **Agent**

Who is abusing the drugs? → **Host**

Where are people getting the drugs?  
 Where and how are the drugs being abused?  
 What conditions promote or prevent drug use? } **Environment**

**Comprehensive Strategies will impact all three!**

Building Safe, Healthy, and Drug Free Communities CADCA 14

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Community Prevention & Wellness Initiative

## The Public Health Approach

The Public Health Model

Define the problem

→

Identify risk and protective factors  
= Host and Agent

↗

Develop and test prevention strategies  
= Environment

↘

Assure widespread adoption  
= Comprehensive Strategies

Problem...
...Response

Building Safe, Healthy, and Drug Free Communities CADCA 15

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# Community Prevention & Wellness Initiative Coordinator Training

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## Comprehensive Strategies

**Strategies Targeting Individualized Environments**

**Strategies Targeting the Shared "Community" Environment**

Building Safe, Healthy, and Drug Free Communities 16

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## Individual-Focused Strategies

Prevention efforts aimed at **providing information, building skills or supporting** individuals or targeted groups of individuals.

<ul style="list-style-type: none"> <li>- Afterschool Programs</li> <li>- School curricula</li> <li>- Life skills training</li> <li>- Employment programs</li> <li>- Health Fairs</li> <li>- School Assemblies</li> <li>- Media Campaigns</li> </ul>	<ul style="list-style-type: none"> <li>- Parenting Classes</li> <li>- Tutoring programs</li> <li>- SBIRT</li> <li>- Media Literacy</li> <li>- Awareness Days / Weeks</li> <li>- Youth Councils</li> <li>- Mentoring Programs</li> </ul>
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Building Safe, Healthy, and Drug Free Communities 17

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## Environmental Strategies

Prevention efforts aimed at changing or influencing community **conditions, standards, institutions, structures, systems and policies** that shape behaviors.

<ul style="list-style-type: none"> <li>- Hours/Days of Sale</li> <li>- Clean air laws</li> <li>- Happy hour Laws</li> <li>- Advertising Laws</li> <li>- Social host ordinances</li> <li>- Compliance Checks</li> <li>- Party Patrol</li> </ul>	<ul style="list-style-type: none"> <li>- Outlet Density Reduction</li> <li>- Open Container Ordinance</li> <li>- Festivals – Beer Garden</li> <li>- Shoulder tap operations</li> <li>- Restriction on MJ locations</li> <li>- Rx Drug Monitoring System</li> <li>- Prescribing Guidelines</li> </ul>
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Building Safe, Healthy, and Drug Free Communities 18

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# Community Prevention & Wellness Initiative Coordinator Training

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## Community-Level Change

Changes the entire community environment

MYCITY, WA

Population 2016: 29,335

Engages the entire community

Environmental strategies change policies

Uses community-wide data to measure change

*Building Safe, Healthy, and Drug Free Communities* 19

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## Community Coalitions

“A coalition is a voluntary, formal agreement and collaboration between groups or sectors of a community in which each group retains its identity but all agree to work together toward a common goal of building a safe, healthy, and drug-free community.”  
- CADCA

*Building Safe, Healthy, and Drug Free Communities* 20

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## Community Engagement - Sectors

Local Problems Require Local Solutions

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# Community Prevention & Wellness Initiative Coordinator Training

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## Community Engagement – CPWI



The diagram illustrates the components of Community Engagement for CPWI. It features a central circle labeled 'Coalition Members' with silhouettes of people. Surrounding this are several other elements: 'Community Coalition Coordinator' with a cartoon character, 'ESD & Counties' with a photo of a man, 'Prevention-Intervention Specialists' with a photo of two women, 'OSPI' with a logo, 'DBHR' with a photo of hands raised, and a speech bubble asking 'How can we help?'. Logos for 'CADCA' and 'Community Prevention & Wellness Initiative' are also present.

Building Safe, Healthy, and Drug Free Communities 

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## Planning Framework for CPWI

DBHR Community Prevention & Wellness Initiative Planning Framework



The diagram shows a cyclical process for the Planning Framework. It starts with 'Getting Started', followed by 'Assessment', 'Planning', 'Implementation', and 'Evaluation'. A large arrow labeled 'Capacity Building' and 'Sustainability and Cultural Competency' spans across the cycle. The text 'Adapted from SAMHSA Strategic Prevention Framework' is at the bottom.

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## Community Problem Solving Process



The diagram depicts 'The Strategic Prevention Framework' as a central hub surrounded by five overlapping circles: 'Assessment' (red), 'Capacity' (green), 'Planning' (purple), 'Implementation' (blue), and 'Evaluation' (orange). The central hub is labeled 'Sustainability and Cultural Competency'.

### The Strategic Prevention Framework

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# Community Prevention & Wellness Initiative Coordinator Training

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## Role of a Coalition




**Impact a Defined Community**




**Uses an Effective Planning Framework**




**Achieve Positive Outcomes**



**Engage All Sectors of the Community**



**Promote Comprehensive Strategies**

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## Elevator Speech

So.....

What is community-level change?

What is the role of your coalition in achieving community-level change?



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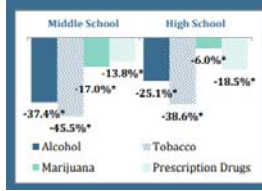
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## Prevention Works!


ONDCP Evaluation reports show substance use has declined significantly in DFC Communities

**Figure 8: Percentage Change in Past 30-Day Alcohol, Tobacco, Marijuana, and (Illicit) Prescription Drug Prevalence of Use: Long-Term Change Among FY 2014 DFC Grant Award Recipients**



School Level	Alcohol	Tobacco	Marijuana	Prescription Drugs
Middle School	-37.4%*	-17.0%*	-13.8%*	-45.5%*
High School	-25.1%*	-38.6%*	-6.0%*	-18.5%*

National Evaluation of the Drug Free Communities Support Program  
Summary of Findings through 2016; Evaluator: ICF International

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# Community Prevention & Wellness Initiative Coordinator Training

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## Strategic Framework for CPWI

DBHR Community Prevention & Wellness Initiative Planning Framework

Adapted from SAMHSA Strategic Prevention Framework

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## Building a Plan for our Community

1. Getting Started
2. Assessment
3. Planning
4. Implementation
5. Reporting and Evaluation

- Build Capacity at every level
- Ensure Cultural Competency at every level
- Build elements of Sustainability into each level

Building Safe, Healthy, and Drug Free Communities **CADCA**

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## Community Coalition Guide

COMMUNITY PREVENTION AND WELLNESS INITIATIVE  
CPWI  
**COMMUNITY COALITION GUIDE**  
Building a Culturally Competent and Sustainable  
Substance Abuse Prevention Coalition in Your Community  
Division of Behavioral Health & Recovery (DBHR)  
Updated August 2015

Building Safe, Healthy, and Drug Free Communities **CADCA**

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# Community Prevention & Wellness Initiative Coordinator Training

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## CPWI - Guide

**Getting Started (pg. 21-23)**

- Register and participate in The Athena Forum
- Select CPWI Community
- Community Coalition Coordinator (5 FTE) for each CPWI community
- Confirm S&HSP (P-I) services

**Capacity (pg. 24-26)**

- Recruit and retain membership\*
- Community coalition orientation
- Establish and maintain coalition structure\*
- Engage key leaders in coalition's CPWI efforts
  - Hold Key Leader Orientation
  - Hold Town Hall community event
- Participate in training and technical assistance

**Assessment (pg. 27-30)**

- Conduct Needs Assessment\*
- Conduct Resources Assessment\*

**Planning (pg. 29)**

- Select goals, objectives, strategies, and programs/activities\*
- Develop Prevention Strategic Plan\*
- Confirm partnerships for implementation of strategies and programs/activities

**Implementation (pg. 30-31)**

- Maintain active community coalition
- Participate in monthly meetings with DBHR
- Implement prescription Take Back event
- Implement media strategies
- Implement strategies and programs/activities according to Strategic Plan

**Reporting and Evaluation (pg. 32-33)**

- Develop reporting and evaluation strategies\*
- Complete reporting
- Review and analyze output and outcome information with coalition according to Strategic Plan.
- Participate in statewide evaluation

*Building Safe, Healthy, and Drug Free Communities* 31

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## Getting Started

DBHR Community Prevention & Wellness Initiative Planning Framework

Adapted from DBHR's Strategic Prevention Framework

*Building Safe, Healthy, and Drug Free Communities* 32

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## Getting Started

Initiate the process in your community:

- Clarify the Role of a Coordinator
- Identify the community
- Identify the Work to be Done
- Form a Leadership Team
- Build Cultural Competence Throughout the CPWI Framework
- Access Training and Technical Assistance

*Building Safe, Healthy, and Drug Free Communities* 33

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# Community Prevention & Wellness Initiative Coordinator Training

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## Form a Leadership Team

The Leadership Team can:

- Establish the coalition
- Recruit coalition members
- Schedule and lead coalition meetings
- Engage community leaders
- Volunteer for work groups
- Hold coalition members accountable
- Commit to cultural competence



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## Form a Leadership Team

Ask Leadership Team members to:

- Commit personal time
- Share organizational resources
- Verbalize desire to create a safe and healthy community
- Lead the coalition



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## Form a Leadership Team

A potential Leadership Team (3 – 5 people) can include representatives from:

- ESD / School District
- Law Enforcement
- Government
- Parent
- Healthcare / Treatment
- Other?



Recruit **Champions, Sparkplugs and Friends**

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# Community Prevention & Wellness Initiative Coordinator Training

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## Cultural Competence

**Cultural Competence:**

“ A set of behaviors, attitudes and policies that come together in a system, agency or program or among individuals, enabling them to function effectively in diverse cultural interactions and similarities within, among and between groups.”

U.S. Dept. of Health and Human Services



Building Safe, Healthy, and Drug Free Communities 

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## Cultural Competence

**Cultural Competence is a process:**

Cultural competence

↙ ↘


Cultural sensitivity

↙ ↘

Cultural awareness

↙ ↘

Cultural knowledge

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## Cultural Competence

**Build Cultural Competence Throughout the CWPI Process**

Assessment	Capacity	Planning	Implementation	Evaluation
<ul style="list-style-type: none"> <li>• Accurately assess the influence of their own values, perceptions, opinions, knowledge, and social position on their interactions with others.</li> <li>• Provide and promote an atmosphere in which similarities and differences can be explored, and understand that this process is not only cognitive but attitudinal and affective, as well.</li> </ul>	<ul style="list-style-type: none"> <li>• Learn to be an ally to groups that experience prejudice and discrimination in the community. Help others learn to be an ally to their own cultural groups.</li> <li>• Help expand other people's knowledge of their culture, and affirm and legitimize other people's cultural perspectives.</li> </ul>	<ul style="list-style-type: none"> <li>• Learn to embrace new, ambiguous, and unpredictable situations, and be persistent in keeping communication lines open when misunderstandings arise.</li> <li>• Encourage community members to see themselves in a multicultural perspective, and encourage skills-building in cross-cultural interactions and communication.</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage and accommodate a variety of learning and participation styles, building on community members' strengths.</li> <li>• Draw upon the experiences of participants or collaborators to include diverse perspectives in any given intervention.</li> </ul>	<ul style="list-style-type: none"> <li>• Be skeptical about the validity of diagnostic tools applied to people who are culturally different from those upon whom the norms were based.</li> <li>• Understand, believe, and convey that there are no culturally deprived or culturally neutral individuals or groups, and that all cultures have their own integrity, validity, and coherence, and deserve respect.</li> </ul>

Building Safe, Healthy, and Drug Free Communities 

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# Community Prevention & Wellness Initiative Coordinator Training


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## Access Training and TA

Support can be obtained from:

- DBHR Staff
- CADCA TA
- Fellow CWPI Community Coalitions
- Other organizations



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## Getting Started – Next Steps

Identify:

- Specific steps to take
- Who else can be involved
- What resources are needed
- What support can be provided



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## Capacity Building

DBHR Community Prevention & Wellness Initiative Planning Framework



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
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# Community Prevention & Wellness Initiative Coordinator Training

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## Capacity



Work with the Leadership Team to  
Build Coalition Capacity

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## Capacity



- Work with the Leadership Team to:**
  - Identify potential coalition members
  - Recruit coalition members
  - Ensure Sector representation
  - Establish and maintain coalition structure
  - Plan initial coalition Meetings
- Work with the Coalition and Leadership Team to:**
  - Create a Coalition Vision and Mission
  - Provide coalition and community orientation
  - Engage key leaders in coalition's CPWI efforts
  - Gather community information and feedback
  - Ensure cultural competence



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
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## Capacity (Part 1)



- Work with the Leadership Team to:**
  - Identify potential coalition members
  - Recruit coalition members
  - Ensure Sector representation
  - Establish and maintain coalition structure
  - Plan initial coalition Meetings



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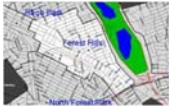
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# Community Prevention & Wellness Initiative Coordinator Training

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## Identify Potential Members

- Culture and Diversity
 
- Youth involvement
 
- Sector Representation
 
- Community Map
 

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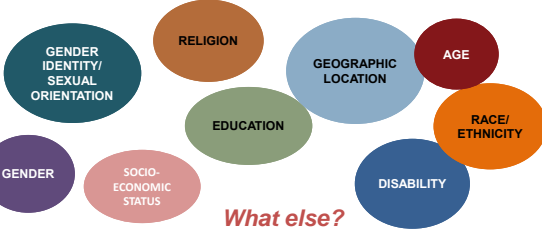
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Washington State Department of Social and Health Services

## Identify Potential Members

### Culture and Diversity



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## Identify Potential Members

### Sector Representation



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# Community Prevention & Wellness Initiative Coordinator Training


Washington State Department of Social and Health Services

## Identify Potential Members



Considerations for engaging **Youth**:

- Opportunities must be real and meaningful
- Clearly define youth roles in coalition work
- Assess time and transportation requirements for youth involvement
- Ensure sufficient staff support
- Be prepared to act on the youth input
- Provide appropriate recognition

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## Identify Potential Members



Use the map of your community to ensure:

- All cities and towns are represented
- Distinct neighborhoods are involved
- Sector representation is distributed from throughout the community



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## Recruit Coalition Members



For each potential member, identify

- What resources or skills are needed?
- How they can contribute? What role could they play?
- What is the WIFM?
  - How will the individual benefit from joining?
  - What are the benefits for the organization?
- Who can contact the individual or organization?



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# Community Prevention & Wellness Initiative Coordinator Training

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## Recruit Coalition Members

When preparing to ask an individual to join the coalition:

- Prepare talking points
- Identify an “influencer” to go with you
- If possible - ask their boss first
- Clarify expectations & provide options for their involvement
- Provide a range of “options for involvement”
- Describe the WIFM
- Anticipate their objections



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## Ensure Sector Representation

Sector Representatives:

- Provide the “sector perspective” in discussions
- Engage other sector leaders (e.g. heads of organizations, informal leaders)
- Serve as peer leaders /spokesperson to other organizations in the sector
- Recruit others in the sector to engage in coalition efforts



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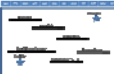
## Establish Coalition Structure




Organization Chart




Decision Making




Timelines



Action Orientation



Organizational Structure



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# Community Prevention & Wellness Initiative Coordinator Training


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## Organization Chart



Organizational structure helps to define:

- Roles for coalition leaders and members
- Relationships among coalition members and staff
- Responsibilities and duration of work groups
- Reporting channels
- Meeting content and frequency
- Legal and fiscal lines of authority



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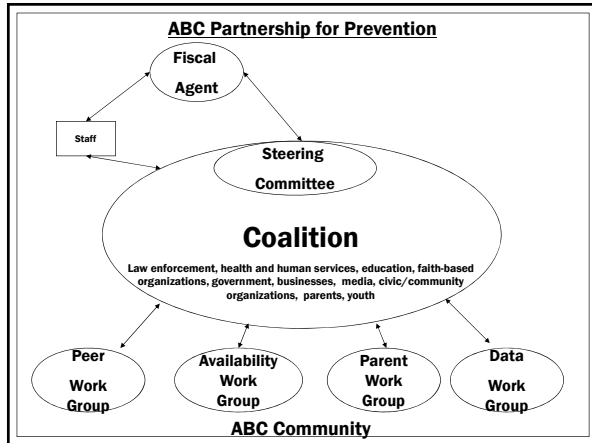
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## Decision Making Responsibilities



Content	Organizational	Operational (Day to Day)
<ul style="list-style-type: none"> <li>• Vision/Mission</li> <li>• Strategic Planning</li> <li>• Logic Models</li> <li>• Prioritization of strategies</li> <li>• Schedule / Timelines</li> <li>• Implementation of specific initiatives</li> <li>• Member recruiting</li> </ul>	<ul style="list-style-type: none"> <li>• Staffing</li> <li>• Budget / Fiscal Mgt.</li> <li>• Office location</li> <li>• Board elections</li> <li>• Member recruiting</li> <li>• Leadership recruitment &amp; development</li> <li>• Coalition Structure</li> </ul>	<ul style="list-style-type: none"> <li>• Meetings</li> <li>• Correspondence</li> <li>• Coordination among workgroups</li> <li>• Grant reporting</li> <li>• Logistics / Supplies</li> <li>• Website / social media</li> </ul>

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# Community Prevention & Wellness Initiative Coordinator Training


Washington State Department of Social and Health Services


## Decision Making Methods

Decisions may be made by the following methods:

- Authority without group discussion
- Expert
- Averaging individual's opinions
- Authority after group discussion
- Minority
- Majority Vote
- Consensus

**Different decisions may require different methods.**

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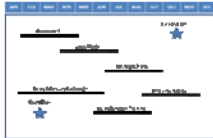
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## Planning and Timelines

Planning and timelines help to clarify:

- Scheduling and timing of efforts
- Distribution of the work
- Allocation of resources
- Prioritization of efforts
- Accountability



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## Organizational Structure

Organizational Structure can include:

- Job Descriptions
- By-laws
- MOU / MOA / CIA

**There is no "rule of thumb" on how much organizational structure is needed at any point in time.**



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# Community Prevention & Wellness Initiative Coordinator Training

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## Plan Initial Coalition Meetings

Plan the first 3 coalition meetings – for each meeting decide:

- Specific Objectives
- Agenda
- Roles
- Logistics



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## Plan Initial Coalition Meetings

**Hosting effective meetings** sometimes requires coalitions to make strategic transitions in how they manage time together. See the grid below for suggestions.

Strive for engaged action-focused coalition meeting agendas:	Avoid less effective coalition meetings:
Agenda items are related to the priorities and outcomes of the coalition	Agenda items are committee or agency updates
Agenda items list the person who will be leading the discussion, the time allotted and the action to be taken	Agenda items are introduced by the chair and discussed by the paid staff
Coalition progress is evident by new and emerging items on the agenda	Agenda items are stagnant or cut and pasted from month to month
Action planning and delegation happens in the meeting	Members advise staff on action to be taken before the next meeting
New members and partners are recruited to the meeting based on the agenda items	The same five or six people at the meeting every month
Adults as partners in completing the work	New members attend only one or two meetings and then never come back

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**Safe Neighborhood Advocacy Partnership**

Topic	Time	Who	Actions / Decisions
I. Welcome/Introductions	15 min	Helen	
II. SNAP Overview	15 min	Kris and Mike	<ul style="list-style-type: none"> <li>• Share brief history, mission and objectives of SNAP</li> <li>• Share strategies that relate to partnering with the hospitality industry to achieve shared goals</li> </ul>
III. Old Town Hospitality Group Presentation	30 min	Nikki and Olivia Reys	<ul style="list-style-type: none"> <li>• Learn about the newly formed Old Town Hospitality Group, including membership, approach and goals</li> <li>• Identify opportunities for increase collaboration to achieve shared goals</li> </ul>
IV. Bar Academy	35 min	Nikki	<ul style="list-style-type: none"> <li>• Review template of Bar Academy proposal and structure and get member input</li> <li>• Develop plan for communicating about Bar Academy</li> <li>• Develop plan for strengthening bar participation and increasing participation</li> </ul>
V. Committee Updates and Next Steps	20 min	Mike and Steve, Kris and Dave	<ul style="list-style-type: none"> <li>• Update on the MIP initiatives and School Liaison Recruitment from UA-CAMP Committee</li> <li>• Update on messaging and policy from the PNE Committee</li> </ul>

Next Meeting: July 17<sup>th</sup>, 2015

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# Community Prevention & Wellness Initiative Coordinator Training


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## Capacity (Part 2)

**Work with the Coalition and Leadership Team to:**

- Create a Coalition Vision and Mission
- Provide coalition & community orientation
- Engage key leaders in coalition's CPWI efforts
- Gather community information and feedback
- Ensure cultural competence



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## Create a Vision Statement

**Vision** is what the coalition seeks to accomplish.

- Provides a picture of what the community will look like in the future.

Example:  
***Vision for Acme County is a healthy, vibrant and alcohol, tobacco and other drug-free community.***

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## Create a Mission Statement

**Mission** describes the coalition's role in making the vision a reality.

- Explains the unique role the coalition plays in facilitating a robust community problem solving process.

Example:  
***The Acme Coalition engages residents in the process of on-going community problem solving to develop comprehensive prevention strategies.***

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# Community Prevention & Wellness Initiative Coordinator Training

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## Coalition & Community Orientation

A description of the coalition includes information from:

- Vision and Mission
- Community definition
- Coalition members
- Goals, Objectives & Strategies
- Prevention Overview
- Community Data
- Call to Action



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## Coalition & Community Orientation

Share information about the coalition by:

- Creating a “1 – Pager”
- Providing Talking Points for coalition members
- Conducting New Member Orientations
- Posting to Website / Social Media
- Hosting a Key Leader Orientation
- Publishing a Newsletter



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## Engage Key Leaders

Key community leaders can include:

- **Positional leaders** - Mayor, Police Chief, School Superintendent, Elders
- **Business & Organizational Leaders** – Hospital, Rotary Club, PTA, Chamber, Faith Community
- **Informal leaders** – influential people in a neighborhood leaders, faith community, community volunteers

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## Gather Information & Feedback

Establish communication processes that allows the coalition to:

- Collect data from the community about substance abuse trends, perceptions, readiness an resources.
- Obtain input and feedback from the community.

Examples include: Town Hall Meetings, Community Coffees, Meet and Greets, Website.

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## Ensure Cultural Competence

**Discussion:**

**What are ways we can ensure cultural competence as we develop coalition capacity?**

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## Ensure Cultural Competence

Use the Cultural Competence Checklist.

Cultural Competence Checklist

Use the following checklist to assess the degree to which you are addressing the needs of all identified & key populations.

Checklist to be completed:

Item	Addressed (yes/no/unknown)	How do you "address" this issue?
1. Do you have a written plan and implementation of the plan?		
2. Do you have a written plan and implementation of the plan?		
3. Do you have a written plan and implementation of the plan?		
4. Do you have a written plan and implementation of the plan?		
5. Do you have a written plan and implementation of the plan?		
6. Do you have a written plan and implementation of the plan?		
7. Do you have a written plan and implementation of the plan?		
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15. Do you have a written plan and implementation of the plan?		
16. Do you have a written plan and implementation of the plan?		
17. Do you have a written plan and implementation of the plan?		
18. Do you have a written plan and implementation of the plan?		
19. Do you have a written plan and implementation of the plan?		
20. Do you have a written plan and implementation of the plan?		

Adapted from: "Building Co-Operative, Trustworthy, Supportive, Effective, and Sustainable Coalitions" by CADCA, June 2011

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## Capacity – Next Steps

Identify:

- Specific steps to take
- Who else can be involved
- What resources are needed
- What support can be provided



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## CPWI Planning Framework

DBHR Community Prevention & Wellness Initiative Planning Framework



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Long-Term Consequences (10-15 years)	Behavioral Health Problems (Consumption) (5-10 years)	Intervening Variables (Risk/Protective Factors) (2-5 years)	Local Conditions and Contributing Factors (6 months - 2 years)	Strategies & Local Implementation	Evaluation Plan
What is the problem?	Why?	Why here?	But why here?	What are we doing about it?	So what? How will we know?
<p>These problems...</p> <p>School Performance</p> <p>Youth Delinquency</p> <p>Mental Health [Add Yours Here]</p>	<p>These types of problems...</p> <p>Any Underage Drinking</p> <p>Underage Problem and Heavy Drinking</p> <p>[Add Yours Here]</p>	<p>...with these common factors...</p> <p>Community Disorganization/Community Connectedness</p> <p>Alcohol Availability: Retail or Social Access</p> <p>Promotion of Alcohol</p> <p>Alcohol Laws: Enforcement, Penalties, Regulations</p> <p>[Add Yours Here]</p> <p>Low Commitment to School</p> <p>Favorable Attitudes/Perception of Norms</p> <p>Friends Who Use [Based on assessment]</p> <p>Risk &amp; Protective Factors</p> <p>[Add Yours Here]</p>	<p>...specifically in our community...</p> <p>[Add Yours Here]</p> <p>[Add Yours Here]</p> <p>[Add Yours Here]</p> <p>[Add Yours Here]</p> <p>[Add Yours Here]</p>	<p>...can be addressed thru these strategies...</p> <p>Community engagement/Coalition development: [Coalition Name] [Add Yours Here]</p> <p>Public Awareness: [Add Yours Here]</p> <p>Environmental Strategies: [Add Yours Here]</p> <p>School-based Prevention/ Intervention Services: Student Assistance Program</p> <p>Direct Services: [Add Yours Here]</p>	<p>...and we will use these tools to measure our impact...</p> <p>Community engagement/Coalition development: Annual Coalition Survey Sustainability Documentation</p> <p>Public Awareness: Process measures Community Survey</p> <p>Environmental Strategies: Process measures Community Survey, IHS</p> <p>Prevention/ Intervention Services: pre/post</p> <p>Direct Services: Assigned Program pre/post and process measures IHS</p>
State Assessment	Local Assessment	Plan/Implementation	Reporting/Eval		

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## Assessment

DBHR Community Prevention & Wellness Initiative Planning Framework

Adapted from SAMHSA Strategic Prevention Framework

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## Assessment

**Community Assessment**      **Problem Analysis**      **Logic Model**

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## Assessment

Community Assessment describes the “context” in which substance abuse occurs or does not occur within a community.

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## Assessment

- Conduct Needs Assessment
  - Establish process for assessment
  - Conduct Assessment
  - Conduct 'Community Survey'
  - Prioritize outcomes and write into Strategic Plan
- Conduct Resources Assessment
  - Establish process for assessment
  - Conduct Assessment
  - Prioritize outcomes and write into Strategic Plan

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## Getting Started on the Assessment

Create a **Community Assessment Work Group**:

- Composed of 3 – 5 people
- People who have access/expertise/interest in working with data
- Invite people who like to talk to others
- Limited duration – up to 3 meetings over 2 months
- Key tasks: identify gaps in data, collect data, conduct problem analysis and develop logic model

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## What's in the Data Books?

Grade 8      CONTENTS      Intermediate Needs Assessment      Grade 10      Grade 12

	2011	2012	2014	2012	2014	2012	2014
Drinking and Driving: During the past 30 days, how many times did you drive a car or other vehicle when you had been drinking alcohol? (District results: Any times)	8	0%	0%	0%	0%	4%	3%
Marijuana and Driving: During the past three hours, how many times did you drive a vehicle within three hours of marijuana? (District results: Any times)	10	0%	10%	0%	10%	5%	5%

	Grade 8	Grade 10
Students Participating in the 2014 Survey	850	773
Survey Participation Rate	71%	66%

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## Assessment Resources

- Needs Assessment Clinic
- Resources Assessment Clinic
- Gaps Analysis Resources

– All found on The Athena Forum



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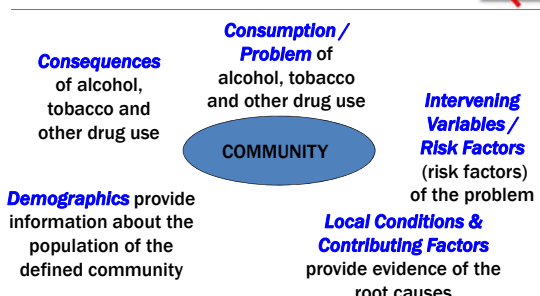
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## Needs Assessment Data



**Consequences** of alcohol, tobacco and other drug use


**Consumption / Problem** of alcohol, tobacco and other drug use

**Intervening Variables / Risk Factors** (risk factors) of the problem

**Local Conditions & Contributing Factors** provide evidence of the root causes

**Demographics** provide information about the population of the defined community

**COMMUNITY**



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## Demographics

Find additional information about the population:

- Race / Ethnicity
- Gender
- Age
- Socio-economic Status
- Household / Housing
- Employment
- Other census related information



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## Consequences

What are consequences of the alcohol, tobacco and other drug use?

- Health
- Financial
- Law enforcement
- Judicial system involvement
- Education
- Employment
- Social



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## Consumption (The Problem)

What is the extent of the Problem?

- Which drugs are being used?
- How are the drugs being used?
- How much? How often?
- Who is using the drugs?
- Where and when are the drugs being used?



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## Intervening Variables – Risk Factors

- **Intervening Variables:** Characteristics that are strongly predictive of underage drinking and substance abuse. They are characteristics of the community that are likely to influence youth alcohol use.
- **Examples:**
  - Alcohol availability (ease of access; usual sources; retailers)
  - Promotion of alcohol
  - Alcohol laws (enforcement; penalties)
  - Community norms (acceptability among peer and community)
  - Risk and protective factors



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




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## Data Collection Methods



**Quantitative**  
(How many? – breadth of knowledge):

- **Survey**
  - Student surveys
  - Parent surveys
  - Community surveys
- **Archival Data**
  - Existing data from law enforcement, education, health department, etc.

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
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## Data Collection Methods



**Qualitative**  
(What does it mean? – depth of knowledge)

- Focus Group
- Key Informant Interview
- Listening Sessions
- Observation

**Environmental Scanning**  
(Includes both quantitative and qualitative data)

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
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## Data Collection – “Triangulation”



**Surveys**  
- Youth Survey  
- Parent Survey  
- Community Survey

**Problem Consequence Intervening Variable Local Condition**

**Qualitative Data**  
- Focus Group  
- Key Informant Interview  
- Town Hall Meeting  
- Observation  
- Environmental Scanning

**Archival Data**  
- Education  
- Law Enforcement  
- Health Care  
- Commerce  
- Census

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
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# Community Prevention & Wellness Initiative Coordinator Training


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## Resource Assessment



### Community Resources

A *resource* or *asset* refers to those people or things that can be used to improve the quality of community life.



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
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## Resource Assessment



### Resources include:

- Protective Factors and Developmental Assets that create a healthy environment and support healthy decision making.
- Existing facilities, programs, organizations, initiatives, coalitions, advocates that support youth and families.
- Prevention infrastructure including the health department, school system, resource centers, data systems, laws and policies, funding streams

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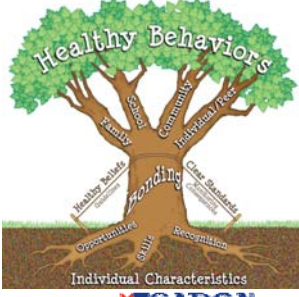

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## Building Protection: Social Development Strategy



Building Protection: The Social Development Strategy

The goal...  
Healthy behaviors for all children and youth

Start with...  
Healthy beliefs & clear standards  
...in families, schools, communities and peer groups


Build...  
Bonding  
Attachment    Commitment  
...in families, schools, communities and peer groups

By providing...  
Opportunities    Skills    Recognition  
...in families, schools, communities and peer groups

And by nurturing...  
Individual characteristics

Healthy Behaviors  
Family    School    Community    Individual/Peer  
Healthy Beliefs    Bonding    Clear Standards  
Opportunities    Skills    Recognition

Individual Characteristics

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
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## Resource Assessment



### Identify GAPS in Resources

- Geographic Gaps
- Demographic Gaps
- Service Delivery / Program Gaps
- Resource Gaps (\$, Staff etc.)
- Laws and Enforcement Gaps



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## Resource Assessment




### Tools for Collecting Qualitative Resource Data:

1. Key informant interview
2. Focus group
3. Listening session
4. Town hall meetings



**Collect Needs and Resource Assessment at the same time.**

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
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## Consumption / Problem




### Examples

The problem is underage drinking in ABC County.

The problem is marijuana use by teens in ABC County.

The problem is the abuse of Rx Drug by teens in ABC County.

The problem is alcohol-related car crashes by 18 – 25 year olds in ABC County.

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## Consumption / Problem



**Prioritize Problems to Address:**

- Based on community data
- Examine trends, comparisons with other communities and the state
- Obtain input from coalition and community members
- Prioritize specific drugs – will create a separate logic model for each priority

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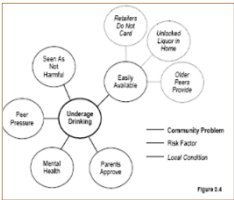
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## Problem Analysis



**Root Cause Technique (But Why? Why Here?)**



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
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## Problem Analysis




**Root Cause (But Why? Why Here?)**

Components:

1. **Consumption / Problem Statement**

- Based on community assessment
- Analyze each drug in separate problem analysis

**Problem**

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# Community Prevention & Wellness Initiative Coordinator Training

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## Problem Analysis

### Root Cause (But Why? Why Here?)

Components:

1. Consumption / Problem
2. Intervening Variables / Risk Factors

**BUT WHY?**

- Based on community assessment
- Supported by prevention science

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## Problem Analysis

### Root Cause (But Why? Why Here?)

Components:

1. Problem
2. Intervening Variables / Risk Factors
3. Local Conditions & Contributing Factors

**BUT WHY HERE?**

- Specific
- Identifiable
- Actionable

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## Logic Model

**Community Assessment**

**Problem Analysis**

**Logic Model**

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
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# Community Prevention & Wellness Initiative Coordinator Training


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## Logic Model



1. Consequences
2. Problem Statement
3. Intervening Variables / Risk Factors
4. Local Conditions & Contributing Factors
5. Data / Measures for Each



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## Logic Model

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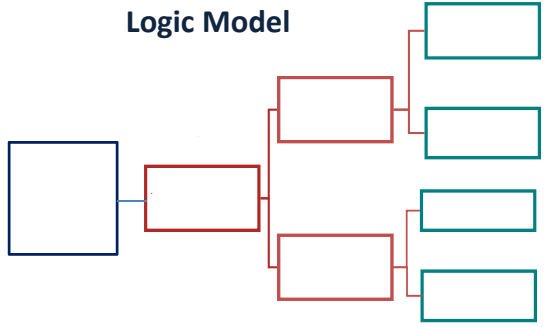
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## Logic Model



But Why?  
Intervening Variables (Risk Factor)

But Why Here?  
Local Conditions & Contributing Factors

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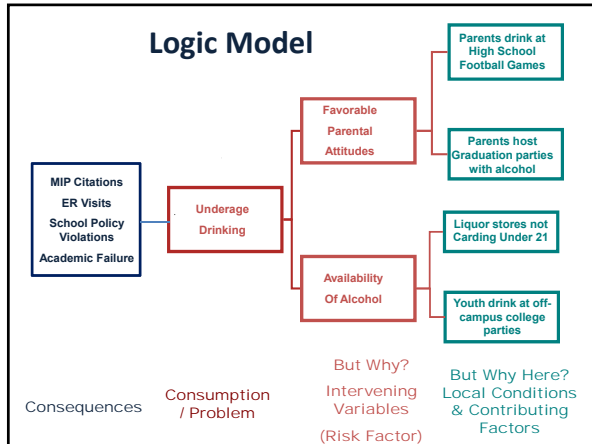
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# Community Prevention & Wellness Initiative Coordinator Training




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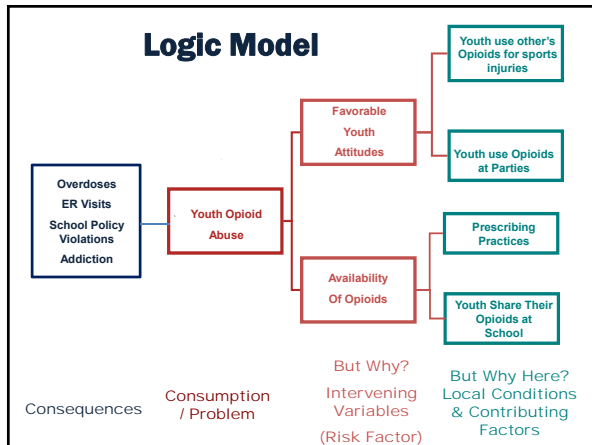
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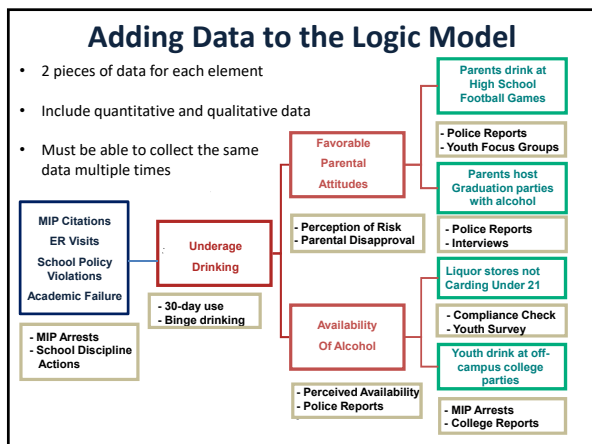
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# Community Prevention & Wellness Initiative Coordinator Training

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## Planning

**Assessment-  
Logic Model**

**Goals &  
Objectives**

**Comprehensive  
Strategies**

**Action  
Plans**

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## Linking Local Conditions to: Goals, Objectives & Strategies

Intervening Variables	Local Condition or Contributing Factor	Goal/Objective	Strategy
Opioid Availability/Easy Access	<ul style="list-style-type: none"> <li>Physicians over-prescribe</li> <li>Parents don't monitor unused prescription medicine</li> </ul>	<p><b>Goal:</b> Reduce amount of unused prescription medicine in community</p> <p><b>Objective:</b> Increase amount of medicine deposited at Take Back events by 10% every six months from 55% in 2016 to 65% in 2018 as measured by drop box reporting in ABC Community,</p>	Hold semi-annual Medicine Take Back event

Building Safe, Healthy, and Drug Free Communities CADCA 125

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## Goal Development

A statement that explains what the community wishes to accomplish or change in an **intervening variable (root cause)**. (2-5 years)

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
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# Community Prevention & Wellness Initiative Coordinator Training

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## Goal Development



Changes in an ***intervening variable (root cause)***.  
(2-5 years)

Examples:

- Decrease in the Availability of Opioids.
- Increase youth perception of harm from use of Opioids.
- Increase commitment to school.

Building Safe, Healthy, and Drug Free Communities  127

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
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## Building Objectives



Objective should address the ***local condition or contributing factor***

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
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## Building Objectives



- Objective should address the ***local condition or contributing factor***
- Breaks the goal down into smaller parts.
- Provide specific, measurable actions in which the goal can be achieved.
- What can the coalition achieve that will impact overall goal?
- 6 months – 2 years



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
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# Community Prevention & Wellness Initiative Coordinator Training

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## Building Objectives



**Good objectives are SMART**


**S**pecific - "what is to be done?" "how will you know it is done?" and describes the results (end product) of the work to be done.

**M**easurable - defines the objective using assessable terms (quantity, quality, frequency, costs, deadlines, etc. *Excellent* objectives describe the change from a baseline condition to a preferred condition.

**A**chievable - "can the person do it?" "Can the measurable objective be achieved by the person?" "Does he/she have the experience, knowledge or capability of fulfilling the expectation?"

**R**elevant - "should it be done?", "why?" and "what will be the impact?"

**T**ime-oriented - "when will it be done?"

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
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## Building Objectives



Objectives should answer the questions:

- What will be changed?
- By how much?
- How will it be measured?
- By when?
- Baseline?



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## Building Objectives



- What will be changed?
- By how much?
- How will it be measured?
- By when?
- Baseline?

**Example:** Decrease retail outlets selling alcohol to minors as measured by compliance check results by 20% by 2018.

Baseline 2016: 25% of alcohol retailers fail compliance checks

Target 2018: 5% of alcohol retailers fail compliance checks

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# Community Prevention & Wellness Initiative Coordinator Training

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## Building Objectives

**Version 1:**  
Increase “youth perception of harm from alcohol use” by 25% as measured by the ABC Youth survey by 2020.  
Baseline 2016: 50% of 8-12 graders report “harmful”  
Target 2020: 75% of 8-12 graders report “harmful”

**Version 2:**  
Increase “youth perception of harm from alcohol use” by 25% from 50% in 2016 to 75% in 2020 as measured by 8-12 graders reporting “harmful” on the ABC Youth Survey

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## Building Objectives - Practice

Local condition: Youth go to school high or drunk.  
Measure: Youth report “being high or drunk at school” on the ABC Student Survey

**Baseline 2016:** 35% of 10<sup>th</sup> graders report “being high or drunk at school”

**Target 2018:** \_\_\_\_% of 10<sup>th</sup> graders report “being high or drunk at school”

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## Building Objectives - Practice

Local condition: Youth report Opioids are readily available in the community.  
Measure: Youth report opioids are “easy” or “very easy” to obtain on the ABC Student Survey

**Baseline 2016:** 54% of 10<sup>th</sup> graders report opioids are “easy” or “very easy” to obtain.

**Target 2018:** \_\_\_\_% of 10<sup>th</sup> graders report opioids are “easy” or “very easy” to obtain.

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## Building Objectives - Practice

Local condition: Youth do not perceive that marijuana is harmful.

Measure: Youth reporting “no risk” or “slight risk” of harming themselves from smoking marijuana regularly, on the ABC Student Survey

Baseline 2016: 77% of 10<sup>th</sup> graders report “no risk” or “slight risk” harm from marijuana use on the ABC Student Survey

Target 2018: \_\_\_\_ % of 10<sup>th</sup> graders report “no risk” or “slight risk” harm from marijuana use on the ABC Student Survey

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## Building Objectives

Considerations in writing SMART Objectives:

- How “easy” or “challenging” will it be to change the local conditions? Implement the proposed strategies?
- Does the coalition have the capacity?
- Are the baseline data “high” or “low”? How likely are the #'s to change?
- What are the social or political impacts of the proposed changes?

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## Designing and Selecting Strategies

Strategies Targeting Individualized Environments

Strategies Targeting the Shared “Community” Environment



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# Community Prevention & Wellness Initiative Coordinator Training




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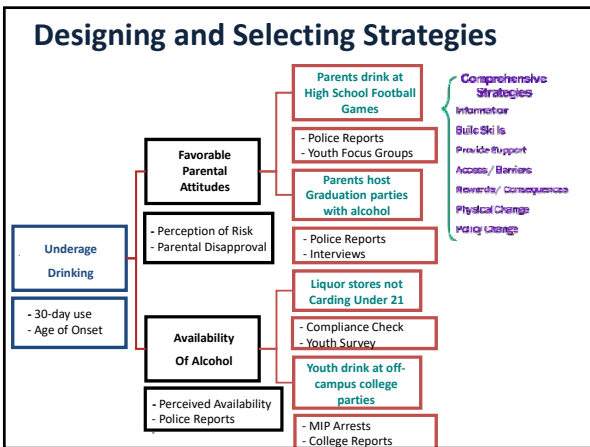
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# Community Prevention & Wellness Initiative Coordinator Training

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## Designing and Selecting Strategies



**Key Concepts**

- Cultural Competence in Planning**
- Individual & Environmental Strategies**
- Evidence-based Strategies**
- Comprehensive Approach**

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## Cultural Competence in Planning



Ways to build cultural competence in planning:

- Put “Culture and Diversity Considerations” on the Agenda at every meeting
- “Go to” as opposed to “invite”
- Research cultural appropriateness of evidence-based strategies (ask the developers)
- Use the “Cultural Competence Checklist”



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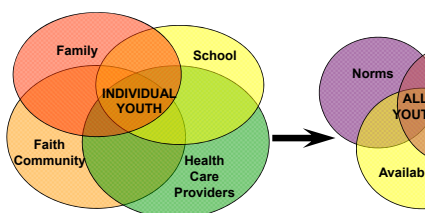
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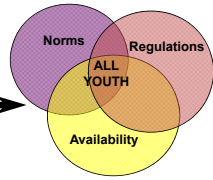
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## Individual & Environmental Strategies

**Strategies Targeting Individualized Environments**



**Strategies Targeting the Shared “Community” Environment**



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## Individual & Environmental Strategies

Individual Strategies	Environmental Strategies
Focus on behavior and behavior change	Focus on policy and policy change
Focus on relationship between individual and drug-related problems	Focus on social, political, economic content of alcohol/drug problems
Short-term focus on program development	Long-term focus on policy development
Individual does not generally participate in decision making	People gain power by acting collectively
Individual is an audience	Individual as an advocate

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## Environmental Strategies

**Definition of Environmental Strategies:**  
Prevention efforts aimed at changing or influencing community conditions, standards, institutions, structures, systems and policies that shape behaviors

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## Environmental Strategies

**Examples include:**

<ul style="list-style-type: none"> <li>- Hours/Days of Sale</li> <li>- Clean air laws</li> <li>- Happy hour Ordinance/Laws</li> <li>- Advertising Ordinance/Laws</li> <li>- Social host ordinances</li> <li>- Compliance Checks</li> <li>- Party Patrol</li> <li>- Prescribing Guidelines</li> <li>- Restrictions on "Pill Mills"</li> </ul>	<ul style="list-style-type: none"> <li>- Outlet Density Reduction</li> <li>- Open Container Ordinance</li> <li>- Festivals – Beer Gardens</li> <li>- Shoulder Tap Enforcement</li> <li>- Drug Courts</li> <li>- Rx Drug Monitoring System</li> <li>- Controlled Party Dispersal</li> <li>- Restriction on MJ Dispensaries</li> <li>- Paraphernalia Ordinances</li> </ul>
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**Policy-based Strategies may be "Big P" or "little p" strategies**

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## Environmental Strategies

Environmental Prevention Strategies can:

- Reach entire populations
- Impact the overall environment
- Create lasting change in community norms and systems
- Produce “quick wins”
- Instill commitment toward long-term impact

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## Designing and Selecting Strategies

### Elevator Speech

So,  
“What’s an environmental strategy?”



Provide an example of an environmental strategy.

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## Designing and Selecting Strategies

### Criteria for Selecting Strategies

1. Fit with local coalitions
2. Capacity to implement
3. Evidence of effectiveness
4. Part of a comprehensive plan



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## Evidence-based Strategies

### Evidence-Based Strategies

#### What Counts as "Evidence"?

1. **Prevention science**
  - Empirical evidence
  - Theoretical evidence
2. **Community wisdom and experience**
3. **Adaptation from other professions**

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## Evidence-based Strategies

### Sources of Evidence-Based Strategies



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Home > Learning Library > Excellence in Prevention Strategies List

### Excellence in Prevention Strategy List

Introduction to the Excellence in Prevention strategies list and search page. This page provides detailed information about direct service and environmental prevention activities. Programs and strategies in this list must be able to at least be able to produce intended results. All programs listed include substance abuse prevention as an area of interest.

The strategies identified in this list come from three primary resources, the National Registry for Evidence-based Programs and Practices (NREPP), a statewide list of programs identified as evidence-based by the State of Oregon, and "Model Evidence for Developing a Logic Model on underage drinking: A Reference Guide for Community Environmental Prevention".

Use the search box or the questions below to help you narrow your search.

**Search Titles and Tags**

- In which types of geographic do you plan to implement the program?
- Where will you implement the program?
- What problems do you wish to address?
- What is the age of your intended audience? (Select all that apply)
- What is the intensity of your intended audience? (Select all that apply)

**Incredible Years**

Incredible Years is a set of comprehensive, multifaceted, and developmentally based curricula targeting 2- to 12-year-old children and their parents and teachers. The parent, child, and teacher training components that comprise Incredible Years are guided by developmental theory on the role of multiple interacting risk and protective factors in the development of conduct problems. The three program components are designed to work jointly to promote emotional and social competence and to prevent, reduce, and treat behavioral and emotional problems in young children. The parent training intervention focuses on strengthening parenting competence and fostering parental involvement in children's school experiences to promote children's academic and social skills and reduce delinquent behaviors. The

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# Community Prevention & Wellness Initiative Coordinator Training

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## Designing and Selecting Strategies

- Use the **Resource Assessment**
- Include multiple, complementary strategies
- Recognize that it takes a combination of strategies to change behaviors
- Promote the role of the coalition to coordinate and enhance existing community resources - The coalition cannot and should not “do it all”

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## Comprehensive Approaches

### CSAP Strategies

- Alternative (Community Based Mentoring/Summer Youth Programs)
- Community-Based Process (Community Coalition)
- Education (Life Skills, Guiding Good Choices)
- Environmental (Social Norms Marketing)
- Information Dissemination (Public Awareness)
- Problem ID and Referral (P/I Specialist)

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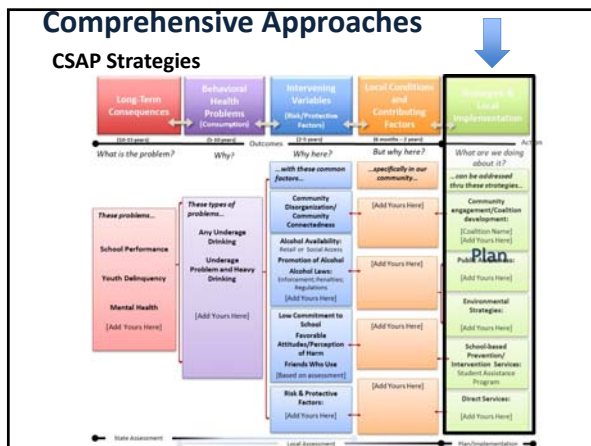
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# Community Prevention & Wellness Initiative Coordinator Training

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## Comprehensive Approaches

**ONDCP (DFC) / CADCA Strategies**

1. Provide information
2. Build skills
3. Provide support
4. Change access / barriers
5. Change consequences
6. Alter the physical design of the environment
7. Change policies, rules, practices, procedures

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## Comprehensive Approaches

Underage Drinking

- Marketing (Promotion)
  - Store windows on Main Street are covered with alcohol ads
  - Alcohol industry sponsors three community events
- 
-

- Send flyers / meet retailers
- Training on sign restrictions
- Law Enforcement MOU
- Recognize retailers
- Alternative Ads
- Sign Removal
- City Ordinance

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## Comprehensive Approaches

**Local Condition:** Retail stores are selling tobacco products sold to youth despite age restrictions.

1. Provide Information—Post signs: “We don’t sell to minors...”
2. Build Skills—Train merchants to check ID’s
3. Provide Support—Technical assistance to merchants
4. Access/Barriers—Translate merchant education materials
5. Incentives/Disincentives—Increase fines/Recognize sellers
6. Physical Design—Place tobacco products behind the counter
7. Policies or Regulations— Increase compliance checks/fines

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# Community Prevention & Wellness Initiative Coordinator Training


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## Designing and Selecting Strategies



**Design and Select Strategies:**

- Cultural Competence
- Individual & Environmental
- Evidence-based
- Comprehensive

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## Designing and Selecting Strategies

Select Strategies that...

- ...address your prioritized risk and protective factors.
- ...will allow you to go “upstream” to make an impact.

If you’re seeing a problem in your 8<sup>th</sup> grade data, you go back two years to provide services to 6<sup>th</sup> graders. By the time they’re 8<sup>th</sup> graders hopefully their view of substance abuse is different.

- ...appropriate for your community.  
Examples include: cultural and language considerations, literacy and education considerations.

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## Opioid Rx Strategies

- SAMHSA link to info: <https://www.samhsa.gov/capt/sites/default/files/resources/preventing-prescription-drug-misuse-strategies.pdf>
- Literature review by DBHR staff underway.
- WSU staff conducting analysis of current evidence-based practices with outcomes most relevant to youth misuse and abuse of prescription drugs.
- Expanded list of evidence-based strategies anticipated in November 2017 from these sources.
- Some strategies correlate directly to reducing access – as in the Medicine Take Back events you will provide.
- Others address parental attitudes and family management skills through parent education; resulting increased parenting skills and ability to reduce access to illegal prescription drugs in the home.
- Others engage youth directly in education and skills development.

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## Opioid Rx Strategies



- **Provider Programs**
  - The Utah Prescription Pain Medication Program is an educational program designed to improve prescribing practices, prevent prescription drug misuse, and reduce the harm caused by prescription drug misuse through educating physicians.
- **Patient Programs**
  - SmartRx, a multimedia, Web-based education/intervention program, describes medication properties of five classes of prescription drugs, safe and responsible use of these prescriptions, and self-management strategies to improve health without these prescriptions.

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
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## Opioid Rx Strategies



- **Parents and Youth**
  - Home Environmental Strategy for parents of 5th to 7th graders to reduce access
  - Reduces risk factor “Ease of access to harmful legal products, including prescription drugs”
  - Strengthens protective factor “Parental awareness of the dangers of harmful legal products, including prescription drugs”
- **Youth**
  - Think Smart classroom program for 5th and 6th graders to teach alternatives to drug use, and refusal skills
  - Reduces risk factors “Peer use of HLPs” & “Peer perceptions of HLP use”
  - Strengthens protective factors: “Knowledge about drugs and consequences of drug use”, “Assertiveness skills”, “Refusal skills”, “Alaskan cultural identity”

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## Form an Opioid Work Group



The Rx Work Group can:

- Participate in the planning process including assessment, planning, implementing and evaluation
- Represent their organization and sector in the Rx Drug Abuse Work Group’s activities.
- Provide specific resources to support the Rx Drug Abuse Work Group’s efforts.
- Recruit community members to participate in the Work Group’s efforts

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# Community Prevention & Wellness Initiative Coordinator Training




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## Action Planning

### Happy People Coalition Action Plan

July 1, 2015- June 30, 2016

For assistance using this template please contact the CPWI Training Team at [FCADCA@2015.wa.gov](mailto:FCADCA@2015.wa.gov). For technical assistance questions regarding plans, objectives, strategies, or activity/program elements please contact your DPHN Prevention System Manager.

If this Coalition has more than one objective for a goal please list them separately and list appropriate activities according to objective. If needed, contact the Training Team for assistance.

**Notes:** A Coalition may submit the Coalition's 2015-2016 Action Plan using the Coalition's current 2014-15 Action Plan template if it looks similar to this and columns are added to mirror what this template contains. For example, if there are 6 major changes related to your update you may not wish to transfer the content into this template. If this is the case, check the columns that the 14-15 plan does not contain and submit with the updated planning information.

**Goal 1: Reduce Public Health and Safety Risks**

**Objective 1.1: Increase Family Involvement in the lives of children and youth**

**Strategy: Education**

Activity/Program	Timing/Start Date	Short Description	How	When	Who	Lead	Responsible Party List
Strengthening Families Program	09/15	This class will teach parents management skills.	8 groups of 8-10 parents	September 2015 - February 2016	25 local organizations (parents)	Family Support Center	Jane Smith, Program Director
Parent Training Program	04/01	Distribution of interactive parenting tool at all doctor's offices with 2-2 educational material.	Minimum of 2,000 per city doctor's office	September 2015 - March 2016	240 Families in major cities	Behavior Health Clinic	Dr. Jane Smith

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## Action Planning

Benefits of Action Planning include:

- Broad community involvement & ownership
- Data-driven assessment of risk, protection, behavior and resources
- Mutually agreed-upon focus and priorities
- Research-based programs, policies and practices, building on existing resources
- Outcome-based plan and evaluation strategy

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# Community Prevention & Wellness Initiative Coordinator Training


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## Planning

Identify:

- Specific steps to take
- Who else can be involved
- What resources are needed
- What support can be provided



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## Implementation

DBHR Community Prevention & Wellness Initiative Planning Framework



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## Implementation

**Purpose:** Implement the plan

- Maintain an active coalition leading the efforts
- Implement selected programs, policies and practices
- Implement CPWI with a focus on preventing youth use of opioids

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# Community Prevention & Wellness Initiative Coordinator Training


Washington State Department of Social and Health Services

## Implementation



**CPWI Tasks:**

- Maintain active community coalition
  - Coordinator supports coalition
  - Monthly full coalition meetings
  - Review and revised coalition structure as needed
  - Complete tasks in Community Coalition Guide
- Participate in meetings with DBHR
  - Learning community meetings (Monthly)
  - Check-in meetings (Monthly)
  - Attend the Washington Prevention Provider Meeting (Annually)
  - Attend the Summer Institute (Annually)

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## Implementation



**CPWI Tasks:** *(continued)*

- Implement media strategies
- Implement strategies and programs/activities according to Strategic Plan
  - *Organize and implement P-I services*
  - *Capacity building strategies & activities*
  - *Cultural competency strategies & activities*
  - *Sustainability strategies & activities*
  - Public awareness campaign(s)
  - Environmental strategy(ies)
  - Direct prevention strategy(ies)

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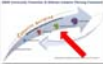
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## Implementation



**Organize & Capacity Building**

- Create Work Groups (Short-term Action Teams)
- Clarify specific products, deliverables and timelines
- Targeted Recruiting
- Provide training and obtain technical assistance
- Create a Work Group Job Description



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# Community Prevention & Wellness Initiative Coordinator Training

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## Implementation



### Cultural Competence

- Clarify the target audiences – identify specific elements of culture and diversity to be addressed
- “Go to” versus “invite”
- If appropriate, contact program developers
- Contact other communities that have implemented the strategy
- Use the Cultural Competence Worksheet

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## Implementation



### Sustainability

- Clarify the role of the coalition
- Identify partners to “own” the strategy
- Provide / coordinate training and/or technical assistance to the partners
- Identify potential long-term funding sources for the strategy

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## Evaluation



DBHR Community Prevention & Wellness Initiative Planning Framework



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# Community Prevention & Wellness Initiative Coordinator Training


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## Evaluation



**Purpose:** Evaluate the plan, and refine as needed

- Evaluate the process and outcomes
- Review and adjust the plan and implementation as needed
- Coalition uses evaluation plan to monitor success

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## Evaluation



**CPWI Tasks:**

- Develop reporting and evaluation strategies
  - Determine coalition’s intended major outcomes & impacts
  - Determine how evaluation information will be shared
- Complete reporting in the MIS Minerva
  - Coalition & community organization functioning
  - ‘Coalition Assessment Tool’ (survey)
  - Report public awareness & environmental strategy(s)
  - Report direct prevention strategy(s)

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## Evaluation



**CPWI Tasks:** *(continued)*

- Review and analyze output and outcome information with coalition according to Strategic Plan.
  - Use the ‘Coalition Assessment Tool’ report to evaluate coalition capacity building efforts.
  - Review effectiveness of message dissemination
  - Will use the MIS reports, state data, & other local reports to monitor & evaluate progress
- Participate in statewide evaluation
  - Ensure participation in the Healthy Youth Survey
  - Annual ‘Coalition Assessment Tool’ (survey)
  - Response rates for the ‘Community Survey’

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# Community Prevention & Wellness Initiative Coordinator Training


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## Evaluation

### Three Parts of a Coalition Evaluation

1. Map measures from your logic model.
2. Document your Coalition's work – process and outcomes evaluation.
3. Tell your coalition's story

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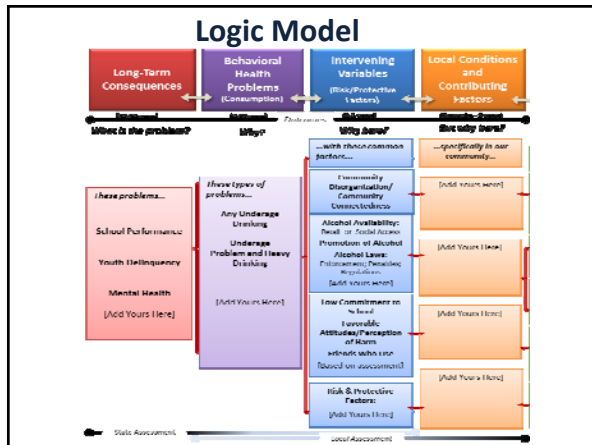
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## Measures from Your Logic Model

Create measures for each step of your logic model.

Good measures:

- A. Are sensitive (valid )
- B. Are proximate (close/same level)
- C. Can be collected multiple times (feasible)

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# Community Prevention & Wellness Initiative Coordinator Training

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## Map Measures from Your Logic Model

What is being measured?	How will it be measured?	Where will we get it?	How often will it be collected?
Local Conditions & Contributing Factors	Compliance Checks	Liquor Control Board	Every 6 months
Local Conditions & Contributing Factors	MIP Reports	Courts Interviews	Every 6 months
Intervening Variables / Risk Factors	Perceived Availability	ABC Youth Survey	Annually
Intervening Variables / Risk Factors	Youth Reports of Alcohol Availability	Focus Group (10 <sup>th</sup> Graders)	Annually
Problem / Consumption	30-day use of alcohol	ABC Youth Survey	Annually
Problem / Consumption	Binge Drinking	ABC Youth Survey	Annually
Consequences	MIP Citations Issues	ABC Police Dept.	Annually
Consequences	Alcohol-Related ER Reports	ABC Hospital	Annually

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### Part 1: Map Measures from Your Logic Model

**Consequences**

- MIP Arrests
- Alcohol-Related ER Cases

291 MIP Citations issues in 2016 – ABC Police Dept.  
41 Cases of Alcohol-related ER Visits of 12-20 year olds – ABC Hospital

**Problem / Consumption**

Underage Drinking

35% 30 Day Use reported by 10<sup>th</sup> Graders – 2016 SS  
18% of 10<sup>th</sup> Graders report Binge Drinking- 2016 SS

**Intervening Variables / Risk Factors**

**Availability**

45% of 10<sup>th</sup> Graders report alcohol is “easy or very easy” to obtain- 2016 SS  
Youth focus group report “alcohol readily available from retailers” – Focus Group 10/16

**Root Cause**

“But, why?”

- Data 1 & Source  
- Data 2 & Source

**Local Conditions & Contributing Factors**

**Retailers not carding**

34% of retailers failed compliance checks – 2016 Police Dept.  
36% of MIP arrestees report obtaining alcohol from retailers – 2016 Courts

**Local Condition**

“But, why here?”

- Data 1 & Source  
- Data 2 & Source

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### Evaluation Plan

What is being measured?	How will it be measured?	Where Will We Get It?	How often will it be collected?
Logic Model	Data	Source	Frequency
<b>Local Conditions</b>			
Retailers Not Carding	Compliance Checks	Liquor Control Board	Every 6 months
Retailers Not Carding	MIP Reports	Courts Interviews	Every 6 months
<b>Root Causes</b>			
Availability	Perceived Availability	ABC Youth Survey	Annually
Availability	Youth Reports of Alcohol Availability	Focus Group (10 <sup>th</sup> Graders)	Annually
<b>Problem Statement</b>			
Underage Drinking	30-day use of alcohol	ABC Youth Survey	Annually
Underage Drinking	Binge Drinking	ABC Youth Survey	Annually
<b>Consequences</b>			
Alcohol related citations	MIP Citations Issues	ABC Police Dept.	Annually
Alcohol Related Injuries	Alcohol-Related ER Reports	ABC Hospital	Annually

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# Community Prevention & Wellness Initiative Coordinator Training


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## Evaluation



### Three Parts of a Coalition Evaluation

1. **Map** measures from your logic model.
2. **Document** your Coalition's work – Process & Outcomes Evaluation
3. **Tell** your coalition's story

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## Document Your Coalition's Work



### Process Evaluation:

- Documents all aspects of the implementation of programs and strategies.
- Describes how the strategy was implemented—that is, if the same material was presented in the same number of sessions over the same timeframe using the same methods.
- Answers the question: "Did we do what we said we would do?"

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## Document Your Coalition's Work



### Process evaluation data includes answers to:

- Were the activities implemented as planned?
- Who participated and for how long?
- How is the strategy received by the community and stakeholders?
- What adaptations were made?
- Were the resources sufficient?
- What barriers were encountered?

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# Community Prevention & Wellness Initiative Coordinator Training


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**Document Your Coalition's Work**

**Examples of process measures includes:**

- Number of ads created or disseminated (radio, newspaper, online, etc.)
- Number of website/Facebook hits
- Number of trainings / sessions provided
- Number of program participants / attendees
- Number of compliance checks implemented
- Number of compliance check failures
- Number of meetings held with stakeholders

**(Actual measures depend on the specific Strategy)**

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**Document Your Coalition's Work**

**Outcomes Evaluation:**

- Describes whether the strategy implementation was successful in changing participant knowledge, attitudes, beliefs, practices or behaviors.
- Answers the question: "Did we achieve the changes that we expected to achieve?"

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**Document Your Coalition's Work**

**Outcomes evaluation data includes answers to:**

- Did the participants learn what was expected?
- Did behavior changes or changes in practices result from the implementation of the strategy?
- What barriers were encountered?

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# Community Prevention & Wellness Initiative Coordinator Training

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## Document Your Coalition's Work

**Examples of process measures includes:**

- Pre/post tests of participants
- Observation of participants
- Participant reports: journals, interviews etc.
- Post-tests compared with baseline data

**(Actual measures depend on the specific Strategy)**

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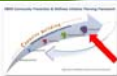
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## Part 2: Document Your Coalition's Work

### Capturing Process and Outcome Measures

**Process Measure:** Did the coalition implement as planned? Did you achieve what you set out to do and was it effective?

**Tools/ Instrument:** Use data collection sheets to track information about program delivery and outcomes.

**Outcome Measure:** What was the result of the program on the participants?

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## Part 2: Document Your Coalition's Work

### Evidence-based Program: Strengthening Families

Measures	Tool/Instrument
<b>Process Measures:</b> Participation  Strategy Implementation    Community/ Public Awareness	Program data collection sheets: # families enrolled  PBPS reported: Number of groups offered; School District numbers compared to participant registration: % of families enrolled in program for school district; Program data collection sheets: data entered into PBPS: # participants completed per group  PBPS reported single services: # events where information disseminated; # media postings; and # newsletters sent to parents
<b>Outcome Measures:</b> Improved family management skills	Pre/post program evaluation scores: Percentage of caregivers in program with improved on family management skills.

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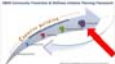
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# Community Prevention & Wellness Initiative Coordinator Training


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## Coalition Evaluation



### Three Parts of a Coalition Evaluation

1. **Map** measures from your logic model.
2. **Document** your Coalition's work – process and outcomes evaluation.
3. **Tell** your coalition's story

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## Part 3: Telling Your Coalition Story



How can we save fallen knights?

Only 15% are saved by princesses!



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# Community Prevention & Wellness Initiative Coordinator Training

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**Part 3: Telling Your Coalition Story**

**Evaluation "Communication" Plan**

Who	What	Why	How
Who will want to know about the coalition's evaluations results?	What will they want to know about the coalition's evaluation?	What will the coalition want them to know about the evaluation results?	How will the coalition provide them with this information?
For example: coalition, city council, and/or DBHR.	For example: updated data on long-term outcomes, process information on programs, etc.	For example: for funding, support, and/or membership.	For example: PBPS coalition survey report to be discussed with coalition at November meeting.

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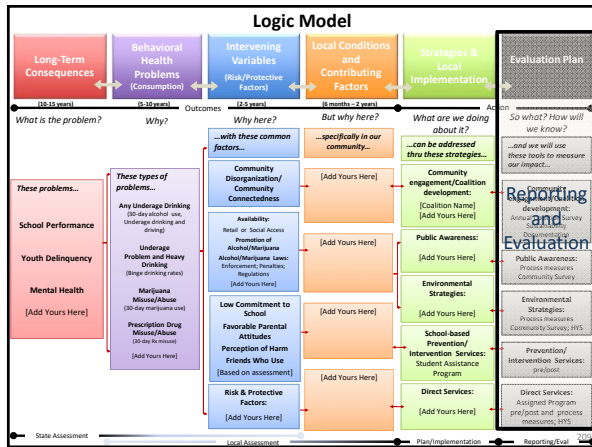
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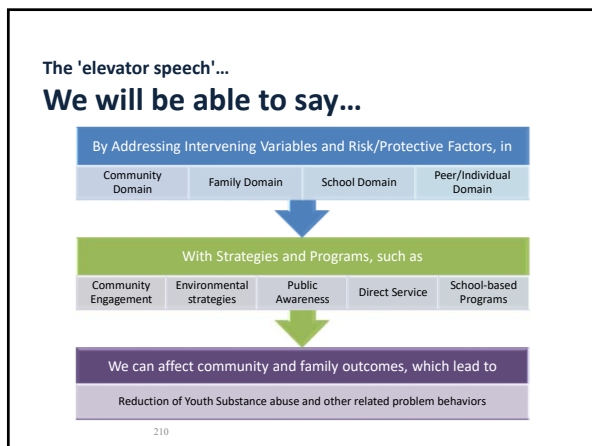
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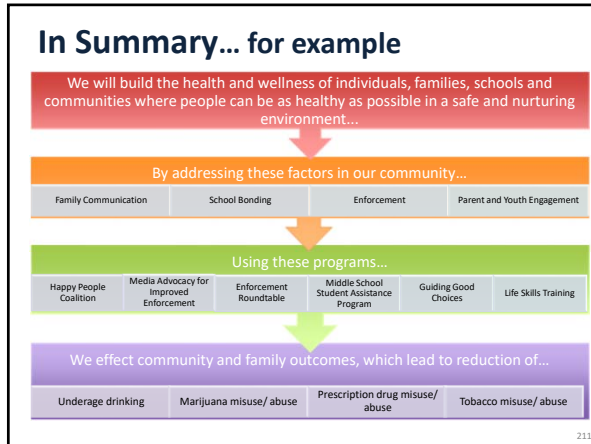
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# Community Prevention & Wellness Initiative Coordinator Training




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## Evaluation



### Three Parts of a Coalition Evaluation

1. Map measures to your logic model.
2. Document your Coalition's work – process and outcomes evaluation.
3. Tell your coalition's story

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## Implementation & Evaluation – Next Steps



Identify:

- Specific steps to take
- Who else can be involved
- What resources are needed
- What support can be provided



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# Community Prevention & Wellness Initiative Coordinator Training

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Community Coalitions  
@HighSchools

## Pulling It All Together



### What is a Strategic Plan?

- The process, findings, decisions, and plans for the future.
- Creates, confirms and provides documentation of the intended vision and goals of a coalition.
- Sets the course for the work of the coalition
- 'Living documents' that provide direction but also are updated regularly to account for assessment and evaluation information and related changes.

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Community Coalitions  
@HighSchools

## Guide to Writing Your Strategic Plan



- Executive Summary
- Organizational Development (*Getting Started*)
- Capacity Building
- Assessment
  - Needs Assessment
  - Resources Assessment
- Plan
- Implementation
- Reporting and Evaluation

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Community Coalitions  
@HighSchools

## Roles in Strategic Planning



<h3>Coalitions -</h3> <ul style="list-style-type: none"><li>• The role of the coalition is to:</li><li>• Engage in the planning process by:<ul style="list-style-type: none"><li>- Participating in workgroups to review data;</li><li>- Review drafts of the plan; and</li><li>- Develop strategies.</li></ul></li><li>• Make decisions regarding:<ul style="list-style-type: none"><li>- Functioning of the coalition;</li><li>- Priority problems based on assessment;</li><li>- Goals and objectives, strategies and activities; and</li><li>- Evaluation measures and reporting.</li></ul></li></ul>	<h3>Coordinators -</h3> <ul style="list-style-type: none"><li>• The role of the community coalition coordinator is to:</li><li>• Manage the strategic planning and implementation processes.</li><li>• The coordinator needs to work in the community and preferably live there.</li><li>• The job of the coordinator is to:<ul style="list-style-type: none"><li>- Understand the framework, process, and requirements;</li><li>- Keep track of the overall process in order to guide the coalition through the process and ensure the coalition is moving forward; and</li><li>- Keep records of the work and decisions of the coalition.</li></ul></li></ul>
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# Community Prevention & Wellness Initiative Coordinator Training

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## CPWI Planning Framework

DBHR Community Prevention & Wellness Initiative Planning Framework

Adapted from SAMHSA Strategic Prevention Framework

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## Review and Discussion

Review and Discussion

- Key points and “take-aways” from the training
- Links with DBHR Initiatives and Resources
- Additional training and technical assistance opportunities

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## Review and Discussion

Key points and “take-aways” from the training:

- Role of the Coalition
- Getting Started
- Assessment
- Planning
- Implementation
- Evaluation

**Aha!**

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# Community Prevention & Wellness Initiative Coordinator Training

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**Resources**

[The Athena Forum](#)  
[Community Anti-Drug Coalitions of America \(CADCA\)](#)

- CADCA Primer
- CADCA Webinars/Resources/Trainings/TA

[Substance Abuse Mental Health Services Administration \(SAMHSA\)](#)

- Center for the Application of Prevention Technologies (CAPT)
- Talk They Hear You Media Campaign

[Communities that Care \(CTC\)](#)

- Training and Research

[Prevention Specialist Certification Board of Washington \(PCBWS\)](#)

- SAPST Training

[Kansas University Community Tool Box Resources](#)  
DBHR Prevention Team – Prevention System Manager  
Each other!

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**Resources**

Guide p. 5

- Community Coalition Guide including Strategic Plan Requirements and related templates
- Prevention System Managers and other DBHR staff, project manager and consultant
- PowerPoint templates and trainings
- Athena Forum
- CPWI News/Media Release Template
- Coalition Assessment Tool
- Community Survey
- Community Profile Brochure
- County Risk Profile

These documents and more resources can be found at [www.theAthenaForum.org](http://www.theAthenaForum.org).

Primary sources of information used in developing Task Categories: Communities That Care, CADCA, [Coalitions and Partnerships in Community Health](#) (Frances Dunn Butterfass), DBHR, preliminary evaluation information from Washington and national SPF-SIG project, SAMHSA, PCA.

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**CADCA Training and T/A**

CADCA – [www.cadca.org](http://www.cadca.org)

CADCA Technical Assistance  
1-800-54-CADCA X240  
[training@cadca.org](mailto:training@cadca.org)

Dave Shavel  
307-399-1259  
dshave@earthlink.net

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Community Prevention & Wellness Initiative  
Coordinator Training


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Community Prevention & Wellness Initiative

## Taking It Home / Planning

**Potential Next Steps:**

- Build a Leadership Team
- Orientation and training for new coalition members
- Develop Action Plans and Timelines
- Obtain additional training and TA



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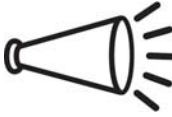
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Community Prevention & Wellness Initiative


## Taking It Home / Planning

**Report Out**



Prepare a 2 minute report:

1. Community / Coalition
2. Members of your Leadership Team
3. 3 Specific Action Steps
4. Potential challenges
5. Training / Technical Assistance needs

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# Thank You!



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