

COUNTY OF LOS ANGELES
Public Health

## SAPC Prevention Provider Orientation 2022-2023 Fiscal Year Day 3

Substance Abuse Prevention & Control Prevention Services Community & Youth Engagement



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## Today's Agenda

- Data Driven Programming
- Practical Applications of SPF
- Example: Local Prevention Initiative
- Q&A



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## **Data Driven Programming**



#### Alcohol Use and Harms Increase, both Nationally and Locally

- Pre-pandemic, alcohol related harms were already on the rise in LAC.
- During the pandemic
  - 60% increase of alcohol use<sup>1</sup>
  - 41% increase of heavy drinking among women<sup>2</sup>
  - 54% increase in alcohol sales, 262% online<sup>3</sup>
  - Locally, there has been increases in alcohol related morbidity & mortality
    - 30% increase in alcoholic liver disease admissions at major hospital<sup>4</sup>
    - Alcohol related deaths increased by 63.6% during the pandemic<sup>5</sup>

- 2. https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2770975
- 3. https://www.nielsen.com/us/en/insights/article/2020/rebalancing-the-covid-19-effect-on-alcohol-sales/
- 4. <u>https://www.latimes.com/california/story/2021-02-08/alcohol-abuse-pandemic-hospitals-liver-disease</u>
- 5. http://publichealth.lacounty.gov/sapc/MDU/SpecialReport/AccidentalDrugOverdoseReportJuly2021V2.0.pdf



Grossman, E. R., Benjamin-Neelon, S. E., & Sonnenschein, S. (2020). Alcohol consumption during the COVID-19 pandemic: A crosssectional survey of us adults. International Journal of Environmental Research and Public Health, 17(24), 9189. <u>https://doi.org/10.3390/ijerph17249189</u>



#### Trends in Marijuana Use and Perception, Los Angeles County



- Marijuana use continues to increase in Los Angeles County during the pandemic.

\*Los Angeles County Health Survey, 2018

\*\*Los Angeles County, Community Needs Assessment, 2017



#### Prescription Drug Use and Overdose Deaths - LAC, 2019 and 2020

	2019 (Mar. to Dec.)		2020 ( Mar. to Dec.)		Rate Change from 2019 to 2020	
Drug Category	Number	Rate	Number	Rate	Absolute Change	Relative Change
Opioids	714	6.7	1323	12.4	5.7	85.50%
Heroin	296	2.8	402	3.7	1.0	34.20%
Fentanyl	423	4.0	1001	9.5	5.5	136.40%
Rx Opioids (Excluding Fentanyl)	210	1.9	222	2.0	0.0	2.10%
Other Opioids	3	0.0	3	0.0	0.0	0.00%
Sedatives	92	0.9	194	1.9	1.0	108.70%
Benzodiazepines	78	0.8	172	1.7	0.9	116.40%
Other Sedative	14	0.1	22	0.2	0.0	41.90%
Stimulants	948	8.6	1519	13.9	5.3	61.30%
Cocaine	332	3.0	446	4.0	1.0	33.70%
Methamphetamine	689	6.3	1220	11.2	4.9	78.70%
Rx Stimulants	14	0.1	10	0.1	0.0	4.80%

Data Source: http://publichealth.lacounty.gov/sapc/MDU/SpecialReport/AccidentalDrugOverdoseReportJuly2021V2.0.pdf



#### Meth is Involved\* in More Deaths in LAC than Any Other Drug, 2010-2019

Number of Toxicology Cases with Drugs Detected Los Angeles County Medical Examiner 2010 – 2019



\*Data reflects cases for which toxicology tests were (+) for at least one tested substance (e.g., not necessarily drugrelated or drug-caused deaths). Each case may have more than one drug detected.

National Drug Early Warning System. Los Angeles County Sentinel Community Site (SCS) Drug Use Patterns and Trends, 2020

https://www.drugabuse.gov/drug-topics/trends-statistics/national-drug-early-warning-system-ndews



## What is Data Driven Programming?

- Data driven decision making
- Identifying trends (getting better or worse)
- Identifying contributing factors
- Choosing evidence-base programs (or research based innovative programs) that fit your community.





## **Use Data Throughout the Entire Process**

- Formative Research
  - Needs Assessment
  - Reaching your Community
- Coordination for Greatest Collective Impact





## **Use Data Throughout the Entire Process cont.**

- Process Evaluation
- Outcome Evaluation
- Impact Evaluation





## Strategic Prevention Framework: Review and Practical Applications



## **STRATEGIC PREVENTION FRAMEWORK (SPF)**

Evaluation: Is my plan succeeding?

Implementation: How can I put my plan into action?



Assessment: What is the problem and how can I learn more?

> Capacity: What do I have to work with?

Planning: What should I do and how should I do it?



#### Why the Strategic Prevention Framework

In the early 90's, the Substance and Mental Health Service Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP), funded community partnership grants to address local substance abuse problems.

Although these were successful in helping communities build effective coalitions, the coalitions **did not always select effective strategies and practices...** 



#### WHY THE STRATEGIC PREVENTION FRAMEWORK?

In the late 1990's, a push began toward using model programs and practices that met a certain threshold of evidence.

Unfortunately, people tended to pick their favorite programs without linking them to the needs of their communities.

As a result, many of these programs failed to produce the outcomes they'd produced in their original research settings....



From this experience, CSAP determined there was a need to bring the two together to emphasize **best practices embedded in the context of community**.

To meet that need, CSAP developed the Strategic Prevention Framework as a **roadmap to help communities** do just that.





## WHY A ROADMAP?

A common mistake made by organizations or coalitions is starting to select strategies and/or programs before **defining the problem and identifying what needs to change**.

Choosing strategies or programs without a clear understanding of the problem limits the results to only those achievable by the specific strategy or program.

Community Anti Drug Coalitions of America (CADCA)



#### First things first.....

"The Strategic Prevention Framework (SPF) is a 5-Step Process to help identify AOD issues, and how to best address those issues by walking a community though **Assessment, Capacity Building, Planning, Implementation, and Evaluation** while weaving **Cultural Competency and Sustainability** in each step."

Source: Alcohol Policy Resource Center, SPF Resource Guide

### **Practical Applications of SPF:**



- 1. Data Driven Planning;
  - Examining data to identify the most prevalent substance use issues in our local communities;
- 2. Building the capacity of our staff and community to **engage in a strategic planning process**;
  - Developing Logic models based on local data;
- 3. Developing work plans based on priorities and strategies identified in our **logic model**;
- 4. Fidelity to the strategy and approaches;
- 5. Measuring process and Outcomes...

Each contract needs to address all **4 priority substances**, but your **primary focus may be on the 2 most relevant substances in your community**.



## **Problem Analysis**

#### Root Cause (But Why?) Local Conditions (But Why Here?)

#### Components:

- 1. Problem (What)
- 2. Root Causes / Risk Factors
- 3. Local Conditions (BUT WHY HERE?)
  - Specific
  - Identifiable
  - Actionable









## Key Points of a logic model....



- This is a process. Logic models should change and evolve as our communities change and evolve.
- If you are doing something that is not directly related to your logic model, change the logic model or change what you are doing!



## Logic Model

## Logic Models help Coalitions do Better

- Align strategies with intended outcomes
- Set priorities
- Allocate resources
- Create an outcome evaluation
- Interpret evaluation results

#### Logic Model / Theory of Change







## LOCAL PREVETION INITIVES WITHIN STRATEGIC PREVENTION FRAMEWORK

A FRAMEWORK FOR COLLECTIVE ACTION:

#### LET'S MAKE A DIFFERENCE AND THE ALCOHOL DELIVERY PROJECT



Prevention Organizations, Coalitions and Communities can achieve effective outcome-based prevention through the **SPF!** 

#### **RX PREVENTION INITIATIVE**



# LET'S MAKE A DIFFERENCE

"Together we can stop the opioid and prescription drug epidemic"

County Goal 4: Decrease prescription drug misuse or abuse among youth and adults.

When it comes to preventing the potential harms associated with prescription drug misuse or abuse, we can all take:



 SAFE STORAGE KEEP RX MEDICATIONS SECURE AND OUT OF REACH. HOME, IS MOST OFTEN, THE NUMBER ONE SOURCE OF ACCESS TO RX MEDICATIONS FOR TEENS!
 NOT SHARING NEVER SHARE RX MEDICATIONS! SHARING RX MEDICATIONS CAN LEAD TO MISUSE & ABUSE, OR EVEN AN OVERDOSE!
 SAFE DISPOSAL PROPERLY DISPOSE OF ALL RX MEDICATIONS. DISPOSING OF UNUSED OR EXPIRED RX MEDICATIONS WILL REDUCE THE RISK OF N

Developed by the San Fernando Valley Partnership, with funds from the Los Angeles County Department of Public Health, Substance Abuse Prevention and Control



## **Rx/OPIOID PREVENTION PROJECT**

#### Defining the Rx Problem in SPA-2

- Opioids most commonly misused Rx Medication;
- 60% Of survey respondents reported misusing Rx Meds at home

2017 SAPC Community Needs Assessment

#### Identifying Root-Cause and Contributing Factors

- 57% Report easy access to Rx meds at home;
- Get Rx medications from friends or family

2017 SAPC Community Needs Assessment

#### Evidence-Based Strategies to Address Root-Cause

- Information Dissemination
- Prevention Education
- Environmental Strategies

#### MOVING FROM PROBLEM TO STRATEGIES THAT LEAD TO CHANGE (Measurable Outcomes)



#### **STRATEGIC PREVENTION FRAMEWORK (SPF)**



Assessment: What is the problem and how can I learn more?

- Understanding the AOD community environment;
- The "What," The 'Where," and the "Who"



#### Assessment The first step is conducting an assessment by profiling your community and its resources. Data collected in this step will close the knowledge gap when trying to understand the factors that contribute to substance use.

**Document** local AOD risk environments using *several methods* to create *reliable and valid statements* about local risk settings using **Scientific, Timely, Accessible, and Relevant Data**.

You can also **identify prospective partners** through the assessment process.



#### Assessment methods above and beyond New and Existing Data:

#### **Qualitative**

#### (What does it mean? – depth of knowledge)

- One-on-Ones
- Focus Groups
- Key Informant Interviews
- Listening Sessions
- Observations

#### **Environmental Scanning**

(Includes both quantitative and qualitative data)



## **Functions of a Community Assessment**

- 1. Establish Priorities
- 2. Diagnose Root Causes
- 3. Locate Resources for Action
- 4. Name and Frame Priority Issues
- 5. Determine Your Strategic Role





### **Identifying Root Causes & Contributing Factors**



**Promotion and Price of AOD** 

Parental Attitudes Favorable Toward Use/Sharing



#### **Driving Assumptions About Rx Misuse/Abuse**

Opioids and Rx Medications are easy to obtain, especially from home, and from friends & family. Since teens believe that Rx medications are safer than illicit drugs, they are more likely to misuse or abuse Opioids or Rx medications that can easily be obtained.

# **Certain Contributing Factors have been found to be more salient to prescription drugs:**

- Availability (Amount of Rx Medications present in our community)
- Easy Access (Effort required for a person to acquire Rx Meds.)
- Low Perceptions Harm/Risk
- Attitudes and Beliefs about Sharing



## Data Driven Rx Misuse/Abuse Effort

2017 SAPC Community Needs Assessment

- 55% of those who misused/abused Rx medications, used opioids;
- Home is a major source of access to Rx medications; and
- Those who abuse/misuse Opioids/Rx medications get them from friends or family



Notes: Only those who had ever misused prescription medication were asked this question. Easy Access includes response options "Very Easy" and "Somewhat Easy.



## **PROBLEM STATEMENT**

A problem statement will help you focus on where to build capacity, how to measure outcomes and how to plan for sustainability. Interventions without a clearly articulated problem statement may lose steam over time—and it's also difficult to know whether any progress has been made toward the identified issue(s).

Communities should use their data about consumption, consequences, readiness, and resources to frame their problem statement in specific terms.



In Los Angeles County (LAC) in 2018-2020, 3.7% of individuals aged 12 or older misused/abused prescription (Rx) pain relievers (primarily opioids) in the past year. The SAPC Community Needs Assessment also found that those who misused Rx medications said that they were easy to get in their community.

LAC had higher rates of Rx pain reliever misuse/abuse among youth (2.8%) and young adults (5.6%) compared to California (youth 2.5%, young adults 4.9%) and US (youth 2.2%, young adults 4.9%) in 2018-2020.

#### **SAPC Data Brief 2022**





# Where is the AOD problem happening?

Retail Setting/Location [] Public Setting/Location [] Social Setting/Location [X]

#### **Describe Setting/Location:**

According to the SAPC, CNA, **home , family and friends** provide easy access to Rx medications. Additionally, lax attitudes about sharing Rx medications also contributes to **social access**.

#### 27% of 12-17 year old's reported obtaining Rx medications from home

Source: 2017 SAPC Community Needs Assessment


## **STRATEGIC PREVENTION FRAMEWORK (SPF)**



#### **Capacity:**

What do we need to know and who do we need?





# **Capacity Building**

The process of building your collective prevention knowledge, readiness and membership to engage in a strategic planning process that addresses the substance use prevention needs identified during the assessment phase.

Prevention planners need diverse partners — from neighborhood residents to service providers to community leaders — to share information and resources, raise awareness about critical substance misuse problems, build support for prevention, and ensure that prevention efforts include multiple strategies in multiple settings.

#### **Building Capacity**



## **Preventing Prescription Drug Misuse: Overview of Factors and Strategies**

Substance Abuse and Mental Health Services Administration's Center for the Application of Prevention Technologies task order. Reference #HHSS283201200024I/HHSS28342002T. Updated May 2016.

Given that **opioids are among the most misused prescription drugs**<sup>1</sup>, many of the educational strategies specifically focus on opioid misuse. **Because most misused opioids derive from social sources** (e.g., obtaining from family or friends<sup>2</sup>), **educational strategies have focused - with success - on reducing this kind of access**.

#### INCREASING DISAPROVAL OF SHARING OPIOIDS AND OTHER RX MEDICATIONS

A widespread campaign implemented in Utah demonstrated that those who **saw messages that discourage sharing were less likely to share their prescription drugs and less likely to use prescription drugs that were not prescribed to them**.<sup>3</sup>

1. Zosel, Bartelson, Bailey, Lowenstein, & Dart, 2013 | 2. Substance Abuse and Mental Health Services Administration, 2014 | 3. Collins, Abadi, Johnson, Shamblen, & Thompson, 2011

## **CADCA** Strategies



- **1.Change policies and rules**
- 2.Alter the physical design of the environment
- **3.Change consequences/incentives**
- **4.Reduce barriers/enhance access**
- 5.Build skills
- **6.Provide support**
- 7. Provide information



## **STRATEGIC PREVENTION FRAMEWORK (SPF)**







#### To develop a solid prevention plan, planners need to:

- Prioritize the risk and protective factors associated with the substance misuse problems that have been identified (*Assessment*);
- Select appropriate strategies and practices to address each priority identified;
- Combine strategies and approaches to ensure a comprehensive approach;
- Build and share a logic model with stakeholders/coalition.



## **APPROPRIATE STRATEGIES**

Sometimes people want to select prevention strategies or approaches that are popular, that worked well in a different community, or those with which they are familiar/comfortable with. These are not necessarily the best selection criteria.

What is more important, is that the strategy or approach effectively address the priority substance misuse problem, the associated risk & protective factors, and is a good fit for the specific community.

## **Key Considerations**



Social Norms	What are the "unwritten rules" as to what types of AOD behaviors are considered acceptable? How are these norms communicated to community members, especially to young people?
Access and Availability	<ul> <li>How easy is it to obtain alcohol and other drugs? Where and how do youth and other community members obtain these substances?</li> <li>The amount of alcohol and other drugs physically present in our target communities?</li> </ul>
Policy and Enforcement	What policies in the public and private sector either encourage or discourage AOD use? How well are these policies publicized and/or enforced?
Media Messages	What kinds of messages and images regarding AOD use are youth and adults exposed to through advertising, entertainment and other media activities? How widespread is alcohol and other drug advertising in the community?



## What is the change that you would like to see?

(Describe the ultimate result that you will be working towards):

#### Leveraging agency efforts that support a collective Rx prevention effort to:

- Raises awareness about the dangers of Rx medications, specifically opioids and other potentially dangerous medications (Increased Perception of Harm);
- Improve safe storage/safe disposal practices and minimize/eliminate the sharing of Rx medications (Safe Home Environment and behaviors change); and
- Support the full implementation of SB212 to increase access to safe disposal sites across the county. (Policy)

Efforts will seek to institutionalize safe storage/safe disposal practices and change attitudes about sharing medication leading to a significant reduction in access to Rx medications in homes or community.



## **Comprehensive Strategies**



### Criteria for Selecting Strategies (Based on Problem Statement)

- **1. Fit** with local conditions / addresses disparities;
- 2. Capacity to implement;
- 3. Evidence of effectiveness; an
- 4. Part of a comprehensive plan



# **Choosing Strategies:**

#### **Raise Awareness:**

 Informing community that there is an Rx problem in our community (i.e., is your medication an opioid, are your teens accessing your medications);

#### **Education:**

 Providing information about the scope of the problem and dangers associated with Rx/Opioid misuse;

#### **Specific Information that changes behaviors:**

- Safe Medication practices;
- Not sharing medications

#### **Polices and Practices that Reduce Access and Availability**







HAVE YOU SIGNEN DROP OFF YOUR SIGNED PLEDGE HER Elledge **1** Safe Storage **2** Not Sharing **8 Safe Disposal** SUBSTRNCE ABUSE SERVICE HELPLINE **1.844.804.7500** 

The Rx Prevention Initiative revolves around the "Let's Make a Difference" campaign, a community-level prevention initiative that promotes three core "safe medication practices" to address the misuse and abuse of opioids and prescription medications.

The campaign works to communicate the importance of reducing home access to opioids and Rx medications via **Safe Storage and Safe Disposal practices, while also reducing the number of individuals who report sharing their medications**.

## DEVELOPMENT OF THE "LET'S MAKE A DIFFERENCE" CAMPAIGN

#### **CIA Rx Safety Webinar Series**



When it comes to preventing the potential harms associated with prescription drug misuse or abuse, we can all take:

En muni

safe from







#### LET'S MAKE A DIFFERENCE CAMPAIGN KIT



## **STRATEGIC PREVENTION FRAMEWORK (SPF)**

Implementation: How can I put my plan into action?





# Implementation

In this step, a community's prevention plan is put into action by implementing evidence-based strategies and approached as intended.
To accomplish this task, planners will need to balance fidelity & adaptation, and stablish critical implementation supports .

#### To develop a solid prevention plan, planners need to:

- Prioritize the risk and protective factors associated with the substance misuse problems that have been identified (*Assessment*)
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# **STRATEGIC PREVENTION FRAMEWORK (SPF)**





# Evaluation In this step, a community's prevention plan is put into action by implementing evidence-based strategies and approached as intended. To accomplish this task, planners will need to balance fidelity and adaptation, and stablish critical implementation supports.

#### To develop a solid prevention plan, planners need to:

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# OUTCOMES **RX Misuse/Abuse**

"Addressing key contributing factors to the misuse/abuse of Opioids & Rx Medications"

- **1.** If, community members adopt safe medication practices;
- **2.** Then, Opioids and Rx medications will be less accessible;
- **3.** If, Opioids and Rx medications are less accessible;
- **4.** Then, less young people will misuse/abuse Opioids and Rx medications;
- **5.** If, less young people misuse/abuse Opioids and Rx medications;
- 6. Then, we will see a reduction in incidents related to Opioid and Rx Medication misuse and abuse. 55



## **OUTCOMES**

# **Documenting Process/Impact/Reach:**

- 1. Documenting the number of **participating pharmacies**, organizations, schools and/or other strategic partners;
- 2. Documenting number of pledge cards collected at participating locations;
- 3. Documenting an increase in the amount (lbs.) of Rx medications collected at DEA Take Back Events within the geographic area of the campaign; and
- Documenting (if possible) an increased utilization of LA County Safe Centers within the implementation area(s) and/or increase in the number of new Rx Drop Boxes & Sharps Disposal Boxes.

# **Documenting Impact**



- Surveys after each Rx Session will document increased knowledge about the dangers of Rx medications and how managing Rx medications can reduce Rx misuse/abuse;
- A Safe Home Pledge can document the number of community members, in a specific geographic area, who commit to not sharing Rx medications, and safely storing/disposing of their medications;
- Social media metrics can document effectiveness and reach of messaging;
- A Community Norms Assessment can document a shift in attitudes about Rx Safety and attitudes around Sharing Medications; and
- Policies/Ordinances/Efforts that result from the full implementation SB212 can document and increase in safe disposal sites/options.

