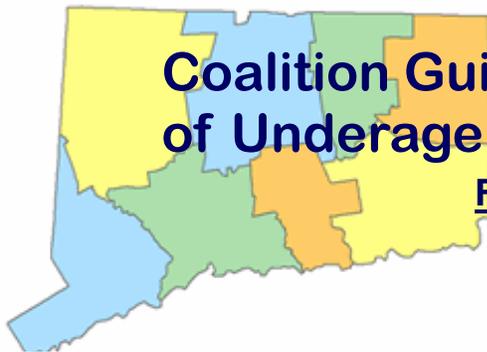


**State of Connecticut  
Department of Mental Health & Addiction Services**



**Coalition Guidance for the Assessment  
of Underage Drinking in Communities**

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## Introduction

Since February 2006, following a comprehensive analysis of state-level substance abuse prevention data conducted by the State Epidemiological Workgroup, community-based coalitions throughout Connecticut have been using the Strategic Prevention Framework (SPF) to understand and address underage drinking. Collection and review of sub-regional data related to consumption and consequences across the state's six priority substances – alcohol, tobacco, marijuana, cocaine, heroin, and prescription drugs – in both 2006 and 2008 coordinated by Regional Action Councils confirmed that **prevention of alcohol abuse with an emphasis on underage drinking is the single most significant substance abuse prevention need in every sub-region of the state**. To date, 29 coalitions in 57 communities statewide have implemented the SPF. With the October 2009 award of additional funding from the Center for Substance Abuse Prevention, Connecticut's Department of Mental Health and Addiction Services expanded the reach of this initiative to additional communities.

Connecticut's Partnerships For Success project will continue funding for 19 coalitions in 26 communities targeting underage drinking. In addition, 14 Best Practice providers with experience implementing evidence-based and innovative approaches are re-designing services and adopting the SPF. With input from local stakeholders these agencies will work to reduce and prevent alcohol abuse in youth ages 12-20 with an emphasis on environmental strategies. Prevention coalitions in both initiatives will support common performance targets, including a **significant reduction statewide in past month use of alcohol** as measured by local student surveys. Additionally both groups of coalitions will contribute to the on-going biennial sub-regional priority setting and community readiness assessment processes, which in 2010, for the first time will incorporate review of treatment indicators.

**Assessment, step one of the Strategic Prevention Framework, is a crucial step** in creating population level reductions in underage drinking and related consequences. A thorough understanding of community-specific risk and protective factors, and the scope of the problem of underage drinking is necessary to prepare for and engage in strategic planning. In other words, knowing what underage drinking "looks like" and the local conditions that drive it will help identify the most effective strategies for addressing and reducing it.

## Purpose of the Guidance Document

This document takes prevention coalitions step by step through the basic activities involved in assessing the scope of underage drinking and the risk and protective factors proven to contribute to it. Throughout this process, the Guide **will direct the coalitions efforts to conduct a focused, local needs assessment** and the Workbook will suggest data sources and provide a framework for collecting, organizing, and interpreting local data and information. The end result is a narrative that describes the risk and protective factors for underage drinking in your community and identifies the local underlying circumstances that contribute to consumption and consequences, including information on gaps and resources. Together, this knowledge represents much of the foundation on which the coalition will build a strategic plan.

The Guide is divided into the following five sections each of which describes specific tasks derived from the SPF model:

- **Establish an Assessment Process**
- **Examine the Sub-Regional Profile**

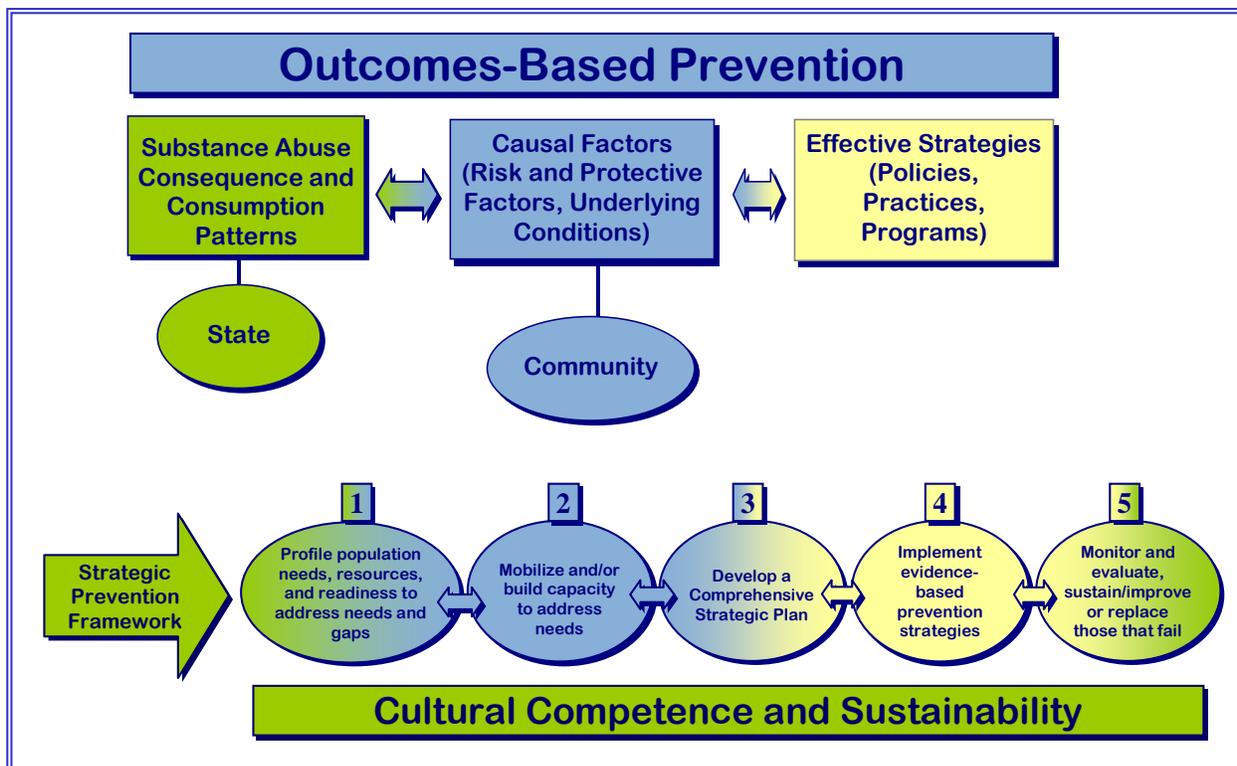
- **Collect and Interpret Data on Local Risk and Protective Factors**
- **Consider Student Survey Drinking on Underage Drinking**
- **Draft Narrative of Process and Findings**

The documentation in the Workbook will inform the coalitions strategic planning process and serve as the basis for the Assessment Section of the Strategic Plan. Both the Guide and the Workbook will **help the coalition understand and describe the community’s needs and resources related to underage drinking.**

Remember, SPF’s needs assessment step does not include deciding which risk factor(s) the project will address. The coalition will prioritize risk factors and determine which will be targeted and addressed as part of step 3, strategic planning.

**The Strategic Prevention Framework at the Community Level**

The SPF is grounded in outcomes-based prevention, as depicted in the diagram below. The theory behind the model is that a combination of risk factors, protective factors and underlying conditions collectively contribute to - or “cause” - substance abuse in communities and that population-level changes in consumption and consequences are brought about by impacting these factors. In short, it begins with the end in mind. Therefore, in order to plan for and direct desired outcomes, coalitions must develop a solid understanding of local risk factors, protective factors and underlying conditions by examining community-level data, including information on gaps and resources. Only then can priorities be set and appropriate strategies be identified to reduce substance abuse and related problems.



As a foundation for the community needs assessment process, DMHAS, the State Epidemiological Outcomes Workgroup, and the Regional Action Councils examined use and consequence data for six priority substances at both the state and sub-regional levels. These findings are summarized in the State Epidemiological Profile and Sub-Regional Profiles posted on the DMHAS website at <http://www.ct.gov/dmhas/cwp/view.asp?a=2912&q=335124>. DMHAS, the SEOW, and the RACs conduct on-going data collection and analyses and continually communicate with community coalitions to ensure coordination of efforts, maximize resources, and avoid redundancies.

## Important Reminders and Considerations

The data-driven activities described in this document provide a foundation for all strategic planning efforts that follow and must be informed by a **group process**. Community coalitions need to include a broad representation of stakeholders that are knowledgeable of and interested in prevention and health issues across the lifespan and reflect the cultural diversity of the community being served.

Needs assessment is an opportunity to get to know the community and coalition members. **Each member of a coalition is a resource** with a unique perspective and access to different data and information. Harnessing this intelligence and gathering these facts in an appropriate and respectful manner is an important aspect of coalition building and sustainability.

It is important to recognize that **needs assessment, like all aspects of the SPF, is on-going and iterative**. The process will continuously collect, incorporate and respond to new information on underage drinking, community resources and readiness as it becomes available.

## Section 1: Establish an Assessment Process

Following a review of this Guide and training on Needs Assessment, each coalition must identify members to participate in and develop a local process for identifying, gathering, organizing and interpreting data and information related to local risk factors, protective factors and underlying conditions contributing to underage drinking in their community.

What are risk and protective factors? They are aspects of a person (or group) or environment that make it more likely (risk factors) or less likely (protective factors) that people will experience a given problem or desired outcome. For example, within both families and communities, easy access to alcohol can heighten risk for alcohol among youth while clear limits and consistent enforcement of discipline (or laws) can discourage - or protect against - use.

### Coalitions will:

- 1. Identify coalition members who will work on the assessment process.
- 2. Identify necessary skills within the coalition, such as an understanding of data, strong community contacts, and culturally competent communication skills.
- 3. Determine specific roles, such as collecting data, organizing data, and assisting with data interpretation for coalition members.
- 4. Identify additional expertise that may be needed and potential sources of that expertise.
- 5. Ensure that diverse cultural and social groups are involved in all aspects of the process, including:

- Consider aspects of culture and diversity such as language, age, gender, ethnicity, religion, disability status, sexual/affectional orientation, reading or developmental levels, socio-economic status, etc.
- Recruit diverse coalition members and groups to contribute to data collection, organization, analysis and reporting functions/roles.
- Identify what persons and groups are and are not being represented in the needs assessment process.
- Note any disparities among groups and/or cultural variables observed in the data.  
*When examining information on consumption patterns and consequences, look to answer who, what, where, when, how, how much, as well as the how much more for one group over another?*
- Identify community supports or technical assistance needs for bridging any gaps.

## Section 2: Examine the Sub-Regional Profile

Each coalition will use the 2008 Sub-Regional Profile to begin to explore underage drinking in their community. The profile is a starting point and an example of secondary review of existing, quantitative data. As your needs assessment process unfolds you will incorporate both qualitative data and anecdotal information and will likely collect at least some new (primary) data to supplement your research and understanding. Together this information describes the underlying conditions that contribute to underage drinking in your community.

### **Compare and contrast your community with the sub-region in terms of the following:**

1. Demographics
2. Past-month alcohol use data
3. Alcohol-related mortality and morbidity data
4. Alcohol- and drug-related crime data
5. Other alcohol-related social consequence data

Use both the 2006 and 2008 profile to compare trends, as applicable.

To access and download the Sub-Regional Profile containing your community, go to

<http://www.ct.gov/dmhas/cwp/view.asp?a=2912&q=335124>

Contact your Regional Action Council to determine if there is additional data or more recent information related to alcohol use in underage populations in your community. In some cases, RACs are also able to assist with dis-aggregation of sub-regional data to the community level.

It may also be helpful to compare and contrast data related to underage drinking in your community with Connecticut, go to 2009 CT SPF State Epidemiological Profiles at the above website to access this information.

### **Begin to discuss with coalition members how the data related to alcohol use and consequences in the sub-regional profile compares with their experience and understanding of underage drinking in your community.**

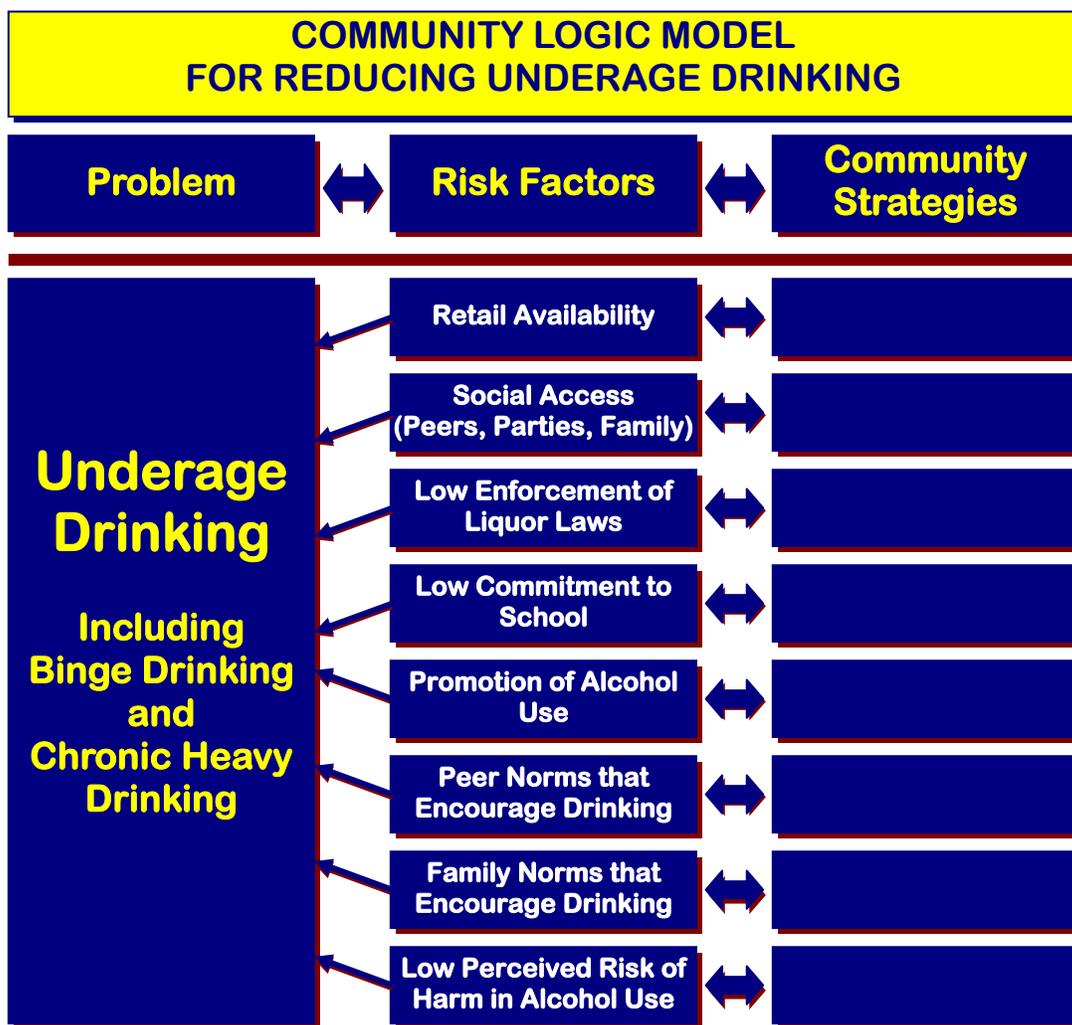
Note areas of agreement and discrepancy for later consideration. Coalitions, by virtue of their membership and connection to other organizations, possess a wealth of information about substance abuse issues. Supplemental information should flow naturally from on-going

discussion and relationships with coalition members so it is important to acknowledge and explore different perspectives and opinions and keep the lines of communication open.

### Section 3: Collect and Interpret Data on Local Risk and Protective Factors

In this section, each coalition examines indicator data for a specific set of community risk factors known to contribute to underage drinking. This process identifies the unique strengths and vulnerabilities impacting the problem locally. To do so, each coalition **gathers data that describe precisely what is happening, where it is happening, to whom, and why.** Coalitions review a variety of sources including survey results, focus groups and key informant interviews and supplement existing information with primary data collection where needed.

The eight risk factors to be examined are found in the Community Logic Model below. They were chosen after an extensive search of the scientific literature on underage drinking experts who concluded that they are the **only risk factors that have been proven to contribute to underage drinking.** In Step 3, Strategic Planning, coalitions will prioritize risk factors and select strategies that address those priorities (which may include strategies they are already doing), and complete a community-specific logic model.



By linking community-specific risk factors to appropriate, effective strategies, every DMHAS prevention provider and coalition – even those currently implementing evidence-based or innovative prevention strategies – has the opportunity to reorganize their work in a manner that **increases the probability that their efforts to reduce underage drinking will succeed in creating community-level change** and will be sustainable over time.

Below is a set of definitions for each of the risk factors contained in the Community Logic Model.

**Definitions of Underage Drinking Risk Factors in Community Logic Model**

**Retail Availability of Alcohol**  
Retail availability refers to outlets that sell alcohol to minors, including liquor stores, grocery stores, convenience stores, etc.

**Social Access to Alcohol**  
Social access includes obtaining alcohol from parent’s supplies or from older siblings and friends, or at parties.

**Low Enforcement of Liquor Laws**  
Low enforcement refers to minimal effort toward reducing access to alcohol or use of alcohol by minors. These efforts include compliance checks, sanctions to violating merchants, penalties for both minors and adults who provide alcohol to them, penalties applied to the use of false identification, and ticketing minors attempting to purchase alcohol.

**Low Commitment to School**  
Students who hate school, who attend only so they can hang out with friends, or who lose their commitment to being a student and getting an education, are at elevated risk for problems. These are students who feel little or no sense of involvement and obligation to their school or education.

**Promotion of Alcohol Use**  
Alcohol use at community events or in public areas (e.g., at county fairs, in parks, or at beaches), sponsorship of public events (e.g., a beer company sponsoring a boat race), and alcohol media campaigns that target youth on TV, billboards, sides of buses, and in other public areas.

**Peer Norms that Encourage/Accept Drinking**  
When peer norms appear to encourage immoderate drinking, underage drinking goes up. Regardless of gender or ethnic group, most students believe that their peers hold more permissive attitudes about drinking than they actually do. Likewise, they believe that their peers drink more heavily than they do.

**Family Norms that Encourage/Accept Drinking**  
When parents or siblings are heavy drinkers or parents involve their children in drug use (i.e. asking their child to get them a beer), the likelihood that teens will drink increases. Family factors appear especially important in the early initiation of alcohol use.

**Low Perceived Risk of Harm from Alcohol Use**  
Research has established that low perception of harm towards alcohol and drug use is a risk factor for use. Initiation of substance use is preceded by values favorable to its use.

Using the tables in the Workbook as a guide, coalitions will examine these risk factors.

**Coalitions will:**

**A. Identify and collect indicators they will use to examine each risk factor.**

- This will be repeated several times, once for each risk factor.
- Determine potential sources of community-level data available for each indicator.
- Collect and describe indicator data and information.
- What does it tell you?
- Does it point to gaps or resources?
- Is the source reliable and the information valid?
- How often is it collected?
- Can you report on trends?

**B. Examine and interpret indicator data for each risk factor.**

Collectively, what do each set of indicators say about how each risk factor contributes to underage drinking in your community? Consider the following for each of the eight identified community risk factors.

- What is the magnitude of this risk factor in your community?
- What is the severity of this risk factor in your community – how lethal is it?
- What sub-populations of underage drinkers are most affected by this risk factor?
- Where does this risk factor have the most and least impact?
- From a broad cultural/multicultural perspective, what disparities exist in this information among groups and cultural variables?
- What available resources are linked to this risk factor?
- What gaps in resources are linked to this risk factor?
- What are the limitations of the available local information on this risk factor?

*How confident are you that this data accurately reflects circumstances in your community? What additional information can you get or do you wish you had?*

**MAGNITUDE** describes the number of people affected by a problem.

**SEVERITY** refers to premature mortality or years of potential life lost.

**IMPACT** relates to the depth of a problem in terms of social, health, economic and legal costs.

**C. Summarize key findings for each risk factor.**

**Section 4: Consider Student Survey Data on Underage Drinking**

What student survey data is available that might provide further insight into the problem of underage drinking in your community? Are there any aspects or dimensions of underage drinking are captured in the survey?

- What does the survey tell about the local underlying factors driving underage drinking? Does it reveal information regarding age, gender, race or ethnicity?

- What age group is surveyed? How is the survey sample selected? Does the survey sample represent the student population of the community?
- What do the answers to these questions tell the coalition about underage drinking?
- What resources does it point out? Developmental assets? Risk and protective factors that exist?
- 

The Workbook includes a table to assist with organization and interpretation of this information.

## Section 5: Draft Narrative of Process and Findings

The final task of Needs Assessment is documenting your methods and results. This information will form the backbone of the Assessment Section of your Strategic Plan. At a minimum your narrative must describe the information outlined below. Be clear and concise and use plain language. Aim to educate and inform lay people and community members outside of your coalition and SPF process.

### **A. The local needs assessment process and coalition members who participated.**

Summarize:

- The processes used to identify, gather, organize and interpret data.
- Coalition members who contributed.
- How the coalition ensured diverse representation in the needs assessment process.
- The multicultural considerations and strategies used. (See Section 1)
- The role of the Regional Action Council.

### **B. The coalition's interpretation of sub-regional profile data related to underage drinking.**

Compare and contrast your community with the sub-region in terms of:

- Demographics
- Past-month alcohol use data
- Alcohol-related mortality and morbidity data
- Alcohol- and drug-related crime data
- Other alcohol-related social consequence data

### **C. A summary of community-specific findings for each of eight risk factors examined.**

Describe major findings for each risk factor:

- What is the magnitude?
- What is the severity?
- What sub-populations are most affected?
- Where does it have the most and least impact?

- What disparities exist among groups and cultures?
- What resources are linked to it?
- What gaps in services are associated with it?
- What are the limitations of the available local data and information?

**D. A description of student survey data.**

- What grade(s) are surveyed? How is the survey sample selected? What do the answers to these questions tell the coalition about underage drinking?
- Which of the 4 core measures are included in the survey? Is there any trend data available for these core measures? If so, what are the trends?
- How does this community level data compare with state or national data?
- Do the survey results make sense/fit with other information obtained about underage drinking in the community?
- What does the survey tell about the local underlying factors impacting underage drinking? Does it reveal information regarding age, gender, race or ethnicity?
- What resources does it point out? Developmental assets? Risk and protective factors that exist?
- What are the strengths and weaknesses or limitations of the survey regarding information it provides about underage drinking in the community?

**\*Remember - you will not choose which risk factor(s) your coalition will focus on or identify prevention strategies in this step - you will gather and interpret data on each risk factor and collect supplemental information as warranted to describe the local underlying factors contributing to underage drinking in your community.**

**You are required to provide the completed workbook and narrative to DMHAS and your technical assistance partner for their review and recommendations for revision prior to moving on to strategic planning.**