Community Wellness Plan
2010 - 2012

NyE Communities Coalition

Vision

H.O.P.E.

Healthy Organizations, People and Environments

Mission

To join organizations, agencies, & individuals

in a coordinated & cooperative effort for the provision of

services & opportunities in Nye, Esmeralda and Lincoln counties.

Service Area

NyE Communities Coalition (NyECC) serves the rural frontier communities in Nye, Esmeralda and Lincoln counties. This huge service area sweeps across over 24,000 square miles of desert in Central and Southern Nevada and includes landmarks such as the Nevada Test Site and a small part of Death Valley National Park.

Membership

Membership in NyE Communities Coalition is open to all individuals, businesses and community agencies residing in Nye, Esmeralda and Lincoln counties. Individuals must reside within these geographic boundaries or be employed by an agency that serves a community within these boundaries.

History

NyECC began in December 2000 as the advisory group to the 21st Century Community Learning Center SAFE Schools and the NCSD Safe & Drug-Free Schools. In 2002, NyECC incorporated as a non-profit and was soon after accredited by the Nevada Substance Abuse Prevention and Treatment Agency as a prevention coalition. Additionally, NyECC currently maintains United Way accreditation and receives funding from several local, state, and federal sources for a variety of healthy community initiatives.

Seven Dimensions of Wellness

Wellness is more than just our physical health. It should be the integration of all aspects of a person's physical, mental and spiritual health. The seven dimensions of wellness include social, emotional, spiritual, environmental, occupational, intellectual and physical. All interact to contribute to wellness and quality of life.

Social Wellness is the ability to relate to and connect with other people.

Emotional Wellness is the ability to understand ourselves and cope with the challenges of life.

Spiritual Wellness is establishing peace and harmony in one's life.

Environmental Wellness being able to recognize our own responsibility for the air, water and land that surrounds us, and understanding the importance of a healthy environment.

Occupational Wellness is the ability to get personal fulfillment from our jobs or our careers while maintaining balance.

Intellectual Wellness being able to open our minds to new ideas and experiences and having the desire to learn new concepts, improve skills and seek healthy challenges.

Physical Wellness includes maintaining a healthy quality of life, the ability to recognize that our behaviors impact our wellness and adopting healthful habits and avoiding destructive habits such as substance use and abuse.

Financial Wellness is having an understanding of your financial situation and taking care of it in such a way that you are prepared for financial changes.

NyECC uses issue specific analysis tools to address each Dimension of Wellness.

NyE Communities Coalition Community Alcohol, Tobacco and Other Drug Prevention Plan

NyE Communities Coalition utilizes the Substance Abuse & Mental Health Services Administration's Strategic Prevention Framework as the tool to gain an understanding of the communities' alcohol, tobacco and other drug use/abuse issues, to develop a plan to address the priorities, and to implement and assess the actions for effectiveness.

<u>Step 1. Assessment</u>

Analysis: Consumption & Consequence Data

In 2005 NyE Communities Coalition (NyECC) established an Evaluation Committee currently the Assessment, Planning and Evaluation (APE) Committee that consists of coalition members and staff. This committee received extensive training from the Center for Program Evaluation at the University of Nevada, Reno and from the Community Anti-Drug Coalitions of America (CADCA). This committee uses the Strategic Prevention Framework (SPF) for its process, committee members have been trained on the SPF process and follow it throughout the year.

NyECC's data shows that there are several factors that contribute to the communities' substance use problems. The larger unincorporated town of Pahrump is an immature town that has in the previous eight years gone through a huge growth spurt that at times surpassed Las Vegas's growth rate. The infrastructure and formalization of the town has been and continues to be an issue. Due in part to the rural atmosphere and the quick growth, the communities of Nye and Esmeralda counties, like all other rural counties of Nevada, are exempted from a state requirement that servers of alcohol attend training to avoid underage sales among other issues. Data from compliance checks have shown that the usual trend this last year has been that about 50% of the establishments sell to minors. This is down from the baseline data the coalition collected in 2004, when 80% sold to the decoy.

The economy and poverty contribute to the use of substances. Nye and Esmeralda have been hit hard with the economic downturn and have few resources for its citizens. The US Bureau of Labor has Nye County's unemployment rate at 18.4%. Welfare and other social service organizations are reporting that there are many newly impoverished families that have never had economic difficulties before. Additionally, one of every 67 homes is in foreclosure according to Realtytrac, placing Nye County in the High category. All this contributes to Nye County's stress index of 22.9% one of the highest in the nation.

Consequently, children begin their own use quite early. Although there is no direct documentation of elementary school use, over 29.6% of High School students report having begun to use alcohol before they were 13 years old.[1]

In Middle School, alcohol use increases swiftly. Students document beginning to use marijuana and tobacco in Middle School.[2] According to local youth, persistent myths surround marijuana experimentation, such as the idea that marijuana is safer to use than tobacco, safe because it's natural, or that everyone is doing it.

High School/Middle School Trend Data: 2001 - 2009 YRBS

NyE Summary of Indicators - Sources: 2001, 2003, 2005, 2007 2009 Nevada State Youth Risk Behavior Survey and NCC Additional GPRA Survey

Response	***2001 Baseline***	***2003***	***2005***	***2007***	***2009***
HS First Use < Age 13 Alcohol	31.3	38.2	36.0	32.7	30.0
HS First Use < Age 13 Cigarettes	23.1	31.3	23.1	18.4	18.2
HS First Use < Age 13 Marijuana	32.5	18.7	15.0	12.1	9.3
HS 30 Day Use:					
Alcohol - Any Use	45.8	52.0	41.3	49.0	43.0
Alcohol DUI-Any Use	12.0	16.2	10.3	13.1	11.3
Cigarettes- Any Use	31.0	23.3	20.4	23.8	27.3
Chewing Tobacco-Any Use	7.2	6.3	5.1	6.5	9.1
Marijuana- Any Use	25.6	25.8	17.7	19.0	18.9
Binge Drinking- Any Use	32.3	38.0	28.5	34.0	30.1
Cocaine-Any Use	4.5	6.7	6.2	5.8	NA
Inhalants-Any Use	3.8	7.3	4.1	10.4	NA
HS Past 12 Months:	***2001 Baseline***	***2003***	***2005***	***2007***	***2009***
Offered Illegal Drugs at School	30.7	34.9	29.1	29.2	31.0
HS Lifetime Use:					
Alcohol - Any Use	81.2	82.3	78.4	77.3	73.0
Cigarettes- Any Use	71.8	66.4	59.8	56.1	58.1
Marijuana- Any Use	48.1	52.0	37.6	40.5	37.9
Methamphetamine-Any Use	15.3	17.1	14.4	9.5	5.9
Cocaine- Any Use	9.7	16.3	11.3	11.0	7.7
Inhalants-Any Use	16.9	19.6	19.0	17.7	14.6
Herion-Any Use	13.1	15.5	13.9	12.6	NA
Steroids-Any Use	5.8	7.3	5.4	6.1	5.7
Over-The-Counter-Any Use	17.8	20.7	15.7	18.8	16.7
Of Needle to Inject Illegal Drugs	2.1	3.4	3.6	3.8	3.4

[1] Source: 2009 YRBS. While there may be some interpretive issues with this question, meaning how youth understand a drink other than a few sips, this number is consistent among High School students.

MS First Use < Age 13:					
Alcohol-Any Use	55.8	42.9	34.5	35.3	34.7
Cigarettes- Any Use	31.0	23.0	17.7	14.7	15.9
Marijuana-Any Use	15.0	11.6	7.2	7.8	10.7
MS 30 Day Use:					
Alcohol- Any Use	NA	NA	NA	NA	NA
Binge Drinking	18.3	16.7	13.2	NA	NA
Cigarettes-Any Use	19.7	13.2	9.4	11.3	12.6
Chewing Tobacco-Any Use	4.6	5.9	3.7	4.5	.5
Cigars-Any Use	NA	NA	NA	6.1	3.8
Marijuana-Any Use	8.5	8.9	4.8	NA	NA
MS Past 12 Month:					
Offered Illegal Drugs at School	15.7	13.7	14.9	NA	NA
MS Lifetime Use:					
Cigarettes- Any Use	32.2	40.2	33.7	32.4	27.4
Alcohol- Any Use	64.3	56.4	49.2	42.2	39.4
Marijuana-Any Use	18.3	14.8	10.3	11.6	12.5
Methamphetamine-Any Use	4.7	6.9	3.6	3.2	1.4
Cocaine- Any Use	4.6	6.4	3.1	4.9	3.7
Inhalants- Any Use	14.5	12.1	11.9	15.6	14.1
Over The Counter Drugs- Any Use	7.3	7.3	2.5	5.4	4.2
Steroids-Any Use	NA	3.6	1.4		

Admittedly, the tie between emotional difficulties and substance abuse are a chicken and the egg question, with no easy answer for which came first, but the relationship is well established. *See SAMHSA News Release, "Study Finds Link Between Depression and First Use of Drugs or Alcohol." Published on the internet, 5/3/3007 at www.samhsa.gov/newroom/advirsories*.

NyE youth and adults often lack sufficient access to emotional and mental health services.

Analysis: Gaps and Resources

Information, insight and understanding provided by the following coalition committee members, community professionals, and coalition staff:

Marlene Richter	Committee Chair	Director of The Shade Tree
Dale Norton	Nye County School District	Assistant Superintendent for Character Education
Dorothy Ryans	Coalition Vice President	RN
Tom Metscher	Coalition President	Chief Juvenile Probation Officer
Jack Hennigan	SCORPION Detective	Nye County Sheriff's Office
Tammi Odegard	Drug Court Coordinator	5th Judicial Court

Corozon Albon	Rural Mental Health	RN
Loyd Platson	Community Education Coord.	NyE Communities Coalition
Mary Baldasano	Coalition Member	Community Volunteer
Kevin Morss	Outreach Director	Westcare
Pam Petersen	Nye County School District	RN
Richard Marshall	Assistant Sheriff	Nye County Sheriff's Office
Stacy Smith	Director / LADC	NyE Communities Coalition
Nichole Greb	Student	Pathways
Laura Oslund	Coalition Coordinator	NyE Communities Coalition
Shelly Heppler	Director	Nathan Adelson Hospice
Paula Cooper	Administrative Services	Nye County Sheriff's Office
Jacob Boggs	Student	Pathways
Francie Winters	Prevention Coordinator	WestCare
Joanna Darrow	Data Coordinator	NyE Communities Coalition
Pat Rios	Truancy Officer	Nye County Juvenile Probation
Linda Reed	Secretary to Dale Norton	Nye County School District
Tonya Wolf	Prevention Analyst	NV SAPTA
Lisa Cantrell	Administrative Assistant	NyE Communities Coalition

NyE Communities Coalition determined the need to assess the communities served by the coalition regarding current trends and impacts of alcohol, tobacco and other drugs. Representatives of different sectors in the community were invited to share their data and knowledge with members of the Substances of Abuse Task Force via panel discussions. Participants were asked to cover the following areas:

- What trends are you / your agency seeing with drug use among adults?.among youth?
- What is the impact of the use upon the individual, family, community?
- What data / information do you collect or have that provides an understanding of the problems?
- What data / information would you like to know?

The first panel was held in Pahrump at the Southern District of the Nye County School District with videoconferencing to the Tonopah District Office on January 12, 2009 and the second was held on March 23, 2009.

Law Enforcement representatives shared the following:

- The age range for those being arrested for methamphetamine use is an aging population. NCSO typically arrests those ages 30 – 55years old for possession and use of methamphetamine. Youth are not viewing methamphetamine as their generation's substance.
- A new trend is the buying or renting of homes and growing marijuana such as the case when over 2000 plants were recently seized out of rental home.
- NCSO notes generational use of marijuana where it is an ingrained and accepted familial behavior.
- NCSO reports that RX drug use is currently a huge issue. The arrests reflect "Doc shopping" – where there are numerous RX for same substance.

- There have been observances of children raised in drug infested homes where the child reverts back to an almost animalistic / survival behavior.
- When there are drugs available in the community via a major dealer then there are more burglaries and robberies and more car accidents in the community.
- There is some limited use of heroin, but not significant.
- The precursor control of methamphetamine has been very effective and has made an impact – as a result most of the undercover buys have been methamphetamine brought in via Mexico.
- The arrests they make are mostly repeat offenders with escalating charges.
- NCSO notes an incident where a drug user sent an 8 year old to make the buy and they attempted to use a child's urine for a drug test.
- With RX's Oxycontin is referred to as 'hillbilly heroin'
- Almost every other drug charge / alcohol charge and other charges now have the common thread of also having RX issues.
- NCSO further noted they expect to have issues because of the statewide and national cuts and the limited vision and foresight of some.
- Usually 1-2 methamphetamine labs per year vs. 14+ in a year.
- 85-90% of burglaries are associated with Alcohol or other drug abuse / use.

Drug Court Representatives shared:

- Many grandparents are raising grandkids due to parent's involvement with drugs.
- Almost all Drug Court participants are there because of methamphetamine – with their priority of use being – methamphetamine, alcohol, and marijuana.
- It takes about 2-3 years for someone to be a drug court participant due to legal processes, so there is a delayed reflection of the community.
- Effects of use of drugs / alcohol include public impairment and all the potential harm from that.
- As a result of drug court there were 13 babies born drug free since 2002.
- Drug Court would like to know if their participants are using after graduation.
- Salvia is a legal drug that participants are reporting that they use – no test to determine use, product has hallucinogenic qualities.
- There are currently 33 participants and they have had as many as 50. Most are in 30-40's but they range from 18 to 60 years old.
- Juvenile Drug Court has 7 kids
- Current Drug Court volunteers (not court referred) are identifying as RX abusers.

Hospice Representatives shared:

- They have patients on high doses of morphine and other RX drugs. Patients are typically in late stages of life and abuse is not really an issue.
- They have policies to prevent diversion of the drugs.
- Typically the caregiver is younger and they will have control of drug so there is a potential for misuse.
- Hospice has installed lockboxes to protect medication in some instances.
- Hospice drug tests employees.

Juvenile Probation shared:

- Drug use is on a pendulum and currently here RX is highly abused among youth.
- Behavior disorders and prescribed medications open the door to abuse and shared RX.

- Youth find RX's easily available in their homes, their friends and neighbors homes.
- Seeing RX use at schools.
- In the past year 6+ youth had stomachs pumped due to RX use. They don't know what they are taking and they have a reaction.
- RX seems safe as they are FDA approved.
- Results of RX abuse on community are the same as any drugs that are being abused.
- Marijuana and alcohol are the most commonly abused substances. Methamphetamine not used in any significant amounts.
- Much of their drug data is lumped together making it hard to determine specific substance use.
- More males 2/3 are being arrested substance abuse than females.
- Strong correlation between truancy and use.
- Youth are having "pharm" parties – seeing use of loratab, ADHD meds, painkillers, oxycodone.
- A single dose of Oxycontin can cost as much as $85.
- RX's are plentiful and easily accessed.
- RX is very popular at schools and parties.
- May not been seen as dangerous by youth because they are a prescribed medication.
- Effects of RX may not show up for hours after ingesting causing increasing use at one setting.
- 14% of those truant report substance use while truant.

Nye County School District reports:

- Health Nurses do a count in and out of RX drugs.
- Sixty to 70% of the possessions of ATOD violations that go to hearings are youth that are NOT with their birth parent.
- They have not seen any methamphetamine cases in the last 4 years.
- The hotline for truancy and truancy sweeps are revealing that when youth are truant they are usually using alcohol, tobacco, or other drugs.
- Dealing with ATOD issues uses school district personnel time and significantly impacts the education of the youth because of the substance use and their time away from school.
- Fewer adults that are around youth impact their behavior so all the cuts limit the number of adults that interact with youth.
- Sees more 9th graders for ATOD than any other grade.
- Majority of hearings are males.
- To get to the hearing level this must be the 2nd incident of marijuana use/ possession.
- Students can attend intervention and get suspension decreased.
- Since SRO's are at schools – everything has dropped significantly – except harassment.
- Having SRO's, truancy and other resources at school is key.

Rural Mental Health shared the following:

- There is a high rate of dual diagnosis clients at mental health.
- RX abuse is a trend among clientele.

- Some adults and elderly are using their RX meds as a means of income.
- Has noticed increased heroin use among clientele.
- There is some crushing of Oxycontin for injection.
- Has noticed an increase in patients reporting lost meds to obtain more Seroquel and Abilify – antipsychotics.
- Teens are afraid to stop using RX because of withdrawal symptoms.
- Mental health collects diagnostic data on about 200 clients. 50% are dual diagnosis.
- There is an increase in teens accessing mental health care.
- Rural mental health has access to data via the Pharm Net system.
- Some are using alcohol as a chaser with RX's.
- Some highly abused RX's are only $3.00 for a 30 day supply.

Treatment providers report:

- As of March 18 for the past year there have been 145 clients in treatment for addiction in the Pahrump Office. 96 males, 49 females and 81% have been over the age of 18.
- The average client that is 36-49 years old is using meth more than alcohol.
- Younger adults 19 to 24 are using alcohol and marijuana more.
- 24 of the current 27 youth in treatment have alcohol and marijuana as their primary drugs of choice.
- Drugs of choice: 21% - meth; 34% alcohol; 36% marijuana; 19% RX.
- 90% of the referrals come from court.
- All information is self-reported so it may be skewed by the clients understanding of drug abuse to reflect their perception of RX vs. illicit drugs.
- Drug abuse affects employability and family (conflict and isolation).
- Has some data that collects route of administration, age 1st use and how often using.

Initial ideas and suggestions included:

- Creation of a sign for homeowners / seniors that states they destroyed their RX so they can post it in their windows
- NSCO would like to receive information from Hospice on diversion of drugs issues.
- JPO would like to have a better system for data management – meaning more money- personnel and technology.
- A way to share information between treatment and the school district
- Family Court + School District may equal a new team to address extreme cases
- Mentoring program like big brother and big sisters
- Physicians and their patients need to be educated about RX abuse.
- Mental health can start tracking how many MD's their clients are seeing.
- This community needs more resources for teen's mental health.
- Westcare ROI could include the school district and this would improve collaboration.
- This community needs inpatient care and a detox center.
- We need more data on how ATOD abuse / addiction is impacting the whole family.
- Mental Health and other providers need to know what resources are available.

- Nye County School District could benefit from a data reporting system to track ATOD issues.
- Parents need education and how to take responsibility for the RX.

Resources available in the community:

Even with all of the problems and struggles that these communities face there are many resources available. One of the primary resources is the people in the community. They care about other community members and are willing to help even if they lack resources themselves.
Adult coalition members devote their time and effort to understanding, examining, and addressing the needs in the communities, youth organization members represent and are part of many organizations and clubs and volunteer their time to educate the community, present information and liaison with other organizations. Nye County Sheriff's Office (NCSO) provides deputies for a variety of activities in regards to the needs of the community and goals of the coalition, including prescription drug roundups and compliance checks, Nye County School District (NCSD) allows coalition staff and members to present to various ancillary groups. NCSD also provides access to students, parents and staff in assemblies, classrooms, open houses and parent/teacher meetings. Local churches provide access to their members, meeting space, and refreshments for planned activities. Pharmacies, medical doctors, mental health services and medical facilities allow space for distribution of information. Various agencies provide prevention programs that other agencies and organizations share access to. Local television and radio stations support and promote coalition activities. Local businesses and the Chamber of Commerce support the coalition's efforts and especially the Drug Prevention and Awareness week. Local elected officials including Town Board members and County Commissioner's support coalition efforts by serving as liaisons, sponsoring agenda items and speaking on behalf of the coalition's efforts.

Analysis: Community Infrastructure

Limited infrastructure and technology negatively impact the fragmentation of the communities. In Pahrump, the extreme growth creates an arena of inadequate infrastructure as community resources cannot keep up with community growth. Many of the other communities are mining communities and instability of the mining industry does not lend itself to long-term visions of a community.

Community readiness is especially impacted in the rural communities for both political and personal reasons. Community members have a difficult time looking at and addressing problems because of personal involvement of themselves or people they may know. Within smaller communities the lives of the community members tend to be more enmeshed, as an individual will be known and serve in multiple roles. Plus, the smaller the community the more people will know about them – not necessarily all factual information but also rumor and misinformation. This makes community engagement and community readiness a multi layered process as old perceptions, beliefs and judgments enter into the relationships and collaborations.

The APE Committee's suggestions include:

- Increase data collection capacity within the coalition and within partners;
- Work with businesses on Policies and Procedures and Workplace Interventions;
- Reach adults and youth at a community-wide level through community education and social marketing;
- Integrate an understanding of inter-generational issues into services;
- Increase the cultural awareness and competency of coalition staff and partners.

Capacity

NyE Communities Coalition (NYECC) is a community coalition serving Nye and Esmeralda communities including Tonopah, Gabbs, Duckwater, Fishlake Valley, Goldfield, Beatty, Amargosa, and Pahrump. There are currently 64 active members of the coalition spread across Nye and Esmeralda Counties. NYECC averaged over 1,600 hours of community service / volunteerism for coalition building activities over the last year. Based on the state rate of volunteerism this converts to over $25,000 worth of effort done by coalition members and community members for coalition specific activities, which does not include the collaborative activities of coalition partnerships.

NyE Communities Coalition has made a concerted effort to ensure that there is representation across all sectors - race, ethnicity, gender, age, geographic location and role in community. To this end, the Hispanic advocate has been funded through NyE Communities Coalition sources and has provided translation, interpretation, and cultural inclusion information and services for the coalition and member agencies to address the growing Hispanic communities' needs and involvement with the coalition.

NyECC has a strong working relationship with programs and agencies that work with children including No To Abuse, which operates Family to Family; and Nye County School District which works with Hispanic parents of young children. One of NYECC's strengths is in providing information and accredited local trainings to service providers.

Youth are engaged and involved in meaningful activities with the coalition including the youth led Kick Butts Day and youth developed positive marketing messages.

Additionally, representation from across the communities of NyE has been engaged. On three occasions per year, NyECC has Tri-annuals or NyECC³ meetings. These meeting are held in varying spots across the counties. This allows for and recruits individuals in that community to be engaged and involved with the coalition.

Of all of the successes in the last couple of years, the one that continues to have the strongest potential for future benefits to the communities has been the development and nurturing of relationships among individuals, agencies, and organizations throughout the three counties.

Planning

The Planning Process

As previously noted NyE Communities Coalition formed an evaluation committee in July, 2005 now known as the Assessment, Planning and Evaluation Committee. This committee has taken on the responsibility of leading the coalition forward in the development of the overriding strategies of the coalition, along with prioritizing the risk and protective factors and determining the path of the future plans for the coalition. The evaluation committee is composed of volunteers from the membership and has included youth volunteers. The committee has ensured that the membership as a whole has been kept informed and engaged in the process through presentations and reports. The Committee and staff jointly developed goals which would be feasible and build on the strengths and relationships the coalition already has, thus generating more forward momentum.

Theory of Change in NyE

Young Children & Infants:

Priorities	Data Indicators	Risk & Protective Factors	Activities
Babies & Young children are exposed to drugs & alcohol, causing health & social problems.	DCFS Narratives, Low Birth weights, Infant Mortality	**RISK FACTORS** **Community Domain** COM05 – Transitions and Mobility COM06 – Low Neighborhood Attachment & Community Disorganization **Family Domain** FAM01-Family History of Problem Behavior FAM02-Family Management Problems FAM04-Favorable Parental Attitudes & Involvement in the Problem Behavior **PROTECTIVE FACTORS** TPR01-Strong Bonds with Family TPR02-Experiencing/parental monitoring with clear rules of conduct with the family unit and involved parents in lives of their children. TPR04-Strong Bonds with pro-social institutions such as the family, school, and religious organizations	Trainings, Presentations to Parents, Community Leaders, Family & Youth Workers. Direct Programing to Parents

Elementary School

Priorities	Data Indicators	Risk & Protective Factors	Activities
Children continue to be exposed to drugs & alcohol. Children are beginning to drink in Elementary School	Age of Initiation to Alcohol as reported by Middle School & High School students.	**Risk Factors** **Family Domain** FAM01-Family History of Problem Behavior FAM04-Favorable Parental Attitudes & Involvement in the Problem Behavior **School Domain** SCH01-Academic Failure Beginning in Late Elementary School **Individual/Peer Domain** IND03-Friends Who Engage in the Problem Behavior IND05-Favorable Attitudes toward the Problem Behavior IND06- Early Initiation of the Problem Behavior **PROTECTIVE FACTORS** TPR02-Experinencing/Parental monitoring with clear rules of conduct with the family unit and involved parents in lives of their children TPR03-Success in school performance TPR04-Strong bonds with pro-social institutions such as the family, school and religious organizations TPR05-Adoption of conventional norms about drug use	Direct programming to youth. Parenting Classes. Community Marketing Surveys to Reduce Marketing to Youth. Trainings to Community Leaders, Family & Youth Workers

Middle School Youth

Priorities	Data Indicators	Risk & Protective Factors	Activities
NyE Children in Middle School are binge drinking & beginning to use marijuana	30 Day Use Binge Drinking, Age of Initiation to Marijuana, School Alcohol Related Incidents. Data from SATF and APE Committee	**RISK FACTORS** **Community Domain** COM1-Availability of Drugs **Family Domain** FAM01-Family History of Problem Behavior FAM02-Family Management Problems FAM04-Favorable Parental Attitudes & Involvement in the Problem Behavior **Individual/Peer Domain** IND02-Rebelliousness IND03-Friends Who Engage in the Problem Behavior IND05-Favorable Attitudes toward the Problem Behavior IND06-Early Initiation of the Problem Behavior **PROTECTIVE FACTORS** TPR02-Experiencing/parental monitoring with clear rules of conduct with the family unity and	Parenting Classes & family prevention services. Direct programming to youth. Grant writing, partnering, & trainings. Trainings to Community Leaders, Family & Youth Workers Community Alcohol Law Enforcement. & Marketing Surveys.

		involved parents in lives of their children TPR04-Strong Bonds with pro-social institutions such as the family, school, and religious organizations TPR05-Adoption of conventional norms about drug use TPR06-Skill Building TPR13-Positive Values	

High School Age

Priorities	Data Indicators	Risk & Protective Factors	Activities
NyE High School students & young adults continue to binge drink & are using prescription and other drugs.	30 Day Use Rates, Lifetime Use Rates, Juvenile Justice & School Incidents. Community narratives. YRBS self-reports of driving under the influence or riding with someone who has. YRBS self-reports of ATOD use before sex. Data from SATF and APE Committee	**RISK FACTORS** **Community Domain** COM01-Availability of Drugs COM03-Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime COM06-Low Neighborhood Attachment & Community Disorganization **Family Domain** FAM01-Family History of Problem Behavior FAM02-Family Management Problems FAM04-Favorable Parental Attitudes & Involvement in the Problem Behavior **School Domain** SCH02-Lack of Commitment to School **Individual Domain** IND02-Rebelliousness IND03-Friends Who Engage in the Problem Behavior IND05-Favorable Attitudes Toward the Problem Behavior **PROTECTIVE FACTORS** TPR02-Experiencing/parental monitoring with clear rules of conduct with the family unity and involved parents in lives of their children TPR03-Success in school performance TPR04-Stong bonds with pro-social institutions such as the family, school, and religious organizations TPR05-Adoption of conventional norms about drug use TPR13-Positive Values TPR15-Positive Identity	Compliance checks of retail outlets & server trainings. Direct Programming to Youth. Event specific activities including life events such as new driver's licensing, prom, or graduation, to raise awareness. Information dissemination, partnering with other agencies, & training. Support, information dissemination regarding educational attainment

Adults

Priorities	Data Indicators	Risk & Protective Factors	Activities
NyE Adults drink heavily, use prescription drugs, meth-amphetamines & marijuana.	Adult Arrests, Incarcerations, Highly publicized DUI fatalities Treatment Admissions Employer Narratives Public Behavior at Events Unemployment & Welfare Rates. Information from SATF and APE Committee work	**RISK FACTORS** **Community Domain** COM01-Availability of Drugs COM03-Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime COM06-Low Neighborhood Attachment & Community Disorganization **Family Domain** FAM01-Family History of Problem Behavior FAM02-Family Management Problems FAM04-Favorable Parental Attitudes & Involvement in the Problem Behaviors **Individual/Peer Domain** IND01-Early and Persistent Antisocial Behavior IND03-Friends Who Engage in the Problem Behavior IND05-Favorable Attitudes Toward the Problem Behavior **PROTECTIVE FACTORS** Trp04-Strong bonds with pro-social institutions such as the family, school, and religious organizations TRP05-Adopition of conventional norms about drug use TRP07-Problem solving TRP10-Boundaries and Expectations TRP13-Positive Values	Trainings & Presentations to community leaders, businesses Assistance to businesses. Workplace prevention programming. Provide support to increase services & access through grant writing, partnering, & training. Parenting classes. Information dissemination

Implementation

NyECC uses the Seven Approaches to Achieve Community Change, as defined in the Implementation Primer provided by CADCA, to maximize the efforts of the coalition. These approaches include:

Providing Information - educational presentations, seminars, trainings, PSAs, brochures, community meetings, and social marketing.

Enhancing Skills – workshops, seminars, activities designed to increase the skills of participants, trainings and technical assistance.

Providing Support – creating opportunities to support people in participating in activities, providing alternative healthy/substance free activities, mentoring, referrals.

Enhancing Access/Reducing Barriers – improving systems and processes within the communities we live in, increase the ease, ability and opportunity to utilize those systems and services.

Changing Consequences – increasing or decreasing the probability of a specific behavior that reduces the risk or enhances the protection by increasing public recognition and rewards for positive choices and increasing taxes, citations, fines, revocations/loss of privileges for negative choices.

Physical Design – changing the physical design or structure of the environment to reduce risk or enhance protection.

Modifying/Changing Policy – formal change in written procedures, by-laws, proclamations, rules or laws which include workplace initiatives, law enforcement procedures and practices, public policy, systems change within government, communities and organizations.

Each of the projects and programs that NyECC either funds or implements are being monitored and evaluated to determine change regarding the chosen areas.

NyE Communities Coalition also uses the Three Levels of Prevention when deciding appropriate programs and/or projects to implement. The Three Levels of Prevention include *Universal* which address the general population, *Selective* which target specific subgroups that are believed to be at greater risk for substance abuse and other negative behaviors, and *Indicated* which target individuals who exhibit early signs of substance abuse and other problem behaviors.

Additionally, each project has looked at sustaining their efforts in this time of decreasing funding. The coalition as a whole has considered how to maintain the successful efforts. One of the main focuses has been the synergistic effects of the collaboration that has occurred within the coalition. NyECC has worked with coalition partner agencies to incorporate, as much as possible, the activities and the projects so that they are part of the operations of the organization. NyECC also works with the coalition membership to encourage acquiring other funding sources and on identifying potential collaborations that have not been previously considered.

The overriding community norms of community pride, community connectedness and commitment to a healthy lifestyle are evaluated as protective factors for Nye and Esmeralda Counties. High levels of each are a desired quality in a healthy community and the activities and projects of the coalition partners address these norms.

NyECC intends to continue to develop trainings on the impact ATOD has on young children and infants, such as second and third hand smoke exposure, drug-endangered children, children riding with drunk drivers, and fetal alcohol syndrome. Additionally, NyECC will provide information and education to community leaders such as the Faith Based Community to continue to increase awareness of these problems and assist with solutions. NyECC will also continue to support parenting classes which aim to assist parents create a healthy and

nurturing environment for all children. NyECC participates in the Child Death Review Team and will continue to do so.

NyECC's strategies are designed to change the environments which encourage young children drink. NyECC will implement prevention education and information designed to delay the age at which children begin to drink. But, it will assist that effort by educating the first place that children get their alcohol: home. It will also try to change the context of childhood drinking through activities and information campaigns designed to raise awareness and educate community leaders and family and youth workers on the effects of early drinking and drug use on children. Finally, NyECC will continue to conduct environmental strategies such as social marketing by youth to raise awareness and change marketing practices directed at children.

Middle School Students who use often are alienated from school or begin to have academic issues. NyECC's strategies are designed to counteract peer, community and family influences of using ATOD both to solve problems and recreate. This means having families learn better ways to interact; but also counteracting youth myths regarding ATOD, teaching positive coping skills, and providing and supporting alternatives to ATOD recreation.

High School students are moving away from the influence of home life and are experiencing more freedom to interact in the larger community. Major life events often involve greater freedom such as driving a car or having money from a job for the first time, but also come with a greater responsibility to others: such as driving responsibly. Strategies are designed to use the excitement that these new freedoms can generate to help youth make better choices rather than destructive ones. The enforcement of laws, at this point, needs to be universal because of the greater freedom youth may have.

NyE Communities Coalition believes that employers are one of the best sources of change for NyE as they are the nexus between youth in school and adults in the community. We believe that the problems employers experience with workers who use – increased accidents, no shows, excessive sick time, and damage to reputation - are the same problems schools have with youth who use – increased truancy, accidents, grades and skills suffering. Because substance abuse is often intergenerational in character, with consequences reverberating through the community, we believe that to change one you must change the other.

Step 5: Evaluation

Data

NyE Communities Coalition uses three types of data to track the effectiveness of its programs and the concerted efforts to change our community substance abuse problems:

1. Process data:
Process data are outcomes specific to activities and include the number of participants, how often a program met or an activity was held and for how long, and whether any changes were made to the curriculum. This data insures that programs are meeting their objectives by reaching audiences, appropriate saturation, and implementations with fidelity. Collection of this type of data is a first step in successful prevention interventions.

2. Program data:
Program data gauges how well a particular program works by measuring the difference in attitudes and behaviors as a result of exposure to a particular curriculum. It is usually measured by the difference between pre-test and post-test of participants. It provides feedback to the program providers on how well the program is matched to its participants and how well the facilitator delivered the programs. NYECC-funded or sponsored programs usually use program specific evaluation tools (surveys) created by the developer. For example, the impact of Positive Action, a model program, would be measured using the developer's tool.

3. Community Data:
This is the 'hard' data that measures not so much the impact of individual programs but the aggregate impact of coalition work through a variety of strategies. Intervening variables should be the first to change as a result of a successful program of community change, with lasting change eventually moving community indicators. Examples of this type of data are survey data and indicator data – Juvenile Justice Referrals, DUI arrests, Alcohol related alcohol fatalities, and so forth. It also includes survey data such as the Youth Risk Behavior Survey (YRBS).

With all projects NyECC evaluates against baseline data beforehand. Often, such as with YRBS survey data, NyECC can assess the prevailing trend over several years of data. Of course, these are complicated pictures with multiple factors at play, such as the impact of previous coalition work. NyECC's APE Committee continually works on gathering and accessing data gathered from many sources and provides feedback to the coalition regarding progress and effects of programs that are implemented.

Confidentiality & Informed Consent

NyE Communities Coalition is deeply protective of its integrity within the community because there must be trust in the agency in order to give accurate information. Trust is earned and requires that confidences be maintained and purposes disclosed above the level that the law requires. NyECC is committed, in the first place, to not collecting personally identifiable health information when there is no need and suppressing identifiers when the collection of personally identifiable data is required. As a result of funding requirements many of our agency personnel are quite skilled in implementing privacy safeguards. A partnering agency on an NyECC project is required to be compliant with applicable privacy laws such as HIPAA or 42 CFR Part 2 when applicable, including keeping copies of notice and consent on file. Furthermore, consent must be informed within the meaning of the law: the full purpose of the data collection must be disclosed. Partnering agencies are also required to use restraint, respect, and common sense in their everyday dealings with the public on NyECC's behalf.

Improving Effectiveness of Programs

NyECC engages a holistic approach to gauging the effectiveness of its programs. The first level to measure the effectiveness of project success is the project personnel, who are responsible for front-line implementation issues such as monitoring programs for completion of contractual requirements, numbers, fidelity, and scopes of work. Second, NyECC contracts with an external evaluator to provide statistical analyses of program impacts data. Finally, the responsibility for interpreting evaluation results and making recommendations for improvement rests with its Evaluation Committee. This committee is composed of agency leaders who combine their substantial program knowledge with familiarity with local situations to provide feedback and specific recommendations to NyECC and partnering agencies. This feedback can include specific recommendations such as for a facilitator to gain more skills or knowledge or recommendations for event improvements; but it can also give general feedback considering the circumstances of working within NyE. The benefit of this peer process is that an outsider can evaluate a program's effectiveness based on whether statistically significant results were obtained. Community insiders can additionally consider such things as historical relationships, agency challenges, and community norms.

Sustainability

Sustainability affects all levels of the coalition and its activities. It is necessary to maintain an adequate amount of both staffing and material resources to accomplish the short-term and long-term goals of the coalition.

NyECC hires staff with skills, talents, experience, energies, determination and belief in their work to ensure commitment to the process is maintained.

Other human resources that are vital to sustainability of the coalition are the general membership. Members of the coalition are both committed to their own agencies and organizations and also to the work that they are involved in with the coalition. NyECC is committed to continued recruitment of new members and support of current members.

Material resources are integral to any business, agency or organization. NyECC looks at available funding streams for programs and projects currently being implemented, future programs and projects that are identified by the APE Committee and for other agencies/organizations programs.

NyECC practices the Seven Habits of Highly Sustainable Coalitions that consist of guarding capacity, tracking coalition progress, focusing on the goals, maintaining local support, added value by collaboration, telling the story, continuing to learn/keeping an open mind and system integration which when incorporated into an organization or agencies processes, it can and will help sustain programs.

NyECC's Sustainability Plan starts with the overall coalition goals, assessing the resources currently available within the communities to support that work, collaboration with other agencies and organizations providing services, evaluating barriers and future needs and continuing to be adaptable when necessary.

Cultural Competence

NyECC includes Cultural Competency in all aspects of planning and implementation. NyECC also integrates cultural competency into every step of the SPF process.
Coalition staff, members, board members and volunteers are actively recruited to ensure a diverse population. NyECC uses a tool that was provided during a training by Boardsource that allows members and staff to self-identify by a variety of backgrounds including economics, education level, geography, race, ethnicity, gender, and sexual orientation. Information was analyzed to determine if there are gaps in the group and to make sure that representation was indicative of the population that is being served.
NyECC also "houses" an AmeriCorps participant who is a Hispanic Advocate. This volunteer helps with translations, interpretations, and ensures that materials are culturally appropriate. Another AmeriCorps volunteer has been trained on how to review documents and brochures for readability and comprehension following the Title X model.

NyE Communities Coalition