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Communities that Care: Building Community to Prevent Youth Substance Use

Communities continually face new challenges related to substance use. The opioid epidemic has become a primary issue for many communities, although the challenge of preventing and responding to substance use is far from new. Along the way, communities also face changes in how teens perceive the dangers of substance use and the various ways they may access alcohol or other drugs. Policy changes may add to this difficulty; for example, marijuana is now legal in some form in 29 states, the District of Columbia, and multiple US territories. In addition to increased access, the perceived risk or harm from using marijuana has dropped (Cerda, Wall, & Feng, 2016). In response, many communities are experimenting with new substance use prevention models, and looking for how best to leverage schools and other community settings to do so.

Schools often provide a useful starting place for prevention, offering universal prevention programs that might include assemblies, group sessions on life skills or coping skills, and

RESOURCES

Communities that Care

(CTC) Research Learn more about the CTC model and the supporting evidence base.

CTC in Action: Franklin

<u>County, MA</u> Learn more about the Communities that Care Coalition in Franklin County, MA.

CTC Facilitator Training

Learn how to become a Communities that Care model facilitator.

Youth SBIRT

Learning Community

Visit IRETA's SBIRT Youth Learning community to learn more about implementing SBIRT for youth in your community.

Association of Marijuana

Laws with Adolescent Use

Check out this 2016 Study looking at the prevalence and perception of teen marijuana use. information on the risks surrounding substance abuse. While these efforts may be good starting points, researchers have noted that universal prevention messaging may fall short in changing attitudes and behaviors. For example, traditional universal prevention messaging often focuses on abstinenceonly approaches, which may not meet the needs of students at various stages of risk or use. Universal messaging also tends to equate substance use with substance abuse, and has not always been rooted in research-based facts. This, combined with "scare them straight" communication methods, can erode credibility with students (Cermak & Banys, 2016).

To increase effectiveness, some schools are taking steps to enhance prevention offerings. For example, substance use screening among students can help to target approaches based on a student's level of risk or need for support. However, some schools may not be able to conduct such screening, either because they lack the capacity to do so, or there are insufficient follow-up resources available to students who screen as at-risk.

Creating a range of prevention supports requires involvement from many community partners and stakeholders. One community-based model that has gained traction in recent years is Communities that Care (CTC). This approach is set in the community rather than a single school or clinic. It seeks to mobilize community stakeholders, including area schools and clinics, to implement a prevention system inclusive of evidence-based models such as Student Assistance Programs (SAP) or Screening, Brief Intervention, and Referral to Treatment (SBIRT) (Hawkins, Catalano, & Miller, 1992).

As an example of how CTC works in western Massachusetts, the Franklin County and North Quabbin communities came together to form the <u>Communities that Care Coalition</u> in 2002. The goal of the Coalition was to reduce youth drug use across the region. For the past 14 years, the Coalition has facilitated an annual youth drug use survey within schools, and also helps schools respond to the data, implement programs, and strategize about how to reduce use with stakeholders across the community. Collaboration efforts include public forums, steering committee meetings, and youth leadership initiatives. These efforts have been successful - since 2003, youth alcohol use decreased by 45%, youth binge drinking also decreased by 45%, youth marijuana use decreased by 31% and youth cigarette use decreased by 63% (Communities that Care Coalition, 2016).

CTC teaches us that prevention works best when the whole community is involved and when multiple prevention approaches can be used to reach students with differing needs. Coalitions like this are also well suited to interpret and respond to changing political landscapes and laws together with a range of school and community partners. We hope that communities will continue to explore new approaches to prevention, like CTC and Project Amp, that emphasize community connections and comprehensive, targeted responses based on risk.

Interested in Bringing Project Amp to Your Community?



Archived Updates

Check out archived email updates from Project Amp.

Why Project Amp?

Download the infographic and share it with colleagues.

AMPLITYING OUR FUTURES Why Project Amps Public Health Issue: Youth Substance Use ¹⁴ 70% Advance Substance Use ¹⁴ 50% Advance Substance Use ¹⁴	
result in substance use disorder and risk of other disruptive outcomes in ble	

Project Amp is currently being tested in six pilot sites. While research results are not yet available, we have gathered early lessons learned about how settings can tailor and implement Project Amp. If you are interested in Project Amp, we may be able to help in the following ways:

- Share early lessons learned
- Adapt the model to address the needs of your community
- Strategize an implementation plan designed for your setting
- Assist in identifying ways to recruit and engage mentors
- Provide training and technical support as needed

If you would like to learn more, contact Laura Winn, www.uwinn@center4si.com.

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Do you know of a clinic, hospital, or school-based health center that might be interested in Project Amp? Contact <u>projectamp4youth@center4si.com</u>.

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