

JTNN Prevention PLAN



2010 EXECUTIVE SUMMARY

Join Together Northern Nevada (JTNN) is a community based coalition in Washoe County whose mission is to “reduce the impact of substance abuse on the community by improving access to needed prevention, intervention, and treatment services.” JTNN accomplishes its mission through a community needs assessment, strategic planning, the funding of prevention strategies, and collaborative initiatives aimed at preventing the use and abuse of various substances, including but not limited to alcohol, marijuana, prescription drugs, and methamphetamine.

JTNN is governed by a Board of Directors. The collaborative efforts of a number of committees guide the planning and projects that target the identified substance abuse prevention priorities in Washoe County. Currently, the following committees are active: Environmental Strategies Group (underage drinking prevention); the Meth Community Response Alliance (promoting strong prevention, treatment, law enforcement, and policy related to substance abuse); and the Community Prescription Roundup Committee. In addition, JTNN is currently staffed by an Executive Director, Grants Manager, Training Coordinator, Project Assistant, and Coalition Coordinator.

The first JTNN prevention plan was published in 2001. Currently, JTNN is following the *Strategic Prevention Framework* (SPF) as a model to guide planning and prevention strategy implementation. The five steps of the SPF are noted below:

Assessment.....Capacity..... Planning..... Implementation..... Evaluation

Our assessment process is ongoing and really sets the tone for strong use of the SPF model. JTNN staff consistently search for new and improved data sources to help assess prevention needs in Washoe County. Community awareness building related to substance abuse and training activities strengthen local capacity to implement effective prevention strategies. Our planning efforts are, of course, emphasized in this document and target the promotion of both evidence-based strategies to address local prevention needs as well as prevention strategy innovation. Finally, JTNN is committed to strengthening both process and outcome evaluation practices.

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JTNN Prevention Planning Introduction

The development of a plan to prevent and reduce substance abuse in Washoe County requires the involvement of key stakeholders across a wide range of community sectors. Central to this plan development is the gathering of information related to substance abuse trends and those factors that influence substance abuse trends, reviewing the status of substance abuse prevention resources in order to describe resource gaps, and identifying strategies that should have high priority in our collective prevention efforts. It is our hope and intent at JTNN that this plan will be a useful tool in guiding decisions related to how we allocate financial and collaborative resources in the continuing efforts of our coalition to improve community health through the prevention and reduction of substance abuse.

In 2009, a planning survey was launched through the efforts of the Community Coalition Action Board (CCAB) of JTNN. The survey was conducted with the intent of gathering a broad range of input related to local substance abuse trends and potential areas for prevention strategy focus and was delivered through a Survey Monkey link. The survey included data related to several types of drugs and asked for responses around the degree to which people are concerned about the local impact of these particular drug categories. Survey respondents were also asked to identify the drug category that was of most concern to them and provide feedback as to why that category was of primary concern. Finally, respondents were asked to rate the degree to which they perceived that a range of variables were influencing the drug trend that was of most concern to them. The responses to these questions will be summarized within this report.

The process of prioritizing strategies combined feedback from the survey, JTNN staff review of current prevention activities in Washoe County, as well as ideas gathered through key stakeholder interviews conducted by CCAB members. Through these interviews, stakeholders were asked to identify prevention strategies that they would make a priority to target the variables of most influence that were identified through the survey. The resulting strategy directions are the core of this prevention plan.

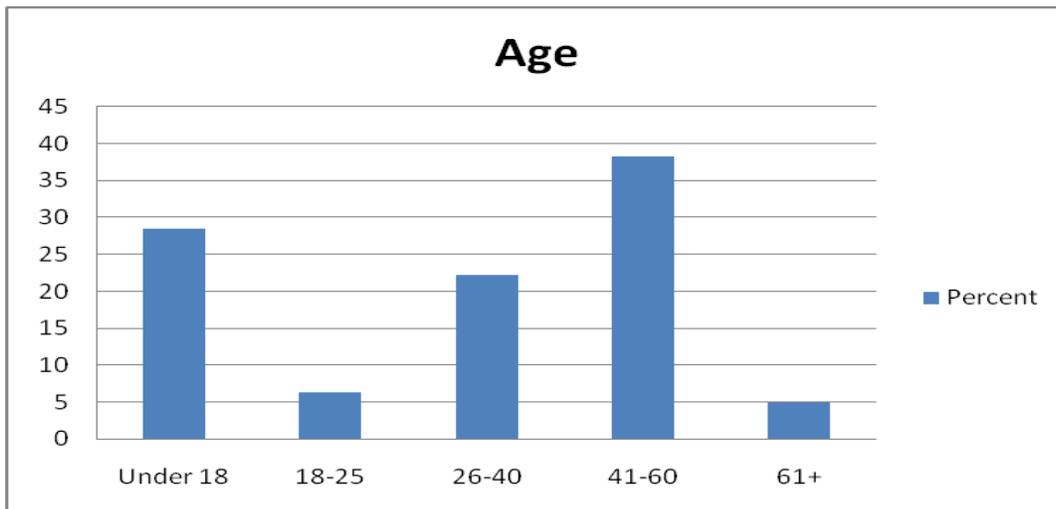
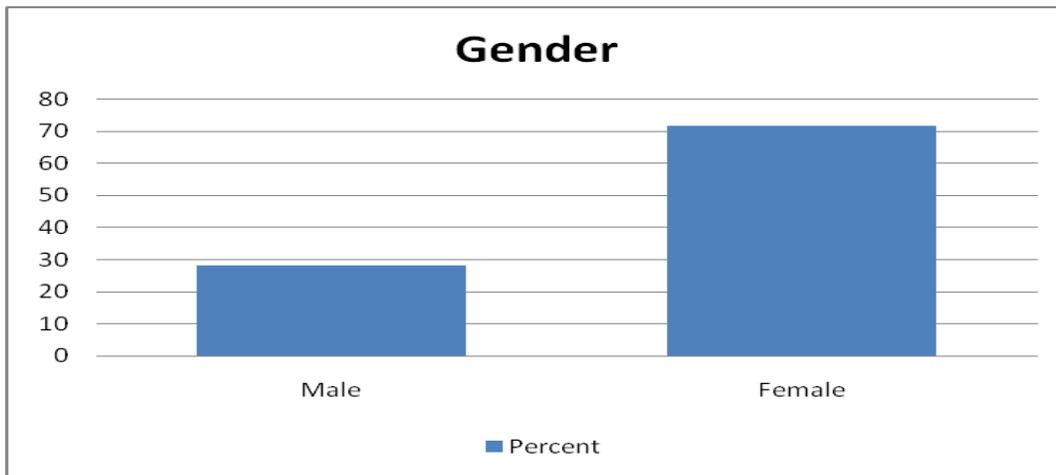
It is important to note that the current planning process did not address underage alcohol consumption and consequences. JTNN conducted a thorough assessment of underage drinking patterns in Washoe County in 2008 as part of the Strategic Prevention Framework State Incentive Grant project funded by the Nevada Substance Abuse Prevention and Treatment Agency (SAPTA). Through this project, a number of priorities were established and strategies implemented to prevent and reduce underage and young adult alcohol abuse in Washoe County. Critical to the success of these strategies is the need to sustain their implementation. Beyond the strategies identified within this plan as priorities, JTNN is committed to sustaining the implementation of our current underage and young adult alcohol abuse prevention strategies

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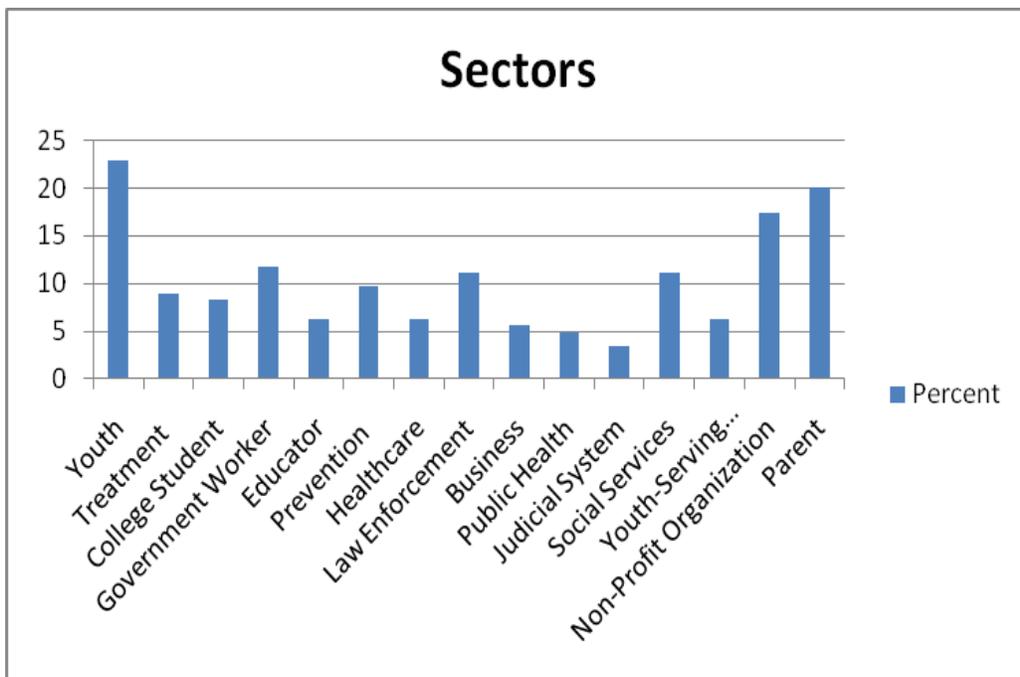
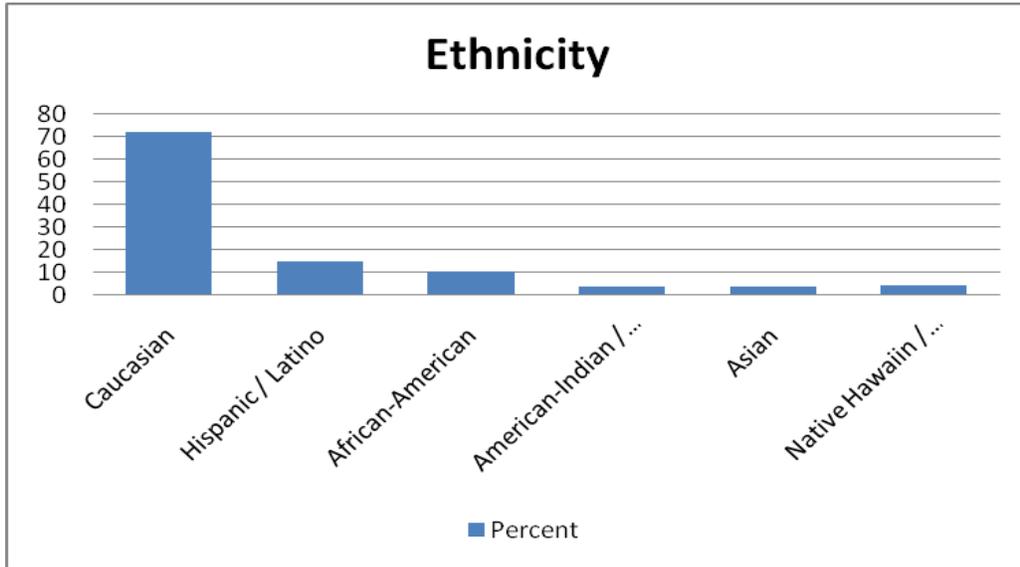
Demographic Information - Survey Participants

JTNN received 152 responses to the planning survey. Most of these were conducted directly through Survey Monkey. Some of the youth responses were received through paper / pencil copies of the survey and were then entered into Survey Monkey by JTNN staff. The following charts reflect demographic characteristics of the survey group.

It will be important as we move forward with any updates to this type of planning survey that we look for methods to increase the total number of participants as well as the balance of sector representation. You can see through the charts, for example, that the survey reached a much higher percentage of females relative to males.



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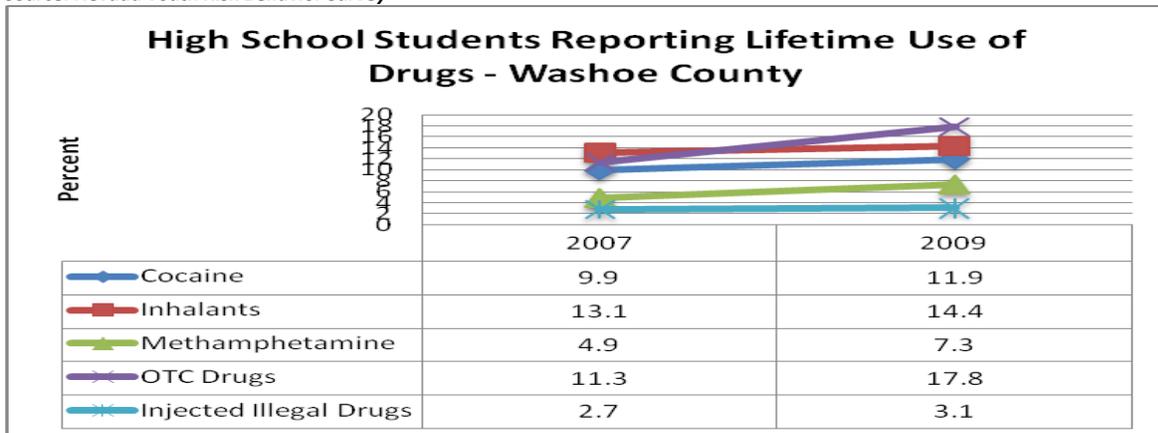
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Data Summary

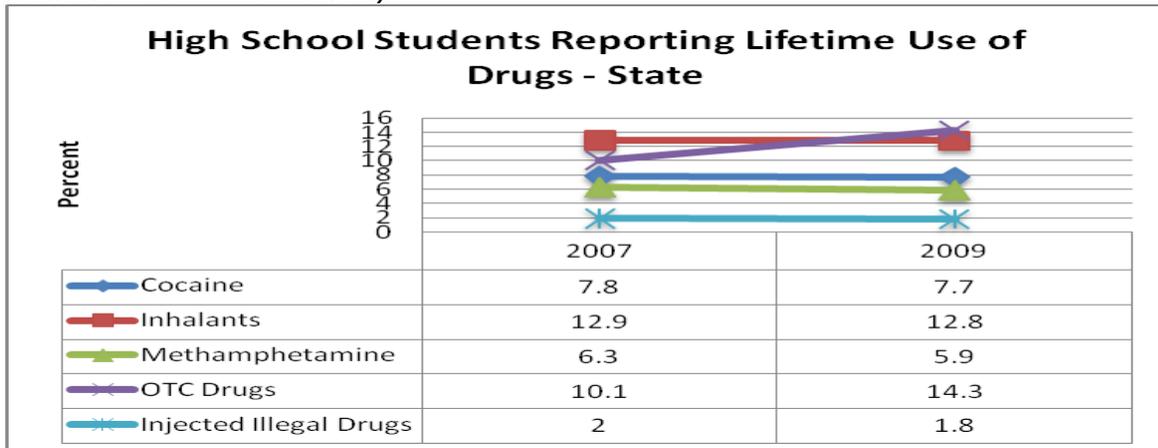
JTNN coalition members who participated in this planning survey process reviewed a number of data points developed through the JTNN needs assessment process. The following charts help to punctuate the specific drug concerns and priorities that were identified through the planning survey. In addition, some information related to alcohol trends is included to highlight the need to sustain coalition strategies for preventing underage drinking and young adult alcohol abuse.

Drug / Alcohol Consumption

Source: Nevada Youth Risk Behavior Survey

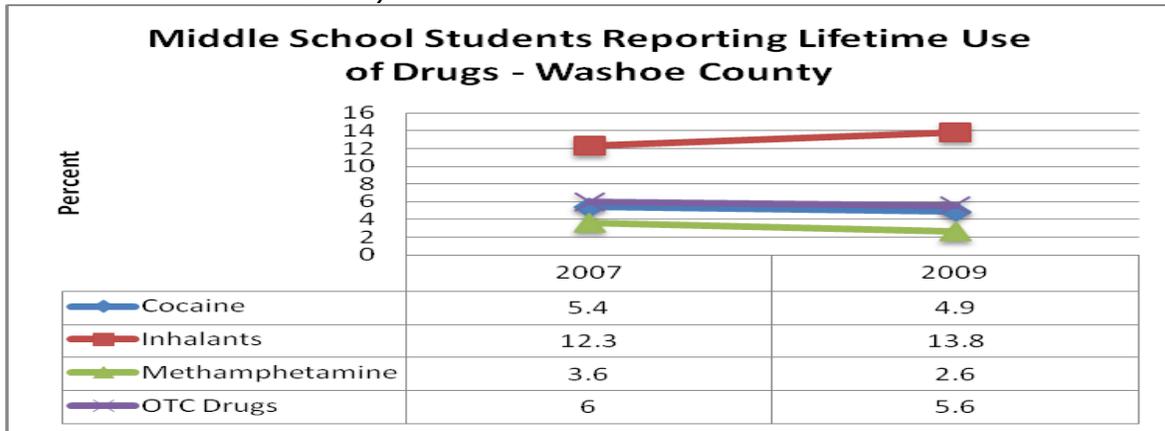


Source: Nevada Youth Risk Behavior Survey

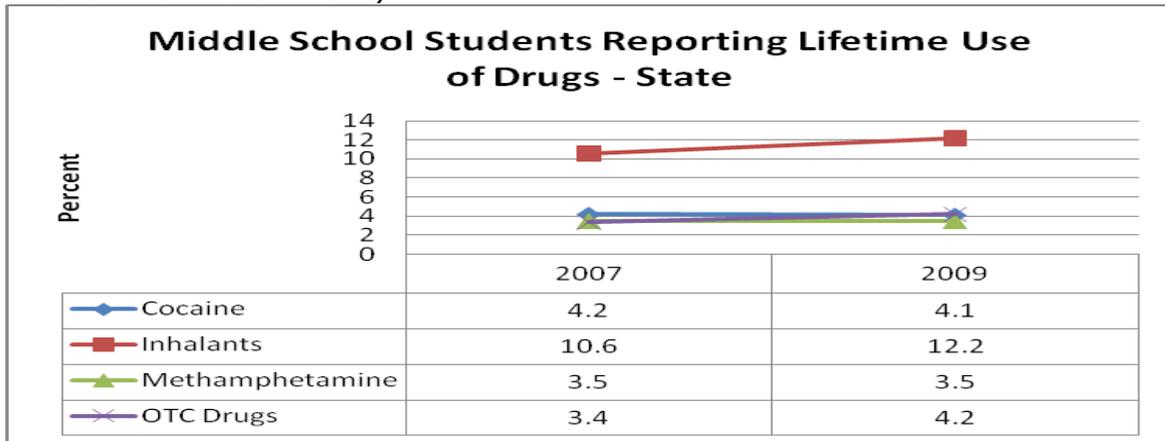


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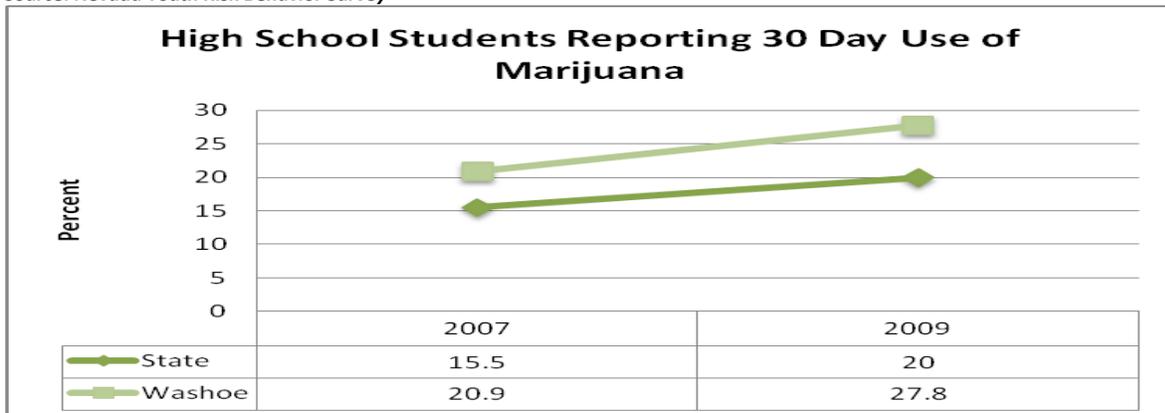
Source: Nevada Youth Risk Behavior Survey



Source: Nevada Youth Risk Behavior Survey

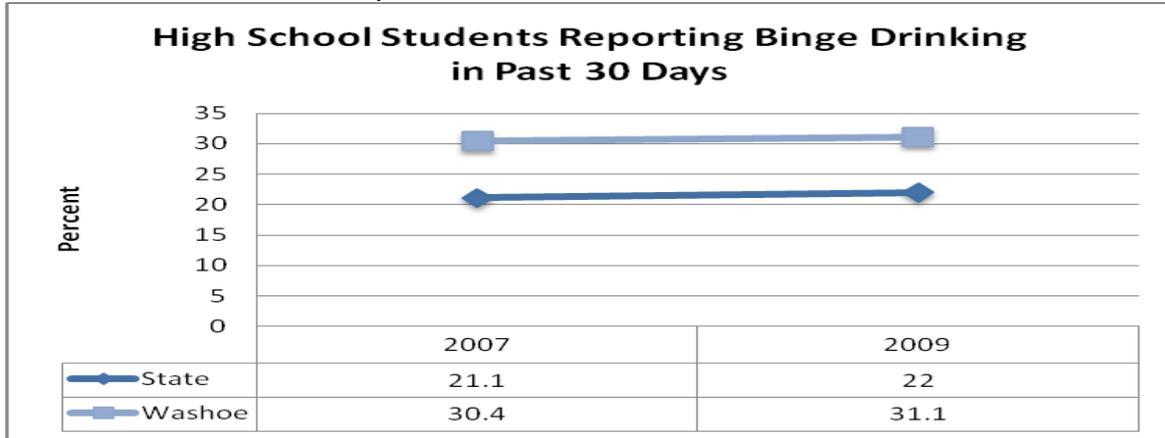


Source: Nevada Youth Risk Behavior Survey

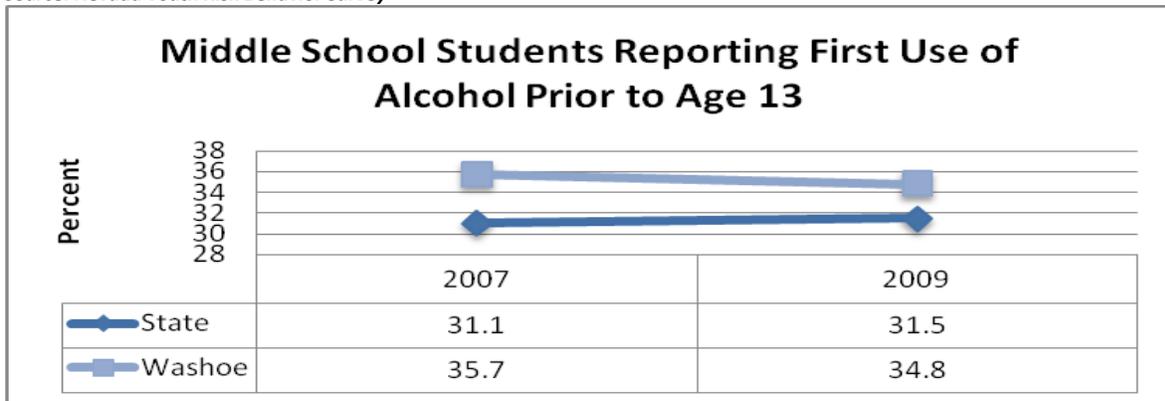


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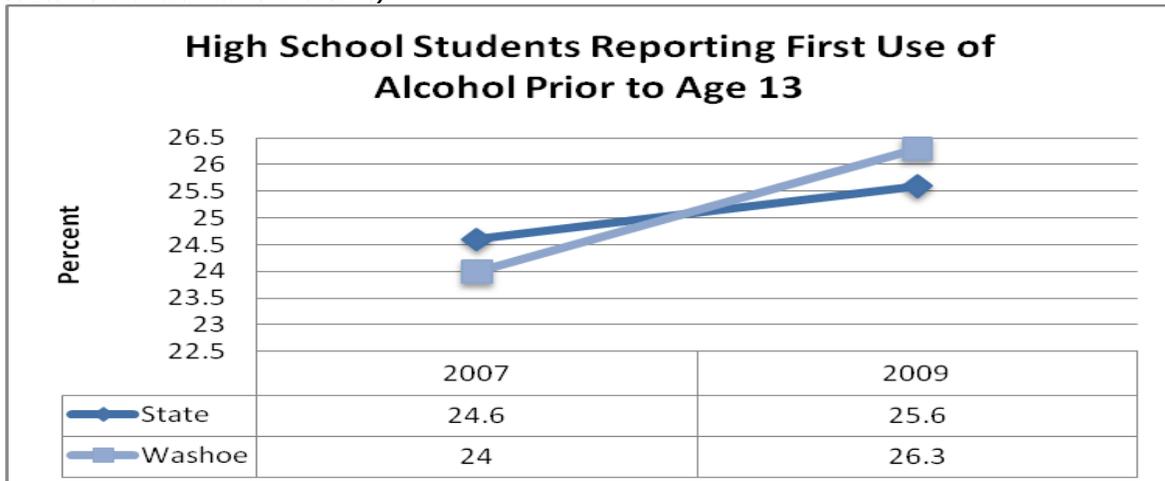
Source: Nevada Youth Risk Behavior Survey



Source: Nevada Youth Risk Behavior Survey



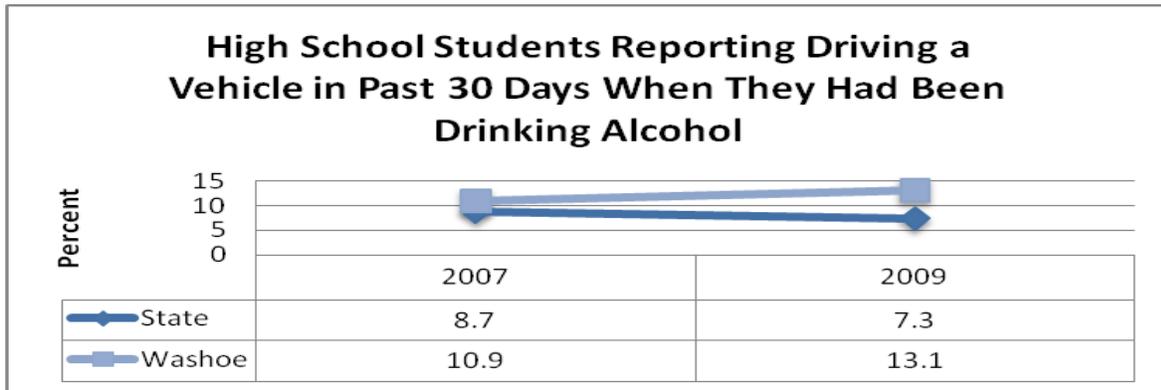
Source: Nevada Youth Risk Behavior Survey



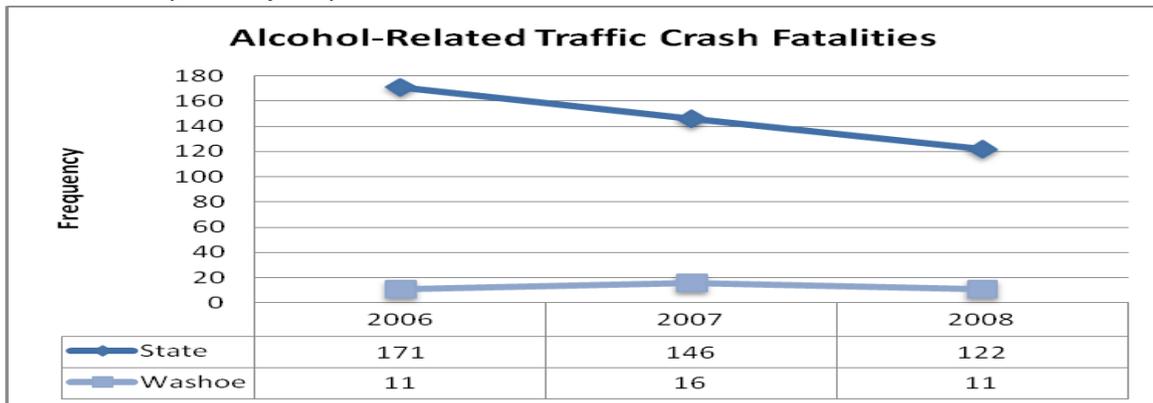
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Alcohol and Driving

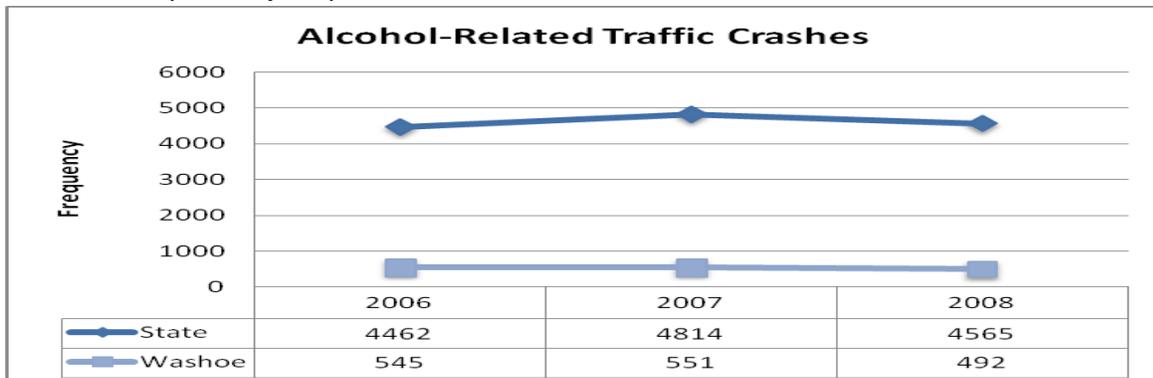
Source: Youth Risk Behavior Survey



Source: Nevada Department of Transportation



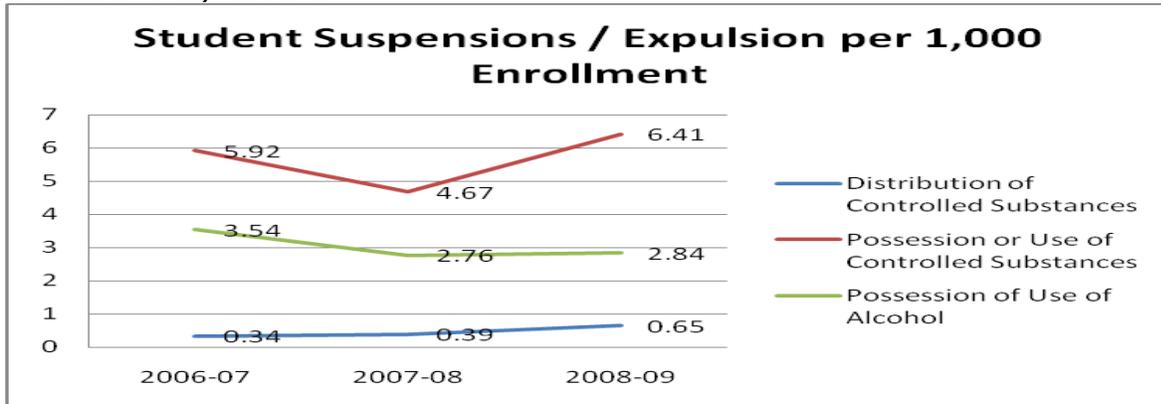
Source: Nevada Department of Transportation



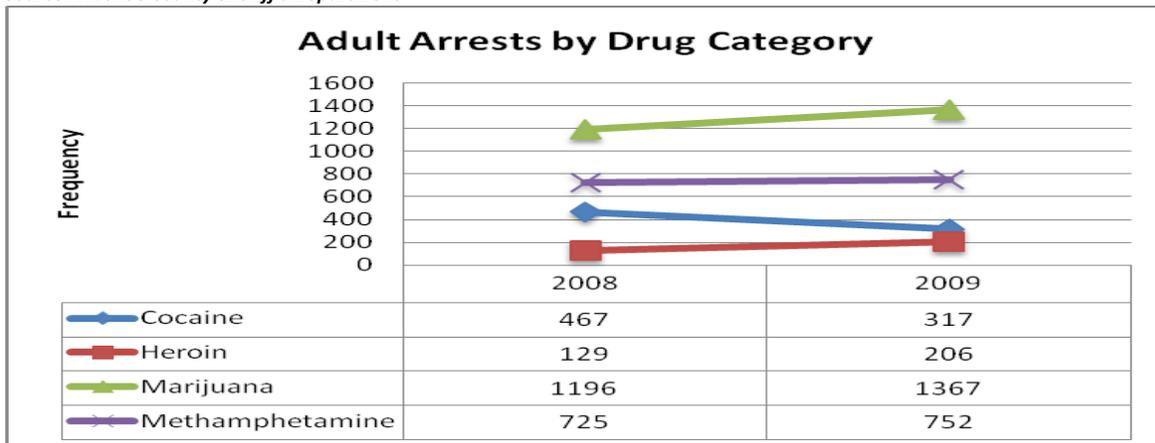
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School Discipline and Law Enforcement

Source: Washoe County School District

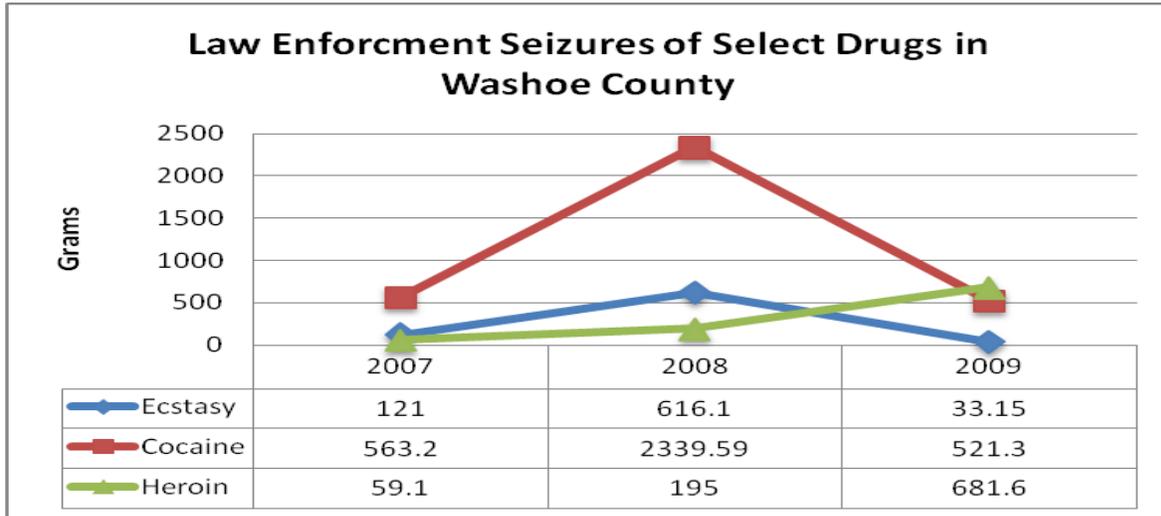


Source: Washoe County Sheriff's Department



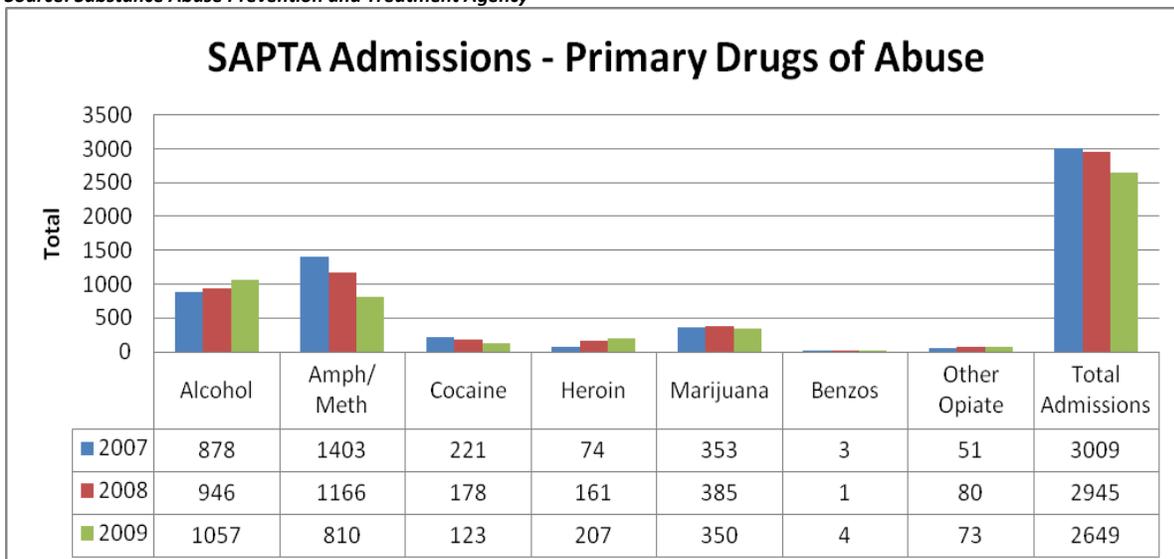
Source: Reno Police Department - Street Enforcement Team

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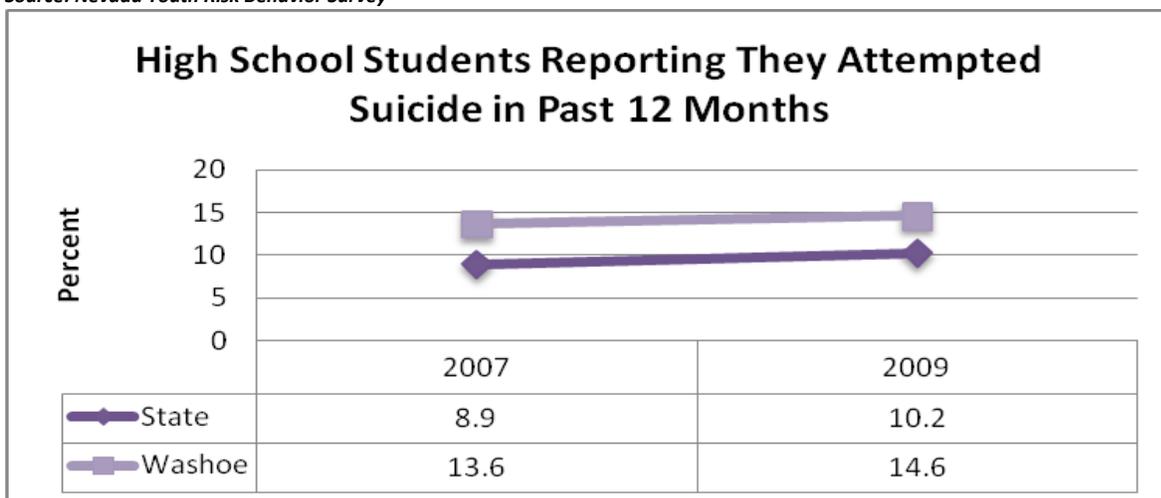
Treatment

Source: Substance Abuse Prevention and Treatment Agency



Suicide

Source: Nevada Youth Risk Behavior Survey

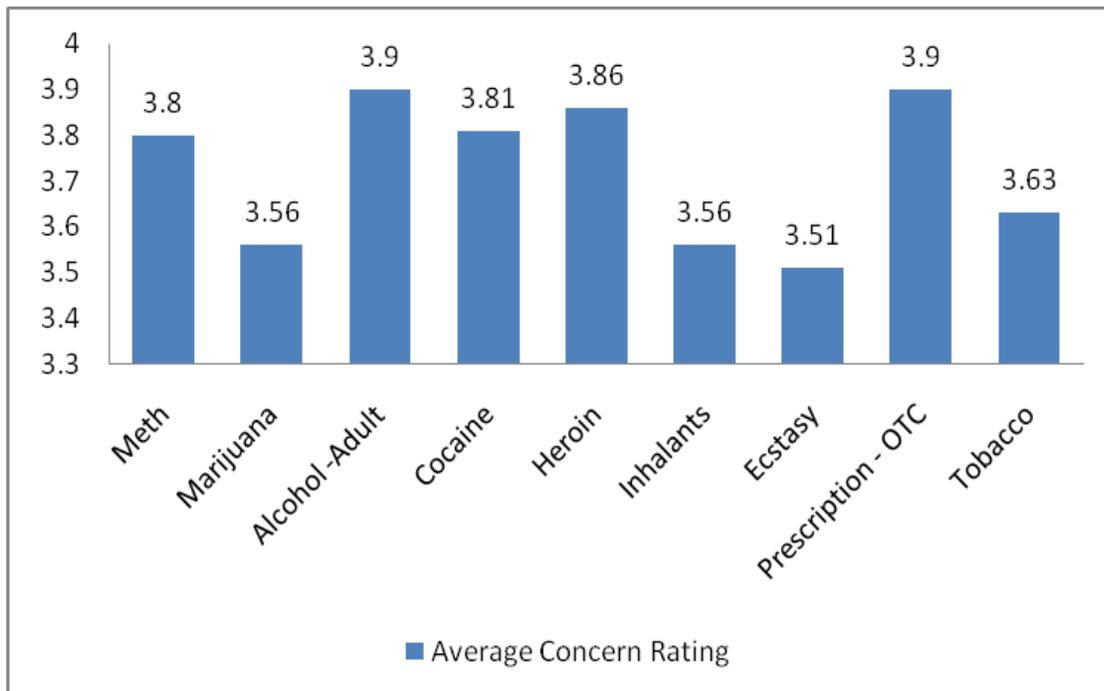


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Substance Abuse Trends to Target

Through the planning survey, coalition and other community members were asked about their concerns regarding a range of local substance abuse trends. Feedback was provided on a 5 point scale that ranged from 1= “not concerned” to 5 = “very concerned”. The following drugs were identified, in order, as being of most concern to survey participants on average.

1. Prescription and OTC drug abuse and adult alcohol abuse shared the highest average concern rating.
2. Heroin
3. Cocaine
4. Methamphetamine



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Survey participants were asked in another way, as well, about their concerns with specific drug categories. They were asked to choose only one drug category that they were most concerned about. The answers to that question reflected similar but not identical concerns as seen from the average concern ratings. Below is the list of the top five drug categories, in order, in terms of the percentage of survey respondents who chose that category as of most concern to them.

| | |
|-----------------------|-------|
| 1. Methamphetamine | 35.2% |
| 2. Prescription / OTC | 14.8% |
| 3. Adult Alcohol Use | 11.3% |
| 4. Heroin | 7% |
| 5. Marijuana | 7% |

When comparing the two questions, we first can see that when people were asked to identify their primary concern, methamphetamine use was at the top of the list, even though the average concern rating about methamphetamine was not the highest. Perhaps a number of people perceived that methamphetamine use has been targeted on a number of prevention fronts in recent years, but the recognition of the devastating effects of methamphetamine use remains high. Cocaine use had a high average concern rating but had a lower percentage of respondents identifying it as their primary concern. Marijuana use, on the other hand, had a lower average concern rating but was one of the top five drug categories when people were asked to identify their primary concern.

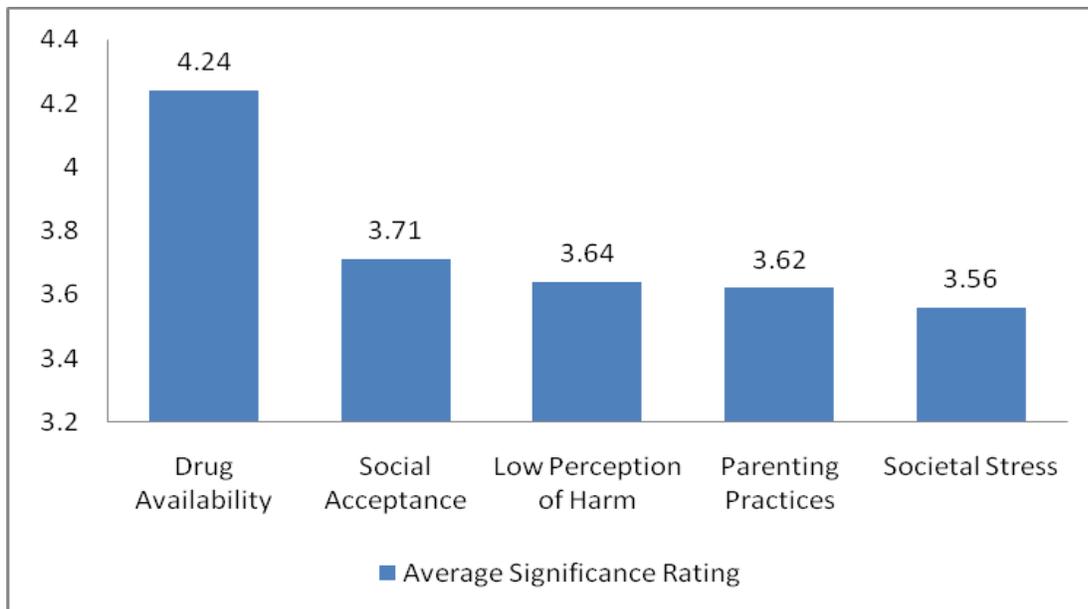
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Variables Perceived as Influencing Local Trends

Survey participants were asked to look at a range of variables that can influence substance abuse trends and reflect on how significant they believed each variable to be in shaping the drug category about which they were most concerned. They were given a five point scale with 1=“not significant” and 5=“very significant”. They were also given the option to state that they were “not sure”. Ideally, we would have asked about the relationship between these variables and each of the drug categories, but we had concerns about the length of the survey. We need to use caution in interpreting the responses to this part of the survey, because people were commenting on different categories of drug trends. As described earlier, more than one third of the respondents identified meth as their primary drug of concern. Clearly, the variables that influence meth use may differ from variables that influence another type of drug use. Nonetheless, the following chart shows the average significance rating given to the five variables that had the highest average significance ratings. The full list of variables is shown below. Those variables seen as highly significant will be explored in our strategy selection section.

How significant do you believe the following factors have been in shaping the trend category about which you are most concerned?

*Media / Advertising.....Social Acceptance of DrugIneffective Legal Consequences
.....Family History of Use.....Parenting PracticesDrug AvailabilityLimited Social Support Networks
.....Low Awareness of Drug’s HarmSocietal Stress / CopingUnemployment / School Dropout
.....Poor Access to Mental Health Services.....Poor Access to Drug Treatment
.....Poor Access to Prevention Services*



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Additional Feedback – Key Informant Interviews

To complement the feedback obtained through the survey that has been described, coalition participants also conducted interviews with key stakeholders from law enforcement, prevention coalitions, treatment / counseling, youth organizations, Attorney- DA's Office, Education, Insurance Agent, Social services, Substance abuse prevention educators, UNR Administration, and JTNN committees. Stakeholders were asked the following questions, the answers to which have been incorporated into our gap analysis and strategy selection sections:

- Are there any other variables / risk factors not listed here you think need to be added to the list? How would you address this variable / risk factor?
- On what strategy / strategies would you target resources (*i.e.*, money, time, collaboration, etc.) to address *availability of substances* in our community, *social norms supporting substance abuse* in our community, *low perception of risk* surrounding substance use in our community, *ineffective parenting practices* related to youth substances abuse in our community, and the impact of *social stress* on substance abuse in our community
- Of the strategies you suggested which one do you think would be most impactful in our community?
- Of the strategies you suggested which one would be most feasible to implement in our community?
- Do you have any additional suggestions / comments?

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Strategy Directions

Each of the variables above has implications for strategic direction. The challenge lies in assigning some weight or priority to particular strategies. In order to identify certain strategies to emphasize with this plan, we reviewed existing resources with an eye towards prevention strategy gaps and requested key stakeholder feedback through JTNN committees. The ideas generated from these activities were then organized in relationship to the following strategy framework that is provided by the Community Anti-Drug Coalitions of America (CADCA).

- **Strategy: Provide Information-** *Educational presentations, workshops, or seminars or other presentations of data*
- **Strategy: Enhance Skills** *Workshops, seminars or other activities designed to increase the skills of participants, members and staff needed to achieve population level outcomes*
- **Strategy: Provide Support-** *Creating opportunities to support people to participate in activities that reduce risk or enhance protection*
- **Strategy: Enhance Access / Reduce Barriers-** *Improving systems and processes to increase the ease, ability and opportunity to utilize those systems and services*
- **Strategy: Change Consequences (Incentives / Disincentives)-** *Increasing or decreasing the probability of a specific behavior that reduces risk or enhances protection by altering the consequences for performing that behavior*
- **Strategy: Physical Design-** *Changing the physical design or structure of the environment to reduce risk or enhance protection*
- **Strategy: Modifying / Changing Policy-** *Formal change in written procedures, by-laws, proclamations, rules or laws with written documentation and/or voting procedures*

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Current Prevention Resources

JTNN interns and staff updated a compilation of local prevention resources in Washoe County. The following table identifies a range of prevention resources implemented in Washoe County. These resources are categorized according to the prevention strategies previously described.

| Strategy Type | <i>Current Programs, Practices, Policies</i> |
|----------------------------|---|
| Provide Information | <ul style="list-style-type: none"> • Planned Parenthood – Comprehensive Sexuality Program • Washoe County Juvenile Services – Basic Skills Program • Washoe County Juvenile Services – Changing Direction Program • Washoe County Juvenile Services – Victim Awareness • JTNN - Website • Nevada Prevention Resource Center • Global Studios - Crystal Darkness Campaign |
| Enhance Skills | <ul style="list-style-type: none"> • CASAT Workshops • JTNN Trainings • Quest Counseling - RBS Trainings • Quest Counseling - Positive Action • UNR - BASICS, ACT |

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| | |
|-------------------------------|--|
| | <ul style="list-style-type: none"> • ACCEPT - Positive Action • Boys and Girls Club - Start Smart • Boys and Girls Club - Smart Kids • Boys and Girls Club - Stay Smart • Children's Cabinet - Parenting Wisely • HAWC - Creating Lasting Family Connections • WCSD - Strengthening Families • WCSD - Parenting Wisely • WCSD - Too Good For Drugs |
| <p>Provide Support</p> | <ul style="list-style-type: none"> • Big Brothers Big Sisters of Northern Nevada - Mentoring • Children's Cabinet - RHYME • Children's Cabinet- Safe Place • Children's Cabinet – Teens Doing Stuff • Reno Police Department - Explorers • YMCA – Before / After School Program • YMCA – Multi-Check • Girl Scouts of the Sierra Nevada - Outreach • Girl Scouts of the Sierra Nevada - Troops • Nevada Hispanic Services - Hispanic Youth Image • UNR – Cooperative Extension - After School Program • UNR - Cooperative Extension - 4H |

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| | |
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| | |
| Enhance Access / Reduce Barriers | <ul style="list-style-type: none"> • Children’s Cabinet – Independent Living • Access to Healthcare Network • Crisis Call Center / 211 • Nevada Hispanic Services - Point of Entry |
| Change Consequences (Incentives / Disincentives) | <ul style="list-style-type: none"> • Washoe County Juvenile Services – Work Program • UNR - Directed Patrols • UNR - Real Campaign • Washoe County School District - NIAA Policy • Washoe County School District - Student Drug Testing |
| Physical Design | <ul style="list-style-type: none"> • Reno Police Department - Community Action Policing |
| Modifying / Changing Policy | <ul style="list-style-type: none"> • City of Reno, Social Host • UNR - Alcohol Policies / Football Games • Washoe County - Drug Endangered Children Protocol Efforts |

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Strategy Gaps and Recommendations

There are strengths to the prevention system in Washoe County, particularly when it comes to educational, skill building, and supportive programs and services. When it comes to gaps, there are some themes to recognize that are highlighted in the following section by each identified variable of influence.

Availability of Drugs

It is important to maintain and expand where possible strategies to reduce the overall availability of drugs in our community. The specific nature of these strategies varies depending on the type of drug in question. Some of the drugs identified in this plan as of concern, namely alcohol and prescription / OTC medications, are legal under specific conditions. Strategies to reduce availability with these drugs revolve around monitoring and enforcement efforts to ensure that they are used in accordance with these specific conditions. Heroin, cocaine, and methamphetamine are illegal drugs, of course, and call upon interdiction and enforcement efforts to reduce street availability. Both the legal and illegal drugs call for strategies that primarily **change consequences and modify / change policies**. A significant strength exists in Washoe County related to how law enforcement collaborates to reduce the availability of street drugs, diversion of prescription drugs, and retail access to alcohol by minors. Reducing the social availability of alcohol and other drugs to minors is more of a challenge. A gap exists in terms of having a standardized approach across Washoe County for dealing with parents and other adults who promote or allow youth access to alcohol and other drugs.

Priority strategies for reducing the availability of drugs in Washoe County include the following:

- Continue efforts to ensure that alcohol vendors in Washoe County are properly trained and are monitored through compliance check operations.
- Encourage parents, grandparents, and other community members to closely monitor and/or lock-up medications that have potential for abuse.
- Promote the adoption and enforcement of social host ordinances in Sparks and Washoe County that include consequences for adults that allow underage drinking parties to occur at their homes and encourage consistently strong enforcement of the existing Reno social host law.
- Support the ongoing training of law enforcement, judicial officials, medical personnel, pharmacists, and social workers related to consistent and emerging substance abuse

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trends, such as prescription drug abuse, and enforcement strategies to reduce availability of these drugs.

- Educate youth, parents, and community members about law enforcement and other resources available that can intervene to stop drug dealing and the unlawful furnishing of alcohol and prescription drugs.
- Promote the availability of random student drug testing.
- Advocate for consistently firm penalties and evidence-based interventions in response to alcohol and drug violations, particularly with first time offenders.
- Identify opportunities to work with local planning initiatives that can change the physical design of areas that are identified as high risk for drug and alcohol trafficking, abuse, and availability.

Social Norms Accepting of Drug Use

It is clear that community norms and the perception of those norms that relate to substance abuse play a strong role in shaping substance abuse consumption trends. Many local youth, for example, perceive that the majority of their peers are using alcohol. Sometimes parents perceive, as well, that most teens use alcohol to some degree. Local surveys, however, consistently show that the majority of middle school and high school teens did not use alcohol in the past 30 days. To some extent, one would expect this misperception to fuel higher rates of teen alcohol use. Strategies to promote healthy social norms **provide information** and leverage the full range of prevention strategies. JTNN has significantly increased its use of social norms media strategies in recent years and continues to look for ways to incorporate additional social media tools to effectively enhance social norms messages to targeted community groups.

Priority strategies for promoting healthy norms related to substance abuse include the following:

- Recruit new partners and strengthen existing partnerships that contribute to social norm campaigns.
- Educate youth, parents, and community members about accurate and healthy norms that help to prevent substance abuse as well as accurate risks associated with substance use /abuse.
- Youth leadership projects, school and community-based, that encourage youth to communicate and promote healthy norms that discourage substance abuse.

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- Assess norms and perceived norms within the casino industry to inform possible social norms campaign partnerships with the casino industry.
- Adapt social norms campaigns to include some focus on marijuana, heroin, and prescription drugs and incorporate the broader range of social media.

Low Awareness of Harm Associated with Drug Use

There is a continual need to promote ongoing community education and **provide information** related to accurate risks associated with substance use / abuse. While this information alone may be insufficient to prevent substance abuse, it is an important building block that complements the broader range of prevention strategies. While in general, there are a great variety of educational programs in our community that educate youth, parents, and the broader community about the risks associated with substance use / abuse, there is a need to maintain consistent communication about risks across age groups and to ensure that those youth and adults most at risk for substance abuse are being reached through community educational programs.

Priority strategies for providing community education about harms associated with drug use include the following:

- Increase opportunities to reinforce educational content about drug use harms continually across student grade levels.
- Involve youth and parents as peer educators to strengthen the frequency and intensity of communication efforts related to harms associated with drug use.
- Integrate information related to drug risks within media campaigns, but be careful to avoid "scare" campaigns and keep information accurate.
- Gather and report on overdose patterns in Washoe County.
- Organize up to date and accurate information related to marijuana risks and blend this information into community awareness campaigns.
- Update information related to alcohol risks that go beyond DUI issues and blend this information into community awareness campaigns.

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Parenting Practices

In many ways, substance abuse prevention begins in the home through the efforts of parents to promote healthy child development. The manner in which parents communicate, model, support, and provide structure for their children as it relates to health promotion and substance abuse prevention are critical prevention components that span the range of prevention strategies highlighted in this plan. There are, of course, many challenges that parents face that can discourage or interfere with providing that optimal level of guidance for their children. These challenges highlight the need for parent education and support strategies that empower parents to fully support prevention objectives. A significant number of parent education programs are available in Washoe County, but gaps exist around methods to ensure access to a larger number of parents and the systemic use of evidence-based programs for parents.

Priority strategies for providing parent education and support include the following:

- Promote accessibility to parent education and support in the workplace
- Foster parent collaboration and networking to promote strong supervision of youth across the community and reduce the social availability of alcohol and other drugs.
- Collaborate with providers of court-ordered parenting classes to promote the use of evidence-based parenting curriculums.
- Involve youth in presenting information to parents related to substance abuse.
- Explore additional methods for integrating parent education concepts into parent materials distributed or presented during transitional periods (i.e. students transitioning into middle school / high school).

Social Stress / Coping Skills

Establishing, supporting, and nurturing social support networks in Washoe County are important endeavors that complement prevention programs that include a stress management skill building component. These structures are particularly important in helping community members deal with stressful situations and can include both structures that are formally managed through community organizations as well as structures informally developed by concerned community members. There are a number of formal and informal support services available in Washoe County, but a gap exists around integrating communication and planning across these services to improve efficiency and effectiveness.

Priority strategies for strengthening social support networks include the following:

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- Promote methods that increase access to positive alternative prevention programs
- Strengthen partnerships with faith community to promote existing support structures
- Support the local “Circles of Support” efforts to decrease poverty related stressors

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Evidence-Based Strategy Selection

An important part of this plan is the process for selecting strategies that address identified needs and gaps in Washoe County. One method for strategy selection is to review programs that have been identified as evidence-based through federal screening programs, such as SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP). The programs listed through NREPP have undergone rigorous screening regarding their evaluation methods and outcomes. The summary information provided for each program allows our coalition to consider whether programs might be a good fit for Washoe County. Brief summaries of several NREPP programs that relate to local needs identified in the plan are included in this section. These summary excerpts are taken straight from the NREPP website and are included only for consideration as possible strategies to implement in Washoe County..

There are often challenges with finding strategies identified through NREPP or similar registries that are strong fits for local needs. Environmental strategies, in particular, present challenges for evaluation. Peer-reviewed journal articles are another source for locating evidence-based strategies that may be a strong fit for Washoe County. A third area that is in a developmental stage involves structuring expert panels that can recognize local strategies as evidence-based. JTNN will collaborate closely with SAPTA and our statewide coalition partners to assist with the development of these expert panel processes. Finally, it is important that we look for innovative, local strategies that fit within our community, even if on a limited, pilot basis.

NREPP Summaries

CASASTART

CASASTART (Striving Together to Achieve Rewarding Tomorrows, formerly known as Children at Risk), is a community-based, school-centered substance abuse and violence prevention program developed by the National Center on Addiction and Substance Abuse at Columbia University (CASA). CASASTART targets youths between 8 and 13 years old who have a minimum of four identified risk factors. Youth participants may remain in the program up to 2 years. Specific program objectives of CASASTART include reducing drug and alcohol use, reducing involvement in drug trafficking, decreasing associations with delinquent peers, improving school performance, and reducing violent offenses.

Coping With Work and Family Stress

Coping With Work and Family Stress is a workplace preventive intervention designed to teach employees 18 years and older how to deal with stressors at work and at home. The model is derived from Pearlin and Schooler's hierarchy of coping mechanisms as well as Bandura's social learning theory.

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The 16 90-minute sessions, typically provided weekly to groups of 15-20 employees, teach effective methods for reducing risk factors (stressors and avoidance coping) and enhancing protective factors (active coping and social support) through behavior modification (e.g., methods to modify or eliminate sources of stress), information sharing (e.g., didactic presentations, group discussions), and skill development (e.g., learning effective communication and problem-solving skills, expanding use of social network).

DARE to be You

DARE to be You (DTBY) is a multilevel prevention program that serves high-risk families with children 2 to 5 years old. Program objectives focus on children's developmental attainments and aspects of parenting that contribute to youth resilience to later substance abuse, including parental self-efficacy, effective child rearing, social support, and problem-solving skills. Families engage in parent-child workshops that focus on developing the parents' sense of competence and satisfaction with the parent role, providing knowledge of appropriate child management strategies, improving parents' and children's relationships with their families and peers, and contributing to child developmental advancement.

Drinker's Check-up

Drinker's Check-up (DCU) is a computer-based brief intervention designed to help problem drinkers reduce their alcohol use and alcohol-related consequences. The program targets individuals along the continuum of problem drinking from hazardous use (e.g., binge-drinking college students) to alcohol dependence (e.g., individuals presenting for specialized alcohol treatment). DCU is based on the principles of brief motivational interviewing and is sensitive to the individual's readiness to change.

Early Risers "Skills for Success"

Early Risers "Skills for Success" is a multicomponent, developmentally focused, competency-enhancement program that targets 6- to 12-year-old elementary school students who are at high risk for early development of conduct problems, including substance use. Early Risers is based on the premise that early, comprehensive, and sustained intervention is necessary to target multiple risk and protective factors. The program uses integrated child-, school-, and family-focused interventions to move high-risk children onto a more adaptive developmental pathway.

Families and Schools Together (FAST)

Families and Schools Together (FAST) is a multifamily group intervention designed to build relationships between families, schools, and communities to increase well-being among elementary school children. The program's objectives are to enhance family functioning, prevent school failure, prevent substance misuse by the children and other family members, and reduce the stress that children and parents experience in daily situations. Participants in the multifamily group work together to enhance protective

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factors for children, including parent-child bonding, parent involvement in schools, parent networks, family communication, parental authority, and social capital, with the aim of reducing the children's anxiety and aggression and increasing their social skills and attention spans.

Guiding Good Choices

Guiding Good Choices (GGC) is a drug use prevention program that provides parents of children in grades 4 through 8 (9 to 14 years old) with the knowledge and skills needed to guide their children through early adolescence. It seeks to strengthen and clarify family expectations for behavior, enhance the conditions that promote bonding within the family, and teach skills that allow children to resist drug use successfully.

Healthy Workplace

Healthy Workplace is a set of substance abuse prevention interventions for the workplace that are designed for workers who are not substance-dependent and still have the power to make choices about their substance use. The five Healthy Workplace interventions--SAY YES! Healthy Choices for Feeling Good, Working People: Decisions About Drinking, the Make the Connection series, Prime Life 2000, and Power Tools--target unsafe drinking, illegal drug use, prescription drug use, and the healthy lifestyle practices of workers. Cast in a health promotion framework and grounded in social-cognitive principles of behavior change, Healthy Workplace interventions integrate substance abuse prevention materials into popular health promotion programs, thereby defusing the stigma of substance abuse and reducing barriers to help-seeking behavior. Intervention materials are designed to raise awareness of the hazards of substance use and the benefits of healthy behaviors and to teach techniques to live healthier lives.

New Beginnings Program

The New Beginnings Program (NBP) is designed for divorced parents who have children between the ages of 3 and 17. The goal of NBP is to promote resilience of children following parental divorce. The NBP consists of 10 weekly group sessions and two individual sessions. The parents learn skills to improve parent-child relationship quality and effectiveness of discipline, reduce exposure to interparental conflict, and decrease barriers to nonresidential parent-child contact.

Nurse-Family Partnership

Nurse-Family Partnership (NFP) is a prenatal and infancy nurse home visitation program that aims to improve the health, well-being, and self-sufficiency of low-income, first-time parents and their children. NFP was founded on concepts of human ecology, self-efficacy, and human attachment. Its program activities are designed to link families with needed health and human services, promote good decision making about personal development, assist families in making healthy choices during pregnancy and

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providing proper care to their children, and help women build supportive relationships with families and friends.

Parenting Through Change

Parenting Through Change (PTC) is a theory-based intervention to prevent internalizing and externalizing conduct behaviors and associated problems and promote healthy child adjustment. Based on the Parent Management Training--Oregon Model (PMTO), PTC provides recently separated single mothers with 14 weekly group sessions to learn effective parenting practices including skill encouragement, limit-setting, problem-solving, monitoring, and positive involvement. PTC also includes strategies to help parents decrease coercive exchanges with their children and use contingent positive reinforcements (e.g., praise, incentives) to promote prosocial behavior.

Project SUCCESS

Project SUCCESS (Schools Using Coordinated Community Efforts to Strengthen Students) is designed to prevent and reduce substance use among students 12 to 18 years of age. The program was originally developed for students attending alternative high schools who are at high risk for substance use and abuse due to poor academic performance, truancy, discipline problems, negative attitudes toward school, and parental substance abuse. In recent years, Project SUCCESS has been used in regular middle and high schools for a broader range of high-risk students.

Real Life Heroes

Real Life Heroes (RLH) is based on cognitive behavioral therapy models for treating posttraumatic stress disorder (PTSD) in school-aged youth. Designed for use in child and family agencies, RLH can be used to treat attachment, loss, and trauma issues resulting from family violence, disasters, severe and chronic neglect, physical and sexual abuse, repeated traumas, and posttraumatic developmental disorder. RLH focuses on rebuilding attachments, building the skills and interpersonal resources needed to reintegrate painful memories, fostering healing, and restoring hope. These goals are accomplished using nonverbal creative arts, narrative interventions, and gradual exposure to help children process their traumatic memories and bolster their adaptive coping strategies.

SPORT

SPORT is a brief, multiple behavior program integrating substance abuse prevention and fitness promotion to help adolescents minimize and avoid substance use while increasing physical activity and other health-promoting habits. It is based on the Behavior-Image Model, which asserts that social and self-images are key motivators for the development of healthy behavior. The intervention promotes the benefits of an active lifestyle with positive images of youth as active and fit, and emphasizes that substance use is counterproductive in achieving positive image and behavior goals.

Team Awareness

Team Awareness is a customizable worksite prevention training program that addresses behavioral risks

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associated with substance abuse among employees, their coworkers, and, indirectly, their families. The training seeks to promote social health and increased communication between workers; improve knowledge about and attitudes toward alcohol- and drug-related protective factors in the workplace, such as company policy and Employee Assistance Programs (EAPs); and increase peer referral behaviors. To achieve these objectives, the training focuses on six components: the importance of substance abuse prevention; team ownership of policy (embracing policy as a useful tool for enhancing safety and well-being for the whole workgroup); stress, including stressors, individual coping styles, and other methods for coping; tolerance and how it can become a risk factor for groups; the importance of appropriate help-seeking and help-giving behavior; and access to resources for preventive counseling or treatment (e.g., EAPs, local community resources, 12-step programs, wellness programs).

TeenScreen

The Columbia University TeenScreen Program identifies middle school- and high school-aged youth in need of mental health services due to risk for suicide and undetected mental illness. The program's main objective is to assist in the early identification of problems that might not otherwise come to the attention of professionals. TeenScreen can be implemented in schools, clinics, doctors' offices, juvenile justice settings, shelters, or any other youth-serving setting. Typically, all youth in the target age group(s) at a setting are invited to participate.

Transtheoretical Model (TTM)-Based Stress Management Program

The Transtheoretical Model (TTM)-Based Stress Management Program targets adults who have not been practicing effective stress management for 6 months or longer. TTM is a theory of behavior change that can be applied to single, multiple, and complex behavioral targets. TTM's premise is that behavior change is a process and that as a person attempts to change a behavior, he or she moves through five stages: precontemplation (not intending to begin in the next 6 months), contemplation (intending to begin in the next 6 months), preparation (intending to begin in the next 30 days), action (practicing the behavior for less than 6 months), and maintenance (practicing the behavior for at least 6 months). This application of TTM to stress management focuses on increased regular relaxation, exercise, and social support activities.

Trauma Affect Regulation: Guide for Education and Therapy (TARGET)

Trauma Affect Regulation: Guide for Education and Therapy (TARGET) is a strengths-based approach to education and therapy for survivors of physical, sexual, psychological, and emotional trauma. TARGET teaches a set of seven skills (summarized by the acronym FREEDOM--Focus, Recognize triggers, Emotion self-check, Evaluate thoughts, Define goals, Options, and Make a contribution) that can be used by trauma survivors to regulate extreme emotion states, manage intrusive trauma memories, promote self-efficacy, and achieve lasting recovery from trauma.

Trauma Recovery and Empowerment Model (TREM)

The Trauma Recovery and Empowerment Model (TREM) is a fully manualized group-based intervention

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designed to facilitate trauma recovery among women with histories of exposure to sexual and physical abuse. Drawing on cognitive restructuring, psychoeducational, and skills-training techniques, the gender-specific 24-29 session group emphasizes the development of coping skills and social support.

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is a psychosocial treatment model designed to treat posttraumatic stress and related emotional and behavioral problems in children and adolescents. Initially developed to address the psychological trauma associated with child sexual abuse, the model has been adapted for use with children who have a wide array of traumatic experiences, including domestic violence, traumatic loss, and the often multiple psychological traumas experienced by children prior to foster care placement.

Triple P--Positive Parenting Program

The Triple P--Positive Parenting Program is a multilevel system or suite of parenting and family support strategies for families with children from birth to age 12, with extensions to families with teenagers ages 13 to 16. Developed for use with families from many cultural groups, Triple P is designed to prevent social, emotional, behavioral, and developmental problems in children by enhancing their parents' knowledge, skills, and confidence. The program, which also can be used for early intervention and treatment, is founded on social learning theory and draws on cognitive, developmental, and public health theories. Triple P has five intervention levels of increasing intensity to meet each family's specific needs. Each level includes and builds upon strategies used at previous levels:

Wellness Outreach at Work

Wellness Outreach at Work provides comprehensive risk reduction services to workplace employees, offering cardiovascular and cancer risk screening and personalized follow-up health coaching that addresses alcohol and tobacco use. Wellness Outreach at Work begins with outreach to all employees through voluntary, worksite-wide health risk screening, including biometric measures of health status, delivered as near to workstations as is practical. The screening directs employees' attention to health issues and to their own health risks and provides baseline information about the health risks of the total workforce. The screening takes approximately 20 minutes per employee and includes immediate feedback on health risks and first steps that might improve them. After the screening, employees are triaged for follow-up based on the number and severity of the health risks identified. Within the context of personalized, one-on-one coaching for cardiovascular health improvement and cancer risk, wellness coaches provide employees with education and counseling on alcohol use, tobacco use, weight control, and health management.

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Summary

A well-planned approach to preventing substance abuse in Washoe County is a challenging endeavor but one that is critical to the effective and efficient use of limited resources. This current plan integrates feedback from a broad range of community stakeholders that was gathered through survey and interview methods. A broad variety of prevention strategy directions are suggested that target the substance abuse influences perceived as strong within Washoe County based on the survey feedback received. These influences are:

1. High availability of drugs

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2. Social norms tolerant or accepting of substance abuse
3. Low perception of harm related to substance use / abuse
4. Parenting practices
5. Social stress

The strategies recommended in this plan are not meant to be overly prescriptive but to offer guidance on directions around which our coalition and partner agencies can mobilize. It is clear that strong prevention efforts include multiple strategies. Also, any prevention initiative should be selected and designed with the specific needs of the target community / population foremost in mind.

Prevention planning efforts should be ongoing and sensitive to the broad range of key stakeholder input available in Washoe County. JTNN is in the process of exploring ways that our committee structures and focus can be modified to include more and stronger voices in the prevention planning process. We are beginning to update our community needs assessment information and will then use that information to commence with our next cycle of prevention planning.