

Outcomes on a Statewide Prevention Model to Reduce Youth Substance Use: Evaluation of Washington State's Community Prevention and Wellness Initiative

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The Division of Behavioral Health and Recovery (DBHR) Community Prevention and Wellness Initiative (CPWI) evaluation has been conducted in partnership with Washington State University (WSU) Department of Human Development.

We would like to thank and acknowledge the following individuals:

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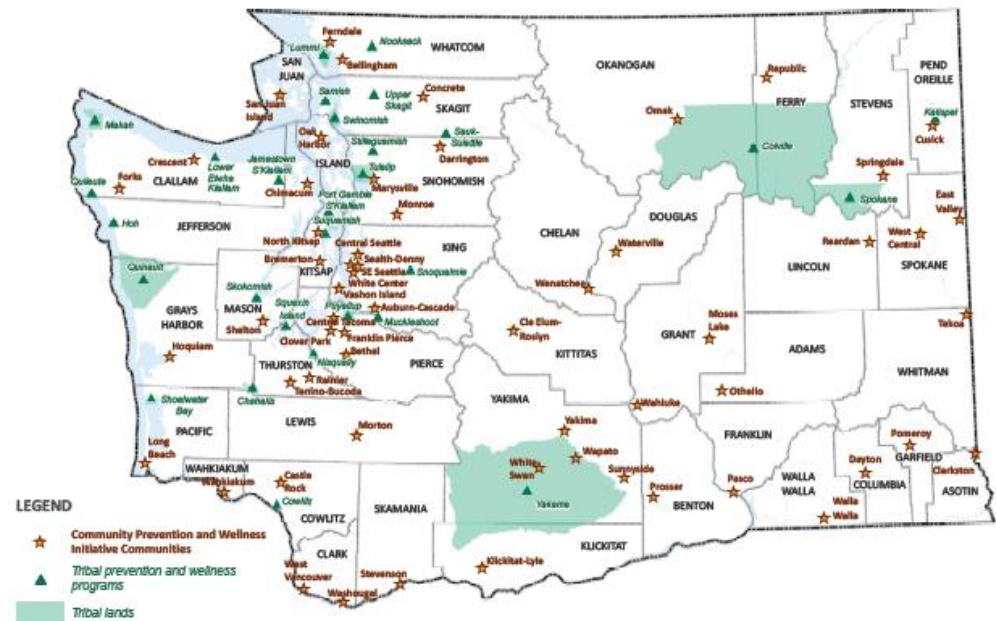


Learning Objectives:

- Learn about the Community Prevention and Wellness Initiative (CPWI), an emerging, science-based model for youth substance use prevention services in Washington State
- Gain awareness of preliminary evaluation results about the successful implementation of CPWI services among the first cohort of high-risk youth
- Understand the utility and success of this emerging comprehensive prevention approach
- Appreciate how and why cultural competency and sustainability efforts are incorporated at every level within the CPWI prevention approach

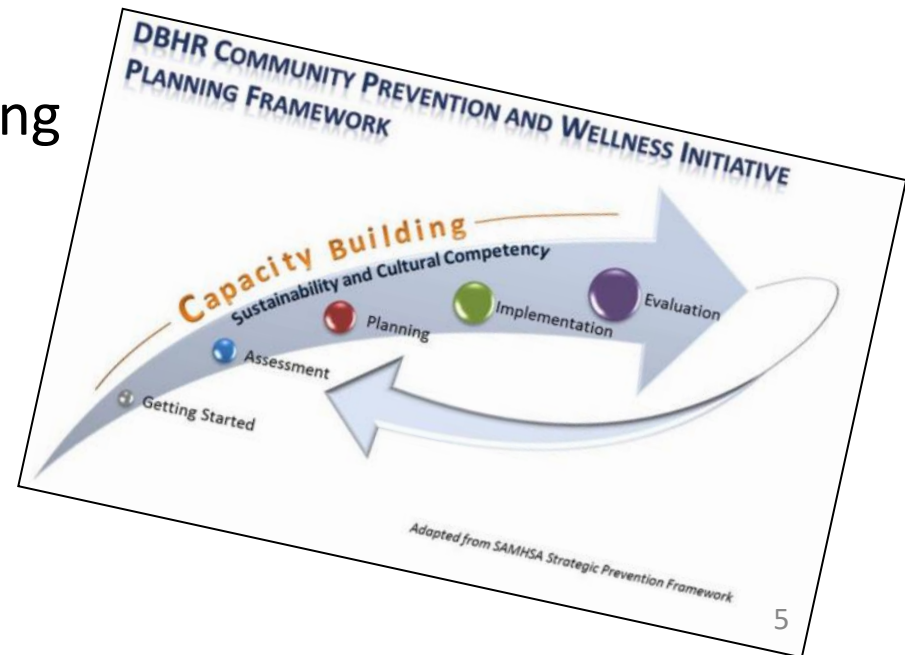
Overview of CPWI

- CPWI: Community Prevention and Wellness Initiative
- Emerging community coalition model for youth substance use prevention
- Currently supports 64 prevention coalitions and communities throughout Washington State



Overview of CPWI

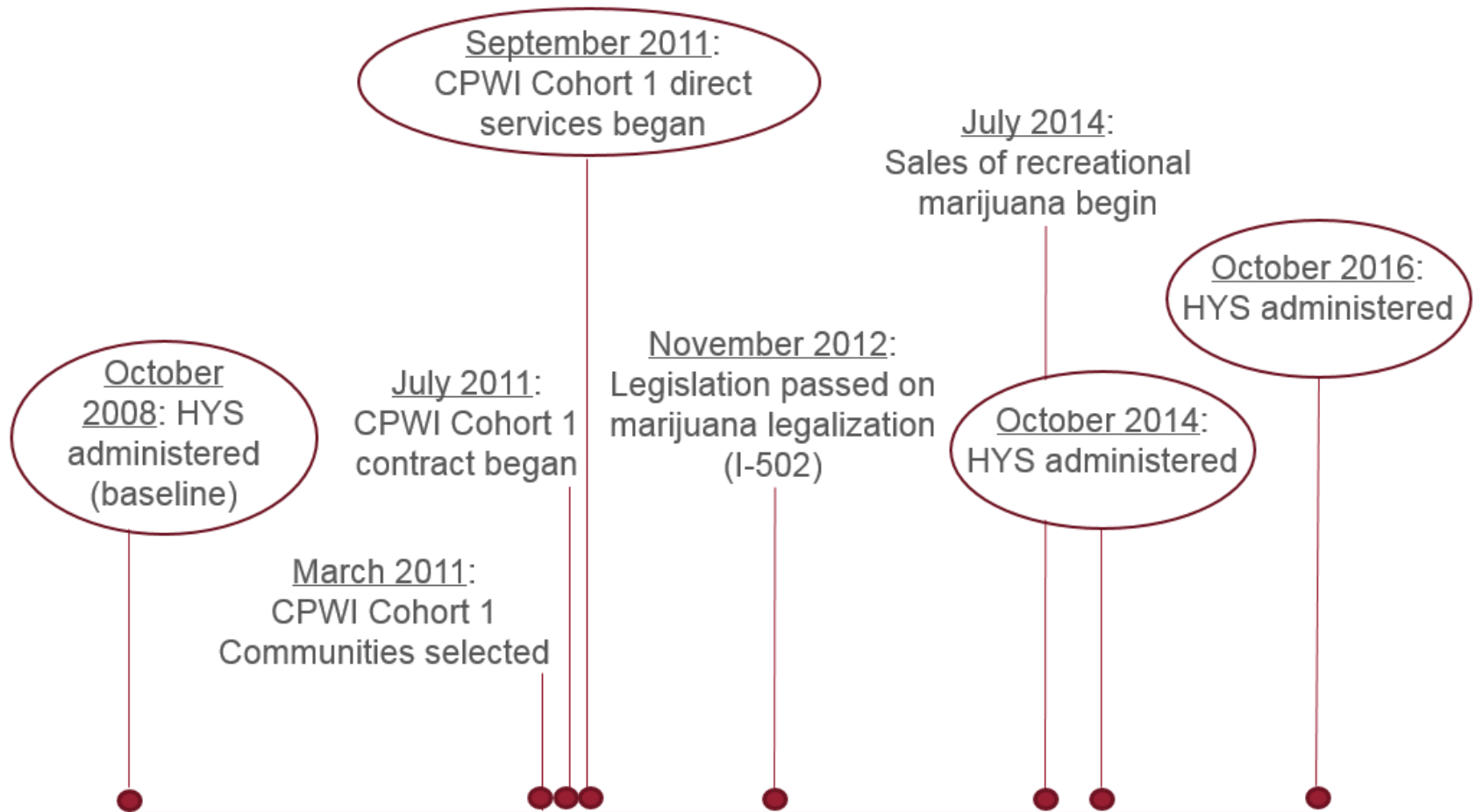
- Comprehensive and targeted approach to prevention
 - Designed as an adapted and combined structure of the Strategic Prevention Framework (SPF) and the Communities that Care (CTC) system
 - Foundation rooted in Prevention Science and a data-driven approach is continuously maintained
- Work is accomplished by targeting high need communities throughout the state
- Model driven by a Community Coalition approach



Overview of CPWI

- CPWI works collaboratively with other state agencies, counties, communities, and schools
- Aim to comprehensively address reducing alcohol and drug use among Washington State youth
- Service implementation incorporates:
 - Evidence-based programming
 - Environmental strategies
 - Public awareness/social media campaigns
 - School-based Prevention/Intervention (P/I) Specialist placement into the community school(s)
- Preliminary evaluation of the CPWI Model conducted in partnership with Washington State University researchers in 2016

CPWI Evaluation Timeline



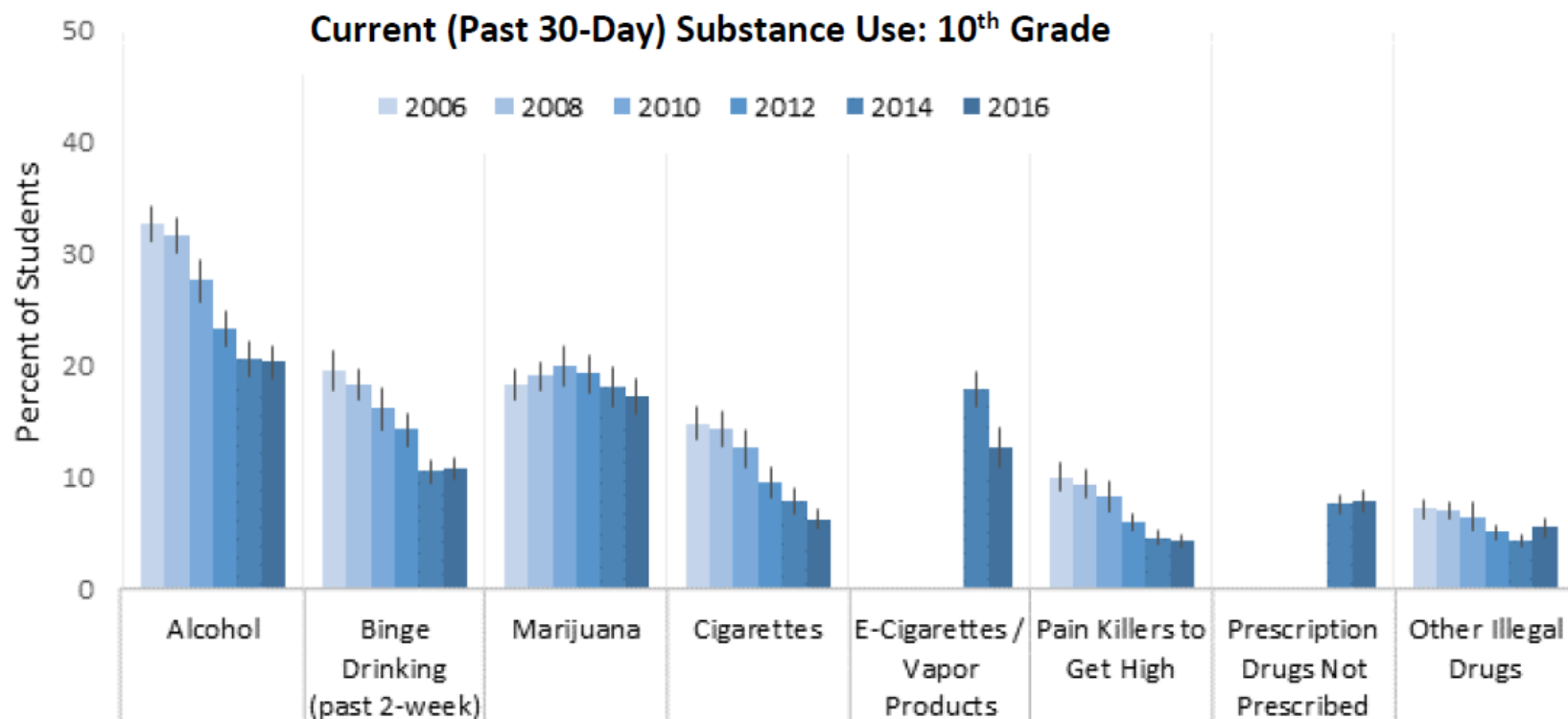
Outcome Measures – Data Sources

- Washington State Healthy Youth Survey (HYS)
- Washington State Community Outcome and Risk Evaluation (CORE) Data System
- Population and housing data
- Individual-level and school-district level data

Additional survey and data information:

- Healthy Youth Survey: <http://www.askhys.net/>
- Department of Social and Health Service CORE: <https://www.dshs.wa.gov/sesa/research-and-data-analysis/community-risk-profiles>
- Department of Health: <http://www.doh.wa.gov/DataandStatisticalReports>

Health Youth Survey 2016 Results - Statewide



2016 %	20%	11%	17%	6%	13%	4%	8%	6%
Difference in % 2014 vs. 2016?	No	No	No	Yes	Yes	No	No	Yes
Difference in % 2006 vs. 2016?	Yes	Yes	No	Yes	-	Yes	-	Yes

Technical Note: "Difference in %" refers to a significant difference ($p < 0.05$) between the years indicated in the percentage of students reporting use.

Evaluation Variables

- Substance Use:
 - Alcohol
 - Any alcohol use ever
 - Any alcohol use in past 30 days (primary target variable)
 - Frequency of alcohol use in past 30 days
 - Any binge drinking in past 2 weeks
 - Tobacco
 - Any cigarette smoking ever
 - Any cigarette smoking in past 30 days
 - Frequency of cigarette smoking in past 30 days
 - Marijuana
 - Any marijuana use ever
 - Any marijuana use in past 30 days
 - Frequency of marijuana use in past 30 days
 - Prescription Drug Misuse
 - Any prescription drug use in past 30 days
 - Frequency of prescription drug misuse in past 30 days

CPWI Evaluation Variables

- Risk Factors:
 - Peer-individual risk factors
 - Less interaction with prosocial peers
 - Low social skills
 - Low belief in the moral order
 - Early initiation of substance use
 - Friends' substance use
 - Favorable attitudes towards drug use
 - Low perceived risk of substance use
 - Family risk factors
 - Low opportunities for prosocial involvement
 - Parental attitudes favorable towards drug use
 - Poor family management

CPWI Evaluation Variables

- Risk Factors:
 - School risk factors
 - Low opportunities for prosocial involvement
 - Low rewards for prosocial involvement
 - Low school commitment
 - Academic failure
 - Community risk factors
 - Low opportunities for prosocial involvement
 - Laws and norms favorable to drug use
 - Perceived availability of drugs

Evaluation Questions

- In 2008, all CPWI Cohort 1 Communities were significantly higher on:
 - Alcohol use behaviors;
 - Other substance use behaviors; and
 - Risk factors
 - Peer-individual
 - Family
 - School
 - Community
- **Question 1: Did CPWI decrease in substance use 2008-2016?**
- **Question 2: By 2016, had CPWI Cohort 1 Communities *closed the gap* when compared to non-CPWI Communities throughout Washington State?**

CPWI Evaluation Process

- Community selection based upon significant risk when compared to other Washington State communities
- 10th grade used as outcome group
- 139 comparison communities (approximately 40,000 students)
- In 2015, Started with CPWI Cohort 1 communities (Implementation started September 2011)
- In 2017, added Cohort 2 and Cohort 3 to Evaluation

Evaluation Methods

In partnership with Washington State University, a two-step analytic approach was utilized:

#1: Adjusted the data for bias using a propensity score analysis

- Model included 19 variables across 6 domains
 - Domains: substance use, school performance, youth delinquency, mental health, population, and economic indicators
- Satisfactory balance on all variables: standardized mean difference was less than 0.20 in absolute value

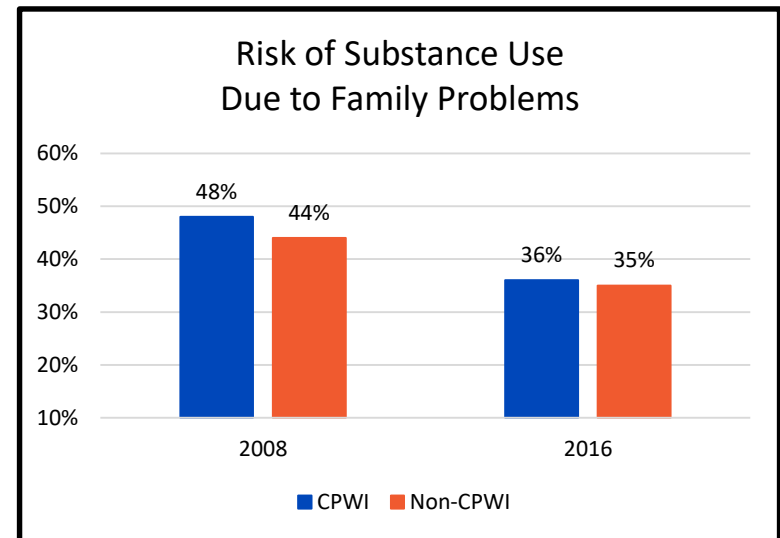
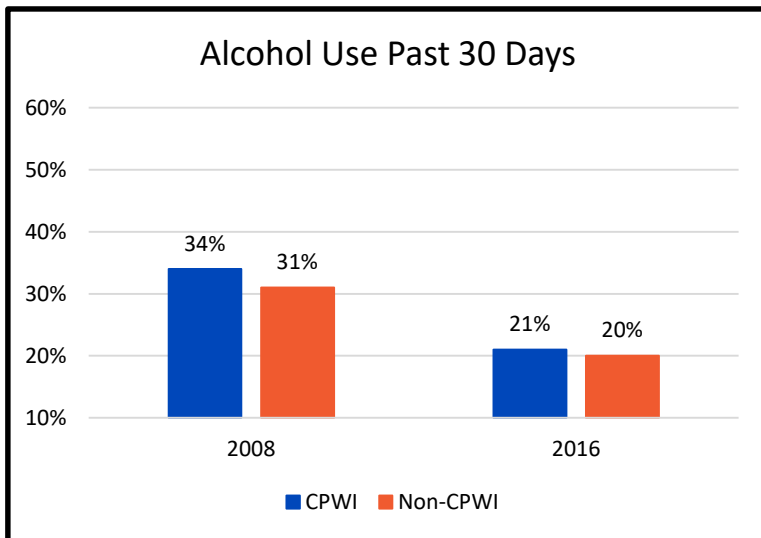
#2: Used multilevel modeling to calculate CPWI program effects

- Included student gender and race/ethnicity as covariates

Highlights– Cohort 1

CPWI communities were at higher risk, but they have closed the gap.




- In 2008, CPWI communities were at higher risk than other WA communities for youth alcohol use and related risk factors.
- By 2016, this gap was eliminated suggesting that CPWI is effectively reducing youth alcohol use in high-risk communities.













Graphs reflect outcomes for 10th grade students in CPWI Cohort 1 communities.

¹Cohort 2 and Cohort 3 began implementing CPWI in 2012 and 2013, respectively.




Evaluation Results

	Decline in the percentage of 10 th graders at risk
	Little or no change in the percentage of 10 th graders at risk
	Increase in the percentage of 10 th graders at risk















CPWI Cohort 1 Community Outcomes: 2008-2016, Risk Factors

	Question 1	Question 2		
<i>In this chart we compare CPWI with other Washington communities, using Healthy Youth Survey data from 2008 and 2016.</i>	Did CPWI decrease in risk 2008-2016?	Was CPWI higher than other communities in 2008?	Was CPWI higher than other communities in 2016?	Did CPWI close the gap?
Peer- Individual Risk Factors – CPWI decreased on 3 peer-individual individual-peer risk factors. However, in 2016, CPWI communities continued to be at higher levels of risk for students reporting favorable attitudes towards drug use, and students reporting lower perceived risk of substance use. When compared with 2008, the percentage of CPWI students reporting low social skills in 2016 has remained stable, but the percentage of other students reporting low social skills has declined. This created a gap in the level of risk between the communities in 2016.				
Less interaction with prosocial peers		No	No	NA
Low social skills		No	Higher	
Low belief in the moral order		No	No	NA
Early initiation of substance use		No	No	NA
Friends' substance use		No	No	NA
Favorable attitudes towards drug use		Higher	Higher	
Low perceived risk of substance use		Higher	Higher	




Evaluation Results

	Decline in the percentage of 10 th graders at risk
	Little or no change in the percentage of 10 th graders at risk
	Increase in the percentage of 10 th graders at risk











CPWI Cohort 1 Community Outcomes: 2008-2016, Risk Factors

	Question 1	Question 2		
<i>In this chart we compare CPWI with other Washington communities, using Healthy Youth Survey data from 2008 and 2016.</i>	Did CPWI decrease in risk 2008-2016?	Was CPWI higher than other communities in 2008?	Was CPWI higher than other communities in 2016?	Did CPWI close the gap?
Family Risk Factors – All family risk factors decreased, and by 2016, CPWI closed the only gap in this domain.				
Less opportunity for prosocial involvement		No	No	NA
Parental attitudes favorable towards drug use		No	No	NA
Poor family management		Higher	No	
School Risk Factors – CPWI decreased on 1 school risk factor, but increased on 2 risk factors in this domain. CPWI closed the gap on prosocial involvement, while CPWI continues to be at higher levels of risk for students reporting low school commitment.				
Fewer opportunities for prosocial involvement		Higher	No	
Fewer rewards for prosocial involvement		No	No	NA
Low school commitment		Higher	Higher	
Academic failure		No	No	NA
Community Risk Factors – CPWI decreased on all community risk factors, and by 2016, closed the only gap in this domain.				
Fewer opportunities for prosocial involvement		No	No	NA
Laws and norms favorable to drug use		Higher	No	
Perceived availability of drugs		No	No	NA




Evaluation Results

	Decline in the percentage of 10 th graders at risk
	Little or no change in the percentage of 10 th graders at risk
	Increase in the percentage of 10 th graders at risk







CPWI Cohort 1 Community Outcomes: 2008-2016, Substance Use

	Question 1	Question 2		
<i>In this chart we compare CPWI with other Washington communities, using Healthy Youth Survey data from 2008 and 2016.</i>	Did CPWI decrease in substance use 2008-2016?	Was CPWI higher than other communities in 2008?	Was CPWI higher than other communities in 2016?	Did CPWI close the gap?
Alcohol – Alcohol use has decreased, and by 2016, CPWI closed the only gap that existed in alcohol use.				
Any alcohol use ever		No	No	NA
Any alcohol use in past 30 days		Higher	No	
Frequency of alcohol use in past 30 days		No	No	NA
Any binge drinking in past 2 weeks		No	No	NA
Tobacco – Cigarette smoking has decreased, but the magnitude of decrease was higher in other communities than in CPWI. Therefore, in 2016, CPWI communities were at significantly higher risk for cigarette smoking than other communities				
Any cigarette smoking ever		No	No	NA
Any cigarette smoking in past 30 days		No	Higher	
Frequency of smoking in past 30 days		No	Higher	

Evaluation Results

	Decline in the percentage of 10 th graders at risk
	Little or no change in the percentage of 10 th graders at risk
	Increase in the percentage of 10 th graders at risk

CPWI Cohort 1 Community Outcomes: 2008-2016, Substance Use

	Question 1	Question 2		
<i>In this chart we compare CPWI with other Washington communities, using Healthy Youth Survey data from 2008 and 2016.</i>	Did CPWI decrease in substance use 2008-2016?	Was CPWI higher than other communities in 2008?	Was CPWI higher than other communities in 2016?	Did CPWI close the gap?
Marijuana – Lifetime marijuana use and marijuana use prevalence has decreased. However, CPWI communities continue to be at higher levels of risk for these outcomes.				
Any marijuana use ever		Higher	Higher	
Any marijuana use in past 30 days		Higher	Higher	
Frequency of marijuana use in past 30 days		No	Higher	
Prescription drug misuse – In 2016, CPWI communities were at higher risk for frequency of prescription drug misuse. Data is not available for 2008.				
Prescription drug misuse in past 30 days	NA	NA	No	NA
Frequency of misuse in past 30 days	NA	NA	Higher	NA

Summary – Cohort 1

Question 1: Did 10th grade substance use & risk factors in CPWI communities from 2008 to 2016?

- Yes, Cohort 1

Take Home Message!

Prevention activities in Cohort 1 CPWI communities appear to have equalized most of the 2008 gaps with other communities in alcohol use, family risk factors, school risk factors, and community risk factors.

Question 2: Did 10th grade substance use & risk factors in CPWI communities from 2008 to 2016 differ from similar communities?

- Overall, good news about alcohol and tobacco is; but CPWI communities may need to increase focus on youth tobacco and marijuana use as well as prescription drug misuse.
- No significant differences in family risk factors.
- No significant differences in school risk factors.

Summary – Cohort 2

Question 1: Did 10th grade substance use decrease from 2008 to 2010?

- CPWI communities appear to have equalized all of the 2010 gaps with other similar communities in peer-individual risk factors, and tobacco use.

Question 2: Did Washington State CPWI communities have lower rates of youth alcohol use and tobacco use than other communities?

- Not yet
- CPWI communities may need to place more focus on youth alcohol use, as well as family and community risk factors.
- Yes, for

Summary – Cohort 3

Question 1: Did 10th grade substance use decrease from 2008 to 2016?

-

Take Home Message!

Prevention activities in Cohort 3 CPWI communities appear to have narrowed the gaps in peer-individual and family risk factors.

Question 2: Did CPWI communities close the gap in substance use related outcomes?

- Not
- Some of 2 f

CPWI communities should continue prevention activities targeting risk factors in all four domains.

As CPWI communities are at significantly higher levels of risk than other similar communities in Washington for all substance use related outcomes, **CPWI communities may need to increase emphasis on prevention activities targeting specific substances.**

CPWI in Action – Local Report

Alcohol Use

- 37% decrease in 30-day alcohol use
- 31% decrease in lifetime alcohol use
- 59% decrease in binge drinking in the past 2 weeks

Tobacco Use

- 54% decrease in 30-day cigarette use
- 42% decrease in lifetime cigarette use

Marijuana Use

- 28% decrease in 30-day marijuana use
- 37% decrease in lifetime marijuana use



CPWI in Action: White Swan, WA



CPWI COMMUNITY IMPACT: DATA-DRIVEN COLLABORATION

White Swan is a close-knit community and residents were well aware of the troubling history of youth deaths attributed to drug abuse, suicide, and motor vehicle fatalities at the time the White Swan Arts and Recreation Community Coalition was established. The coalition proved to be the mechanism needed for people to unite and tackle these issues. The coalition has played a major role in reducing the number of disciplinary referrals in schools related to drug/alcohol infractions. Specifically, coalition members shared data with school administrators, law enforcement, and parents related to youth perceptions regarding substance use. The data revealed that youth believed it was acceptable to be drunk/high in the community and the consequences for being impaired were insignificant. This prompted school staff and administrators to tighten up policies/procedures and to better communicate with parents and youth about repercussions of being impaired on school grounds. This year there have been a total of 14 disciplinary referrals for alcohol/drug infractions compared to 34 in 2012.

Nancy Fiander, White Swan Arts and Recreation Community Coalition Coordinator, White Swan, WA

CPWI in Action: Reardan, WA



CPWI COMMUNITY IMPACT: BUILDING CAPACITY FOR ACTION

After a year-long effort by the Reardan-Edwall Communities Alliance for Prevention (RECAP) Coalition to increase awareness of how social hosting promotes favorable attitudes toward alcohol/drug use and increases youth access to alcohol and other drugs, the school board and county commissioners recently adopted a resolution on social hosting. The process included multiple presentations to community stakeholders and local leadership. The coalition plans to use this momentum to pass a social host ordinance in Reardan in the next year.

After four years of capacity building, the RECAP coalition is now a fixture in Reardan. "People know who we are and what we do. More importantly, they are invested in our youth and the coalition. RECAP is now synonymous with prevention in our communities."

Darren Mattozzi, RECAP Coalition Coordinator, Reardan, WA

CPWI in Action: Clarkston EPIC



CPWI COMMUNITY IMPACT: IMPLEMENTING EVIDENCE-BASED PROGRAMS

As part of a comprehensive approach to build a more resilient and protective community, Clarkston EPIC implements evidence-based programming for youth and adults. The Strengthening Families Program (SFP 10-14) is available for parents to learn new ways to bond with their children and techniques for setting appropriate limits. Clarkston parents who have completed SFP (10-14) consistently report improvements in their capabilities to communicate their feelings to their youth.

On an initial night of a new SFP (10-14) session, a mother arrived with her two daughters, and during dinner it was obvious that she and her daughters weren't speaking. As participants began introducing themselves, the mother began to cry. When it came time for her to introduce herself she was crying so hard that she struggled to speak. She later revealed that her children's father left and the tension in her home was at a "10". As the session progressed, the family's demeanor improved and they were laughing and high-fiving. At the end of the evening, the mother smiled and commented "For the first time in a long while, I have hope."

Kristi Sharpe, Community Coordinator, Clarkston, WA

Evaluation Findings

- Targeted prevention efforts were successful and results of long term strategy are promising
 - The 2008 risk factor gaps between CPWI and non-CPWI Communities were largely eliminated (C1)
 - The 30-Use of Alcohol gap between CPWI and non-CPWI Communities was also eliminated. All alcohol measures decreased (C1)
- Early findings suggest that CPWI and a community coalition approach to prevention is effective in achieving targets
 - Communities are responsive to the CPWI model and are engaging key leaders and community sectors in prevention efforts

Evaluation Conclusions

- Most risk factors (leading indicators) are decreasing, however, effects on substance use (lagging indicators) may take longer to be reflected in the data. *It is promising to see positive changes across multiple substance use and risk factor domains already in Cohort 1.*
- Other substances should receive increased focus in CPWI Communities to equalize any remaining gaps in youth substance use



The original gap between CPWI Communities and non-CPWI Communities narrowed, students receiving CPWI services are no longer significantly different than students in non-CPWI Communities among most of the factors evaluated. (C1)

Resources

Athena Forum: www.TheAthenaForum.org

Start Talking Now: <http://www.StartTalkingNow.org>

Questions?

Thank You!

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