

Arizona Partnerships for Success (PFS)



EVALUATION REPORT

Project Funded from 2013-2018

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Navajo Nation
Southeastern Arizona Behavioral Health Services (SEABHS) – Graham County
University of Arizona
Yavapai-Apache Nation

Executive Summary

On September 30, 2013, the Arizona Department of Health Services, Division of Behavioral Health Services (ADHS/DBHS) received a Substance Abuse and Mental Health Services Administration's (SAMHSA) Strategic Prevention Framework (SPF) – Partnerships for Success (PFS) grant with the overarching goals of:

- Reducing college age youth 30-day alcohol use of 83% in 2010 to 75% in 2018 as measured by the Arizona Higher Education Institutions Network (AZHEIN) annual substance use survey
- Reducing youth 30-day alcohol use from 28% in 2012 to 23% in 2018 as measured by the Arizona Youth Survey (AYS)
- Reducing the percentage of youth who have used prescription drugs in the last 30 days to get high from 8% in 2012 to 4% as measure by the 2018 Arizona Youth Survey (AYS)

The PFS Project was funded for five and a half (5.5) years including a six-month (6) no-cost extension (September 2018 – March 2019) to expend the remaining funds. Only two (2) sub-grantees were funded for the extension: 1) Arizona Complete Health (AzCH) (formerly known as Cenpatico Integrated Care (CIC)) and 2) Arizona Youth Partnership (AZYP).

Although past 30-day youth alcohol use rates have steadily declined in Arizona since 2012, alcohol remains the number one used substance by youth versus all other substances.

Arizona's PFS Project achieved many goals:

- College age past 30-day alcohol use shows a decrease over time, from 61.9% at baseline (2012) to 56.2% in 2018, thus showing an almost 6% decrease;
- AYS results indicate Arizona has made progress in reducing underage drinking statewide and succeeded in achieving the goal to reduce past-30 day alcohol use to 20.2% in 2018;
- Over time, significant reductions have occurred among all grades, specifically with 12th grade students and a slight increase from 2016 to 2018 among 8th and 10th graders as reported by AYS;
- AYS data for Pima, Pinal, and Yavapai counties showed decreases in past 30-day alcohol use;
- Overall, alcohol-related car crashes have decreased over time since 2012; including the number of alcohol-related fatal crashes. In 2012, 9.6% of all alcohol-related car crashes were by individuals 20 years old and younger, with a reduction to 6.4% in 2017. Similarly, for persons 21-24 years of age, data shows a reduction over time, with 5,216 crashes reported in 2012, reduced to 4,675 crashes in 2017 (Arizona Department of Public Safety);

- Emergency room results for opiates shows a significant reduction in emergency room visits and discharges between 2014 (1,115) and 2016 (790), an indication that this objective was achieved;
- AYS past 30-day prescription drug use decreased in Graham, Pima, Pinal, and Yavapai counties;
- An estimated 6,726,876 contacts were made through Information Dissemination efforts;
- In total, there were 785 partnering entities described within the sub-grantees' collaborations;
- PFS funded three (3) Tribal Nation sub-grantees: Hopi Nation, Navajo Nation, and Yavapai-Apache Nation to conduct needs assessment, capacity building/training, and information dissemination activities; and
- The Arizona Coalition for Military Families served over 4,557 individuals through training or technical assistance provided, and conducted approximately 75 trainings across the state.

Recommendations

The following recommendations are provided to improve future prevention and education efforts:

- Continue to utilize the Arizona State Epidemiological and Outcomes (SEOW) Workgroup as the "hub" for informing areas of need and reporting progress in meeting state goals and objectives related to substance use and its consequences;
- Develop or implement process equity funding models to assist with determining needs and funding for communities based on pre-determined factors;
- Increase data collection for the Arizona Youth Survey (AYS) including expansion of rural representation and areas within the state that have lower participation numbers;
- Collaborate with other substance use prevention and evaluation efforts across funding sources and funded communities, i.e., Drug Free Communities (DFC), Opiate initiatives, etc.;
- Regularly conduct a state-wide needs assessment to ensure representation of high areas of need within the state and to stay on top of state and community trends;
- Based on needs assessment findings fund higher areas of need and areas typically under-served; and
- Utilize AYS and other data collected to inform evidence-based program and practice selection to reduce access of where youth are obtaining substances and reduce risks of harm perceptions through education to youth and parents/adults.

Background/Introduction

Arizona began implementing the Substance Abuse and Mental Health Services Administration's (SAMHSA) Strategic Prevention Framework (SPF) – Partnerships for Success (PFS) initiative administered by the Arizona Department Health Services (ADHS) September 30, 2013. As part of Arizona's Administrative Simplification Initiative, the Division of Behavioral Health Services was eliminated effective July 1, 2016; this resulted in the grant shifting to the State Medicaid agency, the Arizona Health Care Cost Containment System (AHCCCS). As the Substance Abuse and Mental Health Services Administration's grantee, AHCCCS assumed all SPF-PFS responsibilities. It is important to note that the administrators of the Arizona PFS Project changed several times during the first two years of the grant; including the originators of the grant proposal funded, strategic, and evaluation plans. Additionally, Pima Prevention Partnership (PPP) was not the original contracted evaluator and began providing evaluation services in 2015.



AHCCCS/GOYFF staff and the evaluator conducted annual site visits with all sub-grantees to review project requirements, deliverables, and to provide technical assistance tailored to the needs of the sub-grantee. Quarterly sub-grantee conference calls were also conducted and all PFS sub-grantees were required to participate. The quarterly conference calls provided opportunities for sub-grantees to share implementation activities, successes, and challenges. These conference calls increased collaboration and created cohesiveness among the sub-grantees, with technical assistance often provided by their prevention peers.

SUB-GRANTEES FUNDED

A total of 13 sub-grantees were awarded PFS funding. Sub-grantees were awarded to address underage drinking and/or prescription drug use among youth or college-aged persons in their community. The sub-grantees were as follows:

(Funded in August of 2013)

- Arizona Department of Veterans Administration (ADVS)/Arizona Coalition for Military Families (ACMF)
- Arizona Criminal Justice Commission (ACJC)
- Arizona Department of Veterans Administration (ADVS)
- Northern Arizona Regional Behavioral Health Authority (NARBHA) sub-contracting with:
 - Arizona Youth Partnership (AZYP) – Kingman
 - Community Bridges Inc.

- MATFORCE/Yavapai County Attorney's Office
- State Epidemiological and Outcomes Workgroup (SEOW)
- The University of Arizona (UA)

(Funded September of 2015)

- Governor's Office of Youth Faith and Family (GOYFF) sub-contracting with:
 - Arizona Department of Veterans Administration (ADVS)/ACMF
 - MATFORCE/Yavapai County Attorney's Office
 - The University of Arizona
- Arizona Youth Partnership (AZYP) - Southern Arizona
- Casa Grande Alliance (CGA)
- Southeastern Arizona Behavioral Health Services (SEABHS)
- Pasadera

The ACJC (funded through December 2015) and NARBHA (funded through September 29, 2015) no longer received funding after 2015 due to reorganization by the sub-grantee, with direct funding by GOYFF to MATFORCE (originally funded through NARBHA). Pasadera only received funding through September 29, 2016 as the organization closed its doors.

Tribal Nations were also funded as part of the PFS initiative, but were not on a specific funding cycle due to contractual deliverables and individual tribal processes. The Tribal Nations were also only funded to conduct SPF activities mostly related to assessment, capacity building, and planning depending on when they were funded and the proposals submitted to GOYFF. Because of variations in activities and implementation timelines, they are not included in the overall evaluation. Tribal Nations funded included:

- Yavapai-Apache Nation
- Hopi Nation
- Navajo Nation

On September 30, 2018, the AHCCCS was granted a no-cost extension for six (6) months with funding awarded to Arizona Complete Health (AzCH) and Arizona Youth Partnership (AZYP). A separate addendum report was completed for the six (6) month no-cost extension period.

DESCRIPTION OF ARIZONA

Arizona is the sixth largest state by area and the 14th most populous of the 50 states and shares the "Four Corners" region with Colorado, New Mexico, and Utah. One-quarter of the state is home to 21 federally recognized American Indian Tribal Nations, including the Navajo Nation, which is the largest in the United States. The capitol of Arizona is Phoenix which is also the most populated city in Arizona. The United States Census Bureau, estimates Arizona's population at 7,171,646 (2018). Metropolitan Phoenix and Tucson are home to 83% of Arizona's population. The third largest populated county in Arizona is Pinal County.

Arizona also borders the United States and Mexico border with approximately 1,954 miles that spans a variety of urban and desert areas.

DESCRIPTION OF SUB-GRANTEES

The Arizona PFS concentrated on environmental and individual strategies and implemented a competitive application process for sub-grantees' funding. Below is a description of the sub-grantees funded in the state of Arizona.

The Arizona Coalition for Military Families (ACMF)

The ACMF is a public/private collaboration focused on building Arizona's capacity to serve and support all military service members, veterans, and their families. The ACMF is administered through the Arizona Department of Veterans' Services (ADVS). The ACMF was created in response to a direct need for agencies and communities to work more collaboratively with current military members, veterans, and their families. The ACMF links it's national and state resources to provide training and information to any groups throughout Arizona serving the military and their families. The ACMF is located in Phoenix, AZ and began serving the State of Arizona through the ACMF in 2009. Specifically, the ACMF provides training, technical assistance, and sponsorships of coalition and community groups throughout the state. The ACMF also hosts an annual conference and military immersion training that is attended by key stakeholders and individuals seeking to learn more about service members and veterans, and for individuals seeking to improve programming and services. The ACMF's scope of work with this PFS Project was to provide resources across the state (and differed from the other sub-grantees funded). As such, the ACMF was not required to complete the same reporting deliverables including the Community Level Instrument (CLI) and only process outcomes are reported for ACMF.

Arizona Complete Health (AzCH) (formerly Cenpatico Integrated Care)

AzCH was the Regional Behavioral Health Authority (RBHA) for Southern Arizona, the location for four of the sub-grantees receiving PFS funding. AzCH was funded in August 2018 as part of the carry-over funds for the PFS grant. Their focus was a targeted media campaign, which included TV/digital messages, social media, radio, outdoor and print advertising. The targeted areas were specific to rural PFS funded zip codes and demographics, including Hispanic media outlets in Southern Arizona. The campaign focused on the reduction of underage drinking among persons aged 12 to 20, proper disposal of unused RX medications, and prescription drug misuse among persons aged 12 to 25. In addition to targeting youth, the campaign also focused on parents.

The Arizona Criminal Justice Commission (ACJC)

The ACJC is a statutorily authorized entity mandated to implement various coordinating, monitoring, and reporting functions regarding the administration and management of criminal justice programs in Arizona. The ACJC was created in 1982 to serve as a resource and service organization for Arizona's 480 criminal justice agencies. The ACJC

is most known in prevention as the administrator to the state's Arizona Youth Survey (AYS) administered every two even years to 8th, 10th, and 12th graders.

Through the PFS Project, the ACJC implemented effective prevention and education efforts encompassing evidence-based interventions and environmental prevention strategies that involved multiple sectors of the community and focused on reducing access and opportunity, enforcing consequences, and decreasing the likelihood of substance abuse by addressing risk and protective factors amongst Arizona's juvenile justice population.

Arizona Youth Partnership (AZYP)

AZYP serves rural areas of Arizona, mostly Mohave, Gila, and Pima Counties and was awarded PFS funding to serve the towns of: Ajo (rural area, US/Mexico border town), Catalina (rural), Marana (growing urban area, rural area), and Sahuarita (growing urban area). Founded in 1990, AZYP has been serving Tucson and rural Arizona communities to build strong community partnerships to cultivate healthy foundations for youth, promote strong families, and provide K-8 educational services in Marana, AZ. Ajo, Arizona is a very small rural community in the Northwest region of Pima County, 35 miles north of the U.S.-Mexico border. Catalina, AZ lies on the border of Pima County and Pinal County, between two affluent areas, Saddlebrooke and Oro Valley. Marana, AZ is located approximately 20 miles northwest of Tucson and covers an area of 125 square miles, stretching from northern Pima County into neighboring Pinal County. This community has seen its population more than triple in the last ten years. Lastly, Sahuarita, AZ located in Pima County, is located 15 minutes south of Tucson and 43 miles from the Mariposa Port of Entry along the U.S-Mexico border. With a current population of just over 26,000 people, this 30 mile square area has seen a 700 percent increase in its population in the period between the 2000 and 2010 according to the U.S. Census.

AZYP focused on reducing underage drinking and prescription drug use, with strategies aimed at youth access to alcohol and prescription drugs and providing community education through the development of community coalitions in the four targeted areas.

The Casa Grande Alliance, Inc. (CGA, Inc.)

CGA, Inc. is located in Casa Grande, AZ and serves Pinal County. The CGA, Inc. was formed in 1989 as a community coalition to address substance abuse issues in the communities they serve. Pinal County is located between Phoenix and Tucson and is the third most populous county in Arizona.

The CGA, Inc. served as the umbrella organization working initially, with a total of seven community coalitions participating in CGA, Inc.'s PFS project and included: 1) Apache Junction Drug Prevention Coalition, 2) Arizona City Triad, 3) Be Awesome Youth Coalition, 4) Eloy Governor's Alliance Against Drugs, 5) San Tan Valley Substance Abuse Prevention Coalition, 6) Casa Grande Alliance, and 7) Coolidge Youth Coalition.

Over the course of several years of the grant, two coalitions dropped out of the program: San Tan Valley Substance Abuse Prevention Coalition and Coolidge Youth Coalition.

The CGA, Inc. and its community coalitions reducing underage drinking and prescription drug abuse among 12-25-year-olds. Strategies utilized by the CGA, Inc. included changing adult perceptions of availability of alcohol and prescription drugs, increasing perception of risk among both youth and adults regarding alcohol and prescription drugs, and increasing the number of prescribers signed up to the Prescription Drug Monitoring Program (PDMP).

Governor's Office of Youth Faith and Family (GOYFF)

In September 2015, the GOYFF was funded as a sub-grantee and sub-contracted directly with Arizona Department of Veterans Administration (ADVS)/ACMF, MATFORCE, and the University of Arizona. The GOYFF is a cabinet level agency that administers state and federal grant programs and engages stakeholders across all sectors throughout the state to improve services and service delivery to our citizens. Through a trauma-informed lens, GOYFF develops programs, coalitions, strategies, and initiatives to support the Governor's priorities related to substance abuse, human trafficking, sexual and domestic violence, child well-being, and juvenile justice. GOYFF also serves as the Governor's faith-based office and administers the state's AmeriCorps program.

The GOYFF focus areas include: child well-being, prevention of human trafficking, juvenile justice, prevention of violence against women, service and volunteerism, AmeriCorps, substance abuse prevention, and the state Youth Commission.

Hopi Nation

The Hopi Nation is a sovereign nation located in northeastern Arizona. The reservation occupies part of Coconino and Navajo counties, encompasses more than 1.5 million acres, and is made up of 12 villages on three mesas. The PFS Project was administered by the Hopi Nation's Substance Abuse Prevention Center (HSAPC), a project of The Hopi Foundation, a 501(c)3 nonprofit organization. HSAPC provides direct services to individuals of all ages and their families living on the Hopi Reservation. Services are provided at the main office in Kykotsmovi, with satellite locations in the Hopi villages. Direct services include private and group mentoring sessions to the alcoholic, addict, and family members. Alcoholism and drug addiction is a family disease, in the Hopi culture, family is extended to clan relations and neighboring village membership.

HSAPC provides prevention education to youth from elementary school to junior and senior high schools, in village coordinated youth programs, village administrations, faith based organizations, Hopi Nation youth programs, Hopi non-profit organizations serving the youth population, and includes young adults and parents. All sectors of the community are open to prevention education. Through the PFS, the Hopi Nation was tasked with updating their needs assessment and conducting capacity building and training activities.

MATFORCE/Yavapai County Attorney's Office

MATFORCE formed in 2005 as a result of a high increase of methamphetamine use and developed a community coalition of key community stakeholders to address the substance use issues in Yavapai County. In 2010, MATFORCE became a separate 501(c)3 organization.

MATFORCE serves Yavapai County and includes the areas of: Camp Verde, Chino Valley, Cottonwood, Sedona, Prescott, Prescott Valley, and Verde Valley. Over the last several years, MATFORCE has utilized data to drive their decision-making and strategic planning processes; and increased areas of focus based on the great Prescott community's needs. In addition to addressing underage drinking, MATFORCE addresses prescription drug use with community workgroups such as the Overdose Fatality Review Board, Prenatal Care Team, and Pharmacy Team.

MATFORCE has utilized a combination of individual and environmental strategies such as evidence-based school curricula, alcohol compliance checks, and the Prescription Drug Monitoring Program (PDMP) to administer their PFS initiative.

Navajo Nation

The Navajo Nation is located in the Northern part of Arizona, extending into the states of Utah , Arizona and New Mexico; covering over 27,000 square miles. Diné Bikéyah, or Navajoland, is larger than 10 of the 50 states in America. The Navajo Nation's Treatment Center for Children and Families administered the PFS grant to primarily conduct needs assessment, capacity building, and information dissemination activities.

Specifically, the Navajo Nation's PFS activities focused on the promotion of family wellness around substance use prevention through traditional Navajo teachings, coordinating and collaborating with other prevention education groups, and conducting public service announcements to disseminate public information and education in the Navajo and English languages.

Northern Arizona Regional Behavioral Health Authority (NARBHA)

NARBHA was funded September 2013 to September 2015 to include AZYP (Mojave County), Community Bridges, Inc. (Navajo County), and MATFORCE (Yavapai County). Two (2) out of the three (3) funded coalitions received funding directly from GOYFF and AHCCCS.

Under the NARBHA contract, community coalitions were funded to complete the SPF model, complete logic models, and address underage drinking and/or prescription drug misuse.

Pasadera

Pasadera was funded from June 2015 to September 2016 to serve Pima County through the Community Prevention Coalition (CPC). Due to Pasadera closing its doors, they did not continue with PFS funding.

The Pasadera PFS project focused on underage drinking and prescription drug misuse prevention with an additional focus on college, veteran/military and Native American populations ages 12 to 25.

During the funding period, Pasadera was tasked with completing a community needs assessment, capacity building, and information dissemination.

State Epidemiological and Outcomes Workgroup (SEOW)

Arizona State Epidemiological and Outcomes (SEOW) Workgroup played an essential role in Arizona's PFS Project, serving as the hub for coordination of data, informing of data trends, and comprised of key state agency leadership and stakeholders. As a sub-grantee of the ADHS/AHCCCS, the SEOW also implemented several projects, including the "Community Data Project" in collaboration with the Arizona Criminal Justice Commission (ACJC), which is an online tool for communities across the state to access local data.

Southeastern Arizona Behavioral Health Services (SEABHS)

SEABHS provides behavioral health services, youth and family services, and integrated care services to Graham County in the Southeastern region of Arizona. SEABHS' PFS Project served the Safford and surrounding area community, including the military community located in Graham County and Eastern Arizona College. This included the partnership of the Graham County Substance Abuse Coalition. SEABHS' PFS initiative focused on reaching military youth ages 12-17 and their families and college aged individuals (18-25) to reduce underage drinking and prescription drug misuse.

Through increasing community collaborations, the Graham County Substance Abuse Coalition conducted strategies aimed to decrease perception that alcohol is easy to get, decrease youth alcohol use as a coping mechanisms for stress and depression, and increase perception of risks of using alcohol and prescription drugs.

University of Arizona (UA)

The UA's Campus Health's PFS project focused on underage drinking of college students at the UA campus located in Tucson, AZ, Yavapai County Community College located in Prescott, AZ, Pima Community College located in Tucson, AZ, and the Embry-Riddle UA campus located in Prescott, AZ. The UA is located in Pima County, the second largest county in Arizona. The UA Campus Health's PFS project utilized a combination of individual and environmental strategies to implement their PFS grant. Activities included education, partner trainings, and providing technical assistance to other coalition and community groups.

The UA conducted many activities, including, screening and referrals through “Check Up to Go” (providing immediate feedback to students regarding alcohol/drug use/misuse), educational presentations, Student Alcohol and Drug Education (SHADE) - a group program for first-time offenders that consists of three 2-hour classes and is an evidence-based program, and BASICS - an individual program where students meet for one hour with the staff member twice with approximately 2 weeks between sessions and is evidence-based.

Yavapai-Apache Nation

The Yavapai-Apache Nation is located in Northern Arizona near Camp Verde, AZ. The Youth Prevention program was centered at the Yavapai-Apache Nation’s Department of Social Services, Middle Verde Reservation, located in Camp Verde, Arizona. The Yavapai-Apache Nation is comprised of five distinct communities: Middle Verde, Camp Verde, Clarkdale, Rim Rock and Tunlii.

The scope of the Yavapai-Apache Nation Youth Prevention Program, through the PFS grant, was to build a culturally centered, peer-guided alcohol and substance abuse prevention program to serve the Nation’s at-risk youth ages 12-20 years.

The Yavapai-Apache Nation was tasked with conducting capacity building activities to collaborate, teach, and design, a peer driven youth alcohol and substance abuse prevention program that will positively change the lives of at-risk youths at the Yavapai-Apache Nation.

Project Goals and Objectives

The goals of the Arizona Partnership for Success (PFS) grant include the following:

Goal 1. *Prevent the onset and reduce the progression of underage drinking, prescription drug misuse.*

Objective 1.1: By 2018, decrease by five percent the number of Arizona college students, 18 to 25 years old, who have engaged in binge drinking as measured by the Arizona Institutes of Higher Education Network (AZIHEN) substance use survey.

Objective 1.2: Reduce in youth, ages 12-18, 30-day alcohol use from 28% in 2012 to 23% in 2018 as measured by the 2018 Arizona Youth Survey (AYS).

Objective 1.3: By 2018, increase to 64% the number of youth, ages 12-18, who perceive 1-2 drinks of alcohol per day harmful as measured by the 2018 AYS.

Objective 1.4: Reduce from 8% in 2012 to 4% in 2018 the number of youth, ages 12-18, who have used prescription drugs in the last 30 days to get high as measured by the 2018 AYS.

Objective 1.5: By 2018, decrease to 3% the number of youth, ages 12-18, who obtained the prescription drugs from home (i.e. medicine cabinet) to get high as measured by the 2018 AYS.

Objective 1.6: By 2018, increase to 45% the number of youth, ages 12-18, who indicate it would be hard or very hard to get alcohol as measured by the 2018 AYS.

Goal 2. Reduce alcohol- or prescription drug-related consequences among adolescents and young adults.

Objective 2.1: By 2018, reduce the number of alcohol- and prescription drug-related car crashes and injuries among adolescents, ages 12-20, and young adults, ages 21-25.

Objective 2.2: By 2018, reduce the number of alcohol- and prescription drug-related crimes among adolescents, ages 12-20, and young adults, ages 21-25.

Objective 2.3: By 2018, reduce the number of alcohol- and prescription drug-related emergency room visits among adolescents, ages 12-20, and young adults, ages 21-25.

Goal 3. Strengthen prevention capacity and infrastructure at state and community (sub-grantee) levels.

Objective 3.1: By 2018, increase the number of sub-grantees that report an increase in the number of Evidence-based Programs, Policies and Practices (EBPPPs) implemented.

Objective 3.2: By 2018, increase the number of sub-grantees that have received training on how to effectively implement the Strategic Prevention Framework (SPF) model.

Goal 4. Leverage, redirect, and align statewide funding streams and resources for prevention.

Objective 4.1: By 2018, increase the number of sub-grantees that report an increase in prevention activities supported by collaborations and leveraging of funding streams.

Objective 4.2: By 2018, increase the number of EBPPPs supported by collaborations and leveraging of funding streams.

Objective 4.3: By 2018, increase the number of sub-grantees that report an increase in prevention activities supported by other funding sources.

Objective 4.4: By 2018, increase the number of additional communities reached by this project as a result of other funding.

Evaluation Design and Methodology

A process and outcome evaluation were implemented as part of the State's evaluation plan that was submitted by the initial Project staff and evaluator and approved by SAMHSA and the Cross-site evaluation team of RTI. The baseline year of 2012 is utilized to compare progress of project goals over time.

Data Sources

The PFS outcomes and data sources (listed in parentheses) to measure state level outcomes were as follows:

- Past 30-day alcohol use
 - Arizona Youth Survey (AYS); administered by the Arizona Criminal Justice Commission (ACJC) to schools throughout Arizona who volunteer to participate in the survey administered to 8, 10, and 12th graders every two years on even numbered years
- Binge drinking
 - Arizona Institutes of Higher Education (AZIHE) Network's AOD Survey
- Prescription Drug Misuse and Abuse
 - Arizona Institutes of Higher Education (AZIHE) Network's AOD Survey
- Access
 - Arizona Youth Survey (AYS)
- Alcohol-related car crashes and injuries
 - Arizona Department of Transportation (ADOT)
- Alcohol and drug-related ER visits
 - Arizona Vital Statistics
- ADHS/AHCCCS/GOYFF Quarterly Sub-grantee Reports
- SAMHSA Community Level Instrument (CLI)

AYS data reported in this report were from published website publications “Arizona Youth Survey State Report” for years 2012, 2014, 2016 and 2018. For 2016, the published report, “2016 Arizona Youth Survey Trends Report” was used to report 2016 totals to assess progress over time for all respondents (grades 8, 10, and 12 combined) of the AYS; and utilized data using the “new methodology.”

It is important to note that due to changes in analytical methods, the ACJC recommends caution when interpreting and comparing 2016 data to data provided in AYS reports from prior years. Beginning with 2016 AYS data, the ACJC changed the method in which the data was analyzed due to survey questions included in the AYS to assess validity of responses. Data from past administrations has been updated to reflect changes and is available on the Community Data Portal website, http://acjc.azcjc.gov/cdp_site/default.aspx. More information on this methodological change can be found on that portal. Charts and Graphs are labeled “New Methodology” and “Old Methodology” to represent data that reflect the updated (“new”) methodology (all cases included), as well as the data analyzed using the prior (“old”) methodology, which omits respondents that indicated they had used “phenoxydine” a fake drug included in the survey in order to check the truthfulness of responses. Both methodological approaches have been included in order to 1) account for differences between the two approaches, and 2) best serve the varying needs of AYS stakeholders who may prefer the data in one form or another.

The ADHS/AHCCCS/GOYFF quarterly report format was implemented with sub-grantees quarterly along with the SAMHSA required Community Level Instrument (CLI) and utilized to report process and outcome results for the PFS project. See Table 1.

Table 1. Process Measures

LEVEL OF DATA	PROCESS MEASURE	SOURCE	FREQUENCY COLLECTED
State Level			
	Number of training and technical assistance activities per funded community provided by the grantee to support communities	ADHS/AHCCCS/GOYFF in-house collection and maintenance	Quarterly
	Reach of training and technical assistance activities (numbers served) provided by the grantee		
	Percentage of sub-grantee communities that have increased the number or percent of evidence-based programs, policies, and/or practices	ADHS/AHCCCS/GOYFF in-house collection and maintenance	
	Percentage of sub-grantee communities that report an increase in prevention activities supported by leveraging of resources		
	Percentage of sub-grantees that submit data to the grantee data system		
Community Level			
	Number of active collaborators/partners supporting the grantee's comprehensive prevention approach	ADHS/AHCCCS/GOYFF in-house collection and maintenance; CLI	Quarterly
	Number of people reached by IOM category (universal, selected, indicated) and demographic group		
	Number of evidence-based programs, policies, and/or practices implemented by sub-grantee communities		

	Number of prevention activities at the sub-grantee level that are supported by collaboration and leveraging of funding streams		
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LIMITATIONS TO THIS REPORT

Some challenges to assessing progress in Arizona’s PFS Project occurred due to changes in project administration and evaluator since Arizona was awarded the PFS grant in the fall of 2013. Staff who wrote the funded proposal, strategic plan, and evaluation plan changed over the course of the project and implemented the strategic plan and administered the grant without much of the project design background. Despite changes, staff who remained through the no-cost extension period were able to achieve many successes, including the outcomes listed in this report, their work with sub-grantees, and sustainability of many strategies and evidence-based practices and programs.

Secondary data collected from state agencies also posed challenges with the way data is reported and many times not disaggregated by age group or captured for specific substances, which is challenging when assessing progress for reduction of alcohol and prescription drug use.

Tribal Nations funded through this initiative did not disaggregate and report data in the same manner that other sub-grantees did and Tribal Nations reported numbers in the general categories of: information dissemination, education, alternatives, and problem identification/referrals. In the community level section information was included in this report if data was provided by the Tribal Nation to project staff.

It is important to note that sub-grantee level data are estimates as provided by sub-grantees to project staff. If data was not provided through quarterly reports or CLI data, the data was not included in the analyses and reporting of the data.

Lastly, it is important to note that many sub-grantees who received PFS funding through this initiative were also funded by other initiatives such as Drug-Free Communities (DFC), AHCCCS opiate efforts, and local community funding in their county. As such, multiple factors were involved with changes in outcomes depending on other efforts in funded communities.

Findings

A summary of evaluation results based on progress of Arizona’s PFS goals, are listed below by goal for the State of Arizona. Community level outcomes are listed below in a separate Community level section.

STATE RESULTS

Goal 1: Prevent the onset and reduce the progression of underage drinking and prescription drug use

The first objective for goal 1 includes: decreasing by five (5) percent the number of Arizona College students, 18 to 25 years old, who have engaged in binge drinking as measured by the AZIHE substance use survey. Results show a decrease over time, from 61.9% at baseline (2012) to 56.2% in 2018, thus showing an almost 6% decrease, but showing a slight increase from 2016 to 2018 (see Table 2).

Table 2. AZIHE Sample Sizes by Year

2012	2014	2016	2018
1,624	3,312	3,935	3,163

Table 3. AZIHE Alcohol Percentages for 18-25 year olds Participating in the AZIHE Substance Use Survey.

	2012	2014	2016	2018
Alcohol	61.9	57.4	54.4	56.2

Note. The values indicate the percent responding to the survey question regarding alcohol use.

The second objective included decreasing past 30-day alcohol use from 28% in 2012 to 23% in 2018 for youth ages 12-18 as measured by the AYS. AYS results indicate Arizona has made progress in reducing underage drinking statewide and succeeded in achieving the goal to reduce past-30 day alcohol use to 20.2% in 2018. A percentage difference from 2012 of 7.9%.

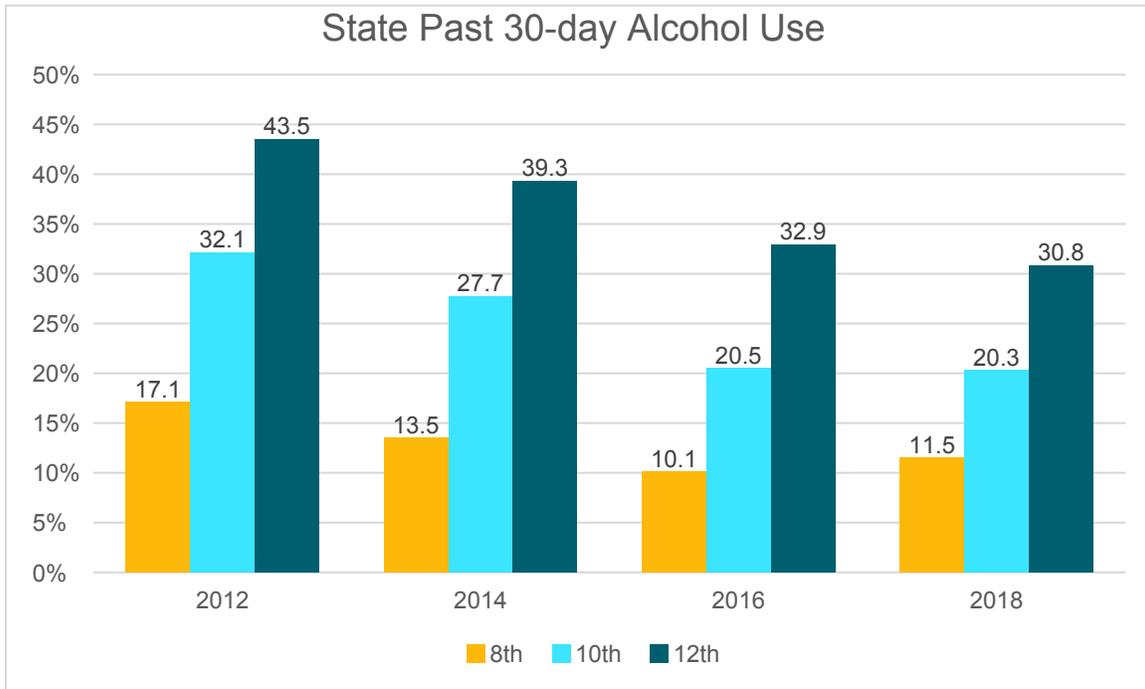
Table 4. Percent of Past 30-day Alcohol Use

2012	2014	2016	2018
28.1%	24.1%	22.4%	20.2%

Figure 1 shows the change over time for 8, 10, and 12th graders for past 30-day alcohol use, with a reduction in all grades over time, but more significantly showing a reduction from baseline to 2018.

- 8th grade: decrease from 17.1% in 2012 to 11.5% in 2018
- 10th grade: decrease from 32.1% in 2012 to 20.3% in 2018
- 12th grade: decrease from 43.5% in 2012 to 30.8% in 2018

Figure 1. State AYS Past 30-day Alcohol Use – By Grade



Youth Perception of Harm

Objective 1.3 included increasing to 64% the number of youth, ages 12-18, who perceive 1-2 drinks of alcohol per day as harmful. Table 5 displays AYS results which indicate there is still progress to be made in changing youth perceptions of harm related to alcohol; with 2018 data showing 40.1% of all students stating there was “great risk” in drinking 1-2 drinks of alcohol per day, albeit an increase from the baseline of 34.2%.

Table 5. Youth Perception of Harm If Drink Alcohol 1-2 Drinks per Day

2012	2014	2016	2018
34.2%	36.6%	N/R*	40.1%

Note. * = In 2016, published AYS reports did not provide overall results for 8, 10, 12 grades combined. Percentages reported in Table 5 are those respondents who indicated drinking 1-2 drinks of alcohol per day was a “great risk.”

Objective 1.4 included reducing from 8% in 2012 to 4% in 2018 the number of youth, ages 12-18 who have used prescription drugs in the last 30 days to get high. AYS data indicates that this objective was achieved with reductions from baseline to 2018, and reducing past 30-day substance use from 9.3% in 2012, to 3.0% (see Table 6).

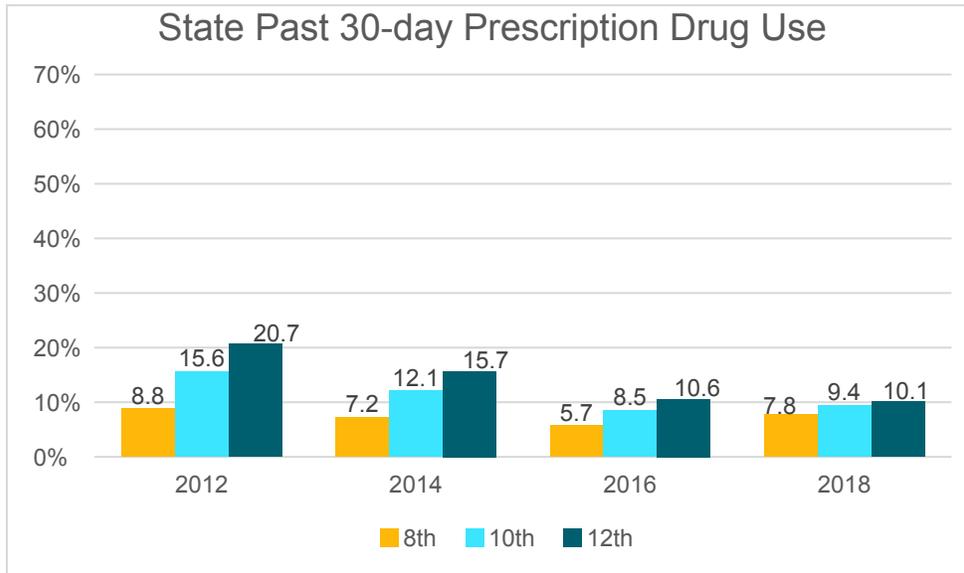
Table 6. Percent of Past 30-day Prescription Drug Use

2012	2014	2016	2018
9.3%	7.5%	6.4%	3.0%

Note. Data reported from published “AYS 2016 Trends Report.”

Figure 2 displays data from 2012 – 2018 for prescription drug use by grade. Over time, significant reductions have occurred among all grades, specifically with 12th grade students and a slight increase from 2016 to 2018 among 8th and 10th graders, but may be attributed to the AYS data analysis methodology change.

Figure 2. State AYS Past 30-day Prescription Drug Use – By Grade



Objective 1.5 stated the Arizona PFS Project would decrease to 3% the number of youth, ages 12-18, who obtained the prescription drugs from home (i.e. medicine cabinet) to get high. Although there was a reduction from 2012 to 2018 in the percent of youth stating they obtained prescription drugs from home, more than 20% (23.6%) of students stated they obtained prescription drugs from home, indicating there is still work to be done in this area.

Table 7. Percent of Youth Obtaining Prescription Drugs from Home

2012	2014	2016	2018
28.0%	24.6%	N/R*	23.6%

Note. *In 2016, published AYS reports did not provide overall results for 8, 10, 12 grades combined.

Objective 1.6 stated by 2018 there would be an increase to 45% in the number of youth, ages 12-18, who indicate it would be hard or very hard to get alcohol. Progress cannot be reported at this time, due to the data not being reported consistently over time for the period of 2016. Specifically, the 2016 published AYS report does not include overall percentages for all students combined (8th, 10th, 12th graders).

Goal 2: Reduce alcohol or prescription drug-related consequences among adolescents and young adults.

The first objective under this goal includes a reduction in the number of alcohol- and prescription drug-related car crashes and injuries among adolescents, ages 12-20, and young adults, ages 21-25.

The Arizona Department of Transportation (ADOT), annually reports crashes and injuries for alcohol. State data is broken out by age for individuals under 15 years of age and through the age of 20 as is reported below with available data published through 2017. Data is not reported for persons aged 21-25 as ADOT categories are 21-24 years of age and 25-34 years of age, etc. Overall, alcohol-related car crashes have decreased over time since 2012; including the number of alcohol-related fatal crashes. In 2012, 9.6% of all alcohol-related car crashes were by individuals 20 years old and younger, with a reduction to 6.4% in 2017. Similarly, for persons 21-24 years of age, data shows a reduction over time, with 5,216 crashes reported in 2012, reduced to 4,675 crashes in 2017.

In summary, the Arizona PFS Project has achieved reducing the number of alcohol-related car crashes.

Table 8. Total Number of Alcohol-Related Car Crashes – 20 years of Age and Younger – Arizona Department of Public Safety

Year	Number for Persons 20 years old and younger	Number of Persons 21-24 years old	Total
2012	501	986	5,216
2013	433	906	4,961
2014	363	842	4,692
2015	352	886	4,757
2016	344	807	4,736

2017	299	812	4,675
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Table 9. Total Number of Fatal Alcohol-Related Car Crashes – 21-24 Years of Age – Arizona Department of Public Safety

Year	Number for Persons 20 years old and younger	Number of Persons 21-24 years old	Total
2012	24	43	208
2013	13	31	182
2014	8	26	177
2015	14	35	207
2016	12	35	195
2017	13	29	225

It should also be noted that car crashes are not reported specifically for prescription drug crashes and are not included in this report.

Alcohol and Drug-related Emergency Room Visits

Another objective for this goal included reducing the number of alcohol- and prescription drug-related emergency room visits among adolescents, ages 12-20, and young adults, ages 21-25.

Data from ADHS on the number of emergency room visits with alcohol abuse as first-listed diagnosis is reported for adolescents and children 19 years of age and younger; with the next age category report as 20-44 years of age. Therefore, these results only include data for adolescents 19 years old or younger. Data show a significant decrease from 2014 to 2016, with 187 emergency room visits reported in 2016 compared with 1,223 from 2014. This indicates an achievement in reducing the number of emergency room visits.

Table 10. Number of emergency room visits with Alcohol Abuse as First-listed Diagnosis

2012	2014	2016
1,371	1,223	187

Note. 2018 data not yet published on ADHS website.

Emergency room results for opiates shows a significant reduction in emergency room visits and discharges between 2014 (1,115) and 2016 (790), an indication that this objective was achieved.

Table 11. Number of emergency room visits with Opiates* as First-listed Diagnosis

2012	2014	2016
1,562	1,115	790

Note. 2018 data not yet published on ADHS website; *For purposes of this report, opiates is used to report progress of prescription drug use.

Goal 3: Strengthen capacity and infrastructure at state and community (sub-grantee) levels. Please see results below in the “quarterly report and CLI data section below.”

Goal 4: Leverage, redirect, and align statewide funding streams and resources for prevention. Please see results below in the “quarterly report and CLI data section below.”

COMMUNITY LEVEL RESULTS

The following results are reported by sub-grantee communities to assess changes over time for underage drinking and prescription drug use measured by county AYS reports where sub-grantee implemented their PFS projects. For consistency purposes with sub-grantees receiving funding at two (2) different time-points, 2014, 2016, and 2018 data is reported for sub-grantees.

Alcohol

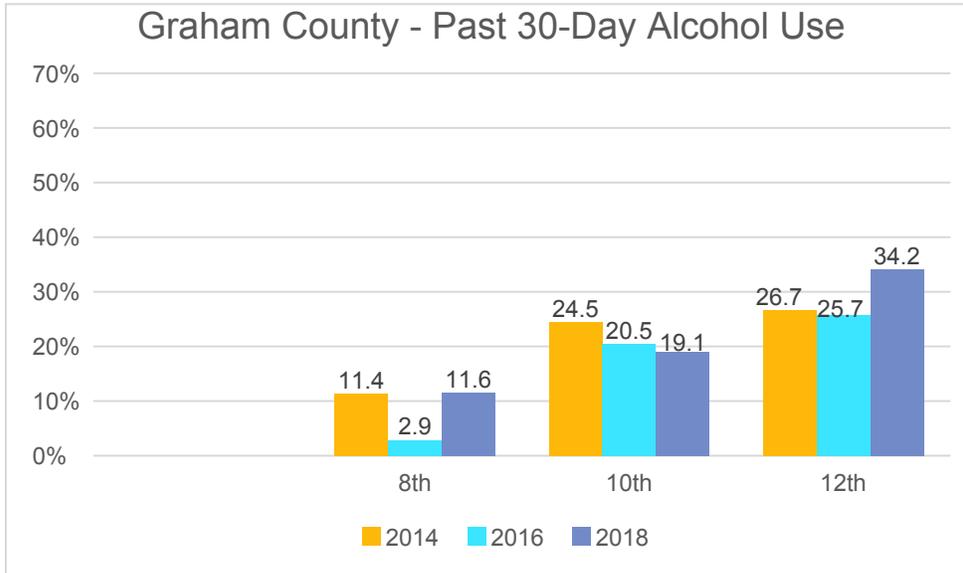
SEABHS - Graham County

Graham County AYS results indicate increases for 8th and 12th graders from 2014 to 2016 in past-30 day alcohol use Data shows the following:

- In 2018, 11.6% of 8th graders stated they drank alcohol in the past 30-days, an increase of 8.7%
- A decrease of 10th graders who stated they drank alcohol in the past 30-days from 20.5% in 2016 to 19.1% in 2018

- 34.2% of 12th graders stated they drank alcohol in the past 30-days (2018), an increase of 8.5%

Figure 3. AYS Graham County Past 30-day Alcohol Use

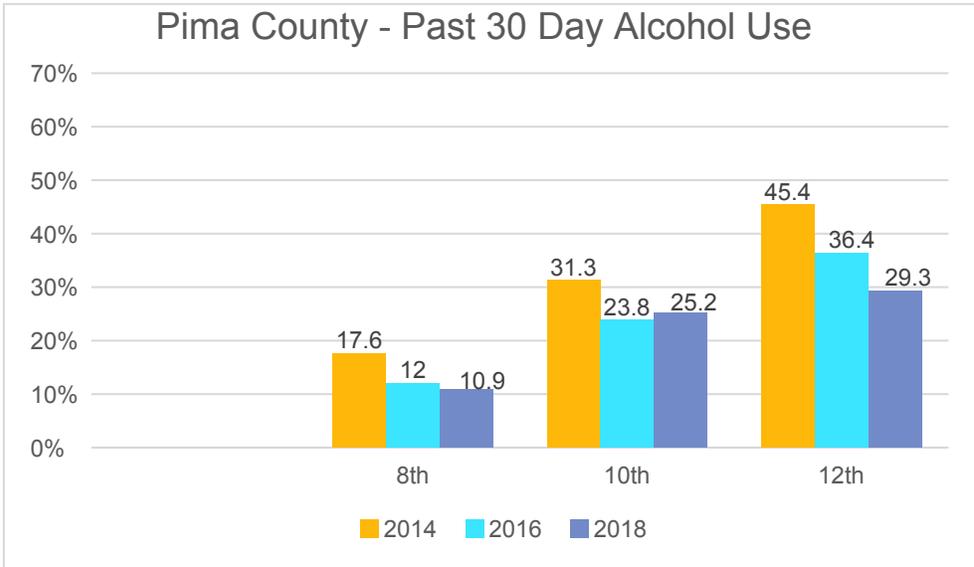


University of Arizona - Pima County

Pima County AYS results indicate that over time, there was a reduction in past 30-day alcohol use from 2014 to 2018 among 8th and 12th graders. 2018 data shows the following:

- 10.9% of 8th graders stated they had drank alcohol in the past 30-days (significant reduction from 2014)
- 25.2% of 10th graders indicated they drank alcohol in the past 30-days (slight increase from 2016)
- 29.3% of 12th graders stated they drank alcohol in the past 30-days (significant reduction from 2014)

Figure 4. AYS Pima County Past 30-day Alcohol Use

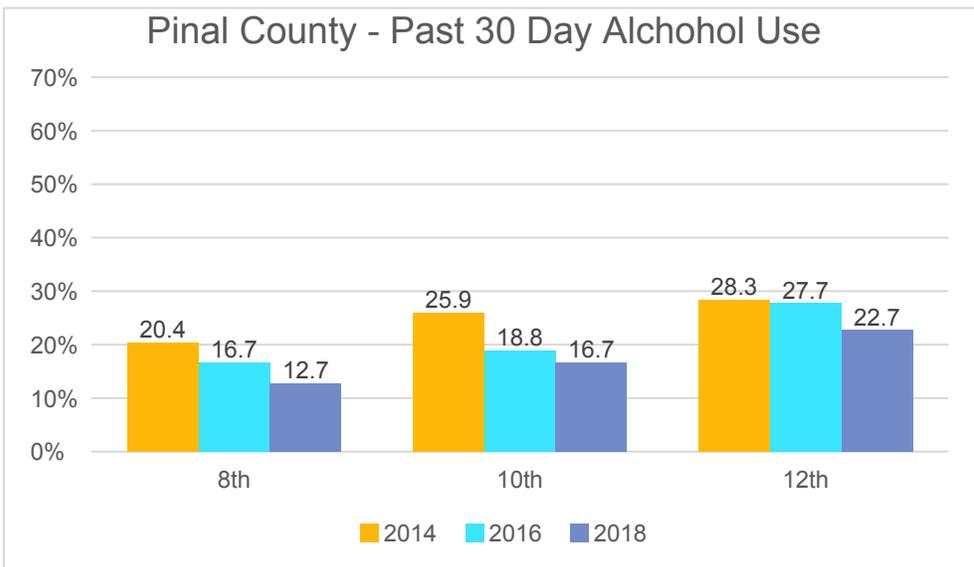


CGA, Inc. - Pinal County

Pinal County AYS results indicate that since 2012, there has been a decrease in past 30-day alcohol use among 8, 10, and 12th graders. 2018 data shows the following:

- 7.7% reduction from 2012 to 2018 for 8th graders
- 9.2% decrease for 10th graders from 2014 to 2018
- 5.6% reduction for 12th graders from 2014 to 2018

Figure 5. AYS Pinal County Past 30-day Alcohol Use

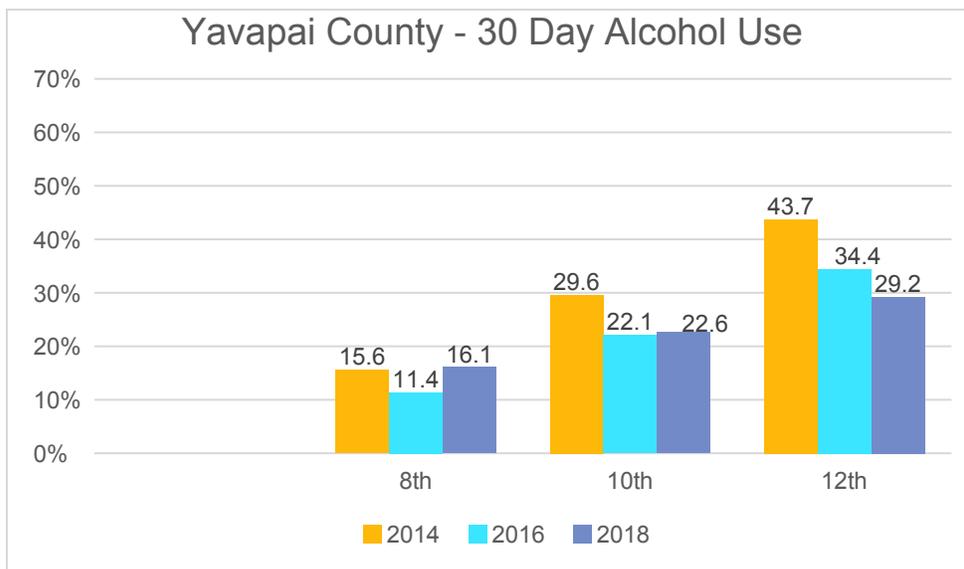


MATFORCE - Yavapai County

Yavapai County AYS results indicate decreases of alcohol use among 12th graders with an increase from 2016 (11.4%) to 2018 (16.1%) for 8th graders stating they used alcohol in the past 30-days. Data shows the following:

- Percentage of 10th graders indicating they used alcohol in the past 30-days was relatively unchanged, but showing a slight increase between 2014 and 2016 of .05%
- A decrease between 2014 and 2018 of 12th graders stating they drank alcohol in the past 30-days
- A reduction from 34.4% in 2016 to 29.2% in 2018 among 12th grade use of alcohol in the past 30-days

Figure 6. AYS Yavapai County Past 30-day Alcohol Use

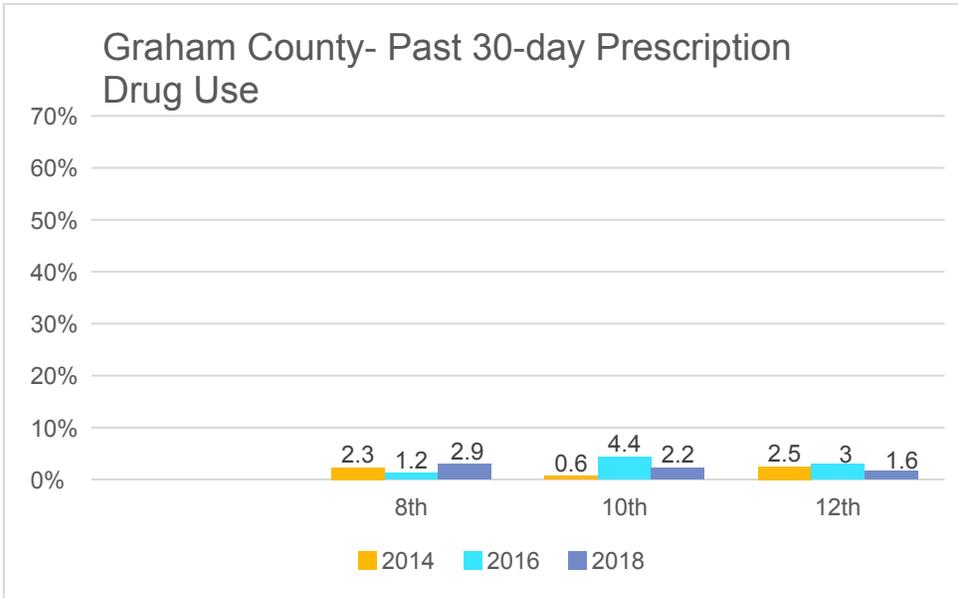


Prescription Drugs

SEABHS – Graham County

Past 30-day prescription drug use for Graham County showed fluctuations across timepoints, but reductions for grades 10 and 12 from 2016 to 2018.

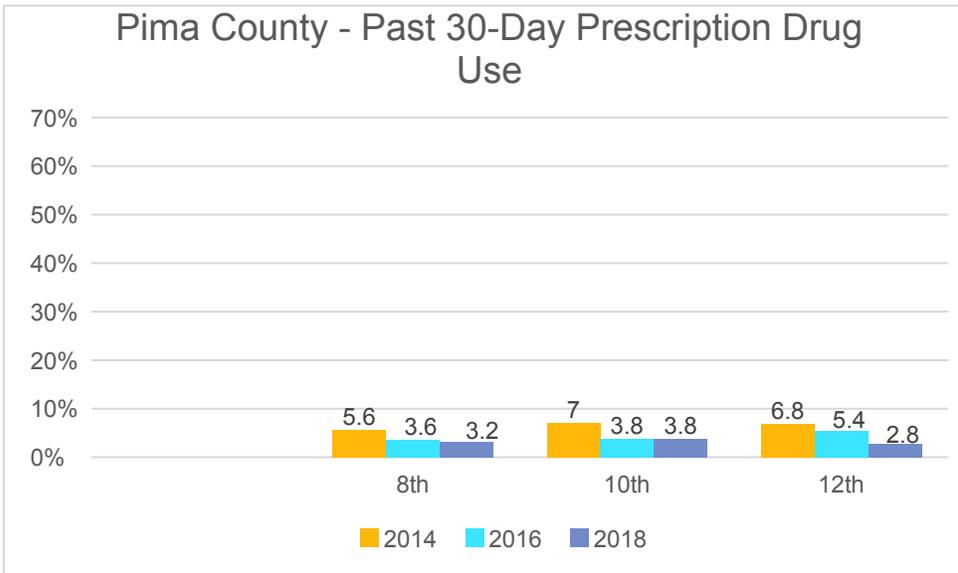
Figure 7. AYS Graham County Past 30-day Prescription Drug Use



University of Arizona – Pima County

Pima County past 30-day prescription drug use, with reductions from 2014, 2016, and 2014 for grades 8 and 12; and no changes for 10th graders between 2016 and 2018.

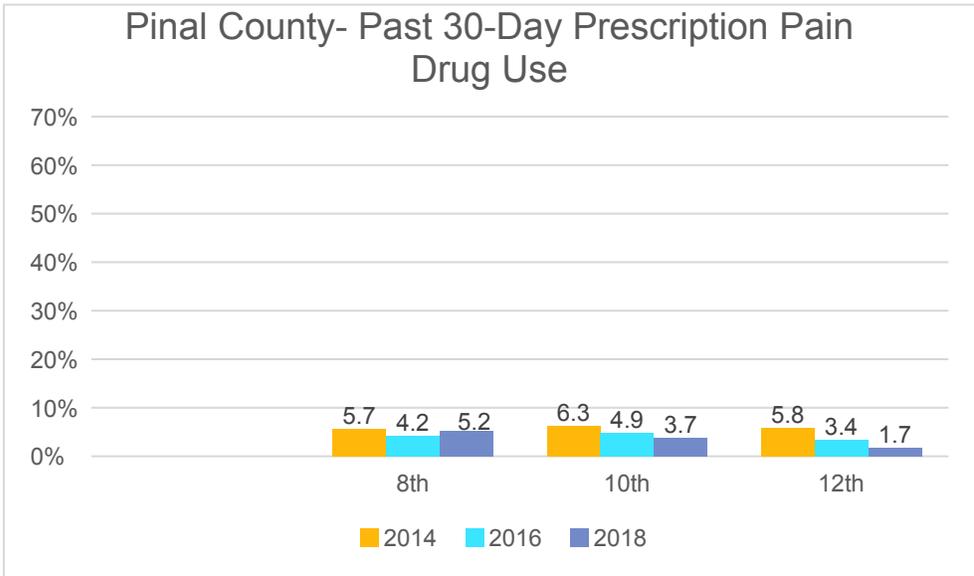
Figure 8. AYS Pima County Past 30-day Prescription Drug Use



CGA, Inc. – Pinal County

Past 30-day prescription drug use for Pinal County youth for 8th graders increased from 2014 to 2016 but declined during the same time period for 10th and 12th graders.

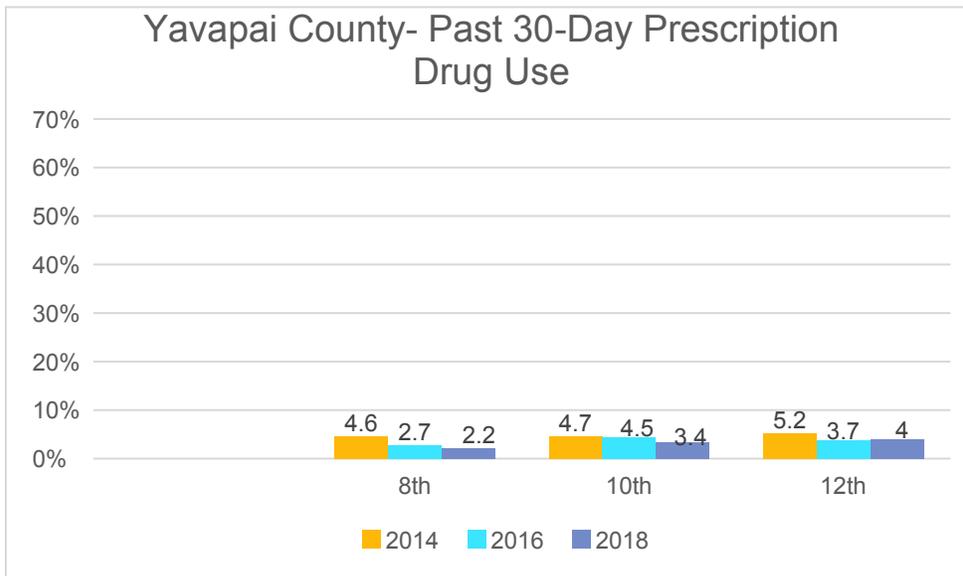
Figure 9. Pinal County Past 30-day Prescription Drug Use



MATFORCE – Yavapai County

Yavapai County past 30-day prescription drug use showed declines for 8th and 10th graders for 2014, 2016, and 2018; with increased reported youth use for 12th graders in 2016 (3.7%) compared to 2018 (4.0%).

Figure 10. Yavapai County Past 30-day Prescription Drug Use



Quarterly Report and Community Level Instrument (CLI) Data

In this report, the Pima Prevention Partnership Evaluation team summarized data that was submitted by the sub-grantees in Quarterly Progress Reports and impact tables beginning with the January 2016 Quarterly Report which covered the project period October 1, 2015 through December 31, 2015. This section also includes CLI data where necessary to complement quarterly reports. It should be noted that quarterly and CLI reporting was only required of sub-grantees implementing individual and environmental strategies in their respective communities. As such, ACJC, GOYFF, and SEOW did not submit quarterly report or CLI data. In addition, the three (3) funded Tribal Nations did not complete quarterly or CLI reporting due to their funding cycles and deliverables. Where noted below, some strategy information is included as appropriate from the Tribal Nations.

Populations Served: Demographics

Based on data reported by the sub-grantees in their quarterly reports, individuals ages 12-24 years comprised 18.5% of the population served. Adults ages 25 and over represented 80.1% of those served. This is mostly a result of targeted information dissemination efforts to parents and adults to create awareness and provide education of underage drinking and prescription drug misuse. The population served was slightly more female (52.1%) than male (47.9%). The majority of those for whom demographic data was collected identified as white/Caucasian (80.3%); nearly 43.0% of those served identified as Hispanic. Similar percentages of the population served identified as Native American, African American, or as more than one race, roughly 5-6% for each group. Table 12. Below shows the demographics for the populations served collectively and by sub-grantee.

Table 12. Demographics of Populations Served by Sub-grantee

Demographics	AZYP	CGA	SEABHS	UofA	Total	%

						Valid ^a
Age						
0 - 4	0	5,394	0	0	5,394	0.43%
5 - 11	142	13,049	160	0	13,351	1.05%
12 - 14	603	25,502	450	0	26,555	2.09%
15 - 17	1,388	33,884	246	0	35,518	2.80%
18 - 20	30	72,240	207	1,144	73,621	5.81%
21 - 24	18	98,132	47	52	98,249	7.75%
25 - 44	175	443,418	14	0	443,607	35.00%
45 - 54	152	187,287	0	0	187,439	14.79%
55 - 64	79	187,092	2	0	187,173	14.77%
65+	74	196,610	9	0	196,693	15.52%
Unknown	6	1,322,459	384	2,919	1,325,768	--
Total	2,667	2,585,067	1,519	4,115	2,593,368	
Gender						
Male	1,271	604,917	595	1,765	608,548	47.86%
Female	1,396	658,302	879	2,309	662,886	52.14%
Other	0	0	0	10	10	0.00%
Unknown	0	1,321,858	45	29	1,321,932	--
Total	2,667	2,585,077	1,519	4,115	2,593,378	
Race						
American Indian / Alaska Native	88	64,491	355	13	64,947	5.12%
Asian	51	28,496	15	57	28,619	2.26%
Black/African American	40	73,081	64	48	73,233	5.78%
Native Hawaiian / Other Pacific Islander	20	2,843	6	0	2,869	0.23%
White/Caucasian	1,574	1,015,107	611	725	1,018,017	80.33%
More than one Race / Other	709	78,730	179	54	79,672	6.28%
Unknown	184	1,322,297	289	3,218	1,325,988	--
Total	2,666	2,585,045	1,519	4,115	2,593,345	
Ethnicity						
Not Hispanic / Latino	1,855	723,146	762	922	726,685	57.31%
Hispanic or Latino	811	539,997	479	127	541,414	42.69%
Unknown	0	1,321,934	278	3,066	1,325,278	--
Total	2,666	2,585,077	1,519	4,115	2,593,377	

a. Individuals with "Unknown" characteristics were excluded from the percent valid calculations.

Notes: ADVS was a technical assistance provider and therefore did not collect/report on demographic data for program recipients. In addition, Pasadera was not funded beyond its first year and therefore did not provide direct services to program participants. And finally, the UA's demographic data was tabulated by the Evaluator and represents those who participated in BASIS, The Buzz, SHADE, and the Online AUDIT Screen.

This demographic data should be interpreted with caution, as demographic data was reported inconsistently among the sub-grantees. For example, MATFORCE did not report demographic data and as demonstrated by the relatively large numbers reported, CGA, Inc. data appears to have included estimates of demographic information for large information dissemination activities. In the latter case, because the data was received in aggregate form, the large information dissemination data could not be extracted.

Populations Served: Institute of Medicine (IOM) Classifications

Table 13. Below shows the number of program recipients broken down by the Institute of Medicine (IOM) (universal, selected, indicated) category of individuals. This data should be interpreted with caution as the IOM definitions and requirements for reporting on demographic data were applied and reported inconsistently among the sub-grantees. For this report, the evaluator attempted to standardize this data by recategorizing some of the data; however, some of the data received by the evaluator was already aggregated and could not be recategorized and standardized. An explanation for how each sub-grantee reported its data appears in the Table notes.

Table 13. IOM Classifications for Prevention by Sub-grantee

IOM Classification	AZYP^a	CGA, Inc.^b	SEABH S^c	MATFORCE^d	UofA^e	Total	% Total
Universal (Indirect):	0	0	0	0	0	0	0.0%
Universal (Direct):	2,748	8,668	1,501	6,353	79,956	99,226	73.9%
Selective:	0	200	599	33,119	0	33,918	25.3%
Indicated:	0	0	0	168	962	1,120	0.08%
Total	2,748	8,868	2,100	39,640	80,918	134,274	

- a. AZYP reported its program recipients as “Universal” and did not distinguish between Universal (Indirect) and Universal (Direct). In addition, no program recipients were identified as Selective or Indicated.
- b. CGA, Inc. reported 2,576,209 Universal (Indirect) program recipients in quarterly reports. The evaluator identified that this number includes estimated information dissemination contacts, materials dissemination contacts, and number of attendees at community/informational events; because these efforts are not considered “interventions” that align with the IOM classifications, they were not included in this table. Some of the contacts reported as Universal (Indirect) may in fact have been categorized

correctly; however, because the data the evaluator received was already aggregated, the Evaluator was not able to verify this.

- c. SEABHS identified 764,344 contacts as Universal (Indirect) in quarterly reports as radio listeners, social media contacts, and movie ad viewers; this number was excluded from the table above and are instead counted in the Information Dissemination section of this report.
- d. MATFORCE reports did not distinguish between Universal (Indirect) and Universal (Direct) contacts, so the evaluator coded these contacts as Direct. Also, 1,433,559 contacts classified as Universal in quarterly reports actually represented estimated information dissemination contacts, materials dissemination contacts, or number of attendees at community/informational events; this number was excluded from the table above because these are not considered “interventions” that align with the IOM classifications; these efforts are counted in the Information Dissemination section of this report.
- e. The University of Arizona reports did not distinguish between Universal (Indirect) and Universal (Direct), so the evaluator coded these contacts as Direct.

Notes: ADVS was a technical assistance provider, it did not collect/report on demographic data for program recipients. In addition, Pasadera was not funded beyond its first year and therefore did not provide direct services to program participants.

Community Partnerships

The sub-grantees of the PFS project successfully engaged a multitude of partnering agencies from wide ranging sectors. Partners came from all levels of government, to health and social change advocates, to private for profit and not for profit agencies and businesses, many but not all of which were related to general health or behavioral health service sector.

A qualitative analysis was conducted using each sub-grantee's quarterly reports. These reports described the partnerships that were developed over the course of the project. The summary information provided here is useful in understanding the diversity of community involvement, where grantees might have placed emphasis in selecting partnering agencies, and where grantees successfully engaged partners.

The overarching categories of the types of partners engaged in the Partnerships for Success are shown here:

HEALTH/BEHAVIORAL HEALTH/ADVOCACY
<ul style="list-style-type: none">• Behavioral Health Advocacy Group• Behavioral Health Provider• Health Organization/Provider• Health Related Business (such as a Pharmacy, hospital)• Other coalition or grant project (e.g., a SUD Coalition, First Things First)
GOVERNMENT RELATED
<ul style="list-style-type: none">• Government Entity (Fed, State, County, City/Town)• Government - Specific to Health/BHS Unit• Government – Individual (e.g., legislators, city officials, etc.)• Government related Councils/Workgroups• Law Enforcement - any level (including jails, prisons, & personnel, like State AGs Office or DEA)• Public Services (e.g., library, parks, waste management, Community Centers)• Tribal Government/Organization or Unit within Government
HUMAN SERVICES - NON-GOVT
<ul style="list-style-type: none">• Human Services Non-Profits (e.g., homelessness, food banks, etc.)• Human Service Provider - Lg Scale - grant maker (e.g., United Way, Habitat for Humanity)
COMMUNITY-BASED ORGANIZATIONS
<ul style="list-style-type: none">• Community Member Organization (e.g. Rotary, Elks)• Community Org/Member Org Population-specific (e.g., Non-Profit Network, AZ Veteran's Alliance)
MEDIA RELATED
<ul style="list-style-type: none">• Media -- all types (radio, print, online, television)
EDUCATION RELATED
<ul style="list-style-type: none">• Schools/Districts/Education (k-12)

- Higher Education – College or university overall or unit within

YOUTH RELATED

- Youth Center/Youth Group or Organization
- Youth Membership Organization/Advocacy Group/Coalition
- Youth-related non-profit or business

OTHER

- Religious Organization or faith community
- Sports Team - Pro/Sports Organizations (e.g., the AZ Cardinals, Little League)
- Business - General
- Business - Specific Membership Organization or Chamber of Commerce
- Population Specific Coalition, Council, Advocate or Professional Membership Org (e.g., Pinal Hispanic Council, Retired Teachers' Association)
- Community Member - individual

UNIVERSITY RELATED

- Police/safety
- Health/Behavioral Health/Counseling
- Student Life (including clubs and organizations)
- Student/Public Affairs (population specific and general)
- Greek Life
- University Admin offices (legal, financial Aid, etc.)
- Ancillary University Support Organizations/Boosters
- Coalitions/Associations/Grant Teams

Overall

In total, there were 785 partnering entities described by the sub-grantees. Of these, business had the largest share of representation with 326 counted. It should be noted that one sub-grantee indicated 311 businesses but did not name them individually. Other than businesses, the most commonly described partners (12.5%) were among various levels of government. Within this category, those agencies and personnel related to law enforcement constituted almost half (43%) of the total. An almost identical share of partners (14.1%) consisted of schools, school districts, K-12 related entities, or higher education entities. Health and behavioral health related groups, organizations, and providers were also well-represented, consisting of 11.3% of the total.

Looking across the sub-grantees, there were similarities and differences. Five of the sub-grantees had between 43 and 86 partners. However, MATFORCE had 456 partners. Here again, 311 of them were unnamed businesses, but even without the 311, it would be 145 partners, a substantially higher number than the rest. Most of the sub-grantees had some representation in all categories. There were few gaps in types of partners. Within the Health/Behavioral Health/Advocacy category, out of the non-university-based sub-grantees, only one lacked a behavioral health provider; one lacked a health related business; one lacked a population-based coalition/organization/advocate or some kind of professional membership organization.

There were slightly more gaps between types of governmental partners across the sub-grantees. Only one sub-grantee had an individual representative from a legislator's office or city official, and only two had Tribal Government participation. A few other distinctive characteristics are described within the following brief overviews of each sub-grantee's partners.

AZYP

AZYP had 43 partners along with good representation from each sector. If they were light on a particular type of partner compared to the other similar sub-grantees, it was health related government offices, community member organizations, and youth groups or youth related non-profits. However, AZYP had especially strong support from area schools and school districts, law enforcement, and the faith community.

CGA, Inc.

CGA, Inc. described 86 partners. Representation among each category was well disbursed with few gaps. The most represented type of partners were mentioned with total numbers instead of names. A total of 19 of the 86 partners were noted to be from the religious/faith community. Another 22 were schools or school districts. CGA was one of two sub-grantees that did not formally report partnerships with any human service non-profits (large or small), although this sub-grantee is known to have partnered with other coalitions that are non-profits within Pinal County. CGA, Inc. provided funding to other county coalitions as part of their PFS initiative to implement PFS activities county-wide.

MATFORCE

As mentioned above, this sub-grantee had by far the most partners, with 456 partners, 311 of which were businesses not individually named. Each category had multiple partners from most of the individual types of partners. They were especially heavily represented by various levels of government offices, law enforcement, media and schools/school districts. The least represented category within this sub-grantee was youth related partners, although this sub-grantee hosted a number of youth-based activities. There were two non-profit related businesses described, but no youth membership organizations or youth centers or Youth groups/organizations.

SEABHS

Overall, this sub-grantee had 65 partners. Eastern Arizona College was an especially prolific partner, with 14 of the partners coming from units within the college (e.g., nursing and psychology departments, campus police, and dorm personnel). Their partners also included a number of law enforcement groups (including federal and state prisons), population-specific Membership Organizations (e.g., military organizations such as AFW), schools and school districts along with eight businesses named specifically. This was also one of two coalitions that reported specific community members as partners.

PASADERA

Pasadera reported having 25 partners engaged in their PFS project. The most represented type of partners were health/behavioral health/advocacy organizations (10), six of which were community coalitions, including the Community Prevention Coalition, Underage Drinking Collaborative, and Medicine Abuse Prevention Initiative Collaborative. Government-related organizations (7) were also well represented. This sub-grantee reported having similar numbers of collaborators from education entities (3), youth-related organizations (2), and businesses (3), but did not report any partnerships with any human service non-profits (large or small), community-member organizations, or media-related organizations.

UNIVERSITY OF ARIZONA

A separate set of categories was utilized specific to university operations. In total, the UA (including YCC, Embry Riddle, and PCC) had 52 partners. The largest grouping of partners (15) were from the administrative departments within the University not related to specific aspects of student life, such as the Dean's Office, Risk Management Services, and the like. The next largest share of partners came from university related health, behavioral health, or counseling departments. Student life and university-affiliated support or booster organizations were also well represented within the larger partnership. The UA also provided technical assistance and training to other PFS sub-grantees related to the "Buzz" and with administration of a college age survey.

AZ. DEPT. OF VETERANS' SERVICES & AZ COALITION FOR MILITARY FAMILIES

ADVS/ACMF ADVS/ACMF was contracted to engage and provide technical assistance and training to organizations that provide prevention and behavioral health services to the military and veteran population and to develop the Military/Veteran Resource Network. This included technical assistance and training to various coalitions in the state. Through these efforts, ADVS/ACMF collaborated with 58 partners. Most frequently represented among the collaborations were behavioral health providers (16). There were also half as many health care providers (8). Also notably, there were 10 human service providers geared to providing support to veterans and their families in various capacities. ADVS/ACMF also worked directly with coalitions that were working with the military providing technical assistance.

Implementation (Primary Prevention Activities)

Each of the sub-grantees implemented a variety of primary prevention activities, which were analyzed and grouped according to the six CSAP strategies (Information Dissemination, Education, Alternatives, Environmental, Community-Based Process, and Problem Identification and Referral). This section includes a summary table displaying the number of activities implemented by each sub-grantee for each of the six CSAP strategies as well as more detailed information about the types of activities implemented. Where possible, the number of contacts reached or individuals served has been provided.

CSAP Strategy #1 (Information Dissemination): This strategy provides awareness and knowledge of the nature and extent of alcohol, tobacco and drug use, abuse and addiction and their effects on individuals, families and communities. It also provides knowledge and awareness of available prevention programs and services. Information dissemination is characterized by one-way communication from the source to the audience, with limited contact between the two. Information Dissemination activities are categorized as follows:

CSAP Activity	Code	CSAP Activity	Code
Materials Development	STN10 2	Speaking Engagements and Brief Educational Programs	STN1 16
Materials Dissemination	STN10 9	Information Requests Responded To	STN1 18
Media Messages/Media Campaign Activities	STN11 2	Materials Review	STN1 19

The Information Dissemination activity most commonly used by the sub-grantees was Materials Dissemination (50.4%), followed by Speaking Engagements and Brief Educational Programs (19.3%), Media Messages/Campaign Activities (16.0%), and Materials Development (13.4%). Only one sub-grantee reported responding to Information Requests and none reported conducting Materials Review. Table 15 below provides a breakdown of the types of Information Dissemination activities implemented by sub-grantees. It is important to note that these numbers reflect the number of different types of activities implemented and not the actual number of activities implemented. For example, a student-led social norms campaign may have been developed once, but implemented in the community across multiple schools; such an activity would be recorded as a single campaign activity in Table 14 below.

Table 14. Information Dissemination Activities by Sub-grantee

CSAP Activity	AZYP	CGA, Inc.	MATFORC E	SEABH S	UA	Total	% Total
Materials Development	6	3	4	1	2	16	13.4%
Materials Dissemination	8	17	17	10	8	60	50.4%
Media Messages/Media Campaign Activities	3	2	9	2	3	19	16.0%
Speaking Engagements and Brief Educational Programs	12	5	8	0	3	23	19.3%
Information Requests Responded to	1	0	0	0	0	1	0.00%
Materials Review	0	0	0	0	0	0	0.00%
Total Types of	19	27	36	11	16	119	

Activities							
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Note: ADVS was a technical assistance provider and therefore did not conduct/report on information dissemination activities. In addition, Pasadera was not funded beyond its first year and therefore did not

Below are examples of some of the Information Dissemination Activities implemented. For an exhaustive list of the Information Dissemination activities conducted by each of the sub-grantees, please refer to Appendix A.

- Materials Development
 - *Stand with Me, Be Drug Free Campaign* developed, trademarked, and implemented (MATFORCE)
 - Development of messaging and PSAs by youth coalitions for National Drug and Alcohol Facts week (AZYP)
 - Development of a resource guide for parents related to substance abuse prevention and treatment (CGA, Inc.)
 - Development of a brochure for college students on being an active bystander (SEABHS)
- Materials Dissemination
 - Dissemination of prevention packets by Resident Assistants containing posters, safe drinking cards, Red Cup pens and magnets, alcohol moderation bookmarks, printed Q&Q columns, and unruly ordinance, underage drinking, and Campus Health brochures (UA)
 - Distribution of Senior Rx Abuse Kits to senior citizens (MATFORCE)
 - Distribution of resources information and stickers in medication bags at local pharmacies to inform of prescription drug boxes (SEABHS)
 - Dissemination of information to military families on how to develop a family substance abuse plan (SEABHS)
- Media Messages/Campaign Activities
 - Student-led social norms campaign implemented in 3 high schools and 2 middle schools called M.O.S.T (Making Our Students Think) (CGA, Inc.)
 - *Project 21* where email sent to students within their birthday month with link to Project 21 website on responsible drinking, with follow-up email with survey sent to those who open the original email (UA)
 - Pizza box top contests of prevention messaging (MATFORCE)
 - Airing of multiple (14+) PSAs on local media (radio/TV/movie theater) with prevention messaging for the general, college, and military populations (SEABHS)
 - *Sign up to Save Lives Campaign* implemented, which encourage physicians to use the Drug Monitoring Program (MATFORCE)
 - Navajo Nation conducted public service announcements (PSAs) and broadcasts monthly in Navajo and English languages
- Speaking Engagements and Brief Educational Programs

- Assemblies conducted at elementary and middle schools where information presented on underage drinking and prescription drug abuse (MATFORCE)
 - 'Drunk Buster' karts demonstration by DARE officer at community 4th of July celebration (CGA, Inc.)
 - Wellness Initiative for Senior Education (WISE) training which includes information on medication use, storage, and disposal (AZYP)
 - Keeping Communities Whole Through Collaborative Partnerships 1-day conference held 2015, 2016, 2017 (GOYFF)
 - Annual Drug Summit 1 ½ days Conference held in 2018 (co-sponsored by the GOYFF)
- Information Requests Responded To
- Responded to a request to develop a presentation on healthy choices for area high school (AZYP)

Number of Contacts through Information Dissemination Activities

The Evaluation Team estimates that a minimum of 6,723,276 contacts were made through Information Dissemination activities by the sub-grantees. Table 15 includes a summary of the information dissemination efforts for each sub-grantee; the numbers are estimates based on data gleaned from quarterly reports. The reporting of individuals reached through information dissemination activities was highly inconsistent; the numbers therefore cannot be reported in greater detail.

Table 15. Estimated Number of Contacts Through Information Dissemination Activities

Sub-grantee	Approximate Totals
AZYP	<p><u>Social Media: 92,984 contacts</u> <u>Other: 63,697</u></p> <p><u>Total: 156,681</u></p> <p>Notes: AZYP did not quantify information dissemination efforts in quarterly reports; therefore, the evaluator used data from the outreach participation reports to quantify the number of contacts through information dissemination for this sub-grantee.</p>
CGA, Inc.	<p><u>Total: 2,576,209 contacts</u></p> <p>Notes: CGA, Inc. reported 2,576,209 Universal (Indirect) program recipients in quarterly reports. Because data was reported in aggregate form, the evaluator was not able to determine exactly how this number was quantified; it likely represents information dissemination efforts, as education strategy activities were categorized as Universal (Direct)</p>
SEABHS	<p>Radio ad: 669,429 contacts Social media: 1,617 contacts Movie ads: 93,298 contacts</p>

	<p><u>Total: 764,344 contacts</u></p> <p>Notes: SEABHS quantified contacts made through radio ads, social media, and movie ads.</p>
MATFORCE	<p><u>Total: 1,167,318 contacts</u></p> <p>Notes: This estimate is based on numerical counts of dissemination efforts provided in the MATFORCE quarterly reports. Because the data in the reports was presented in aggregate form, the total cannot be broken down by individual activities.</p>
UA	<p>Project 21 website: 5,864 contacts Posters: 16,400 contacts Fyers: 3,300 contacts Emails to Families: 14,248 contacts Computer home page: 2400 contacts Bulletin boards: 300 contacts Table tents: 500 contacts Living Wild! E-magazine subscription (Average # subscribers (1430) x # articles (9)) = 12,870 contacts Student Newspaper (Estimated # readers (20,000) x # Red Cup Column articles (82)) = 1,640,000 contacts Email lists (Average # subscribers (3,992) x Red Cup Column articles (82)) = 327,344 contacts Facebook interactions: 10,380 Twitter interactions: 8,920 Instagram interactions: 16,198</p> <p><u>Total: 2,058,724 contacts</u></p>
Navajo Nation	<p><u>Total: 1,205 contacts</u></p>
Yavapai-Apache Nation	<p><u>Total: 5,395 contacts</u></p>
Total	<p>Estimated <u>6,726,876 contacts</u> made through Information Dissemination Efforts</p>

Notes: ADVS was a technical assistance provider and therefore did not conduct/report on information dissemination activities. In addition, Pasadera was not funded beyond its first year and therefore did not conduct information dissemination activities.

CSAP Strategy #2 (Education): This strategy involves two-way communication and is distinguished from the Information Dissemination strategy by the fact that interaction between the educator/facilitator and the participants is the basis of its activities. Activities under this strategy aim to affect critical life and social skills, including decision-making, refusal skills, critical analysis (e.g., of media messages) and systematic judgment abilities. Education activities are categorized as follows:

CSAP Activity	Code
Curriculum Delivery	STE20 1

Collectively, the sub-grantees implemented 41 Education Strategies, representing 34 unique Curricula. (See Table 16). On average, the sub-grantees implemented approximately eight different curricula, with one implementing five curricula and another implementing 17. Most of the Curricula used are trademarked, including two developed by MATFORCE (*Stand with Me, Be Drug Free* curriculum for elementary and middle school students & *What do you Know?* online alcohol and drug curriculum for middle school students). Most of the curricula were used by one sub-grantee. However, the *RX360* curriculum was used by four sub-grantees, *RX360 Community* was used by three, and *Teen Maze, The Buzz, Alcohol: True Stories, and Question, Persuade and Refer (QPR)* were each used by two.

Table 16. Curricula/Education Strategies by Sub-grantee

	AZYP	CGA, Inc.	SEABHS	MATFORC E	UA	Total
Number of Curricula/ Education Strategies	5	6	5	17	7	41

In addition, GOYFF hosted three (3) 1-day educational conferences in 2015, 2016, and 2017, “Keeping Communities Whole Through Collaborative Partnerships.” In 2018, GOYFF co-sponsored the “Arizona Drug Summit.” This included sponsorships for all PFS funded sub-grantees to attend.

Table 17 below provides the number of program recipients for each curricula by sub-grantee.

Table 17. Number of Program Recipients by Sub-grantee and Type of Curricula or Strategy

Name of Curriculum	AZYP	CGA, Inc.	SEABHS	MATFORC E	UA	Total
<i>Botvin's LifeSkills Training</i>	326					326
<i>Question, Persuade and Refer (QPR)</i>	33				Unknown	33
<i>Teen Maze</i>	1,062			3,712		4,774
<i>Not My Kid's Substance Abuse</i>		1,271				1,271
<i>Keepin' It REAL</i>		658				658
<i>RX360</i>	27	1,766	612	2,018		4,423
<i>RX360 Community/Adult</i>	15	290	258			563
<i>Risks of Alcohol Use workshops (youth)</i>		803				803
<i>Risks of Alcohol Use workshops (adults)</i>		126				126
<i>M.O.S.T. Training</i>		135				135
<i>6th Grade Project (AOD Ed)</i>			780			580
<i>The Buzz</i>			143		2,715	2,858
<i>Alcohol: True Stories</i>			190	11		201
<i>Over the Counter</i>				583		583
<i>Alcohol EDU</i>				1,923		1,923
<i>Rx EDU</i>				189		189
<i>Keep a Clear Mind</i>				360		360
<i>Drugs and the Body</i>				1,090		1,090
<i>Stand with Me, Be Drug Free</i>				5,100		5,100
<i>Not Prescribed</i>				413		413
<i>Brain Power</i>				1,090		1,090
<i>Chasing the Dragon</i>				389		389
<i>Drugs: True Stories</i>				112		112
<i>White Cross Project</i>				301		301
<i>What do you Know?</i>				145		145

<i>Owning Up</i>				308		308
<i>Overtaken</i>				35		35
Drug and Alcohol Impact Panel				62		62
<i>BASICS</i>					166	166
<i>SHADE</i>					852	852
<i>Electronic Check-Up to Go</i>					20,636	20,636
Online <i>AUDIT Screen</i>					251	251
Individualized counseling					143	143
Total	1,463	5,049	1,983	16,017	24,763	49,616

Notes: ADVS was a technical assistance provider and therefore did not conduct/report on educational activities. In addition, Pasadera was not funded beyond its first year and therefore did not implement educational activities.

In addition, educational activities were conducted by Navajo Nation and Yavapai-Apache Nation: 1,272 served through prevention workshops on drugs and alcohol; Yavapai-Apache Nation served 442 through educational prevention workshops, including traditional cultural activities such as archery and pottery.

Lastly, the GOYFF partnered with ADHS to conduct RX360 trainer of trainer (TOT) workshops throughout the state, including online materials.

CSAP Strategy #3 (Alternatives): This strategy provides for the participation of target populations in activities that exclude alcohol, tobacco and other drug use. The assumption is that constructive and healthy activities offset the attraction to, or otherwise meet the needs usually filled by alcohol, tobacco and other drugs and would, therefore, minimize or obviate resort to the latter. Alternative activities are categorized as follows:

CSAP Activity	Code
Alternative Activity or Program Delivery and Support Group Activities	STA301

Collectively, the sub-grantees implemented 138 alternative activities, with the UA implementing the vast majority (91.1%) of the activities. It is estimated that 30,021 individuals participated in these activities.

Table 18. Alternative Activity or Program Delivery and Support Group Activities by Sub-grantee

	AZYP	CGA, Inc.	MATFORCE	SEABHS	UA	Total
Number of Activities	7	1	5	2	123	138
Number of Participants	1,060	Unknown	1,265	85	27,684	30,021

Notes: ADVS was a technical assistance provider and therefore did not conduct/report on Alternative activities. In addition, Pasadera was not funded beyond its first year and therefore did not implement alternative or support group activities.

Activities conducted for this strategy by the sub-grantees include the following:

- Approximately 123 drug and alcohol-free social activities and events including but not limited to movie screenings, Subs and Rubs events, Safe Spring Break Events, Art competitions, BBQs, and Awards Banquets (UA)
- Three *Walk with Me, Be Drug Free* events (MATFORCE)
- Youth Poster Judging Contest (MATFORCE)
- Know Your Limits Event (MATFORCE)
- Hosted three movie and game nights for youth (AZYP)
- Grad Bash Lock-In event held at three high schools (AZYP)
- Drop in hours for youth not participating in after school activities (AZYP)
- Community dance for local teenagers (CGA, Inc.)
- Movie night for military and veteran families at area school (SEABHS)
- VFW Post 10385 Clean Up Day/prosocial activity/community project (SEABHS)

The Navajo Nation also had a total of 23 participants in alternative activities.

CSAP Strategy #4 (Environmental): This strategy establishes or changes written and unwritten community standards, codes and attitudes, thereby influencing incidence and prevalence of the abuse of alcohol, tobacco and other drugs used in the general population. This strategy is divided into two subcategories to permit distinction between activities which center on legal and regulatory initiatives and those that relate to the service and action oriented initiatives. Environmental activities are categorized as follows:

CSAP Activity	Code	CSAP Activity	Code
Efforts, Campaigns or Activities to Reduce Illegal Sales to Minors	STV40 2	Product Placement, Pricing or Packaging Change	STV40 6
Other Public Policy Effort, Campaign or Activity	STV40 3	Product Advertising/Marketing/Promotion Policy Change	STV40 7
Law, Regulation or Ordinance Passed	STV40 5	Other Community Policy Change	STV40 8

Collectively, the sub-grantees implemented approximately 23 environmental activities. The most common type of activity was “Other Public Policy Effort, Campaign or Activity” followed by “Efforts, Campaigns or Activities to Reduce Illegal Sales to Minors.” Implemented by half of the sub-grantees and representing 14 of the 22 activities implemented, these included activities such as covert underage drinking buys at liquor establishments, training of local liquor outlets regarding underage drinking, fake ID recognition training for law enforcement officers, community-wide Dump the Drug events, and coordination of multiple drug take-back locations. Table 19 below shows the number of environmental strategies implemented by each sub-grantee.

Table 19. Environmental Strategies by Sub-grantee

CSAP Activity	AZY P	CGA, Inc.	MAT- FORCE	Pasader a	SEABH S	U A	Total
Efforts, Campaigns or Activities to Reduce Illegal Sales to Minors	1	2	3	0	0	0	6
Other Public Policy Effort, Campaign or Activity	1	0	5	0	4	0	9
Law, Regulation or Ordinance Passed	0	0	2	1	0	0	3
Product Placement, Pricing or Packaging Change	1	0	0	0	1	0	2
Product Advertising/Marketing/Promotion Policy Change	0	0	0	0	0	0	0
Other Community Policy Change	0	0	3	0	0	0	3

Notes: ADVS was a technical assistance provider and therefore did not conduct/report on Environmental strategies. Pasadera was not funded beyond its first year.

Activities conducted for this strategy by the sub-grantees include the following:

AZYP

- Outreach to alcohol retailers to discuss Social Hosting (STV402)
- Coordination of multiple drug take back events (STV103)
- Outreach to alcohol retailers to discuss product placement (STV406)

CGA, Inc.

- Training of liquor outlets using Arizona Department of Liquor Licenses and Control curriculum to prevent sales to minors (STV402)
- Compliance checks of liquor outlets (STV402)

MATFORCE

- Covert underage drinking buys and citations given at liquor establishments (STV402)
- Title IV refresher and fake ID recognition training for law enforcement officers (STV402)
- Provision of information and support for implementation of a Sobriety Check Point (STV402)
- Community-wide Dump the Drugs Events to reduce supply of expired drugs, create awareness, and provide information (STV403)
- Coordination of multiple drug take back locations (STV403)
- Advocated with Medical Associations to encourage support for Senate Bill 1283 making the Prescription Drug Monitoring Program mandatory in Arizona (STV403)
- Advocated for passing House Bill 2355 and House Bill 2265 to increase access to Nalaxone in Arizona (STV403)
- *Stand with Me, Be Drug Free* Proclamations presented at town council, college board, and board of supervisors meetings (STV403)
- Passing of Senate Bill 1283 making the Prescription Drug Monitoring Program mandatory in Arizona (STV405)
- Passing of House Bill 2355 increasing access to Nalaxone in Arizona (STV405)
- Establishment of a fraudulent prescription drug alert systems for pharmacies in Yavapai County (STV408)
- Development of an Opioid Policy by and for the Verde Valley Medical Center Offices (STV408)
- Development of a Pain Management Agreement by and for the Verde Valley Medical Center Offices (STV408)
- Development of pharmacy protocols for dispensing naloxone by the Arizona Pharmacy Association (STV408)

PASADERA

- During its first and only year of funding, Pasadera built a solid relationship with the Underage Drinking Collaborative (UAD); the UAD subcommittee of which Pasadera was a part worked to successfully amend the Social Host Ordinance in Pima County (STV405)

SEABHS

- Partnered with local pharmacies to put sticker on medication bags when opioids are prescribed (STV406)
- Community-wide Dump the Drugs Events to reduce supply of expired drugs, create awareness, and provide information (STV403)
- Coordination of multiple drug take back locations (STV403)
- Partnered with Walmart to distribute opiate neutralizers to safely dispose of prescription drugs (STV403)

CSAP Strategy #5 (Community-Based Process): This strategy aims to enhance the ability of the community to more effectively provide prevention and treatment services for alcohol, tobacco and drug abuse disorders. Activities in this strategy include organizing, planning, enhancing efficiency and effectiveness of services implementation, interagency collaboration, coalition building and networking. Community-based processes/activities are categorized as follows:

CSAP Activity	Code	CSAP Activity	Code
Formal Community Team Formation	STC501	New Ongoing Prevention Activity Established	STC512
Formal Community Team Meetings	STC502	Research or Evaluation Activity	STC513
Other Formal Community Team Activities	STC503	Research or Evaluation Report	STC514
Community Needs Assessment	STC504	Marketing	STC515
Strategic Plan	STC505	Staff Development	STC516
Consultation and Technical Assistance	STC507	Sustainability Plan	STC517
Accessing Services and Funding	STC508	Signed Memorandum of Agreement/Understanding	STC518
Community Training	STC509	Grant Review Panel	STC519
Research or Evaluation Plan	STC511		

The sub-grantees of the Partnerships for Success project successfully engaged a multitude of community-based processes over the course of the grant. An analysis of the community-based processes implemented was conducted using each sub-grantee’s

quarterly reports. The ability to categorize and quantify the processes conducted by each sub-grantee depended on the information included in the quarterly reports source documents. Because sub-grantees were not specifically asked to report on all community-based process activities (e.g., signed memorandum of agreement/understanding, grant review panel, etc.) in the quarterly reports, the level of detail regarding these activities varied greatly among the sub-grantees; as such, the numbers presented in this section may be artificially low. Although it is not possible to ascertain with perfect accuracy the number of community-based processes each sub-grantee engaged in, the summary information provided here is useful in understanding which processes the sub-grantees placed emphasis.

Collectively, the sub-grantees engaged in approximately 271 community-based process activities across 11 specific CSAP activities (See Table 20 below). The CSAP activity in which all sub-grantees participated was conducting formal community team meetings, with one sub-grantee citing meeting participation with as many as 21 different groups. Another common activity among the sub-grantees was sustainability planning; technical assistance was provided by the grantee to all sub-grantees on sustainability, and all sub-grantees were required to develop and provide a sustainability plan and to address sustainability within their communities in quarterly reports during the final project year. In addition, all but two sub-grantees were successful in accessing some level of funding. And finally, all but one coalition reported receiving staff development and all but two coalitions reported providing consultation/technical assistance.

Based on the information provided in the quarterly reports, there were a number of CSAP activities that were less commonly implemented or not implemented at all. For example, none of the sub-grantees reported conducting formal activities related to the community-based practices of Marketing, Signed Memorandum of Agreements/Understanding, or Grant Review Panel. Again, the numbers identified for some activities may be a function of the sub-grantee reporting requirements and may actually be higher than reported.

Table 20. Community-Based Process Activities by Sub-grantee

CSAP Activity	AZY P	CGA, Inc.	MATFORC E	PASADER A	SEABH S	UA	ADV S	Total
Formal Community Team Formation	2	1	1	1	1	1	0	6
Formal Community Team Meetings ^a	2	2	16	4	3	21	3	52
Other Formal Community Team Activities	0	0	9	0	1	1	0	11
Community Needs Assessment	1	1	1	1	1	1	0	6

Strategic Plan	1	1	1	1	1	1	1	7
Consultation and Technical Assistance ^b	3	2	1	0	0	3	75	84
Accessing Services and Funding	3	1	4	0	0	2	1	11
Community Training ^c	3	4	24	1	5	0	0	37
New Ongoing Prevention Activity Established	0	0	0	0	1	1	0	2
Marketing	0	0	0	0	0	0	0	0
Staff Development ^d	7	1	4	3	17	13	0	45
Sustainability Plan	1	3	1	1	1	4	1	11
Signed Memorandum of Agreement/Understanding	0	0	0	0	0	0	0	0
Grant Review Panel*	0	0	0	0	0	0	0	0

- a. This number represents the number of meetings with different groups conducted by each sub-grantee and not the actual number of meetings conducted.
- b. Consultation and Technical Assistance activities were defined by the Evaluator as assistance provided to community partners and not to the sub-grantees themselves. ADVS did not distinguish between Technical Assistance and Community Training in their progress reports; as such, all activities were categorized by the Evaluator as “Technical Assistance.”
- c. “Community Training” activities include trainings provided to the community by the sub-grantees; it does not include education activities and implementation of evidence-based curricula.
- d. “Staff Development” activities were defined by the Evaluator as trainings provided to the sub-grantees themselves in order to strengthen their knowledge base or increase capacity; attendance and presentations at national conferences were categorized as staff development.
- e. *GOYFF just recently formed a grant review panel for their sub-grantee funding.

Note: Research and evaluation planning, activities, and reporting by the sub-grantee organizations are not described in this report.

Below are examples of some of the Community-Based Process Activities implemented. For an exhaustive list of the Process Activities conducted by each of the sub-grantees, please refer to Appendix B.

- Formal Community Team Formation
 - Formation of campus “Lions Club,” which is the first Omega Leos Club at a junior college in the State of Arizona (SEABHS)
 - Development of Yavapai County Overdose Fatality Review Board (MATFORCE)

- Development of the Community Assessment Team (CAT) to develop data driven and community-driven interventions (Pasadera)
- Formal Community Team Meetings
 - Military and College subcommittee meetings (SEABHS)
 - Youth coalition meetings (AZYP)
- Other Formal Community Team Activities
 - Development of a parent and community member information dissemination plan (SEABHS)
 - Establishment of protocols for reviewing overdose deaths for the Yavapai County Overdose Fatality Review Board (MATFORCE)
- Community Needs Assessment
 - Community needs assessments conducted by coalitions to identify any gaps in resources by most coalitions (CGA, Inc.)
 - Needs assessment activities (e.g., administration of surveys, focus groups, and key informant interviews) conducted and steered by Community Assessment Team (Pasadera)
 - Community-wide needs assessment conducted (SEABHS)
- Strategic Plan
 - Monitoring of the development and implementation of community-level strategic plans (AZYP)
 - Biennial strategic planning sessions by coalitions (CGA, Inc.)
 - Strategic planning process held involving key stakeholders for the *Be Connected* Program, which has multiple phases, including statewide expansion of the program (ADVS)
- Consultation and Technical Assistance
 - Provision of technical support to middle and high schools on 2016 and 2018 Arizona Youth Survey (AZYP)
 - Technical assistance/presentations provided to corporate pharmacies, pharmacists, physicians, medical office managers, etc. on the software used to access the Prescription Drug Monitoring Program (MATFORCE)
- Accessing Services and Funding
 - Funding of coalition through a Drug Free Communities grant administered by a local school (AZYP)
 - The Arizona-based Halle Foundation funded a \$200,000 grant to La Frontera Arizona to expand the *Be Connected* Program with three full-time navigators (ADVS)
- Community Training
 - Lunch and Learn series for community and coalition members on basic prevention topics (AZYP)
 - Substance Abuse Prevention Skills Training for the community on the Strategic Prevention Framework and the Institute of Medicine Model for Prevention, Treatment and Maintenance (SEABHS)

- Hosted Resource Navigation Training for military population in Graham County with ACMF (SEABHS)
- Drug Recognition training provided to Department of Child Safety employees (MATFORCE)
- Keeping Communities Whole Through Collaborative Partnerships 1-day conference held 2015, 2016, 2017 (GOYFF)
- New Ongoing Prevention Activity Established
 - Conducted six *Raising the Bar* Statewide student leadership conferences (UA)
 - Established ongoing prevention activities at EAC, including implementation of the EAC AOD Survey (SEABHS).
- Staff Development/Training
 - Attended staff training on sustainability provided by GOYFF (AZYP)
 - Professional development/staff training on Motivational Interviewing, Brief Alcohol Screening and Referral to Treatment, and social norms media development (UA)
 - Received guidance on intervention mapping and assistance in choosing culturally competent evidence-based programs for military families from fellow PFS sub-grantee ACMF and received survey materials and intervention mapping materials for preventing drinking and prescription drug misuse among college students from PFS sub-grantee U of A (SEABHS)
 - Keeping Communities Whole Through Collaborative Partnerships 1-day conference held 2015, 2016, 2017 (GOYFF)
 - A tribal specific training for the PFS was held in 2017 for Substance Abuse, Prevention and Treatment efforts in Northern Arizona

Description of Training/Technical Assistance Activities Provided by ADVS

ACMF was contracted to engage and provide technical assistance and training to organizations that provide prevention and behavioral health services to the military and veteran population and to develop the Military/Veteran Resource Network.

In total, ADVS/ACMF conducted more than 75 in-person trainings/technical assistance sessions with 4,557 individuals associated with 58 organizations (See Table 20). The trainings/technical assistance were on topics including but not limited to suicide prevention, resource navigation, and military culture as well as orientations on the partnership process and assistance on the creation of resource profiles for the Resource Network.

Additionally, in October 2014, the ACMF was invited to present their capacity-building model as part of a best practice showcase of states at the first National Guard Bureau Joining Community Forces Workshop at Camp Dawson in West Virginia. In addition to a presentation of our model, there was also a panel discussion with the other best practice states. The event was hosted by General Frank J. Grass, Chief, National Guard Bureau.

Table 21. Training/Technical Assistance Activities provided by ADVS

Number of Outreach/TA/Trainings	Number of Individuals provided TA/trained	Number of Organizations that Collaborated with and/or Received TA/Trainings from ADVS
75	4,557	58

Below is a summary of notable AZMF/ACMF capacity-building efforts and initiatives.

- *Be Connected Model*
 - Arizona was selected as a pilot program site for the federal Clay Hunt Suicide Prevention Act. As lead implementation partners for *Be Connected*, ADVS/ACMF launched the program in April 2017 in partnership with the VA, AHCCCS, GOYFF, TriWest, the Arizona National Guard and the Office of the late Senator John McCain. The program is expanding in reach and recognition and features: a *24/7 support line* available to service members, veterans, family members, providers; as of September 2018, the support line had fielded over 4,700 calls and navigators had had over 1,800 encounters. In addition, over 3,700 navigators had been trained statewide.
 - A *Military/Veteran Resource Network* website which features organizational profiles, resource profiles, navigation guides, and a resource match tool; as of September 2018, the online network had more than 1,200 resources matchable to service members, veterans and families across 200 potential criteria.
 - *Be Connected* has gained national recognition in Washington, DC; it was presented at the national VA/DoD suicide prevention conference in 2017 as well as mentioned in a 2017 congressional hearing.
- *Statewide Symposium in Support of Service Members, veterans and Their Families Clinical Track*
 - ADVS/ACMF supported the clinical track of the statewide symposium in both 2016 and 2017. The clinical track has focused on substance use prevention and treatment and the mental health of military/veteran family members.
- *Military/Veteran Community Networks (MVCCN)*
 - ADVS/ACMF lead the implementation of the Northern, Central, and Southern Arizona Community Networks, which convene quarterly. Meetings focused on the key statewide initiatives affecting the military and veteran community and includes representatives of all three VA Health Care systems.
- *VA Community Mental Health Summits*

- ADVS/ACMF provided technical assistance in 2016 and 2017 to the VA Health Care systems in Arizona in their implementation of three VA community mental health summits.
- *Southern Arizona Regional Community Events*
 - ADVS/ACMF held six community events throughout Southern Arizona in an effort to build out the Communities feature on the Resource Network.

CSAP Strategy #6 (Problem Identification and Referral): This strategy aims at identification of those who have indulged in illegal/age-inappropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs in order to assess if their behavior can be reversed through education. It should be noted, however, that this strategy does not include any activity designed to determine if a person is in need of treatment. Problem Identification and Referral activities are categorized as follows:

CSAP Activity	Code
Screening for Education or Referral	STP601

The UA implements three educational activities that could be categorized as Problem Identification and Referral activities. These include:

- *SHADE*, a Self-Help for Alcohol and Other Drug Use and Depression program used with college students with alcohol infractions (852 participants);
- *Electronic Check-Up to Go* strategy, which includes an email sent to all freshmen at UA containing a link to an online assessment which provides immediate personalized feedback indicating level of substance abuse risk and comparing their data to campus norms (20,636 student assessments completed); and
- Online *AUDIT Screen* created by Campus Health Services for students (251 participants).

Table 22. Problem Identification and Referral Activities by Sub-grantee

	AZYP	CGA, Inc.	MATFORC E	SEABHS	UA	Total
Types of Activities	0	0	0	0	3	3
Program Recipients	0	0	0	0	21,739	21,739

Notes: ADVS was a technical assistance provider and therefore did not conduct/report on activities related to Problem Identification and Referral. Pasadera was not funded beyond its first year and therefore did not engage in this CSAP strategy.

Progress in Meeting Community-Level Process Measures

- Community-Level Process Measure #1: Number of active collaborators/partners supporting the grantee’s comprehensive prevention approach

In total, there were 785 partnering entities described within the sub-grantees. Of these, business had the largest share of representation with 326 counted. It should be noted that one sub-grantee indicated 311 businesses but did not name them individually. Other than business, the most commonly described partners (12.5%) were among various levels of government. Within this category, those agencies and personnel related to law enforcement constituted almost half (43%) of the total. An almost identical share of partners (14.1%) consisted of schools, school districts, k-12 related entities, or higher education entities. Health and behavioral health related groups, organizations, and providers were also well-represented, consisting of 11.3% of the total.

For more detailed information on the numbers and types of collaborations the sub-grantees engaged in, please refer to the “Community Collaborations” section of this report.

- Community-Level Process Measure #2: Number of people reached by IOM category (universal, selected, indicated) and demographic group

Populations Served: Institute of Medicine (IOM) Classifications

Table 22. Below shows the number of program recipients broken down by the Institute of Medicine (IOM) (universal, selected, indicated) category of individuals. This data should be interpreted with caution as the IOM definitions and requirements for reporting on demographic data were applied and reported inconsistently among the sub-grantees. For this report, the evaluator attempted to standardize this data by recategorizing some of the data; however, some of the data received by the evaluator was already aggregated and could not be recategorized and standardized. An explanation for how each sub-grantees reported its data appears in the Table notes.

Table 23. IOM Classifications for Prevention by Sub-grantee

IOM Classification	AZYP^a	CGA, Inc.^b	SEABH S^c	MATFORCE^d	UofA^e	Total	% Total
Universal (Indirect):	0	0	0	0	0	0	0.0%
Universal (Direct):	2,748	8,668	1,501	6,353	79,956	99,226	73.9%
Selective:	0	200	599	33,119	0	33,918	25.3%
Indicated:	0	0	0	168	962	1,120	0.08%
Total	2,748	8,868	2,100	39,640	80,918	134,274	

- f. AZYP reported its program recipients as “Universal” and did not distinguish between Universal (Indirect) and Universal (Direct). In addition, no program recipients were identified as Selective or Indicated.
- g. CGA, Inc. reported 2,576,209 Universal (Indirect) program recipients in quarterly reports. The evaluator identified that this number includes estimated information dissemination contacts, materials dissemination contacts, and number of attendees at community/informational events; because these efforts are not considered “interventions” that align with the IOM classifications, they were not included

in this table. Some of the contacts reported as Universal (Indirect) may in fact have been categorized correctly; however, because the data the evaluator received was already aggregated, the Evaluator was not able to verify this.

- h. SEABHS identified 764,344 contacts as Universal (Indirect) in quarterly reports as radio listeners, social media contacts, and movie ad viewers; this number was excluded from the table above and are instead counted in the Information Dissemination section of this report.
- i. MATFORCE reports did not distinguish between Universal (Indirect) and Universal (Direct) contacts, so the evaluator coded these contacts as Direct. Also, 1,433,559 contacts classified as Universal in quarterly reports actually represented estimated information dissemination contacts, materials dissemination contacts, or number of attendees at community/informational events; this number was excluded from the table above because these are not considered “interventions” that align with the IOM classifications; these efforts are counted in the Information Dissemination section of this report.
- j. The University of Arizona reports did not distinguish between Universal (Indirect) and Universal (Direct), so the evaluator coded these contacts as Direct.

Notes: ADVS was a technical assistance provider, it did not collect/report on demographic data for program recipients. In addition, Pasadera was not funded beyond its first year and therefore did not provide direct services to program participants.

Populations Served: Demographics

Table 24 below shows the demographics for the populations served by each sub-grantee.

Table 24. Demographics of Populations Served by Sub-grantee

Demographics	AZYP	CGA, Inc.	SEABH S	UofA	Total	% Valid
Age						
0 - 4	0	5,394	0	0	5,394	0.43%
5 - 11	142	13,049	160	0	13,351	1.05%
12 - 14	603	25,502	450	0	26,555	2.09%
15 - 17	1,388	33,884	246	0	35,518	2.80%
18 - 20	30	72,240	207	1,144	73,621	5.81%
21 - 24	18	98,132	47	52	98,249	7.75%
25 - 44	175	443,418	14	0	443,607	35.00%
45 - 54	152	187,287	0	0	187,439	14.79%
55 - 64	79	187,092	2	0	187,173	14.77%
65+	74	196,610	9	0	196,693	15.52%
Unknown	6	1,322,459	384	2,919	1,325,768	--
Total	2,667	2,585,067	1,519	4,115	2,593,368	
Gender						
Male	1,271	604,917	595	1,765	608,548	47.86%
Female	1,396	658,302	879	2,309	662,886	52.14%
Other	0	0	0	10	10	0.00%
Unknown	0	1,321,858	45	29	1,321,932	--
Total	2,667	2,585,077	1,519	4,115	2,593,378	
Race						
American Indian / Alaska Native	88	64,491	355	13	64,947	5.12%

Asian	51	28,496	15	57	28,619	2.26%
Black/African American	40	73,081	64	48	73,233	5.78%
Native Hawaiian / Other Pacific Islander	20	2,843	6	0	2,869	0.23%
White/Caucasian	1,574	1,015,107	611	725	1,018,017	80.33%
More than one Race / Other	709	78,730	179	54	79,672	6.28%
Unknown	184	1,322,297	289	3,218	1,325,988	--
Total	2,666	2,585,045	1,519	4,115	2,593,345	
Ethnicity						
Not Hispanic / Latino	1,855	723,146	762	922	726,685	57.31%
Hispanic or Latino	811	539,997	479	127	541,414	42.69%
Unknown	0	1,321,934	278	3,066	1,325,278	--
Total	2,666	2,585,077	1,519	4,115	2,593,377	

Notes: ADVS was a technical assistance provider and therefore did not collect/report on demographic data for program recipients. In addition, the UA's demographic data was tabulated by the Evaluator and represents those who participated in BASIS, The Buzz, SHADE, and the Online AUDIT Screen. Pasadera was not funded beyond its first year and therefore did not provide direct services to program participants.

This demographic data should be interpreted with caution, as demographic data was reported inconsistently among the sub-grantees. For example, MATFORCE did not report demographic data and as demonstrated by the relatively large numbers reported, CGA, Inc. data appears to have included estimates of demographic information for large information dissemination activities. In the latter case, because the data was received in aggregate form, the large information dissemination data could not be extracted.

- Community-Level Process Measure #3: Number of evidence-based programs, policies, and/or practices implemented by sub-grantee communities

Collectively, the sub-grantees implemented 41 Education Strategies, representing 34 unique evidence-based programs or practices. On average, the sub-grantees implemented approximately eight different curricula or strategies, with one implementing five and another implementing 17. Most of the Curricula used are trademarked, including two developed by MATFORCE (*Stand with Me, Be Drug Free* curriculum for elementary and middle school students & *What do you Know?* online alcohol and drug curriculum for middle school students).

Table 25. Curricula Delivery by Sub-grantee

	AZYP	CGA, Inc.	SEABHS	MATFORC E	UA	Total
Number of Curricula/ Education Strategies	5	6	5	17	7	41

In addition, GOYFF hosted three (3) 1-day educational conferences in 2015, 2016, and 2017, "Keeping Communities Whole Through Collaborative Partnerships." In 2018, and

GOYFF co-sponsored the “Arizona Drug Summit.” This included sponsorships for all PFS funded sub-grantees to attend.

Table 26. Number of Program Recipients by Sub-grantee and Type of Curricula

Name of Curriculum	AZYP	CGA, Inc.	SEABHS	MATFORC E	UA	Total
<i>Botvin’s LifeSkills Training</i>	326					326
<i>Question, Persuade and Refer (QPR)</i>	33				Unknown	33
<i>Teen Maze</i>	1,062			3,712		4,774
<i>Not My Kid’s Substance Abuse</i>		1,271				1,271
<i>Keepin’ It REAL</i>		658				658
<i>RX360</i>	27	1,766	612	2,018		4,423
<i>RX360 Community/Adult</i>	15	290	258			563
Risks of Alcohol Use workshops (youth)		803				803
Risks of Alcohol Use workshops (adults)		126				126
M.O.S.T. Training		135				135
6 th Grade Project (AOD Ed)			780			580
<i>The Buzz</i>			143		2,715	2,858
<i>Alcohol: True Stories</i>			190	11		201
<i>Over the Counter</i>				583		583
<i>Alcohol EDU</i>				1,923		1,923
<i>Rx EDU</i>				189		189
<i>Keep a Clear Mind</i>				360		360
<i>Drugs and the Body</i>				1,090		1,090
<i>Stand with Me, Be Drug Free</i>				5,100		5,100
<i>Not Prescribed</i>				413		413
<i>Brain Power</i>				1,090		1,090
<i>Chasing the Dragon</i>				389		389
<i>Drugs: True Stories</i>				112		112
<i>White Cross Project</i>				301		301
<i>What do you Know?</i>				145		145
<i>Owning Up</i>				308		308
<i>Overtaken</i>				35		35
Drug and Alcohol Impact Panel				62		62
<i>BASICS</i>					166	166
<i>SHADE</i>					852	852
<i>Electronic Check-Up to Go</i>					20,636	20,636
Online <i>AUDIT</i> Screen					251	251
Individualized counseling					143	143

Total	1,463	5,049	1,983	16,017	24,763	49,616
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Notes: ADVS was funded to provided technical assistance and therefore does not appear in this table.
Pasadera was not funded beyond its first year and therefore did not implement any education activities.

Conclusions and Recommendations

The PFS Project was funded for five and a half (5.5) years including a six-month (6) no-cost extension (September 2018 – March 2019) to complete the originally approved project goals and to orderly phase-phase-out of the project. Only two (2) sub-grantees were funded for the extension: 1) Arizona Complete Health (AzCH) (formerly Cenpatico Integrated Care (CIC)) and 2) Arizona Youth Partnership (AZYP)

Although past 30-day youth alcohol use rates have steadily declined in Arizona since 2012, alcohol remains the number one used substance by youth versus all other substances. During the course of the PFS initiative, past 30- day alcohol and prescription drug decreased when compared to the baseline of 2012. In addition, the magnitude of reach for sub-grantees through information dissemination and education was tremendous.

Arizona's PFS Project achieved many goals:

- AYS results indicate Arizona has made progress in reducing underage drinking statewide and succeeded in achieving the goal to reduce past-30 day alcohol use to 20.2% in 2018;
- College age past 30-day alcohol use shows a decrease over time, from 61.9% at baseline (2012) to 56.2% in 2018, thus showing an almost 6% decrease;
- AYS results indicate Arizona has made progress in reducing underage drinking statewide and succeeded in achieving the goal to reduce past-30 day alcohol use to 20.2% in 2018;
- Over time, significant reductions in past 30-day use of alcohol have occurred among all grades, specifically with 12th grade students and a slight increase from 2016 to 2018 among 8th and 10th graders;
- AYS data for Pima, Pinal, and Yavapai counties showed decreases in past 30-day alcohol use
- Overall, alcohol-related car crashes have decreased over time since 2012; including the number of alcohol-related fatal crashes. In 2012, 9.6% of all alcohol-related car crashes were by individuals 20 years old and younger, with a reduction to 6.4% in 2017. Similarly, for persons 21-24 years of age, data shows a reduction over time, with 5,216 crashes reported in 2012, reduced to 4,675 crashes in 2017;
- Emergency room results for opiates shows a significant reduction in emergency room visits and discharges between 2014 (1,115) and 2016 (790), an indication that this objective was achieved;
- AYS past 30-day prescription drug use decreased in Graham, Pima, Pinal, and Yavapai counties;
- An estimated 6,726,876 contacts made through Information Dissemination efforts;
- In total, there were 785 partnering entities described within the sub-grantees;

- PFS funded three (3) Tribal Nation sub-grantees: Hopi Nation, Navajo Nation, and Yavapai-Apache Nation to conduct needs assessment, capacity building/training, and information dissemination activities;
- The ACMF served over 4,557 individuals through training or technical assistance provided, and conducted approximately 75 trainings across the state;
- The UA played a pivotal role in Arizona's PFS initiative, providing training and technical assistance to community colleges across the state, presenting at state and local conferences, and collaborating with other sub-grantees to provide technical assistance as subject matter experts;
- The Center for the Application of Prevention Technologies (CAPT) on behalf of SAMHSA conducted a four (4)-day tribal specific prevention training in the spring of 2018 that was a huge success for training participants; and helped to increase the prevention workforce in the state;
- Sub-grantees funded for all steps of the PFS-SPF completed sustainability plans and sustainability was an on-going topic of discussion through the quarterly sub-grantee conference calls and technical assistance provided by AHCCCS and GOYFF;
- GOYFF conducted an annual "Keeping Communities Whole Through Collaborative Partnerships" (2015, 2016, 2017) to provide on-going training and technical assistance to PFS sub-grantees and other prevention groups and stakeholders.

A few other PFS achievements also included:

Teen Mazes were organized at five different high schools during the course of this grant. This program was designed for students to see first-hand what happens when they make the decision to use substances and get into a car. Through the Teen Maze activities, they want the students answering questions like, 'how could this affect me' or 'how could this affect others'. The idea is that through this educational process they are better at using critically thinking skills and making different choices that have better outcomes for their future. Besides the students developing critical thinking skills, it brought many community members together along with teachers, and administrators. This program proved to be very successful in several ways. The students were provided a better understanding of the effects of alcohol and consequences associated with alcohol use and is a strategy stakeholders are most interested in sustaining in their schools. Several schools are now instituting Teen Mazes in the future because they truly saw the benefit. It was especially significant to one area that was very closed to having any outside prevention activities in their school. This community invited their superintendent to attend the maze and through their experience, the superintendent now understands the impact of having prevention activities in the schools.

Numerous magazine articles were published in the Golden Corridor Living Magazine, distributed in Pinal County with a readership of over 30,000. The articles included: "A New Year's Resolution That Matters"; "Where Are Kids Getting Alcohol & Drugs"; and "Actions Parents Can Take To Help Their Children Be Successful in School".

Having a media campaign concentrated in the rural areas of Arizona tied into the communities that were being targeted with the PFS Grant proved to be a very positive addition. Media was connected in these areas through various avenues such as school Kiosks, billboards, local newspapers and radio stations. This reinforced the messages being given through the work Sub-Contractors were already doing.

A tremendous partnership with Eastern Arizona College has been established through the PFS Grant. Some of the highlights include:

- Providing guidance and assistance, along with the Lions Club, with the startup of the first Omega Leos Club in the State for community colleges. The focus is on student leadership and service, and they were working to incorporate health and wellness and substance abuse initiative into their club activities.
- The college is beginning to implement substance abuse prevention strategies on campus. One very successful accomplishment is that EAC has implemented mandatory online alcohol training for their students as of fall Semester 2018.
- The College Nursing Department is working to implement the Rx360 in their classes.
- The Psychology Department will continue to provide and make available prevention, stress, and recovery/ treatment information. The Psychology teachers have been provided with resources and prevention information to create an informational resource center when students are seeking assistance. They will continue to make trainings and prevention information available to students.
- Alcohol and drug Survey will continue to be implemented at Eastern Arizona College on a biannual basis.

LESSONS LEARNED

Many lessons were learned through the implementation of Arizona's PFS. Though there were many changes in Grantee staff initially, once the staff were established in FFY 2015-2016, the grant moved forward very well and there was a lot of great work that was completed. Annual site visits were of great benefit not only to the Grantees but also the sub-grantees. The Grants Project Director, Prevention Coordinator and the State Evaluator attended each of the site visits together. During these site visits this team was able to hear first-hand the successes and challenges the sub-grantees had, provide technical assistance specific to their challenges, and assist them in moving forward.

The following are highlighted as considerations for future substance use programming.

- Monitor and provide technical assistance to smaller/rural communities regarding staff turnover as challenges were posed with hiring and retaining staff during this PFS implementation.
- A lack of available volunteers to help with the community outreach and education strategies was challenging for some communities. However, other coalitions within the PFS project that regularly have very active volunteers shared tips for recruiting and utilizing volunteers with the coalitions that were struggling. This

- gave some of the struggling coalitions additional avenues to explore to resolve this challenge.
- Challenges with tapping into the military communities and getting them involved with prevention activities. If their prevention efforts did not correlate with their goals and vision, the military would not get involved. Many of the military partners do see the importance of substance abuse prevention, but there is a large stigma around substance abuse and PTSD.
 - The isolated nature of some of the communities presents a challenge in sustaining activities as there is not a lot of infrastructure. Some of the communities are located in proximity to the US-Mexico Border and as such puts these communities in a high drug-trafficking corridor. Having a strong presence in these small communities impacted youth as well as their parents in a very positive way. More prevention activities would be extremely helpful to sustaining the work that has been done through this grant.
 - Contracting with some of the sub-grantees took longer than anticipated and as a result, this greatly impacted their ability to implement programming. The GOYFF will consider this potential challenge as it pursues contracts with sub-grantees going forward, and will adjust the implementation timeframes accordingly.
 - Arizona's PFS project did not begin to have its sub-grantees breakdown their data by prevention strategy or the Institute of Medicine Model (IOM) until year three of the grant. This resulted in a missed opportunity to maximize its use of the categorized data and/or effectively use the information as part of the program's overall decision-making. The GOYFF was recently awarded another PFS grant BY SAMHSA. The sub-grantees will be asked to breakdown their data by prevention strategy and the IOM for all data reported so that this does not occur again.
 - The program also did not require its contractors to report the data based on demographics. This adversely impacted the project because it was unable to identify and target sub-populations who may have benefited from additional prevention efforts or TA. The new PFS sub-grantees will be required to report their data based on demographics so that the GOYFF does not miss another opportunity to target its efforts.

RECOMMENDATIONS

The following recommendations are provided to improve future prevention and education efforts.

- Continue to utilize SEOW workgroup as the "hub" for informing areas of need and reporting progress in meeting state goals and objectives related to substance use and its consequences;
- Develop process or equity model to fund communities and based on needs;
- Increase data collection for AYS, including expansion of rural representation and areas within the state that have lower participation numbers;

- Collaborate with other substance use prevention and evaluation efforts across funding sources and funded communities, i.e., Drug Free Communities (DFC), Opiate initiatives, etc.;
- Regularly conduct a state wide needs assessment so that specific areas within the state are funded for alcohol/substance use prevention activities;
- Based on needs assessment findings fund higher areas of need and areas typically under-served; and
- Utilize AYS and other data collected to inform evidence-based programming and practice selection to address contributing factors of substance use. This may include using the information of where youth are obtaining substances to examine prevention efforts specific to access and in reducing risks of harm perceptions through education to youth and parents/adults. The AYS risk and protective data can help inform areas to focus on to drive decision-making efforts by stakeholders.

Sources/References

Arizona Department of Health Services – Vital Statistics

<https://pub.azdhs.gov/health-stats/hip/index.php?pg=diagnosis>

Arizona Department of Transportation – Crash Facts

<https://azdot.gov/motor-vehicles/Statistics/arizona-motor-vehicle-crash-facts>

Arizona Youth Survey

<http://www.azcjc.gov/content/arizona-youth-survey>

Appendix A. Information Dissemination Activities Implemented by Sub-grantees

CSAP Activity	Code	CSAP Activity	Code
Materials Development	STN102	Speaking Engagements and Brief Educational Programs	STN116
Materials Dissemination	STN109	Information Requests Responded To	STN118
Media Messages/Media Campaign Activities	STN112	Materials Review	STN119

AZYP

- Development of coalition brochures (STN102)
- Development of messaging and PSAs by youth coalitions for National Drug and Alcohol Facts week (STN102)
- Art contest promoting healthy choices during prom/graduation seasons (STN102)
- Creation of PSAs by youth coalition members (STN102)
- Creation of prevention posters by SADD club members (STN102)
- Creation of artwork by youth that convey prevention messages and healthy choices as part of Mosaics with a Message project (STN102)
- Information published in Ajo Copper News regarding coalition efforts, meetings, etc. (STN102)
- SADD information disseminated in schools via print materials during lunch morning announcements, and through weekly messages on campus digital marquis (STN109)
- Dissemination of information by SADD members regarding alcohol and prescription drug misuse and distracted driving to high school students during Student Government Wellness Week (STN109)
- Dissemination of promotional items with prevention messaging (STN109)
- Distribution of medicine lockboxes and safety information at multiple Dispose-A-Med events (STN109)
- Dissemination of prevention messages at community events (Fall Fair, Annual Sonoran Shindig, and farmer's markets, Saddlebrook Community Health Fair, Desert Senita Health Fair, Walk for Hope awareness event, Marana Founders' Day, Sunflower Elder Care Fair, Christmas Tree Lighting, Trico Electric Cooperative Health Fair, and Continental Ranch Health Fair (STN109)
- Dissemination of prevention information to high school students during Drug and Alcohol Facts Week (STN109)
- Dissemination of information at coalition meetings (STN109)

- Coalition recruitment and meeting information disseminated through email (STN109)
- Prevention information dissemination via coalition social media platforms (e.g., Facebook, Twitter) (STN112)
- Prevention information dissemination via social media platforms administered by community groups (e.g., Facebook, Instagram) (STN112)
- Development of content for a new webpage (STN112)
- Forum on prescription drug use at senior citizen community (STN116)
- Walk and Vigil to commemorate National Overdose Awareness Day (STN116)
- Red Ribbon Week activities implemented by youth coalitions (STN116)
- Participation by coalition members and youth in National Drug and Alcohol Week (STN116)
- Participation in middle school Career Day where students learned about careers in Prevention (STN116)
- Suicide prevention trainings at area high school (STN116)
- Peer Mentor Training for high school youth (STN116)
- Provided training regarding trauma-informed care at Western Pima County Community Council meeting (STN116)
- Presentation on prescription drugs and WRECKED activity at high school Future Friday event (STN116)
- Presentation to high school health class regarding substance abuse and suicide (STN116)
- Presentation to middle school parents promoting upcoming Botvin's LifeSkills curriculum (STN116)
- Presentation to Pima County Sheriff's Community Justice Board Program (STN116) Wellness Initiative for Senior Education (WISE) training which includes information on medication use, storage, and disposal (STN116)
- Responded to a request to develop a presentation on healthy choices for area high school (STN118)

CGA, Inc.

- Development of a resource guide for parents related to substance abuse prevention and treatment (STN102)
- Published three separate columns describing the risks of underage drinking in three issues of In Maricopa Magazine (STN102)
- Published information on underage drinking and prescription drug abuse in two issues of Golden Corridor LIVING Magazine (STN102)
- Dissemination of "Bill the Pill" table tents with prevention messages and drop box location information (STN109)
- 'Parent Talk Kits' and underage drinking materials disseminated to parents and youth (STN109)

- Dissemination of information about safe storage and disposal of medication by church network (18 churches) (STN109)
- Dissemination of information informational about underage drinking and prescription drug misuse/abuse through local businesses and agencies (STN109)
- Tabling and information dissemination at local events (health fairs, senior expos, etc.) (STN109)
- Distribution of liquor locks at community events (STN109)
- Distribution of safe storage and proper disposal information in 24,000 Fry's Pharmacy bags (STN109)
- Dissemination of Neonatal Abstinence brochures to women's health center (STN109)
- Distribution of Pet Rx cards to animal control agency (STN109)
- Distribution of brochures to ASU Preparatory Academy (STN109)
- Distribution of medication disposal location cards to funeral homes and family health center (STN109)
- Distribution of Rx Armory units to seniors raising grandchildren (STN109)
- Mailed information to physicians regarding use of SBIRT to screen patients for drug and alcohol use (STN109)
- Social norms campaign information disseminated at *Kids Day* community event and to local organizations that serve youth (STN109)
- Distribution of Beacon Newsletter through coalition email distribution lists (STN109)
- Distribution of Beacon Newsletter in utility bills to residents (STN109)
- Dissemination of prevention poster to churches and businesses (STN109)
- Student-led social norms campaign implemented in 3 high schools and 2 middle schools called M.O.S.T (Making Our Students Think) (STN112)
- Sharing Beacon Newsletter through coalition's social media (e.g., Facebook) (STN112)
- Workshops of proper storage and disposal of medication (STN116)
- Community forum for parents led by teen intervention specialists (STN116);
- Workshop for 6th grade students at two middle school health symposiums (STN116)
- 'Drunk Buster' karts demonstration by DARE officer at community 4th of July celebration (STN116)
- Mock-crash event on high school campus the night before prom (STN116)

SEABHS

- Development of a brochure for college students on being an active bystander (STN102)

- Dissemination of prevention information at community events including, Back to School Resource Fairs, open-houses, student orientations, Annual Substance Abuse Conference, Candle Light Vigil, Child Safety Awareness Event, Dump the Drugs Event, SEABHS 5k Run, county fair, Harvest Festival, Light Parade on Main Street, high school games, Pow Wow Farmer's Market, Core Event, Safford High School Parent Teacher Conference, Gila Valley Health and Science Fair, Child Abuse Prevention Kick-Off Event (STN109)
- Dissemination of prevention information at college events, including student resource and job fair, basketball game, (STN109)
- Dissemination of prevention information at military events, including a network event for service members and their families, Veterans Stand Down Dump the Drugs events, Veterans Stand Down Resource Fair, Veterans Breakfast, Veterans Day Banquet (STN109)
- Dissemination of prevention information during the following regularly held meetings: College subcommittee meetings; Military subcommittee meetings; Community Network meetings; GSSAC Coalition meetings (STN109)
- Dissemination of prevention information during meetings with the following individuals and groups: EAC Nursing Department; EAC College Athletics Department; EAC Counseling Department; American Legion Post 95; American Legion Executive meeting; Graham and Greenlee Serving Veterans; LDSSA meeting; meeting with Catholic leaders; Mt Turnbull Academy; Ft Thomas Middle and High Schools; Canyonlands Clinic; VFW Commander; Bypass Health Clinic; Auxiliary Post 95; Copper Clinic; Mt Graham High School; County Health Department; San Carlos Apache Veterans Association; American Legion 5th District; and Ministerial Association (STN109)
- Provided campus police with flyers with text a tip information to report alcohol incidents, underage parties, etc. (STN109)
- Disseminated post cards for college aged and military populations with prescription disposal locations (STN109)
- Dissemination of info graphic cards to military families on the negative consequences of supplying alcohol to underage youth (STN109)
- Distributed alcohol awareness, proper storage and disposal, and community curriculum information to businesses, schools, pharmacies, doctor offices, clinics, hospitals, health departments, police department, churches, libraries, apartments, college buildings, college departments, and military locations including VA Services, VFW and American Legion locations (STN109)
- Dissemination of information to military families on how to develop a family substance abuse plan (STN109)
- Dissemination of prevention information on coalition website (STN112)
- Airing of multiple PSAs on local media (radio/TV/movie theater) with prevention messaging for the general, college, and military populations (STN112)

Delivery of prevention presentations to parents and community members in multiple locations (STN116).

MATFORCE

- *Stand with Me, Be Drug Free Campaign* developed, trademarked, and implemented (STN102)
- Radio commercial developed by coalition youth group (STN102)
- *Stand with Me, Be Drug Free Campaign* TV commercial developed by community members (STN102)
- Development of MATFORCE Prevention Resource Guide (STN102)
- County-wide dissemination of *Stand with Me, Be Drug Free Campaign* materials (STN109)
- Dissemination of alcohol and prescription drug abuse Rack Card displays in medical offices, schools, and local businesses (STN109)
- Pizza Box Topper Contest (STN109)
- Dissemination of prevention materials to patients (STN109)
- Promotion of county-wide Medicine Chest Challenge (STN109)
- Dissemination of prevention information at local events (e.g, Health Expo, National Night Out Events, Verde River Days, Prescott Recovery Celebration, Family Fun Walk, college Safe Spring Break events, Family Fair, Hopefest, Celebrate Life Expo, Drug and Alcohol Symposium, Erase the Stigma Community Event, etc.) (STN109)
- Information dissemination at meetings with the following groups: Greater Sedona Substance Abuse Committee; Community Health Improvement Plan; Overdose Fatality Review Board; Opioid Summit Planning group; Kids at Hope Steering Committee, etc. (STN109)
- Implementation of Sticker Shock campaign, where stickers with messaging were placed on alcohol containers (STN109)
- Distribution of Senior Rx Abuse Kits to senior citizens (STN109)
- Distribution of placemats with anti-substance abuse messaging to area restaurants (STN109)
- “Do No Harm” postcards mailed to medical practitioners including information on passing of Senate Bill 1283 requiring the use of the PMDP (STN109)
- Mailing to real estate agents with flyers on proper disposal of medications (STN109)
- Underage drinking tip line flyers distributed (STN109)
- Naloxone cards distributed to large area healthcare provider (STN109)
- Distribution of Deterra Disposal Kits (STN109)
- Distribution of Naloxone (STN109)
- Distribution of “Pharmacy Fun Facts Newsletter” to county pharmacists (STN109)
- Dissemination of prevention messaging through social media (Facebook, Twitter, Instagram, YouTube) (STN112)
- Dissemination of prevention messaging through radio (STN112)
- Dissemination of prevention messaging through highway billboards (STN112)

- TV and radio commercials developed for Dump the Drugs Events (STN112)
- TV and social media commercial “Heroin. Pills. It all Kills” was developed (STN112)
- Multiple articles in local newspaper (STN112)
- Letter to editor of local newspaper discussing importance of proper prescribing practices (STN112)
- Video billboard board message on television (STN 112)
- *Stand with Me, Be Drug Free Campaign* school assemblies (STN112)
- *Sign up to Save Lives Campaign* implemented, which encourage physicians to use the Drug Monitoring Program (STN116)
- Community Conversations held to discuss Heroin problem (STN116)
- Training on Underage Drinking and impaired driving with youth at area high schools (STN116)
- Assemblies conducted at elementary and middle schools where information presented on underage drinking and prescription drug abuse (STN116)
- Underage drinking/drunk driving class at Yavapai College conducted by car crash victim (STN116)
- Presentations to groups (e.g., Young Marines, Kiwanis Club, Lions Club, Rotary, Big Brothers Big Sisters, Civil Air Patrol, Concerned Citizens Group, US Vets, Juvenile Probation, City Council, Verde Valley Steering Committee, Verde Valley Mental Health Coalition, Prescott Area Steering Committee, etc.) (STN116)
- *Kids at Hope* Breakfast for select youth (STN116)
- Presentation to Poster Contest Winner at various schools (STN116)

UA:

- “How to be a good neighbor” magnet developed and distributed to Off-Campus Housing (STN102)
- Development of prevention posters (STN102)
- Dissemination of prevention packets by Resident Assistants containing posters, safe drinking cards, Red Cup pens and magnets, alcohol moderation bookmarks, printed Q&Q columns, and unruly ordinance, underage drinking, and Campus Health brochures (STN109)
- Dissemination of Safe Drinking cards to students (STN109)
- Dissemination of information through establishment of campus bulletin boards (STN109)
- Outreach conducted on campus during “Outreach Hour” (STN109)
- “Red Cup Q&A” column published in student newspaper on health and wellness topics (STN109)
- “Red Cup Q&A” column emailed to students in residence halls where staff request weekly columns (STN109)
- Dissemination of Red Cup Q&A flyers (SNT109)

- Outreach and information sharing at college events (e.g., freshman orientation fairs, Spring Break Safety Fairs, etc.) (STN109)
- *Project 21* where email sent to students within their birthday month with link to Project 21 website on responsible drinking, with follow-up email with survey sent to those who open the original email (STN112)
- Dissemination of information through campus health webpages (STN112)
- Dissemination of information through social media (e.g., Facebook, Instagram, Twitter) (STN112)
- Conducted presentations/classes with multiple student groups or events on topics including alcohol effects, risks/consequences, and social norms (e.g., new students, Fraternity and Sorority students, student veterans, athletes, etc. (STN116)
- Presentation of wellness programming to parents at parent events (STN116)
- Participation in Conduct Cases related to AOD (STN116)

Appendix B. Community-Based Process Activities Implemented by Sub-grantees

CSAP Activity	Code	CSAP Activity	Code
Formal Community Team Formation	STC501	New Ongoing Prevention Activity Established	STC512
Formal Community Team Meetings	STC502	Research or Evaluation Activity	STC513
Other Formal Community Team Activities	STC503	Research or Evaluation Report	STC514
Community Needs Assessment	STC504	Marketing	STC515
Strategic Plan	STC505	Staff Development	STC516
Consultation and Technical Assistance	STC507	Sustainability Plan	STC517
Accessing Services and Funding	STC508	Signed Memorandum of Agreement/Understanding	STC518
Community Training	STC509	Grant Review Panel	STC519
Research or Evaluation Plan	STC511		

Specific Community-Based Process Activities conducted by the sub-grantees are listed below:

AZYP

- Formation of coalition subcommittees (e.g., Leadership Team, Membership Sub-Committee, and Education Sub-Committee) (STC501)
- Formation of youth coalitions at two area middle schools (STC501)
- Coalition meetings (STC502)
- Youth coalition meetings (STC502)
- Conducted community needs assessment (STC504)
- Monitoring of the development and implementation of community-level strategic plans (STC505)
- Provision of technical support to middle and high schools on 2016 and 2018 Arizona Youth Survey (STC507)
- Provision of technical assistance to area high school for application to Governor's Office for School Health and Wellness Grant (STC507)
- Provision of technical assistance to SADD members (STC507)
- Funding of coalition by a grant from Cenpatico Integrated Care (STC508)

- Funding of coalition through a Drug Free Communities grant administered by a local school (STC508)
- School Health and Wellness grant provided to local high school by GOYFF (STC508)
- Provision of Youth Mental Health First Aid trainings for community partners (STC509)
- Lunch and Learn series for community and coalition members on basic prevention topics (STC509)
- Community readiness training for representatives from the behavioral health, healthcare, and business sectors and the community at large (STC509)
- Staff development/trainings on topics including underage drinking; adolescent brain development; how alcohol affects the brain and body; poison control and alcohol laws in Pima County; Continuum of Care training; training on Ethics, Cultural Competency and Mandatory Reporting; and GOCYFF sustainability training (STC516) Development of sustainability plan (STC517)

CGA, Inc.

- Formation of two new SADD chapters at local middle schools (STC501)
- Coalition Meetings (STC502)
- SADD youth leadership meetings conducted (STC502)
- Community needs assessments conducted by coalitions to identify any gaps in resources by most coalitions (STC504)
- Biennial strategic planning sessions by coalitions (STC505)
- Trained individuals from member coalition member agencies to deliver the Rx360 youth, Rx360 Parent/Community, and Alcohol 360 Parent/Community curricula (STC507)
- Provided M.O.S.T. campaign training to SADD members at local middle schools planning M.O.S.T. campaigns (STC507)
- Funding of coalition by a grant from Cenpatico Integrated Care (STC508)
- M.O.S.T (Making Our Students Think) trainings for youth SADD members implementing social norms campaign (STC509)
- Risks of Alcohol Use training for coalition community partners by police department (STC509)
- Training of adult and youth volunteers to implement RX360 presentations (STC509)
- Training of adult volunteers to implement Alcohol 360 presentations (STC509)
- Training of coalition members on “The 5 Voices” to assist members on pitching the RX360 presentations to community partners (STC516)
- Sustainability plan drafted for sub-grantee coalition (STC517)
- Sustainability plan for a coalition being updated (STC517)
- Sustainability plan drafted for coalition (STC517)

SEABHS

- Formation of campus “Lions Club,” which is the first Omega Leos Club at a junior college in the State of Arizona (STC501)
- Monthly Community Network meetings (STC502)
- Military subcommittee meetings (STC502)
- College subcommittee meetings (STC502)
- Development of a parent and community member information dissemination plan (STC503)
- Community-wide needs assessment conducted (STC504)
- Strategic planning sessions conducted by evaluator (STC505)
- Training for volunteers and subcommittee members on the *Rx360* curriculum for youth and adults (STC509)
- Hosted a Substance Abuse Prevention Skills Training for the community on the Strategic Prevention Framework and the Institute of Medicine Model for Prevention, Treatment and Maintenance (STC509)
- Resource Navigation Training for military population in Graham County with ACMF (STC509)
- Presentation on prescription drug misuse at the 11th Annual Substance Abuse Conference hosted by Graham County Substance Abuse Coalition (STC509)
- Partnered with Tucson Vet Center to provide PTSD training (STC509)
- Established ongoing prevention activities at EAC, including implementation of the EAC AOD Survey (STC512)
- Professional development/staff trainings on topics including but not limited to Resource Navigation Training CADCA National Leadership Forum, Using Data to Empower Arizona Communities training, Arizona High Intensity Drug Trafficking Areas’ Stronger Together Demand Reduction training, Establishing Criteria to Select Evidence-Based Interventions in Arizona: Understanding Basics training, Buzz training, how to engage/work with college students, athletes, and families, and how to administer Narcan (STC516)
- Sustainability plan for sub-grantee developed (STC517)

MATFORCE

- Development of Yavapai County Overdose Fatality Review Board (STC501)
- Formal Meetings held for the following teams (Board of Directors, Verde Valley Steering Committee, Prescott Area Steering Committee, Greater Sedona Substance Abuse Committee, Underage Drinking Task Force, Intervention Workgroup, Chino Valley Workgroup, Camp Verde Workgroup, Evaluation Team, Overdose Fatality Review Board, Neonatal Abstinence Syndrome Workgroup, Yavapai Reentry Planning Committee, and MATFORCE Youth Group, Heroin Core Group, and Pharmacy Team) (STC502)

- Production of two annual reports by the Yavapai County Overdose Fatality Board with 31 recommendations for policy change. (STC503)
- Establishment of protocols for reviewing overdose deaths for the Yavapai County Overdose Fatality Review Board (STC503)
- Arizona Annual Opioid Summits held (STC503)
- Annual Drug and Alcohol Awareness Symposiums held (STC503)
- Neonatal Syndrome Conference held (STC503)
- Participation in Community Health Improvement Plans (STC503)
- Identification of screening tools for OB/GYN offices (STC503)
- Establishment of a referral system and services for pregnant women with substance use disorders in Yavapai County (STC503)
- Development of prenatal health care provider referral communication sheet (STC503)
- Technical assistance/presentations provided to corporate pharmacies, pharmacists, physicians, medical office managers, etc. on the software used to access the Prescription Drug Monitoring Program (STC507)
- Opioid Misuse and Abuse Prevention Funding awarded by the Arizona Attorney General's Office (STC508)
- State Targeted Response Grant Funds awarded by Health Choice Integrated Care (HCIC) (STC508)
- SAMHSA STOP Grant funds awarded to address underage drinking (STC508)
- Funding received by Yavapai County Board of Supervisors (STC508)
- Drug Recognition training provided to Department of Child Safety employees (STC509)
- Adolescent Brain Development training provided (STC509)
- Presentation of information to medical professionals, community members, and dentists on proper prescribing practices (STC509)
- Training for pharmacists and law enforcement on proper dispensing of opioids (STC509)
- Trainings for professionals, community members, and Arizona Rangers on opioid overdose/naloxone (STC509)
- Trainings with healthcare staff on opioid abuse prevention strategies (STC509)
- Trainings for community members on opioid epidemic and alternatives to pain management (STC509)
- Trainings for healthcare professionals and community members on addiction and pregnancy and services available to pregnant mothers with substance abuse issues (STC509)
- Lunch and learn trainings for professionals (e.g., addiction and trauma, illicit drug trends, why kids use drugs, bystander effect, etc.) (STC509)
- Enhanced surveillance advisory trainings provided (STC509)
- Trainings community members on how to be a Community Coach (STC509)

- Training on mental health and addiction (STC509)
- Mental health first aid training for seniors (STC509)
- Training on childhood trauma and the adolescent brain (STC509)
- Reentry Trainings “From Inmate to Citizen” (STC509)
- Motivational Interviewing trainings provided to probation officers and community members (STC509)
- Managing Pain in Dentistry training for dentists (STC509)
- Training on Addiction and Pregnancy (STC509)
- Training on Kids at Hope curriculum (STC509)
- Trainings for social workers and Verde Valley Steering Committee on Medication Assisted Treatment (STC509)
- Training for parents and community on the risks and harms of substance abuse and why youth use drugs (STC509)
- Drug recognition training for parents (STC509)
- Training for attendees at the Problem Solving Courts Conference on Overdose Fatality Review Board findings (STC 509)
- Training for teachers on substance abuse trends (STC509)
- Training received from Pima Prevention Partnership on CLI instrument (STC516)
- Strengthening Families Parenting Education training received (STC516)
- Attendance at Community Anti-Drug Coalition of American (CADCA) National Forum by coalition staff (STC516)
- Attendance at Opioid Summit by coalition staff and volunteers (STC516)

Pasadera:

- Development of the Community Assessment Team to develop data driven and community-driven interventions (STC501)
- Formal meetings held for the following: Community Prevention Coalition (CPC); Community Assessment Team; Underage Drinking (UAD) subcommittee; and Medicine Abuse Prevention Initiative Collaborative (MAPIC) subcommittee (STC502)
- Needs assessment activities (e.g., administration of surveys, focus groups, and key informant interviews) conducted and steered by Community Assessment Team (STC504)
- Strategic planning session conducted with coalition members to begin assessing needs assessment findings and explore implementation strategies for second project year (STC505)
- Community presentations to the following groups for outreach, information sharing, and recruitment purposes: Community Prevention Coalition (CPC); CPC Steering Committee; Amistades Coalition; Pima County Tucson Commission on Addiction Prevention and Treatment (CAPT); MAPIC; and UAD subcommittee (STC509)

- Training/professional development for CAT team members on conducting focus groups and the Rx360 intervention (STC516)
- Presentation to the CPC by the Tohono O’Odham Nation Youth Council (STC516)

UA:

- Formal planning meetings held with the following UA groups (Student Life Coordinators, Off-Campus Housing, Cats after Dark team, LGBTQ Affairs, Health Promotion and Preventive Services, Resident Assistants, Division of Student Affairs) (STC502)
- Formal planning meetings held with the following ERAU groups (Student Wellness Advisory Team, Women and Diversity Center, Student Vets, Student Pride Club, Sustainable ERAU, Tree House Student Recovery facility, Student Events Committee, International Students Office, Dean of Students Office) (STC502)
- Formal planning meetings held with the following PCC groups (Student Life Coordinators, Campus Counselors, Campus Police, Campus Clery Officer, Assistant Vice Chancellor for Student Development) (STC502)
- Active participation by campuses in the Arizona Institutions of Higher Education (AZIHE) Network (STC503)
- Each of the four campuses involved in the grant have a strategic plan in place which are evaluated and updated annually with project and campus staff (STC505)
- Provided BASICS training to staff at UA, PCC, and ERAU (STC507)
- Provided Motivational Interviewing training to staff at UA, PCC, ERAU, and YC (STC507)
- Provided sustainability training to the SPF-PFS sub-grantees (STC507) Collaboration by project staff with CPC on their SPF-PFS grant through participation in underage drinking and prescription drug subcommittees (STC508)
- Collaboration by project staff with a SAMHSA HIV/Hepatitis grant that was received by Pima Community College’s Desert Vista Campus through participation in the grant’s Stakeholder Working Group (STC508)
- Conducted six *Raising the Bar* Statewide student leadership conferences (STC512)
- Professional development/staff training on Motivational Interviewing (STC516)
- Professional development/staff training on Brief Alcohol Screening and Referral to Treatment (STC516)
- Professional development/staff training on social norms media development (STC516)
- Presented at National Meeting of the Higher Education Center for Alcohol and Drug Misuse Prevention and Recovery (STC516)

- Presented at the National Prevention Network's Annual Research Conference (STC516)
- Presented as part of a tri-university panel at the Annual NASAP AOD/MH Conference (STC516)
- Presented at the annual UA Division of Student Affairs Research Symposium (STC516)
- Presented on the Buzz at the Keeping Communities Whole through Collaborative Partnerships Conference (STC516)
- Presented a workshop on interactive, game-based programming at the NAPSA AODV Strategies Conference (STC516)
- Presented on using an SBIRT model for prevention/early identification and intervention at the NAPSA AODV Strategies Conference on (STC516)
- Presented on leadership engagement at the NAPSA AODV Strategies Conference on (STC516)
- Attended National NASPA Conference (STC516)
- Regular participation by project staff from UA, ERAU, and YC in the AZIHE Network quarterly meetings (STC516)
- Development of sustainability plans for four different campuses (STC517)

ADVS:

- Representatives of the ADVS and ACMF meet and communicate regularly on implementation of the Arizona Roadmap to Veteran Employment; other meetings are held for the *Be Connected* Program and the Military/Veteran Community Networks initiative (STC502)
- ADVS/ACMF engaged in a strategic planning process involving key stakeholders for the *Be Connected* program, which has two phases. Phase 1 focused on operationalizing all key elements of the program (24/7 support line, resource match tool and training). Phase 2a includes expansion to six full time *Be Connected* program staff and Phase 2b will focus on further statewide expansion (STC505)
- ADVS/ACMF conducted more than 75 in-person trainings/technical assistance sessions with 4,557 individuals associated with 58 organizations (STC507)The Arizona-based Halle Foundation funded a \$200,000 grant to La Frontera Arizona to expand the *Be Connected* team with three full-time navigators (STC508/STC517)