Prevention Principles
Based Upon Stakeholder Workgroup
June 16, 2003

Preamble

Prevention of youth alcohol, tobacco and other drug use and abuse is a complex and multi-faceted process. It encompasses structured activities, which may be evidence-based "model" programs or community-based projects; environmental change strategies; or strategic policy development efforts. It can take place in homes, schools, faith-based centers, the workplace, or other community locations. The components we address may be limited specifically to alcohol, tobacco and other drug use and abuse prevention, or may be more broad in scope; however, for purposes of this document, we will be specifically addressing prevention as part of the work under the Office of Mental Health and Addiction Services.

The definition of Prevention
Prevention is a proactive process which empowers individuals and systems to meet the challenges of life events and transitions by creating and reinforcing conditions that promote healthy behaviors and life styles.

> *Parenting IS Prevention*
> *Training of Trainers Workshop, 1998*
> > *SAMHSA (reference)*

The framework of prevention

Oregon has adopted three frameworks as guidelines for the system of prevention services implemented through the funding administered by the Office of Mental Health and Addiction Services:

1) THE INSTITUTE OF MEDICINE MODEL

This framework defines the types of activities and target groups addressed by various prevention efforts:

Universal: these prevention activities target the general public or a whole target group that is not identified by individual risk factors. For example, a media campaign, health fair, laws on seat belt use and prohibiting drunk driving.

Selective: these prevention activities target a specific group of the population whose risk of developing substance abuse problems are higher than that of the general population. For example, latchkey children, children of substance abuse users and abusers, children experiencing failure at school.

Indicated: these prevention activities target specific individuals who are identified as having minimal but detected signs or symptoms of substance abuse, but do not meet diagnostic levels for treatment at this time. For example, driver training courses for DUII offenders, Student Assistance Programs (SAP) and Employee Assistance Programs (EAP).

Reducing Risk for Mental Disorders, Institute of Medicine, 1994

2) THE RISK AND PROTECTIVE FACTOR FRAMEWORK

Research has shown that there are a number of risk factors that increase the chances of adolescent problem behaviors. Understanding these risk factors is the first step toward identifying effective means of prevention.

Equally important is the evidence that certain protective factors can help shield youngsters from problems. If we can reduce risks while increasing protection throughout the course of young people's development, we can prevent these problems and promote healthy, pro-social growth.

> *Communities that Care: A Risk-Focused Approach to Reducing Adolescent Problem Behaviors, DRP, Inc. 1994*

> *For more detail see "Science-Based Prevention Programs and Principles 2002, page 4. http://ncadi.samhsa.gov/govpubs/BKD479/BKD479.pdf*

3) CENTER FOR SUBSTANCE ABUSE PREVENTION
SIX PREVENTION STRATEGIES

There are six primary prevention strategies funded by the SAPT Block Grant. The definitions for these strategies are as follows:

Information Dissemination -- *This strategy provides knowledge and increases awareness of the nature and extent of alcohol and other drug use, abuse, and addiction, as well as their effects on individuals, families, and communities. It also provides knowledge and increases awareness of available prevention and treatment programs and services. It is characterized by one-way communication from the source to the audience, with limited contact between the two.*

Education -- *This strategy builds skills through structured learning processes. Critical life and social skills include decision making, peer resistance, coping with stress, problem solving, interpersonal communication, and systematic and judgmental abilities. There is more interaction between facilitators and participants than in the information strategy.*

Alternatives -- *This strategy provides participation in activities that exclude alcohol and other drugs. The purpose is to meet the needs filled by alcohol and other drugs with healthy activities, and to discourage the use of alcohol and drugs through these activities.*

Problem Identification and Referral -- *This strategy aims at identification of those who have indulged in illegal/age-inappropriate use of tobacco or alcohol and those*

individuals who have indulged in the first use of illicit drugs in order to assess if their behavior can be reversed through education. It should be noted; however, that this strategy does not include any activity designed to determine if a person is in need of treatment.

Community – based Process -- *This strategy provides ongoing networking activities and technical assistance to community groups or agencies. It encompasses neighborhood-based, grassroots, empowerment models using action planning and collaborative systems planning.*

Environmental -- *This strategy establishes or changes written and unwritten community standards, codes, and attitudes, thereby influencing alcohol and other drug use by the general population.*

In addition, the OMHAS – County Mental Health Prevention System operates under the specific regulations set forth by the Federal Substance Abuse and Mental Health Services Administration (SAMHSA) for the Substance Abuse Prevention and Treatment Block Grant; U.S. Department of Education regulations and guidance for Safe and Drug Free Schools funds; and the pertinent Oregon Revised Statutes and Administrative Rules.

Priniciples to Guide our Practice

In April through June 2003, a group of stakeholders in the Prevention System convened to affirm and establish principles that we agree will guide our practice as we develop our collaborative program strategies. These principles will guide OMHAS' distribution of funds and planning for the upcoming biennia.

In addition, the Department of Human Services, OMHAS, supports and adopts the Principles established as part of the Phase II Comprehensive Plan mandated by SB555 (99-01) *see Attachment 1;* and supports and adopts the U.S. Department of Education's Principles of Effectiveness, *see Attachment 2.*

According to the role defined in ORS430.258, the Governor's Council on Alcohol and Drug Abuse Programs shall prepare criteria and policies for a statewide plan for prevention services, which will guide OMHAS' overall direction for prevention on a biennial timeline; specifically, the goals, priorities and accountability measures. Program areas of emphasis will be defined according to assessed need, based upon the annual Oregon Healthy Teens Survey, statewide and county risk and protective factor assessment, and other relevant data.

THE LOCAL MENTAL HEALTH AUTHORITY TOGETHER WITH THE LOCAL ALCOHOL AND DRUG PLANNING COUNCIL (LADPC) SERVES AS THE ENTITY RESPONSIBLE FOR PROVIDING COUNTY-LEVEL DIRECTION AND LEADERSHIP FOR PREVENTION; SPECIFICALLY, PLANNING, GOAL AND PRIORITY SETTING, ASSURANCES AND ACCOUNTABILITY.

Local commissions on children and families shall incorporate alcohol and other drug prevention plans developed pursuant to this section into the local coordinated comprehensive plan created under ORS 417.775.

THEREFORE,

These are the Principles that the State, County and Local Stakeholders develop and affirm:

I.   **<u>Evidence-Based Practices</u>**
       Practice will be guided by the agreement that evidence-based practices should be employed when possible; "evidence-based" means that scientific study has shown certain applications to result in predictable outcomes under specified conditions. In areas where such practices have not been studied, we encourage the development of innovative strategies based upon research principles. We will primarily follow the guidelines set forth by the Center for Substance Abuse Prevention.

II.   **<u>Accountability</u>**
       Our practice will be responsible to and respectful of the public trust and our public mission at all levels.

III. **<u>Data-Based Planning and Programming</u>**
Data is a tool of accountability that will drive planning, allocation of funds, and program decision-making at all levels. The collection and distribution of uniform and consistent data will be a foundation of our practice.

IV. **<u>Collaboration</u>**
The Federal-State-Local system of prevention is based upon collaboration between the stakeholders. It is a basic assumption of the work we do together. Prevention by definition must involve community participants and professionals at all levels working together to achieve shared outcomes.

V. **<u>Capacity-Building and Support</u>**
The state will provide an accessible outlet for training, technical assistance and other prevention resources that are readily available to all according to the overall level of resource available.

VI. **<u>Equitable Resource Distribution</u>**
Funding and other resources will be equitably distributed based upon an articulated framework.

Revised October, 2003

Attachment 1. Phase II Comprehensive Plan – SB555

Planning Principles

1. **Create a Community Based, Holistic Approach**
- Plans are community-focused, incorporating the greatest level of input from multiple stakeholders, including individuals, families, private and non-profit entities, leaders of faith and ethnic communities, and service agencies and organizations.
- Plans allow management and decision-making responsibility to rest at the community level whenever possible.
- Plans have ongoing community investment and involvement.
- Plans are specific enough to direct how services are organized.
- Plans are provided in a format readily understood by general populations.
- Separate planning processes are increasingly integrated.

2. **Assure Family-Centered Processes**
- Plans involve families in all aspects and levels of the planning process, recognizing that they are the most important teachers, caregivers and role models for their children.
- Plans support and strengthen families in providing the foundation for the physical, social, emotional, and intellectual development for their children.

3. **Establish/Maintain Effective Partnerships**
- Plans establish a process whereby local decision-making and prioritization of needs determine a direction for state planning and create a viable partnership for implementation.
- Plans enable data linkages, information sharing, and ongoing collaboration between partners to most effectively and efficiently address needs.

- Plans are sustainable through constantly expanding constituencies and through continually increasing interest and investment in the plans.
- Plans promote continuous communication between stakeholders and providers at all levels.

4. **Utilize a Balanced SWOT (Strengths, Weaknesses, Opportunities, Threats) Approach**
- Plans address both the risks/deficiencies/challenges and the strengths/assets/opportunities in communities as a way of identifying priorities and resources to address needs.

5. **Include Data**
- Plans will utilize available federal, state and local archival data to correctly portray the nature and circumstances of the community and its population.
- Plans will also collect and convey anecdotal data to provide context to the available archival data.

6. **Implement Research Based Accountability**
- Plans will be based on research-based, proven practices.
- Plans will include measurements of success to enable tracking of effectiveness toward meeting planned outcomes,
- Plans will also include feedback processes to ensure that periodic refinement and updating of the plans occur.

7. **Promote Innovation**
- In areas where proven practices are not available, plans are encouraged to develop innovative strategies based on research principles.
- Plans will allow for strategies that enable communities to reflect innovation and creativity in approaches to addressing community needs.

8. **Reflect and Incorporate Diversity**
- Plans and planning processes reflect the social, cultural and economic diversity in the community.
- Plans and planning processes will encourage the development of behaviors, attitudes and policies that enable organizations to deliver services in ways that meet the needs of diverse cultures and people with disabilities.

- Plans and planning processes will provide advocacy and opportunities for racial, ethnic, gender, and special needs individuals and groups to participate in the planning, design and delivery of plans and programs.

Attachment 2. Safe and Drug-Free Schools Principles of Effectiveness

The SDFSCA is a central part of the Federal Government's effort to encourage safe and drug-free learning environments that support student academic achievement. Funded programs provide support for school- and community-based programs to help our Nation's communities prevent alcohol and other drug use, as well as youth violence. Along with the inherent flexibility for implementing programs, State and local entities are accountable for achieving measurable results.

Coordination and collaboration are critical themes that are interwoven throughout the SDFSCA; the legislation calls for Governors and SEAs to work with individuals and organizations that represent all facets of our schools and communities to develop and implement plans that will effectively foster a safe learning environment and prevent illegal use of drugs and alcohol,

LEAs must consult, on an ongoing basis, State and local governments, school representatives, parents, teachers, students, community-based organizations and others in the development of applications as well as the design and development of programs and activities implemented under the SDFSCA.

The Principles of Effectiveness provide the framework to assist States and local entities in designing, implementing, and evaluating high-quality programs and achieving measurable results. Programs or activities must:

- be based on an assessment of objective data regarding the incidence of violence and illegal drug use in the elementary schools and secondary schools and communities to be served. This assessment must include an objective analysis of the current conditions and consequences regarding violence and illegal drug use that is based on ongoing local assessment or evaluation activities. Analysis of the conditions and consequences must include delinquency and serious discipline problems among students who attend such schools (including

private school students who participate in the drug and violence prevention program).

- be based on an established set of performance measures aimed at ensuring that the elementary schools and secondary schools and communities to be served have a safe, orderly, and drug-free learning environment.

- be based on scientifically based research demonstrating that the program to be used will reduce violence and illegal drug use.

- be based on an analysis of the data reasonably available at the time, of the prevalence of risk factors, including high or increasing rates of reported cases of child abuse and domestic violence; protective factors, buffers, assets; or other variables identified through scientifically based research that occur in schools and communities.

- include meaningful and ongoing consultation with and input from parents in the development of the application and administration of the program or activity.