Alcohol and Drug Prevention and Education Program (ADPEP)

Health Promotion and Chronic Disease Prevention Section

Orientation Webinar

For audio:

Access code:
Agenda

1. Welcome and introductions
2. Objectives
3. The Big Picture and HPCDP
4. Community Programs Support
ADPEP Orientation Objectives

Participants will understand:

1. how they fit into OHA and Public Health
2. how to collaborate with Tobacco Prevention and Education Program (TPEP) and other Health Promotion and Chronic Disease Prevention (HPCDP) grantees
3. their role and responsibilities in ADPEP
4. their current work plan and budget
5. effective, evidence-based work on ADPEP in communities
Oregon ADPEP Orientation Checking-in
(2 minutes per participant)

1. **Introduce yourself:**
   - Name
   - Role

2. Briefly **describe your experience** in substance abuse prevention, coalitions and working in community-building efforts.

3. **What else** do you want us to know about you?
Who’s presenting today? Introducing the HPCDP Community Programs team…

Hilde Hinkel
HPCDP Community Programs Lead

Laura Wendel
HPCDP Community Programs Lead

Jennifer Diallo
HPCDP Workforce Capacity Coordinator

Charina Walker
HPCDP Community Programs Liaison

Jordana Leeb
HPCDP Community Programs Liaison

Kaitlyn Lyle
HPCDP Community Programs Liaison
The Big Picture: How your work fits into the larger context – in Oregon, prevention is vital to Public Health

- ADPEP is funded by SAMHSA, and is administered in the State of Oregon by the Oregon Health Authority.

- The Oregon Health Authority assigned this program to the Public Health Division.

- Within the Public Health Division, the ADPEP program is administered by the Health Promotion and Chronic Disease Prevention Section.
Other programs in HPCDP include:

- Alcohol and Drug Prevention and Education
- Tobacco Prevention and Education
- Chronic Disease Prevention and Self-Management programs (Asthma, Arthritis, Diabetes, Heart Disease and Stroke, Colorectal Cancer, and Tobacco Cessation)
- Oregon Cancer Registry
- Worksite Wellness for government and school employees
ADPEP in Public Health – Timeline

Alcohol and Drug Prevention Integration into OHA
Oregon Health Authority Public Health Division

2015
Nov  Staff transition to PHD

2016
Mar  Funds transferred to PHD
       Phase 1 & 2; Interim Report

2017→
Sep  17-’19 Grant contract renewal
       Prevention Partner Conversations Final Report

2018→
Nov  Final Report Tour workshops and meetings
       Collaborative work projects

Dec
Jan
Feb
Mar

Statewide partner engagement

Where we are now

★
Chronic diseases, including addiction, are largely caused by 4 preventable risk factors:

1) Alcohol consumption
   - binge and excessive drinking

2) Tobacco use
   - and secondhand smoke exposure

3) Poor nutrition
   - high sugar and sodium intake

4) Physical inactivity
   - a sedentary lifestyle
Chronic disease risk factors

- Tobacco use
- Obesity, poor diet, and physical inactivity
- Alcohol

All
The “healthy places, healthy people” framework is HPCDP’s approach to prevention – it focuses on state and local policy change, systems change, and changing the environment to support health for all.
HPCDP Support of Community Programs

1. Communities of Practice
2. Regional Support Networks
3. Coaching & Training
4. Surveillance & Evaluation

Goals:
• Build Collaboration and Coordination
• Better connect grantees to each other
• Increase peer-to-peer learning
• Broaden the awareness of community identified priorities and community landscape across the state
• Provide accessible technical expertise (policy, topic area)
HPCDP Regional Support Teams

- N. Central
- Metro
- Valley
- Central
- South West
- Eastern
- Conf. Tribes of Umatilla Indian Reservation
- Conf. Tribes of Grand Ronde
- Conf. Tribes of Siletz
- Coquille Indian Tribe
- Conf. Tribes of Coos, Lower Umpqua, Siuslaw
- Warm Springs Tribes
- Burns Paiute Tribe
- Cow Creek Band of Umpqua Indians
- Klamath Tribes

Oregon Health Authority
HPCDP Grantees

**Tobacco Prevention Education Program (TPEP)**
Oregon county and tribal grantees work on tobacco-related policy, systems, and environment changes in their communities.

**Alcohol Drug Prevention Education Program (ADPEP)**
Oregon county and tribal grantees work on prevention of alcohol and drug abuse and related policy, systems and environment changes in their communities.

**Strategic Prevention Framework (SPF)**
Comprehensive prevention planning process focused on reducing the use and associated effects of alcohol and opioids.

**Regional Health Equity Coalitions (RHEC)**
Coalitions of community-based organizations focused on addressing health equity and social determinants of health to reduce health disparities.

**Sustainable Relationships for Community Health (SRCH)**
Collaboration among LPHAs, CCOs, clinics & CBOs to implement evidence-based interventions that reduce the burden of chronic conditions in Oregon communities.
What does a comprehensive ADPEP program look like?

- Surveillance & evaluation
- State & community programs
- Health systems & self-management
- Communications
- Infrastructure, management and administration
Data and Surveillance Support

Getting current: data

Custom data analysis

Support for local data collection and evaluation

Our goal is to help you get the best data and information available for your needs
### Data and Surveillance Support

Discuss your data and technical assistance request with your HPCDP liaison and/or Regional Support Team before submission, to verify that the request aligns with HPCDP grant priorities.

After discussing with your liaison, submit your request through the [HPCDP Online Data and Evaluation Request System](#).

Allow at least three business days for HPCDP staff to complete a data analysis request. If a request is urgent, check with your liaison to determine if it can be completed sooner.

For requests for survey development and fielding, please allow at least three work weeks for the requested assistance to be completed.
Communications Support

• **SOCIAL MEDIA CALENDARS**: A social media calendar is a communication tool, which lays out the social media posts planned over the next month.

• **WHERE TO FIND THESE SOCIAL MEDIA PAGES ONLINE:**
  - **SFO Facebook**: [https://www.facebook.com/SmokefreeOregon](https://www.facebook.com/SmokefreeOregon)
  - **PMO Facebook**: [https://www.facebook.com/placemattersoregon/](https://www.facebook.com/placemattersoregon/)
Frieden’s Pyramid explains the upstream approach that public health takes and why we prioritize environmental strategies.

Frieden T. American Journal of Public Health | April 2010, Vol 100, No. 4
Comprehensive Strategies

Strategies Targeting Individual Environments

Strategies Targeting the Shared Community Environment

- Family
- School
- Faith Community
- Health Care Providers

- Norms
- Regulations
- Availability

ALL YOUTH

INDIVIDUAL YOUTH
Individual-focused Strategies

Prevention efforts aimed at providing information, building skills, or supporting individuals or targeted groups of individuals.

- Afterschool Programs
- School curricula
- Life skills training
- Employment programs
- Health Fairs
- School Assemblies
- Media Campaigns
- Parenting Classes
- Tutoring programs
- Assessment/Referral/Counseling
- Media Literacy
- Awareness Days/Weeks
- Youth Councils
- Mentoring Programs
Environmental Strategies

Prevention efforts aimed at changing or influencing community conditions, standards, institutions, structures, systems and policies that shape behaviors.

- Hours/Days of Sale
- Clean air laws
- Happy hour Ordinance/Laws
- Advertising Ordinance/Laws
- Social host ordinances
- Compliance Checks System
- Party Patrol
- Prescribing Guidelines
- Restriction on MJ Dispensary locations
- Outlet Density Reduction
- Open Container Ordinance
- Festivals – Beer Gardens
- Third Party Transaction
- Drug Courts
- Prescription Drug Monitoring
- Controlled Party Dispersal
- Key Registration

Environmental Strategies lead to Community-Level Change
Tribal Best Practices

Oregon tribes, tribal entities and other academic advisors have met regularly since 2003 to gather information about indigenous practices that have longevity within tribal communities.

Approved Tribal Best Practices used in Oregon:
- Adventure Based
- Basketball Against Alcohol and Drugs (B.A.A.D.)
- Baby Doll Cradle
- Canoe Journey - Family
- Ceremonies and Rituals
- Cradle Boards
- Cultural Camp
- Domestic Violence Group Treatment for Men
- Family Unity
- Healthy Relationship Curriculum
- Horse Program
- Native American Community Mobilization
- Native American Story-Telling
- Positive-Indian Parenting
- Powwow
- Round Dance
- Sweat Lodge
- Talking Circle
- Tribal Crafts
- Tribal Family Activities
- Tribal Youth Conference
This model was originally developed by HPCDP local grantees working on an evaluation project in local communities. It was adapted to serve as a model for community programs’ policy change.
## Grant Responsibilities

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<thead>
<tr>
<th>Type</th>
<th>No.</th>
<th>Content</th>
<th>Timing</th>
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<tbody>
<tr>
<td>eLearning Module</td>
<td>1 per year</td>
<td>Education, Advocacy, Lobbying and Electioneering (required). Other topics may be offered and attended on a voluntary basis.</td>
<td>Winter 2019 and 2020</td>
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<tr>
<td>In Person or Webinar Trainings</td>
<td>Varies</td>
<td>Coordinated and led by HPCDP training teams and/or contractors related to HPCDP strategies and policy priorities in response to assessed needs. This may include training on prevention strategies, policy, systems, environmental change strategies and evaluation applied to an emerging policy context.</td>
<td>As needed to share information with grantees in a timely manner</td>
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<td>Communities of Practice</td>
<td>TBD</td>
<td>Coordinated and facilitated by HPCDP Policy Specialists. Networking and collaboration related to a specific strategy area that grantees are working in or addressing. Grantees must participate in at least one focus area.</td>
<td>To be determined by Communities of Practice and Policy Specialists</td>
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<td>Cohort Support Calls (by Grant Type)</td>
<td>6 per year</td>
<td>Coordinated and facilitated by HPCDP Community Liaisons. Operational support regarding grant requirements, Program Plans, lessons learned and successes.</td>
<td>Bi-Monthly</td>
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<td>Regional Support Networks (by Geographic Region)</td>
<td>6 per year</td>
<td>Regional collaboration, peer-to-peer mentoring and support</td>
<td>Bi-monthly</td>
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<td>Grantee and Contractors Meeting</td>
<td>1 per year</td>
<td>Networking, collaboration, evaluation, policy change</td>
<td>Fall 2019 and 2020</td>
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<td>Place Matters Conference</td>
<td>Every other year</td>
<td>Best practices training, Networking, collaboration, evaluation, policy change</td>
<td>Fall 2020</td>
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ADPEP Work Plan and Budget

**Work Plan:**
Grantee submits to HPCDP, a Biennial Alcohol and Drug Prevention and Education Program plan which details strategies to be implemented. Grantees will use the paper plan template and instructions provided in attachments.

ADPEP plans are approved by HPCDP.

The ADPEP plan includes: one outcome indicator, goal and planned strategy that focuses on reducing alcohol misuse. If you address other substances choose the outcome indicator, goal and planned strategy for each substance separately.

**Budget:**
24-month budget for the fiscal period July 1, 2019 – June 30, 2021, using the required Line Item Budget and Narrative Worksheet. The budget worksheet includes formulas to perform automatic calculations.
Two Annual Reporting Periods
Jan/Feb and July/August
ADPEP Orientation Check-In

1. Name / Grantee

2. What are you excited about?

3. What questions or concerns do you have?

4. How can we support you?

Thank you for participating today.