

PA Prevention
Needs & Resource Assessment

User Manual for SCAs

2018-2019

www.episcenter.org/ddap



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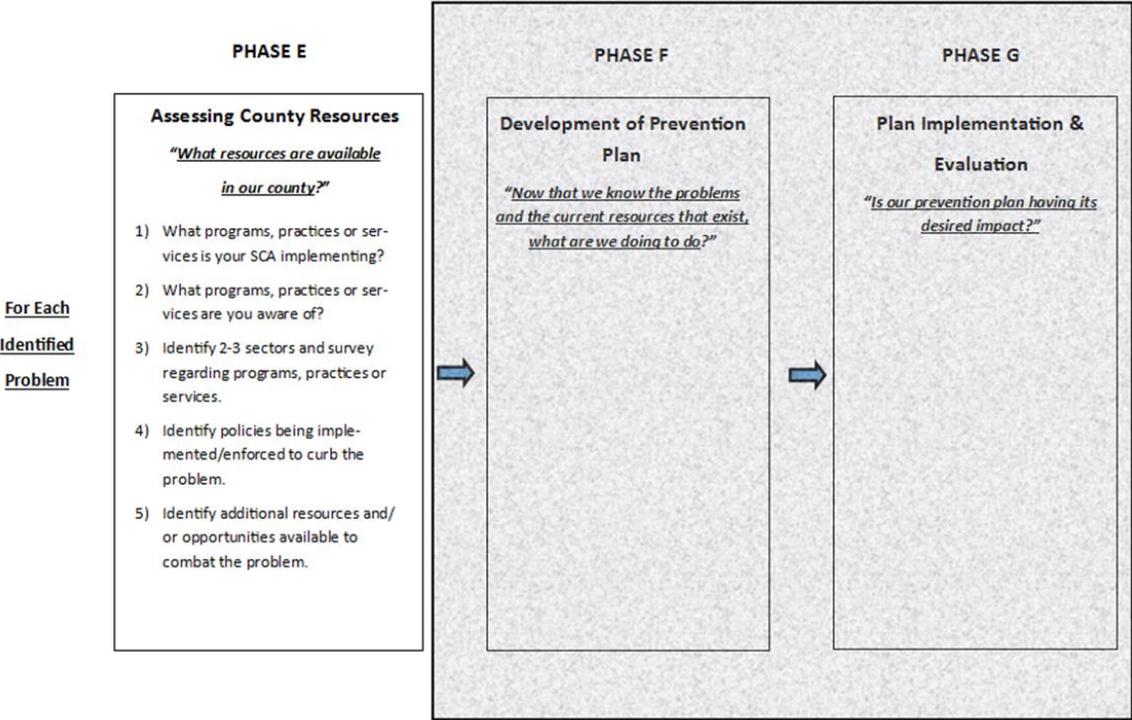
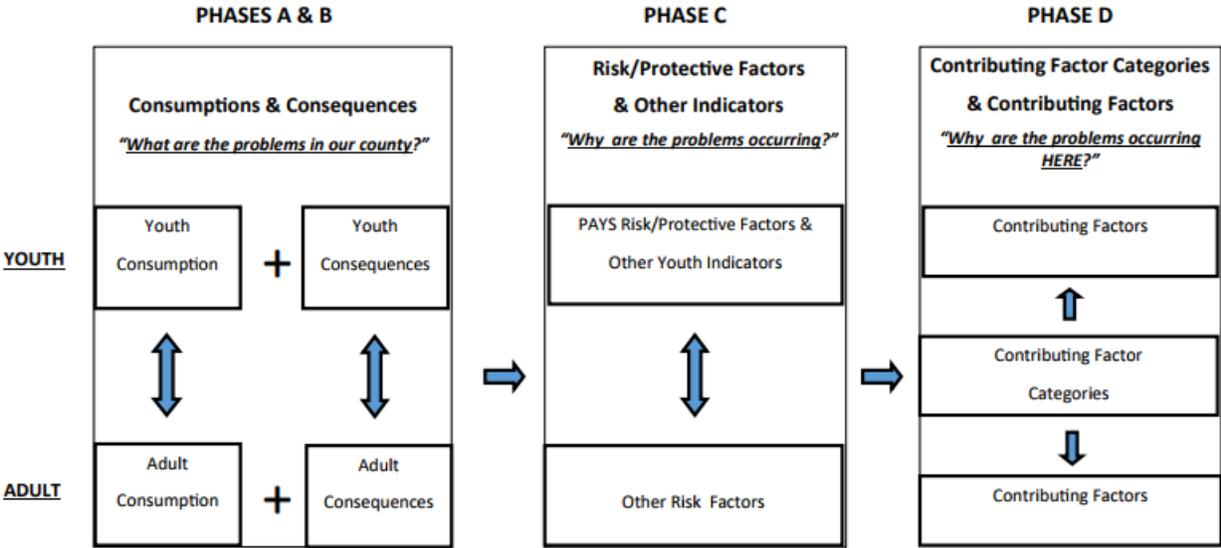
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NEEDS/RESOURCE ASSESSMENT TIMELINE

Phase	SCA Completion Due Date	DDAP Approval Due Date
<u>NEEDS ASSESSMENT</u>		
Phases A-C	12/14/18	1/18/19
Phase D – Steps 1-3	3/1/19	3/29/19
Phase D – Step 4	5/17/19	5/31/19
<u>RESOURCE ASSESSMENT</u>		
Phase E	7/19/19	8/9/19

SCAPrevention Needs Assessment and Plan Logic Model

SCA Prevention Needs Assessment & Plan



Getting Started:

What you need to know...

WHY DO A NEEDS ASSESSMENT?

Completing this county-wide needs assessment will allow your assessment team to gain a greater understanding of the high-risk **consumption** behaviors within your community as well as the social, economic, and health **consequences** associated with substance use. Through the use of your county data, you will identify the specific **risk and protective factors**, attitudes, and perceptions driving substance use and abuse within your county. This information will provide your team with a strong foundation to engage key stakeholders in data-driven discussion around the specific **contributing factors** that are influencing these behaviors in your community and across the lifespan.

Engaging in this needs assessment process should provide you with the quantitative and qualitative data necessary to allow your county to target specific needs, assess and maximize current resources, and strengthen the prevention infrastructure in the areas needed most.

COMMON TERMS:

PAYS: Pennsylvania Youth Survey

Consumptions: The overall use of alcohol, tobacco and other substance use/abuse within a county (Example: Past 30 day alcohol use rates)

Consequences: The social, economic and health problems associated with the use of alcohol, tobacco and other drugs (Example: DUI Arrest Rate Per 100,000 Population)

Magnitude: Which problem seems to be the largest? (Be careful of small numbers.)

Comparison: How does the community's/county's problem compare to surrounding or similar communities/counties or the state?

Severity: What is the severity of the problem (e.g. How bad is the outcome? Is it resulting in mortality? Is it more costly?)

Time-trend: Is the problem getting worse over time or is it getting better over time?

Risk Factor: Conditions that increase the likelihood that a person will become involved with drug use, delinquency, school-dropout, anxiety/depression, teen pregnancy, and/or violence (Example: Perceived Availability of Drugs)

Protective Factor: Conditions that buffer an individual from exposure to risk
(Example: Family Attachment)

Level of Importance: Being of great significance or value – How much is the risk/protective factor influencing the problem? Does it influence other behavioral health issues? Does it directly impact the developmental stage of the population?

Changeability: Being such that alteration is possible; capacity to influence a specific risk or protective factor – Is there adequate capacity to change the risk/protective factor? Does a suitable evidence-based intervention exist?

Problems: Brief description of the specific issue(s) (consumptions/consequences) that need to be addressed and investigated by the assessment team

Contributing Factor Categories: Community domains that specific contributing factors can be categorized within. For example, a contributing factor such as *Rite of Passage*, could be categorized within the “Social Norms” Contributing Factor Category.

Contributing Factors: The specific factors or characteristics that contribute to or increase the substance use related problems in the community. Contributing factors answer the question, “But Why Here?”

Rates and Percentages:

A rate is a ratio comparing any number of persons meeting a given criteria against a specific number of persons *within a population*.

It is important to note here that within the definition there are two important values that makeup the rate. First, is the number of persons meeting the criteria (the numerator) and second is the specific number of persons (the denominator) within a population.

$$\frac{14}{1000} = \frac{(numerator)}{(denominator)}$$

For example, if we say the teen pregnancy rate is 14 per 1,000 females, we are saying that for every 1,000 teenage girls (specific number of persons), we can expect that about 14 (any number of persons) have experienced teen pregnancy. Another thing to note within the definition is that the rate occurs *within a population*. This is important because we know that the population is much larger than 1,000. Luckily, we can convert rates to estimated numbers within a population.

Rates are standardized and are typically out of 100, 1,000, 10,000, 100,000, etc. Since this is the case you can convert from one standardized rate to another by moving one decimal place, in both numbers. For example, 14 per 1,000 is the same as 1.4 per 100, or 140 per 10,000, or 1,400 per 100,000.

$$\frac{1.4}{100} = \frac{14}{1000} = \frac{140}{10000} = \frac{1400}{100000} = \frac{(\text{numerator})}{(\text{denominator})}$$

Notably, when the rate is per 100 it also equals the percentage of the population. This is the ONLY time the rate equals the percentage. For example, a rate of 25 per 1000 is NOT 25%, but it is 2.5%. For teen pregnancy, a rate of 14 per 1000 is equal to 1.4%.

When viewing rates in the Needs Assessment tool, you will encounter rates expressed as percentages, rates per 100, 1000 and so forth. It is important to recognize that these values are not equal and some conversion may be needed if you want to compare two different standard rates.

Odds Ratio:

An odds ratio is a measure of association between two values. In our case we can think of this as a relative measure of association that allows us, for example, to compare two rates between county and state. Thus, we can use the odds ratio as a way to interpret the likelihood of a risk factor or outcome for a given county relative to that of the state.

$$\frac{\text{County rate}}{\text{State rate}} = \frac{(\text{numerator})}{(\text{denominator})} = \text{OR}$$

To get the odds ratio of the county relative to the state we divide the county rate (numerator) by the state rate (denominator). So in the example above, the rate of teen pregnancy for the state was 14 per 1000. To illustrate how we get different odds ratios let's assume three hypothetical counties that we want to compare to the state. County A's teen pregnancy rate is 15 per 1000 females. County B's teen pregnancy rate is 28 per 1000 females. County C's rate is 10 per 1000 females.

$$\text{County A } \frac{15}{14} = 1.07 \text{ Odds Ratio}$$

For County A, the odds ratio is > 1 so we can say that the county's teenage girls are 1.07 times more likely than the state's to experience teenage pregnancy.

$$\text{County B } \frac{28}{14} = 2.00 \text{ Odds Ratio}$$

For County B, the odds ratio is also > 1 so we can say that that the county's teenage girls are 2 times more likely, or twice as likely, than the state's to experience teenage pregnancy.

$$\text{County C } \frac{10}{14} = 0.71 \text{ Odds Ratio}$$

For County C, the odds ratio is also < 1 so we can say that that the county's teenage girls are 0.71 times less likely, than the state's to experience teenage pregnancy.

Note that if the odds ratio is > 1 then we can assume that the county is more likely than the state. If the odds ratio is < 1 then the county is less likely than the state. If the odds ratio is $= 1$ there is an equal likelihood between the county and the state.

- Within the tool, in areas where your county-level rates exceed that of the state rate, the “county/state comparison” will auto-highlight in **yellow** (lower-risk: 1.05 – 1.1 above state rate), **orange** (moderate-risk: 1.11 – 1.14 above state rate) or **red** (high-risk: 1.15 or more above the state rate) to provide a visual cue that it may warrant further discussion or closer attention. However, just because a county rate exceeds the level of the state in a given area, does not mean it should be immediately prioritized; you will want to consider such things as ***magnitude, comparison, severity, level of importance, changeability and time-trend(s)***.
 - Additionally, be sure to think about whether the difference between the county and state rate is meaningful from a practical perspective and not just a statistical perspective; (e.g. is a difference of 0.5% versus 1% of youth using a given substance, a meaningful difference)?

When interpreting the odds ratio it is also important to take the outcome or risk factor into consideration; thus, either more likely or less likely may be desired given the outcome. For instance, a county having a high school graduation rate that is 3 times more likely than the state is desired. However, high school dropout rate that is 3 times more likely than the state may be undesired.

Getting Started:

Preparing to Conduct Your Needs Assessment

TOOLS USED

- SCA Needs Assessment Excel Tool: "Preparation" Tab

ESTABLISH AN ASSESSMENT TEAM

- Prior to attending training, you should establish an assessment team of approximately four to six members that will focus on identifying the problems (consumptions and/or consequences) to prioritize for change over time in your county. Your assessment team will also work to identify the risk and protective factors, as well as the contributing factors, believed to be most influencing the consumptions and/or consequences of concern in your county.
- Once you have established your team, you should document their Name, Agency/Organization and Team Roles/Responsibilities into the appropriate space within the Preparation tab on your excel tool.

Assessment Team		
Member Name	Agency/Organization	Roles/Responsibilities:

- This team will serve as the foundation for completing your needs assessment within your county and at least two team members are required to attend the initial training. The training will provide a detailed overview of all of the steps the team needs to complete within each phase of the process.
 - Your assessment team should consist of a small group of individuals within your SCA, or that work closely with your SCA, that will be easy to assemble on a regular basis. You will need someone on the team that is data savvy, and has experience with Microsoft Excel. You should also have someone on your team who has experience completing a community needs assessment, such as a community mobilizer, as well as an individual that is currently implementing prevention services.
 - As you complete Phases A – C, and have questions around data analysis, evaluation, and/or discussion, or even if you would like to present your preliminary findings, you are urged to contact key stakeholders in your

community for their input and expertise. For example, if you have questions around consequence data that is difficult to interpret, you may contact someone at the local law enforcement level to assist you; or if you have questions about safe schools data, you may wish to reach out to a school-district representative and engage them in the needs assessment process. *You are strongly encouraged to connect with stakeholders in your community as you complete this needs assessment.*

ASSESS COUNTY PAYS PARTICIPATION

- Prior to attending training, you will need to access your most recent County PAYS report and have a copy available for the needs assessment process. Within your excel tool, you are required to document the number of youth respondents that participated in the survey as compared to the total student enrollment in all schools, to provide you with an overall participation rate in your county. Collecting this information will help to understand how representative your PAYS data is to the county as a whole. You can find this information on page 6 of your county report.

PAYS County Participation: Please see page 6 of your County PAYS report and enter the following information for your County:						
Grade	County 2017			State 2017		
	Surveys	Enrolled In All Schools*	Modified Participation Rate	Surveys	Enrolled In All Schools*	Modified Participation Rate
6			#DIV/0!	62,971	124,825	50.4
8			#DIV/0!	70,214	125,263	56.1
10			#DIV/0!	65,164	129,924	50.2
12			#DIV/0!	55,217	124,223	44.4
Total	-	-	#DIV/0!	253,566	504,235	50.3
Identify school-districts not participating in the PAYS:						

RECORD COUNTY CENSUS DATA

- In addition to recording your PAYS participation data, you will also need to enter your *county quick facts* data from the US Census Bureau into the tool. As previously stated, reviewing this data will assist you in understanding how representative your PAYS data is to your overall county, and will also help to understand the overall demographic make-up of your county as you complete the needs assessment process.

US Census Bureau - 2017 County Quick Facts			
Population	#	Age	%
2017 Estimate		Under age 5	
		Under age 18	
		65 and Over	
Race	%	Race -cont'd	%
White Alone		Native Hawaiian	
Black Alone		Two or More	
American Indian		Hispanic/Latino	
Asian Alone			
Income	(\$) - (%)	Education	%
Median Income		HS Graduate +	
Persons in Poverty		Bachelor's Degree +	

GATHER CURRENT/PAST NEEDS ASSESSMENTS

- Connect with the local collaborative boards (e.g. CTC, DFC) operating within your county as well as other local organizations such as hospitals, the United Way and Community Action Agencies to obtain copies of current and/or previous needs assessments. This information will assist you in looking at trends over time and help you to understand how previous priorities may have changed over time.

PHASES A & B:

Collect County Consumption & Consequence Data

GENERAL INFORMATION

- Your assessment team has seven (7) weeks from the final in-person training to complete Phases A – C. You will complete Phases A – C by December 14, 2018.
- The team’s primary goal in **Phase A** will be to collect, analyze, and discuss youth and adult consumption data in your county. At the conclusion of this phase you will have completed Consumption tabs 1 – 3 within the excel tool and should have preliminarily prioritized 3 – 5 youth and 2 – 3 adult consumptions of concern within your county.
- The primary goal for the assessment team in **Phase B** will be to collect, analyze and discuss youth and adult consequence data within your county. At the conclusion of this phase you will have completed the Youth and Adult Consequences tab(s) within the excel tool and will have preliminarily prioritized 2 – 3 youth consequences and 2 – 3 adult consequences of concern within your county.
- If you have questions as you work through this process, contact your DDAP Program Analyst for technical assistance. Once you complete this phase, you will move on to Phase C – Collect and Analyze Risk and Protective Factors.
- **JOINDERS:** Joinder SCAs are required to have a separate tool for each county, and all consumption and consequence data should be entered into its respective tool. If one of your counties does NOT have PAYS data, given the similarities many joinder counties share, it is ok to utilize the PAYS data from the other county(ies) to help inform your consumption behaviors.

COMMON TERMS

- **Consumptions:** The overall use of alcohol, tobacco and other substance use/abuse within a county
- **Consequences:** The social, economic and health problems associated with the use of alcohol, tobacco and other drugs.
- **Magnitude:** Which problem seems to be the largest? (Be careful of small numbers.)
- **Comparison:** How does the community’s/county’s problem compare to surrounding or similar communities/counties or the state?
- **Severity:** What is the severity of the problem (e.g. How bad is the outcome? Is it resulting in mortality? Is it more costly?)
- **Time-trend:** Is the problem getting worse over time or is it getting better over time?

TOOLS/WORKSHEETS USED

- SCA Needs Assessment Excel Tool: “Consumption Tabs 1-3” – (Image A1)
- Consumption 1, 2 and 3 – Worksheet(s) – (Image A2)
- SCA Needs Assessment Excel Tool: “Youth and Adult Consequences” Tab – (Not Pictured)
- Youth & Adult Consequences Discussion Worksheets – (Not Pictured)

Image A1

Phase A - YOUTH CONSUMPTION		PAYS Web Tool				
YOUTH CONSUMPTION - Early Use						
Early Initiation Drugs - 30 day						
	Alcohol	Marijuana	Inhalants	Cigarettes	Smokeless Tobacco	Vaping/E-Cig
County:	19	10.46	1.27	5.2	2.27	13.33
State:	18.23	9.38	1.26	6.44	4.07	15.53
County compared to State:	1.04 x more	1.12 x more	1.01 x more	0.81 x less	0.56 x less	0.86 x less
Self-Select "High Risk":	Yes					
6th:						
8th:						
10th:						
12th:						
Early Initiation Drugs - Lifetime						
	Alcohol	Marijuana	Inhalants	Cigarettes	Smokeless Tobacco	
County:	42.05	18.94	4.35	14.38	5.19	
State:	43.86	17.28	4.5	16.25	8.41	
County compared to State:	0.96 x less	1.10 x more	0.97 x less	0.88 x less	0.62 x less	
Self-Select "High Risk":						
6th:						
8th:						
10th:						
12th:						
Early Initiation Drug Notes:						

CONSUMPTIONS 1, 2 & 3

Image A2

Consumption 1 – Early Initiation/Prescription Drugs

(PHASE A – Worksheet 1)

What are the top 3-5 most used substances in the past 30 days? What are the top 3-5 most used substances in lifetime?
Which items showing as above the state rate stand out as potential concerns and why? (Items of very low magnitude that are above the state rate may be less of a concern as they are impacting very small numbers of people.)
Which items stand out as a potential concern due to the severity of their consequences (e.g. resulting in many arrests, deaths, etc.)? List the item and the related consequence. (You can examine the data in the consequence tabs to gauge potential consequences.)

STEP ONE: GATHER & ANALYZE COUNTY CONSUMPTION & CONSEQUENCE DATA

DATA ENTRY

- You will begin to assess county risk by analyzing multiple layers of youth and adult consumption and consequence data. It is important to carefully enter your county-level data into the appropriate tab(s) within the excel tool.
- **Early Initiation/Prescription Drug** data should be entered into the **Consumption 1** tab and **Other Drugs/Gambling** data should be entered into the **Consumption 2** tab. You will need to have a copy of your county PAYS report available to complete this step, or you may utilize the Bach-Harrison [PAYS Web Tool](#).
 - If your county has *limited* PAYS data (one or more school-districts did not participate), you might consider holding a youth focus group for those students (grades 6, 8, 10 and 12) in the non-represented districts to ensure good overall representation within your county.
 - **JOINDERS:** If a county within your joinder does not have a county PAYS report, or an accessible school-district level report, the PAYS items for that county do not have to be entered into that county's respective tool. Given the similarities many of our joinder counties share, it is ok to utilize the PAYS data from the other county(ies) to help inform your consumption behaviors. You may also enter other youth data you have available. Team discussion questions and priority selections should be made to the best of your ability with the data that you have.
- **Adult consumption** data should be entered into the **Consumption 3** tab. Adult level data is available only regionally per the BRFSS and NSDUH data reports, and teams should incorporate additional sources of localized adult consumption data into the excel tool when available. There is a link provided within the tool to find the most recent NSDUH data. (If you don't believe that your county is "similar" to the region it is represented within, you do not have to place much emphasis on this data.)
- **Youth and adult consequence** data should be entered into their respective tabs within the excel tool. Specific data points have been provided for all counties to review, and a link to the data source, as well as the state rate/average have been provided when available.
- In the **prep-phase** (prior to attending Needs Assessment training), your team was encouraged to identify additional local-level consequence data points. Data sources such as local EMS, Hospital/Emergency Room, Magisterial District Court dispositions, etc. would all be good places to look for additional localized consequence data.

- Additional space has been provided within each of the tabs to enter additional localized consumption and/or consequence data when available. If you need more space, please contact the EPISCenter at episcenter@psu.edu.

ADDITIONAL SPACE

Need additional space to add localized data? Use the spaces below to add in relevant data that you would like to review.

- In areas where your county-level consumption and/or consequence rates exceed that of the state rate, the “county/state comparison” will auto-highlight in **yellow** (lower-risk), **orange** (moderate-risk) or **red** (high-risk) to provide a visual cue that it may warrant further discussion or closer attention, and may ultimately be a problem that your team may select to prioritize for change.

Early Initiation Drugs - 30 day		
	Alcohol	Marijuana
County:	18.13	10.46
State:	18.23	9.38
County compared to State:	0.99 x less	1.12 x more
Self-Select "High Risk":		

- For each consumption and/or consequence behavior, you have the flexibility to self-select/highlight areas of risk based on factors such as magnitude, severity and time trends. A good rule of thumb is to start with the consumptions or consequences that are highest overall or impacting the most youth overall within your county.

	Alcohol	
County:	19	
State:	18.23	
County compared to State:	1.04 x more	
Self-Select "High Risk":	Yes	

- NOTE: Within the **Consumption 1** tab, when your overall county rate/average is of elevated risk as compared to the state, you will enter grade level data into the tool.

Consumptions that are self-selected are also required to have the grade-level data entered into the tool. This allows you to see which grades are most impacting the early initiation/prescription drug data within your county, which will assist you in the later prevention planning stages.

	Alcohol
County:	24
State:	18.23
County compared to State:	1.32 x more
Self-Select "High Risk":	
6th:	8
8th:	21
10th:	38
12th:	42

TEAM DISCUSSION

- Once all consumption and consequence data is entered into the correct tab(s), your assessment team should begin to work through the questions provided for further discussion in your *Consumption and Consequence Worksheet(s)*. It is important to note that just because a consumption and/or consequence behavior appears to be of elevated risk as compared to the state, it does not mean you immediately prioritize it for change in your county. *Team discussion is important to drilling down priorities for change in your community.*
- The questions provided will advise your team to think about trends over time, subpopulations and/or age groups that are impacting the data, as well as areas where you might need to collect more information via qualitative discussion (i.e. Community Conversations). If you do not have the data or resources to answer a specific question, please indicate that in the space provided. The final responses from the discussion questions should be entered into the appropriate space available within the excel tool.

What are the top 3-5 most used substances in the past 30 days? What are the top 3-5 most used substances in lifetime?
Which items showing as above the state rate stand out as potential concerns and why?
Which items stand out as a potential concern due to the severity of their consequences (e.g. resulting in many arrests, deaths, etc.)? List the item and the related consequence.

DATA GAPS - What are we missing?

WRAP UP

- Once you have completed all of the steps within this phase and have prioritized consumptions and consequences of concern, you are now ready to move on to Phase C. If you have questions or concerns regarding your work within Phases A or B, contact your DDAP Program Analyst before moving on to Phase C.

PHASE C:

Identify Risk & Protective Factors and Other Indicators

GENERAL INFORMATION

- Your assessment team has seven (7) weeks from the final in-person training to complete Phases A – C. You will complete Phases A – C by December 14, 2018.
- The primary goal in Phase C will be to collect, analyze and discuss risk and protective factor data and other risk indicators within your county. At the conclusion of this phase you will have completed the PAYS Risk & Protection, PAYS Indicators, and Other Risk Factor Data tab(s) within the excel tool and will have preliminarily prioritized the risk and protective factors and other indicators within your county that are *impacting the consumptions and consequences previously analyzed in Phase A & B.*
- If you have questions as you work through this process, contact your DDAP Program Analyst for technical assistance. **Once you complete this phase, you will submit your excel tool to your DDAP program analyst via the DDAP-SCA Information Portal for their review of Phases A – C, before moving on to Phase D.**
- **JOINDERS:** Joinder SCAs are required to have a separate tool for each county, and all risk and protective factor data should be entered into each county's respective tool. If one of your counties does NOT have PAYS data, given the similarities many joinder counties share, it is ok to utilize the PAYS data from the other county(ies) to help inform your risks/needs.

COMMON TERMS

- Risk Factors: Conditions that increase the likelihood that a person will become involved with drug use, delinquency, school-dropout and/or violence
- Protective Factors: Conditions that buffer an individual from exposure to risk
- Level of Importance: Being of great significance or value – How much is the risk/protective factor influencing the problem? Does it influence other behavioral health issues? Does it directly impact the developmental stage of the population?
- Changeability: Being such that alteration is possible; capacity to influence a specific risk or protective factor – Is there adequate capacity to change the risk/protective factor? Does a suitable evidence-based intervention exist? Can change occur in a reasonable amount of time?

TOOLS/WORKSHEETS USED

- SCA Needs Assessment Excel Tool: "PAYS Risk & Protection" Tab – (Image C1)
- SCA Needs Assessment Excel Tool: "PAYS Indicators" Tab – (Image C2)
- SCA Needs Assessment Excel Tool: "Other Risk Factor Data" Tab – (Image C3)
- Risk and Protective Factors Youth Worksheet – (Image C4)
- PAYS Indicators Worksheet – (Not Pictured)
- Other Risk Factor Data Worksheet – (Not Pictured)

Image C1

PAYS Risk/Protective Factors		PAYS Web Tool						
Risk Factors	County %	State %	County compared to State	Self-Select "High Risk"	6th	8th	10th	12th
Perceived Availability of Drugs	27.1	30.81	0.88 x less					
Laws and Norms Favorable to Drug Use	40	37.24	1.07 x more					
Low Neighborhood Attachment	41.65	41.65	1.00 same					
Poor Family Management		37.3						
Family Conflict		35.33						
Family History of Antisocial Behavior		30.81						
Parental Attitudes Favorable Toward Drug Use		37.24						
Parental Attitudes Favorable Toward ASB	45.69	45.68	1.00 x more					
Academic Failure		33.76						
Low Commitment to School		41.5						

PAYS RISK & PROTECTION

Image C2

Phase C - PAYS Other Indicators		PAYS Web Tool			
Perception of Parental Disapproval					
	Smoke cigarettes	Smoke marijuana	Have 1-2 Drinks of an Alcoholic Beverage Every Day	Use Prescription Drugs Not Prescribed To You	
County:	95.1	80			
State:	93.05	90.91	89.19	93.2	
County compared to State:	1.02 x more than PA	0.88 x less than PA			
Self-Select "High Risk":					
6th:					
8th:					
10th:					
12th:					
NOTES:					
Perception of Peer Disapproval					
	Have 1-2 Drinks of an Alcoholic Beverage Every Day	Use Tobacco	Use Marijuana	Use Prescription Drugs Not Prescribed To You	
County:	74	82	66		
State:	72.71	78.41	70.38	86.05	
County compared to State:	1.02 x more than PA	1.05 x more than PA	0.94 x less than PA		
Self-Select "High Risk":					

PAYS INDICATORS

Image C3

Phase C - Other Risk Factor/Indicator Data						
Family/Household						
	Substantiated Child Abuse - Rate Per 1,000 Children (2014)	Children in Single Parent Households - Percent (2015)	Estimated Persons Aged 0-17 Below Poverty Level - Percent (2013)	Teen Pregnancies, Ages 15 to 19 - Rate Per 1,000 Females (2015)	Persons in Poverty - Percent 2015	Children Enrolled in Medical Assistance - Percent (2014)
Adult Risk Factor Link:			Income/SES/Poverty	Teen Pregnancy	Income/SES/Poverty	Income/SES/Poverty
County:					15	
State:	1.6	33	18.5	13.8	13.2	39.9
County compared to State:					1.14 x more	
Self-Select "High Risk":						
Education/Employment						
	Habitual Truancy - Rate (2015)	Dropouts From Public Schools - Percent (2014-15)	Unemployment - Percent (2016)	HS Graduate	Bachelor's Degree	
Adult Risk Factor Link:			Employment Status	Educational Attainment	Educational Attainment	
County:		4		95	84	
State:	8.66	1.45	5.4	90	90	
County compared to State:		2.76 x more		1.06 x more than PA	0.93 x less than PA	
Self-Select "High Risk":						

OTHER RISK FACTOR DATA

Image C4

Risk & Protective Factors – Youth

(PHASE C – Worksheet 1)

What are the five (5) highest overall risk factors? What are the three lowest (3) protective factors?
Which risk factors showing as above the state rate, and protective factors below the state rate, stand out as potential concerns and why? (Risk factors that are low but above the state rate, may be less of a concern as compared to a risk factor that is impacting more youth but falls under the state rate.)
Which risk/protective factors stand out as a potential concern because they are increasing/decreasing over time? List the items and include any other relevant details about the time-trends you see.

STEP ONE: IDENTIFY PAYS RISK & PROTECTIVE FACTORS AND OTHER PAYS INDICATORS

DATA ENTRY

- As you begin Phase C, your team will begin by analyzing county-level PAYS Risk & Protective Factor data and PAYS Other Indicator data. Please carefully review and enter your county-level data into the excel tool. (Note: The Risk factor scales that include specific questions related to drug/alcohol use have been highlighted with an asterisk*. Placing an emphasis on these Risk Factors could be one approach for narrowing down your Risk Factor selections to those that are a bit more specific to drug and alcohol use/abuse in your community.)
 - As mentioned in Phase A, if your county has limited PAYS data (one or more school-districts did not participate), you might consider holding a focus group and/or surveying those students (grades 6, 8, 10 and 12) in the non-represented districts to ensure good overall representation within your county.

TEAM DISCUSSION

- Once all of your data is entered into the PAYS Risk & Protection and PAYS Indicator tab(s), your team should begin to work through the questions provided for further discussion in the following worksheets: *Risk and Protective Factors – Youth* and *PAYS Indicators - Youth*. It is important to note that just because a risk/protective factor or Other Indicator appears to be of elevated risk as compared to the state, it does not mean you immediately prioritize it for change in your county. *Team discussion is important to drilling down your priorities for change in your community.*
- The questions will advise your team to think about trends over time, subpopulations and/or age groups that are impacting the data, as well as areas where you might need to collect more information via qualitative discussion (i.e. Community Conversations). If you do not have the data or resources to answer a specific question, please indicate that in the space provided.
 - *As noted in your worksheets, you should be thinking about how the consumption and consequence behavior(s) prioritized in the previous phases might be influenced by the risk/protective factor and other indicator data of concern in your county.*

What are the five (5) highest overall risk factors? What are the three lowest (3) protective factors?

--

Which risk factors showing as above the state rate, and protective factors below the state rate, stand out as potential concerns and why? (Risk factors that are low but above the state rate, may be less of a concern as compared to a risk factor that is impacting more youth but falls under the state rate.)

--

PRIORITIZATION

- Following thorough team discussion, your assessment team should identify areas of concern. Those areas of concern should be entered into the **Prioritization Matrix** to assist with narrowing your focus. The matrix will help your team prioritize by considering such things as **magnitude, level of importance, time-trend(s), changeability and comparison**, which are laid out in order of importance from left to right within the tool.

Use the following prioritization matrix below to further assist you in prioritizing your areas of concern:					
Area of Concern (Risk Factors)	Magnitude	Level Of Importance	Time Trends	Changeability	Comparison
Area of Concern (Protective Factors)	Magnitude	Level Of Importance	Time Trends	Changeability	Comparison
PAYS RISK FACTORS					
Select 3-5 Risk Factors you believe are driving youth consumption/consequence behaviors and that you might prioritize for change over time:					
PAYS PROTECTIVE FACTORS					
Select 2-3 Protective Factors you believe are impacting youth consumption/consequence behaviors and that you might prioritize for change over time:					

- After completing the Prioritization Matrix, your assessment team should preliminarily select and enter Risk/Protective factors and Other Indicators of concern that could be prioritized and tracked for change over time within each tab, as outlined below:
 - 3 – 5 PAYS Risk Factors (PAYS Risk & Protection tab)
 - 2 – 3 PAYS Protective Factors (PAYS Risk & Protection tab)
 - 2 – 3 PAYS Indicator Categories (PAYS Indicators tab)
- The “Risk and Protective Factors” and “Other Indicators” that are entered into the “SUMMARY BOX” will automatically populate into the Risk Summary Tab within the Needs Assessment tool.

STEP TWO: COMPILE & ANALYZE OTHER COUNTY RISK FACTOR DATA

DATA ENTRY

- You will continue to assess county-level risk factors by entering county specific data into the “Other Risk Factors” tab within the SCA Needs Assessment Excel Tool. Data sources are categorized into different domains and will provide a state rate/average for comparison when available. If you have additional localized data that would fit within this tab and you would like to add it, there are a few extra columns available within each domain for you to do so. If you need more space, please contact the EPISCenter at episcenter@psu.edu.
 - Below you will find adult risk factors for substance use/abuse that have been linked to a number of the data sources provided within this tab. This is intended to assist you in identifying risk factors that might be contributing to the adult

consumption and/or consequence problems in your county. This is not an exhaustive list, and you are free to identify other adult risk factors as contributing to your county problems as you complete the needs assessment process. You might also consider exploring the impact or overlap that certain PAYS youth risk factors might have on the adult problems of concern within your county.

ADULT RISK FACTORS

Income/SES/Poverty	Employment Status	Educational Attainment	Teen Pregnancy
Neighborhood Disorganization	Attitude Towards Drug Use	Mental Health/Illness	

- In areas where your county profile data exceeds that of the state, the “data set” will auto-highlight in **yellow** (lower-risk), **orange** (moderate-risk) or **red** (high-risk) to provide a visual cue that it may be something to consider as you move forward with the remaining phases of your needs assessment process. Additionally, understanding the basic areas of risk within your county may provide further insight as it relates to capacity assessment and program selection.

Education/Employment	
	Habitual Truancy - Rate (2015)
Adult Risk Factor Link:	
County:	11
State:	8.66
County compared to State:	1.27 x more
Self-Select "High Risk":	

TEAM DISCUSSION

- Once all of the data is entered into the tool, your team should begin to work through the questions provided for further discussion in the *Other Risk Factors Worksheet*. The questions will advise you to think about trends over time, subpopulations and/or age groups that are impacting the data, as well as areas where you might need to collect more information via qualitative discussion (i.e. Community Conversations). If you do not have the data or resources to answer a specific question, please indicate that in the space provided.

PRIORITIZATION

- Following thorough team discussion, your assessment team should identify areas of concern. Those areas of concern should be entered into the **Prioritization Matrix** to assist with narrowing your focus. The matrix will help your team prioritize by

PHASE D:

Identify Contributing Factors via Community Conversation(s)

GENERAL INFORMATION

- You will have a total of thirteen (13) weeks to complete the four steps of Phase D (not including the time needed for DDAP review and approval). You will complete Phase D Steps 1-3 by March 1, 2019 and Step 4 by May 17, 2019. If you have difficulty, contact your DDAP Program Analyst for technical assistance. You will complete [STEP ONE](#), [STEP TWO](#) and [STEP THREE](#) as outlined within the manual before gaining DDAP approval and moving on to [STEP FOUR](#).
- The primary objective in Phase D is twofold:
 1. Identify at least three problems of most concern in your county (from the consumptions/consequences previously prioritized).
 2. Identify the priority risk/protective factors influencing those problems.
 3. Develop and implement a plan that allows you to engage your community in a conversation process aimed at identifying the contributing factors influencing the problems and risk/protective factors that you have identified.

At the conclusion of this phase you will have completed the Community Conversations tab in the excel tool.

- A number of concepts for Phase D have been borrowed from the [Community Conversations Workbook](#) (http://dcspfsig.rti.org/Portals/0/dcspfsig/Community_Conversation_Protocol_October_2016_final.pdf) prepared by Elvira Elek and Rebecca Perry with RTI International, for the District of Columbia Department of Behavioral Health (DBH). Your team is strongly encouraged to utilize this resource as you complete Phase D. You will find the Appendices in this workbook particularly helpful, especially those around forming key data collection questions and best practices for structuring community conversations.
- **JOINDERS:** Joinder SCAs are required to identify at least one problem per county and must have a minimum of three problems total for the SCA. This may result in some joinders having more than three total problems unless many of the problems are shared between counties.

COMMON TERMS

- [Contributing Factor Categories](#): Community domains that specific contributing factors can be categorized within. For example, a contributing factor such as *Rite of Passage*, could be categorized within the “Social Norms” Contributing Factor Category.
- [Contributing Factors](#): The specific factors or characteristics that contribute to or increase the substance use related problems in the community. Contributing factors answer the question, “But Why Here?”
- [Problems](#): Brief description of the specific issue(s) (consumptions/consequences) that need to be addressed and investigated by the assessment team
- [Magnitude](#): Which problem seems to be the largest? (Be careful of small numbers.)
- [Comparison](#): How does the community’s/county’s problem compare to surrounding or similar communities/counties or the state?
- [Severity](#): What is the severity of the problem (e.g. How bad is the outcome? Is it resulting in mortality? Is it more costly?)
- [Time-trend](#): Is the problem getting worse over time or is it getting better over time?
- [Level of Importance](#): Being of great significance or value – How much is the risk/protective factor influencing the problem? Does it influence other behavioral health issues? Does it directly impact the developmental stage of the population?
- [Changeability](#): Being such that alteration is possible; capacity to influence a specific risk or protective factor – Is there adequate capacity to change the risk/protective factor? Does a suitable evidence-based intervention exist? Can change occur in a reasonable amount of time?

TOOLS/WORKSHEETS USED

- *Community Conversation Worksheets – (Image D1)*
- *Community Conversation Notes – (Image D2)*
- *Contributing Factors Worksheet – (Not Pictured)*
- [Community Conversations Workbook](#)

STEP ONE: IDENTIFY THE DATA GAP

IDENTIFY THE PROBLEMS THAT YOU WANT TO KNOW MORE ABOUT

- Now that you have preliminarily prioritized the consumptions and consequences of concern within your county, your assessment team should narrow the focus and identify at least three problems (with at least one being youth related and one being adult related) that need to be investigated further. A problem could simply be a consumption or a consequence of concern in your county, or you may find there are parallels across some of your consumptions and consequences that can be combined to form a single problem. *The problems that you identify are likely to be the areas that you focus on and prioritize for change as you move forward, and will serve as the foundation for your Community Conversations.* When identifying problems within your county, ***you will want to consider such things as magnitude, comparison, severity and time-trend(s).***

- An example of a problem that incorporates a consumption and a consequence might look something like: *We are seeing higher rates of underage drinking, as well as increases in youth arrests for liquor law violations.*
- **JOINDERS:** Joinder SCAs are only required to have three total problems, but will need to have each county represented. This is likely to result in having more than three total problems, unless it is found through data analysis and team discussion that many of the problems are shared among counties.
 - **Note:** When a problem is shared between multiple counties, the information should be entered into the Community Conversations tab of the excel tool for each county.

CONNECT THE RISK/PROTECTIVE FACTORS AND CONTRIBUTING FACTOR CATEGORIES WITH THE PROBLEMS

- Once you have identified your problems, your team should consider each problem individually, and identify no more than three risk and/or protective factor(s) of concern in your county that are believed to be influencing each specific problem. Keep in mind, you will want to focus on the risk/protective factors that were preliminarily prioritized in Phase C, and ***you will want to consider such things as level of importance, changeability and time-trend(s).***
- After identifying the risk and/or protective factors that are influencing your problem(s), you will need to select the contributing factor categories that most correlate with the risk and/or protective factors for the problem you have selected. These contributing factor category selections will help to guide you in selecting the target audience, meeting format, and the questions that will shape your community conversation(s) and help you collect the data you desire in learning more about the problem(s) you have identified.
 - Given that adult risk and protective factor data is somewhat limited, you may find it more challenging to identify the adult risk factors that are impacting your adult problem(s), as compared to the youth risk factors that are influencing your youth problems. As stated previously, within the Other Risk Factor Data tab, you will find that certain data points have been aligned with specific adult risk factors. **This is not an exhaustive list of adult risk factors and you are not limited by this list.**
 - You have a great deal of flexibility in identifying the risk and/or protective factor(s) that are most influencing your adult problems. If you find that the adult risk factors provided within the tool are too limited, or are not a good match for the adult problem(s) you have identified, you may use them in combination with some of the PAYS risk factors, and/or other

additional risk factors that have been identified through data analysis and team discussion. Your community conversations can be used to help confirm or further illuminate the potential risk factors for the problem.

- The *Community Conversation Worksheet* is provided to assist your team in planning its strategy around identifying the contributing factors in your county that are influencing the problems of most concern. See below for an example:

Image D1

Contributing Factors – Community Conversations Worksheet

Problem: We are seeing higher rates of underage drinking, as well as increases in juvenile arrests for liquor law violations.

Risk/Protective Factor	Local Condition Categories	Target Audience	Conversation Format	Questions to Ask – What do you want to know?
Perceived Availability	<input type="checkbox"/> Enforcement/Adjudication <input type="checkbox"/> Retail Access/Availability <input checked="" type="checkbox"/> Social Access/Availability <input type="checkbox"/> Perception of Risk <input type="checkbox"/> Social Norms <input type="checkbox"/> Price/Promotion <input type="checkbox"/> Mental Health <input type="checkbox"/> Other Social Determinants	Youth – target age groups with highest usage rates Parents	Focus Group Focus Group	Where are youth getting alcohol? (To confirm source of alcohol.) Where do youth in your community use alcohol? How do parents in your community monitor alcohol in their home?
Perceived Risk of Drug Use	<input type="checkbox"/> Enforcement/Adjudication <input type="checkbox"/> Retail Access/Availability <input type="checkbox"/> Social Access/Availability <input checked="" type="checkbox"/> Perception of Risk <input type="checkbox"/> Social Norms <input type="checkbox"/> Price/Promotion <input type="checkbox"/> Mental Health <input type="checkbox"/> Other Social Determinants	Youth – target age groups with highest usage rates School Personnel Parents	Focus Group Interviews Focus Group	Do you think youth in your community see use of alcohol as risky? Why? What do students learn about the risks of alcohol use in school? How often do parents talk with their kids about alcohol use?
Parental Attitudes Favorable to Drug Use	<input type="checkbox"/> Enforcement/Adjudication <input type="checkbox"/> Retail Access/Availability <input type="checkbox"/> Social Access/Availability <input type="checkbox"/> Perception of Risk <input checked="" type="checkbox"/> Social Norms <input type="checkbox"/> Price/Promotion <input type="checkbox"/> Mental Health <input type="checkbox"/> Other Social Determinants	Parents Youth	Focus Group Focus Group	How common do you think alcohol use is among youth in your community? Do you think this is a serious concern and why? At what age do you think you should start talking your kids about the dangers of alcohol use? How accepted is alcohol use by youth among parents in your community?

- The primary objective in Phase D is to identify the risk and/or protective factors, as well as the specific contributing factors that are most likely to be influencing the problems of most concern in your county. Identifying the underlying issues that are influencing the problem will allow you to better plan for and implement prevention strategies in your community.
 - Identifying the risk/protective factors that are influencing the problem will help to understand “why is this problem occurring?”
 - Identifying the specific contributing factors that influence the problem will help to understand, “why is this problem occurring here?” **Identifying these contributing factors will be the primary focus of your community conversation(s).**

- Eight categories are being utilized to help organize contributing factors, with descriptions for each appearing in the first column of the Contributing Factors Worksheet. This worksheet has been provided to assist you in *identifying the parallels that may exist between the contributing factor category(ies) and risk factors and other indicators*. Within column four, you will find some general examples of specific contributing factors for each category.

STEP TWO: PLAN COMMUNITY CONVERSATION PROCESS

CONSIDER WHAT AUDIENCES CAN BEST HELP YOU FILL YOUR DATA GAP

- You will now select the individuals or groups that you need to help you identify the contributing factors that are influencing the problem(s) being investigated. You might consider characteristics such as race, ethnicity, gender, and/or grade-level factors as they relate to the problem statements, risk/protective factors, and other indicators of concern in your county. Some general considerations for individuals or groups that you may want to communicate with are:
 - **Key Stakeholders:**
 - Local school district representatives
 - Law enforcement officials
 - Business owners
 - Media representatives
 - Religious & fraternal organizations
 - Civic & volunteer groups
 - Healthcare professionals
 - Social service agency representatives
 - Parents, parent groups, etc.
 - **Youth:**
 - County-wide, multiple school-district representation
 - Variety of grade levels/age ranges, etc.
 - College students/groups.
 - **Treatment Community:**
 - Treatment court graduates/participants
 - Recovery community (AA, NA, etc.)

DETERMINE THE FORMAT FOR THE COMMUNITY CONVERSATIONS

- You have the option to choose between a variety of formats for your community conversations, and you may utilize as many formats as needed to complete the work and obtain the information you desire. Some general formats to consider are:
 - One on one interviews
 - Town Hall Meetings (Large group community conversation)
 - Focus Groups (Small group discussion)
- You will need to give consideration to your team’s capacity to complete the work, as well as the target audience’s availability to participate, when deciding upon the most appropriate community conversation format(s) to utilize.
 - Strategies for holding effective Community Conversations can be found in the [Community Conversations Workbook](#) in Appendices D1 – G1, with specific protocols provided for running larger town hall meetings and/or smaller focus groups. *You do not have to follow these steps directly, but should use this information as a guide in planning for and completing the work.*

STEP THREE: DEVELOPMENT OF QUALITATIVE DISCUSSION QUESTIONS

SELECT THE QUESTIONS YOU WANT TO ASK

- The questions you choose for your community conversation(s) should be largely dependent on the problems of concern, what you want to know about them, and shaped by the contributing factor categories that you have selected. An example might look like the following:
 - *Problem:* We are seeing higher rates of underage drinking, as well as increases in youth arrests for liquor law violations.
 - *Risk Factor:* Perceived Availability of Drugs/Alcohol
 - *Contributing Factor Category:* Social Access/Availability
 - *Target Audience:* Youth – groups with highest usage rates
 - **Questions to ask: Where are youth getting alcohol? Where do youth in our community use alcohol?**

Below you will find sample questions pulled directly from the [Community Conversations Workbook](#) (Appendix B; pages B-1 and B-2) that can be modified and utilized to meet your needs. You can also find additional questions within the workbook to help you prepare for a variety of audiences and meeting formats (Community Leaders, D-1; Law Enforcement, E-1; Large Group Community Conversation(s), F-1; and Youth Focus Group sessions, G-1).

Contact your DDAP Program Analyst if you have questions or need assistance as you prepare questions for your community conversation(s).

CONSUMPTION

What substance abuse problem(s) do you see in our community, if any?

What is the biggest alcohol, tobacco, or other drug (ATOD) challenge for youth in our community?

How do you see [SUBSTANCE] being used within our community?

CONSEQUENCES

What have been some of the effects of underage ATOD use in your neighborhood?

What are the alcohol-related problems in our community? What about for [SUBSTANCE]?

GEOGRAPHIC/TARGET POPULATION DIFFERENCES

What locations in our community are known for [SUBSTANCE]-related incidents?

Where is [SUBSTANCE] consumed in our community? (by youths and by adults)

Which subpopulations within our community face disproportionate consequences of substances use? (e.g., males vs. females; particular racial or ethnic groups) ALTERNATIVE: Which groups in our community are more likely to use [SUBSTANCE]? Which groups in our community are more likely to face consequences of using [SUBSTANCE]? What are those consequences?

RISK AND PROTECTIVE FACTORS (CONTRIBUTING FACTOR CATEGORIES)

What conditions in our community increase the risk of [SUBSTANCE] use and related consequences?

How do the things that increase [SUBSTANCE] use look different in our community than others?

What factors in our community protect youth from [SUBSTANCE] use and other related consequences? (e.g., clear standards and messages about use; opportunities for pro-social activities)

RETAIL/SOCIAL ACCESS & AVAILABILITY

Where are individuals (youth/adults) in our community getting [SUBSTANCE]?

How do youth in our community purchase [SUBSTANCE]?

Where do individuals (youth/adults) in our community use [SUBSTANCE]? (e.g., celebrations, unsupervised locations, community events) [THIS CAN ALSO REFLECT COMMUNITY NORMS]

How do parents in our community monitor [SUBSTANCE] in their home?

ENFORCEMENT/ADJUDICATION

What does law enforcement do to address the issue of ATOD use in our community? What laws are in place to address [SUBSTANCE] use?

How do district magistrates and/or judges handle ATOD related crimes in your community?

Do individuals (youth/adults) in our community believe they risk arrest or fines for breaking laws related to using [SUBSTANCE]? Why or why not? [THIS CAN ALSO REFLECT LOW PERCEIVED RISK]

SOCIAL (COMMUNITY/FAMILY) NORMS

What are the general attitudes about [SUBSTANCE] in our community? [RISK FACTORS—COMMUNITY NORMS]

Why do you believe [SUBSTANCE] is accepted in your community?

In our community, at what age is it acceptable to use [SUBSTANCE]?

What kinds of media images of [SUBSTANCE] use do individuals (youth/adults) see in our community?

PERCEPTION OF RISK

What are some of the dangers related to using [SUBSTANCE] in our community?

What do people in our community think about the physical effects of using [SUBSTANCE]? What physical harm do people in our community think that using [SUBSTANCE] can cause themselves or others?

Do you think youth in our community see use of [SUBSTANCE] as risky?

Why do you think youth do not perceive use of [SUBSTANCE] is risky?

What information do youth receive about the risk of using [SUBSTANCE]? Where do they get this information?



- After you complete the Community Conversations Worksheet for (Risk/Protective Factors, Contributing Factor Categories, Target Audience/Meeting Format and Community Conversation Questions) for each problem statement, you will need to transfer the information into your excel tool and submit to your DDAP Program Analyst for review.
- Your analyst will provide you with final approval to move forward with your Community Conversations.

STEP FOUR: HOLD COMMUNITY CONVERSATION(S) AND IDENTIFY CONTRIBUTING FACTORS

INVITE COMMUNITY CONVERSATION PARTICIPANTS

- Now that you have identified the problems of concern and the specific questions that you want to ask, it is time to reach out and engage the individuals and/or groups you have identified as necessary to meet your data needs.
 - **JOINDERS:** If a problem is shared by multiple counties, representatives should be included from each county for the Community Conversation(s).

PREPARING FOR YOUR COMMUNITY CONVERSATION

- As you prepare for your Community Conversation(s), you should refer to the [Community Conversation Workbook](#) and review it thoroughly. Beginning on page 17, you will find detailed descriptions of the various conversation methods that have been previously recommended.
 - If you have questions as you are planning for your Community Conversation(s), contact your DDAP Program Analyst for assistance.

RECORD YOUR COMMUNITY CONVERSATION

- As you complete the Community Conversation process, you should note and describe the major themes or points discussed for each of the questions that you ask. Note areas of agreement and areas of disagreement, as this may assist with buy-in and/or the capacity to plan for change as it relates to prioritization of certain behaviors in the community. A sample *Community Conversation Notes worksheet* has been provided for you to document and organize this information so that it can be entered into the Excel tool.

Image D2

Community Conversation Notes

Date: _____ Location: _____ # of Attendees: _____

Type of Community Conversation (Circle): Interview Small Group Large Group Other

Description of Attendees:

Problem Statement (What do we want to know more about):

Question	Major Ideas/Themes	Quotes	Consensus/Disagreement

ANALYZE YOUR COMMUNITY CONVERSATION(S) & IDENTIFY AND REPORT CONTRIBUTING FACTORS

- Once you have completed your Community Conversation(s), you should meet as a team to analyze your responses and identify the specific contributing factors that are influencing the problems you have identified.
 - As a general reminder, this is the third step of the needs assessment process of answering the following questions:
 - 1.) What are the problems? (Consumptions/Consequences - Phases A-B)
 - 2.) Why are these problems occurring? (Risk/Protective Factors - Phase C)
 - 3.) Why are these problems occurring *here*? (Contributing Factors - Phase D)
- Once you have analyzed your Community Conversation responses, you should enter some of the common themes discussed into the Community Conversation Responses, as well as the contributing factors you have agreed upon for each problem, into your Needs Assessment Tool. Only one contributing factor should be entered into each cell in the Contributing Factors column. There is space for up to four contributing factors for each risk/protective factor.
 - Following completion of your Community Conversations, if you should find that your identified problems and/or identified risk and protective factors submitted in Step 1 of Phase D have changed, please contact your DDAP Program Analyst.

Steps 1 & 2: Identify Problem(s) & Plan Community Conversations				Step 3: Develop Qualitative Discussion Questions		Step 4 - Record/Report Data	
Problem 1:							
Risk/Protective Factor	Contributing Factor Categories	Target Audience	Conversation Format	Questions to Ask	Community Conversation Responses	Contributing Factors	
	Enforcement/Adjudication						
	Retail Access/Availability						
	Social Access/Availability						
	Perception of Risk						
	Social Norms						
	Price/Promotion						
	Mental Health						
	Other Social Determinants						
	Enforcement/Adjudication						
	Retail Access/Availability						
	Enforcement/Adjudication						
	Retail Access/Availability						
	Social Access/Availability						
	Perception of Risk						
	Social Norms						
	Price/Promotion						
	Mental Health						
	Other Social Determinants						
	Enforcement/Adjudication						
	Retail Access/Availability						
	Enforcement/Adjudication						
	Retail Access/Availability						
	Social Access/Availability						
	Perception of Risk						
	Social Norms						
	Price/Promotion						
	Mental Health						
	Other Social Determinants						
	Enforcement/Adjudication						
	Retail Access/Availability						

Community Conversations



- After your team discussion is complete, and all of your responses are entered, you will submit your tool to your DDAP Program Analyst via the DDAP-SCA Information Portal for final review and approval before moving onto Phase E.

PHASE E:

Assessing County/Community Resources

GENERAL INFORMATION

- You will have a total of seven (7) weeks to complete the Resource Assessment. You will complete Phase E by July 19, 2019. If you have difficulty, you are advised to contact your DDAP Program Analyst for technical assistance.
- The primary objective in Phase E will be to identify and assess the available resources related to the prioritized problems, underlying risk/protective factors, and/or contributing factors that were identified during the needs assessment process. This phase will instruct you to analyze the resources as outlined in the steps below:
 - Identify programs, practices and services that are being funded by the SCA;
 - Identify programs, practices and services that are NOT funded by the SCA, but that you are aware of;
 - Identify programs, practices and services that are being offered in targeted community sectors that relate to your problem areas;
 - Identify policies that are being implemented and/or enforced in your county/community related to your problem areas;
 - Identify opportunities for collaboration and additional support related to your problem areas.
- **JOINDERS:** Joinders should complete the resource assessment for each problem within one tool.

COMMON TERMS

- Problems: Brief description of the specific issue(s) (consumptions/consequences) that need to be addressed and investigated by the assessment team
- Risk Factors: Conditions that increase the likelihood that a person will become involved with drug use, delinquency, school-dropout and/or violence
- Protective Factors: Conditions that buffer an individual from exposure to risk
- Contributing Factors: The specific factors or characteristics that contribute to or increase the substance use related problems in the community. Contributing factors answer the question, “But Why Here?”

TOOLS/WORKSHEETS USED

- *SCA Resource Assessment Excel Tool*
- *Community Sector Survey – Template*

- *Problem(s) Defined – Logic Model Handout (See “Logic Model” tab in Needs Assessment Tool)*

ESTABLISHING A RESOURCE ASSESSMENT TEAM

To maintain consistency and efficiency, the resource assessment team will be made up of the same individuals that comprised the needs assessment team. However, you do have the ability to pull other individuals in as needed to complete this process. If you are aware of individuals within your county that have a good base of knowledge around program implementation, it would be wise to include them in this process.

Additionally, as you will see later in this resource guide ([ASSESSING YOUR RESOURCE LANDSCAPE](#)), you will be collaborating with other county/community stakeholders to identify and assess the programs, practices, or services that are being implemented related to the problems you have identified.

ASSESSING YOUR RESOURCE LANDSCAPE

STEP ONE: IDENTIFY & ASSESS PROGRAMS, PRACTICES OR SERVICES

For each county problem identified through the Needs Assessment process, you will document and assess the programs, practices or services being implemented within your county that meet the needs of the underlying risk/protective factors and/or contributing factors associated with each problem.

- I. Within each Problem tab, you will begin by listing the specific problems that were identified during the needs assessment, along with their prioritized risk/protective factors. You will then identify the programs, practices or services funded by the SCA that address the underlying risk/protective factor(s) that have been prioritized within each identified problem. After entering the name of the program, practice or service, you will also list the prioritized contributing factor(s) that the program, practice or service impacts (you will leave this blank if no contributing factors are addressed). *You will enter all of the Programs, Practices or Services into the tool (Column C), the Implementing Agency (Column D), the Contributing Factor(s) impacted (Column E), and then utilize the remaining drop-down boxes within each row (Columns F – U) to assess each item within the following overarching categories: Implementation Considerations; Demographic Considerations; and Resource Considerations. Special Notes: Column F – When “No” is selected under “Active Implementation”, columns G – S will be blacked-out and you will not need to answer these questions, as they are only appropriate for active-implementation; Columns G and K – There is not a drop-down list associated with these columns, and text will need to be entered into the cell.*
 - a. If more than one provider is implementing a program, that program should be entered on a separate row for each provider.

- b. If your SCA is funding a program/service that does not meet one of your underlying risk/protective factor(s) and/or contributing factor(s) that you have prioritized, you will NOT list it within the tool.

Step 1 - What prevention programs, practices or services are available within your county related to problem #1?			
PROBLEM #1:			
Prioritized RISK/PROTECTIVE FACTOR(s)	Name of Program/Practice/Service	Implementing Agency	CONTRIBUTING FACTOR(s) Impacted
	1		
	2		
	3		
	4		
	5		
	6		
	7		
	8		
	9		
	10		
	11		
	12		
	13		
	14		
	15		
	16		
	17		
	18		
	19		
	20		

- II. Next, you will identify and assess additional programs, practices or services that are not funded through the SCA, but that you are aware of and relate to the underlying risk/protective factor(s) that have been prioritized for each identified problem. Keep in mind, your list should not be limited to just program curricula; you should also identify any practice(s) or service(s) being implemented within your county that relate to the problem and the prioritized risk/protective factor(s). You should fill in as much as you know about these programs, practices or services, and then contact the provider (via phone interview or online survey method as outlined below in **STEP TWO – COUNTY SECTORS**) to collect the additional information necessary to assess the gaps/challenges within each program, practice or service (*Columns F – U*). Understanding the gaps/challenges that non-SCA funded programs, practices or services are facing could provide opportunities for future collaboration and support.

Implementation Considerations							
Active Implementation	Implementation Location <i>(Type into cell)</i>	Primary Federal Strategy	Program Categories	Primary Domain	Primary Age Addressed <i>(Type into cell)</i>	Fidelity	Data Collection

Demographic Considerations							Resource Considerations	
Culturally Appropriate	Special Populations	Family Income	Gender	Ethnicity	Multi-lingual	Geography	Sustainability	SCA Funded

STEP TWO: EXPANDING YOUR RESOURCE LANDSCAPE – COUNTY SECTORS

In the previous step, you identified and assessed the programs, practices or services that you were familiar with in your county; the next step involves a deeper dive into assessing county programs, practices or services that are being offered, that you may not be aware of.

- I. For each of your identified problem(s), you should select 2 – 3 county/community sectors that are likely to be implementing programs, practices or services that address the respective problem(s) and/or the underlying causes that you have identified. You’ll also want to consider the risk/protective factors and contributing factors for each identified problem to further assist you in narrowing down the appropriate sectors to target. For example, if your problem is: *“We are seeing higher rates of underage drinking, as well as increases in juvenile arrests for liquor law violations”*; and your identified risk factors were: *Perceived Availability of Drugs/Alcohol, Perceived Risk of Drug/Alcohol Use and Parental Attitudes Favorable to Drug Use*; you might target individuals or agencies within the following sectors to determine what programs, practices or services they are offering related to this problem: 1.) Law Enforcement 2.) Schools 3.) Local Social Service Agencies.

- II. You have a great deal of flexibility in completing this work. DDAP recognizes that each team’s internal capacity will impact its ability to survey a large number of sectors, and may also influence the level of depth that can be examined within each sector. Selecting two – three sectors that most correlate with the identified problem(s) will allow for a targeted, and more efficient approach to analyzing additional strategies taking place. If you are capable of expanding your analysis to more than two or three sectors, you are welcome to do so. Some community sectors to consider are:
 - a. Youth Service Organizations
 - b. Law Enforcement
 - c. Faith Community
 - d. Mental Health
 - e. Education/Schools
 - f. Local Businesses
 - g. County Government
 - h. Social Service Organizations

- III. As a team, you will need to determine the best method for surveying various sectors. One option to consider is conducting phone interviews; however, a more efficient approach may be to utilize an online survey tool such as Survey Monkey and disseminate to individuals and/or agencies that fall within the targeted sectors, to assist you in collecting the information needed to thoroughly assess the program, practice or service. You should reference the *“Community Sector Survey – Template”* document to assist you with this process.

- IV. When surveying the community sectors, you should disseminate a one-page template to your target audience outlining your identified problems, as well as their underlying risk/protective factors and contributing factors so the individuals and/or agencies responding to your request understand exactly the type of programs, practices or services you are trying to assess. You should reference the “Community Sector Survey – Template” document to assist you with this process.
- V. Once you have received all of the survey responses from your targeted sectors for each problem, you should enter the information into the tool for each program, practice or service just like you have done in the previous steps.

STEP THREE: TEAM DISCUSSION

When the excel tool is completed for each problem tab, and you have identified and assessed the programs, practices or services that are taking place in your county related to your problem areas, you should work through the team discussion questions within each of the Problem tab(s), as well as the Policy Discussion and Opportunities tabs.

- I. **Team Discussion – Problem Tab(s):** The team discussion questions refer to the programs, practices and services you have identified as addressing the risk/protective factors and/or contributing factor(s) for each problem. You will be asked to discuss the strengths, as well as the gaps and challenges, related to the following overarching categories within the tool: **Contributing Factor(s) Considerations; Implementation Considerations; Demographic Considerations and Resource Considerations.**

Contributing Factor(s) Considerations:
Discuss Strengths:
Discuss Gaps/Challenges:
Implementation Considerations:
Discuss Strengths:
Discuss Gaps/Challenges:
Demographic Considerations:
Discuss Strengths:
Discuss Gaps/Challenges:

- a. Once you have answered all of the team discussion questions, you should list the top three strengths and top three gaps/challenges related to your county’s overall availability and strength of resources for each identified problem. *The responses to the team discussion questions, as well as the three overall strengths & gaps/challenges will auto-populate within the summary tab of the excel tool.*

Problem 1 - Top 3 Overall Strengths
List Top 3 Strengths:
.....
.....
.....
Problem 1 - Top 3 Overall Gaps/Challenges
List Top 3 Gaps/Challenges
.....
.....
.....

- b. The final question will encourage you to think about how well you are impacting the underlying causes of the problem behavior, based on the resources you have identified within the tool.

Problem 1 - Overall:
Overall, as it relates to the programs, practices, or services identified for this problem, how well do you think your county is addressing the underlying causes of your identified problem behavior? Where are some areas you could improve?
.....

- II. **Team Discussion – Policy Tab:** After you have completed the team discussion questions for each identified problem, you will utilize the **Policy Discussion** tab to identify and discuss any county and/or community-level policies being implemented and/or enforced that relate to any of your problems, risk/protective factors, and/or contributing factors. This is an opportunity to discuss strengths, weaknesses and/or opportunities for policy improvement in your county.

Team Discussion - County/Community-level Policies
PROBLEM #1:
As related to Problem #1, please identify and describe any county and/or community level policies being implemented/enforced to curb this problem behavior or its underlying risk/protective factors and/or contributing factors:
.....
Discuss any strengths, weaknesses, and/or opportunities for improvement as related to the policies identified above:
.....

- III. **Team Discussion – Opportunities Tab:** The final step is to complete the **Opportunities** tab. The questions on this tab direct your team to discuss the following items as they relate to your *overall resource landscape* in your county: *Additional Funding Opportunities; Champions/Collaborative Partners/Volunteers; Resources to reach/access target population; Other Resources*. Some examples could include: an organization that provides free space for training/programming, a group that will provide free meals for a parenting program, etc.

Team Discussion - Opportunities

Identify and describe any additional funding opportunities available in your county to support programs, practices, policies or services:



- Once you have completed each step of the Resource Assessment, you should submit your excel tool to your DDAP Program Analyst via the DDAP-SCA Information Portal for their review and approval. Your analyst will contact you if there are any issues or questions.