

Community-based Organization (CBO) Prevention Services

Overview

The Health Care Authority (HCA) Division of Behavioral Health and Recovery (DBHR) provides funds for substance use disorder prevention and mental health promotion services to Community Prevention and Wellness Initiative communities (CPWIs) as well as local Community-Based Organizations (CBOs).

CBOs are organizations that serve high-need communities by providing quality and culturally responsive substance use disorder prevention, mental health promotion, and suicide prevention programming through evidence-based, research-based, promising, and (in limited circumstances)

innovative programs and strategies. They can range from non-profits to faith-based organizations, educational service districts, schools, and tribal or local governmental entities. CBOs may be funded for opioid, cannabis, and/or mental health promotion and suicide prevention priorities.

CBOs are focused on the delivery of prevention and promotion programs and/or strategies to meet a targeted need. Such programs can include mentoring, parenting education, community awareness raising, training, and youth skill building.

Serving communities and schools with high needs

CPWI coalitions, local community-based organizations, private not-for-profits, and other educational organizations are eligible for these services. Communities with high risk and high need are prioritized during funding opportunities through the development of composite index scores to address health disparities and improve health outcomes. Strong relationships with local school

districts and educational service districts are required for all projects focused on school-based programs.

Impact and reach

In State Fiscal Year 2024, DBHR funded CBO sites served a total of 8,931 individuals through the implementation of 21 programs or one-time engagements (e.g., trainings).

Outcomes

Based on a 2024 assessment by the Washington State University IMPACT Lab, **participants in programs facilitated by CBO sites largely see improvements in key risk and protective factors from beginning (pretest) to end (posttest).**

The evaluation covered survey data across seven (7) distinct programs and 22 unique implementations from 721 participants. Of these implementations, 13 were parent/caregiver programs (e.g., *Strong African American Families*) while the remaining nine (9) were school-based programs (e.g., *Positive Action*).

Participants in programs facilitated by CBO sites show improvements in key outcomes.

Here are three highlights of key results:

- ❖ *Guiding Good Choices (GGC)*: The overwhelming majority of the 65 participants improved their scores for all four survey scales used. The degree of change was significant, even within groups with few participants.
- ❖ *Positive Action*: 424 youth participants improved in Attitudes Toward Alcohol, Life Skills Knowledge, and Bonding/Attachment. All the changes were statistically significant.
- ❖ *Strengthening Families for Parents and Youth 10-14 (SFP 10-14)*: Changes varied across the 15 scales measured. Key components of SFP 10-14 demonstrated statistically significant improvement for parents (Family Management Attitudes, Family Management Skills, Parent Communication).