



Community Action Plan

INTRODUCTION: We are a Community That Cares

The Summit County Mental Wellness Alliance uses the Communities That Care model to improve youth outcomes by galvanizing the community to come together in support of youth. Data on Summit County youth has shown the need for improvements across several realms, from increasing parent education offerings, to expanding awareness of the risks of substance use, as well as addressing the underlying causes for depressive symptoms.

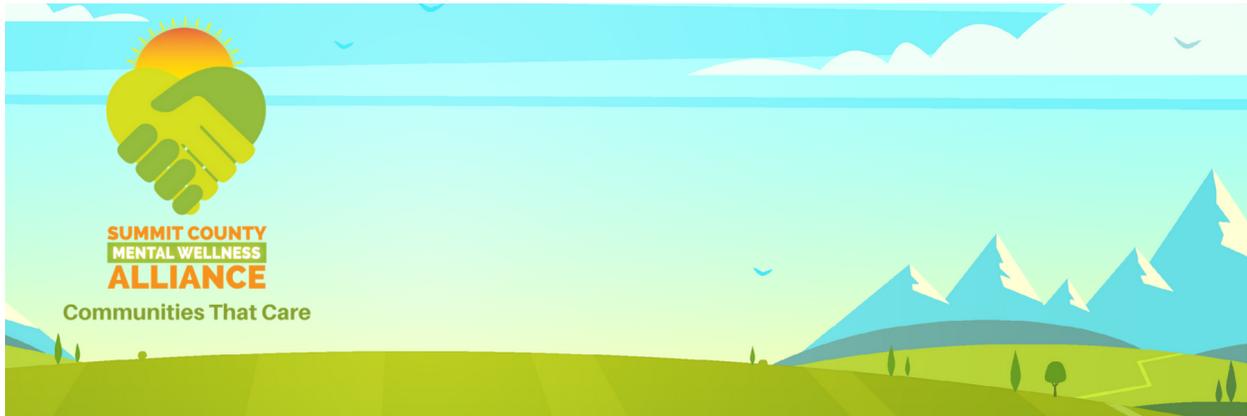
The Communities That Care model uses prevention science: an approach that focuses on preventing unwanted behaviors such as substance abuse before they happen. In line with this idea, we base our efforts on the following fundamental principles:

- Our priority outcomes and decisions must be informed by data and rigorously evaluated.
- Prevention science, working together with tested, effective programs, also known as evidence-based programs, give us the best chance of making the highest impact.
- Active participation from community members is an essential piece to strong planning and effective results. Collaboration and cooperation are key to our success.
- Everything we do must be viewed through an equity and disparities lens to ensure we are serving all of our community members.
- Shared financing will sustain the work over the long-term, dramatically changing communities and the future trajectories of our youth.

Fundamental Principles

We use these fundamental principles to meet our priorities, which were selected based on the results of the Student Health and Risk Protection Survey (SHARP):

- Help youth understand the harmful effects of substance and alcohol abuse
- Help families become strong and supportive of children
- Ensure our youth are mentally healthy



In order to improve these outcomes, we support tested, effective programs; expansion of positive community strategies; and engaging people from across Summit County.

This report summarizes the work of the Alliance's Communities That Care committee over the course of one year, while forming our path forward over the next three years (through 2021).

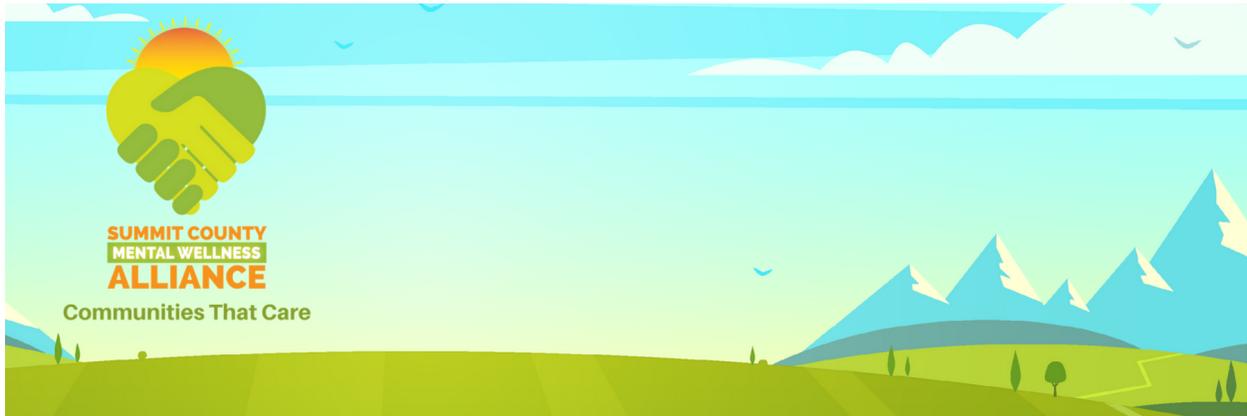
Key accomplishments to date include:

The Summit County Mental Wellness Alliance:

- Formed a committee structure involving over 250 community members.
- Hired a director for the Alliance and a coordinator for Communities That Care.
- Created a countywide Mental Wellness Strategic Plan.
- Raised city and county funding for several key elements of the plan.
- Raised over \$375,000 in private funding.
- Expanded counseling services by local nonprofits, improved a directory of mental wellness services, and increased suicide prevention and post-traumatic stress programs.
- Formed and support a youth advisory council with young people representing all three Summit County school districts.

Communities That Care has:

- Held 2 community board orientations (Spring 2017, January 2018)
- Hired Mary Christa Smith as coordinator (August 2017)
- Developed and adopted the CTC mission and vision in concert with the Alliance (September 2017)
- Summarized both SHARP and public data and the entire CTC committee unanimously selected priority risk factors. The workgroup solicited feedback and support on the recommended priorities from Key Leaders in Summit County. The full [Community Assessment Report can be viewed here](#).
- Completed a comprehensive resource assessment to identify current programs and policies targeting our priorities, as well as identify gaps in services and resources. The full [Resource Assessment Report can be viewed here](#).



- Selected “Guiding Good Choices,” a tested and effective program that targets our priorities and begins to fill the gaps in our community. (June 2018)
- Created a strategic plan, in alignment with the Alliance and the CTC process. (June 2018)

Priority Risk and Protective Factors

Priority Risk Factors

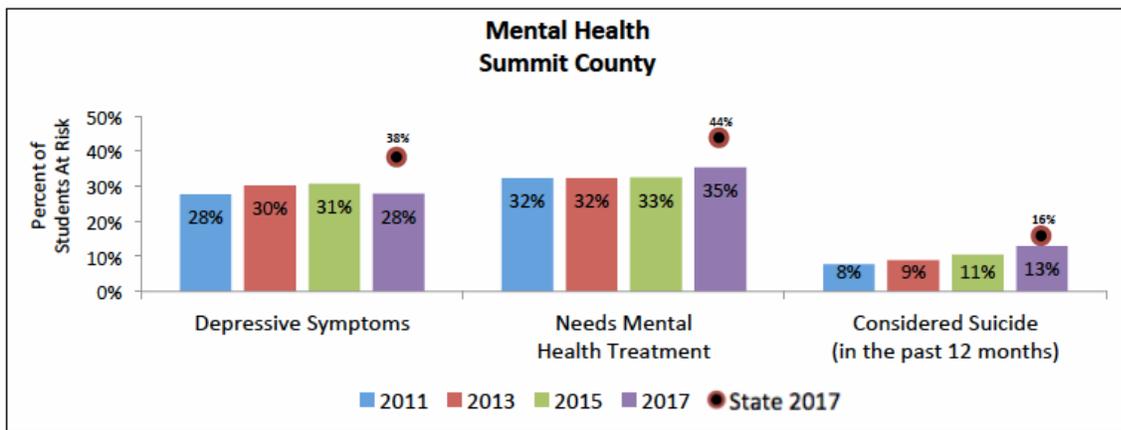
A risk factor is any attribute, characteristic, or exposure of an individual that increases the likelihood of engaging in problem behaviors. Some examples of risk factors are family history of tobacco and alcohol use, academic failure, or low attachment to school or community. Risk factors are categorized into four domains based on the sphere in which they occur: community, family, school, and peer/individual.

The priority risk factors selected by the committee were evaluated through the following lens:

- Are the risk factors above the state average?
- Are they trending up?
- Are the risk factors shared between all three school districts?
- Is the selection resonant with the community?
- Gut check – does it align with what we know as a community?



Priority Risk Factor #1: Mental health with an emphasis on depressive symptoms.



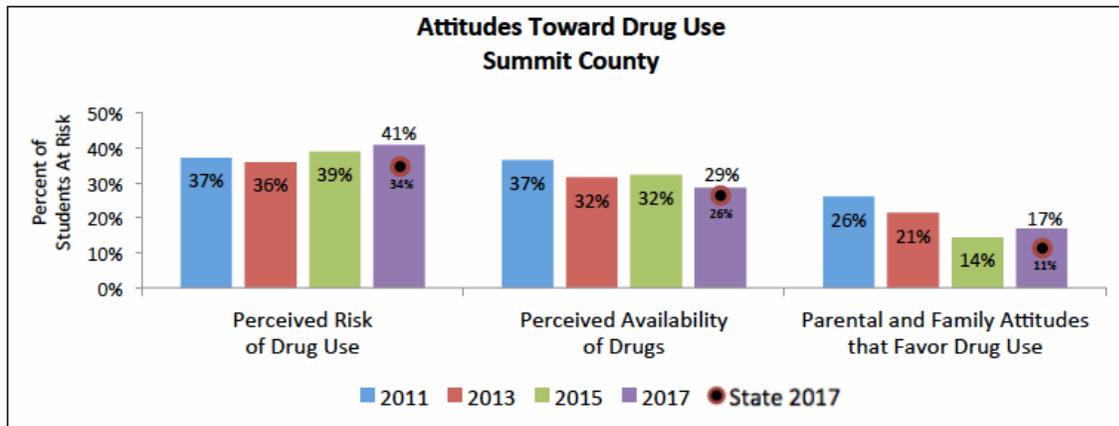
Young people who are depressed are overrepresented in the criminal justice system and are more likely to use drugs. Survey research and other studies have shown a link between depression and other youth problem behaviors. We continue to see increases in mental health indicators. Although the indicators aren't higher than the State average, they continue to trend up. The mental wellbeing of our youth is prominent within the community discourse, and a priority for prevention countywide.

Priority Risk Factor #2: Parental attitudes favorable to substance use and antisocial behavior.

In families where parents use illegal drugs, are heavy users of alcohol, or are tolerant of children's use, children are more likely to use substances during adolescence. The risk is further increased if parents involve children in their own drug (or alcohol) using behavior, for example, asking the child to light the parent's cigarette or get the parent a beer from the refrigerator.

Students continue to report a perception of their parents and families having lax attitudes towards substance use. This perception is countywide. We also know parents are asking for greater access to support and information, so they can strengthen their families. Adolescents are 50% more likely to say no to drugs and alcohol when their parents talk to them. Parents are the best line of defense.



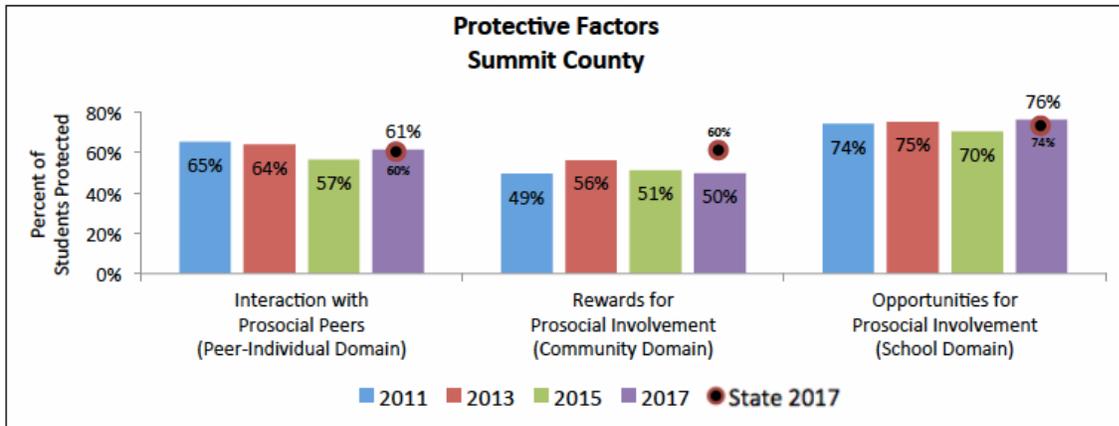
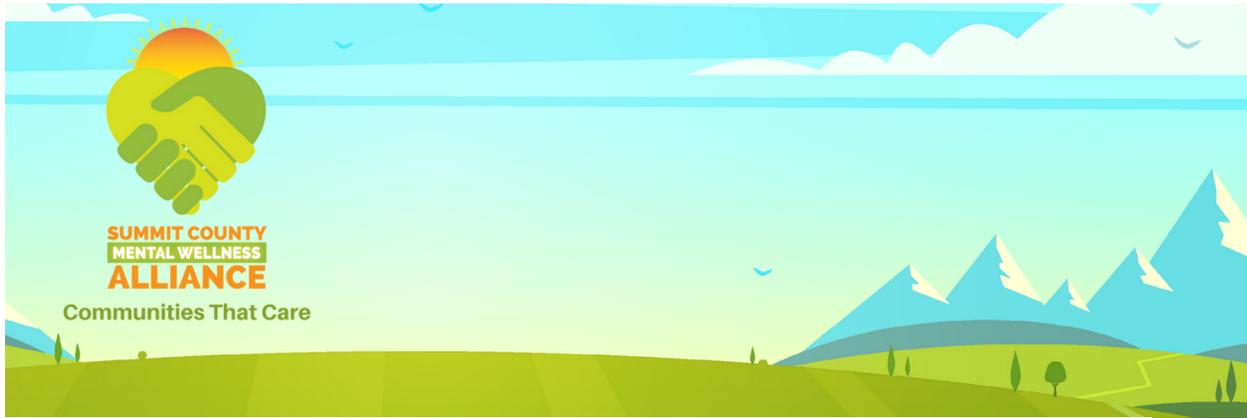


Priority Risk Factor #3: Lack of perceived risk of substance abuse

Young people who do not perceive drug use to be risky are far more likely to engage in drug use. We see this in the data and continue to hear in the community the mistaken notion that drinking and using e-cigarettes, alcohol, and marijuana are not harmful. The more risky or less accepted a drug is thought to be, the less likely it will be used by teens. There are different areas of perceived risk including physical risk, social risk, and aspirational risk. Perceived risk may vary with different drugs.

Priority Protective Factors:

Our community recognizes the importance of boosting **opportunities for pro-social involvement community wide** – in all domains. Our family domain is the highest for pro-social involvement, with 80%+ of students replying in the affirmative. Our lowest protective factor is in the community domain. Our interventions will keep in mind bolstering our strengths while addressing our weaknesses.



Priority Outcomes

Our risk factors and problem behaviors were regrouped into four priority outcomes for Summit County youth and families:

Problem behavior	Lifetime alcohol use – all grades
2017 Baseline	20.8%
Outcome statement: We will reduce lifetime alcohol use across all grades by 25% from 20.8% to 15.6% by 2021 as measured by the SHARP survey.	

Problem behavior	Lifetime e-cigarette use – all grades
2017 Baseline	6.6%
Outcome statement: We will reduce lifetime e-cigarette use across all grades by 10% from 6.6% to 6% by 2021 as measured by the SHARP survey.	

Problem behavior	Youth drinking at home with parent permission
2017 Baseline	67.7%
Outcome statement: We will reduce youth drinking at home by 15% from 67.7% (of youth reporting alcohol use) to 57.55% (of youth reporting alcohol use) by 2021 as measured by the SHARP survey.	



Problem behavior	Contemplated suicide – all grades
2017 Baseline	13%
Outcome statement: We will reduce youth contemplating suicide across all grades by 10% from 13% to 11.7 % by 2021 as measured by the SHARP survey.	

Problem behavior	Lifetime marijuana use – all grades
2017 Baseline	12.1%
Outcome statement: We will reduce lifetime marijuana use across all grades by 17% from 12.1% to 10% by 2021 as measured by the SHARP survey.	

Risk Factor	Perceived risk of substance use
Domain	2017 Baseline
Individual/peer	40.8%
Outcome statement: We will reduce the <i>perceived risk of substance use</i> indicator by 15%, from the baseline of 40.8% to 34.7% by 2021 as measured by the SHARP survey.	

Risk Factor	Parental attitudes
Domain	2017 Baseline
Family	
Parental attitudes favorable to antisocial behavior	38.9%
Parental attitudes favorable to substance use	17%
Outcome statement: We will reduce parental attitudes favorable to substance use by 12% from 17% to 15%, and we will reduce parental attitudes favorable to antisocial behavior by 15% from 38.9% to 35% by 2021 as measured by the SHARP survey.	

Risk Factor	Depressive Symptoms
Domain	2017 Baseline
Individual/peer	27.8%
Outcome statement: We will reduce depressive symptoms by 15% from 27.8% to 23.63% by 2021 as measured by the SHARP survey.	



Protective Factor	Opportunities for pro social involvement in all domains	
Domain	2017 Baseline	
Family	84.2%	
Community	49.4%	
School	76.3%	
Individual/peers	69.8%	
Average of all domains	70%	
Outcome statement: We will increase opportunities for prosocial involvement in Summit County across all domains by increasing our average 20%, from the baseline average of 70% to an average of 84% by 2021 as measured by the SHARP survey.		

RESOURCE AND GAP ASSESSMENT

Once we established its priorities, the Resource Assessment workgroup reviewed programs available in the Summit County area that address the priority risk factors and problem behaviors. Workgroup members surveyed service providers to better understand which programs may be tested and effective, and which may address the Coalition’s identified priorities. More in-depth interviews were then conducted for a subgroup of the programs that seemed to meet these criteria.

After programs were identified and reviewed, the workgroup mapped the programs according to priority factor, age group served, and domain (the setting where the program is implemented, for example, in school or at home). Programming gaps were then identified.

Gaps identified by the Resource Assessment workgroup include a lack of tested and effective programs for parents, as well as a gap in opportunities for pro-social involvement on the East Side of Summit County.

A full breakdown of reviewed programs can be found in the [Resource Assessment Report](#).





Coalition-Approved Strategies

The Coalition approved general recommendations from the Resource Assessment workgroup outlining how we can work with the broader Summit County community around our selected priorities over the next three years. These include:

- Implement Guiding Good Choices as a tested and effective program in Summit County.
- Support and expand existing programs, interventions and initiatives in our community which are currently addressing our priorities. These strategies may include:
 - Publicly recognizing specific programs as contributing to our CTC goals.
 - Offering political and social support (advocacy) to expand those programs where needed.
 - Providing pathways for the implementing organizations to seek additional funding to expand or improve their programs; this might include technical assistance (help with grantwriting or finding sources of support) and/or direct funding through governmental and/or philanthropic funds raised by the Alliance.
- Expand opportunities for pro-social involvement on the East Side of Summit County.

TESTED, EFFECTIVE PROGRAMS

Many in society cling to the adage, “it’s better to do something than nothing.” Unfortunately, some programs implemented with the best intentions do more harm than good or use scarce resources for programs that do not get the desired results. The prescribed approach of Communities That Care is evidence-based, which requires supporting programs that deliver proven results. There are numerous advantages to using tested, effective programs, but the biggest may be the assurance that the programs work, and that we will see tangible and lasting results.

Tested, effective programs offer materials and curriculum that guide what should be delivered, to whom, when, where, and how. The materials often include protocols and checklists for monitoring implementation so providers can ensure the program is being implemented the way it was designed, thus improving ultimate results. Training and technical assistance are also available. A tested, effective program is often more time and





cost-efficient, and has increased chances of strong results, than developing a home-grown program.

Based on the data prioritization and the resource gap assessment we have selected a tested, effective program for implementation: Guiding Good Choices.

Guiding Good Choices

Guiding Good Choices (GGC) is a family competency training program for parents of children in middle school. The program contains five two-hour weekly sessions. Children are required to attend one session that teaches peer resistance skills. The other four sessions are solely for parents and include instruction on: (a) identification of risk factors for adolescent substance abuse and a strategy to enhance protective family processes; (b) development of effective parenting practices, particularly regarding substance use issues; (c) family conflict management; and (d) use of family meetings as a vehicle for improving family management and positive child involvement. This program serves families with middle-school-aged children and addresses alcohol use, depression, and poor family management.

We will identify a corps of community members and provide facilitator training. The corps of trained facilitators will work together to develop the action plan regarding:

- Timing of trainings in each of the three school districts in Summit County
- Selection of locations within the community for classes to be held
- Program participant level outcomes
- Work with the Alliance communication and marketing committee, along with school districts, for promotion.

Our goal is to eventually serve 20% of the parent population of students in the last year of elementary school in every elementary school in Summit County in both English and Spanish.

Starting in late 2018/early 2019, the five-session GGC program will be held throughout the school year. We will work with South Summit, North Summit, and Park City School Districts to recruit youth and their parents through proven, effective communication methods.





EVALUATION PLAN

How do we know our work is making a positive difference for Summit County youth? As part of our commitment to data-informed decision-making, we place great value on gathering data and using evaluation techniques to ensure our efforts are getting us to our goals. We evaluate three general areas:

1. Community-level outcomes
2. Program participant outcomes
3. Process outcomes, including program fidelity

Data, Outcomes, and Evaluation

Community-level outcomes build off our priorities from the Student Health and Risk Protection (SHARP) Survey. Every two years, upon release of the survey data, the Data & Evaluation workgroup gathers to assess whether we have made progress towards our priority outcomes.

Program participant outcome evaluation looks to see if the programs and policies we are implementing are having their desired effects on the people participating. For example, we hope that families participating in our Guiding Good Choices program will emerge with improved family management skills. Participant outcome evaluation allows us to measure and test that goal.

Process evaluation involves assessing how the Communities That Care process is working within Summit County. Are the central principles of our work spreading amongst the community and government leaders? Do people better understand and accept data-informed decisions and community engagement?

Process evaluation also considers how well our tested, effective programs (TEPs) are being implemented. TEPs must be implemented as they were designed, in other words, “with fidelity” to the original design intentions. Our fidelity assessments allow us to work with our service provider partners to ensure the programs we support are being implemented in the best way we know how.



We value the work of our entire coalition, and will work with all of our members to create a pathway for assessing and reporting the work of our partners in addressing our priorities.

STRATEGIC FINANCING

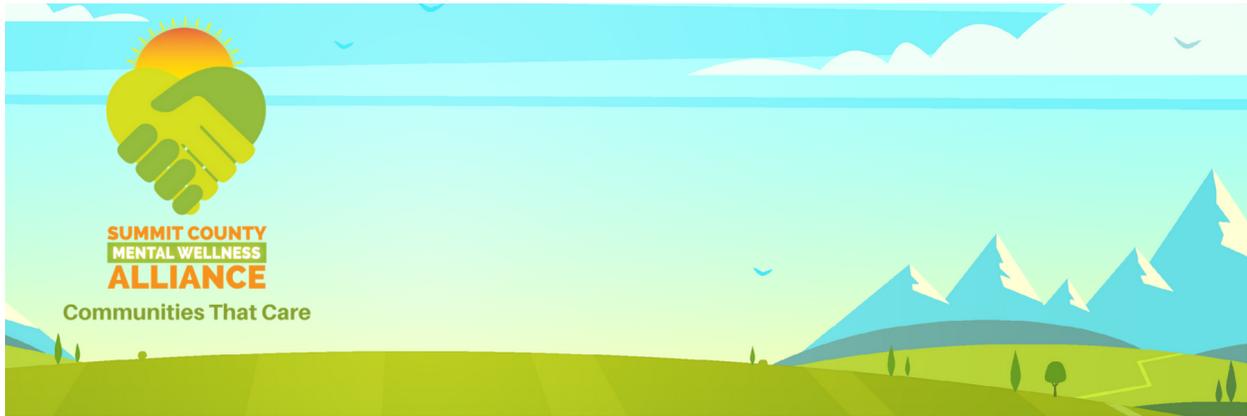
A budget and finance plan is key to the sustainability of the Alliance and our youth work. A development and fundraising committee is part of the Alliance structure and will be tasked with creating a strategic plan for funding our programs. We have seed money from the generous Katz/Amsterdam gift to allow us to launch Guiding Good Choices for one year.

CONCLUSION AND NEXT STEPS

With all of the accomplishments the Alliance has achieved in the past two years, there is still much work to be done. We now have the vision, the tools, and the plan to walk that path. Our balanced approach brings together data and evaluation; prevention science and tested, effective programs; equitable community collaboration; and strategic financing to positively affect the whole Summit County community, now and long into the future.

In line with our fundamental principles, our immediate next steps include:

Objective: Provide the “Guiding Good Choices” program for parents and youth throughout Summit County					
	Q3 2018	Q4 2018	Q1 2019	Q2 2019	Q3 2019
Identify organizations and agencies interested in providing GGC	X				
Recruit a community corps to be trained in GGC program	X				
Secure funding for GGC training and implementation for year 1	X	X			
Offer GGC training to community corps		X			
Develop implementation plans		X			
Schedule GGC classes throughout Summit County			X		



Develop evaluation plans			X		
Implement and evaluate GGC classes				X	X
Secure funding for GGC for year 2					X

Objective: Support and expand the work of coalition members who are addressing our priorities and aligned with our desired outcomes.					
	Q3 2018	Q4 2018	Q1 2019	Q2 2019	Q3 2019
Identify organizations and agencies whose work targets our priorities	X				
Develop a workgroup to create a reporting tool for all coalition organizations to report their progress	X				
Develop and share presentations for coalition members to take into the community to educate and inspire residents	X	X			
Form a workgroup to develop a framework for cooperation and support amongst the coalition		X			

Communities are so much greater when they come together in support of something worthwhile. And there is nothing more worthwhile than our kids.