

# **Substance Abuse Strategic Prevention Plan for Cumberland County**

## **June 2007**

### **Introduction**

In September 2006, Communities Promoting Health Coalition (CPHC), a program of the People's Regional Opportunity Program (PROP), was awarded a grant from the Maine Office of Substance Abuse to complete an assessment of substance abuse and create a strategic prevention plan for Cumberland County. The 10-month project was managed and organized by staff at CPHC but the process was carried out through the Cumberland County Strategic Planning and Environmental Programming Collective (known as "The Collective"). The Collective included representatives from every town in Cumberland County, school administrators, prevention specialists, enforcement officers, treatment providers, community organizers, and concerned community members. The Collective met monthly to complete an initial assessment, gather additional data and then use the information to create an informed strategic plan based on the needs specific to Cumberland County.

The assessment included pre-existing data from the following sources: Maine Youth Drug & Alcohol Use Surveys '06, Behavioral Risk Factor Surveillance System, ONE ME assessments, county arrest & overdose data, existing CPHC Community Assessment, Youth Risk Behavior Surveillance Survey, and Cultural Subpopulation Studies. In addition, focus groups were conducted with parents, youth, key community leaders, and other sub-groups. With the consideration of time and resources, the Collective had to prioritize the problem areas for assessment and for future action. The 5 preliminary priority areas assessed more closely were:

- High-risk drinking among youth
- High-risk drinking among young adults
- Marijuana use
- Prescription drug misuse
- Cocaine use.

In the strategic planning phase, it was determined that marijuana use and cocaine use were areas in which the Collective needs to build greater capacity in order to collect more definitive data. Evidence-based strategies informed by consequence and consumption data were able to be determined for the prevention of high-risk drinking among youth and young adults as well as prescription drug misuse. These 3 problem areas, with the addition of capacity building, make up the strategic plan for substance abuse prevention efforts within Cumberland County for the next 3 to 5 years. The focus of the first year will be limited to implementing strategies to decrease high-risk drinking among youth and young adults as well as establishing regional substance abuse action teams. The Collective will remain an advisory group for substance abuse prevention in Cumberland County while the regional substance abuse action teams and the community organizations and coalitions will implement the strategies.

### **Vision**

"To build an inspired community response to drug and alcohol misuse where people of all ages are invested in creating and sustaining a safe, just, and healthy community"

### **Description of Geographic Areas Covered in the Strategic Plan and Collaborating Partners**

The strategic plan created by the Cumberland County SPEP Collective covers all of

Cumberland County, with the exception of Brunswick and Harpswell. Those two areas have been traditionally serviced by Sagadahoc County and were therefore included into their substance abuse strategic planning process.

Cumberland County is one of the most diverse counties in the state of Maine geographically and demographically. Geographically, a third of the towns border Casco Bay and have ocean water access. A third of the towns are situated around Sebago Lake and are in the foothills of the Maine Mountains. Demographically, in the eastern section of the county there are high population density areas in Portland, South Portland, and Westbrook, while in the western area the population is much more spread out and rural. There are high poverty areas throughout the county as well as very affluent areas, mostly within Portland, and in the immediate suburban communities. Portland is very ethnically and racially diverse, where as towns in the western region are mostly Caucasian. Many of the towns in between are becoming more ethnically diverse with migration from Portland and direct immigration from other countries.

One of the goals of this project was to have representation on the Collective from as many communities as possible. Throughout the assessment and strategic planning process, the project manager and the core group were recruiting new members to ensure broad representation. By the end of the process, almost all towns were represented on the collective, numerous countywide organizations were participating, and people representing various ethnic groups were involved. Below is a list of all the participating members and their organizational affiliation:

<b>Name</b>	<b>Organization</b>
Liz Blackwell-Moore	Communities Promoting Health Coalition
Dona Forke	Community Partnership Bridgton Community Center
Carmen Lone	Bridgton Community Center
Christina Lamarre	Raymond Mentoring Partnership
Sandy Hale	Westbrook School Dept.
Kaki Dimock	Youth and Resiliency Project at PROP
Lucie Rioux	Communities Promoting Health Coalition
Amanda Beal	Communities Promoting Health Coalition
Erica Schmitz	Medical Care Development/ 21 Reasons
Malory Shaughnessy	Maine Association of Prevention Programs/ Cumberland County Commissioners Office
Ronnie Katz	Health and Human Services
Bethany Sanborn	City of Portland Public Health Division
Tina Harnett	City of Portland Public Health Division
Pettingil	
Lee Anne Dodge	USM
Steve Danzig	Danzig Counseling Services
Scott Gagnon	Day One
Carol Troy	The Women's Project
Margaret Jones	Day One
Bob Scarpelli	South Portland Police Dept.
Carter Friend	United Way of Greater Portland
mike Clifford	Portland Public Schools

Peter Vollk	Cumberland Police Department
Karen Caprio	MSAD #15
Robin Haley	Falmouth High School
John Kenney	Greely Middle and High School
Melissa Fochesato	21 Reasons
Colleen Taylor-Capano	Healthy Androscoggin and Community member of Gray
Lynn Doxey	Minortiy Health at Portland Public Health
Stephanie Duggan	District Attorney's office
Martin Lynch	Gray/New Gloucester Middle School

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### **Description of Planning Team and Process**

Cumberland County had one SPEP project manager overseeing the assessment and strategic planning project. Guiding the process was the “Core Group”, made up of 2 DFC managers (CPHC region and Portland), one substance abuse prevention specialist from the City of Portland, one HMP director, one youth and resiliency director from PROP, and the SPEP project manager. This core group met at least monthly to help the project manager set the agenda for the larger Collective meetings, determine what information and data was useful and important to the process, and how to approach the assessment and planning process. This group was not the decision making body, but helped the project manager to steer the process towards completion with their knowledge and expertise in substance abuse prevention, public health, collaborations, and/or strategic planning.

The Cumberland County SPEP Collective, (known as “The Collective”) was the larger planning team representing the communities of Cumberland County. The Collective met monthly throughout the project and was tasked with making all the decisions about the direction of the assessment and strategic plan. Here is a timeline of the major decisions in the Collective process:

November ‘06: Determined the initial substance abuse areas of concern

January ‘06: Reviewed initial assessment and determined what information still needed to be gathered

February ‘07: Prioritized which groups of people to have in the focus groups and who to invite to the key leader meetings

April ‘07: Prioritized the intervening variables (high importance and high changeability)

April ‘07: Created the strategic plan

May ‘07: Prioritized the strategic plan to create a one-year action plan

### **Processes Used to Interpret Information and Make Decisions**

Throughout the project, the project manager gathered and aggregated all the data and information. The Core group assisted the project manager in determining what information was crucial to the process and what could be left behind. This was accomplished through consensus of all 6 members of the group. When there was disagreement, all information pertaining to the disagreement remained.

The Collective was then able to produce a summary of important information, from which they could make informed decisions. The project manager facilitated the Collective

meetings and led the collective through the decision-making processes. Often the Collective would break into small groups, come up with answers to any questions that were on the table, and report back to the larger group for discussion and consensus. During the many prioritization processes, each member of the collective would receive a dot to place by the item they wished to prioritize. The item with the most dots was ranked #1 and so on. There was always a discussion after the voting to ensure that everyone agreed to the order and that nothing needed to be changed or altered.

After the Collective made decisions, the project manager would synthesize the decision made in the meeting minutes or in a separate document and send back to the Collective. This was to make certain that people who could not attend the meeting were still on track with the process and could raise concerns if they had any.

### **Prioritization of Goals and Objectives**

There were 2 separate processes that took place to prioritize the goals and the objectives. Prioritizing the goals was a multi-part process. The first round of prioritization came in the beginning of the project after the initial assessment was completed. To identify what additional data needed to be gathered, the Collective had to determine what substances were the priority in Cumberland County. Using guidelines from OSA, the Collective chose the OSA priorities of high-risk drinking for youth and young adults, marijuana, as well as prescription drug misuse and cocaine use. After the focus groups and key leader meetings were completed, the Collective again prioritized the goals for the strategic plan. The Collective was separated into 4 small groups to answer a series of questions that led them to prioritize the substances of concern. The group came up with high-risk drinking for youth and young adults and prescription drug misuse. Cocaine became the priority for capacity building activities, as did marijuana. After the strategic plan was created, the group prioritized the goals again by voting to determine what the group could begin to work on in year one. Prescription drug misuse was dropped from the priorities through this process.

In terms of the objectives, the Collective established the priority objectives during the strategic planning process. Using the prioritization matrix given to the Project manager by OSA, the Collective assessed which intervening variables were of high importance and high changeability. After creating the priority list, the Collective was shown the OSA priorities to gauge how OSA's work may affect the ability of this group to change intervening variables once assumed to be too difficult to tackle. Once the intervening variables were determined, the group worked on building the strategies and capacity to achieve the goals

### **Strategic Planning Grid:**

Please see the Appendix D: Comprehensive Approach Strategy Models for details on the resources and citations for the strategies listed in the Strategic Planning Grid.

Please see the Planning Grid below.

# Strategic Plan

## Summary of Strategies for High Risk Drinking for 12-17 year olds

**Problem:** High incidence of under age drinking, binge drinking and negative consequences from alcohol use for 12-17 year olds.

**Goal:** Reduce high risk drinking among youth 12-17 years old

Objective	Strategies	Benchmarks	CapacityBuilding Actions
Increase effectiveness of law enforcement policies & practices	Primary: Coalition building between law enforcement and prevention community 1. Increase enforcement actions 2. Department Policies 3. Training of Officers 4. Publicizing incidents related to underage alcohol use	Increase the number of violations of underage drinking, hosting, and furnishing -Use '08 and '10 MYDAUS data for change in youth getting caught by police or parents, and the number of youth who believe their parents and the community disapprove of alcohol use among youth	
Increase use of recommended parental monitoring practices	Primary: Social Marketing Campaign and parent media campaign 1. Disseminate materials at parent events (PTA/PTO, parent/teacher conferences, school activities) 2. Disseminate materials to Dr.'s office 3. Policy at schools for parental notification of use by child and dissemination of materials on monitoring	-Use '08 and '10 MYDAUS Data to see change in the number of youth who believe their parents and the community disapprove of alcohol use among youth	Build relationships with schools, physicians,
Increase effectiveness of retailers' policies & practices that restrict underage access	1. Build local coalitions to contact the local retailers to help them be in compliance with laws and to create policies to decrease underage access to alcohol 2. Retail compliance checks 3. Merchant/ seller education	-Use '08 and '10 MYDAUS data to assess any change in the ease of retail access for youth	Build local substance abuse action teams in areas that current do not have them

	4. Work to implement policies at retail stores around training requirements, checking ID,		
Increase Knowledge of Risks of underage drinking	<ol style="list-style-type: none"> <li>1. Disseminate material about the health risks associated with alcohol use to parents during “parental monitoring” intervention</li> <li>2. Involve parents in school substance abuse curriculum- homework for kids that includes parents and/or guardians</li> <li>3. “Protecting You/Protecting Me” (model program that is curriculum based)</li> <li>4. Peer to peer education around risks of alcohol use</li> </ol>	<ul style="list-style-type: none"> <li>-Use '08 and '10 MYDAUS data to assess any change in perception of risk among youth</li> <li>-Conduct a parent survey to assess knowledge of risks</li> </ul>	<ul style="list-style-type: none"> <li>-Build relationship with schools and workplaces to lubricate the flow of information to parents at school and work</li> <li>-Increase ability to evaluate parents knowledge by looking for more grant funding</li> </ul>
Decrease social access to alcohol	<ol style="list-style-type: none"> <li>1. Combined with Enforcement, use media to publicize the penalties and consequences of furnishing to minors.</li> <li>2. Sticker Shock</li> <li>3. “Parents who host lose the most” information dissemination</li> <li>4. Furnishing education sessions with people over 21</li> </ol>	<ul style="list-style-type: none"> <li>-Use '08 and '10 MYDAUS data to assess any change in perception of the ease of access</li> <li>-Conduct parent survey to assess knowledge of furnishing laws and furnishing behavior</li> </ul>	
Increase effectiveness of School substance abuse policies	<ol style="list-style-type: none"> <li>1. Utilize YAP programs to change school climate through peer to peer activities</li> <li>2. Utilize LRP programs to engage high-risk youth to foster skills for carrying out community projects that benefit peers and community.</li> <li>3. Support Natural Helpers (Day one) programs in schools that provide peer listening and support programs for</li> </ol>	<ul style="list-style-type: none"> <li>-At least 30% of schools in the county operating YAP Programs</li> <li>-Use YAP and LRP evaluations to see change in substance abuse among participants</li> <li>-All schools in the county administer MYDAUS</li> <li>-30% of high schools following OSA guidelines for school policies</li> <li>-Use '08 and '10 MYDAUS data to see</li> </ul>	Continue to build relationships with schools, school guidance, principles, and superintendents

	<p>youth to not use substances</p> <p>4. Establish youth councils as liason's to school board, town council and policy creation boards</p> <p>5. Train Schools how to use MYDAUS data</p> <p>6. Support Mentoring programs in the schools</p>	change in youth substance abuse and specifically youth high-risk drinking	
Increase community involvement in substance abuse prevention	<p>1. Positive Tickets- which includes increasing effectiveness of enforcement practices, increasing knowledge of health risks, and increasing effectiveness of practices that limit social access</p> <p>2. Building local coalitions that have the capacity to work on the other intervening variables required by OSA</p>	-Use youth crime data and '08 and '10 MYDAUS data to assess youth perception of community involvement	Build local coalitions to address substance abuse prevention in their communities
Decrease initiation and increased use during developmental transition periods	<p>Primary: Implement prevention strategies during known developmental transition periods (puberty, adolescence, graduation from school)</p> <p>1. Teacher education on detecting students at risk and referral to youth programming or counseling</p>	-Use '08 and '10 MYDAUS data to see change in initiation and use	Continue building relationships between schools and local substance abuse action teams

### Summary of Strategies for High Risk Drinking for 18-25 year olds

**Problem:** High incidence of under age drinking, binge drinking and negative consequences from alcohol use for 18-25 year olds.

**Goal:** Reduce high risk drinking among young adults age 18-25 years old

Intervening Variable	Strategies	Benchmarks	CapacityBuilding Actions
Increase knowledge of		Use results from USM survey's	

<p>health risks of high-risk drinking</p>	<ol style="list-style-type: none"> <li>1. Distribute information about personalized assessment-feedback and brief intervention services</li> <li>2. Media advocacy around health and safety risks of high-risk drinking</li> <li>3. Work with colleges and workplaces to distribute informational materials and make an employers drug-free workplace policy known to all employees</li> <li>4. Use e-CHUG as educational tool</li> <li>5. Promote alternative activities to alcohol use</li> <li>6. Work with students to create peer to peer education around risks of high-risk drinking and furnishing</li> </ol>	<p>on drug and alcohol use to see changes in knowledge          -Create an evaluation tool to survey young adults in the broader community who may not attend college</p>	
<p>Decrease promotions and pricing that encourage high-risk drinking</p>	<ol style="list-style-type: none"> <li>1. Collaborate with retailers to limit promotions that encourage high-risk drinking</li> <li>2. Educate merchants about the negative impacts of low pricing and promotions</li> <li>3. Use media to increase public awareness</li> <li>4. Help create or educate about policies at Colleges and workplaces that reduce high-risk drinking at parties supported by the college or employer</li> <li>5. Work with law enforcement to check compliance of pricing and promotion laws</li> </ol>	<p>-Count number of visible promotions at various stores pre and post- implementation          - Large employers of young adults and 100% of colleges receive education material about high-risk drinking at sanctioned events          -Increase number of compliance checks and violations by 25%</p>	<p>Build relationships with retailers</p>
<p>Increase knowledge of negative effects of high-risk drinking in the School and</p>	<ol style="list-style-type: none"> <li>1. Social Norms Campaign on Campuses</li> </ol>	<p>-Use college surveys to assess knowledge of students.          -Survey employees to assess</p>	<p>-Build relationships with large employers of the 18-25 year old population</p>

Workplace Environments	<p>2. Work with Schools to create or revisit comprehensive policies to reduce high-risk drinking</p> <p>3. Work with employers to maintain drug-free workplace, provide employees with materials on policies, health and occupational risks of use, and enforcement of policies</p> <p>4. Provide technical assistance to workplaces in policy creation, back-to-work agreements, treatment options, etc.</p>	knowledge	- Increase ability to evaluate employees knowledge by looking for more grant funding
Increase effectiveness of law enforcement policies & practices	<p>1. Consistent enforcement of underage drinking/furnishing and hosting laws on and off campus</p> <p>2. Distribute warning posters to remind servers of liquor and liability laws</p> <p>3. Collaborate with police and campus security to come up with policies for enforcement</p>	<p>-Use college data to assess change</p> <p>-Survey college security to assess perception of effectiveness of enforcement</p>	
Decrease access to alcohol for underage	<p>1. Provide information to a broad audience about furnishing and consequences of furnishing</p> <p>2. Advocate for alternative activities</p>		

### Summary of Strategies for: Rx Misuse

**Problem:** Misuse of Prescription drugs

**Goal:** Reduce prescription drug misuse

<b>Intervening Variable</b>	<b>Strategies</b>	<b>Benchmarks</b>	<b>CapacityBuilding Actions</b>
Increase knowledge of risk	<p>1. Educate youth and parents about the risks of misusing prescription drugs</p> <p>2. Educate general population</p>	-Use '08 and '10 MYDAUS data to assess knowledge	Create a Rx task force to build partnerships to disseminate educational material

	about proper disposal of Rx		
Increase effectiveness of prevention efforts on College campuses	<ol style="list-style-type: none"> <li>1. Collaborate with schools, enforcement, and prevention partners to put Rx misuse on the radar as a problem for youth and young adults</li> <li>2. Work with school nurses to educate student body about dangers of misusing prescription drugs</li> </ol>	-Use college data collection to assess Rx use	
Build Capacity of the Collective to address other substance abuse problems	<ol style="list-style-type: none"> <li>1. Continue to collaborate on a county-wide level through the Collective</li> <li>2. Identify funding opportunities that allow for data collection and continued assessment of substance abuse problems</li> </ol>		

### **Capacity Building Priorities**

Throughout the strategic planning process, the Collective identified areas of concern that were seemingly very problematic in Cumberland County based on the limited data available. Because of the limited data, the Collective was not able to pinpoint the contributing factors of these particular problems. Without knowing the contributing factors, strategies that could be employed to prevent these problems would potentially be ineffective because their causal factors are still unknown. Therefore, the Collective chose the following areas to concentrate on in our capacity building so that in the future the contributing factors can be identified and strategies implemented to ensure effective prevention:

1. Continued data collection on non-college 18-25 year old population
2. Continued data collection for Cocaine and creation of a task force
3. Finding consequence data for Marijuana use

### **Action Plan**

In the first year, the 4 regions of Cumberland County will be establishing the substance abuse action teams. Members of the Collective and of the Cumberland County Underage Drinking Enforcement Task Force (CCUDETTF), will be recruiting members from the local community, establishing a meeting site and time, as well as building the energy and capacity of the teams. In the first year, the teams will take on all the required OSA objectives and will also work to increase the effectiveness of school substance abuse policies. The Collective prioritized these objectives based on the importance and changeability of the objectives, as well as the capacity of the fledgling action teams to carry out the objectives in year one.

Below is the one-year Action Plan:

## One Year Action Plan

Goals	Objectives	Prevention Activities and Capacity Building Activities	Timeline	Who is Responsible	Measures
Reduce high-risk drinking among youth (12-17)	Increase effectiveness of law enforcement policies & practices	<u>Activities:</u> -Continue to support the Cumberland County Underage Drinking Enforcement Task Force (CCUDETf) in their collaborative effort to increase the effectiveness of police department policies, train officers in best practices, and publicize incidents related to underage alcohol use. -Continue to support the mini-grant process that the CCUDETf has utilized to help departments staff overtime "Party Patrol" officers on weekends and have funds to do compliance checks on alcohol retailers	Begin in Sept. '07	Substance Abuse Project Staff (Lead)  The Cumberland County Underage Drinking Task Force (CCUDETf)  The Cumberland County SPEP Collective (The Collective)	Increase the number of violations of underage drinking, Hosting, furnishing by 25% -Use '08 and '10 MYDAUS data for change in number of youth who believe that they'd be caught by police or parents, and the number of youth who believe their parents and the community disapprove of alcohol use among youth
Reduce high-risk drinking among youth (12-17)	Increase use of recommended parental monitoring practices	<u>Activities:</u> -Utilize the parental monitoring material created by OSA for distribution in a local social marketing campaign -Disseminate materials at parent events (PTA/PTO, parent teacher conferences, school activities) -Disseminate materials to Dr's offices -Advocate for school policies that employ the use of the parental monitoring materials for parents of students who do not follow the school substance abuse policies <u>Capacity Activities:</u> -Build relationships with Dr's offices, and continue to build relationships with schools	Begin in Oct. '07	OSA to provide some materials  Substance Abuse Project Staff (Lead)  The Collective  Action Teams  Community Groups and Coalitions	-Distribute materials to parents in every school district -Distribute materials to 10% of Doctor's offices -Use '08 and '10 MYDAUS data to see change in the number of youth who believe their parents and the community disapprove of alcohol use among youth
		<u>Activities:</u>			

<p>Reduce high-risk drinking among youth (12-17)</p>	<p>Increase effectiveness of retailers' policies &amp; practices that restrict underage access</p>	<p>-Build local coalitions within the county to engage with local retailers on compliance with laws, creating policies to decrease underage access to alcohol, and required trainings for employees regarding underage drinking          -Hold educational trainings for merchants/retailers on store policies, compliance checks, checking Ids, training requirements, etc.  <u>Capacity Building:</u>          -Continue to engage with retailers to get them involved on local substance abuse action teams</p>	<p>Begin in Oct. '07</p>	<p>OSA to provide info on CARD ME campaign           Substance Abuse Project Staff (Lead)           The Collective           Action Teams          Community Groups and Coalitions</p>	<p>-50 % (350 of 790) of retailers receive education materials and invitations to trainings          -10% (80 of 790) of retailers trained by end of year 1          -10% of retailers have suggested policies in place          -Use '08 and '10 MYDAUS data to assess any change in the ease of access for youth</p>
<p>Reduce high-risk drinking among youth (12-17)</p>	<p>Increase effectiveness of School substance abuse policies</p>	<p><u>Activities:</u>          -Utilize YAP programs to change school Climate through peer to peer prevention activities          -Utilize LRP programs to engage high-risk youth to foster skills for carrying out community projects that benefit peers and the community          -Support Natural Helpers programs in schools that provide peer listening and support program for youth to not use substances          -Establish youth councils as liaison's to school board, town council and policy creation boards          - Train schools how to use MYDAUS data          - Review &amp; distribute OSA school policy recommendations by Collective, regional Action Teams, and local coalitions;          Develop dissemination plans  <u>Capacity Activities:</u></p>	<p>Begin in Sept. '07</p>	<p>OSA to provide policy information for schools           Substance Abuse Project Staff (Lead)           The Collective           Action Teams           Community Groups and Coalitions</p>	<p>-Add 5 new YAP Programs          -All YAP and LRP programs administer a pre and post-evaluation          -All school districts in the county invited to a MYDAUS training          -All middle and high-schools receive educational materials regarding OSA guidelines for effective school substance abuse policies          -30% of high schools following OSA guidelines for school policies          -Use '08 MYDAUS data to see change in the number of youth who believe their school policy is an effective deterrent to alcohol use</p>

		<ul style="list-style-type: none"> <li>-Continue to build relationships with Schools</li> <li>-Get commitment from schools to continue to administer MYDAUS</li> </ul>			
Reduce high-risk drinking among young adults (18-25)	Increase knowledge of health risks of high-risk drinking	<u>Activities:</u> <ul style="list-style-type: none"> <li>-Distribute information about personalized assessment-feedback and brief intervention services</li> <li>-Media advocacy around health and safety risks of high-risk drinking</li> <li>-Work with colleges and workplaces to distribute informational materials and make an employers drug-free workplace policy known to all employees</li> <li>-Work with Colleges to create peer to peer education around risks of high-risk drinking and furnishing</li> </ul> <u>Capacity Activities:</u> <ul style="list-style-type: none"> <li>-Adapt information from colleges to workplace setting</li> <li>-Create an evaluation tool for non-college population</li> </ul>	Oct. '07	<p>Substance Abuse Project Staff (Lead)</p> <p>The Collective</p> <p>Action Teams</p> <p>Community Groups and Coalitions</p>	<ul style="list-style-type: none"> <li>-Use results from USM survey's on drug and alcohol use to see changes in knowledge</li> <li>-Create an evaluation tool to survey young adults in the broader community who may not attend college</li> </ul>
Reduce high-risk drinking among young adults (18-25)	Decrease promotions and pricing that encourage high-risk drinking	<u>Activities:</u> <ul style="list-style-type: none"> <li>-Educate merchants about negative impact and advocate for limiting promotions that encourage high-risk drinking</li> <li>-Help create or educate about policies at colleges and workplaces that reduce high-risk drinking at parties supported by the college or an employer</li> <li>-Work with Law enforcement to check compliance of pricing and promotion laws</li> </ul> <u>Capacity Activity:</u> -Increase knowledge around mitigating the negative financial effects to retailers	Begin in Oct. '07	<p>Substance Abuse Project Staff (Lead)</p> <p>The Collective</p> <p>Action Teams</p> <p>Community Groups and Coalitions</p>	<ul style="list-style-type: none"> <li>-Count number of visible promotions at various stores pre and post- implementation</li> <li>-50% (350 out of 790) of retailers receive educational material about the negative impacts of promotions.</li> <li>- Large employers of young adults and 100% of colleges receive education material about high-risk drinking at sanctioned events</li> <li>-increase number of compliance checks and violations by 25%</li> </ul>

## Sustainability

Communities Promoting Health Coalition along with the City of Portland, Public Health Division, wrote the proposal for SPF-SIG Phase III funding for Cumberland County. This grant will cover most of the cost of the strategies to meet the objectives outlined in the one-year work plan. 21 Reasons in Portland, and CPCH in the River's Region, are recipients of DFC funds. The DFC program allows these two regions to build the capacity of their substance abuse coalitions over the next few years and there is a full time substance abuse staff member available to help build that capacity. CPHC plans to write a proposal for a mentoring grant in order to receive funds for a DFC grant in the Lakes Region as well. This would enable the regions to have a full time staff person to build on the capacity of the substance abuse action teams, while the funds from the SPF-SIG would allow the action teams to have programming money to meet the objectives.

In order to fund strategies to meet the objectives on the broader 3-5 year strategic plan, various organizations on the Collective will be applying, or have already applied for funds from other grants. Any funds that an organization receives to meet the objectives on the strategic plan within Cumberland County will benefit the collective work as well. The funding sources listed below and the applicants of the grants are what is currently known. Collective member organizations are dedicated to constantly seeking out new funding sources and securing funding to meet their objectives.

<b>Funding Plan</b>				
<b>Planned activities/strategies (pull these from your action plan)</b>	<b>Estimated level of funding necessary</b>	<b>Potential funding sources</b>	<b>Steps to secure funding</b>	<b>Who is responsible</b>
Mini-grant awards to police departments to increase law enforcement policies and practices	At the minimum 10 PD's and support time <b>\$57,000</b>	SPF-SIG phase II	Completed proposal for grant	Substance Abuse Project Staff
Coalition Building in the 4 regions of the county	48 meetings at \$50 per meeting <b>\$2,400</b>	-SPF-SIG Phase II -Drug Free Communities (DFC) Grant -DFC mentoring Grant	-Proposal Completed -Already receive DFC funding in 2 regions -Will apply for DFC mentoring in '08	- Substance Abuse Project Staff -CPHC DFC staff and 21 Reasons -CPHC DFC staff
Parental monitoring campaign	\$4, 500 for radio campaign \$3,500 for materials <b>\$8000</b>	SPF-SIG Phase II	Completed proposal for the grant	Substance Abuse Project Staff

Utilize YAP and LRP programs to change school climate and increase effectiveness of school policies	10 groups at \$1000 <b>\$10,000</b>	-SPF-SIG Phase II -DFC grant	-Completed proposal for the grant -Already receive DFC funding	Substance Abuse Project Staff
Distribute information about health risks of high-risk drinking	Materials for <b>\$500</b>	SPF-SIG Phase II	Completed proposal for the grant	Substance Abuse Project Staff
Train and educate retailers to increase effectiveness of policies and practices that restrict underage drinking	Train 80 retailers for \$8 each <b>\$640</b>	SPF-SIG Phase II	Completed proposal for the grant	Substance Abuse Project Staff
Educate retailers about the negative effects of promotions and low pricing and work to engage them on coalitions	Materials for <b>\$500</b>	SPF-SIG Phase II	Completed proposal for the grant	Substance Abuse Project Staff
Implementing a "Positive Tickets" campaign	<b>\$74,000</b>	Juvenile Justice Advisory Group`	Completed proposal for the grant	OMOP staff
Build capacity of the Collective to address additional substance abuse problems	Facilitator Cocaine Task Force <b>\$5000</b>	CBDG funds Alcohol tax money Future OSA funds	Continue to Advocate for re-alignment of existing funds	The Collective
Educate legislators of the importance of substance abuse prevention in order to build the capacity of the Collective and increase the effectiveness of all activities	<b>\$50,000</b>	Drug Policy Alliance	Completed proposal for the grant	CPHC substance abuse prevention staff