Alcohol and Other Drug Prevention Partners Outreach, Engagement and Collaboration

Executive Summary

Background

In 2015, the Oregon Health Authority (OHA) reorganized and transitioned alcohol and drug prevention responsibilities to the Public Health Division (PHD). This was a significant change for all involved, and an opportunity to leverage additional resources, grow a robust statewide comprehensive program and strengthen coordinated leadership at the state and locally for alcohol and other drug prevention in Oregon.

Outreach and Engagement Methods

OHA conducted a statewide prevention partner outreach and engagement process to gather input to understand key considerations for alcohol and drug prevention efforts among stakeholders.

OHA contracted with Coraggio Group to host listening sessions, conduct an online survey, interviews, in-person and online workshops, all to identify priorities and areas of opportunities for OHA to consider in moving forward as described in the Prevention Partners Conversations: Final Report. A Report Tour discussed the priorities identified in the Final Report. In additional convenings, partners together prioritized opportunities for immediate work together.

| 12  | listening sessions |
| 1   | online survey      |
| 23  | interviews         |
| 157 | participants       |
| 5   | Report Tour sessions |
| 3   | priority areas identified |
Collaboration

Three workgroups were formed to address prioritized areas of opportunity identified in the alcohol and other drug statewide engagement process. The workgroups brought together state agencies, tribes, counties and community-based agencies. Below are summaries of the work of each workgroup.

Crosswalk the Language and Frameworks of Public Health and Prevention
Words and frameworks matter because they guide and direct how we spend limited resources to prevent alcohol and other drug misuse. The group reviewed eight of the most commonly used frameworks for guiding and directing funding priorities in alcohol and other drug prevention. A Concepts and Connections document was developed—a visual crosswalk of frameworks and concepts used and applied in practice. Increased understanding of language and frameworks will continue to inform and facilitate productive conversations as we strive to best address alcohol and drug prevention.

Align and clearly communicate state-wide strategies, goals and priorities
Improved alignment and communication of state-wide strategies, goals and priorities related to the prevention of substance use, misuse, disorder, addiction and their related harms will amplify the impact of efforts and strengthen and sustain partnerships across the state. The workgroup aimed to be inclusive and holistic in defining a common agenda and shared goals, so that everyone with a stake in alcohol and other drug prevention could find a place to engage. A Framework for Collaboration: Recommendations to Promote a Collective Impact Approach to Alcohol and other Drug Prevention in Oregon was developed as serves as an invitation to participate in mutually-reinforcing efforts that will result in a collective positive impact for all people in Oregon.

Collaborate with prevention partners to imagine how future prevention efforts happens in Oregon
The efforts of Workgroup 3 are a culmination of this extensive participatory process to imagine a sustainable prevention network that supports stronger, healthier families and communities across Oregon. The common vision and proposed activities for the future is a recommended process for continuous improvement rather than a binding strategic plan. From prevention to screening to treatment to recovery, no central agency is tasked with all the activities listed. Implementation will require the participation, collective expertise, cooperation and shared responsibility of many partners across the state.

Moving Forward
A shared agenda with common goals can unite all and move Oregon past differences and seemingly contrary approaches. To the degree the alcohol and other drug prevention partners operate as described by Workgroup 2—with OHA’s Public Health Division as a convener for collective action—the activities proposed inform living, working initiatives and facilitate inter-agency collaboration along the continuum of care among communities and statewide.