



Eastern Idaho **Public Health**

Strategic Plan Partnership for Success (PFS) Grant

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Prevent. Promote. Protect.

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Background on the Partnership for Success Grant

In October 2018, the Idaho Office of Drug Policy (ODP) received a 5-year federal grant from the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse and Prevention (CSAP). Each public health district throughout Idaho received funding along with select law enforcement agencies to address issues in their region pertaining to either alcohol, marijuana, or methamphetamine use. Based on the needs assessment conducted by ODP, Eastern Idaho Public Health (EIPH), in conjunction with the Region 7 Behavioral Health Board (R7BHB), was selected to address underage drinking with added emphasis on the rural population.

The Partnership for Success (PFS) communities are located throughout eight counties: Bonneville, Clark, Custer, Fremont, Jefferson, Lemhi, Madison and Teton. These counties have about 16 school districts represented including charter schools. There are approximately 222,926 people in the region with 25,522 youth enrolled in grades 6-12 based on student enrollment data from the Department of Education.

In March 2019, the R7BHB created a Prevention Subcommittee, which advises the Board and helps direct and carry out the Partnership for Success Strategic Plan. The committee has key partners from the region that provide input to the plan and ensure that goals and objectives align with the mission of reducing underage drinking and meeting the needs of the rural areas.

Please note that law enforcement receives funding through the PFS project from the State to do their own portion of underage drinking work and therefore this plan left out interventions such as Alcohol Beverage Control trainings (ABC trainings), server trainings, Shoulder Tap operations, and party patrols.

Why We Care:

1. The Center for Disease Control and Prevention (CDC) reports that there are 4,300 deaths annually from excessive adolescent drinking.
2. The CDC reports that the leading cause of death for adolescents is typically accidental followed by car crashes, suicide, and homicide. These events for premature death highly increase when alcohol is involved.
3. Adolescent drinking increases risky behaviors including impaired driving, acts of violence, sexual activity, alcohol addiction, drug use, and increased risk of sexual assault.
4. A 2019 study from McLean Hospital associated with Harvard Medical School demonstrated that teenage brains are affected in more profound and dangerous ways than adult brains when consuming alcohol.
5. The National Survey on Drug Use and Health shows that adults aged 21 or older who had first used alcohol at age 14 or younger had a higher likelihood of being diagnosed with alcohol dependence than adults who delayed taking their first drink until after age 21.
6. Over half of Idaho students or 55.1% reported having one or more drinks of alcohol in their lifetime according to the 2017 Idaho Healthy Youth Survey; with 13.8% reporting they had their first drink (more than a few sips) before age 13.
7. The 2017 Idaho Youth Risk Behavior Survey (YRBS) shows 26.5% of Idaho students reported having a drink of alcohol in the past 30 days.
8. The 2017 Idaho Youth Risk Behavior Survey (YRBS) showed that teens who reported using alcohol were more likely to be sexually active.
9. The 2017 Idaho Substance Abuse Prevention Needs Assessment showed that more than 1 in 5 driving fatalities in Idaho involved an impaired driver and that impaired driving fatalities cost Idahoans \$846 million in 2016 alone.
10. **Underage drinking is an expensive public health matter and by reducing the risks associated with underage drinking, lives and money are saved.**

Mission and Vision

Mission:

The Partnership for Success (PFS) project was established to reduce underage drinking throughout Eastern Idaho Public Health's eight County Region with added emphasis placed on rural communities.

Vision:

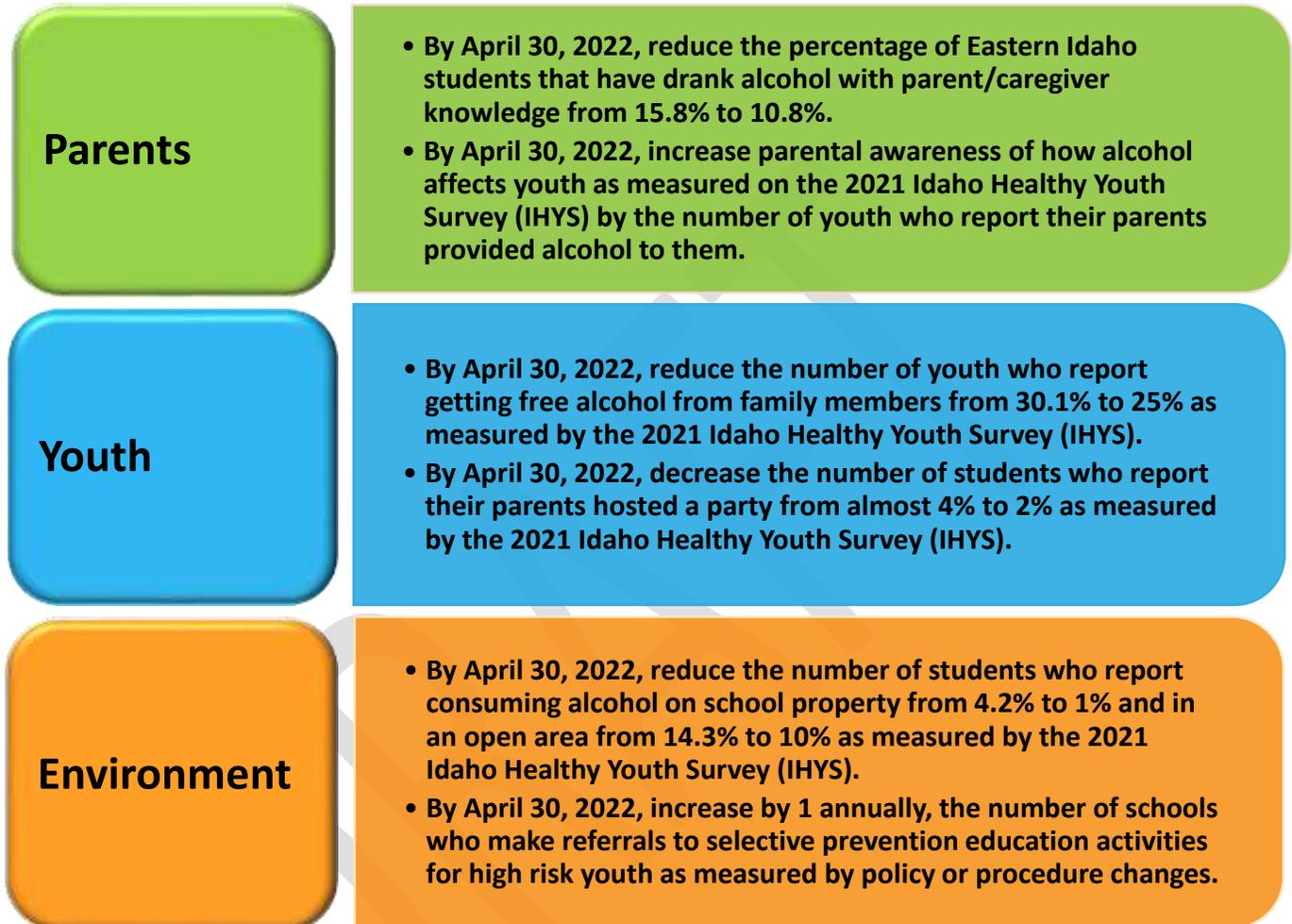
The Partnership for Success (PFS) project will support initiatives that help reduce underage drinking through collaboration with local government, coalitions, juvenile justice, youth, parents, educational professionals, law enforcement, and others. We will accomplish this through resource and information sharing, relationship building, policy work, education and training, and providing alternative activities to drinking. The multiple strategies and evidence-based activities are expected to have a secondary positive impact on other substance abuse and risky behaviors.

The Mission and Vision are supported by an overall goal to reduce underage drinking which include three objectives to aid in measuring the impact of the goal. The following graphic depicts the key objectives used to measure the strategic plan outcomes.

Overall Goal

Reduce Underage Drinking		
Goal 1: By April 30, 2022, reduce the number of youth who report having a drink other than a few sips prior to age 13 from 15.5% to 12% as measured by the 2021 Youth Risk Behavior Survey (YRBS).	Goal 2: By April 30, 2022, reduce the number of active past 30-day underage drinkers in Eastern Idaho from 9.9% to 7% as measured by the 2021 Idaho Healthy Youth Survey (IHYS).	Goal 3: By April 30, 2022, reduce students who report having at least one drink of alcohol in their lifetime from 28.2% to 23.2% as measured by the 2021 Idaho Healthy Youth Survey (IHYS).

A comprehensive data review of alcohol consumption among youth in Eastern Idaho Public Health's eight counties revealed three common themes: parents, youth, and the environment. The following graphic outlines critical objectives for the three priority areas in order to accomplish the Mission and Vision of the PFS project.



The following pages include objectives, activities, and evaluations that outline what must be accomplished to achieve an overall **reduction in underage drinking which includes lowering lifetime use rates in the region, lowering past 30-day use rates, and increasing the age of first use.**

Parent Objectives

Objective 1: By April 30, 2022, reduce the percentage of Eastern Idaho students that have drunk alcohol with parent/caregiver knowledge from 15.8% to 10.8%.

Objective 2: By April 30, 2022, increase parental awareness of how alcohol affects youth as measured on the 2021 IHYS by the number of youth who report their parents provided alcohol to them.

Work Being Done Participants		Expected Outcomes from Implementing Activities		
Activities	Participants	Short-term	Medium-term	Long-term
Conduct BetheParents campaign including social media and print material distribution (ID,UI)	General public and parents of youth	Change in parental attitudes about drinking	** Reduced underage drinking lifetime use	++ Reduce alcohol addiction rate
Host school Town Hall meetings with education components including teen bedroom simulations and social host laws (E,UD)	Parents of youth in each identified school, grades 6 - 12	Increased knowledge about underage drinking dangers	* Reduced underage drinking past 30 day use	++ Reduced costs to society
Conduct Sticker Shock campaign (ID, UD)	Individuals over 21 who purchase or consume alcohol	Increased parenting skills	* Reduced underage drinking age of first use	++ Reduced alcohol related teen death rates
Conduct Strengthening Families program (SFP) facilitator training to build capacity (E,S)	Interested individuals and groups who want to teach the program	Increased knowledge of current teen use trends	* Increase in parents talking to youth about dangers of underage drinking	Increased individual and family happiness
			* Reduce number of parents providing alcohol to minors	

* Items measured by the Idaho Healthy Youth Survey (IHYS)

** Items measured by the Youth Risk Behavior Survey (YRBS)

*** Items measured by local school data

++ Items measured by the Center for Disease Control and Prevention (CDC).

Parent Objectives Evaluation

Evaluation:

A: Outcome being measured (What exactly is being measured, local condition)

B: Data (How it is measured)

C: Source of Data (Where we will get it)

D: Frequency of Data Collection (How often it will be collected)

BetheParents Social Media:

- A: Engagements with BetheParent's social media
- B: Number of people reached and estimated demographics of people reached
- C: Site analytics reports, click through rates, post engagements, and host site reports
- D: Monthly

Town Hall Meeting and Teen Bedroom Simulation:

- A: Parents talk to teens about disapproving of alcohol use, parents changed perception of harm, and number of people who attend events
- B: Sign in sheets and exit interviews and surveys
- C: Sample of convenience after event, maybe through online short Survey Monkey link to parents email or sent out by school to all parents
- D: One time after event, maybe 3 months after event have a second survey to follow up and to measure any parental behavior change

Sticker Shock Campaign:

- A: Reduce alcohol provided to minors
- B: Number of stickers placed on items, short survey of baseball patrons (sample of convenience and point in time sample), and Idaho Healthy Youth Survey 2021
- C: Patrons at baseball game
- D: Annually at baseball game and every other year for IHYS

Strengthening Families Program:

- A: Increase parental knowledge of substance use
- B: Changes in parent's behavior regarding multiple indicators
- C: Office of Drug Policy required survey; parents take survey after class completion
- D: One time post 14-week class; agency conducting class responsible

Youth Objectives

Objective 1: By April 30, 2022, reduce the number of youth who report getting free alcohol from family members from 30.1% to 25% as measured by the 2021 IHYS.

Objective 2: By April 30, 2022, decrease the number of students who report their parents hosted a party from almost 4% to 2% as measured by the 2021 IHYS.

Work Being Done Participants		Expected Outcomes from Implementing Activities		
Activities	Participants	Short-term	Medium-term	Long-term
Youth and adults attend peer-to-peer prevention trainings or prevention conferences including TRAPPED or IDFY, ICADD, and more (ALT,S)	Select group of youth and adult leaders	Increased knowledge about underage drinking dangers and current teen use rates *Reduced access to alcohol from parents	**Reduced underage drinking lifetime use *Reduced underage drinking past 30 day use *Reduced underage drinking age of first use	++Reduce alcohol addiction rate ++Reduced costs to society ++Reduced death rates Increased individual and family happiness
Youth lead assemblies at schools directed towards substance use prevention (E, UD)	Middle and high school students	***Decreased suspension for alcohol violations Youth have increased skills to conduct peer to peer prevention activities in their schools	*Increase peer perception of harm of underage drinking ***Increase in school attendance rates	***Higher graduation rates ***Reduced truancy
Life Skills training to middle and high school students (ED, UD)	Middle and high school students	High-risk youth with grades of C's or lower, reduce alcohol intake *Increased rate of perception of risk of harm and peer disapproval	***Increase in academic performance of high-risk youth	
Site based targeted interventions to grade 6, 11, and 12 students as well as students with grades of C or lower (E, S)	All middle and high schools students of interested schools			
Alternative activities in schools and youth serving organizations (ALT,UD)	Middle and high school students			

* Items measured by the Idaho Healthy Youth Survey (IHYS)

** Items measured by the Youth Risk Behavior Survey (YRBS)

*** Items measured by local school data

++ Items measured by the Center for Disease Control and Prevention (CDC).

Youth Objectives Evaluation

Evaluation:

A: Outcome being measured (what exactly is being measured, local condition).

B: Data (How it is measured)

C: Source of Data (Where we will get it)

D: Frequency of Data Collection (How often it will be collected)

Youth and adult leadership training/education conferences.

A: # of new youth trained in peer-to-peer prevention

B: # who attend conference, additional data gathered at conference as a local resources for drug prevention. Number of youth who participate in peer-to-peer activities affecting other youth.

C: Attendance reports with demographic information

D: At each event.

Youth led school-based assemblies.

A: # of assemblies held and # of people who attend

B: demographics, Sign in sheets at the door.

C: Sign in sheets and interviews

D: At each event.

Life Skills Training.

A: indicators 30-day use, peer and self-perception of risk of harm, resilience skills, demographics

B: survey pre and post

C: ODP required youth survey for life skills and parental permission form

D: Pre and post class.

Site based grade specific targeted interventions.

A: Number of individuals in grades 6, 11 and 12 who get selected interventions and students with grades of C or worse.

B: Sign in attendance sheets.

C: site based sign in sheets, and post intervention surveys.

D: At completion of each intervention.

Alternative Activities.

A: Number of events held, # of participants.

B onsite forms filled out

C: EIPH provides sign in forms with demographic information.

D: At each event.

Environment Objectives

Objective 1: By April 30, 2022, reduce the number of students who report consuming alcohol on school property from 4.2% to 1% and in an open area from 14.3% to 10% as measured by the IHYS 2021.

Objective 2: By April 30, 2022, increase by one annually, the number of schools who make referrals to selective prevention education activities for high-risk youth as measured by policy or procedure changes.

Work Being Done Participants		Expected Outcomes from Implementing Activities		
Activities	Participants	Short-term	Medium-term	Long-term
Assess current substance use policies of the school and update when needed (ENV, UD POL)	School administrators, counselors, and Prevention Coordinator	Change in youth attitudes about underage drinking dangers *Reduced access to alcohol from parents	**Reduced underage drinking lifetime use *Reduced underage drinking past 30-day use and truancy *Reduced underage drinking age of first use	++Reduce alcohol addiction rate ++Reduced costs to society ++Reduced teen alcohol related death rates
Conduct Drug Impairment Training for Education Professionals (DITEP) (E, S)	Teachers, Idaho State Police, administrators, and School Resource Officers	***Decreased suspension for alcohol violations Increased skills to conduct peer-to-peer prevention activities and reduced 30-day use rates	*Increase peer perception of harm of underage drinking ***Increase in school attendance rates, school connectivity, and grades	Increased individual and family happiness ***Higher graduation rates
Assess the school and community environment of where youth consume alcohol and intervene (ENV, UD, PD)	School administrators, counselors, Prevention Coordinator, law enforcement, and parks and recreation	High-risk youth reduced alcohol intake *Decrease in use on school and public property	*Reduced use on school property and in open areas	Less youth on formal probation

* Items measured by the Idaho Healthy Youth Survey (IHYS)

** Items measured by the Youth Risk Behavior Survey (YRBS)

*** Items measured by local school data

++ Items measured by the Center for Disease Control and Prevention (CDC).

Environment Objectives Evaluation

Evaluation:

A: Outcome being measured (What exactly is being measured, local condition)

B: Data (How it is measured)

C: Source of Data (Where we will get it)

D: Frequency of Data Collection (How often it will be collected)

Assess /Update Policies:

- A: Identify what the most common current policies are in the region for underage drinking violations in schools
- B: Number of underage drinking violations and number and type of policies in place
- C: School counselors and administrators/policy makers or actual policy
- D: One time

DITEP Training:

- A: New teachers trained in DITEP
- B: Number of new schools and teachers trained
- C: Sign in sheets at trainings
- D: One time; start of course

Assess School and Community Consumption Areas:

- A: Identify places of consumption in schools and community
- B: Actual places identified
- C: Talking to students at schools
- D: One time with annual follow up

Data for the Idaho Healthy Youth Survey (IHYS) was not available for each school district in the eight counties served by Eastern Idaho Public Health. For the sake of this regional assessment, data was placed into the Eastern hub. The hub data is the closest to local level information that could be obtained with the current sources, and included Regions 4, 5 and 6 in addition to Region 7. The Eastern Hub represents 11,560 surveys completed, of which 6,758 or 58% were Region 7 schools. Out of the 34,155 total students in grades 6, 8, 10, and 12 for the Eastern Hub, 33.8% participated. Region 7 comprises approximately 12,223 students enrolled in grades 6, 8, 10, and 12, with approximately 21,944 students enrolled in grades 6-12. The Eastern Hub youth reported that 28.2% had at least one drink of alcohol in their lifetime, whereas the Western Hub, Region 3, had 42.3% and the North Hub, Regions 1 and 2, had 52.8%.

Target Number of Youth by School District

School District	Approximate # of Students Enrolled in Grade 6-12	Number of Hub Students Who Had 1 Drink Lifetime Grade 6-12 28.2%	Number of Hub Students Active Past 30-day Drinkers Grade 6-12 9.9%	Number of Hub Students Binge Drinkers Reporting 4 or More Drinks in a Row 50.1%
Idaho Falls School District #91	4,867	1,372	136	68
Bonneville Joint School District #93	6,362	1,794	178	89
Compass Charter School 455C	405	114	11	6
Monticello Montessori Charter School 474C	700	197	20	10
American Heritage Charter School 482C	250	71	7	4
Taylor's Crossing Charter School	186	52	5	3
Forrester Academy Alturas 495C	174	50	5	3
Ririe Joint School District #252	390	110	11	6
Jefferson County Joint School District #251	2,611	736	73	37
Madison School District #321	3,528	995	95	48
Teton County School District #401	918	259	26	13
Salmon School District #291	455	128	13	7
South Lemhi School District #292	55	16	2	1
Challis School District #181	186	52	5	3
Mackay School District #182	89	25	3	2
Fremont County Joint School District #215	676	191	19	10
Clark County School District #161	92	26	3	2
Total	21,944	6,188	612	312

Drinking under the age of 21 is illegal in all 50 states. Therefore, Region 7 population numbers for those demographic ages are provided below as estimated by Census Bureau at

<https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmkgrouping> individuals aged 18-24. Data with age breakdown for individuals under 21 is not available.

Idaho Region 7 Population by County

County	Population	Under Age 18	Age 18-24
Bonneville	116,854	37,510	11,101
Jefferson	29,439	10,686	2,826
Madison	39,304	10,297	15,682
Teton	11,381	3,619	922
Fremont	13,094	4,334	1,217
Custer	4,127	1,052	198
Clark	852	299	68
Lemhi	7,875	1,931	433
Total	222,926	69,728	32,447

KEY

CSAP Strategy Type	IOM Category	Environmental Strategy Type
(E) Education	(UD) Universal Direct	(PI) Provide Information
(ID) Information Dissemination	(UI) Universal Indirect	(ES) Enhance Skills
(CBP) Community Based Processes	(I) Indicated	(PS) Provide Support
(PID) Problem ID and Referral	(S) Selective	(POL) Change Policy
(ALT) Alternative Activities	(I) Indicated	(CC) Change Consequences
(ENV) Environmental		(EA/RB) Enhance Access/Remove Barriers
		(PD) Alter Physical Design

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