

COMMUNITY PREVENTION
AND WELLNESS INITIATIVE

STRATEGIC PLAN 2019



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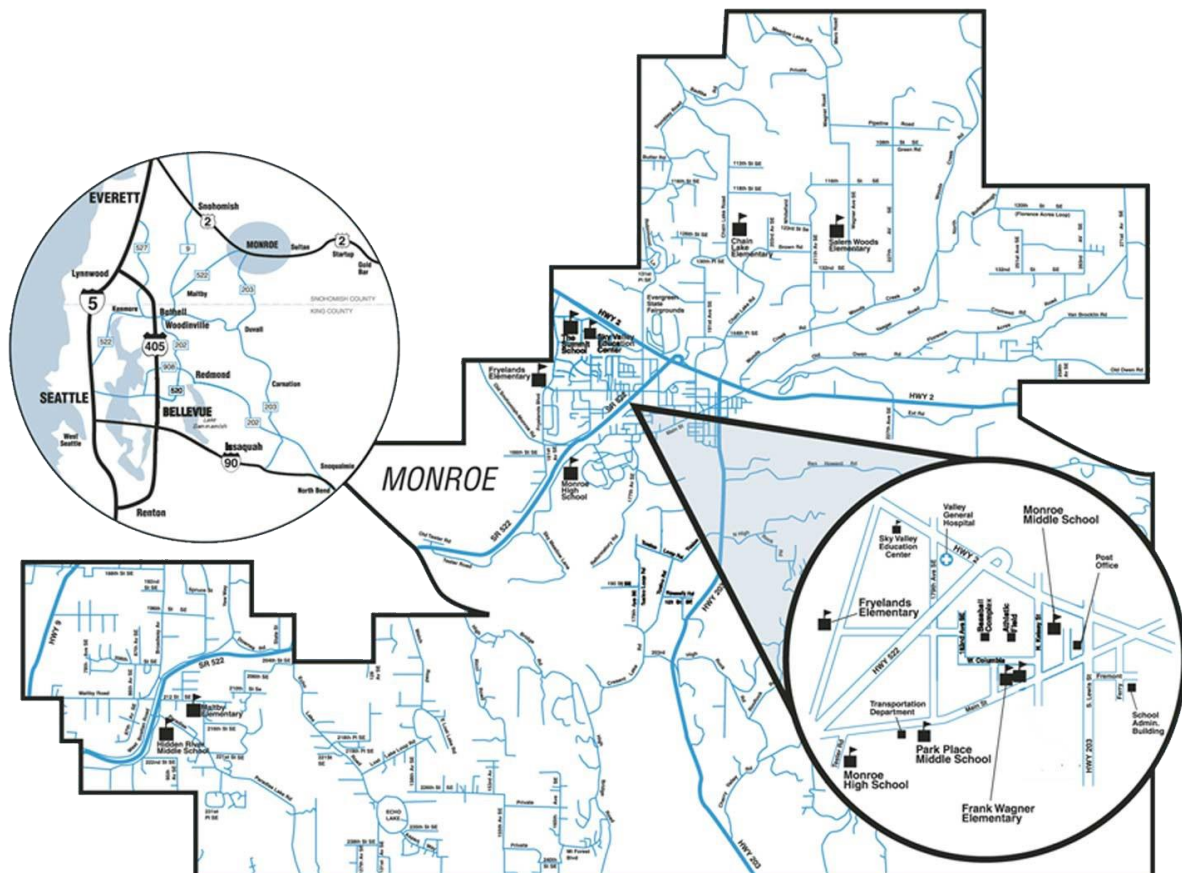
EXECUTIVE SUMMARY

Who We Are

Monroe Community Coalition is a grassroots volunteer organization dedicated to improving the health and wellness of our community by reducing risk factors and enhancing protective factors associated with substance use and mental health. We are a community collaboration working to implement drug prevention and mental health promotion with a community-based approach.

Monroe has a history of successful collaboration in prevention initiatives including historical support for ongoing Student Assistance Prevention-Intervention Services.

The Coalition serves the geographical reach of the Monroe School District's boundary lines, spread over 82 square miles in southeast Snohomish County, Washington.



Our Plan

The Monroe Community Coalition subscribes to the risk and protective factor model of substance abuse prevention developed by J. David Hawkins and Rico F. Catalano at the University of Washington's School of Social work. This science-based approach is the only model shown to accurately predict community rates of substance abuse, delinquency, teen pregnancy, school dropout, violence, and the development of mental health disorders. By using the model to identify local vulnerabilities across four psychosocial domains (community, school, family, peer/individual), we believe we can use our resources to affect meaningful and lasting community change. Based on our analysis of the best available data for our community, the coalition has chosen to influence the following risk (R) and protective (P) factors during the 2019 – 2021 period:

Domain: Community

(R) Community Disorganization

Domain: Family

(R) Family Management Problems

Domain: Peer/Individual

(R) Favorable Attitudes Toward the Problem Behavior

(R) Early Initiation of the Problem Behavior

We will attempt to influence these factors by implementing the following strategies and activities:

Goal: Reduce low neighborhood attachment and community disorganization

Objective: Increase community capacity to address alcohol, marijuana, nicotine and other drug use in Monroe

Strategy: *Community-based Process*

Monroe Community Coalition

Monroe Community Coalition will implement this strategic plan according to the Strategic Prevention Framework through the 2019-2021 period and beyond. Monthly meetings and workgroups, Coalition and community training, key leader events and outreach will all occur as documented herein.

Goal: Reduce family management problems

Objective: Increase or maintain positive attitudes of healthy family management practices

Strategy: *Education and Media*

Parenting Wisely

Parenting Wisely (PW) is an evidence-based parenting skills education course taught in a group setting or online. The Coalition may offer separate versions for parents of Teens

and for parents of young children, depending on need. Extensive research and clinical tests show that use of Parenting Wisely results in:

- Increased knowledge and use of good parenting skills
- A decrease in child behavior problems
- Improved problem solving
- Reduced spousal violence and violence toward children

Under the Influence of You

The Under the Influence of You campaign reminds parents and other trusted adults about the influence they have on the teens in their lives, encourages them to talk with teens about the risks and consequences of marijuana, and provides tips on how to have effective conversations. The campaign features four 15-second animated videos, a suite of banner and social media ads, posters, and print ads. All Coalition outreach and training will integrate the *Under the Influence of You*. brand.

Goal: Reduce early initiation of the problem behavior

Objective: Reduce youth intentions to use alcohol, tobacco and other drugs; Decrease destructive behavior in the classroom

Strategy: *Education and Environmental*

Project Success

The Student Assistance Professional will implement Project SUCCESS curriculum with fidelity to its intended design, which includes the following five program components:

- Prevention Education Series: Full implementation of the eight session classroom prevention education series to all freshman.
- Individual and Group Counseling: Following participation in the Prevention Education Series, students are assessed for services. They may receive individual counseling or may participate in counseling groups.
- School-wide Awareness and Outreach Activities: activities in conjunction with national events, contests, and the prevention club are intended to connect students with prosocial peers and adults, and challenge false community norms.
- Parent Programs: Parents are involved in Project SUCCESS through a series of parenting workshops. These workshops provide parents with prevention information and an opportunity build social support.
- Referral: Students and parents who require treatment, more intensive counseling, or other services are referred to the appropriate agencies in their community.

SPORT Prevention Plus Wellness Program

SPORT is a motivational goal-setting intervention designed for use by all adolescents in middle and high school. It integrates substance abuse prevention with health promotion messaging to help adolescents minimize and avoid substance use while increasing physical activity and other health-enhancing habits, including eating well and getting adequate sleep. SPORT is one of a handful of evidence-based and cost-beneficial programs eligible for I-502 Dedicated Marijuana Account prevention funding.

Policy Education and Advocacy

Monroe Community Coalition will assess local policies influencing substance use risk factors and engage in activities to build support for enacting needed policy change. The Coalition will also build capacity and support within the community for understanding and the need for policy change.

Goal: Influence early initiation of the problem behavior

Objective: Increase self-regulation

Strategy: *Education and Information Dissemination*

PAX Good Behavior Game

PAX Good Behavior Game teaches students self-regulation, self-control, and self-management in the context of collaborating with others for peace, productivity, health and happiness. Although it is regarded by the Institute of Medicine as one of the most effective classroom-based prevention programs in the Country, PAX GBG is not program at all; rather, it is an environmental intervention used in the classroom with young children to create an atmosphere that is conducive to learning by reducing off-task behavior, increasing attentiveness, and decreasing aggressive and disruptive behavior and shy and withdrawn behavior. The intervention also aims to improve academic success, and has produced well documented mental health and substance use outcomes later in life.

Coping Power Program

Coping Power Program is a cognitive-behavioral intervention that is delivered to moderate-to high-risk children in the late elementary school and early middle school years. The program lasts from 15 to 18 months and includes an integrated set of child and parent components. Coping Power is based on an empirical model of risk factors for substance use and addresses high-risk children's deficits in social competence, self-regulation, school bonding, and positive parental involvement. The Coping Power child component consists of 33 group sessions and periodic individual sessions and is delivered in school-based settings. The program helps aggressive and disruptive boys understand the physiology of aggression, especially anger, and teaches them coping strategies such as self-talk (e.g., calming oneself down by telling oneself, "Maybe he didn't mean that. If I start a fight, I'll

get into trouble.”). The Coping Power parent component consists of 16 group sessions and periodic home visits and individual contacts. Postintervention results indicate that the program has had effects on reducing children’s aggressive behavior and preventing their substance use.

Reconnecting Youth

Reconnecting Youth (RY) is a 75 session, selective, semester-long evidence-based mental health promotion, suicide prevention, and substance abuse prevention program created by the developers of CAST (Coping and Support Training). RY aims to increase coping skills and student involvement in healthy social activities by engaging participants in activities that increase bonding to their school.

Goal: Reduce favorable attitudes toward the problem behavior

Objective: Decrease favorable attitudes toward substance use

Strategy: *Education and Media*

Botvin LifeSkills Training

LifeSkills Training (LST) is a school-based program that aims to prevent alcohol, tobacco, and marijuana use, as well as violence, by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors. The program is designed to provide information relevant to the important life transitions that adolescents and young teens face, using culturally sensitive and developmentally and age-appropriate language and content. LST will be implemented at Park Place and Hidden River Middle Schools, with 6th graders receiving 15 sessions, 7th graders receiving 10 sessions and 8th graders receiving 5 sessions.

Lift/Rise Youth Campaign

The Coalition will work with youth engaged in the Sources of Strength program to develop and implement its “Lift/Rise” campaign based on hope, connection and positive social norms. This locally developed youth campaign is intended to promote unity among teens, connection to trusted adults, and increase other protective factors known to buffer against substance use and suicide.

About This Document

This plan contains our roadmap to creating lasting community change in Monroe. Each section documented in this plan aligns with a corresponding step of the Strategic Prevention Framework: Getting Started, Assessment, Planning, Implementation and Evaluation. Each of these sections also addresses our need to build capacity, enhance cultural competence and address issues of local sustainability.

Organizational Development

Our Mission Statement and Key Values

Monroe Community Coalition is dedicated to improving the health and wellness of our community by reducing risk factors and enhancing protective factors associated with substance use and mental health. We are a community collaboration working to implement drug prevention and mental health promotion with a community-based approach.

We approach our work through the lense of J. David Hawkins and Rico F. Catalano's risk and protective factors model for preventing substance abuse, utilizing Washington State's adaptation of a planning framework known as the Strategic Prevention Framework (SPF). The SPF pushes the Coalition to seek answers to five basic questions that align with the model's five step process:

1. **Are we ready to participate in the Community Prevention and Wellness Initiative?**
 - **Stage:** Getting Started
 - **Action:** Confirm partnerships
2. **What is the Problem?**
 - **Stage:** Assessment
 - **Action:** Analyze Local Data
3. **What is our plan for addressing the problem?**
 - **Stage:** Planning
 - **Action:** Develop a thoughtful, data-driven plan
4. **What are we going to do to get the work done?**
 - **Stage:** Implementation
 - **Action:** Put effective prevention programs and policies in place
5. **How will we know if we have succeeded?**
 - **Stage:** Evaluation
 - **Action:** Measure our efforts for positive changes



This model of the Strategic Prevention Framework requires the Coalition to continually assess whether or not we have the tools to accomplish our goals, and – if not – to build our prevention capacity. The SPF is an ongoing process that allows our Coalition to make meaningful connections between people, data and effective interventions.

Our key values reflect the ideals we want to see upheld in our community and define how the Coalition will achieve its mission. Our values define our conduct and how we want to be viewed within the community.

The Monroe Community Coalition practices multi-cultural, civically responsible behavior and professionally respectful interactions. We embrace research-based prevention principles and practices – particularly where we are called to act on behalf of the youth of our community.

Coalition Structure and Organization

MCC is a grassroots volunteer organization dedicated to improving the health and wellness of the community by reducing risk factors and enhancing protective factors associated with underage drinking and other substance use. The organization is guided by a Leadership Team that sets the tone for collaboration and keeps the Coalition's scope of work focused by ensuring fidelity to its strategic plan and operating principles. The Leadership Team also guides policy development and provides assistance to Coalition members, including support to the Coalition's various ad hoc subcommittees. The Coalition Coordinator responds to the day-to-day responsibilities of running the Coalition including coordinating with the Division of Behavioral Health and Recovery and the Monroe School District, the Coalition's fiscal agent.

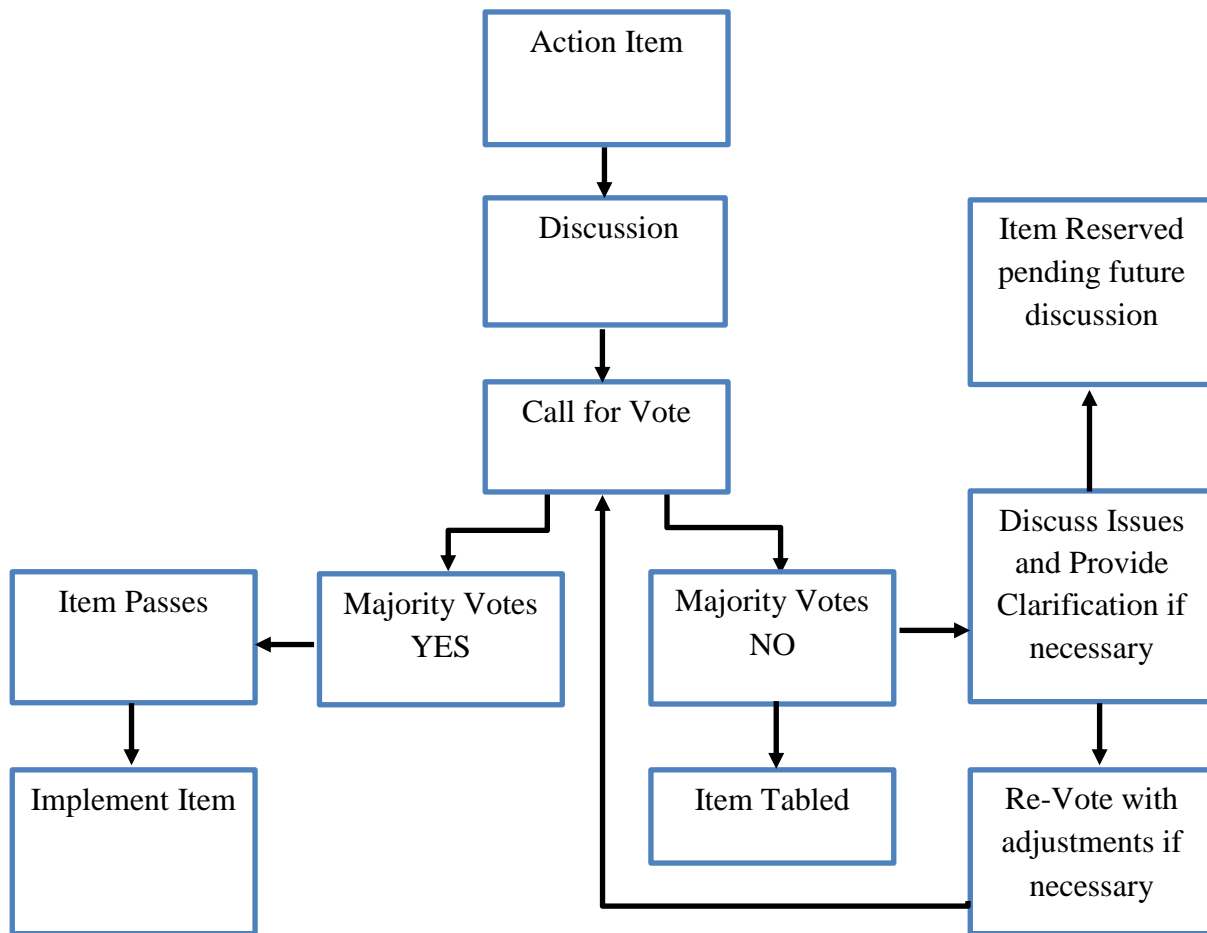
Decision-making process

Coalition decisions are made by a simple majority of the Coalition voting membership after hearing recommendations from the Leadership Team and engaging in a group discussion where everyone's opinions are welcomed, heard and understood. Although consensus is our goal, achieving a simple majority is the surest route to accomplishing the Coalition's objectives.

When a majority votes against a proposal, a discussion is conducted to determine if the proposal under consideration is in the best interest of the Coalition; if the proposal should be set aside; or where clarification about a concern is needed and what adjustments should be made in order for the proposal to be presented for a second majority vote. Members have the right to abstain from voting for any reason. Despite one's personal feelings on a given issue, Coalition members agree to publicly support the activities of the Coalition regardless of how they voted.

Fiduciary decision-making is approved by the Coalition during annual strategic planning sessions and are submitted to the Division of Behavioral Health and Recovery (DBHR) for approval.

Monroe Community Coalition Decision Making Model



Fiscal Agent

The Coalition conducts business through a fiscal agent, the Monroe School District, which serves as a pass-through agency for Community Prevention and Wellness Initiative funding for staff, strategies and activities. While the school district provides fiscal oversight and limited administrative management, the Coalition retains discretion and control over fiduciary decision making.

Communication

Effective communication – literally, the process of sending and receiving messages – is important to the Monroe Community Coalition. As each Coalition member develops understanding and respect for one another, they build a foundation on which members may challenge each other to think differently to find the best possible strategies with which to build protection against our vulnerability to underage substance abuse and mental health promotion.

To mitigate breakdowns in the communication process, MCC strives to be culturally competent and mindful of the environment in which meetings occur. The Coalition membership includes skilled facilitators with the experience to direct difficult conversations, including members from community-facing agencies like Monroe School District and the faith community. Each member of the Coalition, from Voting Members to Guests, is responsible for:

- Respectful interaction.
- Acknowledging different communication methods and styles.
- Actively participating in conflict resolution when necessary.

All official communication with community partners and leadership begins with the elected Leadership Team, as a Coalition discussion item, or with the Coalition Coordinator. Messages are disseminated through our communication network, which has grown to include social media, email, newsletters, print media and word-of-mouth. The Coalition also benefits from a strategic partnership with the Monroe School District's Communications Office, through which we are able to engage a large swath of diverse constituents and stakeholders through their all-staff and all-household emailing systems.

Coalition Structure and Organizational Chart

MCC continues to refine its organizational structure as it grows into the Coalition that our members want it to be. This includes elected leadership comprising Co-Chairs, Community Relations Officer, and At-Large members as well as several standing and ad-hoc subcommittees that meet as needed.

Membership:

- Voting Members
- Advisory Members
- Guests

Standing Subcommittees:

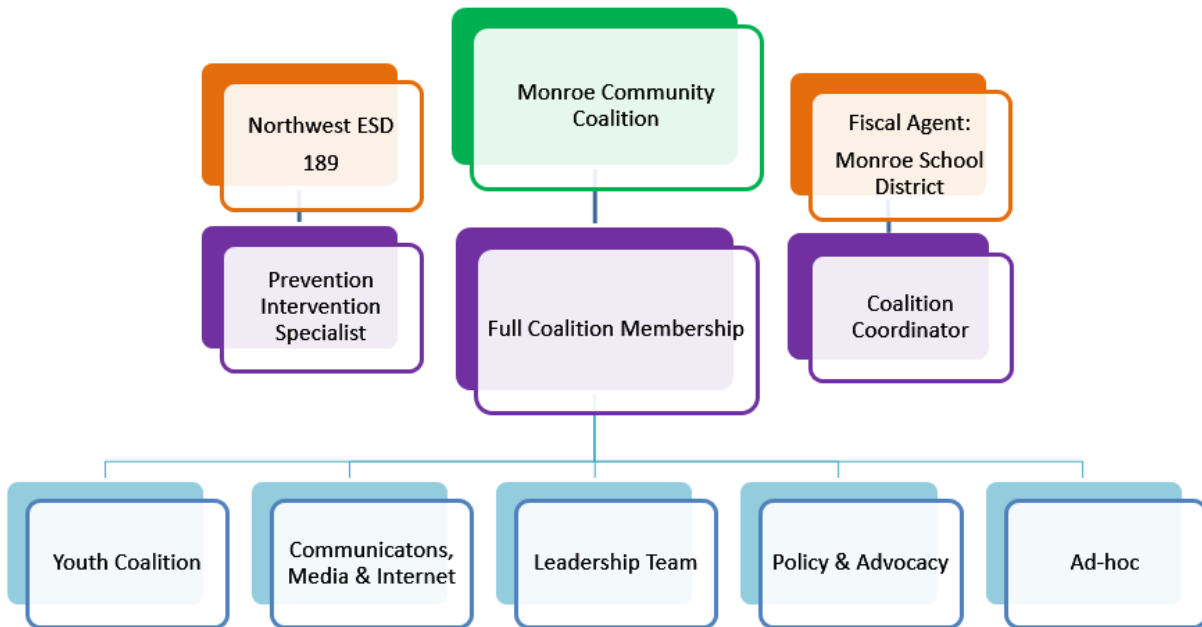
- Leadership Team
- Prevention Club/Youth Coalition
- Policy/Advocacy
- Communications
- Ad-hoc

Leadership Team Positions:

- Co-Chair x2 (voted)
- Community Relations (voted)
- At-Large x2 (voted)
- ESD 189 SAP
- Coalition Coordinator (staff)

With regard to developing this strategic plan, the Coalition made use of our standard decision making process. For the 2019-2021 period, the Coalition full-membership elected not to change our organization plan. After conducting our needs assessment process this March and May, the Coalition deliberated our action plan June, voting to approve and submit the plan to the Division of Behavioral Health and Recovery.

Monroe Community Coalition Organizational Chart



Coalition Meetings

The Monroe Community Coalition meets monthly in accordance with our Coalition By-Laws. Ongoing workgroups, including the Leadership Team, also meet regularly, at intervals determined by each workgroup. Ad-hoc workgroups form and meet as an issue, strategy or activity dictate, with workgroup leads stepping forward on a volunteer basis.

Membership Recruitment and Retention

Membership in the Monroe Community Coalition is open to any person or organization that lives or works in Monroe and the greater Skykomish Valley that wishes to participate in developing and implementing strategies that prevent youth substance use and suicide while promoting health and mental wellness within the Monroe School District boundary lines.

Although month-to-month participation in Coalition meetings are fluid, we operate with three tiers of membership: Voting Membership, Advisory Membership and Guest.

Voting Member

To become a Voting Member, an interested person must attend three consecutive Coalition meetings. There is no limit to the number of voting members who can be a part of the MCC. To be considered a Voting Member, one must agree to support the work of the Coalition by providing ongoing attendance and guidance to the Coalition through their voice, knowledge, experience and

skills. Their regular attendance and active participation at monthly meetings provide accountability to the group and the Coalition's work. Voting Members:

- Support the key values and mission of the Monroe Community Coalition.
- Make every effort to attend regular and special meetings of the Coalition.
- Seek opportunities to contribute their unique skills to the work of the Coalition.
- Learn about prevention science and how it applies to our work in the community.
- Attend trainings and events supported by the Coalition when possible, and bring knowledge back to share with the Coalition as applicable.
- Serve as ambassadors by speaking the message of the Coalition throughout the community, promoting the Coalition's work, seeking community input, and communicating Coalition priorities to other groups in which the voting member is involved.
- Are respectful of fellow coalition members by being open and welcoming of diverse community voices and opinions.
- Agree to publicly support the decisions of the Coalition once they have been approved by the membership.

Advisory Member:

Advisory Members of the Coalition are considered to be key liaisons between the Coalition and the external groups or agencies they represent. An Advisory Member does not vote, but supports the work and projects of the Coalition to reduce underage drinking and other substance use in the community.

Advisory Member status is a mechanism for the Coalition to remain formally connected to important community allies and partners that might otherwise be too busy to commit to regular participation. Advisory Members:

- Publicly support the mission of the Coalition.
- Agree to be on the Coalition distribution list.
- Serve and function as a resource when called upon by the Coalition.
- Attend meetings as their schedule allows.

Guests:

Guests are interested members of the community who attend and participate in Coalition meetings, but who have not been approved as a Voting member. Guests are an important Coalition resource, as each has the potential to become a Voting or Advisory member and also has sway within their external spheres of influence. Guests may participate in Coalition subcommittees, full membership meetings and special projects, but do not vote on Coalition matters.

Role of the Leadership Team

The Leadership Team sets the direction of the Coalition and its subcommittees in alignment with the goals and priorities identified in this strategic plan. It emphasizes making decisions as a group, instead of as individuals, to ensure proper coordination and operation of the Coalition. The Leadership Team also sets the full membership meeting agenda and supports the Coalition Coordinator to ensure the Coalition is operating within the bounds of the Community Prevention and Wellness Initiative. It is comprised of elected Co-Chairs, a Community Relations Officer, At-Large members and the Coalition Coordinator and ESD Student Assistance Professional. Leadership Team meetings are open to participation by any voting member.

Role of the School District

The role of the Monroe School District is to work with the Monroe Community Coalition while allowing them to make decisions that fulfill CPWI requirements. The Coalition fulfills the District's policy requirement (P2121) for a substance abuse advisory committee. Additionally, the Coalition Coordinator is an employee of the District, is not a voting member of the Coalition, and shall not serve as an elected officer. School District tasks include:

- Ensure that all provisions of CPWI are met in a timely manner:
 - Serve as the Coalition's fiscal agent.
 - Employ and provide oversight for the CPWI Coalition Coordinator
 - Participate in monthly technical assistance meetings with DBHR

Role of Educational Service District (ESD)

The role of the ESD is to implement school-based prevention and intervention student support services. ESD Staff are important Advisory Members of the Coalition but cannot serve as elected officers. ESD tasks include:

- Supervise Student Assistance Professional in cooperation with district and building level administrators.
- Participate in monthly CPWI Learning Community Meetings.

Coalition Engagement

The Coalition Coordinator tracks membership and involvement in Coalition initiatives through sign-in sheets, minutes and in-person, telephone or email follow-up. Subcommittee assignments occur on a volunteer basis. Progress and completion of assignments are tracked through word-of-mouth, targeted surveys and implementation of the pre- and post-survey Coalition Assessment Tool. Additionally, involvement in Coalition subcommittee meetings – like the Leadership Team – and other activities are entered in the State's management information system. The Leadership

Team also develops purpose driven and strategic agendas prior to each Coalition meeting. As the primary document most members will see before deciding to attend a meeting, our action-oriented agendas are designed to engage the membership in planning, capacity building, and delegating tasks for activity or strategy implementation. The Coalition’s goal is to avoid agenda stagnation by developing meaningful agenda items that keep members engaged.

Sectors of Support

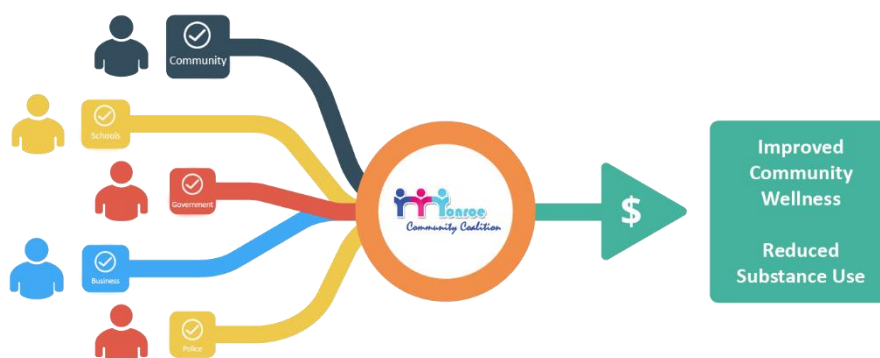
The MCC recognizes that a diverse membership is the foundation upon which its strength, effectiveness and future success is constructed. As a prevention-focused Coalition, it prioritizes finding members from 14 key sectors of the community, which include:

- Youth
- Media
- Law enforcement
- Religious/Fraternal organization
- State, local or tribal government with expertise in the field of substance abuse
- Parents
- Schools
- Healthcare
- Mental Health Treatment
- Businesses
- Organizations serving youth
- Civic/Volunteer Groups
- Substance Abuse Treatment
- Other organizations involved in reducing substance abuse

Minimally, the Coalition reviews member participation annually to determine if at least eight of the twelve key sectors of support are represented. If they aren’t, the Coalition begins targeted recruitment within the community, led by the Community Relations Officer.

MCC continues to develop broad support from across sectors of the Community. Sectors with primary members on the Coalition are highlighted in blue below:

Youth	Parent	Law Enforcement
Civic/Volunteer Group	Business	Healthcare
Media	School	Youth Serving Organization
Mental Health	Religious/Fraternal Organization	Local Government
Chemical Dependency Treatment	Other Substance Abuse Org.	



The Coalition will continue to engage in targeted recruitment and is committed to bringing additional sectors of support to the coalition table.

Student Assistance Professional Engagement

The CPWI project-funded Student Assistance Professional is stationed at Monroe High School, but there is ample need for prevention and intervention services across the district. The SAP is regarded as a vital Coalition leader who provides key information and perspective to Coalition members at Leadership Team meetings and at every full-membership meeting.

The CPWI-funded SAP delivers Project Success services to small groups and individuals. The Project Success classroom-based education series is delivered to all 9th graders each fall. The CPWI SAP:

- Provides screening and referral information to students and parents involved in intervention services.
- Conducts early intervention educational support groups for selected and indicated students.
- Attends and participates in community Coalition meetings as available.
- Provides information and increases awareness of prevention, intervention, and treatment services to school staff, parents, and students.
- Attends stakeholder meetings and delivers presentations.
- Participates as an integral member of the District Behavioral Health Team.
- Assists in developing alcohol, tobacco and other drug policies.
- Provides regular verbal reports and updates to the Coalition.

Grassroots Engagement

While there are no simple answers or strategies for ensuring the participation of grassroots Coalition members, the Coalition and its' Leadership Team consider a number of issues to accommodate the broadest possible participation, including: establishing regular meeting days and times; sending out advance meeting notices and calendar invitations through the most efficient means of communication; ensuring an accessible and neutral meeting location; considering competing community and school events; ensuring meeting topics and content are relevant and action oriented; and even by inspiring its members.

We rely on our existing grassroots members and community events to serve as a vital recruitment link in bringing in additional volunteers. Additionally, the Coalition strives to match the strengths and interests of each Coalition member with the specific tasks of the Coalition and the Community Prevention and Wellness Initiative through a membership strengths and interests inventory.

Recruitment

Although an ad hoc Community Relations subcommittee is periodically formed to recruit new members, partners, agencies and stakeholders to support the Coalition's efforts, each Voting Member has also committed to engaging in recruitment efforts within their own spheres of influence.

Recruitment begins with promoting the Coalition throughout the community, which occurs through Coalition media releases, social media messaging, community presentations, word of mouth, the Annual Community Survey, and dissemination of public awareness materials.

Targeted face-to-face recruitment efforts are initiated once a specific membership need or gap has been identified. In general, the Community Relations subcommittee considers these questions before initiating a targeted recruitment effort:

- Why do we want or need expanded community representation for our efforts?
- How many more people or organizations do we need to accomplish our goals?
- What kinds of people or organizations should we include?
- Do we already have representation from this sector of support on the Coalition?
- Who is going to find and recruit the new people or organizations we need to partner with?
- When is a good time to recruit new people from these organizations?
- What are some of the obstacles that we may encounter?

Cultural Competency in Organizational Development

Monroe School District serves more than 7,000 students and their families within an 82 square mile radius that includes the City of Monroe and surrounding unincorporated areas of Snohomish County. 69% of our students identify as Caucasian, 22% as Hispanic or Latino of any race, 5% as two or more races, and 2% as Asian, with African American and American Indian students comprising all other racial and ethnic groups that exceed 1% of the student population. Between 14% - 19% of secondary students in Monroe identify as Gender and Sexual Minorities or questioning.

Median household income in Monroe proper is lower than the Snohomish County as a whole, and our poverty rate is higher at 11.2%. School District data indicate a district-wide free and reduced meals rate of 27%, dipping as low as 17% at Chain Lake Elementary School and as high as 68% at Frank Wagner Elementary School.

As a whole, the City of Monroe continues to experience a population explosion that began nearly two decades ago. In fact, the city's population only grew from 1,500 residents to 4,000 residents in the 80 years comprising the period 1910 to 1990, then grew to nearly 19,000 residents between

1990 and today. This rapid change has contributed to a shifting and ambiguous sense of community and cultural identity.

The US Census Bureau's 2017 American Communities Survey reveals significant change in Monroe's racial and ethnic composition since 2000: 68.3% White compared to 86.1% in 2000; 3.5% African American compared to 3.2% in 2000; 0.04% Native American compared to 1.3% in 2000; 3.1% Asian compared to 2.4% in 2000; 0.004% Pacific Islander compared to 0.3% in 2000; 0.6% from other races compared to 4.0% in 2000; and 4.9% from two or more races compared to 2.1% in 2000. Hispanic or Latino of any race is reported as 18.9% of the population compared to 9.7% in 2000.

Monroe residents have a median age of 33 years, but 27.7% of the population is comprised of 0-19 year olds. The gender makeup of the City is 53.8% male to 44.3% female.

Monroe has also been home to the Washington State Reformatory since 1910, which became the Monroe Correctional Complex in 1998 when the institution merged with the Special Offender Center, Twin Rivers Correctional Center, and the Minimum-Security Unit. The City is home to many families with an offending partner or parent serving sentences in the Correctional Center.

Stakeholders continue to identify the City's growth and changing demographics as significant contributors to problems with underage drinking and other substance abuse; however, they also identified a growing culture of fear based on our current political climate, family management problems (particularly with regard to a lack of monitoring and exposure to trauma), and unrecognized or unaddressed behavioral health issues as additional factors.

Monroe's geography in rural Snohomish County creates barriers to accessing culturally, linguistically and developmentally appropriate local services and resources for families and students in need. This includes difficulty accessing bilingual services as well as specialized services for families in crisis.

Building a Culturally Competent Coalition

The Monroe Community Coalition recognizes our efforts will be most successful when our strategies, activities and programs are respectful and inclusive of the group experiences, traditions, values and beliefs of the people and communities we serve. We embrace the 1990's disability movement rights slogan of "Nothing about us, without us." As a result, the Coalition has embraced a model of cultural competency that recognizes six stages within a Cultural Competence Continuum.

Internally, our Coalition members believe thoughtful planning and meaningful dialogue are keys to enhancing our relationships with one another, creating a culturally responsive environment for prevention and fostering a Coalition atmosphere where everyone feels valued and respected.

Monroe Community Coalition formed with the understanding that we would be addressing issues too big for any one person or agency to solve on their own. This fundamental acknowledgement necessitates that our Coalition engage in creative and cooperative problem-solving by considering diverse perspectives, ideas, and strategies.

Our organizational standard is valuing diversity, conducting self-assessment and addressing issues that arise when different cultures interact. We recognize the value of shared knowledge and local wisdom.

We walk this out by offering members online surveys, educational materials and training for self-assessment and growth, as well as brining in skilled trainers to build coalition member capacity in this area. All Coalition efforts are vetted through a framework of cultural competency.

Cultural Competence Continuum

Cultural Destructiveness	Cultural Incapacity	Cultural Blindness	Cultural Pre-Competence	Cultural Competence	Cultural Proficiency
Disregards cross-cultural awareness, knowledge, behavior, skills in staffing pattern, service provision, program design, etc.	Does not accept multiple perspectives as valid; there is one "right" or "best" way	Disregards diverse religious/cultural practices when scheduling hours of operation	Exhibits emerging visual representation of all ethnicities, genders, etc., as active and valued community members	Provides regular staff training in cultural competence and its relationships to service provision	Provides services in languages that meet the needs of populations served (consumers)
Creates advertising that perpetuates stereotypes (e.g. women as depressed, substance abusers as black males)	Speaks on behalf of vs. supporting special populations in efforts to speak for themselves	Plans and implements special events assuming a shared value (e.g. Christmas Party)	Recognizes that it is NOT connected with neighborhoods and coalitions that promote various groups, seeks to correct situation	Ensure that all written and visual material is respectful, in multiple languages and Braille, with emphasis on the value of difference	Takes proactive stance on the advancement of cultural competence within the community
Creates criteria that exclude or create artificial barriers, or job requirements that have nothing to do with performance ability	Sees diversity as meeting quotas	Does not recognize or compensate for specialized skills or actively objects to compensation for specialized skills	Solicits diversity feedback from all staff at all levels on a regular basis	Implements culturally competent plans and evaluates periodically for effectiveness	Provides modeling and training to other organizations on diversity
Refuses to select and recruit bilingual staff	Downplays need to hire translators and translate paperwork	Requires all sessions to be conducted in English regardless of individual or families needs	Recognizes organization's high dropout rate of minority participants and seeks change.	Has balanced bilingual staff/customer ratio and provides support to staff for "other" languages and skills	Provides mentoring program and paid stipends
Provides paperwork in English only	Puts down family values	Is rigid about following paperwork requirements	Recognizes that paperwork and bureaucracy are driving individuals and families away	Establishes committee to revise paperwork, program literature, etc., for bilingual customers	Streamlines paperwork and ensures that all material is in multiple languages
Does not recognize the importance of family participation	Uses primarily Anglo-oriented methods of treatment too rigid to consider new methods for different cultures	Ignores the strength of the family unit	Recognizes the lack of training for staff and is willing to implement a culturally appropriate training program	Screens for culturally offensive material and deletes from written and spoken communication	Offers phone line services in multiple languages
Refuses to be sensitive to different cultures		Lacks training to provide special services to minorities	Recognizes staff have cultural limitations and encourages training	Takes responsibility for bringing family into the training circle	Values families and their cultures and commits to educating family on issues critical to treatment success
				Includes cultural issues in training plan	Displays sensitivity to cultural issues and provides education to their organizations

Representative Membership

Monroe Community Coalition is developing strategic partnerships with diverse community leaders throughout our region. Several coalition members are recognized community liaisons to non-English speaking families and we regularly engage Spanish speaking families in assessment, planning and outreach activities through our partnership with the Parent Hub. Additionally, all members have the responsibility to recruit new members from among their individual spheres of influence to enhance Coalition participation.

Sustainability in Organizational Development

Monroe Community Coalition believes an engaged and representative membership is the key to sustaining a viable and active Coalition. The Community Relations Officer and ad-hoc subcommittee is specifically tasked with recruiting a diverse membership representative of our community's composition and required sectors of support. We do this through strategic partnerships, media messages, personal invitations, digital and print materials like flyers and follow-up on requests for information through our website, social media and direct community outreach.

In addition, the annual Coalition Assessment Tool is used to measure progress, set capacity building goals, and ensure the balanced development of our Coalition.

Outreach

The Monroe Community Coalition is the only organization in our community dedicated to substance abuse prevention and mental health promotion. We share our goals through face-to-face meetings and appointments with local policy makers and key leaders, through email and print communication (including newsletters and press releases), via the internet (on social media and on the Coalition website), and during training, orientation and community outreach events.



Coalition Booth at National Night Out each August

Our goal is to position the Coalition as subject matter experts on substance abuse prevention, suicide prevention and trauma-informed practice while building a sustainable and strong local prevention infrastructure. To this end, we have forged strategic partnerships with a number of key organizations that assist in reaching our prevention goals, including Snohomish County Human Services, Monroe School District, Snohomish Health District, Northwest Educational Service District #189, EvergreenHealth Monroe, YMCA, Boys and Girls Club of Snohomish County, Monroe Police Department, Take the Next Step, Sea Mar Behavioral Health, National Alliance on Mental Illness, and a host of other community and regional providers offering prevention services.

The Coalition believes effective communication and open meetings are a crucial component of involving the community in our efforts and initiatives. Some of our partner agencies, including the school district, have expertise in communicating with the majority of the community and we tap into their communication infrastructure to promote awareness and engagement in our efforts.

Monroe Community Coalition also attends City Council, School Board, Parent Hub, Inclusion and Equity Council and other community meetings and events to engage key leaders and stakeholders who are not directly affiliated with the Coalition. The Coalition established the “Advisory Member” position as a mechanism for formally engaging community leaders in the Coalition’s efforts and initiatives without requiring their regular, active participation.

The Coalition also engages in multiple Key Leader Orientation events designed to enhance understanding of the Community Prevention and Wellness Initiative, the Coalition’s planning framework, data, goals and activities.

Training and Technical Assistance

Monroe Community Coalition views training and capacity building as vital components of developing local prevention leaders and an effective prevention infrastructure.

Even as our Coalition members develop their own prevention expertise, considerable effort has been made to increase understanding and knowledge within the community. It is a goal of the Coalition to not only to raise awareness about behavioral health issues, but also to empower community members with a foundational knowledge of prevention principles, risk and protective factors and other influencers of substance use, violence, drop out, delinquency, teen pregnancy and the development of mental health issues. Overall, our goal is to help the community to understand and respond to the unrecognized influences that place youth in our community at risk.



Monroe Community Coalition members are continuously trained in the risk and protective factors model of prevention as well as effective prevention principles and practices. We are also committed to promoting understanding of resiliency, the Adverse Childhood Experiences Study (ACES), and evidence-based trauma-informed practices. As regionally recognized subject matter experts in this area, the Coalition regularly conducts ACEs trainings throughout the school district, community and for partners throughout the region.

Training Priorities

Our training priorities are simple: 1) ensure our direct service providers are adequately trained to deliver the programs they agree to implement; 2) identify and respond to the training and technical assistance needs of our coalition members, staff and community; and 3) partner with other coalitions, agencies and communities to coordinate and share costs of regional trainings when possible.

We determine our training needs annually after considering a mix of quantitative and qualitative data sources, including:

- The Coalition Assessment Tool (CAT) – the CAT considers a variety of domains essential to the development of our Coalition. After reviewing the CAT, Coalition members continue to place high value on receiving cultural competency training.
- The Annual Community Survey – the annual survey helps coalition members to track attitudes, knowledge and adult perception on issues that impact community behavioral

health. After reviewing the Annual Survey, Coalition members voiced interest in equipping the community with trauma-informed strategies, suicide prevention and tools for equipping parents to recognize and respond to signs of mental distress, as well as correcting false community norms about alcohol, marijuana and other substance abuse.

- Needs Assessment – Our needs assessment process also revealed a strong desire for continued education around vaping, marijuana use and mental health. Additionally, our Spanish-speaking needs assessment participants identified a significant need to reduce stigma around accessing behavioral healthcare supports, particularly among male family members.
- Discussion and CPWI deliverables – Coalition Coordinator training needs almost always arise in one of two ways: as a CPWI contract requirement, or as a result of conversation with stakeholders or during Coalition meetings. This includes the Washington State Prevention Summit, Summer Leadership Institute and national trainings as opportunity arises.
- Strategy and Activity deliverables – The Coalition also supports training that directly influences the implementation of our strategies and activities, including PAX Good Behavior Game training, Coping Power Program, SPORT Prevention Plus Wellness, and new implementor training for the Botvin LifeSkills Training program.

Most Coalition member and community trainings are conducted by the Coalition Coordinator, or another expert partner of the Coalition.

Our long-term goal is to create, host and facilitate trainings that can be accessed by partners and the community on the Coalition website at any time, while also increasing participation by making community and Coalition trainings accessible via webinar, online learning modules or through the creation of training videos.

The Coalition will also be responsive to ad hoc trainings promoted by local and statewide prevention partners. Ensuring that training materials and presentations are made available or translated to Spanish is another primary Coalition strategy.

Coalition members have identified the following areas for future capacity building trainings:

2019/2021 Training and T/A

<i>Coalition Members</i>	<ul style="list-style-type: none"> • Coalition Orientation: CPWI, Planning Framework and R&P Factors (September, annual) • Prevention Tools: What Works, What Doesn't (September, annual) • State Prevention Summit (November, annual) • Youth Mental Health First Aid (Spring, annual) • Cultural Competency (TBD) • Environmental Strategies (TBD) • Grant Writing Training (TBD)
<i>Community</i>	<ul style="list-style-type: none"> • Key Leader Orientation (Fall, annual) • ACES & Trauma-Informed Practice (ongoing) • Programmatic EBP training (PAX GBG; PAX Partner training; SPORT Prevention Plus Wellness, Botvin LST) (ongoing as needed) • Town halls on areas of community behavioral health interest: Vaping, Marijuana use, underage drinking, Youth Mental Health First Aid (Fall, Winter and Spring, annual)
<i>Coalition Staff</i>	<ul style="list-style-type: none"> • Cultural Competency (TBD based on trainer availability) • Prevention Summit/NPN(annually) • Ongoing T/A from DBHR (TBD) • Summer Leadership Institute (June, annual) • Programmatic EBP training (PAX GBG; PAX Partner training; SPORT Prevention Plus Wellness, LST) (ongoing as needed)

Cultural Competency in Capacity Building

Monroe Community Coalition is committed to connecting with underserved populations through respectful and inclusive outreach, capacity building and planning efforts. These efforts begin with our key Coalition members who are able to act as a bridge between the Coalition and the community's cultural leaders, including our diverse faith community, School District, Parent Hub, and youth and family serving agencies, as well as gender and sexual minority leaders. The Coalition has prioritized culturally and linguistically appropriate services by making its key messages, materials, trainings, programs and presentations available in Spanish through print and in-person translation, or Spanish-language services. We also regularly consult with cultural leaders about ways to best engage our underserved populations in planning, promoting and receiving Coalition messaging and services.

The Coalition has also adopted the Cultural Competency Continuum created by Frontera, Inc. and funded by the US Office of Minority Health. It is in the process of developing an online and anonymous self-assessment tool to objectively determine the Coalition's level of cultural competency in order to inform our cultural competency training needs.

Based on our current observed level of cultural pre-competence/cultural competence, the Coalition will focus on identifying and implementing a cultural competence training program that will allow

us to better align with National CLAS standards, specifically in regard to incorporating CLAS components into our communications strategy and service delivery methods.

SUSTAINABILITY IN CAPACITY BUILDING

The Coalition has a robust membership and mailing list that has already shown it is capable of mobilizing the community to engage Key Leaders and Stakeholders in Coalition objectives, such as developing municipal marijuana policy and school-based substance abuse strategy policy that protects youth.

Additionally, our “Advisory Member” position is an intentional mechanism for engaging community leaders in the Coalition’s efforts and initiatives without requiring their regular, in-person participation. Similarly, our annual Key Leader Events are designed to develop “buy-in” from non-member leaders and stakeholders so they may promote Coalition efforts within their own spheres of influence.

The Coalition also believes that creating on-demand, digital, reusable trainings and materials, stored on the Coalition website, is a key to the long-term sustainability of our capacity building efforts.

Needs Assessment Process

Although Monroe Community Coalition is a grassroots volunteer organization, its membership is comprised of many professionals who have previous training and experience reviewing data to inform planning and programmatic decision making. Capacity building trainings also occur during regularly scheduled Coalition meetings throughout the year. These trainings are generally intended to orient the Coalition to the Community Prevention and Wellness Initiative, enhance their understanding of the Strategic Prevention Framework and the risk and protective factors model, or to familiarize them with existing community services or principles of effective prevention.

Throughout the assessment process, Coalition partners and community stakeholders provided a local context for the data they reviewed. This included representatives from:

- Monroe School District
- Monroe Police Department
- Youth serving agencies
- Faith Community
- ESD 189
- Sea Mar Behavioral Health
- Housing Hope
- Parents
- Hispanic and Latino families
- And more...

The Coalition's first data review efforts began in earnest in March, 2019 after the School District's Healthy Youth Survey results were released online in order to respond to a media request from the Snohomish County Tribune. We next reviewed results with a group of Spanish-speaking stakeholders at the Parent Hub on March 27th with assistance from a translator. Stakeholders in this group requested to look at our data as it pertained to our Hispanic and Latino students.

By April, the Coalition received results from our Annual Community Survey – as well as our Data Book – which were initially reviewed by the Leadership Team subcommittee. On May 12, 2019 coalition members and community stakeholders in a review of locally and statistically significant data. They were tasked with:

- Providing a community context for specific areas of risk and protection.
- Identifying specific resources that may already be addressing these areas of risk and protection.
- Identifying gaps in local resource availability that could better address these areas of risk and protection.

Summary of Key Data:

Overall, the Coalition examined data in segments that aligned with the Coalition Logic Model: Consequences; Consumption; and Intervening Variables/Risk and Protective Factors. Key data highlights colored **GREEN** reflect areas of statistically significant protection; data highlights colored **BLACK** reflect areas that are now on par with rates reported by youth across the State; and, data highlights colored **RED** reflect current areas of concern.

CONSEQUENCES | The Coalition considered consequence measures with the understanding that if the rates of drinking and other drug use decrease in Monroe, we should see an impact on these long-term consequences:

- **Measures of School Performance** – Students in Monroe demonstrate the same level of protection as their peers across the state; however, trend data show a four-year reversal in the high levels of protection previously observed in risk from low grades.
- **Measures of Youth Delinquency** – Students in Monroe demonstrate the same level of protection as their peers across the state. In fact, fighting is in its eighth year of decline across grades and weapon carrying is also in significant decline. Although an increase in 8th grade gang membership is statistically significant compared to previous Healthy Youth Survey administrations, it still falls within state norms for this age group.
- **Measures of Mental Health** – Monroe rates of depression and anxiety are holding steady while rates across the state continue to increase. 10th grade attempted suicide saw a statistically significant 10% decline (from 17.1% in 2016 to 6.7% in 2018).

CONSUMPTION | Consumption measures refer to the number of people using a particular substance. The Coalition believes high consumption rates impact long-term behavioral health and are the indicators we'd most like to influence:

- **Alcohol Consumption** – 10th grade current drinking rates are the lowest ever recorded (with a statistically significant decline from 2016), and problem drinking rates are the second-lowest ever recorded.
- **Marijuana Consumption** – Students in Monroe remain as protected as their peers across the State. Although not statistically significant, the number of 10th graders reporting current marijuana use is our second-lowest rate ever recorded.
- **Tobacco Consumption** – Students in all grades demonstrate continued declining tobacco consumption rates. Both 8th (2%) and 10th grade (4%) rates have never been lower.

- **Other Illicit Drug Use** – Students in Monroe demonstrate the same level of protection as their peers across the state; however, trend data show this as an area worth continued monitoring.
- **Prescription Pain Killer Use** – 10th grader pain killer use rates are on their 6th year of decline and tie for lowest rate ever recorded. Among 8th graders, painkiller use rates increased by 2% (to 3%) but remain within state norms.

INTERVENING VARIABLES AND RISK & PROTECTIVE FACTORS | These variables are characteristics of Monroe that influence underage drinking and other substance use:

- **Perception of Risk of Harm from Substance Use** – Students in Monroe demonstrate the same level of protection as their peers across the state; however, trend data show increasing risk among 8th graders.
- **Community Norms** – Students in Monroe demonstrate the same level of protection as their peers across the state; however, trend data show increasing risk among 8th graders, particularly with regard to believing that adults and other youth think underage drinking and marijuana use is wrong.
- **Family Management Problems** – Students in Monroe demonstrate the same level of protection as their peers across the state; however, trend data show increasing risk among 8th graders. Additionally, Healthy Youth Survey data indicates that at least 1 in 4 students have at least 1 or more adverse childhood experience exposures.
- **Early Initiation of Drugs** – 8th graders in Monroe reported a statistically significant increase in this risk domain (moving from 9% at risk to 20%), although rates remain on par with the State. 10th grade rates remain consistent with local and State norms.
- **Favorable Attitudes Toward Drug Use** – 8th graders in Monroe reported a statistically significant increase in this risk domain (moving from 18% at risk to 27%), although rates remain on par with the State. 10th grade rates demonstrated a 6% drop from 2016 to 30% at risk, which remains consistent with State norms.

TRENDS | Overall, several trends emerged when the Coalition considered past administrations of the Healthy Youth Survey in our community:

- 8th graders in Monroe exhibit the same risk characteristics as their peers across the State; however, their perceived norms are placing them at higher risk

- 10th Graders demonstrated increased protection across a variety of indicators, making them our most protected class ever recorded in the Healthy Youth Survey.
- 10th graders report having an adult to turn to at school at our highest rate ever.
- 10th grade attempted suicide attempts are the second lowest rate ever, and the lowest rate recorded since 2006.
- 10th grade current alcohol use rates are the lowest ever recorded, and binge drinking rates are the second lowest ever recorded.
- 10th grade marijuana use rates are the second lowest ever recorded.
- 10th grade Pain killer misuse rates are tied for the lowest rate ever recorded and prescription drug misuse is on its 6th year of decline.
- 10th graders report statistically significant increases in opportunities and rewards for prosocial involvement.
- 10th graders demonstrate a continued trend of growing risk in the domains of academic failure and low commitment to school.
- 8th graders are at increasing risk due to changing perceptions of community norms and friends' perceived use of substances.
- Compared to previous survey administrations, Monroe 8th graders showed statistically significant increases in early initiation of drugs and gang membership.

NEEDS ASSESSMENT CONCLUSIONS

To determine our priorities, the Coalition considered prevalence, trends and contributing factors identified in the key data revealed by our Annual Community Survey, the Community Risk and Protection Profile, our Community Needs Assessment Data Book, and additional data available from the Healthy Youth Survey. We specifically focused on data points that were statistically different from the State and prior local rates that could not be explained away by chance. We also provided multiple opportunities for the community and key partners, including those who experience demographic health disparities, to provide additional insight into our data through special meetings and during regularly scheduled monthly Coalition meetings.

After careful consideration, the Coalition identified four intervening variables that we will target with our strategies, activities and resources:

- Community disorganization
- Family Management Problems
- Early initiation of the problem behavior
- Favorable attitudes towards the problem behavior

Long-term Consequences

Monroe Community Coalition has its sights set on impacting several long-term consequences that research shows result from substance use, including poor school performance, youth delinquency, and poor mental health. The Coalition believes that as rates of underage drinking, marijuana use

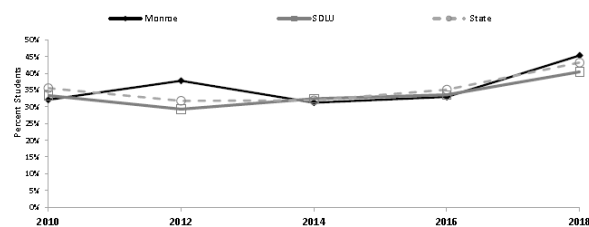
and other substance use go down, we will see a reduction in the number of people who are adversely impacted by these long-term consequences, leading to healthier and more successful youth in our community, and freeing up resources for underserved populations.

School Performance:

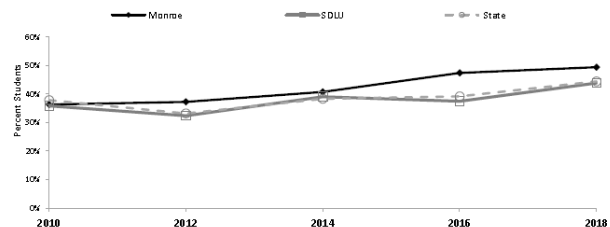
While rates in this long-term consequence held statistically steady, the Healthy Youth Survey documents a four-year increase in the number of 10th grade students at risk due to earning low grades in school. Community members believed this shift in risk could be attributed family dysfunction and beliefs that prioritize work over school. Others articulated a belief that unregulated Chrome Book and cellphone access in classrooms have lead to widespread distractions that diminish school engagement and performance. In fact, measures of low school engagement, a key predictor of school dropout, have been increasing for the last decade in 8th and 10th grade.

Low Commitment to School

Grade 8



Grade 10

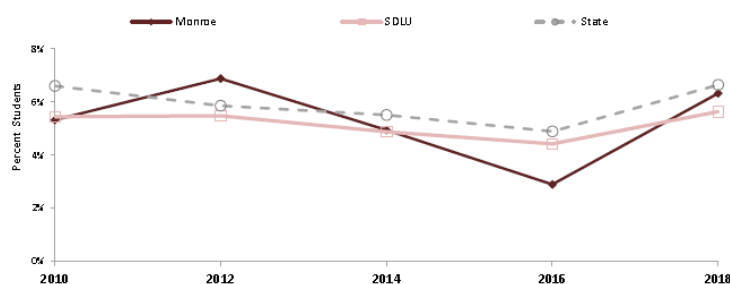


Youth Delinquency:

Although it is not known if youth delinquency leads to substance abuse, or if substance abuse leads to youth delinquency, the risk factors for both are similar. Monroe was not adversely impacted by measures of youth delinquency in 2018 with one exception: 8th grade reports of gang membership doubled since 2016. Community stakeholders cited a lack of parental monitoring, uncertainty about immigration status and policy, family traditions of belonging to a gang and bullying as likely contributors. Unfortunately, it was not possible to perform a local cross-tab analysis on this data; however, long-term study of adolescents by Hawkins and Pollard (199) reveal low community attachment, poor parental supervision, anti-social peers and poor educational or employment potential are key risk factors driving gang membership.

Gang Membership

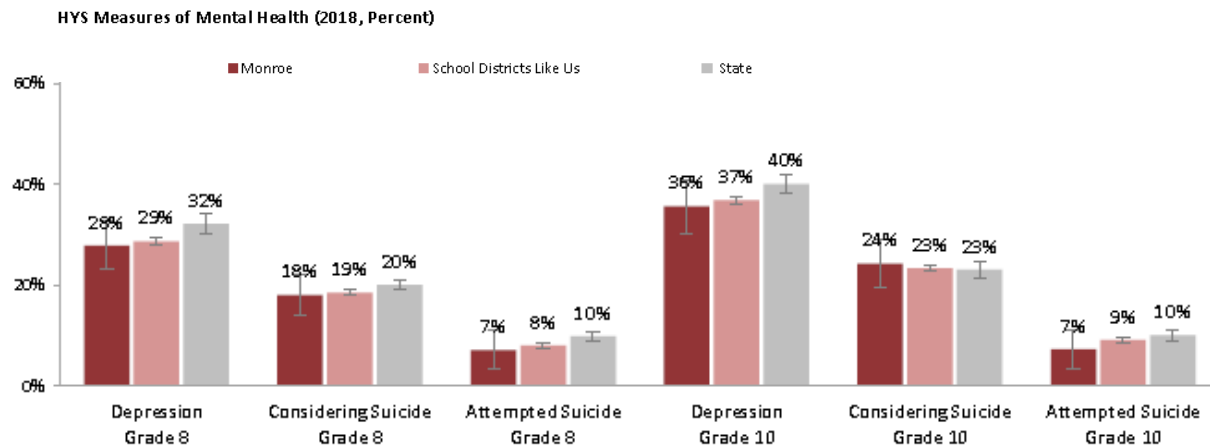
Grade 8



	2010	2012	2014	2016	2018
State	7%	6%	6%	5%	7%
SDLU	5%	5%	5%	4%	6%
Monroe	5%	7%	5%	3%	6%

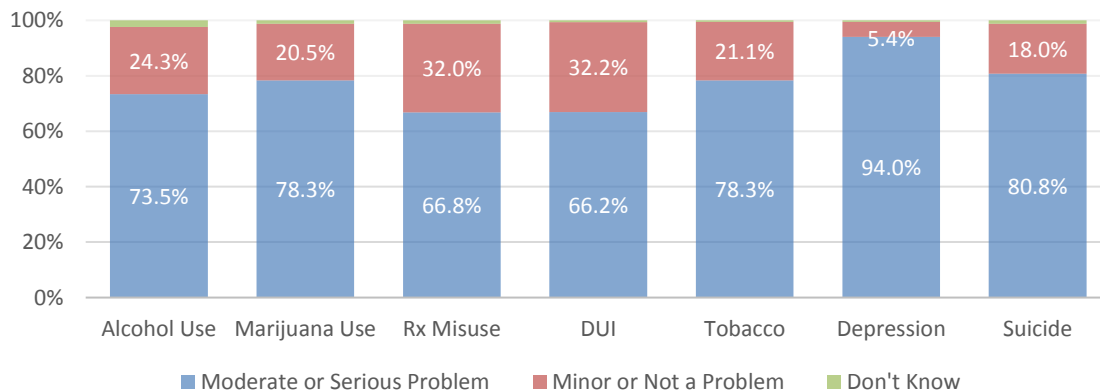
Mental Health and Depression:

Substance abuse is often found among youth who have anxiety, depression or attention deficit hyperactivity disorder. The Coalition examined three HYS data points as indicators for measures of mental health: depression, considering suicide and attempted suicide. In Monroe, rates of depression and anxiety are holding steady while rates across the state continue to rise. Notably, after considerable effort by the Coalition, school district, and their partners, 10th grade attempted suicide rates showed a statistically significant 10% decline (from 17.1% in 2016 to 6.7%) in 2018.



In addition to the Healthy Youth Survey data, respondents to the 2018 Annual Community Survey also identified depression and attempted suicide as their first and second highest concerns about the problems facing youth in our community.

ADULT PERCEPTION OF PROBLEMS FACING YOUTH IN MONROE ANNUAL COMMUNITY SURVEY 2018

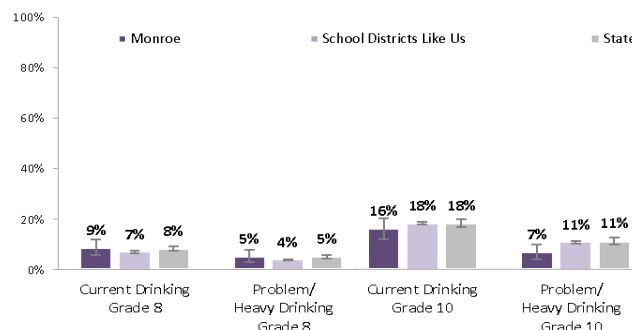


Stakeholders believe that youth mental health has been adversely impacted by a growing level of fear evoked by national politics, hopelessness, unrecognized and unaddressed exposure to adverse childhood experiences, poor nutrition, and by belonging to underserved populations that experience health disparities, including gender and sexual minorities and those who identify as Hispanic or Latino.

Behavioral Health Problems

Underage Drinking and Heavy Drinking

Youth drinking rates are declining in all grades within the Monroe School District. In fact, 10th grade current drinking rates are the lowest ever recorded, demonstrating a statistically significant decline from 2016), and problem drinking rates are the second-lowest ever recorded for this age group.



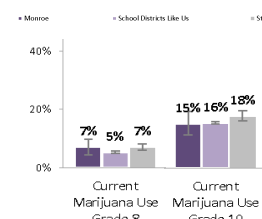
Stakeholders attribute a 2016 spike in alcohol use as an aberration, and the 2018 decline as a return to normal at a school where evidence-based prevention programs, including Project Success, have become the norm.

		Monroe		School Districts Like Us		State	
		2016	2018	2016	2018	2016	2018
HYS Measures of Youth Substance Use							
Current Drinking. During the past 30 days, on how many days did you: Drink a glass, can or bottle of beer? (District results: Drink any days)							
8	11%	9%	6%	7%	8%	8%	
10	25%	16%	18%	18%	20%	18%	
Problem/Heavy Drinking. (District results: 3-5 days drinking in the past 30 days and/or 1 binge past 2 weeks, or 6+ days drinking in the past 30 days and/or 2+ binge past 2 weeks)							
8	5%	5%	4%	4%	5%	5%	
10	15%	7%	11%	11%	13%	11%	

Monroe School District 10th Grade Alcohol Current Use Rates (HYS)								
2002	2004	2006	2008	2010	2012	2014	2016	2018
33.5%	35.1%	30.8%	25.8%	29.3%	24.0%	18.4%	25.4%	16.1%

Underage Marijuana Use

Like alcohol, consumption rates for underage marijuana use in Monroe are decreasing among 10th graders, tying for our second lowest rate ever recorded. Although 8th grade marijuana use has increased, reversing a trend of eight years of steady decline, it remains statistically on par with State use rates. Taken as a whole, Marijuana use rates are at a historic low for our school district.



Monroe School District 10th Grade Marijuana Current Use Rates (HYS)								
2002	2004	2006	2008	2010	2012	2014	2016	2018
22.0%	18.3%	15.5%	15.3%	21.1%	20.6%	13.0%	15.9%	14.8%

In its analysis of local marijuana use rates, the Coalition hit upon an interesting trend in the data, finding that household marijuana use was a significant predictor of current and future risk.

- 8th grade risk for current marijuana use increases by 585% if the student lives with a household member who is a regular user.
- 10th grade risk for current marijuana use increases by 214% if the student lives with a household member who is a regular user.
- 12th Grade risk for current marijuana use increases by 130% if the student lives with a household member who is a regular user.

More significantly:

- In 8th Grade, current marijuana use is reported by 15% of youth who live in households with another regular user.
- In 10th Grade, current marijuana use is reported by 59% of youth who live in households with another regular user.
- By 12th Grade, current marijuana use is reported by 75% of youth who live in households with another regular user.

Prescription Drug Misuse, Heroin and Other Illicit Drug Use:

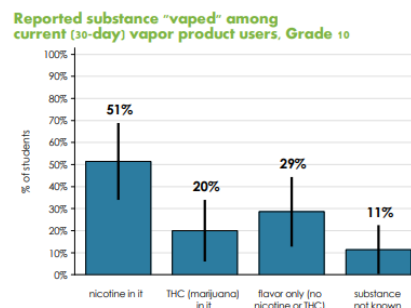
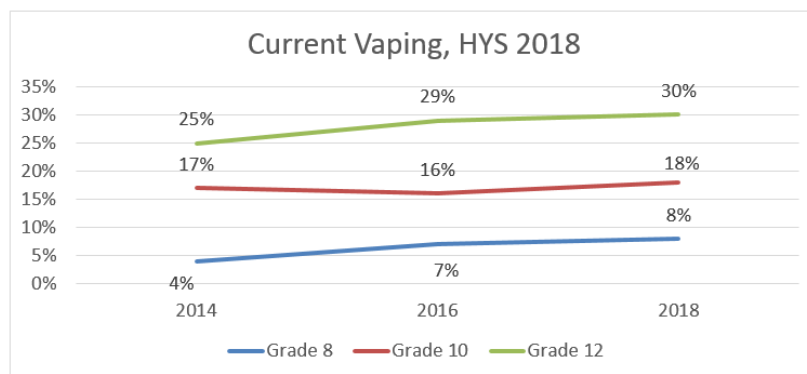
Students in Monroe exhibit high levels of protection from prescription medicine, heroin and other illicit drugs. In fact, 10th grade pain killer use rates tie for the lowest rate ever recorded. Local law enforcement agencies confirm that youth opioid and opiate use within Monroe and the greater Skykomish Valley appear particularly low when compared to use along the Interstate 5 transportation corridor.

Monroe School District 10th Grade Pain Killer to get High Current Use Rates (HYS)								
2002	2004	2006	2008	2010	2012	2014	2016	2018
n/a	n/a	8.9%	7.4%	11.7%	4.2%	5.7%	5.2%	4.2%

Vaping

Although electronic cigarette use rates in Monroe are on par with rates across the State, including student reported use on school property (10.1% among 10th graders), the Coalition and community remain very concerned about the exponential surge in student use since 2012.

Furthermore, our students are consuming nicotine through electronic cigarettes, instead of through combustible cigarettes, at rate not seen since the mid-2000's. We know we are not unique in our situation. The allure of technology, rebellion and perceptions of safety all contribute to the meteoric rise in use of this paraphernalia.



Prioritized Intervening Variables

Researchers at the University of Washington developed a public health model for the prevention of substance abuse. They identified risk factors that predict youth substance use – factors that if reduced would lead to lower rates of use. They also identified protective factors, those positive influences that reduce the likelihood of substance use and its consequences despite the presence of risk. The intervening variables identified as a priority by the Coalition fall within three domains (Community, Family, and Peer/Individual) and are those characteristics of our community that are most likely to influence underage drinking and other substance abuse.

Risk Factor – Community Disorganization (Community Domain)

Community Disorganization

Key informant interviews reveal strong connectedness within individual community and ethnic groups across Monroe, but not between them. They specifically differentiate between “the original Monroe,” families with historic ties to the community as agriculture and dairy farmers, and “the bedroom community,” that lives in the city but work and socialize elsewhere. These stakeholders also identified an “invisible” Monroe Correctional Complex-related community, a growing but segregated Hispanic community, strong faith-based and civic groups, and other sectors that infrequently coordinate or comele.

Despite this apparent level of disorganization, community members have a longstanding history of working together to address concerns and problems too big for any one person or agency to solve on their own. Coalition members believe that by increasing coordination between community groups and agencies, we will be able to provide a lasting framework for meaningful and positive change.

Risk Factor – Family Management Problems (Family Domain)

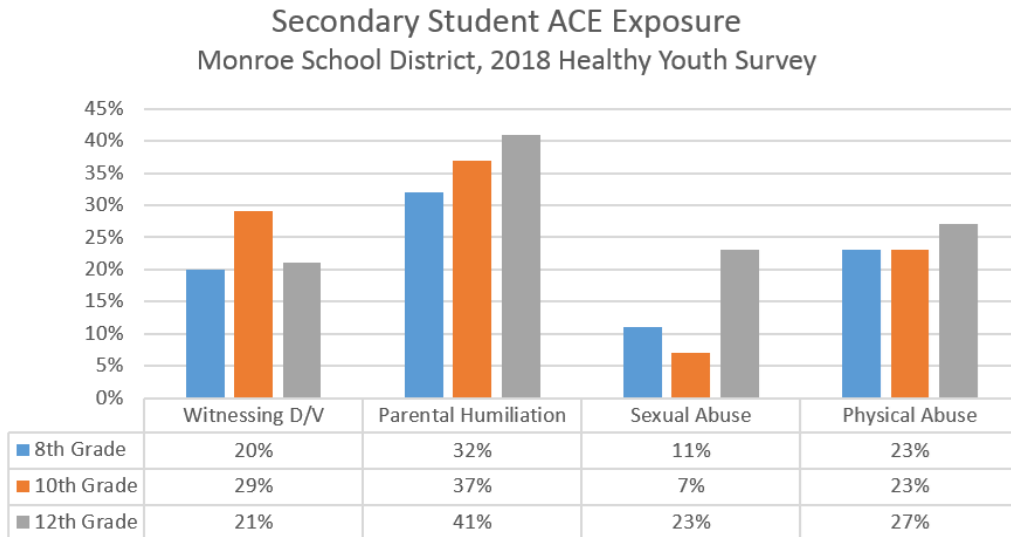
Family Management Problems

Poor family management practices include lack of clear expectations for behavior, lack of proper anger management, failure by parents to monitor their children (knowing where they are and who they’re with), and using excessively harsh, lax or inconsistent punishment. Research shows that youth growing up in families with these problems are more likely to be at risk for developing a host of problem behaviors, including substance abuse, delinquency, teen pregnancy, school drop-out, violence and the development of mental health issues like depression and anxiety.

Indeed, with our high rates of depression, the Coalition pored through data to find risk factors that most influenced these behavioral issues. While our students were as protected as their peers across the State when considering family management problems as an independent risk factor, we have previously found that exposure to this risk factor was the strongest local determinant of depression and suicidality in our data: students who were regularly put-down or humiliated by their parents

were 4.0x as likely to report depression; those who were physically hurt on purpose by an adult were 2.5x more likely to report depression, and those who reported living with inconsistent, unclear, or with overly harsh or lax parents were 2.0x as likely to report experiencing depression.

As we looked closer at the data, we found that our most at-risk cohort, 12th graders, were also most likely to report the highest levels of exposure to the adverse childhood experiences indicators captured in the Healthy Youth Survey.



The Coalition maintains an intense interest in promoting adverse childhood experience awareness as students exposed to certain categories of adverse experiences are more likely to face challenges ranging from substance abuse to attempted suicide.

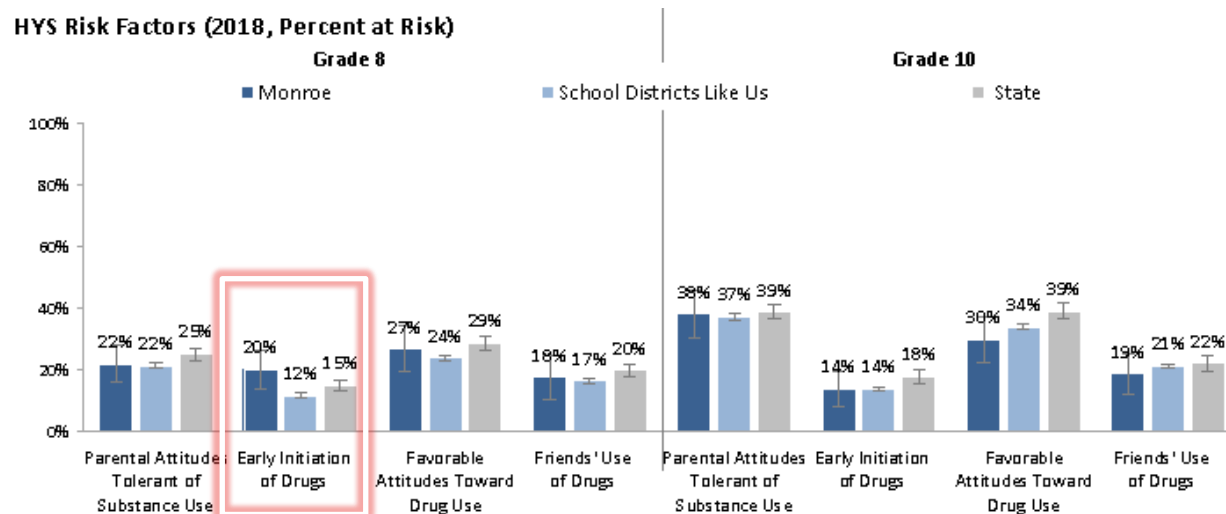
They also exhibit multiple risk factors for school drop-out, including: low school engagement, poor follow-through, highly externalizing behaviors, high rates of discipline referrals and grade repetition.

Risk Factor – Early Initiation of the Problem Behavior (Individual/Peer Domain)

Early Initiation of the Problem Behavior

The earlier young people begin to use drugs, commit crimes, engage in violence, struggle with academic failure or become sexually active, the more likely they are to suffer lifelong consequences related to these issues. Early Initiation of the Problem Behavior is one of only two data points to emerge as negatively statistically significant in Monroe's 2018 Healthy Youth Survey data (the other is 8th grade gang membership). Community members pointed to increasing presence of household substance use as a primary contributing factor to this issue, as well rampant media and social media promotion. As one of the five risk factors found to be most strongly

associated with underage alcohol and marijuana use, Coalition members have prioritized responding to this factor in order to staunch the growth in this dimension of risk.



Risk Factor – Favorable Attitudes Toward the Problem Behavior (Individual/Peer Domain)

Favorable Attitudes

While children tend to be hypervigilant in expressing anti-drug and prosocial attitudes in elementary school, their transition into middle and high school facilitates greater exposure to contrary ideas and practices. The result is greater acceptance of pro-drug and anti-social norms as they grow to know (or perceive) other people's participation in these activities. This acceptance places young people at greater risk for substance abuse because a shift in attitude often precedes a shift in behavior.

Although not statistically significant, Monroe 8th graders saw large shifts in measures of community norms and perceptions of risk of harm that may be impacting their present attitudes and eventual behaviors around substance use. More students believe the community is becoming tolerant of underage use; that more of their friends are using alcohol and marijuana than is true; that underage use is not wrong for someone their age; and even that alcohol and marijuana use is less risky.

Stakeholders believe that parents are the primary influencers of this shift in attitudes as marijuana use becomes more normalized among adults in the community; however, they also point to social media influencers and community retailers who advertise electronic cigarettes and Kratom as additional drivers. The Coalition believes that targeting this risk factor now will help to stem a tide of behavioral change.

Resource Assessment

The Coalition conducted its resource assessment throughout our data review process, but primarily during our February “pulse of the community” focus groups and during our March and May needs assessment meetings. Our process required participants to break into small workgroups in order to consider locally and statistically significant behavioral concerns and intervening variables that emerged from the Healthy Youth Survey. As our key stakeholders explored a data point, they identified known resources and resource gaps for each concern. The Coalition then worked with our partners to identify additional resources available to our community, included as a resource matrix in the Appendix.

The Coalition has made a concerted effort to access more representatives from our Hispanic and Latino community, conducted our Annual Community Survey English and Spanish, and developing a more meaningful partnership with Parent Hub (a bilingual parent leadership and support group) where we conducted our first needs assessment meeting.

At each stage of the assessment process we engaged representatives from the School District, Faith Community, parents, behavioral health and vital youth and family serving organizations.

Summary of Key Information

Monroe Community Coalition represents our community’s most significant cross-sector collaboration formed to address the prevention and wellness needs of Monroe. As such, developing and maintaining meaningful partnerships with key external organizations – whether as full members or advisory members – is vital to achieving the Coalition’s goals and priorities. On this front, we’ve made significant progress since the Coalition’s inception in 2013; however, there are several key partnerships we are focused on enhancing in 2019:

- **Chamber of Commerce** | a member-driven business league that works on behalf of businesses to develop partnerships that promote growth and prosperity.
- **The EvergreenHealth Monroe Hospital District** | our community’s primary physical health agency.
- **Sea Mar Behavioral Health and Compass Health** | Substance abuse and mental health treatment providers. Although these agencies are located in the community, improving access to these services is a Coalition priority.

Key informant interviews also identified several ongoing or emerging areas of concern the Coalition may be able to help address through partnership and increased coordination:

1. Greater access to, and awareness of, developmentally appropriate behavioral health services for students.

2. Increasing parental support, collaboration and awareness around behavioral health challenges facing youth.
3. Breaking down cultural barriers and stigma around accessing needed behavioral health supports.

Overall, the Coalition explored community resources and gaps that address five prioritized intervening variables and their consequences:

- Community Disorganization
- Family Management Problems
- Early Initiation of the Problem Behavior
- Favorable Attitudes Toward the Problem Behavior

Community Disorganization

Resources

Monroe Community Coalition; Monroe Inclusion and Equity Council; Faith-based Organizations; Monroe School District, City of Monroe, YMCA, Boys and Girls Club, Rotary Club, Chamber of Commerce, Take the Next Step, Monroe Public Schools Foundation.

Gaps

Multiple community partnerships exist that enhance community connectedness, but most are narrowly focused, promoting connectedness within individual faith, ethnic, business or school groups despite their attempts at outreach. Cross-sector and cross-cultural collaboration is lacking. High rates of transition and mobility among helping professionals in the community contribute to cycles of disorganization and programmatic loss.

Family Management Problems

Current Resources

Monroe Community Coalition strategies and programs; Parent Hub; Take the Next Step – Family Support Navigators; YMCA; Sea Mar Behavioral Health; food bank; faith community; Mathew House; Sky Valley DCYF; Housing Hope; larger activities focused on family engagement.

Gaps

Stigma around parenting classes; lack of monitoring due to work; little understanding of true community norms prevents parents from enforcing rules appropriately; greater substance abuse education for parents; need more trusted adult relationships for youth; need more substance abuse treatment agencies to serve the area

Early Initiation of the Problem Behavior

Resources

Monroe Community Coalition; Monroe School District; Take the Next Step; YMCA; Boys and Girls Club; faith community; Rotary Club; Monroe Public Schools Foundation; Parent Hub; Sky Valley Volunteers of America; Parents; prosocial peers; Parenting Wisely; PAX Good Behavior Game; SPORT; Botvin LifeSkills Training program; Student Assistance Professional services at Monroe High School; District Student Support Advocates; District Co-Occurring Disorders Clinician.

Gaps

Coalition programs like the PAX Good Behavior Game are not yet implemented districtwide; teachers are ill-equipped to handle classroom behavior; parenting programs are not widely accessed; parents feel isolated in upholding household rules; immigrant parents threatened by children with deportation for upholding rules and expectations; need more parent training on risk of harm and recognition of substances.

Favorable Attitudes Toward the Problem Behavior

Current Resources

Monroe School District; Monroe Public Schools Foundation; Take the Next Step – Kidz Club; Boys and Girls Club; YMCA; Sno-Isle Libraries; Sea Mar Behavioral Health, Soccer and playing fields; larger activities focused on family engagement.

Gaps

Lack of transportation funding prevents access to afterschool clubs that are not sports; sports, club and equipment fees prevent widespread participation in afterschool and other prosocial activities; Need more meaningful prosocial opportunities for non-college bound students; need more parent education; more opportunities for police to engage in prosocial activities with youth (i.e. “Cook with a Cop.”); more safe places and opportunities for bonding with prosocial people.

Resource Assessment Conclusions

As the Coalition engaged in its resource and gap analysis, two central themes emerged:

- A lack of awareness of available community resources has created a false norm that Monroe is resource poor. In fact, Monroe already possesses many of the community structures and supports identified in our gap analysis. Expanding local awareness of Coalition strategies and activities, as well as awareness and access to existing services, should be one of the Coalition’s priorities.

- There is a dearth of accurate substance abuse prevention and mental health promotion training and education opportunities for parents in Monroe. As a result, many parents remain ill-equipped to proactively and appropriately address these issues with their children. Based on our resource assessment, the Coalition should increase opportunities for parents to receive training, education and accurate prevention information.

Cultural Competency and Sustainability in the Assessment Process

The Coalition has prioritized meaningful cross-cultural collaboration as a value and continues to make strides toward realizing that goal. Our stakeholders are committed to engaging the diversity of the community in our planning and work, but recognize the process will take time to build the trust necessary to achieve our cultural competency goals.

We are proud of our ongoing and growing partnership with Parent Hub and Take the Next Step, organizations that primarily engage Spanish speaking families. Their contribution to our needs and resource assessment has proven invaluable. Our goal is to continue reciprocating their investment in the Coalition with training, education grant writing that respond to the needs of this constituency.

The Monroe Community Coalition is committed to implementing alcohol and other drug prevention with a community-based approach, and took on the work of strategic planning during full membership meetings, work group meetings, and by using asynchronous communication strategies, including email, survey monkey and social media.

Data analysis for the needs assessment occurred during full membership meetings beginning in January, 2017 and continued as more data became available. The Coalition Leadership Team served as the planning workgroup charged with consolidating the work of Coalition members and key informants. As individual components of the plan were finalized, they were taken back to the full membership for consideration, revision and approval. The Coalition's final workgroup meeting occurred June 8, 2017, where our backbone documents – the Coalition Logic Model and Actual Plan – were approved for submission to the Division of Behavioral Health and Recovery.

The Coalition's strategic planning process ultimately led to the decision to prioritize the following risk (R) and protective (P) factors:

Domain: Community

(R) Community Disorganization

Domain: Peer/Individual

(R) Early Initiation of the Problem Behavior

(R) Favorable Attitudes Toward the Problem Behavior

Domain: Family

(R) Family Management Problems

To influence these factors, the Coalition will support a mix of direct service, information dissemination, training and environmental strategies designed to reduce risk and enhance protection to diminish the likelihood of youth engaging in underage drinking and other substance use.

Risk Factors	Adolescent Problem Behaviors					
	Substance Abuse	Delinquency	Teenage Pregnancy	School Dropout	Violence	Depression/Anxiety
Community						
Availability of Drugs	✓					
Availability of Firearms		✓			✓	
Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime	✓	✓			✓	
Media Portrayals of Violence					✓	
Transitions and Mobility	✓	✓		✓		✓
Low Neighborhood Attachment and Community Organization	✓	✓			✓	
Extreme Economic Deprivation	✓	✓	✓	✓	✓	
Family						
Family History of the Problem Behavior	✓	✓	✓	✓		✓
Family Management Problems	✓	✓	✓	✓	✓	✓
Family Conflict	✓	✓	✓	✓	✓	✓
Favorable Parental Attitudes and Involvement in the Problem Behavior	✓	✓			✓	
School						
Early and Persistent Antisocial Behavior	✓	✓	✓	✓	✓	✓
Academic Failure Beginning in Elementary School	✓	✓	✓	✓	✓	
Lack of Commitment to School	✓	✓	✓	✓		
Individual/Peer						
Rebelliousness	✓	✓		✓		
Friends Who Engage in the Problem Behavior	✓	✓	✓	✓	✓	
Favorable Attitudes Toward the Problem Behavior	✓	✓	✓	✓		
Early Initiation of the Problem Behavior	✓	✓	✓	✓	✓	
Constitutional Factors	✓	✓			✓	✓

Goals, Objectives and Strategies

Goal 1: Influence Community Disorganization

Objective: Increase community readiness to address alcohol, tobacco and other drug (ATOD) use in Monroe

Strategy: Community-Based Process

Activities: Monroe Community Coalition

- **Monroe Community Coalition**
 - Implement all 5 stages of the Strategic Prevention Framework, including renewal of assessments
 - Monthly full membership and workgroup meetings
 - Conduct outreach and targeted recruitment, including Key Leader Orientation and continued support and coordination for the MHS Prevention Club
 - Implement the Coalition Strategic Plan, including evaluation of coalition strategies and activities
 - Enhance Coalition communication information platforms on the internet, including the Coalition website and social media platforms
 - Conduct community and Coalition focused training
 - Pursue mental health funding for expanded strategy implementation
 - Raise awareness through outreach and participation in community events
 - Focus on sustainability in implementation, including developing alternative funding sources
 - Engage in cultural competence evaluation and training.

Goal 2: Influence Family Management Problems

Objective: Increase positive attitudes toward healthy family management practices

Strategy: Education, Media

Activities: Parenting Wisely, Under the Influence of You

- **Parenting Wisely**
 - Build capacity of community partners to implement direct services with fidelity to the intended design of each program
 - Promote programs to increase participation
 - Track participant data and evaluate outcomes
 - Adjust and improve programming as evaluation dictates
- **“Under the Influence of You.”**
 - Implement “Under the Influence of You” utilizing campaign resources and guidance from the Washington State Department of Health.

- Deliver messages with advertising at the Galaxy 12 Theater Monroe, social media and other relevant avenues of dissemination.
- Implement community town halls and training designed to reinforce information dissemination campaign goals
- Track and evaluate message diffusion through theater ticket sales, event attendance, web analytics, annual Community Assessment Survey, and other locally developed evaluation tools
- Develop strategic partnerships and recruit key leaders as campaign advisory members
- When necessary, mobilize the Coalition and community to advocate for policy change

Goal 3a: Influence Early Initiation of the Problem Behavior

Objective: Reduce youth intention to use alcohol, tobacco or other drugs

Strategy: Education, Environmental

Activities: Project Success, SPORT Prevention Plus Wellness, Policy Education & Advocacy

- **Project Success**

The Student Assistance Professional will implement Project SUCCESS curriculum with fidelity to its intended design, which includes the following five program components:

- Prevention Education Series: Full implementation of the eight session classroom prevention education series to all freshman.
- Individual and Group Counseling: Following participation in the Prevention Education Series, students are assessed for services. They may receive individual counseling or may participate in counseling groups.
- School-wide Awareness and Outreach Activities: activities in conjunction with national events, contests, and the prevention club are intended to connect students with prosocial peers and adults, and challenge false community norms.
- Parent Programs: Parents are involved in Project SUCCESS through a series of parenting workshops. These workshops provide parents with prevention information and an opportunity build social support.
- Referral: Students and parents who require treatment, more intensive counseling, or other services are referred to the appropriate agencies in their community.

- **SPORT Prevention Plus Wellness Program**

- Build capacity of community partners to implement direct services with fidelity to the design the program through training and monitoring
- Implement the program with Middle and High School Students in Monroe School District

- Expand the reach of the program from Indicated populations to Selective and Universal
- Track participant data and evaluate outcomes
- **Policy Review, Education and Advocacy**
 - Assess local policies influencing early identification and support for student problem behaviors.
 - Engage in education activities that build support for enacting needed policy change.

Goal 3b: Influence Early Initiation of the Problem Behavior

Objective: Increase self-regulation skills

Strategy: Information Dissemination, Education

Activities: PAX Good Behavior Game, Reconnecting Youth, Coping Power Program

- **PAX Good Behavior Game**
 - Build capacity and commitment for implementation of direct services strategy prior to funding training or purchasing programmatic supplies
 - Work with program developer to identify appropriate levels of training for new and existing implementers
 - Identify, train and fund *site-based* PAX Leaders to coordinate 2017/2018 implementation with Coalition Coordinator.
 - Continuously build capacity for implementers to deliver services with full fidelity to the intended design of each program
 - Promote programs to increase participation
 - Track participant data and evaluate outcomes
- **Reconnecting Youth**
 - Begin program recruitment in September 2019 (participants enrolled by invitation only)
 - Implementation begins by October, 2019 at Monroe High School
 - School Counselor already identified as primary implementer during daily study period times
 - Provide technical assistance as needed
 - Track participant data and evaluate outcomes
- **Coping Power Program**
 - Work with elementary and middle schools to build capacity for the program. Elementary School sites must commit by October, 2019 and Middle Schools by June, 2020

- Provide developer training, curriculum and materials to school counselors at identified sites
- Begin implementation by November, 2019 at partner Elementary Schools
- Intervention duration is 33 weekly sessions
- Provide technical assistance and monitoring as necessary
- Track participant data and evaluate outcomes.

Goal 4: Influence Favorable Attitudes Toward the Problem Behavior

Objective: Decrease favorable attitudes toward substance use and suicide

Strategy: Education and Media

Activities: Botvin LifeSkills Training, Lift/Rise Campaign

- **Botvin LifeSkills Training**
 - LST will be implemented with all 6th, 7th and 8th grade students at Hidden River Middle School and Park Place Middle School
 - New teacher training occurs in August, 2019
 - Curriculum and material dissemination will occur in August, 2019
 - Semester 1 implementation begins in September and October, 2019
 - Semester 2 implementation begins in February and March, 2020
 - Provide technical assistance and fidelity monitoring
 - Track participant data and evaluate outcomes
- **“Lift/Rise” Campaign**
 - Youth-developed messaging designed to enhance protective factors, foster unity and hope, and connect students with helping adults
 - Campaign based on the science of hope and positive social norms
 - Consult across sectors of support to ensure messaging incorporates principles of effectiveness and is developmentally appropriate
 - Ensure messaging and engagement activities remain consistent with strategic plan and build capacity for implementation of approved strategies

About This Document

This plan contains our roadmap to creating lasting community change in Monroe. Each section documented in this plan aligns with a corresponding step of the Strategic Prevention Framework: Getting Started, Assessment, Planning, Implementation and Evaluation. Each of these sections also addresses our need to build capacity, enhance cultural competence and address issues of local sustainability.

Action Plan - Summary of Programs and Activities

Monroe Community Coalition

Monroe Community Coalition will implement the Strategic Prevention Framework and the strategies and activities identified in our data-based strategic plan, including: monthly meetings and workgroups, Coalition and community training, and key leader events and outreach. The Coalition will ensure that its members have opportunities to be meaningfully involved, and have the necessary training to be effective in supporting the goals of the Community Prevention and Wellness Initiative.

Parenting Wisely (Parents of Young Children and Parents of Teens)

Parenting Wisely (PW) is an evidence-based parenting skills education course taught in a group setting, or online. The program aims to increase parental communication and disciplinary skills and was initially designed for parents whose preteens and teens are at risk for or are exhibiting behavior problems such as substance abuse, delinquency, and school dropout. Extensive research and clinical tests show that use of Parenting Wisely results in:

- Increased knowledge and use of good parenting skills
- A decrease in child behavior problems
- Improved problem solving
- Reduced spousal violence and violence toward children

The Coalition will continue to implement the program at quarterly interval throughout the 2019/20 school year in partnership with local elementary schools and family serving agencies like Take the Next Step.

Media Campaigns – Under the Influence of You & Lift/Rise

The Coalition has adopted the Department of Health’s “Under the Influence of You.” campaign as its primary public awareness effort because it aligns with our ongoing mission to better equip parents to set clear standards and communicate healthy beliefs. Partnerships are in place with the Monroe Galaxy Theater and other community partners to deliver messaging throughout the community. All Coalition outreach materials to parents will be branded with Under the Influence of you messaging.

The Coalition will also continue to work with youth involved in Sources of Strength and the Monroe High School Prevention Club to develop and implement their “Lift/Rise” information dissemination campaign designed to promote protective factors, encourage unity and hope, and to connect students with helping adults. This locally developed campaign is an evolution of our award-winning youth initiative that was recognized by the Division of Behavioral Health and Recovery with a State “Impact Award,” and the Snohomish Health District with a “Healthy Communities Award.”

Both campaigns will run from July 1st, 2019 through June 30, 2020 with daily message delivery that is intended to reach about 30,000 people per month.

Project Success

Student Assistance Programs provide valuable school-based prevention and intervention services that support students in groups and as individuals. Benefits show reductions in substance use, being in trouble at school, skipping school, suspensions, hitting or hurting someone, being in a physical fight, and being arrested. The Student Assistance Professional will be implementing Project SUCCESS, including its classroom education series to all students in 9th grade this fall. Project SUCCESS will be implemented for the duration of the 2019/20 school year.

SPORT Prevention Plus Wellness Program

SPORT is a motivational intervention designed for use by all adolescents in middle and high school. It integrates substance abuse prevention with health promotion messaging to help adolescents minimize and avoid substance use while increasing physical activity and other health-enhancing habits, including eating well and getting adequate sleep. Adolescents participating in SPORT complete a short, self-administered health behavior screen measuring physical activity and sport behaviors and norms, healthy nutrition, sleep, and alcohol use, then participate in a tailored health consultation to set and achieve goals.

The Coalition achieved a major victory with this program in 2019, as SPORT is now utilized as the District's primary substance use violation intervention. The program will be implemented monthly throughout the 2019/20 school year to an indicated population of students. The Coalition also hopes to build capacity for expanding the reach of the program as both a selective and universal prevention program.

Policy Review, Education and Advocacy

Coalition members will continue to educate and advocate around policy issues that impact communitywide rates of underage drinking and other drug use, focusing specifically on policies that facilitate early identification and referral for problem behaviors like substance abuse, depression and suicidality. Since 2013, Coalition members have influenced school and community practices intended to enhance the perception of enforcement of underage drinking laws, suicide prevention practices, smoking and vaping in public parks, supporting a ban on local retail, production and processing of marijuana, school district substance abuse policy and is still working to promote a viable civil social host ordinance.

PAX Good Behavior Game

PAX Good Behavior Game teaches students self-regulation, self-control, and self-management in the context of collaborating with others for peace, productivity, health and happiness. Although it

is regarded by the Institute of Medicine as one the most effective classroom-based prevention programs in the Country, PAX GBG is not actually a program or curriculum; rather, it is an environmental intervention used in the classroom with young children to create an atmosphere that is conducive to learning by reducing off-task behavior; increasing attentiveness, and decreasing aggressive and disruptive behavior and shy and withdrawn behavior. The intervention also aims to improve academic success, and has produced well documented mental health and substance use outcomes later in life. The Coalition will offer the program and training for the duration of the 2019/2020 school year at Maltby Elementary school, and will additionally look to pilot the program at another site.

The Coalition also intends to develop building leaders and coordinators known as PAX Partners by providing access to PAX Partner training and other developer supports.

Reconnecting Youth

Reconnecting Youth (RY) is a 75 session, selective, semester-long evidence-based mental health promotion, suicide prevention, and substance abuse prevention program created by the developers of CAST (Coping and Support Training). RY aims to increase coping skills and student involvement in healthy social activities by engaging participants in activities that increase bonding to their school.

RY will be provided to Monroe High School Students beginning in Fall, 2019 during daily study period times.

Coping Power Program

Coping Power Program is a cognitive-behavioral intervention that is delivered to moderate- to high-risk children in the late elementary school and early middle school years. The program lasts from 15 to 18 months and includes an integrated set of child and parent components. Coping Power is based on an empirical model of risk factors for substance use and addresses high-risk children's deficits in social competence, self-regulation, school bonding, and positive parental involvement. The Coping Power child component consists of 33 group sessions and periodic individual sessions and is delivered in school-based settings. The program helps aggressive and disruptive boys understand the physiology of aggression, especially anger, and teaches them coping strategies such as self-talk (e.g., calming oneself down by telling oneself, "Maybe he didn't mean that. If I start a fight, I'll get into trouble.").

The Coping Power parent component consists of 16 group sessions and periodic home visits and individual contacts. Post intervention results indicate that the program has had effects on reducing children's aggressive behavior and preventing their substance use.

The Coalition will primarily be attempting to build capacity for implementation of this program.

Botvin LifeSkills Training

LifeSkills Training (LST) is a school-based program that aims to prevent alcohol, tobacco, and marijuana use, as well as violence, by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors. The program is designed to provide information relevant to the important life transitions that adolescents and young teens face, using culturally sensitive and developmentally and age-appropriate language and content. LST will be implemented at Park Place and Hidden River Middle Schools, with all 6th graders receiving 15 sessions, all 7th graders receiving 10 sessions and all 8th graders receiving 5 sessions. Implementation will occur in two phases – Semester 1 during Fall, 2019, and Semester 2 during Winter/Spring, 2020.

Cultural Competency and Sustainability in Planning

Monroe Community Coalition selected programs and strategies considerate of the community's underserved populations, particularly those of Hispanic and Latino descent. For example, Parenting Wisely is intended to serve parents with youth of all ages, from toddler to teen, and is available in Spanish and English with in-person group options and internet-based go-at-your-own-pace options. The Coalition also selected strategies that are replicable across settings and populations. Our school-based direct services include multiple best practice strategies shown to be universally effective for our students.

The Coalition also selected programming that addresses our broader community concerns, programming that reduces underage drinking and other substance use, but that correspondingly address issues of mental health and suicide, social functioning and violence prevention.

Many of the programs also have initial start-up costs that benefit from the resources of DBHR's Community Prevention and Wellness Initiative, but are transitioned to sustainable implementation because of our school and community partnerships. Three Coalition programs that are each evidence-based (PAX Good Behavior Game, Reconnecting Youth and SPORT) were implemented in 2018/19 with zero site-based staff costs. We hope to continue the spread of our community supported programming during the 2019/20 school year by negotiating no-cost implementation in exchange for evidence-based training.

Structural Support for Implementation

Monroe Community Coalition identified several key structures vital to the Coalition's success. First among them: maintaining our current fiscal agent relationship with the Monroe School District.

The high level of coordination we are able to accomplish within the school district is a direct result of our Coalition Coordinator being a district employee. This arrangement ensures that the Coalition Coordinator understands the nuanced needs and challenges facing our schools and allows him to come alongside school teams to build capacity for the implementation of Coalition strategies and activities.

In fact, our relationship with the school district is a key to sustainability as three of our core strategies are able to be implemented with minimal staff cost to the coalition due to our partnership with certain principals, counselors and teachers, including commitments among them to implement the SPORT Prevention Plus Wellness Program, the PAX Good Behavior Game, and Reconnecting Youth. Confirming partnerships for our other programs and strategies generally occurs within the context of a subcontract relationship or Memorandum of Understanding with trained service providers and agencies, including Parenting Wisely (subcontract with a youth and family serving organization), distribution of our information dissemination campaigns (subcontract with media dissemination companies), and Project Success (through an MOU with ESD #189).

Coalition members are also a key to confirming the implementation of Coalition strategies. Our law enforcement sector representative arranged the connection with his department's DITEP instructor and we implanted a no cost training in May, 2019 as a result of this relationship. Similarly, our relationship with key decision makers within the community have aided our attempts to educate policymakers and elected officials and resulted in significant community and school district policy change.

The Coalition will also continue to provide training focused on enhancing understanding about Adverse Childhood Experiences and evidence-based trauma-informed practices to build inroads for recruiting missing sectors of support, particularly among our business community. Finally, we will continue to reach out to our underserved populations to enhance their involvement in all stages of planning, decision making and implementation.

Strategies and Activities

The Coalition is focused on ensuring high quality and high fidelity implementations of the strategies and activities identified in this strategic plan.

Monroe Community Coalition – July, 2019 – June, 2020

MCC will implement our strategic plan and the Strategic Prevention Framework throughout 2019/20. Monthly meetings and workgroups, Coalition and community training, key leader events and outreach will all occur as documented.

We will continue to recruit from the fourteen identified sectors of community support, and will strive to achieve a membership representative of the diversity of the community. Although guided by a Leadership Team, all voting members have input on programmatic decision making. The Coalition Assessment Tool is administered to members in November to assess coalition needs and development.

Project Success – September, 2019 – June, 2020

The Student Assistance Professional from Northwest ESD #189 will implement Project Success at Monroe High School in 2019/20. Implementing the Project SUCCESS curriculum with fidelity to its intended design requires the following five program components:

- Prevention Education Series: Full implementation of the eight session classroom prevention education series to all freshman will begin in Fall, 2019.
- Individual and Group Counseling: Following participation in the Prevention Education Series, students are assessed for services. They may receive individual counseling or may participate in counseling groups.
- School-wide Awareness and Outreach Activities: Activities such as contests, and other activities in conjunction with national events are intended to connect challenge false community norms.
- Parent Programs: Parents are involved in Project SUCCESS through a series of parenting workshops. These workshops provide parents with prevention information and an opportunity build social support.
- Referral: Students and parents who require treatment, more intensive counseling, or other services are referred to the appropriate agencies in their community.

While frequency and dosage are not determined by the Coalition, regular updates and insight from the Student Assistance Professional are provided at Coalition meetings. RMC Research pre- and post-surveys will measure impact on students.

Policy Review, Education and Advocacy – July, 2019 – June, 2020

The Coalition’s policy review, education and advocacy work is ongoing, and partially, opportunistic. In 2019/20, we will focus specifically on reviewing policies that can facilitate early identification and referral for problem behaviors like substance abuse, depression and suicidality.

Since 2013, Coalition members have influenced school and community practices intended to enhance the perception of enforcement of underage drinking laws, suicide prevention practices, smoking and vaping in public parks, supporting a ban on local retail, production and processing of marijuana, school district substance abuse policy and is still working to promote a viable civil social host ordinance.

Public Awareness – Under the Influence of You & Lift/Rise – July, 2019 – April, 2020

The Coalition has adopted the Department of Health’s “Under the Influence of You.” campaign as its primary public awareness effort. Under the Influence of You aligns with our ongoing mission to better equip parents to set clear standards and communicate healthy beliefs. Partnerships are currently in place with the Monroe Galaxy Theater and other community partners to deliver messaging throughout the community. All Coalition outreach materials to parents will be branded with Under the Influence of You messaging.

The Coalition will also continue to work with youth involved in Sources of Strength and the Monroe High School Prevention Club to develop and implement their “Lift/Rise” information dissemination campaign designed to promote protective factors, encourage unity and hope, and to connect students with helping adults. This locally developed campaign is an evolution of our award-winning youth initiative that was recognized by the Division of Behavioral Health and Recovery with a State “Impact Award,” and the Snohomish Health District with a “Healthy Communities Award.” Lift/Rise will run concurrently with Under the Influence of You.

SPORT Prevention Plus Wellness Program – September, 2019 – June, 2020

SPORT is a motivational intervention designed for use by all adolescents in middle and high school. It integrates substance abuse prevention with health promotion messaging to help adolescents minimize and avoid substance use while increasing physical activity and other health-enhancing habits, including eating well and getting adequate sleep. Adolescents participating in SPORT complete a short, self-administered health behavior screen measuring physical activity and sport behaviors and norms, healthy nutrition, sleep, and alcohol use, then participate in a tailored health consultation to set and achieve goals.

The Coalition achieved a major victory with this program in 2019, as SPORT is now utilized as the District's primary substance use violation intervention. The program will be implemented monthly throughout the 2019/20 school year to an indicated population of students. The Coalition also hopes to build capacity for expanding the reach of the program as both a selective and universal prevention program.

Parenting Wisely – October, 2019 – June, 2020

The Coalition will implement Parenting Wisely at least three times in 2019/20 at quarterly intervals (October 2019, February 2020, and June 2020). Two agencies are trained and committed to taking this on: Parent Hub and family serving agency Take the Next Step.

Parenting Wisely (PW) is an evidence-based parenting skills education course taught in a group setting, or online. The program aims to increase parental communication and disciplinary skills and was initially designed for parents whose preteens and teens are at risk for or are exhibiting behavior problems such as substance abuse, delinquency, and school dropout. Extensive research and clinical tests show that use of Parenting Wisely results in:

- Increased knowledge and use of good parenting skills
- A decrease in child behavior problems
- Improved problem solving
- Reduced spousal violence and violence toward children

PAX Good Behavior Game – September, 2019 – June, 2020

The Coalition will implement the PAX Good Behavior Game, and training, for the duration of the 2019/2020 school year at Maltby Elementary school, and will additionally look to pilot the program at another site. Our training plan includes sending school coordinators, known as PAX Partners, to at least on national PAX Partner training.

Good Behavior Game teaches students self-regulation, self-control, and self-management in the context of collaborating with others for peace, productivity, health and happiness. Although it is regarded by the Institute of Medicine as one the most effective classroom-based prevention programs in the Country, PAX GBG is not actually a program or curriculum; rather, it is an environmental intervention used in the classroom with young children to create an atmosphere that is conducive to learning by reducing off-task behavior; increasing attentiveness, and decreasing aggressive and disruptive behavior and shy and withdrawn behavior. The intervention also aims to improve academic success, and has produced well documented mental health and substance use outcomes later in life.

Reconnecting Youth – September, 2019 – June, 2020

Reconnecting Youth will be provided to Monroe High School Students beginning in Fall, 2019 during daily study period times by a trained school counselor.

Reconnecting Youth (RY) is a 75 session, selective, semester-long evidence-based mental health promotion, suicide prevention, and substance abuse prevention program created by the developers of CAST (Coping and Support Training). RY aims to increase coping skills and student involvement in healthy social activities by engaging participants in activities that increase bonding to their school.

Coping Power Program – TBD

The Coalition is currently building stakeholder buy-in for the Coping Power Program, which requires commitment and coordination from school counselors at both the elementary and middle school levels.

Our intent is to complete staff training by October, 2019 and to begin implementation by November; however, there are numerous complicating factors that may delay implementation until the next fiscal year. Nevertheless, the Coalition will continue to build capacity for the successful implementation of this program.

Coping Power Program is a cognitive-behavioral intervention that is delivered to moderate- to high-risk children in the late elementary school and early middle school years. The program lasts from 15 to 18 months and includes an integrated set of child and parent components. Coping Power is based on an empirical model of risk factors for substance use and addresses high-risk children's deficits in social competence, self-regulation, school bonding, and positive parental involvement. The Coping Power child component consists of 33 group sessions and periodic individual sessions and is delivered in school-based settings. The program helps aggressive and disruptive boys understand the physiology of aggression, especially anger, and teaches them coping strategies such as self-talk (e.g., calming oneself down by telling oneself, "Maybe he didn't mean that. If I start a fight, I'll get into trouble.").

The Coping Power parent component consists of 16 group sessions and periodic home visits and individual contacts. Post intervention results indicate that the program has had effects on reducing children's aggressive behavior and preventing their substance use.

The Coalition will primarily be attempting to build capacity for implementation of this program.

Botvin LifeSkills Training– September, 2019 – June, 2020

LifeSkills Training will be implemented at Park Place and Hidden River Middle Schools, with all 6th graders receiving 15 sessions, all 7th graders receiving 10 sessions and all 8th graders receiving

5 sessions. Implementation will occur in two phases – Semester 1 during Fall, 2019, and Semester 2 during Winter/Spring, 2020. New teacher training will occur in August, 2019.

LifeSkills Training (LST) is a school-based program that aims to prevent alcohol, tobacco, and marijuana use, as well as violence, by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors. The program is designed to provide information relevant to the important life transitions that adolescents and young teens face, using culturally sensitive and developmentally and age-appropriate language and content.

Role of Staff, Coalition Members, and Partnering Agencies

The Coalition Coordinator is responsible for providing support and technical assistance to the Coalition and its Leadership Team as it walks through the phases of implementation. The Coordinator is also responsible for arranging and negotiating subcontract partnerships necessary for implementing the Coalition's selected direct services.

Monroe Community Coalition members are responsible for providing programmatic guidance through their voice, knowledge, experience and skills. They will take on projects in direct support the Coalition's strategies and activities by participating in workgroups, community training and mobilization efforts.

Subcontracted agencies partnering with the Coalition are responsible for implementing services with fidelity to the intended design of each program, as well as entering programmatic data and pre- and post-surveys into the Division of Behavioral Health and Recovery's management information system to track participation and outcomes. These subcontractors are also required to update the Coalition with progress reports and seek Coalition feedback, particularly where programmatic challenges or barriers have arisen.

Process for Recruiting and Confirming Partnerships

The process for recruiting partners begins with an internal assessment of the Coalition's capacity and readiness to implement the strategies and activities they've selected. Targeted face-to-face recruitment efforts are initiated once a specific need for implementation or partnership has been identified. Confirmation of these partnerships vary depending on need. For informal partnerships, a handshake, letter and/or inclusion on the Coalition's mailing list may suffice. For service delivery partnerships, a memorandum of understanding or subcontract may be required.

Media Engagement

Monroe Community Coalition maintains strategic partnerships with several media outlets, including the Snohomish County Tribune. Our most important media contact is with the Monroe School District's Director of Marketing and Communications, as well as our Family Liaisons.

Because of our partnerships and successes, the Coalition maintains a steady media presence with numerous mentions per year. In addition to being featured in the Monroe Monitor and Everett Herald, we have had our local efforts covered by KOMO 4, KING 5, KIRO 7 and KCPQ 13 television stations and received radio coverage on KOMO 1000AM and KIRO 97.3FM.

To reach specific community populations, or for general strategy and activity promotion, the Coalition uses targeted outreach efforts through school newsletters, email, partner agency distributions lists, bulletin board postings, social media, the coalition website and on screen theater advertising.

Budget Considerations

Monroe Community Coalition is funded by the Federal Substance Abuse Prevention and Treatment Block Grant (SABG) through the Washington State Health Care Authority Division of Behavioral Health and Recovery's (DBHR) Community Prevention and Wellness Initiative. The Coalition also receives state general fund revenue, Dedicated Marijuana Account prevention set aside funding, 1/10th of 1% Sales Tax funding from Snohomish County Human Services, Federal Partnership for Success Funding, Mental Health Block Grant Funding, Mental Health Flex funding from North Sound Behavioral Health Organization, and local funding and in-kind support from the Monroe School District. We receive additional support from Northwest Educational Service District #189 which provides funding for 80% of our CPWI Student Assistance Professional. Lastly, the Coalition is committed to pursuing additional grant funding opportunities as they arise.

Cultural Competency in Implementation

Implementing culturally competent prevention programs means more than having facilitators who are bilingual or who look like the target population. It means the Coalition and its staff need to understand the core values of our target populations so we can connect in a mutually beneficial and respectful capacity. To move our programs toward cultural competence, the Coalition has committed to an ongoing process of examination and change, and treating cultural competence as a process, not just a goal.

As a starting point, the Coalition continues to come alongside valuable partners in the community, including Park Place Safe and the Parent Hub. Minimally, we ensure our materials and programs are available in English and Spanish, wherever possible.

Sustainability in Implementation

Sustainability is the Coalition's primary implementation concern. Programs were selected that have most of their costs upfront, in terms of obtaining training, supplies and materials, but that are relatively inexpensive to continue after incurring these initial costs. For example, the SPORT Prevention Plus Wellness program materials can be reused and reproduced until their master copies

have disintegrated; Parenting Wisely will endure for as long the Coalition keeps its implementation DVD's free of scratches; and the PAX Good Behavior Game is implemented by teachers without incurring any additional staff cost; the same is true for Reconnecting Youth, Coping and Support Training and Sources of Strength.

Coalition members also take an active role in supporting Coalition strategies and activities by participating in work groups and training, and by developing partnerships or contributing physical space for program implementation.

Many in-kind services are already provided by community organizations, including Monroe School District providing fiscal staff support and meeting space for monthly Coalition and workgroup meetings.

Expected Outcomes (Baseline and Target Data)

Monroe Community Coalition formed in order to find an effective method to reduce underage drinking and substance abuse, as well as their consequences, in our community. By using data to identify problems and set goals, our Coalition has an objective means of building support for our efforts, recruiting and developing partnerships, and measuring the progress and success of our strategies and activities.

The Coalition identified long-term consequences that are shown by research to be associated with underage drinking and substance use; we believe that reducing the rates of substance use in our community will reduce the impact and frequency of these long-term consequences, which include:

- **Poor School Performance:** measured by grades, frequency of skipping school and graduation rates on the Healthy Youth Survey and CORE GIS Measures of School Performance.
- **Youth Delinquency:** measured by fighting, weapon carrying, gang involvement, drinking and driving, arrest rates and weapons incidents in school.
- **Mental Health:** measured by depression, considering suicide, and suicide attempts.

The Coalition also identified specific substances consumed in our community that we believe impact these long-term problems. By following these consumption measures, which may take years to impact, the Coalition will be able to track its effectiveness in the community:

- **Any Underage Drinking:** measured by rates on the Healthy Youth Survey and off-year school survey.
- **Underage Problem and Heavy Drinking:** measured by rates on the Healthy Youth Survey and off-year school survey.
- **Any Underage Marijuana Use:** measured by rates on the Healthy Youth Survey and off-year school survey.
- **Any E-Cigarette Use:** measured by rates on the Healthy Youth Survey and off-year school survey.

- **Depression and Attempted Suicide:** measured by rates on the Healthy Youth Survey and off-year school survey.

Much research shows we can reduce these consumption rates by focusing on a model of prevention that uses risk and protective factors that actually *predict* future substance use. Monroe Community Coalition's needs assessment shows that we should concentrate our efforts on changing the following risk and protective factors to reduce substance use and impact our long-term consequences:

- **Community Disorganization**

- We found strong connections within various sectors of our community, but not necessarily between them. As a result, we want to increase collaboration between sectors and believe the Monroe Community Coalition itself is the best strategy to accomplish this.

- **Family Management Problems**

The Coalition found that exposure to Adverse Childhood Experience indicators in the Healthy Youth Survey and family management problems were most strongly associated with local rates of youth depression and attempted suicide. We intend to implement Parenting Wisely and the Under the Influence of You campaign to reduce these consequences by increasing positive attitudes toward healthy family management practices.

- **Early Initiation of the Problem Behavior**

- Healthy Youth Survey data and partner insights suggest this risk factor requires our most immediate attention. We intend to use a mix of environmental and education strategies to more effectively engage in early identification and referral, while also building self-regulation skills. The Coalition will implement policy review and education, Project Success, SPORT Prevention Plus Wellness, PAX Good Behavior Game, Reconnecting Youth, and the Coping Power Program.

- **Favorable Attitudes Toward the Problem Behavior**

- Although not statistically significant, the Coalition found that 8th grade Healthy Youth Survey data demonstrated elevated risk across a variety of measures, including perception of harm, friends use of drugs, peer norms and a large shift in attitudes. To combat the shift in attitudes that often precede shifts in behavior, the Coalition will engage in Education and Media strategies by implementing the Botvin LifeSkills Training program and a locally developed youth media campaign called Lift/Rise.

Process and Outcome Measures

The Coalition will ensure that all DBHR-funded monthly service data is entered into the approved management information system as a contractual requirement for all Coalition strategies and activities. This condition will be negotiated, specified in contracts and monitored monthly. Monthly service data entry will include:

- Participant demographics.
- Participant attendance for all recurring programs.
- Required pre and post-survey responses for all applicable programs.
- Coalition Coordinator hours.

The Coalition is committed to working with DBHR to ensure that each strategy and activity's outcome measures are consistent with the intent of each program's purpose and design.

Program/Activity Name:	
Monroe Community Coalition	
Process Measures	Tool/instrument
Participation	Monthly meeting Sign-in Sheets
Sector Representation	Primary Sectors represented in Minerva
Outcome Measures:	
Increased community readiness to address ATOD in Monroe	Coalition Assessment Tool and Annual Community Survey

Program/Activity Name:	
Parenting Wisely	
Process Measures	Tool/instrument
Implementation	# of groups offered # of participants/participants completing programming
Outcome Measures:	
Increase positive attitudes toward healthy family management practices	Managing and monitoring survey until custom instrument uploaded

Program/Activity Name:	
Under the Influence of You Campaign	
Process Measures	Tool/instrument
Community/Public Awareness	# events where information disseminated # of media postings # of media impressions
Outcome Measures:	
Increase positive attitudes toward healthy family management practices	Annual Community Survey

Program/Activity Name:	
Project Success	
Process Measures	Tool/instrument
Implementation	# of participants
Outcome Measures:	
Increase early identification of problem behaviors and referral	RMC Measures

Program/Activity Name:	
SPORT Prevention Plus Wellness	
Process Measures	Tool/instrument
Training	# of implementers trained
Implementation	# of participants
Outcome Measures:	
Increase early identification of problem behaviors and referral	Intentions to Use survey

Program/Activity Name:	
Policy Review, Education & Advocacy	
Process Measures	Tool/instrument
Environmental	# of policy review and education meetings
Outcome Measures:	
Increase early identification of problem behaviors and referral	New policy hearing and adoption

Program/Activity Name:	
PAX Good Behavior Game	
Process Measures	Tool/instrument
Training	# of Teachers trained
Implementation	# of Students participating # of Monthly hours playing game
Outcome Measures:	
Increase Self-Regulation Skills	Pre-Mid-Post “Spleem” observation form

Program/Activity Name:	
Reconnecting Youth	
Process Measures	Tool/instrument
Training	# of Teachers trained
Implementation	# of Students participating # of Monthly hours playing game
Outcome Measures:	
Increase Self-Regulation Skills	Strengths and Difficulties Questionnaire

Program/Activity Name:	
Coping Power Program	
Process Measures	Tool/instrument
Training	# of Teachers trained
Implementation	# of Students participating # of Monthly hours playing game
Outcome Measures:	
Increase Self-Regulation Skills	Strengths and Difficulties Questionnaire

Program/Activity Name:	
Botvin LifeSkills Training Program	
Process Measures	Tool/instrument
Training	# of Teachers trained
Implementation	# of Students participating # of Sessions
Outcome Measures:	
Decrease favorable attitudes toward substance use and suicide	Minerva LST Survey

Program/Activity Name:	
Lift/Rise Campaign	
Process Measures	Tool/instrument
Community/Public Awareness	# events where information disseminated # of media postings
Outcome Measures:	
Decrease favorable attitudes toward substance use and suicide	Healthy Youth Survey

Use of Evaluation Information

The Coalition uses outcome evaluation as a measure for determining whether or not our strategies are impacting our identified goals and objectives. If our outcomes show we are on track: we continue. If our outcomes don't match our expectations: we make course corrections.

To this end, the Coalition Coordinator and Leadership Team will review evaluation data with the full coalition on a quarterly basis as programs are implemented and outcome reports become available. This keeps the Coalition engaged in the meaningful provision of our strategies and activities, and gives us the opportunity to ask for support and feedback. Coalition service providers are also required by subcontract to attend at least two coalition meeting per year in order to engage members in their work.

The more we can demonstrate our effectiveness to our members, community and potential funders as a result of our strategies and activities, the more we enhance our ability to foster sustainability and ensure lasting and meaningful community change.

Who	What	Why	How
<i>Who will want to know about the Coalition's evaluations results?</i>	<i>What will they want to know about the Coalition's evaluation?</i>	<i>Why will the Coalition want them to know about the evaluation results?</i>	<i>How will the Coalition provide them with this information?</i>
Coalition Members and Leadership Team, Snohomish County Human Services, City Council, DBHR and School District.	Program and process information, completed and upcoming groups, evaluation outcomes for programs, Coalition impact.	For credibility and policy support, for funding, for recruitment, and for future collaboration.	Minerva Reports, Key Leader presentations, press releases, Coalition meetings, Subcontractor presentations and work groups on an as needed basis.

Improving the Way We Work – Local Evaluation

Monroe Community Coalition recognizes that biennial Healthy Youth Surveys may not provide enough real-time information to allow for Coalition or community partner activities that identify and respond to existing and emerging community needs. As such, we intend to implement an off-year survey instrument to supplement our HYS and Risk and Protection Profile data.

Cultural Competency in Evaluation

When conducting pre/post tests for Coalition direct service strategies, developer approved survey instruments will be utilized whenever possible since these have been tested for efficacy with the target population. Where necessary, the Coalition Coordinator will work with the State to use approved custom survey instruments. All participants will be provided ample time to complete surveys. If assistance is needed, survey questions and potential responses will be read aloud to all participants in English or Spanish.

The Coalition also implements an Annual Community Survey distributed in English and Spanish each fall. We use this survey data to measure changes in perception and to determine the reach or Coalition strategies and activities.

Sustainability in Evaluation

The Coalition Coordinator will generate Minerva program evaluation reports to share with the Coalition, its partners and subcontractors as they are made available. The Coalition will determine how best to release Coalition successes and challenges to the public to generate increasing support for its goals, objectives and strategies.

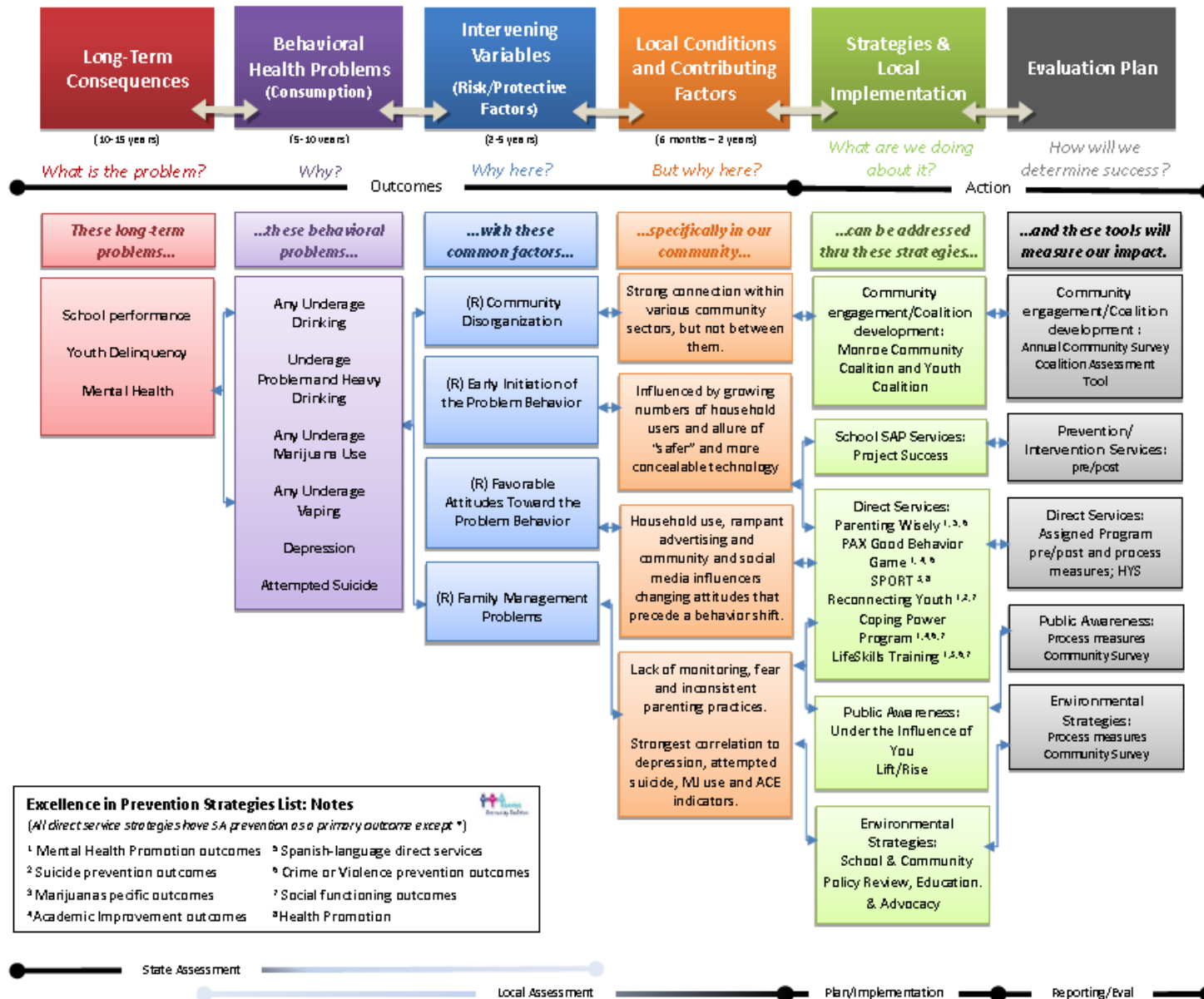
Finally, the Coalition will look to the State's ongoing leadership in evaluating the effectiveness of our strategies and activities.

Appendix to Coalition Strategic Plan

- Appendix 1. Logic Model
- Appendix 2. Roster of Coalition Members
- Appendix 3. Needs Assessment
- Appendix 4. Community Survey Results
- Appendix 5. Resources Assessment Matrix
- Appendix 6. Action Plan

Attachment 1: Budget

Appendix 1 | Logic Model



Appendix 2 | Coalition Roster

SECTOR	AGENCY / ORGANIZATION	REPRESENTATIVE NAME
Youth Serving Org.	Housing Hope	Chris Gray
Faith	Faith Community	Cherie Matyas
Schools	Monroe School District	Kathy Jackson
Schools	Monroe School District	Randy Brown
Mental Health	NAMI	Jim Bloss
Other S/A Org.	Sea Mar Behavioral Health	Eliana Haffner
Schools	Park Place Middle	Jennifer Garcia
Schools	Monroe School District	Kathy Bernhardt
Law Enforcement	Monroe Police Department	Justin Springer
Youth Serving Org.	Olivecrest	Jill Mutcheson
Volunteer Group	TLC	Bill Mahoskey
Parent	LDS	Kerry Boone
Schools	School District	Mary Myers
Faith	Monroe Pastors Fellowship	Michael Hanford, Pastor
Faith	Christ Church of Monroe	Eric Swenson
Local Gov't	Snohomish Health District	Juliet D'Alessandro
Other S/A Org.	NWESD 189	Chris Jury
Schools	Monroe High School	Tammy Amador
Schools	Park Place Middle School	Terry Cheshire
Youth Serving Org.	Take the Next Step	Mary Wysocki
Community	Retired	Tom McIntyre
Volunteer Group	Monroe Rotary Club	Alison Cummings
Local Gov't	Snohomish Health District	Jennifer Reid
Healthcare Professional	EvergreenHealth Monroe	Sherry Jennings

Healthy Youth Survey 2018

- Administered every other year in 6th, 8th, 10th and 12th grade in Monroe School District and throughout Washington State – **We'll focus on 8th and 10th grade today.**
- Results provide a glimpse into student behavior and health.
- State data provides a baseline with which to measure "normal."
- Knowing what's "normal" helps us to identify areas of concern and success.
- Today we'll focus on areas that are **statistically different** from the state, schools like us, and our own past results – statistical difference means there is more than random chance at work.
- We'll also focus on areas that are **significant to us**, even though our results are considered "normal." What is normal isn't always acceptable.

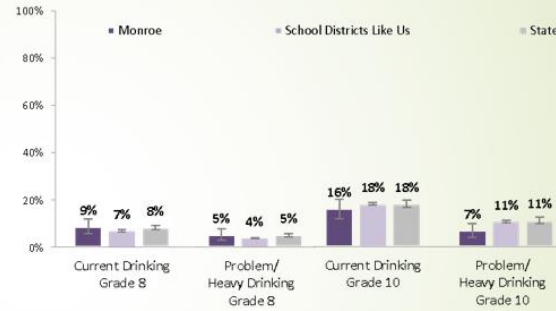
Community Survey 2018 Results

- Survey of Adults who live and work in Monroe, Washington (n=166)



Alcohol Use

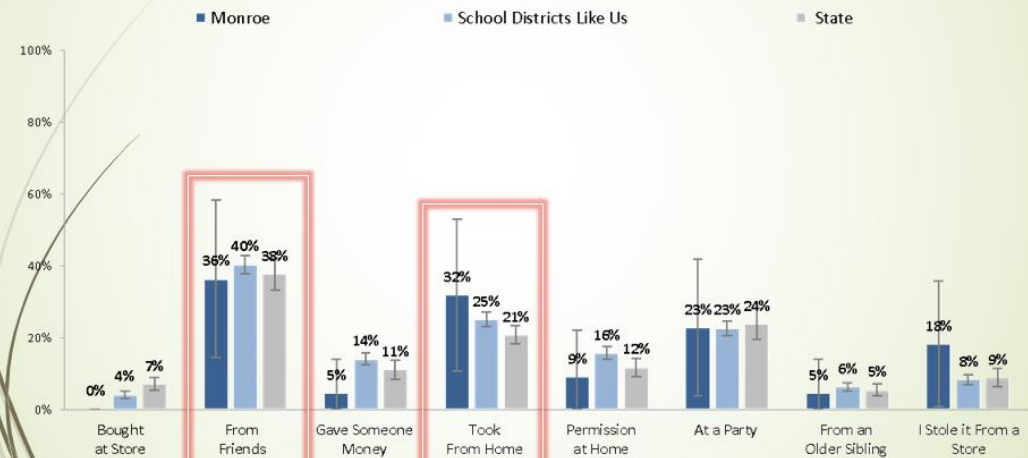
- Underage drinking is **sharply declining** in Monroe!
- Change in 10th grade rates are statistically significant compared to district's like us and the State.
- At 16%, 10th Grade regular drinking rates are the lowest ever recorded!**
- 10th Grade binge drinking is the second lowest rate ever recorded.



HYS Measures of Youth Substance Use		Monroe		School Districts Like Us		State	
		2016	2018	2016	2018	2016	2018
Current Drinking: During the past 30 days, on how many days did you: Drink a glass, can or bottle of beer? (District results: Drink any days)		8	11%	9%	6%	7%	8%
		10	25%	16%	18%	20%	18%

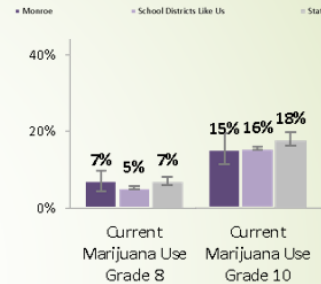
Where Do They Get It: Alcohol

HYS Measures of Alcohol Availability, Grade 10 (2018, Percent)



Marijuana Use

- Marijuana use rates remain historically low for our students.
- After eight years of steady decline, 8th grade marijuana use rates increased to 7%, but not statistically significant.
- 10th grade marijuana current use rates = 15%.

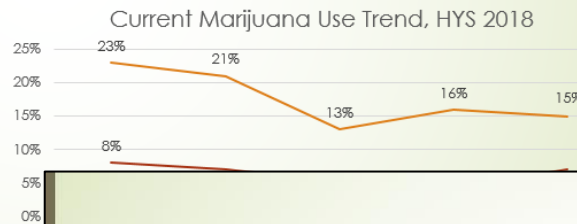


Monroe High School (Monroe School District) - Grade 10

Household Marijuana Use

Household Marijuana Use

No	81.2% ± 0.6% 112
Yes	18.8% ± 0.6% 26



Household MJ Use Influences Youth Use

Household Marijuana Use and Current Marijuana Use

- Does anyone who lives with you now use marijuana? [D99] Response "Yes."
- 8th grade risk increases by 585%
- 10th grade risk increases by 214%
- 12th Grade risk increases by 130%

- In 8th Grade, youth use occurs in 15% of households with other users.
- In 10th Grade, youth use occurs in 59% of households with other users.
- By 12th Grade, regular youth marijuana use occurs in 75% of households with other regular users.

Household Marijuana Use	Current Marijuana Use		
	no days	any days	Total
Snohomish County - Grade 8			
No	96.7% ± 1.4% 1,212	3.3% ± 1.4% 41	100.0% 1,253
Yes	79.4% ± 6.4% 203	21.6% ± 6.4% 56	100.0% 259

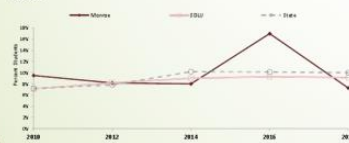
Household Marijuana Use	Current Marijuana Use		
	no days	any days	Total
Snohomish County - Grade 10			
No	88.2% ± 2.1% 1,064	11.8% ± 2.1% 147	100.0% 1,241
Yes	83.0% ± 4.4% 215	17.0% ± 4.4% 129	100.0% 341

Household Marijuana Use	Current Marijuana Use		
	no days	any days	Total
Snohomish County - Grade 12			
No	81.3% ± 3.4% 790	18.7% ± 3.4% 182	100.0% 972
Yes	57.1% ± 6.0% 159	42.9% ± 6.0% 127	100.0% 286

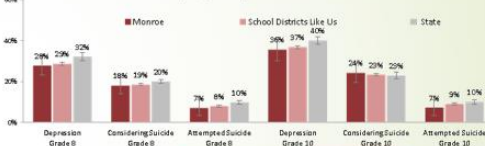
Mental Health: Depression & Suicide

- Depression affects about **1 in 3** students within the Monroe School District.
- Our rates have held steady while State rates grew in 2018.
- We have reduced 10th Grade attempted suicide rates to just 7%, from a high 17% in 2016.**

Suicide Attempts
Grade 10



HYS Measures of Mental Health (2018, Percent)

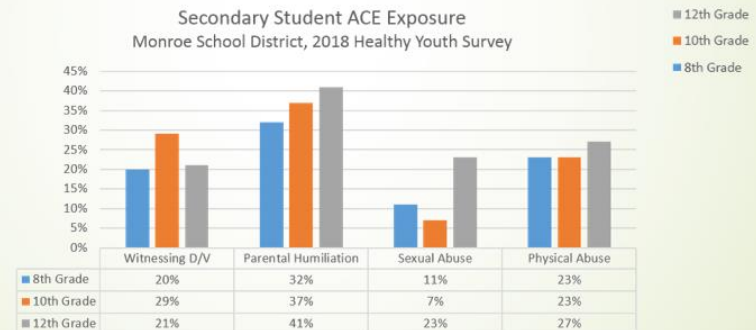


HYS Measures of Mental Health		Monroe		School Districts Like Us		State	
		2016	2017	2016	2017	2016	2017
Depression. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities? (District results: "Yes")	8	29%	28%	25%	29%	28%	32%
	10	35%	36%	33%	37%	34%	40%
Considering Suicide. During the past 12 months, did you ever seriously consider attempting suicide? (District results: "Yes")	8	18%	18%	15%	19%	17%	20%
	10	23%	24%	20%	23%	21%	23%
Attempted Suicide. During the past 12 months, how many times did you actually attempt?	8	8%	7%	7%	8%	8%	10%
	10	23%	24%	20%	23%	21%	23%

Known ACE Indicators

- Students exposed to certain categories of adverse experiences are more likely to face challenges ranging from substance abuse to attempted suicide.
- They also exhibit multiple risk factors for school drop-out, including: low school engagement, poor follow-through, highly externalizing behaviors, high rates of discipline referrals and grade repetition.**

Secondary Student ACE Exposure
Monroe School District, 2018 Healthy Youth Survey



Highlights of Vulnerability

■ Grade 8 Risk

8th graders in Monroe exhibit the same risk characteristics as their peers across the State; however, their perceived norms are placing them at higher risk:

- Perception that Community doesn't think youth Alcohol and MJ use is wrong.
- Perception of Peers not thinking underage use is wrong.
- Perception of Friends' substance use.
- Diminishing perceptions of harm from substance use.
- Early initiation of Drugs
- Gang membership.

■ Grade 10 Risk

10th graders in Monroe are more vulnerable to developing problem behaviors as a result of their elevated risk in the School domain:

- Academic Failure and Low commitment to school – School

Highlights of Protection

■ Grade 8 Highlights

8th graders in Monroe exhibit the same risk characteristics as their peers across the State.

■ Grade 10 Highlights

- Depression rates: Holding steady historically
- Adults to turn to for help : Highest ever
- Attempted suicide: 2nd lowest rate ever; lowest since 2006!
- Current alcohol use: Lowest ever recorded
- Binge drinking: Second lowest rate ever recorded
- Marijuana: Second lowest rate ever recorded
- Pain Killer use: Tied for lowest rate ever.
- Rx use (Not Prescribed): 6th year of decline.
- Statistically Significant increase in 10th grade opportunities for prosocial involvement and rewards for prosocial involvement

Considerations

Where do we go from here?



Community Risk Factors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence	Depression Anxiety
Availability of Drugs						
Availability of Firearms						
Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime						
Media Portrayals of Violence						
Transitions and Mobility				x		x
Low Neighborhood Attachment and Community Disorganization	x	x			x	
Extreme Economic Deprivation	x	x	x	x	x	
Family Risk Factors						
Family History of the Problem Behavior	x	x	x	x	x	x
Family Management Problems	x	x	x	x	x	x
Family Conflict	x	x	x	x	x	x
Favorable Parental Attitudes and Involvement in the Problem Behavior	x	x			x	
School Factors						
Academic Failure Beginning in Late Elementary School	x	x	x	x	x	x
Lack of Commitment to School	x	x	x	x	x	
Peer/Individual Factors						
Early and Persistent Antisocial Behavior	x	x	x	x	x	
Rebelliousness	x	x		x	x	
Friends Who Engage in the Problem Behavior	x	x	x	x	x	
Favorable Attitudes Toward the Problem Behavior	x	x	x	x	x	
Early Initiation of the Problem Behavior	x	x	x	x	x	
Constitutional Factors	x	x			x	

Middle school Gang Membership is on the rise;
our rates have doubled since 2016.

Why is this happening in Monroe. Has anything changed?

Population INCREASE →

HOPELESSNESS
Undercastly around immigration policies
EASIER TO Get in a gang
RECRUITING is STRATEGIC
bullying - negative effect of "the wolf leader"

What resources do we have in Monroe that address this issue?

- Kids Club, Seamar
- Soccer & play fields
- Bilingual team
- larger activities engagement

What resources do we need to help address this?

- Create places of Community Bonding
- New place to go
- Increase visibility of Kids Club & Seamar
- Create multiple opportunities for kids to
- more opps for sports teams
- more com
- Looking into the city - more opportunities for police to engage w/ youth

8th Graders early use of drugs is on the rise.

Why is this happening in Monroe? Has anything changed here?

Lack of activities; access
Lack of transportation
*** social media hype (including projected)**
*** video gaming**
HRM - no walkers - parents need to provide
Parents in treatment - lack of sch

What resources do we have in the community addressing this issue?

SeaMar (why huge decrease in referrals?)
community perception re Service

- Take the Next Step - Family Support
- Boys + Girls** **YMCA**

What resources do we need to better address?

- DisA support for youth
- more agencies to provide treatment
- more info + resources for parents
- Starting earlier - Family Ed.
- Trusted adults
- Sponsors for more sports team

10th Grade academic failure are trending upward (grades and in life).

What may be contributing to this?

- LESS HOPEFUL about the
- Family priorities - work vs. education (Cultural)
- growth of extracurricular activities in an
- ↓ availability of alternative
- leave school for employment (will be dysfunctional family behaviors into

What resources in the community are?

- trusted adults
- counselors + local ed. resources
- after-school supports
- school family support specialists Navigators - trained in schools to identify at-risk students
- Boys + Girls Club + YMCA
- Take the Next Step, Student Leaders, etc. Also do state going on

What additional resources do we need to address this issue?

technical ed + internships/apprentices
Career fair
Pros talk about importance of school
+ role models come into schools
mentoring

Middle school students are at increased risk for substance use because their perceptions are shifting.

- They believe the community is becoming more tolerant of underage use
- They believe more of their friends are using than is true;
- They believe underage use is not wrong;
- They believe alcohol and marijuana are less risky.

WE NEED MORE EDUCATION - Follow Through CONSEQUENCES.
What is contributing to this shift in perspective in Monroe? Has anything changed?

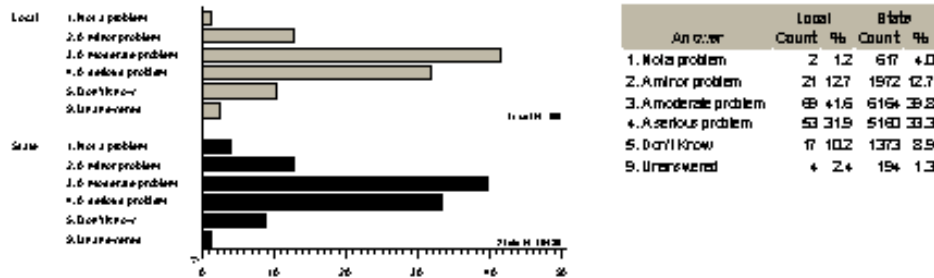
Opening of specialty bars/wine
more information for parents
social activity for parents
PARENTS IN TX (OPIOD EPIDEMIC)
What resources do we have in the community working on this issue?
↑ ed - don't dumb it down
More X with law enforcement
SEA MAR
need more providers
What resources do we need to change this trend?
more + activities for kids
life skills + education - OUTREACH & PREVENTION RESOURCES
MORE EDUCATION + SUPPORT FROM + FOR PARENTS
CONSISTENT TRAINING ACROSS SCHOOLS + INSTITUTIONS

Appendix 4 | Community Survey Results

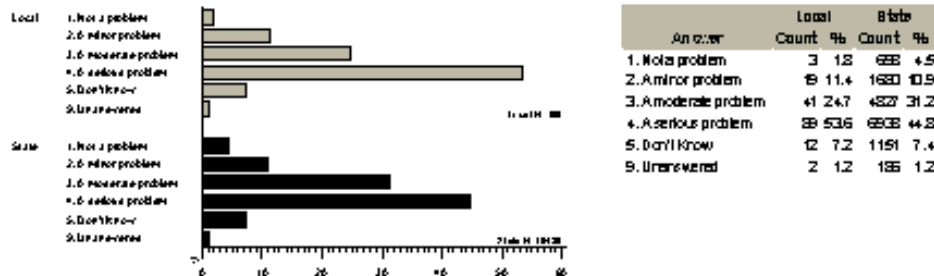
Complete Community Survey results can be found online at the Monroe Community Coalition Website: www.monroecommunitycoalition.com

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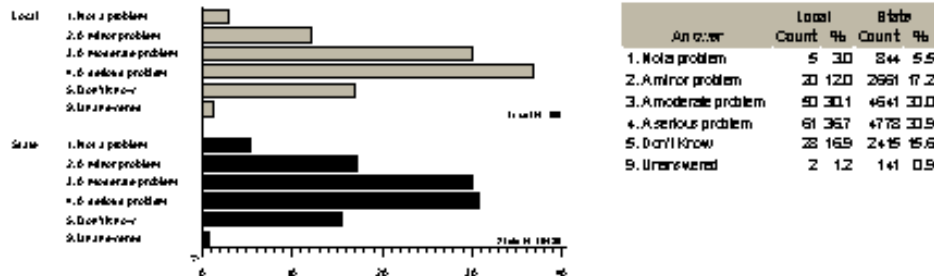
1a. How much of a problem do you think each of the following is among youth (6th–12th grade) in your community? Alcohol use



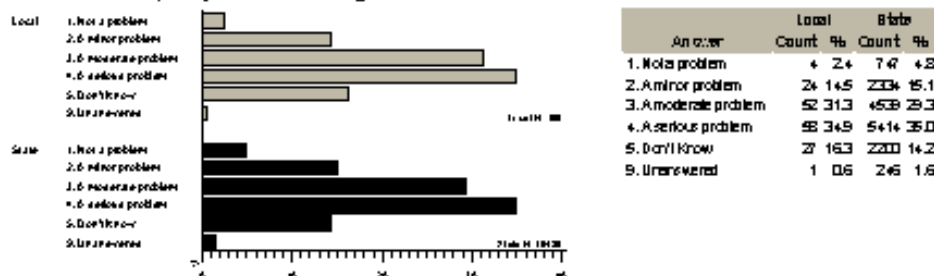
1b. How much of a problem do you think each of the following is among youth (6th–12th grade) in your community? Marijuana or hashish use (weed, hash, pot)



1c. How much of a problem do you think each of the following is among youth (6th–12th grade) in your community? Prescription drug misuse (using medication without a prescription or in a way other than prescribed)



1d. How much of a problem do you think each of the following is among youth (6th–12th grade) in your community? Driving under the influence of alcohol, marijuana or other drugs



Source: WA HCA DBH 2018 Monroe CPWICommunity Survey

Appendix 5 | Resource Assessment Matrix

[illegible]

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Goal 1: Reduce Low Neighborhood Attachment & Community Disorganization (Minerva #11)

Objective 1.1: Increase Community Capacity to Address ATOD Issues (Minerva #12, #13)

CSAP Strategy: Community-based Process (Minerva #15)

Name of Program	Funding Source	Brief Description	How	Who & IOM Category	Lead and Responsible Party(ies)	Surveys
<i>Name of program(s)</i>	<i>See below for list</i>	<i>Briefly state the main purpose of activity</i>	<i>How much? How often? During which months?</i>	<i>Who is this service for? How many people reached? Is it Universal-Indirect, Universal-Direct, Selective, or Indicated?</i>	<i>Organization delivering program? Who from the Coalition is making sure this gets done?</i>	<i>What survey will you be using? Frequency?</i>
Minerva #3	#7	#4	#18, #19	#16, #21, #22, #23	N/A	#24, #25
Monroe Community Coalition	SABG	A coalition is a formal arrangement for cooperation and collaboration between sectors of a community. Each group retains its identity, but all agree to work together using the CPWI Strategic Prevention Framework toward a common goal of building a safe, healthy, and drug-free community.	3 Groups, (Monthly full membership meetings, Leadership Team Meetings, and ad-hoc workgroups), 20 Sessions, July, 2019-June, 2020	Universal – Indirect. 25 unduplicated participants. General population.	Monroe Community Coalition Coordinator and Leadership Team	Coalition Assessment Tool by November 15, 2019 Annual Community Survey by December 31, 2019
		Specific Activities:				
		Strategic Plan Implementation	Year-round		Community Coalition and workgroups	
		Annual Community Survey	Sept. – Dec., 2019		Community Coalition	
		Coalition Assessment Tool	Annually, by Nov., 2019		Coalition Coordinator	
		Key Leader Orientation Training	Annually, by Oct., 2019		Coalition Coordinator and Leadership Team	

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State Prevention Summit Participation	Annually, Nov., 2019	Community Coalition Coordinator and Members
Community & Regional Trainings on ACES, Resiliency & Kernels	Year-round upon request	Coalition Coordinator and Coalition Members
Community Outreach Events TBD by Coalition	Year-round	Coalition Coordinator, Leadership Team and workgroups
PAX Training	December, 2019	Coalition Coordinator, Maltby Elementary and Frank Wagner Elementary
Diversity/Inclusion Training	November, 2019	Coalition Coordinator, Leadership Team, YMCA
Program Evaluation	June, 2020	Coalition Coordinator, Leadership Team and Coalition Members
Youth Mental Health First Aid Training	June, 2020	Coalition Coordinator and YMHFA Trainer
Suicide Prevention and Mental Health Promotion Community Outreach Activities	January – June, 2020	Coalition Coordinator, Leadership Team and Community Partners

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Goal 2: Reduce Family Management Problems (Minerva #11)

Objective 2.1: Increase or Maintain attitudes of family management practices (Minerva #12, #13)

CSAP Strategy: Education, Information Dissemination (Minerva #15)

Name of Program	Funding Source	Brief Description	How	Who & IOM Category	Lead and Responsible Party(ies)	Surveys
Name of program(s)	See below for list	Briefly state the main purpose of activity	How much? How often? During which months?	Who is this service for? How many people reached? Is it Universal-Indirect, Universal-Direct, Selective, or Indicated?	Organization delivering program? Who from the Coalition is making sure this gets done?	What survey will you be using? Frequency?
Minerva #3	#7	#4	#18, #19	#16, #21, #22, #23	N/A	#24, #25
Parenting Wisely	SABG	Parenting Wisely is a set of interactive, computer-based training programs for parents of children ages 3-18 years. Based on social learning, cognitive behavioral, and family systems theories, the programs aim to increase parental communication and disciplinary skills.	3 Groups (Online and In-Person). Online licenses available and promoted year round, In-person Seminars occur in October, 2019 February, 2020 and June, 2020	Universal – Direct. 24 unduplicated participants. Parents/Families including Adults and High School Students.	Subcontractor delivers in-person seminars. Online licenses promoted by coalition partners. Coalition Coordinator monitors subcontractor and partners.	Managing and Monitoring for Parents of Young Children, pre-post
Under the Influence of You	SABG	A method of health promotion that seeks to improve health and safety and decrease substance abuse by exposing commonly held myths about unhealthy behavior in a target group and communicate positive behavior for that group.	July, 2019 – June, 2020	Universal-Indirect.	Monroe Community Coalition, ad-hoc workgroups and Ads On the Wall, Inc.	Annual Community Survey

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Activities		
Theater-based Advertising Campaign	1 group. 10 sessions. July, 2019-April, 2020	Approximately 30,000 impressions per month. General population
Adaptation -"Under the Influence of You." Ad-hoc topical Parent Trainings or community meetings	2 groups. 2 sessions. Dates TBD by partners.	20 unduplicated participants, general population. Parents.

Goal 3: A: Reduce Early Initiation of the Problem Behavior (Minerva #11)

Objective 3.1: Reduce youth intentions to use ATOD (Minerva #12, #13)

CSAP Strategy: Education, Environmental (Minerva #15)

Name of Program	Funding Source	Brief Description	How	Who & IOM Category	Lead and Responsible Party(ies)	Surveys
Name of program(s)	See below for list	Briefly state the main purpose of activity	How much? How often? During which months?	Who is this service for? How many people reached? Is it Universal-Indirect, Universal-Direct, Selective, or Indicated?	Organization delivering program? Who from the Coalition is making sure this gets done?	What survey will you be using? Frequency?
Minerva #3	#7	#4	#18, #19	#16, #21, #22, #23	N/A	#24, #25
Project Success	SABG Other	Project Success is a school-based prevention and intervention program that prevents substance abuse through classroom education, small group sessions and individual counseling.	Six-session classroom education series, in Fall 2019. Small Groups and counseling occur throughout the school year.	Universal. 520 unduplicated participants. People transitioning from middle to high school receive the classroom education series. 9 th grade high school students. Selective and Indicated. 65 unduplicated participants. People with risk characteristics for substance use will receive small group and individual counseling. High school students.	MVWESD #189 Student Assistance Professional. Monroe School District.	RMC Measures

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SPORT Prevention Plus Wellness	SABG	SPORT is a single-session marijuana prevention program that can be implemented individually or in small groups	1 Group. Individual sessions provided October, 2019 – May, 2020 at Monroe High School.	Selective. 50 unduplicated participants. General population and COSAs. High school students.	Student Assistance Professional, Student Support Advocate	SPORT Intentions to Use Pre/Post
Policy Review, Education & Advocacy	SABG Local	Assess local policies influencing early identification and connection to supports for student behavioral health issues. Engage in education activities that build support for enacting needed policy change.	1 group. Recurring sessions determined on an ad-hoc basis. July, 2019 – June, 2020 in the Monroe School District	Universal. 3-5 participants for review, more if mobilizing for Advocacy. General Population and Elected Officials.	Coalition Coordinator, Coalition Leadership Team and Coalition Members	Process measures only

Goal 3: B: Reduce Early Initiation of the Problem Behavior (Minerva #11)

Objective 3.1: Decrease destructive behavior in the classroom (Minerva #12, #13)

CSAP Strategy: Information Dissemination, Education (Minerva #15)

Name of Program	Funding Source	Brief Description	How	Who & IOM Category	Lead and Responsible Party(ies)	Surveys
Name of program(s)	See below for list	Briefly state the main purpose of activity	How much? How often? During which months?	Who is this service for? How many people reached? Is it Universal-Indirect, Universal-Direct, Selective, or Indicated?	Organization delivering program? Who from the Coalition is making sure this gets done?	What survey will you be using? Frequency?
Minerva #3	#7	#4	#18, #19	#16, #21, #22, #23	N/A	#24, #25
PAX Good Behavior Game	SABG DMA	PAX Good Behavior Game (GBG) is a classroom-based environmental strategy for elementary school that teachers use along with a school's standard instructional	12 Groups. Daily classroom implementation. Sept., 2019 – June, 2020	Universal – Direct. 12 unduplicated classrooms (approximately 300 unduplicated participants). General population. Elementary school students.	Monroe Community Coalition & Maltby Elementary School	Spleen Observation Form, pre-mid-post.

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		curricula. GBG uses a classroom-wide game format with teams and rewards to socialize children to the role of student and reduce aggressive, disruptive classroom behavior, which is a risk factor for adolescent and adult illicit drug abuse, alcohol abuse, cigarette smoking, conduct disorders, suicide, and violent and criminal behavior.	PAX Training for up to 30 Staff			
Reconnecting Youth	SABG	Semester-long course at Monroe High School created by the developers of the CAST program. Reconnecting Youth is Peer Group approach to building Life Skills for students ages 14-19 years that teaches skills to build resiliency against risk factors and control early signs of substance abuse and emotional distress.	2 groups, 75 Sessions, September 2019 – June 2020	Selective. 12-15 unduplicated participants. People with mental health problems. High school students.	Monroe High School Counselor	Strengths and Difficulties Questionnaire pre/post (In Minerva as Second Step Survey)
Coping Power Program	SABG	The Coping Power Program (CPP) is a cognitive-based intervention delivered to aggressive children and their parents during the child's transition to middle school.	1 Group, 22 sessions for 5 th Graders, 16 sessions for their parents	Selective. 8 – 16 unduplicated participants. Delinquent/Volent Youth & Parents.	Elementary School Counselor at sited to be determined.	Strengths and Difficulties Questionnaire pre/post

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Goal 4: *Reduce Favorable attitudes toward the problem behavior* (Minerva #11)

Objective 4.1: *Decrease favorable attitudes toward use* (Minerva #12, #13)

CSAP Strategy: *Education, Information Dissemination* (Minerva #15)

Name of Program	Funding Source	Brief Description	How	Who & IOM Category	Lead and Responsible Party(ies)	Surveys
<i>Name of program(s)</i>	<i>See below for list</i>	<i>Briefly state the main purpose of activity</i>	<i>How much? How often? During which months?</i>	<i>Who is this service for? How many people reached? Is it Universal-Indirect, Universal-Direct, Selective, or Indicated?</i>	<i>Organization delivering program? Who from the Coalition is making sure this gets done?</i>	<i>What survey will you be using? Frequency?</i>
Minerva #3	#7	#4	#18, #19	#16, #21, #22, #23,	N/A	#24, #25
Botwin LifeSkills Training Program	SABG	LifeSkills Training (LST) is a school-based program that aims to prevent alcohol, tobacco, and marijuana use, as well as violence, by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors.	6 Groups. 15 sessions for 6 th Graders, 10 sessions for 7 th graders, 5 sessions per 8 th graders. Semester 1 beginning Sept. 2019 & Semester 2 beginning February, 2020	Universal. 200 unduplicated participants. General Population. Middle School students.	Science and Health Teachers at Park Place Middle School and Hidden River Middle School	Drug Attitudes – Life Skills Scale pre/post
Lift/Rise Campaign	SABG TBD	Monroe High School Prevention Club/SOS will develop and implement their "Lift/Rise" theater and hallway campaign to promote protective factors and connection with prosocial peers and adults.	1 group. 10 sessions. July, 2019-April, 2020	Universal-Indirect. Approximately 30,000 impressions per month. General population	Monroe Community Coalition, Monroe High School Prevention Club/SOS and Ads On the Wall, Inc.	Annual Community Survey



*Concerned about
youth substance use
and mental health?*



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MAKING A
DIFFERENCE!**



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