Strategic Prevention Framework

The key characteristics of the SPF:

- Dynamic and repetitive process
- Data-driven model
- A team approach to prevention

The SPF is always guided by the following two principles:

- Cultural Competence: The ability of an individual or organization to interact effectively with members of diverse population groups
- **Sustainability**: The process of building an adaptive and effective system that achieves and maintains desired long-term outcomes.

The five steps of the SPF process:

- 1. Assessment (What is the problem?): Identify local prevention needs based on data.
 - a. Issue:
 - i. Non-medical use of prescription drugs among 12-25 year olds
 - ii. Underage drinking
 - b. Assess Data = CCSAPC reviewed data sets to identify causes for the above issues
 - c. Identify Intermediate Variables: Prescription Drug intermediate variables
 - i. Individual Factors
 - ii. Social Availability
 - iii. Community Norms
 - d. Underage drinking intermediate variables
 - i. Social Availability
 - ii. Retail Availability
 - iii. Individual Factors/ Perception of Harm
- 2. Capacity (What do we have to work with?): Build local resources and readiness to address prevention needs.
 - a. Achieving Capacity in Prevention
 - i. Engage diverse community stakeholders
 - ii. Develop and strengthen our prevention team
 - b. Readiness is the degree that the community is prepared and willing to address prevention needs.
 - i. 2 Denial Resistance
 - 1. Community members have misconceptions or incorrect knowledge about current efforts.



- 2. Only a few community members have knowledge about the issue, and there may be many misconceptions among community members about the issue
- 3. Only a few community members have at least heard about local efforts, but know little about them.
- 4. General attitude is "we can't or shouldn't do anything about it"

3. Planning (What should we do and how should we do it?): Find out what works to address prevention needs and how to do it well.

- a. CCSAPC approved strategies to work on NMUPD and Underage drinking
- b. Selected strategies to address each priority factor.
 - i. RX- Use mass media to increase public concern about use and change normative perceptions.
 - ii. RX-Develop clear and consistent guidance on safe disposal of prescription drugs and use of permanent collection sites.
 - iii. RX-Increase awareness of naloxone availability and benefits of naloxone use. Advocate for/support laws that facilitate access and use of naloxone (e.g. Good Samaritan laws)
 - iv. Underage drinking- Educate community members are Social Host Laws using Media
 Advocacy
 - v. Underage drinking- Responsible Beverage Service and Sales Training, Alcohol Compliance Checks and building community awareness
 - vi. Underage drinking- Use mass media to increase perception of harm among youth

4. Implementation (How can we put our plan into action?): Deliver evidence-based interventions as intended.

- a. Connect with key implementation partners
- b. Fidelity and Adaptation
- c. Maintain core components
- d. Adapt with care (as needed)

5. Evaluation (Is our plan succeeding?): examine the process and outcomes of interventions.

- a. Examine the degree to which each intervention produces positive outcomes
- b. Determine how well these different interventions work together as part of your community's comprehensive plan to address priority substance use problems
- c. Evaluation of the SPF process! The better the prevention processes are the better the prevention outcomes will be.

