Tribal Training and Technical Assistance Sessions

SAMHSA's Strategic Plan

VISION
A Life in the Community for Everyone

MISSION
Building Resilience and Facilitating Recovery

ACCOUNTABILITY  CAPACITY  EFFECTIVENESS
SAMHSA’s Strategic Prevention Framework

Cultural Competence
Sustainability

- Profile population needs, resources, and readiness to address needs and gaps
- Monitor, evaluate, sustain, and improve or replace those that fail
- Mobilize and/or build capacity to address needs
- Implement evidence-based prevention programs and activities
- Develop a Comprehensive Strategic Plan

Prevention is a Continuum
- Prevention extends from deterring diseases and behaviors that contribute to them to slowing the onset and severity of illnesses when they do arise.

Prevention is Prevention is Prevention
- The mechanisms of prevention are the same whether the target is on changing social, environmental or biological factors for many diseases.

Successful Prevention Decreases Risk Factors and Enhances Protective Factors
- The same risk factors affect many health issues – from depression and substance use to heart disease and diabetes. Other factors can protect against these health problems. The goal: to reduce risk factors and enhance protective factors that can compromise health.

Prevention Requires Adoption of Known Effective Prevention Practices Within a Framework That Works
- Research and experience have produced highly effective prevention programs to reduce risk factors and promote protective factors.

Systems of Prevention Services Work Better Than Service Silos
- The best prevention results from partnerships; without collaboration, even the best prevention efforts will not leverage collective resources and can miss achieving their potential.

Common Data Sets Across Service Systems Can Help Assess Prevention Efficacy and Promote Accountability
- Solid evaluation can help assess programs effectiveness and the value of engagement across service systems.

Recognizes the importance of States and communities
- Coordinating funding and developing infrastructure.

Comprehensively address Substance Abuse
- Through multiple strategies across multiple sectors with both the public and private sector resources.
SPF SIG Goals

- Prevent the onset and reduce the progression of substance abuse, including childhood and underage drinking
- Reduce substance abuse-related problems in the communities
- Build prevention capacity and infrastructure at the State and community levels

SAMHSA envisions the SPF SIGs being implemented through partnerships between States/Tribes and Communities”

Structure of the SPF SIG

- 5 year Cooperative Agreement
- SPF SIG Advisory Group
- 85% of funds must go to Community efforts
- State Epidemiological Workgroup ($150,000 from SPF SIG or other funds each year)
Characteristics of the SPF SIG

- Outcome based prevention
- Focus change at the community level
- Lifespan focus
- Systematic strategic planning using SPF
- Encourages programs, policies, and practices
- Requires data-driven decision making
- Build State/Tribe and community infrastructure
- Emphasis on Underage Drinking

Outcome-Based Prevention

- Effective prevention is grounded in a solid understanding of the alcohol, tobacco, and other drug consumption and consequence patterns that need to be addressed.

- Understanding the nature and extent of consumption (e.g., underage drinking) and consequences (e.g., motor-vehicle crashes) is critical in order to align prevention strategies to address identified priorities.
Implementing the Strategic Prevention Framework
Planning, Monitoring, Evaluation and Replanning

Community as a Unit of Analysis

- The SPF SIG supports SAMHSA’s vision, a Life in the COMMUNITY for Everyone
- The SPF SIG requires community level activities that mirror the grant’s state/tribal level requirements in each stage of the Framework
State Epidemiological Workgroups

- Establish and/or enhance a State/Tribal Epidemiological Workgroup.
- Function over the 5-year duration of SPF SIG through all SPF SIG steps.
- Provide core support to the SPF SIG Advisory Council for prevention decision-making.
- Bring systematic, analytical thinking for understanding the causes and consequences of alcohol, tobacco, and other drugs and the strategies/prevention resources to address them.

Infusing Data throughout SPF SIG Decision Making

- SPF SIG strives to use data across all steps of the Strategic Prevention Framework (SPF).
- Deliberate process to collect, analyze, interpret, and apply lessons from substance use and consequence data to drive state efforts across the entire SPF.
- Ongoing and integrated data analyses are critical to:
  - identify problems and set priorities,
  - assess and mobilize capacity for using data,
  - inform prevention planning and funding decisions,
  - guide selection of strategies to address problems and goals,
  - monitor key milestones and outcomes and adjust plans as needed.
SPF SIG

**Underage Drinking Component**

- DHHS commitment thru SAMHSA to bring down underage drinking rates; target of close to $30 million in FY2004;
- Grantees are required to include the prevention of underage alcohol consumption and provide a comprehensive strategy that addresses Underage drinking priorities. Underage drinking must be included in all five steps of the Strategic Prevention Framework Expectations
- Grantees are required to report on underage drinking-related SPF SIG activities as a condition of the grant.
- Lead agency for underage drinking is required to be part of SPF SIG Advisory Council.

SPF Advisory Council

- **Required Membership**
  - Office of the Governor/CEO
  - Core Group—drug and alcohol related agencies
  - Demand reduction coordinator from DEA
  - Underage drinking lead agency
  - SAMHSA/CSAP
- **Encouraged Membership**
  - Other State, community and nonprofit organizations
- **Chair Appointed by Governor/Chief Executive Officer**
SPF SIG Advisory Council (cont’d)

SPF SIG Advisory Council Expectations:
- Connection to the CEO/Governor’s Office
- Community as well State perspective
- Diversity
- SPF SIG Staff support council work
- SPF SIG Epi Workgroup supports council work

OUTCOME BASED PREVENTION

Building Logic Models to Address Substance-Related Consequences and Substance Abuse
Implementing the Strategic Prevention Framework
Planning, Monitoring, Evaluation and Replanning

Substance-Related Problems (Examples)

<table>
<thead>
<tr>
<th></th>
<th>TOBACCO</th>
<th>ALCOHOL</th>
<th>ILLICIT DRUGS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illness</td>
<td>Lung Cancer</td>
<td>Cirrhosis</td>
<td>Overdose HIV</td>
</tr>
<tr>
<td></td>
<td>Heart Disease</td>
<td>Cancer</td>
<td>Fetal Effects</td>
</tr>
<tr>
<td></td>
<td>Lung Disease</td>
<td>Heart Disease</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fetal effects</td>
<td>Fetal effects</td>
<td></td>
</tr>
<tr>
<td>Injury</td>
<td>Burns</td>
<td>Car Crashes</td>
<td>Car Crashes</td>
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<tr>
<td></td>
<td></td>
<td>Boating/Falls</td>
<td>Suicide</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Suicide</td>
<td>Homicide</td>
</tr>
<tr>
<td>Other</td>
<td>Fires</td>
<td>Crime Work/School</td>
<td>Crime Work/School</td>
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</table>
Substance Use Consumption Patterns

- Overall Consumption
- Acute, heavy consumption
- Consumption in risky situations
  - Drinking and driving
  - Smoking around young children
- Consumption by high risk groups
  - Youth, College Students, Older Groups
  - Pregnant women

Intervening/Causal Factors (Examples)

- Community Level Factors
  - Availability of substances (price, retail, social)
  - Promotion of substances
  - Social Norms regarding use
  - Enforcement of Policies and Social Norms

- Individual Level Factors
  - Perceptions of risk
  - Perceptions of harm
Choosing Strategies

- Must address the problem identified
- Must address the causal factor(s) believed to be involved

Strategy Matches Problem and Cause

<table>
<thead>
<tr>
<th>Related Problems</th>
<th>Substance Use</th>
<th>Causal Factors</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Rate of Alcohol-</td>
<td>High Rates of Binge Drinking</td>
<td>Easy Access to Alcohol</td>
<td>Reduce Access</td>
</tr>
<tr>
<td>Related Crashes</td>
<td>High Rates of Drinking and Driving</td>
<td>Low Perceived Risk of Alcohol Use</td>
<td>Curriculum to Increase Knowledge about Risk</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Social Norms Encouraging Binge Drinking</td>
<td>Eliminating Tail-Gating Parties; Promoting No-Alcohol Parties</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Little Enforcement of Drinking and Driving</td>
<td>Checkpoints</td>
</tr>
</tbody>
</table>
**Strategy** Does Not Match the **Cause**…
May Match the **Problem**

- Lung Cancer Rates
- High levels of advertising for Cigarette Use
- Enforcement of Youth Access Laws
- Low prices for Cigarettes

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**Strategy** Does Not Match the **Cause** or the **Problem**

- Hepatitis B
- Availability of Marijuana
- Middle school curriculum
- Mentoring Program
SAMHSA’s Strategic Prevention Framework

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Monitor, evaluate, sustain, and improve or replace those that fail

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Develop a Comprehensive Strategic Plan

Cultural Competence Sustainability