

**Community Coalition Partnership
Mid-Year and Final Report Form**

ACCOMPLISHMENT SUMMARY REPORT

This report is due to the Department of State Health Services (DSHS) no later than 15 days after the completion of the second and fourth quarters. This report form is divided into two sections. For the Mid- Year Report the contractor is only required to complete the Agency and Program Information and Section I of this report form. For the Final Report contractor will be required to complete the entire form (Agency and Program Information, and Sections I & II. See additional instructions after each section. Submit the completed report to DSHS at substance.abuse.contracts@dshs.state.tx.us by the required due date.

ORGANIZATION AND PROGRAM INFORMATION:

Report Date:	9/15/15		
	<input type="checkbox"/> Mid-Year Report <input checked="" type="checkbox"/> Final Report		
Coalition Name:	Community Alcohol and Substance Awareness Partnership (CASAP)		
	Region: VII		Fiscal Year: 2015
Organization Name:	Brazos Valley Council on Alcohol & Substance Abuse (BVCASA)		
Program Attachment #:	2014-044961		
Contact Name and Title:	William Roberts, Coalition Coordinator; Mary Mattingly, Director of Prevention Services		
Phone Number:	(979) 846-3560		
Email:	broberts@bvcasa.org ; mmattingly@bvcasa.org		

SECTION I.

Instructions: Complete Section I, carefully considering the CCP’s accomplishments and obstacles as they relate to each of the five Strategic Prevention Framework (SPF) steps. The numbering in each box is included for formatting purposes, but do not limit yourself to only two accomplishments and/or obstacles. If you are requesting feedback, discussion, or technical assistance, highlight the items to help identify the areas that your organization needs DSHS programmatic technical assistance. In addition, **attach separately** any finished products or documents (including media materials, marketing plans/campaigns, surveys, brochures, etc.) that accompany the strategies and activities you reference in this report. ***This section must be completed to reflect the activities that occurred during the first and second quarters for the Mid-Year Report. Final Report should reflect the activities conducted for the entire fiscal year.***

1. SPF Steps:

SPF Step 1: Population Needs, Resources, and Readiness to address needs and gaps	
Accomplishments	Obstacles
<ol style="list-style-type: none"> 1. Updated Needs Assessment, pinpointing needs of Brazos and Washington county residents regarding the state’s three prevention priorities. 2. Expanded data collection efforts with Blinn College to include use of the Texas College Survey, implemented by Texas A&M’s Public Policy & Research Institute (PPRI). 3. Reviewed data on population needs based on results of last year’s Marijuana, Alcohol and Rx Pill Awareness surveying for Blinn students on both Bryan and Brenham campuses. 4. Increased readiness through meetings, community appearances and media recognition. 5. Increased community readiness through press releases and public service announcements, using multiple local media sources. 6. Met regularly with Blinn Judicial Affairs to review the college’s policies and procedures related to drug testing, student background checks, dorm inspections and residence hall monitor trainings. 7. Met with the Brenham Police investigator about hosting a Rx Pill Takeback event and learned that the program has a high level of readiness and resources to move forward, even without assistance from the DEA. 8. Met with the Brazos Valley Solid Waste Management Agency’s event specialist about hosting a Rx Pill Takeback event and learned that the program has a high level of readiness and resources to move forward, even without assistance from the DEA. 9. Organized multiple student groups to ensure our coalition has members of our target audience represented during planning and evaluation. 	<ol style="list-style-type: none"> 1. Working with a diverse population over two counties with different needs and resource gaps. 2. Return rate on surveying instruments is low. 3. Cultural norms make it difficult to increase community readiness to address substance abuse. 4. Coalition coordinator left in May; new coordinator began in July and required time to familiarize himself with duties.

<p>10. Conducted focus groups with coalition members and college students to identify intervening variables, underlying factors, and interventions that will be effective on each campus (Blinn campuses are in both Bryan and Brenham).</p>	
<p>SPF Step 2: Mobilize and/or build capacity to address needs</p>	
<p>Accomplishments</p>	<p>Obstacles</p>
<ol style="list-style-type: none"> 1. Staff and coalition members received training and technical assistance from CTS and Texans Standing Tall. 2. Increased coalition capacity by gaining 42 new community agreements and 35 renewed agreements to date, with individuals representing all 12 sectors of the community. 3. Conducted 10 coalition meetings to date with an average of 11 attendees at each meeting. 4. Held recruitment efforts, gaining increased support from college students, as well as members of various community sectors. 5. Collaborated with new members to review and approve coalition mission statement, goals, and member roles. 6. Continued generating an online presence, building a website and a Facebook/Twitter audience. 7. Increased the coalition's brand recognition through press releases, media awareness activities, on-campus flyers, banners, community events, social media, video projects, presentations and face-to-face meetings. 8. Increased community education through press releases, media awareness activities, on-campus flyers, banners, community events, social media, video projects, presentations and face-to-face meetings. 9. Established strong relationships with local agencies and departments with access to data related to alcohol and substance use patterns. 10. Helped to organize and participate in Safe Spring Break programs with collaboration from Blinn College's health clinic and police department, along with Mothers Against Drunk Driving and the Brazos Valley Injury Prevention Coalition. 11. Coalition staff joined with a number of collaborative groups in the area, meeting regularly to raise awareness of the coalition's objectives and build community ties. 12. Shared data collected from first year with coalition members. 13. Gathered information about Rx Pill Collection protocols to share with 	<ol style="list-style-type: none"> 1. Our target area spans two counties, making it difficult to schedule meeting times in both Brazos and Washington county. 2. Developing social media and marketing messages to college students is challenging due to the cultural acceptance of alcohol, marijuana and Rx pill among that age group. 3. Working with college students with limited time and full schedules. 4. Finding meeting times that suit the needs of working professionals. 5. Building capacity to address Rx pill disposal until the DEA returns to participating in Takeback events. 6. Coalition coordinator left in May; new coordinator began in July and required time to familiarize himself with duties.

<p>local law enforcement agencies so that Takeback events can continue.</p> <p>14. Worked with Collaborative Planning Group to digitize data reporting.</p> <p>15. Planning Committee made plans for first annual “Run for Recovery” 5K on Blinn campus in Brenham in order to raise student awareness of substance addiction and gain buy-in and recognition for our target population.</p>	
<p>SPF Step 3: Develop a comprehensive strategic plan</p>	
<p>Accomplishments</p>	<p>Obstacles</p>
<p>11. Continued development and updating of a comprehensive Logic Model, Implementation Plan and Strategic Plan in order to guide strategies.</p> <p>12. Held regular coalition meetings to plan strategies and gain feedback on proposed projects.</p> <p>13. Partnered with Texas National Guard to assess coalition needs and met with coalition to plan ways in which to fill gaps.</p> <p>14. Analyzed data collected from focus groups with coalition members and college students to identify intervening variables, underlying factors, and interventions that will be effective on each campus (Blinn campuses are in both Bryan and Brenham).</p> <p>15. Continued collaboration with Blinn’s Institute of Research and Effectiveness to analyze student survey data and pinpoint areas of concern.</p> <p>16. Worked with Blinn administration to develop plans for marijuana prevention efforts. In particular, developed a proposal for an e-cigarette ban on all campuses that would limit liquid THC use, to be presented to the Blinn College Board of Trustees.</p>	<p>1. Working with college administrators and students with limited time.</p> <p>2. Developing strategies that are culturally competent and meet the needs of both Bryan and Brenham college campuses, which each have unique local conditions.</p> <p>3. Making decisions within the confines of a large college system with many regulations and protocols.</p> <p>4. Coalition coordinator left in May; new coordinator began in July and required time to familiarize himself with duties.</p>
<p>SPF Step 4: Implement evidence-based prevention programs, policies, and practices</p>	
<p>Accomplishments</p>	<p>Obstacles</p>
<p>1. Prevention of liquid THC abuse through the use of vape pens was implemented when Blinn College’s Board of Trustees approved a comprehensive e-cigarette policy for all campuses. The policy includes electronic vaporizers in the definition of “all tobacco products”.</p> <p>2. Coalition members continued implementing “drug and alcohol trends/concealment techniques” training for all residence hall directors and monitors to enhance their skills and change consequences for on-campus use. The office of judicial affairs agreed to the inclusion of this training on all residence hall director/hall monitor job descriptions, making it an effective and sustainable policy.</p>	<p>1. Policy change can be a slow process due to rigorous approval processes.</p> <p>2. Enforcement of new policies requires strong relations with law enforcement and education.</p> <p>3. Maintaining fidelity of business prevention practices among 19 participating bars.</p> <p>4. Formatting video PSAs for the appropriate medium.</p> <p>5. Coalition coordinator left in May; new coordinator began in July and required time to familiarize himself with duties.</p>

<ol style="list-style-type: none"> 3. Through collaboration with the Student Activities offices on both Brenham and Bryan campuses, a “Safe Spring Break” campaign was re-designed in order to prevent binge drinking and substance abuse during the student holiday. The campaign was implemented with the assistance of student leader groups who created peer-to-peer messages in order to change social norms regarding Spring Break expectations. Surveying was included this year to make sure that evaluation is being done so that the program is evidence-based. Administration have agreed to include the campaign on the college’s calendar of events for subsequent school years. 4. The coalition worked with law enforcement in both Washington and Brazos counties to implement DEA Rx Pill Takeback events in both counties. 5. To address binge drinking and reduce drunk driving, the coalition partnered with another coalition in College Station to provide bars in the Northgate bar district (19 businesses total) with designated sober driver cups. Bar owners agreed to use the cups to provide free fountain drinks to sober drivers, making it easier for police to identify groups who are not designating a driver and providing an incentive to those who choose to limit/eliminate their alcohol consumption. The strategy provides support to abstainers, changes consequences (by providing free incentives) and modifies business practices/rules set forth by bar managers. 6. The coalition has provided information to communities by running a number of PSAs regarding marijuana, binge drinking, and teenage Rx pill abuse through media outlets including local movie theaters, TV stations, newspapers and billboards. 	
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SPF Step 5: Monitor, evaluate, sustain, and improve or replace policies/practices that fail

Accomplishments	Obstacles
<ol style="list-style-type: none"> 1. The coalition gained a memorandum of agreement with a local evaluator, who developed presentation and meeting satisfaction surveys for the CASAP. 2. Meeting and presentation surveys have been collected and reviewed, allowing coalition staff to develop best practices and identify improvements. 3. Coalition members reviewed current Blinn College policies/practices related to drug/alcohol use among students, noting areas can be 	<ol style="list-style-type: none"> 1. Compromising with Blinn College on policy review, surveying, and media approval processes. 2. Coalition coordinator left in May; new coordinator began in July and required time to familiarize himself with duties.

<p>strengthened.</p> <ol style="list-style-type: none"> 4. Worked with PRC Evaluator in the development and maintenance of all program survey instruments. 5. Developed Quality Improvement Committee for use of “drunk goggles”. Since many partnering agencies use these impairment simulators, a survey was developed to measure demonstration effectiveness and select best practices. 6. Met with owners of off-campus housing to evaluate policies and practices related to student alcohol and drug abuse, noting areas of improvement and presenting those to coalition members. 7. Collaborated with Blinn Marketing to review and approve all press releases before media contacts are made to ensure that all media awareness activities are accurate and culturally competent to the audience being targeted. 	
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2. How did the CCP ensure cultural competence-related activities were infused into the activities in this reporting period? Provide several examples. Add more rows if necessary.

1.	The coalition, its members and its leaders reflect the ethnic background of their community.
2.	Coalition staff is trained in Cultural Competency.
3.	Coalition collaborates with Blinn College Marketing Dept. to ensure all media awareness activities are culturally competent.
4.	

3. Technical Support: Complete the following table, listing any and all training and/or technical assistance (TA) activities the CCP took part in over the last month. This would include any training, conference calls, webinars, etc., completed by Coordinated Training Services (CTS) Texans Standing Tall (TST), Prospectus, Center for the Application of Prevention Technologies (CAPT), and Pacific Institute for Research and Evaluation (PIRE), DSHS, or other sources.

List each Training or TA received during this reporting period.	Was TA and/or training delivered face-to-face, by phone, or via internet?	Who provided the TA and/or training? (DSHS, CTS, CAPT, PIRE, or other source)? If other, please indicate source.	Was the TA or training timely and effective? If not, please explain.
DSHS Fall Meeting	Face-to-face	Workers Assistance Program (CTS)	Yes
Advocating Community Change	Face-to-face	Texans Standing Tall	Yes
Photoshop CS6 Training	Via internet	ONLC	Yes

The Art of Facilitation	Face-to-face	Trans4m, aka Rainbow Days	Yes
“Advocacy Day” training on Alcohol Excise Taxes	Face-to-face	Texans Standing Tall	Yes
Texas Behavioral Health Institute	Face-to-face	DSHS	Yes
Coalition Management System training (CMS)	Via internet	Collaborative Planning Group Systems, Inc.	Yes
Intro. To Substance Abuse Prevention	Via internet	SAMHSA	Yes

SECTION II.

Instructions: (Contractor is only required to complete Section II of this report form for the Final Report). See the Guidance to Complete Section II for the Final Report.

1. COALITION MEMBERSHIP *(Identify one regularly attending coalition member from each community sector)*

Sector	Name	Agency	Contact Information
Business	Mandi Landreth	Westwood Cinema 6	mandi@westwoodcinema6.com
Civic/Volunteer Groups	Jessica Paul	C.A.R.E.	jpaul@brazoscountytexas.gov
Business	Micaela Farrington-Aguilar	Brazos Valley Solid Waste Management Agency	maguilar@bvswwa.com
Faith-Based	John Reasons	A&M United Methodist	office@amu-umc.org

Government/Law Enforcement	Edward Frank	Brazos County	efrank@brazoscountytexas.gov
Health Care Professionals	Carol Caddell	Health Clinic	Carol.caddell@blinn.edu
Law enforcement	B.J. Hegemeyer	Blinn College Police	Betty.hegemeyer@blinn.edu
Media	Debbie Davis	ABC40 KRHD	ddavis@abc40.com
Parents	Ben Smith	Mothers Against Drunk Driving	Benjamin.smith@madd.org
Schools	Erikah Brown	Blinn College	Erikah.brown@blinn.edu
Prevention/Treatment/Recovery Organizations Rep.	Mary Mattingly	BVCASA (only treatment provider in target community)	mmattingly@bvcasa.org
Youth	Whitney Owens	Student	Whitney.owens34@buc.blinn.edu

2. PROFILE OF TARGETED COMMUNITY:

a. What was the target community served?

DSHS reports to SAMHSA the number of people served by all the coalitions in the state. Indicate the population impacted by the work of the coalition. DSHS will find the most up to date information from the Census and the State Demographers Office.

This information is needed to estimate the total population served by the state in Universal Indirect Programs.

SEE GUIDANCE TO COMPLETE SECTION II. FOR THE CCP FINAL REPORT.

Geographical Area Served by the Coalition

Names of Counties	Name of Cities	Names of School Districts	Other
Names of Counties	Name of Cities	Names of School Districts	Other
Brazos	Bryan, College Station	Blinn College Bryan Campus, Bryan ISD, College Station ISD	
Washington	Brenham	Blinn College Brenham Campus, Brenham ISD	

For additional rows, place the cursor in the last cell of the last row and press Tab.

b. Profile of the Target Population (age-groups, race/ethnicity) served

In the table below identify the segments of the populations impacted by the work of the coalition by clicking on either the **Yes** or **No** check box for each demographic category listed. If the coalition has the actual or estimated numbers of the population impacted, report the numbers and the source of information (e.g. Census' Quickfacts, Texas Education Agency (TEA) statistics, State Demographers' Office, etc.). Otherwise, DSHS will calculate the population served consulting available demographic statistics. **Do not change the demographic categories.**

Data reported for population-based program and strategies should be based on actual numbers (if known) or estimates of people served. For programs and strategies that reach an identifiable population (e.g. an entire county, city, or a targeted area range), it is permissible to use U.S. Census Bureau data to estimate the number of persons served.

Variable	Demographic Category	Target Yes or No? Required	Number and Source (if available)
Gender:	Males	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Females	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Age Groups	0 – 5	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	5 – 9	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	10 – 14	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	15 – 19	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	20 - 24	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	25 – 44	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

	45 – 64	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	65 and older	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Race	White	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Black or African American	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Native Hawaiian/Other Pacific Islander	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Asian	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	American Indian/Alaska Native	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	More than One Race	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Race not Know or Other	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Ethnicity	Hispanic or Latino	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Not Hispanic or Latino	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

NUMBERS TAKEN FROM US CENSUS BUREAU

SOURCES OF DEMOGRAPHIC INFORMATION:

3. NEEDS ASSESSMENT

a. What was/were the community needs identified?

UNDERAGE/BINGE DRINKING

- Easy social access to alcohol (minors attend off-campus parties where alcohol is freely available)
- Social norms favorable to alcohol use (many people accept alcohol use as a “normal” college experience and alcohol retailers advertise specifically to college youth)

RX PILL ABUSE

- Low perception of risk (students use Rx Pills as a study aid, viewed as “safe” because doctors prescribe them, seen as a “legal” alternative to illicit drugs)
- Easy social access to pills (people are not monitoring, locking or disposing of their meds, prescriptions are easy to sell/give away at parties and on campus)

MARIJUANA USE

- Low perception of risk (several states have legalized marijuana, viewed as “safe” because doctors prescribe to patients)
- Social norms favorable to use (media and celebrity influences glamourize use, many people accept marijuana use as a “normal” college

experience)

b. Describe the needs, gaps in services, problems, and/or risks factors identified that lead the work of the coalition. Whenever possible use statistics or survey results that measure the problem.

Gaps identified thus far include a lack of prevention and intervention services among the college students in our service area, as well as a lack of data concerning marijuana consumption methods, arising drug/alcohol trends and which groups among the Blinn College student population to target. Prevalence of other substances, such as synthetic marijuana, need attention since there is a gap in data on use and enforcement. Other resource gaps exist, including a small university police force with a low ability to monitor and enforce student violations.

One of the major problems identified by coalition members is the level of social access students have for both alcohol and prescription medication. The coalition collected student survey data in the Spring of 2014 to show that the majority (55%) of minors at Blinn College obtain alcohol through social access. Many adults are unaware of the prescription pill abuse epidemic and are not monitoring, locking, and/or disposing of their medications properly. Therefore, young adults also have easy social access to prescription pills, with survey data showing that 75% of Blinn College students who abused Rx pills got them from social settings and over 30% of Blinn College students find it VERY EASY to get prescription drugs not prescribed to them.

In addition, 14% of Blinn student respondents said they had used marijuana in the last month. This percentage is below the state's average for people of similar age, and therefor reinforces the perception among both students and community members that marijuana enforcement efforts don't need strengthening. However, this lack of enforcement was addressed by local law enforcement and led to increased efforts by the Washington County Sheriff's Office to crack down on growing operations—resulting in three high-yield, highly publicized busts. Unfortunately, sale and concealment of marijuana continue to be problems identified by Blinn College police, due in part to new trends like waxes, edibles, e-cartridges and concentrates that allow students to use THC in forms that are odorless or hard to detect.

4. IMPLEMENTATION:

a. **activities the coalition planned to implement to achieve the environmental change(s). Add a line for each strategy implemented** (See Guidance on how to complete this section).

<u>In order to address the level of this risk or protective factor/intervening variable:</u>	<u>CCP conducted the following program strategies/activities:</u>	<u>For this target population:</u>	<u>For this duration of time:</u>	<u>This activity/strategy changed or impacted the following risk or protective factors which led to the achievement of our goal (theory of</u>	<u>We know we reached our goal because: (long term impacts):</u>	<u>This strategy is evidence-based (Yes or No)</u>
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				change): Complete the table below using the information from the coalition's logic model that the CCP completed to plan the strategies and		
Social norms favorable to ALCOHOL use (particularly binge drinking at bars)	Increase incentives and modify policies to normalize responsible drinking/sobriety for drinkers at local bars who provide free fountain drinks to all sober drivers.	College students and residents in Brazos county.	Began 3 months ago, ongoing	<u>Risk factors impacted:</u> Social rejection by peers, poor behavioral control <u>Protective factors impacted:</u> Intolerant attitude toward deviance, positive social orientation	Further data collection needed to determine decrease in 30-day use rates and increased perception of harm.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Social norms favorable to ALCOHOL use	Provide information and enhance skills regarding spring break practices through social norms campaigns, presentations and media awareness activities.	Blinn students in both Brazos and Washington counties.	1 week	<u>Risk factors impacted:</u> Social rejection by peers, poor behavioral control <u>Protective factors impacted:</u> Intolerant attitude toward deviance, positive social orientation	Further data collection needed to determine decrease in 30-day use rates and increased perception of harm.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Easy social access to ALCOHOL and MEDICATIONS	Change policies, provide information, and enhance skills related to drug trends/concealment techniques	Blinn College residence hall directors and staff in Washington county.	Began 6 months ago, ongoing	<u>Risk factors impacted:</u> Involvement with drugs and alcohol, attention deficits or learning disorders, poor monitoring and supervision <u>Protective factors impacted:</u> Commitment to school, intolerant attitude toward deviance, positive social orientation	Further data collection needed to determine decrease in 30-day use rates, reporting obtaining alcohol/medication from family/friends/parties, and reporting alcohol/medication as "easy to obtain".	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Low perception of harm about RX MEDICATIONS	Provide information through presentations and media awareness activities.	Blinn College students, residents of Brazos and Washington counties		<u>Risk factors impacted:</u> Social rejection by peers, attention deficits or learning disorders, poor behavioral control <u>Protective factors impacted:</u> Intolerant attitude toward deviance, positive social orientation	Further data collection needed to determine decrease in 30-day use rates and increased perception of harm.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Easy social access to RX MEDICATIONS	Enhance access to medication disposal through A) DEA Rx Pill Takeback events and B) permanent medication drop box.	A) Residents of both Brazos and Washington counties, B) Residents of Brazos county.	A) Bi-annually, B) Permanent, ongoing.	<u>Risk factors impacted:</u> Involvement with drugs and alcohol, attention deficits or learning disorders, poor monitoring and supervision <u>Protective factors impacted:</u> Commitment to school, intolerant attitude toward deviance, positive social orientation	Further data collection needed to determine decrease in 30-day use rates and reporting Rx pills as “easy to obtain”	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Low perception of harm toward MARIJUANA	Provide information through presentations and media awareness activities.	Blinn College students, junior and high school students and residents in Brazos and Washington counties	Throughout the year, ongoing	<u>Risk factors impacted:</u> Social rejection by peers, attention deficits or learning disorders, poor behavioral control <u>Protective factors impacted:</u> Intolerant attitude toward deviance, positive social orientation	Further data collection needed to determine decrease in 30-day use rates and increased perception of harm.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Social norms favorable to MARIJUANA use.	Provide support through peer-to-peer social norms campaigns and activities, provide information through presentations and media awareness activities.	Blinn College students in Brazos and Washington counties.	3 weeks out of the year.	<u>Risk factors impacted:</u> Involvement with drugs, alcohol or tobacco, social rejection by peers, poor behavioral control <u>Protective factors impacted:</u> Intolerant attitude toward deviance, positive social orientation	Further data collection needed to determine decrease in 30-day use rates and number of people who report marijuana use as “acceptable”.	

For additional rows, place the cursor in the last cell of the last row and press Tab.

b. Discuss briefly the strategies the CCP chose. For each of the strategies implemented, state whether they were evidence-based or not? (See Guidance for instructions).

Each of the strategies above was chosen based on needs identified and best practices established by Community Anti-Drug Coalitions of America (CADCA). The implementation techniques are therefore all evidence based, though the programs themselves were developed and are being evaluated by the community coalition and have not been formally researched by a third party since DSHS does not provide that service (with exception to the DEA Rx Pill Takeback strategy, which has been reviewed and is being evaluated by Texans Standing Tall). Further evaluation conducted by the coalition during its second year of funding will provide evidence of each strategy's effectiveness.

c. What were the major accomplishments of the community coalition this year?

During the coalition's first year of funding, a great deal of assessment, capacity building and planning occurred-- as a result, a number of strategies were able to be implemented. The major accomplishments of the coalition during the first and second quarters were establishing a working group of members, branding the coalition as the Community Alcohol & Substance Awareness Partnership (CASAP), gathering data, analyzing data, sharing data, and developing goals and strategies to address our findings. During the third and fourth quarters, the strong relations built led to increased data collection efforts through student use surveys and an overall increase in collaboration between various departments that had never worked together on drug and alcohol prevention efforts together. We were able to implement four environmental strategies; two of which focused primarily on binge drinking, one of which focused on marijuana and illicit drug use, and one that focused on Rx pill abuse. We were able to increase membership and impact both community members and college students by using a variety of strategies that included; providing information via media awareness activities and social norms campaigns; changing formal policies held at Blinn College regarding Residence Hall Assistant drug training requirements and informal policies held among bar owners in the Northgate bar district regarding incentivizing sober drivers; and enhancing access to medication disposal to address Rx pill abuse. Coalition members have been recognized for their roles and accomplishments during our first year and the next year is looking to be even more productive.

d. What was/were the environmental changes accomplished this year? Is the change verifiable (documented, recorded, statistical?) *The number of environmental changes described must match the number reported in your monthly key performance measures reported in CMBHS.*

Environmental changes accomplished this year include:

- 1) Job descriptions for Blinn College Residence Hall Assistants/Directors modified to include "Current Drug Trends/Concealment Techniques" training annually. Training is provided by Blinn PD and was conducted 6 times after the written change went into effect. The change is documented in the new job descriptions for all current and new residence hall employees.
- 2) Two DEA Rx Pill Takeback events were held to increase barriers for young people who acquire Rx pills from other peoples' medicine cabinets. The change is recorded by the removal of over 2000 lbs. of medications from Brazos County residents and 75 lbs from Washington County, as measured by officials with the DEA.
- 3) "Safe Spring Break" social norms campaigns are now included in Blinn College's calendar of events. Activities from the campaign include providing education through peer-to-peer messaging, media awareness activities and interactive student forums. The change is

verifiable because the campaign is now included on Blinn College's annual calendar of events.

- 4) A new Designated Sober Driver campaign now exists among businesses in an area of high bar density called Northgate in Brazos County and acts as an environmental strategy by changing social norms and by modifying existing policies. Nineteen business owners have agreed to distribute "Northgate Cares" cups along with free fountain drinks as an incentive to sober drivers, reducing binge drinking and accidents caused by underage drinkers. The change is verifiable because the College Station Police Department recorded the names of the bars that agreed to participate and the number of cups that were distributed; to date, 4,000 cups have been given out.

e. How was the work of the coalition evaluated?

The work of the coalition is constantly being evaluated by both an inside evaluator and an outside evaluator and an evaluation committee. The entire coalition membership is also asked to provide quality management surveys on the effectiveness of meetings. Strategies are evaluated based on data collection to determine success. The coalition also plans to collaborate with the National Guard to implement an evaluation tool that measures the coalition's competency and ability to follow best practices.

Maintain a signed copy of this report on file for DSHS review.

Program Director:

Print Name:	Mary Mattingly
Signature:	
Date:	9/15/15

Executive Director:

Print Name:	Crystal Crowell
Signature:	
Date:	9/15/15

FOR DSHS USE ONLY:

Date Reviewed and Accepted By Program Services Staff:

Program Services Staff Signature: