

# COMMUNITY BENEFIT, HOSPITALS, AND COALITIONS

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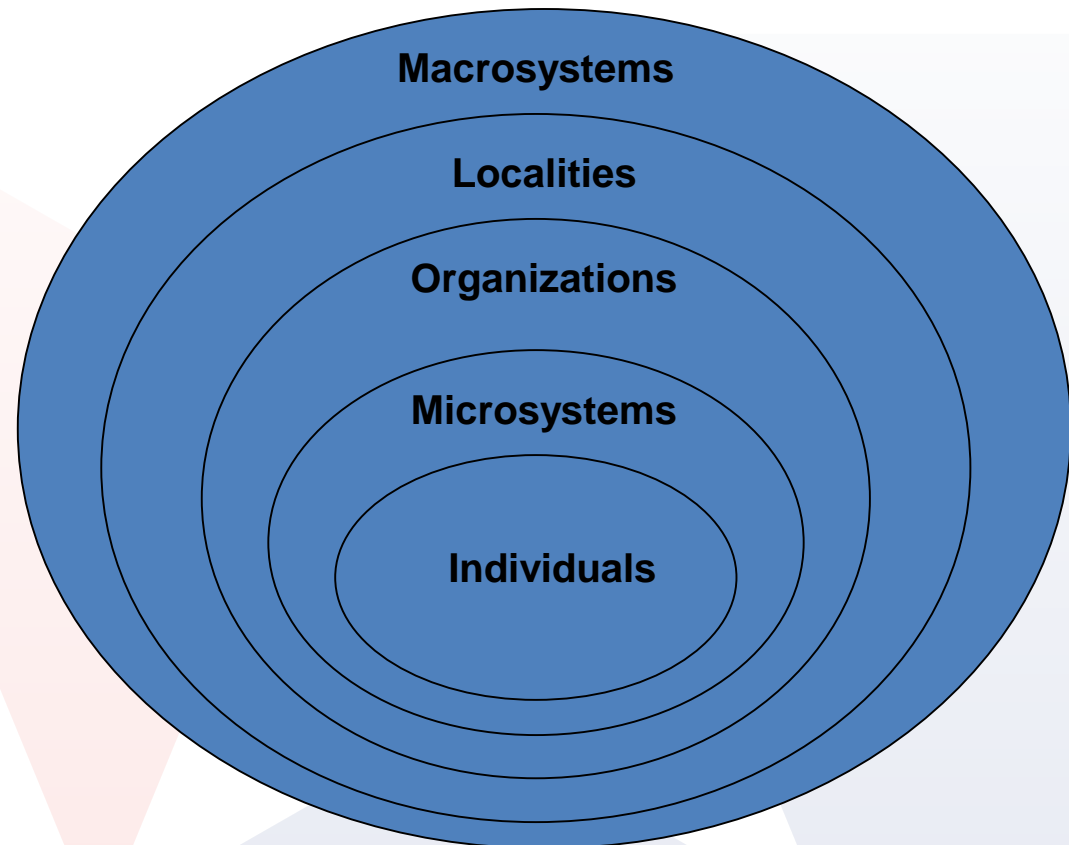
# Conceptual Model for Community Coalition-Based Substance Use Prevention: Social-Ecological Model

- Bronfenbrenner (1979)
- Ecological levels of analysis



# Social-Ecological Model

- Individuals are nested within broader contexts that play a critical role in their health and well-being and impact their attitudes and behaviors.
- The web of connections that surround individuals necessitates interventions at all of these levels.



# *co • a • li • tion*

A coalition is defined as:

a formal arrangement for cooperation and collaboration between groups or sectors of a community, in which each group retains its identity but all agree to work together toward the common goal of building a safe, healthy and drug free community.



**-CADCA**

## Basic Concept

Coalitions bring together community sectors to develop and carry out data-driven, evidence-based strategies to achieve *population-level* reductions in substance abuse rates to include underage drinking, tobacco use, illicit drug use, prescription drug and OTC misuse and abuse



# Key community sectors that all contribute to developing and carrying out strategies.

- Youth
- Parents
- Business
- Media
- Schools
- Youth Serving Organizations
- Law Enforcement
- Religious/Fraternal Organizations
- Civic/Volunteer Group
- Healthcare Professional
- State, Local, or Tribal Governmental Agency with Expertise in the field of Substance Abuse
- Other Organizations Involved in Reducing Substance Abuse

# Coalition Planning Process





## Coalitions can drive community-level change

### Coalition initiatives seek to:

- Impact a specific, defined community.
- Engage all sectors and members of the entire community.
- Address conditions and settings within the defined community.
- Promote comprehensive strategies.
- Achieve positive outcomes (reduce substance use/abuse rates) throughout the entire community.

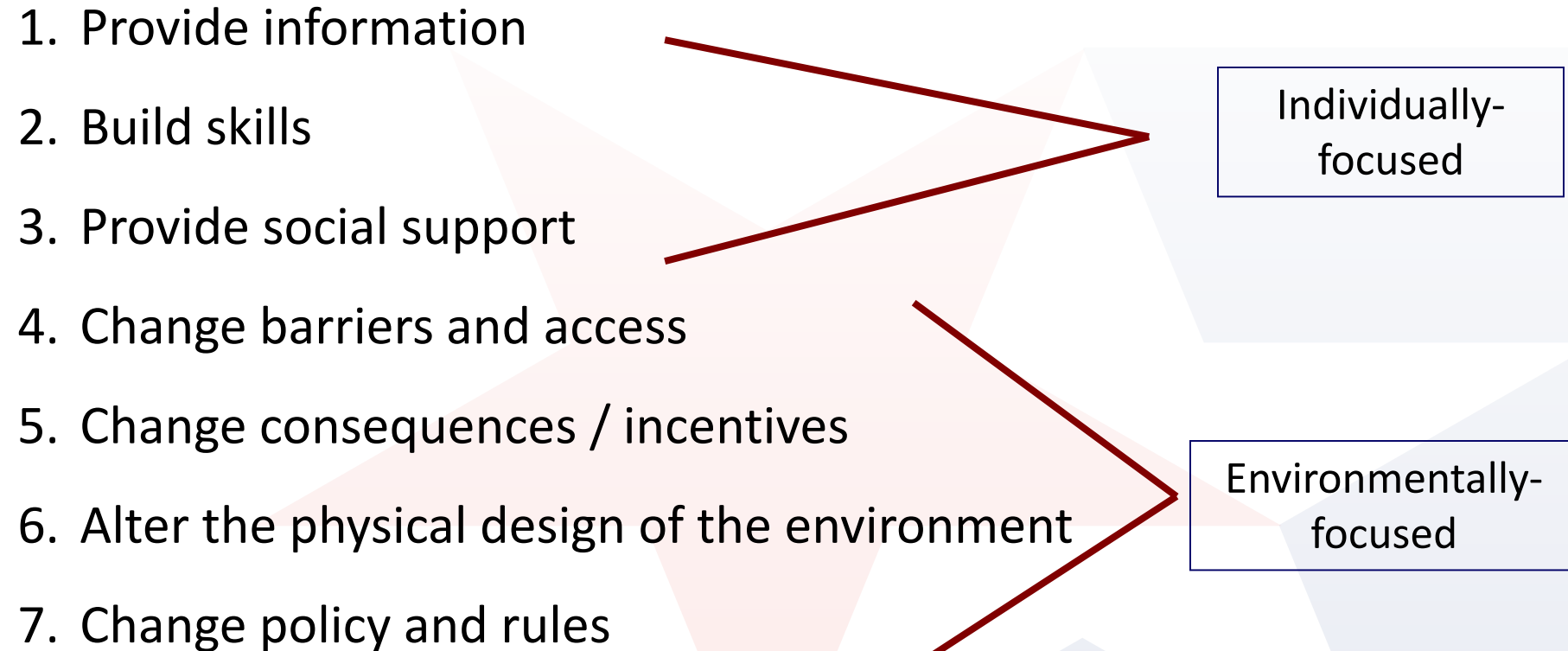




## Differences Between Coalitions and Programs

Coalitions	Programs
<p><b><u>Scale</u></b></p> <p>Coalitions measure success by examining community-level indicators. This applies to all coalition outcomes (short &amp; long-term).</p>	<p>Programs measure change in individuals who have been directly affected by the intervention(s).</p>
<p><b><u>Addresses multiple causes</u></b></p> <p>Coalitions seek to ensure that all causes of identified problems are addressed</p>	<p>Programs are more focused on single strategies, e.g., parenting classes or peer mentoring.</p>
<p><b><u>Actors</u></b></p> <p>Coalition activities are diffused and taken by all members with staff playing a coordinating or supporting role.</p>	<p>Program staff lead the process and are responsible for implementing interventions.</p>

# The 7 Types of Strategies Coalitions Implement



Source: KU Work Group for Community Health and Development, 2007



**The community coalition model, specifically the  
Drug-Free Communities Support program, has  
proven successful in reducing substance use/abuse**

# Drug-Free Communities (DFC) Support Program

- Federal DFC grant program supports community-based coalitions in preventing and reducing youth substance use
- DFC program has funded nearly 2,000 coalitions since 1998
- Coalitions funded to identify the youth drug issues unique to their communities and develop the infrastructures necessary to effectively prevent and respond to the disease of addiction.
- Strong emphasis on environmental/policy strategies
- CADCA is primary training and technical assistance provider

# Types of Data DFC Coalitions Collect & Analyze

- **Core metrics for the DFC Program**
  - Past 30-day use, perception of harm, perception of parental disapproval of use, and perception of peer disapproval of use for alcohol, tobacco, marijuana, and prescription drugs for three grades (6<sup>th</sup>-12<sup>th</sup>)
- **But also**
  - ER data related to drug misuse issues
  - Treatment admissions data
  - Poison Control data
  - Arrest data
  - Vehicular crash data related to DUI and DUID
  - Suspensions/expulsions from school related to drug misuse
  - High school graduation rates

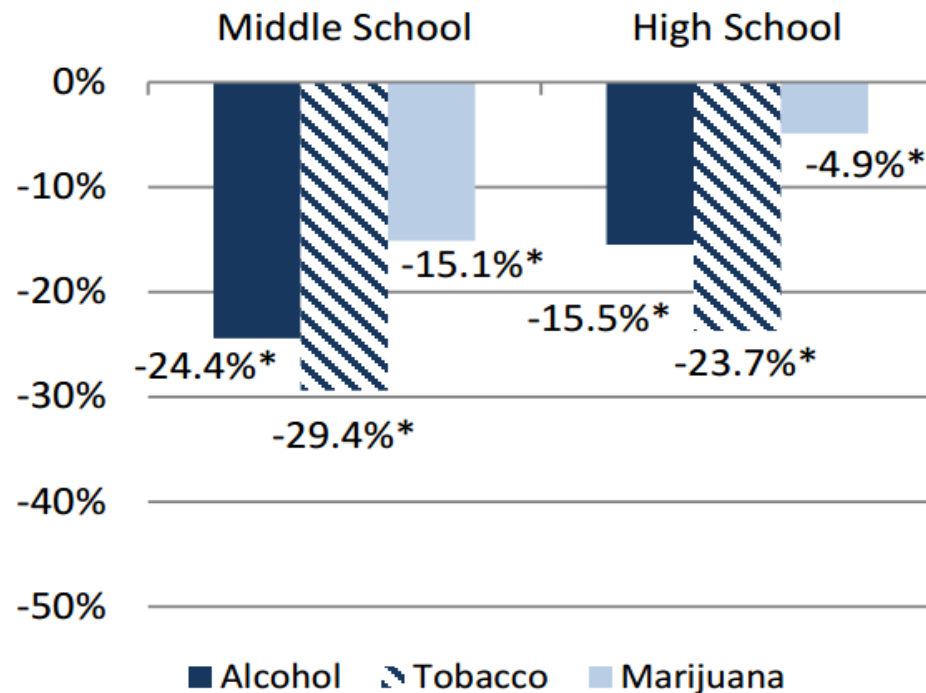
# The DFC Program Is Effective

- Data from the 2014 DFC National Evaluation Report indicate that where DFC dollars are invested, youth substance use is lower. \*
  - Over the life of the DFC program, youth living in DFC communities have experienced significant reductions in alcohol, tobacco, and marijuana use greater than national survey results.

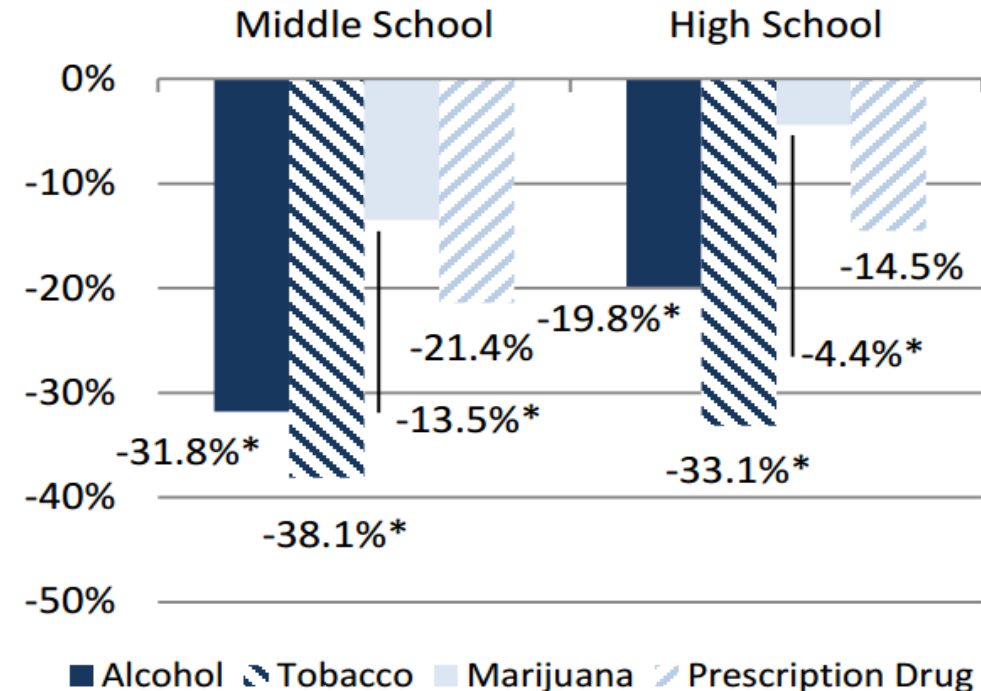
[\\*https://www.whitehouse.gov/sites/default/files/DFC2014Interim%20ReportJuly2015Final.pdf](https://www.whitehouse.gov/sites/default/files/DFC2014Interim%20ReportJuly2015Final.pdf)

# Percentage Decline in *Use*: First Report to Most Recent Report (2014)\*

**FIGURE 1: PERCENTAGE CHANGE IN PAST 30 DAY USE:  
FIRST REPORT TO MOST RECENT REPORT  
(ALL DFC GRANTEES EVER FUNDED)**



**FIGURE 2: PERCENTAGE CHANGE IN PAST 30 DAY USE:  
FIRST REPORT TO MOST RECENT REPORT  
(FY2013 DFC GRANTEES ONLY)**



[\\*https://www.whitehouse.gov/sites/default/files/DFC2014Interim%20ReportJuly2015Final.pdf](https://www.whitehouse.gov/sites/default/files/DFC2014Interim%20ReportJuly2015Final.pdf)



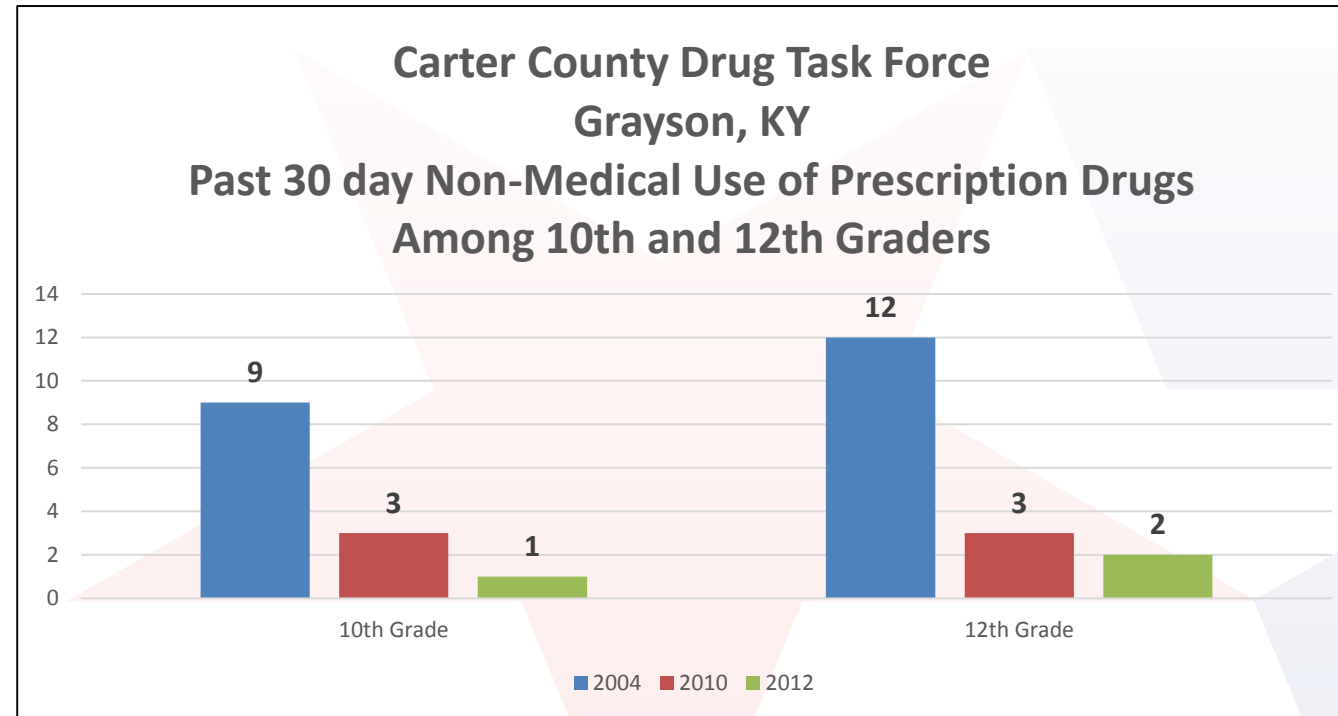
**These results are also being  
achieved at the local level in DFC  
funded communities**





# Prescription Drug Abuse Results

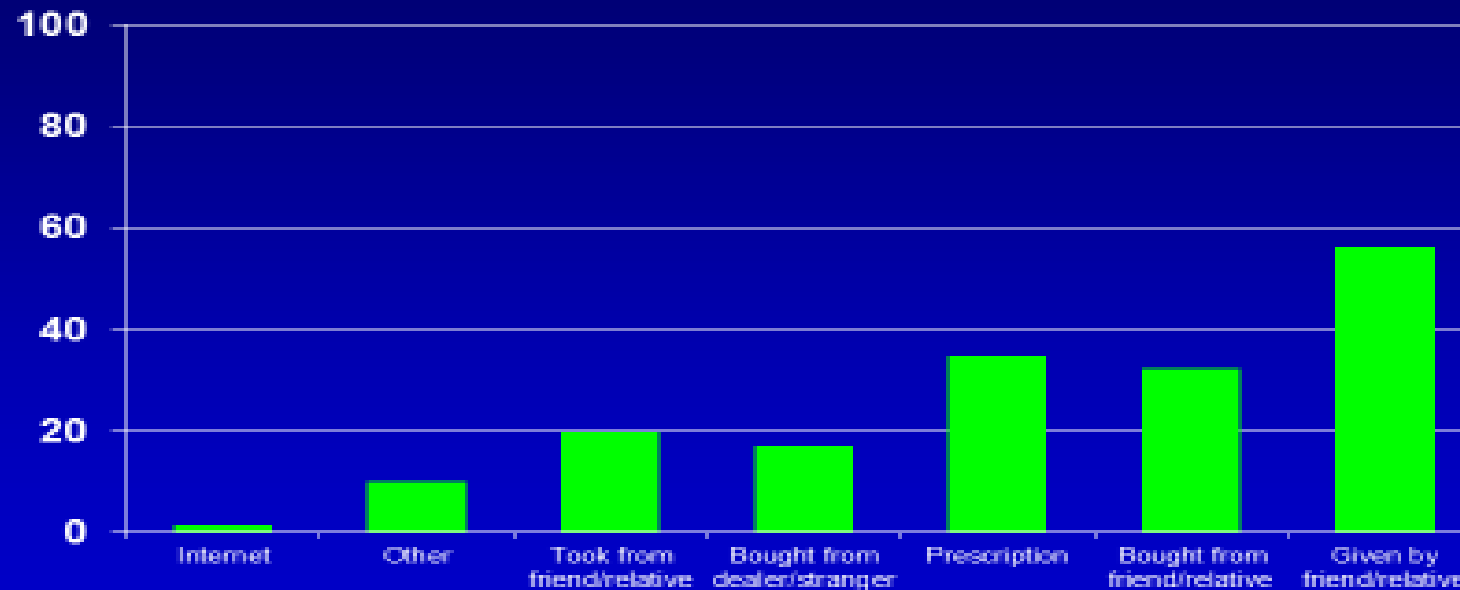
In this DFC community, past 30 day non-medical use of prescription drugs **between 2004 and 2012 decreased 88.9% among 10<sup>th</sup> graders; 83.3% among 12<sup>th</sup> graders.**



Current DFC grantee, data from the Kentucky Incentives Project (KIP) Student Survey Instrument

# How Teens Access Drugs is Important

## Source of Prescription Narcotics among Those who Used in the Past Year, 12<sup>th</sup> Grade\*



\*Categories not mutually exclusive

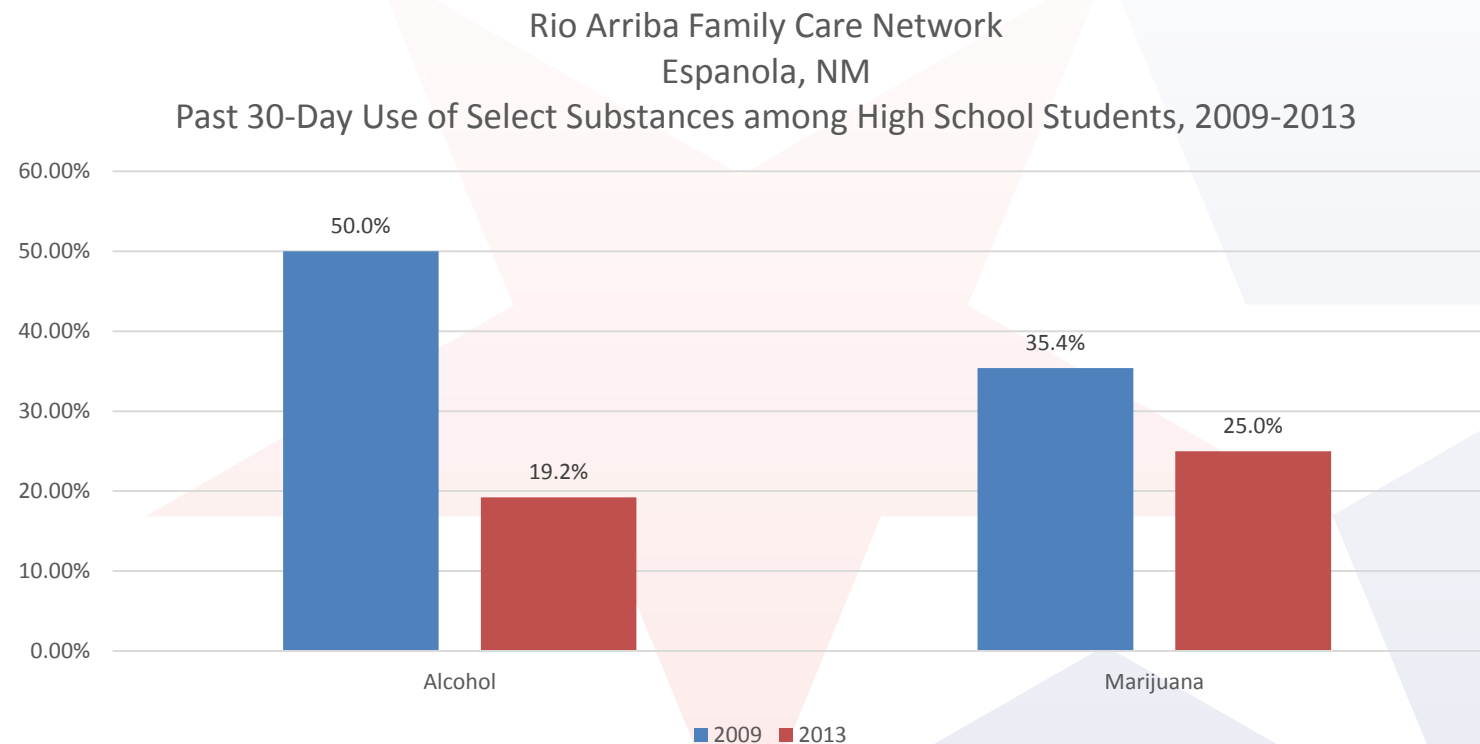
SOURCE: University of Michigan, 2015 Monitoring the Future Study

# Strategies Implemented To Achieve Reductions

- Partnered with local law enforcement to implement take back events, installed permanent “drop boxes”, and increased DUI/drug suppression checks;
- Implemented a community-wide social norms media campaign;
- Designed and implemented “lock it up” campaign on the importance of proper storage of Rx drugs
- Provided educational opportunities with scale and scope throughout the community to parents, teachers, youth, pharmacists, and senior citizens
- Convened a key leader community forum to educate elected officials about the growing prescription drug problem and discussed strategies that could be adopted to address it

# Underage Drinking and Marijuana Results

In this DFC community, past 30 day use of alcohol **decreased 61.6%**, from 50% in 2009 to 19.2% in 2013; and past 30 day use of marijuana **decreased 29.4%**, from 35.4% in 2009 to 25% in 2013



Graduated DFC grantee (from 2010-2015), data taken from Espanola Valley DFC Coalition Youth Survey and Rio Arriba County High School Questionnaire

# Example from CA: North Coastal Prevention Coalition

Figure 1. FY 2008/09: How Youth Who Drink Get Alcohol

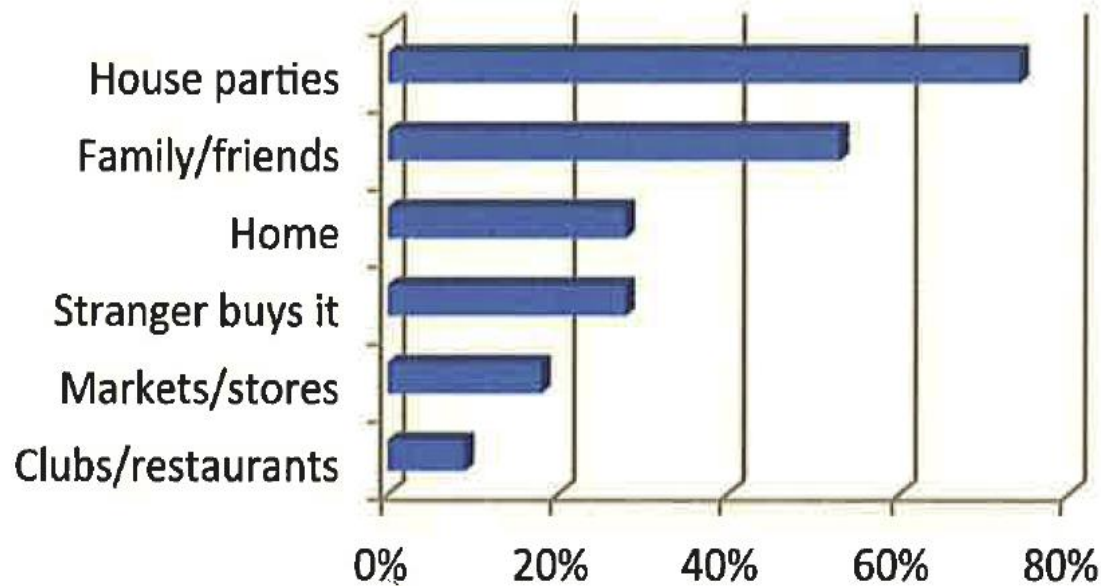
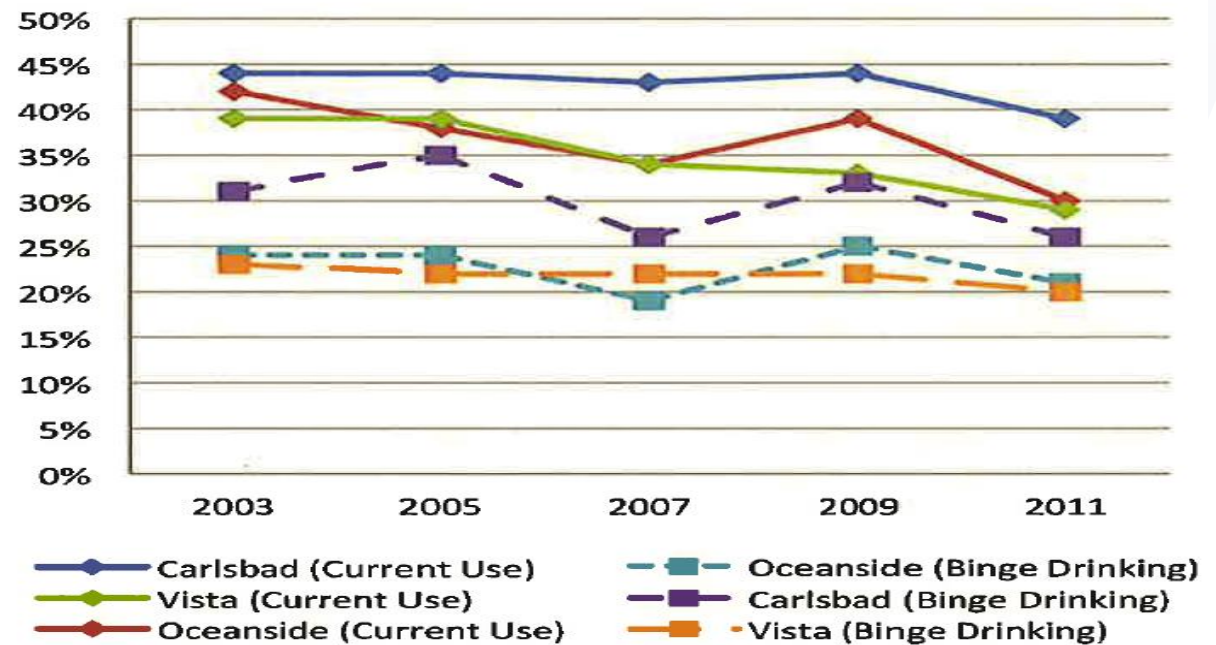


Figure 2. 11<sup>th</sup> Grader Alcohol Use & Binge Drinking (CHKS Findings)



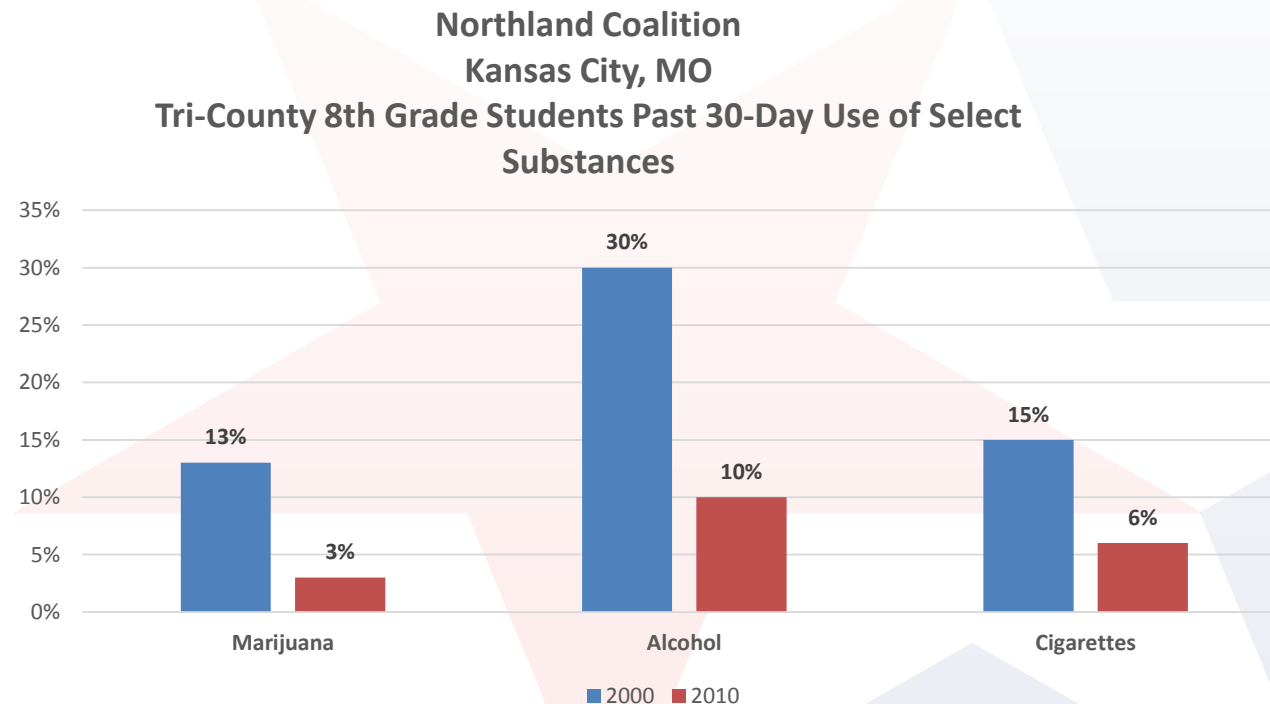
Graduated DFC grantee (from 1998-2009), data taken by coalition from California Healthy Kids Survey (CHKS) and project surveys administered to youth, adults, law enforcement, and others

## Strategies Implemented To Achieve Underage Drinking Reductions

- Disseminated culturally-competent materials to educate the public about issues related to underage drinking
- conducted community wide education campaigns;
- conducted vendor and server training;
- conducted compliance checks;
- mobilized the community restrict youth access to alcohol;
- strengthened and enforced underage sales/service laws

# Marijuana, Alcohol, and Cigarettes Results

In this DFC community, past 30 day use of marijuana **decreased 76.9%**, from 13% in 2000 to 3% in 2010; past 30 day use of alcohol **decreased 66.7%**, from 30% in 2000 to 10% in 2010; and past 30 day use of cigarettes **decreased 60%**, from 15% in 2000 to 6% in 2010



Graduated DFC grantee (from 2006-2011), data taken from Missouri Student Survey

# Strategies Implemented To Achieve Reductions

- Partnered with local law enforcement to conduct compliance checks for alcohol, tobacco, and synthetic marijuana
- Proposed and implemented multi-media strategies
- Worked with coalition youth to develop and film a statewide PSA on underage drinking
- Held forums to educate parents and senior citizens on the dangers of youth drug and alcohol use



# Why Should Hospitals and Coalitions Work Together?

- Collaboration can:
  - Effectively address substance misuse issues raised in Community Health Needs Assessments
  - Improve community health status
- Examples:
  - Michigan
  - Tennessee

# Next Steps

- For Hospitals:
  - Seek out coalitions in your area. Invite them to provide input into the Community Health Needs Assessment and Implementation Plan.
  - Coalitions can bring data, an understanding of the local environment, community partners, and knowledge of evidence based prevention approaches.
- For Coalitions:
  - Seek out your local non-profit hospital(s), identify areas of mutual concern, and invite them to be a member of your coalition.
  - Share information about your coalition, its members, and data on substance use in your area.

# Thank You

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