Strategic Prevention Framework – Partnerships for Success Funding Opportunity

NCPC – February 14, 2019
Grant Items

• From SAMHSA – Center for Substance Abuse Prevention
• Due March 29, 2019
• Up to $300,000/year for up to 5 years
• Start date September 30, 2019
• Estimated 127 awards nationwide (with at least 25 to tribes/tribal organization)
Program Goals

• The purpose is to prevent the onset and reduce the progression of substance abuse and its related problems while strengthening prevention capacity and infrastructure at the community level.

• The program is intended to address one of the nation’s top substance abuse prevention priorities - **underage drinking among persons aged 9 to 20**.

• At their discretion, recipients may also use grant funds to target up to two additional, data-driven substance abuse prevention priorities, such as the use of marijuana, cocaine, opioids, or methamphetamine, etc. by individuals ages 9 and above.
• The grant program focuses on community-driven efforts to advance substance abuse prevention. By working collaboratively, communities of high need can more effectively begin to overcome the challenges underlying their substance abuse prevention priorities.

• Additionally, the SPF-PFS grant program seeks to address behavioral health disparities among racial and ethnic minorities and other populations by encouraging the implementation of strategies to decrease the differences in access, service use, and outcomes among the populations served.
SAMHSA’s Strategic Prevention Framework
Vista Unified CHKS 11th Grad Past 30-day Use

- Alcohol
- Marijuana
- Cigarettes
- E-cigs
Oceanside Unified CHKS 11th Grade Past 30-day Use

- Alcohol
- Marijuana
- Cigarettes
- E-cigs
Carlsbad Unified CHKS 11th Grade Past 30-day Use

- Alcohol
- Marijuana
- Cigarettes
- E-cigs
Provided Alcohol to a Minor by Gender

<table>
<thead>
<tr>
<th>Age of survey respondent</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-20</td>
<td>29%</td>
<td>17%</td>
</tr>
<tr>
<td>21-25</td>
<td>30%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Provided to:
- Friend (16%)
- Family Member (14%)
- Acquaintance (4%)
- Stranger (2%)

Provided at:
- Family gathering (16%)
- Kickback (12%)
- House party (10%)
- Other (3%)

*Family gathering increased from 10% in 2017

STOP Young Adult Survey 2018, n=312
*There have been no SHO citations in Carlsbad, Oceanside or Vista in the past 3 years*
Highlight 1

Youth use of marijuana has increased, and a greater percentage report it is the first substance they have ever tried, before alcohol and tobacco.

2007 to 2017 – Juvenile Justice System Changes and Substance Abuse Monitoring Data

Interviews at Juvenile Hall; n=173 in 2017 and 106 in 2016
Figure 2
Marijuana and alcohol among substances most often tried by youths

<table>
<thead>
<tr>
<th>Substance</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heroin</td>
<td>10%</td>
</tr>
<tr>
<td>Crack</td>
<td>10%</td>
</tr>
<tr>
<td>Ecstasy</td>
<td>18%</td>
</tr>
<tr>
<td>Powder cocaine</td>
<td>28%</td>
</tr>
<tr>
<td>Meth</td>
<td>40%</td>
</tr>
<tr>
<td>Binge alcohol</td>
<td>55%</td>
</tr>
<tr>
<td>Tobacco</td>
<td>74%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>90%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>91%</td>
</tr>
</tbody>
</table>

Total = 105-106

NOTE: Cases with missing information not included.
SOURCE: SANDAG SAM Program, 2017

Figure 3
Marijuana, alcohol, and tobacco use start around or before age of 13, on average

<table>
<thead>
<tr>
<th>Substance</th>
<th>Average Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>12.4</td>
</tr>
<tr>
<td>Alcohol</td>
<td>12.7</td>
</tr>
<tr>
<td>Tobacco</td>
<td>12.9</td>
</tr>
<tr>
<td>Binge alcohol</td>
<td>13.9</td>
</tr>
<tr>
<td>Crack</td>
<td>14.0</td>
</tr>
<tr>
<td>Meth</td>
<td>14.4</td>
</tr>
<tr>
<td>Ecstasy</td>
<td>14.6</td>
</tr>
<tr>
<td>Powder cocaine</td>
<td>14.7</td>
</tr>
<tr>
<td>Heroin</td>
<td>14.9</td>
</tr>
</tbody>
</table>

Total = 10-95

NOTE: Cases with missing information not included.
SOURCE: SANDAG SAM Program, 2017
Perception of Risk Very Low for Marijuana

Figure 7
One in seven youths feel that marijuana would be harmful to users

- Marijuana: 14%
- Alcohol: 36%
- Tobacco: 59%
- Hallucinogens: 62%
- LSD: 73%
- OxyContin: 74%
- Ecstasy: 77%
- Inhalants: 84%
- GHB: 86%
- Powder cocaine: 87%
- Spice: 88%
- Meth: 91%
- Crack: 94%
- Heroin: 97%

TOTAL = 85-106

NOTE: Cases with missing information not included.
SOURCE: SANDAG SAM Program, 2017
Truancy Most Common Risk Factor

Figure 14
Few youths arrested for drug offenses; however, many have history of use

- 92% have tried an illicit substance
- 40% received treatment in the past
- 4% arrested for a drug offense
- 53% positive for an illicit substance

NOTE: Cases with missing information not included.
SOURCE: SANDAG SAM Program, 2017

Figure 15
Many youths interviewed have common risk factors to be addressed

<table>
<thead>
<tr>
<th>Home</th>
<th>Mental health</th>
</tr>
</thead>
<tbody>
<tr>
<td>51% run away from home</td>
<td>19% have thought about suicide</td>
</tr>
<tr>
<td>48% parental criminal history</td>
<td></td>
</tr>
<tr>
<td>39% parental substance use</td>
<td></td>
</tr>
<tr>
<td>32% family previous CWS contact</td>
<td></td>
</tr>
<tr>
<td>23% live with no parent</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>School</th>
<th>Other risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>83% history of truancy</td>
<td>13% ever overdosed</td>
</tr>
<tr>
<td></td>
<td>8% ever approached for human trafficking</td>
</tr>
</tbody>
</table>
Impact of MJ Legalization

More likely to use marijuana now it is legal
- 67% of juveniles
- 54% of adults

Think marijuana is psychologically addictive
- 47% of juveniles
- 66% of adults

<table>
<thead>
<tr>
<th>% that have ever dabbed</th>
<th>% that have ever vaped</th>
</tr>
</thead>
<tbody>
<tr>
<td>55% adults</td>
<td>53% adults</td>
</tr>
<tr>
<td>70% juveniles</td>
<td>66% juveniles</td>
</tr>
</tbody>
</table>

Marijuana Use Among San Diego Arrestees: Results of Addendum Questions Post-Prop 64

Arrestee interviews, n=301 adults and n=77 juveniles 2017
Required Activities

SPF-PFS grant funds must be used **primarily to support infrastructure development**, including the following types of activities:

- Use the SPF to identify and select comprehensive, data-driven substance abuse prevention strategies to continue to accomplish the following goals:
  - 1) preventing the onset and reducing the progression of substance abuse;
  - 2) reducing substance abuse-related problems;
  - 3) **strengthening prevention capacity/infrastructure at the community level**;
  - 4) leveraging other funding streams and resources for prevention;
  - 5) **implementing a comprehensive prevention approach, including a mix of evidence-based programs, policies, and/or practices that best address the selected prevention priority(ies); and**
  - 6) identifying TA and training needs and the development of responsive activities.
Required Activities (cont.)

• Build capacity to address underage drinking among persons aged 9 to 20 and up to two additional, data-driven substance abuse prevention priorities in the community.

• Collect and report community-level data to determine progress toward addressing SPF-PFS prevention priority(ies).

• Utilize community coalition building strategies to advance substance abuse prevention efforts across the community.

• Develop prevention messaging and other prevention strategies and ensure dissemination of these messages and strategies.

• Utilize and share effective resources with the Prevention Technology Transfer Centers (PTTCs) to enhance the wide dissemination and adoption of best practices in substance abuse prevention.
Substance Priorities?

• Alcohol/Underage Drinking
• Marijuana
• [Tobacco not included in funding description]
• Other?
Substance Priorities?

• Alcohol/Underage Drinking
• Marijuana
• [Tobacco not included in funding description]
• Other?
Small Group Discussion

• **CAPACITY:**
  - How can NCPC increase community capacity and involvement?
  - Who should be priority groups for involvement?
  - What training or technical assistance would be needed?

• Prevention Policies:
  - What policies are needed in our communities to prevent substance use?

• Prevention messaging and other prevention strategies:
  - How can NCPC develop and spread prevention messages?
  - What other prevention strategies are needed in our region?
Further Input or Questions:

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