

The West Virginia Partnership to Promote Community Well-Being

2006 Annual Report

Prepared by the West Virginia Prevention Resource Center on Behalf of the Partnership

PARTNERSHIP OVERVIEW

Officially created by *Executive Order No. 8-04* in May 2004, The West Virginia Partnership to Promote Community Well-Being (Partnership) is the state's designated substance abuse prevention and intervention planning body and an advisory council for West Virginia's implementation of its federal Strategic Prevention Framework State Incentive Grant (SPF SIG). The Partnership consists of Governor-appointed representatives primarily from state and community entities who have training, experience, and/or special knowledge concerning substance abuse, prevention, intervention, and treatment. Its purpose is to coordinate a comprehensive statewide substance abuse prevention system through activities including but not limited to: planning, securing resources, recommending sub-grants, and evaluating.

PARTNERSHIP FUNDING

Since its inception, the Partnership has been supported with the following federal grant funds: In 2003, West Virginia received a one-year State Incentive Grant (SIG) Planning Grant of \$500,000. In 2004, the state was awarded a five-year Strategic Prevention Framework State Incentive Grant (SPF SIG) totaling \$11,754,830. Although these grants were officially awarded to the Governor's Office, the Governor chose to contract with several entities to actually implement these grants. One of the entities – the West Virginia Prevention Resource Center – staffs the Partnership and uses some of its portion of SPF SIG funding to support Partnership activities.

PARTNERSHIP ACTIVITIES/ACCOMPLISHMENTS

According to *Executive Order No. 8-04*, “*The Partnership shall report its progress to the Governor and both houses of the Legislature prior to the first day of December of each year.*” This report is intended to fulfill this requirement.

The executive order also states that: “*The Partnership shall: Establish its own by-laws; Develop a statewide plan for the improvement of the substance abuse prevention system; Coordinate planning with other interrelated systems; Establish priorities for the improvement of the substance abuse prevention system; Identify & leverage funding to fill needs and gaps in prevention and intervention services; Inquire into additional grants from any federal agency or other sources.*” A summary of the Partnership's progress on these tasks follows.

Partnership By-Laws: In the spring of 2004, the Partnership's Policies and Procedures Work Group developed by-laws. The by-laws were officially finalized and adopted by the entire Partnership September 17, 2004. Since then, minor revisions have been adopted, as needed, for clarity, consistency, and compliance with *Robert's Rules of Order Newly Revised*, which the Partnership adopted as its guide for rules of order. A copy of the Partnership's by-laws is available on the Partnership's website accessible via www.prevnet.org.

Statewide Plan for Substance Abuse Prevention System Improvement: To date, the focus of the Partnership has been advising West Virginia's implementation of its SPF SIG, which is described in detail on page eight of this report. Since its inception in 2004, however, members of the Partnership have expressed their commitment to long-term substance abuse prevention planning and collaboration. In fact, the

Partnership has already established a Comprehensive Plan Work Group to develop a statewide plan beyond the scope of the SPF SIG. It should be noted though, that West Virginia's SPF SIG implementation plan itself is a significant step toward building the statewide infrastructure needed to implement a comprehensive statewide plan. A copy of West Virginia's SPF SIG implementation plan is available on the WV SPF SIG website accessible via www.prevnet.org.

Coordinated Planning with Other Interrelated Systems:

Prior to the formation of the Partnership, the only statewide entity that focused solely on substance abuse prevention in West Virginia was the coordinating council CREATE, which stands for Coordination of Rehabilitation, Education, Awareness, Treatment, and Enforcement for a Drug-Free West Virginia. CREATE was formed in 1987 in response to the Anti-Drug Abuse Act of 1986 requirement that state agencies receiving federal funds from the act coordinate efforts. The group has met regularly and voluntarily since that time and has developed operating goals that are consistent with SPF SIG goals. When the Partnership was created, the same entities represented on CREATE became the core membership of the Partnership. This immediately brought to the Partnership considerable experience and a long history of coordination.

In addition, the entities represented on the Partnership have developed many new relationships resulting in coordination such as: information, data, training and technical assistance sharing and Partners including other Partners in their entity's planning initiatives.

One specific example of coordination is West Virginia's obtainment of a competitive grant from the U.S. Department of Education. The West Virginia Department of Education – Office of Healthy Schools, the West Virginia Division of Criminal Justice Services, and the West Virginia Prevention Resource Center endorsed a Memorandum of Understanding to collaborate on the competitive grant, which is a part of part of the federal initiative: *Grants to States to Improve Management of Drug and Violence Prevention Programs*.

West Virginia was awarded the grant in 2005. The collaborating agencies set forth five broad goals for the project: (1) Minimize duplication of effort, staff time commitment, and lost instructional time for students by integrating research protocols and procedures for administering multiple distinct but special focus student surveys and assessments. (2) Establish protocols and procedures to ensure consistent reporting of offenses (i.e., truancy rates, frequency, seriousness, and incidence of violence and substance abuse related offenses) in compliance with the FBI UCR/IBRS crime reporting system. These offenses are reported through the technology-based West Virginia Education Information System (WVEIS). (3) Designate 8 Regional Tobacco Prevention Specialists to serve as the primary persons responsible for implementing protocols and procedures for systematic administration of student surveys and consistent reporting of offenses in their regions. These regional designees will recruit and mentor county level school staff to assume that responsibility in their own counties. (4) Build the capacity of school administrators, Safe and Drug-Free School Coordinators, Safe and Drug-Free School Community Project Directors, and other school and community prevention service providers in data-driven decision making in regard to selecting evidence-based programs, practices, and policies in accordance with the U.S. Department of Education's Principles of Effectiveness. (5) Develop a *Community Information Management and Evaluation System (CIMES)* to be a neutral website at which data from student surveys and selected indicators from WVEIS will be aggregated with other population-based indicators from various federal and state agencies. Modular in nature, the CIMES will serve as a "one-stop" needs assessment, planning, grants application/ management, and evaluation resource for school-based and community-based substance abuse and violence prevention programs. West Virginia's DOE grant is for three years. All activities for year one were completed before the end of the first grant year cycle, and year two activities are currently in progress.

Another specific example of coordination is the multi-agency support of West Virginia's underage drinking prevention

initiative, which is housed at the West Virginia Prevention Resource Center. The West Virginia Division of Criminal Justice Services provides federal *Enforcing the Underage Drinking Laws* grant funds. The West Virginia Division on Alcoholism and Drug Abuse provides federal *Substance Abuse Prevention & Treatment Block Grant* funds. The Governor's Office provides federal *Strategic Prevention Framework State Incentive Grant* funds. And, West Virginia Governor's Highway Safety Program also contributes funding for this initiative. These entities are also represented on the Partnerships' Underage Drinking Prevention Work Group, which serves as the underage drinking prevention initiative's planning and evaluation committee. Other entities represented on this work group/committee include: Community Connections Inc., the Kanawha Coalition for Community Health Improvement, Mothers Against Drunk Driving, Students Against Destructive Decisions (SADD), the West Virginia Alcohol Beverage Control Administration, and the West Virginia Department of Education's Safe and Drug Free Schools initiative.

Priority Setting for Substance Abuse Prevention System

Improvement: A goal of the Partnership's Comprehensive Plan Work Group is to propose priorities for substance abuse prevention system improvement.

Funding Identification & Leveraging to Fill Prevention and Intervention Services Needs & Gaps:

Another goal of the Partnerships' Comprehensive Plan Work Group is to propose recommendations for more comprehensive funding to strengthen substance abuse prevention in West Virginia.

In the meantime, the Partnership's Intervention Work Group has developed a program model for West Virginia that addresses youth ages 11-17 who are in the beginning stages of substance abuse and may be exhibiting other problem behaviors. Participants will be referred to the program from the juvenile justice system, the West Virginia Department of Health and Human Resources' Bureau for Children and Families, the local school system, teen courts, and direct

service providers. The program will require the participation of parents, guardians or a responsible adult. Program elements are based largely on Kentucky's Early Intervention System, which has proven effective in addressing adolescent substance abusers. The West Virginia program will consist of an initial screening assessment, a 3-hour impact training session for the youth and parent(s), a 16-hour intensive prevention curriculum for the youth designed to elicit attitude and behavioral changes, referral to appropriate direct service providers, and follow-up contacts. An evaluation is planned to determine the effectiveness of the program. The Intervention Work Group has proposed the implementation of pilot projects in four areas of the state. Mercer County has been selected as the initial demonstration site. Other preliminary demonstration sites for this program include: Logan, Upshur, and Brooke or Ohio counties. Funding for the pilot phase of the Early Intervention Program is being sought from a variety of public and private sources.

Additional Grant Inquires:

In addition to West Virginia's U.S. Department of Education grant described on page 2, the West Virginia Division of Alcoholism and Drug Abuse, a member agency of the Partnership, made application for a federal methamphetamine prevention grant in which it primarily proposed prevention systems development and capacity building at both the Partnership and local county level to improve our ability to respond to the methamphetamine threat.

Other Non-Executive Order Mandated

Activities/Accomplishments

WV SPF SIG Prevention Planning Grant

Recommendations: In the winter of 2005/2006, the Partnership submitted to the Governor recommendations for awarding WV SPF SIG Prevention Planning Grants.

Assessment of Substance Abuse Problem: Since its inception, the Partnership's Epidemiological Work Group has compiled, reviewed, and analyzed data from available state and federal

archival databases. The data are now available in the form of substance abuse indicator profiles at www.prevnet.org.

WV SPF SIG Prevention Implementation Grant Administration Development: Throughout 2006, the Partnership advised the West Virginia Prevention Resource Center in developing processes for administering SPF SIG sub-grants for community-based prevention and intervention implementation.

WV SPF SIG MOU: In 2006, the Partnership's Policies & Procedures Work Group developed, and the entire Partnership approved, a Memorandum of Understanding that outlined and clarified the roles and responsibilities of all of the entities in West Virginia responsible for the state's SPF SIG. A copy of this MOU is attached. A summary of the WV SPF SIG responsible parties is included on page eight of this report.

Partnership Meetings & Communication: The Partnership has been meeting approximately five times a year since 2004. These quarterly meetings include: updates from West Virginia Prevention Resource Center SPF SIG staff, updates from Partnership workgroups, small group discussion (groups comprise Partners, staff, and guests), and other traditional meeting items (group discussion, voting, setting the next meeting agenda). Sub-sets of the Partnership also meet several times a year as workgroups. A complete listing and notes from all Partnership and work group meetings is available on the Partnership website.

Other Partnership Communication: In addition to meetings, the Partnership has several tools to facilitate communication among members. One of these is a listserv (wvpartnership-list@marshall.edu), which includes and can be used by all

Partners and select West Virginia Prevention Resource Center SPF SIG staff. Another Partnership communication tool is its website, which is available via www.prevnet.org. The Partnership website houses documentation of all of the Partnership's regular, special, and workgroup meetings as well as some other documents including the Partnership's Executive Order, By-Laws, and the WV SPF SIG Memorandum of Understanding. The website allows current and new Partners, as well as the public, access to more specific information about the Partnership's purpose, scope, and expectations. Two more Partnership communication tools include *West Virginia's Online Prevention Contact Directory* and *West Virginia's Online Prevention Training & Events Calendar*. Both tools are available to the public via www.prevnet.org. Although the tools themselves are maintained by West Virginia Prevention Resource Center staff, both include information about the Partnership. The contact directory includes public contact information for all members, and the calendar features postings for all Partnership meetings.

PARTNERSHIP RECOMMENDATIONS TO THE GOVERNOR

In February 2007, the Partnership will submit to the Governor its recommendations for awarding WV SPF SIG Year 1 Prevention Implementation Grants.

PARTNERSHIP MEMBERS

According to *Executive Order No. 8-04*: “*The Partnership shall be appointed by the Governor and composed of not less than 24 members who shall serve at the will and pleasure of the Governor.*” As of January 2006, the Partnership comprised the following individuals:

Jean Ambrose	WV Commission for National & Community Service
Joseph Barker	WV DHHR: Office of Epidemiology & Health Promotion
Jason Carlson	WV MAPS: Division of Criminal Justice Services
Don Chapman	WV DOE: Office of Healthy Schools
Judy Crabtree	Kanawha Coalition for Community Health Improvement
Karen Eskew	WV Library Commission: RADAR Clearinghouse
Michelle Foster	Kanawha Institute for Social Research & Action, Inc.
Andrew Gillette	College Student
Sue Hage	WV DHHR, Bureau for Children & Families
Dave Harris	Westover Police Department (Prevention Resource Officer at Westwood Middle School)
Steve Heasley	Private Consultant
Lew Holloway	Northern WV Rural Health Education Center
Dale Humphreys	WV MAPS: Division of Juvenile Services (<i>Appointment Letter Being Processed</i>)
Mike Lacy (Partnership Chair)	WV Supreme Court of Appeals: Probation Services Division
Helena Lee	WV MAPS: Division of Criminal Justice Services & CREATE
Gayle Manchin	First Lady of the State of WV
Steve Mason (Partnership Co-Chair)	WV DHHR: Division on Alcoholism & Drug Abuse
Bob Musick	Valley Health Care System & WV Council for the Prevention of Suicide
Gig Robinson	WV Alcohol Beverage Control Administration
Judith Russell	Community At Large
Angela Saunders	WV Supreme Court of Appeals: Courts Services Division
Denise Smith	WV DHHR: Adolescent Pregnancy Prevention Initiative
Brenda Thompson	WV House of Delegates: Committee on Government Organization (Legal Counsel)
Bill Woodrum	WV State University Extension

Ex Officio Members

- Keith Adkins - U.S. Drug Enforcement Administration
- Neal Holton, Central Center for the Application of Prevention Technologies
- Karen Salem - U.S. Center for Substance Abuse Prevention
- 4 Liaisons to County Prevention Partnerships (To Be Recruited in 2007)

Vacancies To Be Filled in 2007

- High School Youth Representative
- Other Youth Representative
- Faith-Based Initiative Representative

WEST VIRGINIA SUBSTANCE ABUSE OVERVIEW

In addition to the substance abuse indicator profile referred to in the *Assessment of Substance Abuse Problem* section above, West Virginia's Epidemiological Workgroup also is examining substance abuse by comparing the state's status relative to the *West Virginia Healthy People 2010 Chapter 26—Substance Abuse* in which eleven objectives were specified. One of these objectives, having to do with maximum blood alcohol concentration levels from 1.0% to 0.08%, was addressed in the 2004 West Virginia Legislature with the passage of W.Va. State Code §17C-5-2. Data are available on nine of the remaining objectives, and they indicate that West Virginia has shown improvement on four objectives since baseline was established. West Virginia has already met its target on the percentage of youth never having tried marijuana. Furthermore, if the current trend continues West Virginia will exceed its target of lowering the age-adjusted rate of cirrhosis related mortality to below 7.5 per 100,000. Other objectives on which West Virginia is making progress include the percentage of youth never having tried alcohol and the percentage of youth having ridden with a driver who had been drinking. If current trends on these objectives continue, West Virginia will fall short of, but will have made substantial progress toward reaching, specified targets by 2010.

There are four other important objectives on which more attention may be needed to achieve the HP 2010 objectives. Among them are the percentage of youth who have never tried cocaine, which has continued to drop since the high of 95% in 1993. West Virginia also appears to be losing ground on the deaths and injuries caused by alcohol-related motor vehicle crashes, and heavier and binge drinking among adults, all of which continue to grow based on projections. Finally, there is one objective, adults 18 and older who reported driving "after having had perhaps too much to drink," for which there are too few data to make a judgment. The most recent estimate on this objective is from 2002, which suggested an increasing trend in this behavior. However, data scheduled to be collected in 2006 should clarify the current status.

SELECT SUBSTANCE ABUSE STATISTICS

Please refer to the *WV SPF SIG Implementation Plan Phase 2* for additional details and context. These statistics are relative to selected Healthy People 2010 objectives.

- 25.9% of West Virginia's high school-aged youth have never tried **alcohol** (2005).
- 61.3% of West Virginia's high school-aged youth have never tried **marijuana** (2005).
- 88.7% of West Virginia's high school-aged youth have never tried **cocaine** (2005).
- 35% of traffic fatalities in West Virginia are caused by **alcohol-related motor vehicle crashes** (2004).
- 217 people died due to **cirrhosis of the liver** in 2004.
- 24.8% of adolescents report that during the previous 30 days they have ridden with a driver who had been drinking alcohol (2005).
- 1.5% of adults 18 and older report driving "after having had perhaps too much to drink" at least once during the past month (2002).
- 3.1% of adults 18 and older report **heavy drinking** (drinking 60 or more drinks per month).
- 9.1% of adults 18 and older report **binge drinking** (5 or more drinks on any one occasion in the past month).
- 26.7% of adults and 27.8% of youth (grades 9-12) report using cigarettes or **smoking** in the previous month (2005).
- 26.8% of pregnant women report using cigarettes (2004).
- Illegal **youth tobacco buy rate** increased from a low of 10% in 2002 to 16% in 2006.

WEST VIRGINIA PREVENTION SYSTEM OVERVIEW

For the past decade, West Virginia has been developing a prevention system to make a sustainable impact on reducing problem behaviors (specifically substance abuse) in the Mountain State. Essentially, West Virginia's prevention system is a **capacity building infrastructure** that focuses on providing support to communities so they can address their own problems. The system additionally encourages coordination at the state level.

West Virginia's prevention system is predominately funded with prevention set-aside dollars from the federal Substance Abuse Prevention and Treatment (SAPT) Block Grant. It is also supported in part by a federal Strategic Prevention Framework State Incentive Grant (SPF SIG).

West Virginia has two state level entities that guide its prevention system: **The West Virginia Partnership to Promote Community Well-Being** and the **West Virginia Division on Alcoholism and Drug Abuse**. The Partnership is described in detail throughout this report. The Division on Alcoholism and Drug Abuse (DADA) is located within the West Virginia Department of Health and Human Resources. It oversees the statewide provision of substance abuse prevention, intervention, and treatment services to adults, adolescents, and children. The DADA is the recipient of West Virginia federal SAPT Block Grant. Twenty percent of the grant must be designated for prevention. The DADA uses the prevention set-aside to contract with the several entities that carry out prevention activities. The entities include: the West Virginia Prevention Resource Center (WVPRC), Community Connections Inc. (CCI), and the West Virginia Library Commission.

The backbone of West Virginia's prevention system is a regional network of **Community Development Specialists** (CDS). Managed by the WVPRC, the 16 CDSs are trained prevention professionals who live and work locally throughout West Virginia's 55 counties. They work in teams of four with each team responsible for approximately 12 to 16 counties in four different regions in the state. A CDS's job is to work

collaboratively with grassroots community organizations and individuals, providing technical assistance specifically in the

area of substance abuse prevention within a risk and protective framework, while stressing assets. Responsibilities include assessing community strengths and weaknesses, helping communities with strategic planning, team building, formulating goals and objectives, grant writing, coalition building, and developing and implementing evidence-based programs, practices and policies. CDS also assist communities in using evaluation to improve their efforts.

In addition to the network of Community Development Specialists, the **West Virginia Prevention Resource Center** maintains other specialized teams who support the CDS, as well as other individuals, organizations, and agencies in the form of information dissemination, networking and collaboration, facilitated learning and training, and evaluation activities.

Community Connections Inc. is Mercer County's Family Resource Network. It coordinates the **West Virginia Teen Court Association** and the **West Virginia Community Anti-Drug Coalitions of America (CADCA) Association**. The Teen Court Association works to link new and existing programs together to help share information and collect data on how to effectively deliver justice to first time misdemeanor offenders in local communities. Coalitions for a Better WV is West Virginia's CACDA Association. Additional information about CCI and these two statewide associations is available at www.homestead.com/ccifrn/home.html.

The West Virginia Library Commission manages West Virginia's **RADAR Clearinghouse**, which offers to the public free materials including brochures, pamphlets, curricula, posters, research monographs and more. Additional information about West Virginia's RADAR Clearinghouse is available at librarycommission.lib.wv.us/radarandtobacco/.

Now, because of WV's SPF SIG, West Virginia's prevention system additionally includes several new capacity building components: **county-level planning and implementation**

grants, regional learning opportunities, and county prevention partnerships. All of these are described in more detail in the WV SPF SIG Overview section of this report.

WV SPF SIG OVERVIEW

In 2004, West Virginia* was awarded a **more than 11 million dollar federal grant for community-based prevention.** The five-year Strategic Prevention Framework State Incentive Grant (SPF SIG) is intended to build prevention capacity and infrastructure at the state and local levels; prevent the onset and reduce the progress of substance abuse including childhood and underage drinking; and reduce substance abuse and substance abuse-related problems in communities. The SPF SIG is authorized under section 516 of the Public Health Service Act and administered by the U.S. Center U.S. Department of Health & Human Services' Substance Abuse and Mental Health Administration's (SAMHSA) Center for Substance Abuse Prevention (CSAP).

Most of WV's SPF SIG funding is being re-awarded to support local sub-grantee prevention activity planning and implementation. Early in 2006, **prevention planning grants** were awarded to entities in each of the 53 counties that applied. Since then, counties have attended **Regional Learning Opportunities** and developed their **County Prevention Partnerships** and county-wide prevention plans.

In the meantime, The West Virginia Partnership to Promote Community Well-Being developed a data-driven process/plan for distributing **prevention implementation grants** in West Virginia. This process is best described as a "highest need" planning model. Counties of highest need with regard to problems associated with substance abuse were identified with a Substance Abuse Well-Being Index (SAWBI). The SAWBI was developed from a comprehensive repository of epidemiological indicators including substance abuse consumption and consequence data.

In December 2006, WV's SPF SIG Strategic Implementation Plan Phase 2 was approved by the federal Center for Substance Abuse Prevention (CSAP). The Partnership then

invited 27 West Virginia counties, identified by the Substance Abuse Well-Being Index as being high need, to apply for prevention implementation grants. The applications are due January 17, 2007 by 12:00 pm. In late January/early February 2007, The West Virginia Partnership to Promote Community Well-Being Sub-Granting Workgroup will make WV SPF SIG Prevention Implementation Grants funding recommendations to West Virginia Governor Joe Manchin. The Governor will officially award the grants late in February, and the grant cycle will officially begin March 1, 2007.

Additional information about WV's SPF SIG implementation is available at www.prevnet.org.

***Entities Responsible for**

WV's Implementation of its SPF SIG

- The **WV Governor's Office** is the official recipient of WV's SPF SIG.
- The Governor has chosen the **WV Division of Criminal Justice Services (WV DCJS)** to fiscally administer SPF SIG sub-grants to counties.
- The Governor has also contracted with the **WV Prevention Resource Center (WVPRC)** to coordinate the implementation of the SPF SIG in the form of planning, grant administration, training, technical assistance, monitoring and evaluation.
- **WV's Partnership to Promote Community Well-Being (The Partnership)** advises the WVPRC as it plans and implements the SPF SIG, and it advises the Governor regarding the SPF SIG sub-grants to counties.
- WV's primary source of funding for substance abuse prevention comes from a federal Substance Abuse Prevention & Treatment Block Grant, which is granted to a single state agency (SSA) in each state. Twenty percent of this grant must be designated for prevention. WV's SSA is the **WV Division on Alcoholism & Drug Abuse (WV DADA)**. The DADA sub contracts with the WVPRC to facilitate the State's substance abuse prevention system and has a representative on the Partnership.