



**Prevention**

Training

Technical

Assistance

Service

**Center**

# 12 Sector Collaboration Series

## Health Sector



# Overview

This learning event places the Strategic Prevention Framework into the context of the 12 Sectors within coalition prevention work.

This Presentation will

- Walk you through the Health Sector within the SPF Model
- Gain knowledge of the different levels of sector involvement
- Increase understanding of Social Determinants of Health and Health Disparities in Connecticut
- Learn from a shared experience though coalition speakers representing that sector
- Identify ways to engage with the sector
- Identify barriers to deeper levels of participation of the sector and how to overcome them
- Provide you several tools around the 12 Sectors as used within commonly used Evidence Based Strategies
- Time for Q and A and Networking



# Strategic Prevention Framework (SPF)

The five steps and two guiding principles of the SPF offer prevention planners a comprehensive approach to understanding and addressing the substance misuse and related behavioral health problems facing their states and communities.

The SPF includes these five steps:

- 1 . **Assessment:** Identify local prevention needs based on data. What is the problem?
- 2 . **Capacity:** Build local resources and readiness to address prevention needs. What do you have to work with?
- 3 . **Planning:** Find out what works to address prevention needs and how to do it well. What should you do and how should you do it?
- 4 . **Implementation:** Deliver evidence-based programs and practices as intended. How can you put your plan into action?
- 5 . **Evaluation:** Examine the process and outcomes of programs and practices Is your plan succeeding?

The SPF is also guided by two cross-cutting principles that should be integrated into each of the steps:

**Cultural Competence.** The ability of an individual or organization to understand and interact effectively with people who have different values, lifestyles, and traditions based on their distinctive heritage and social relationships.

**Sustainability.** The process of building an adaptive and effective system that achieves and maintains desired long-term results

# Health Sector: Health professionals and organizations

## Examples include:

- Medical Professionals
- Health Departments: local, regional, state
- Health organizations: hospitals, treatment centers, prevention organizations.
- Mental Health professionals
  - Social Workers, Psychologists, Psychiatrists, Support Group organizations
- Pharmacists

## Engagement Opportunities:

- Elevate the Health professionals voice around Prevention
- Engage health professionals' participation in the coalition
- Host and Participate in Prevention Events
- Play key role in providing services and information for priority populations
- Partner in Community Presentations and Provide community information on prevention topics
- Elevate Social Norms Campaigns Messaging
- Share knowledge of issues confronting youth in the community

**Poll #1:** Which health sector representatives does your coalition or organization collaborate with?

**Poll #2:** Which of the following activities do health professionals in your community participate in?

**Sample of Prevention Topics:** Vaping, Tobacco, Marijuana, Opioids, Alcohol, Child and Adolescent Development, Behavioral and Health Screenings, Prescription Medication, Healthy Relationships, Nutrition and Exercise, Health Care Access and Disparities.

# Needs Assessment

Health data are collected through various means. Examples of Health data include:

Rate and incidence of substance use and mental health related visits to medical professionals

Nature of Services

Local, Regional, State Reports

Overdose Reports

Treatment Services Inventory

Focus Groups and Key Informant Interviews

Brief Screening and intervention opportunities

Service Types available in the community ( acute, treatment, prevention, support)



Data is used to:

Identify priority substance(s)

Priority populations

Associated risk and protective factors.

Data determine the evidenced strategies to prevent and reduce substance misuse.



Programs and activities are planned to address the risk factors and strengthen the coalition work in prevention.

# Capacity

Building capacity focuses on resources and readiness. Identifying existing and new resources helps strengthen the coalition and community's readiness to implement prevention work. Examples of how health sector representatives can build capacity include:

- Provide meetings and event times where health professionals can participate in coalition activities.
- Seek out health professionals' input on policies of the coalition.
- Look to partner on community events with health organizations.
- Share coalition and community data with the health sector to improve/enhance their services and offerings.
- Partner with the health sector to leverage their connections to youth to share coalition activities, programming and messaging
- Provide screening and brief intervention for priority populations on substance use, mental health and overall well being for youth.
- Align program content and professional development with evidence-based strategies for prevention and health promotion.

# Planning

Once the needs assessment phase is complete and the coalition has identified its priority prevention areas and risk factors, a plan is created to identify strategies and activities that address those needs. Prevention strategic plans include:

- Evidence based strategies that are effective in reducing substance use amongst youth and increase awareness of the issues. These strategies are “best fit” – they address the substance and risk factors and will work in this specific community.
- Measurable goals and objectives, several strategies that are ongoing and reinforce each other. An evaluation plan measures effectiveness of the strategies and whether goals were met.
- Engage the health sector and additional sectors to collaborate on the planning phase and how they will collaborate to implement the coalitions plans.
- Be sure to consult with various health professionals and organizations in your community in your planning phase. Each will have valuable input and may be conducting their own prevention efforts. They have insight on the youth and populations they serve and how the coalitions goals and activities can contribute to other prevention efforts in the community.
- Be mindful of cultural competency in your inclusion:

Planning may lead to the identification of specific youth subpopulations, such as:

- LGBTQ
- POC
- Athletes
- Faith based youth groups
- Special Education
- Court diversion and truancy cases

Examples 1) can the coalition support underage drinking prevention in school-based health clinics, 2) sponsor SBIRT training for school-based health clinics or pediatrician offices, 3) support pharmacies wanting to promote safe medication storage and disposal, 4) provide training/resources of the coalition to local professional health associations pediatricians, dentists, etc.

# Implementation

Once the priority areas are determined, a plan has been created, and all sectors have been engaged the coalition will determine its timeline to implement the strategies.

The Health sector engage in health promotion and prevention work each day. In partnering with them coalitions elevate, scale and sustain those strategies.

Some tips on Implementation:

- Assess the need for partners, including health care sector, need for training and support to implement prevention strategies.
- Invite health care sector reps to be guest speakers and/or sponsors of coalition education events.
- Ask health sector reps about local professional associations that may benefit from coalition training or education materials.
- Ask health care sectors to distribute coalition educational and/or social marketing materials.
- Ensure all sectors and members are aware of your events. Communicate through various tools; email, social media accounts, school e-blasts, town distribution. Ask sectors to promote events and initiatives through their channels.
- Keep track of your attendance and demographics for reporting purposes.

Break out discussion 1 : What lessons can be learned in how community health professionals and organizations responded to support/protect youth since COVID-19 in the coalition/ community?



# Evaluation

## Collect data on your impact to share your success.

- **Process** data ensures the program was implemented as intended.
- **Outcome** data helps identify if selected strategies contributed to changes in risk factors and substance misuse.

Invite health care sector reps to provide feedback on evaluation data and program improvement

Examine the health data sources utilized in your needs assessment and record changes to the data.

Create a presentation that displays your change over time on the goals and strategies you set during your needs assessment and planning phases.

Identify the areas where you were successful and the areas that are still in need of further focus and intervention.

**Cultural Competency:** *The ability of an individual or organization to understand and interact effectively with people who have different values, lifestyles, and traditions based on their distinctive heritage and social relationships .*

By considering culture at each step, planners can help to ensure that members of diverse population groups can actively participate in and benefit from prevention practices .



Describe how Health Sector professionals contribute to the role of cultural competency within your organization.

Dive deeper into data to look for hidden or underserved populations. Seek out new information from underserved or under represented community members

Are there demographic changes happening in your community?

Hold focus groups with different organization groups  
Dr.'s. Mental health Professionals, Support Groups

Are materials available in multiple languages? Are there targeted sub group programming available based upon needs assessment that speak to those groups?



Appendix B: Opportunities to Integrate Cultural Competency Across the SPF steps Chart

**Sustainability:** *The process of building an adaptive and effective system that achieves and maintains desired long-term results.*



Sustainability is the capacity of a community to produce and maintain positive prevention outcomes over time. To maintain positive outcomes, communities will want to sustain an effective strategic planning process as well as those programs and practices that produced positive prevention results.



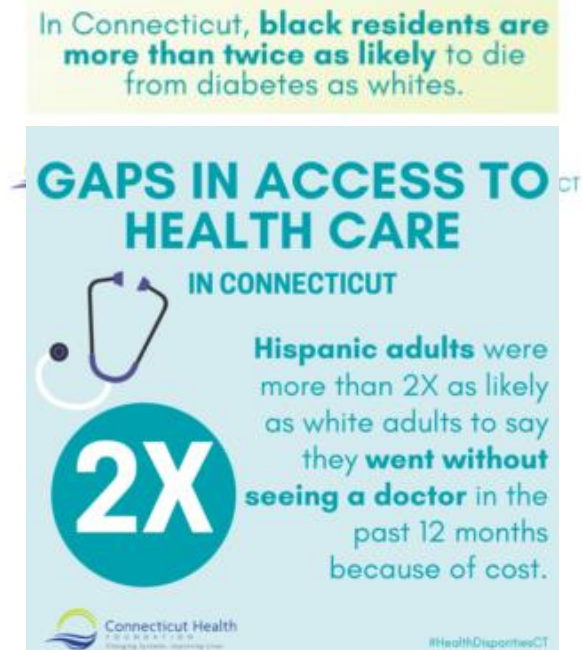
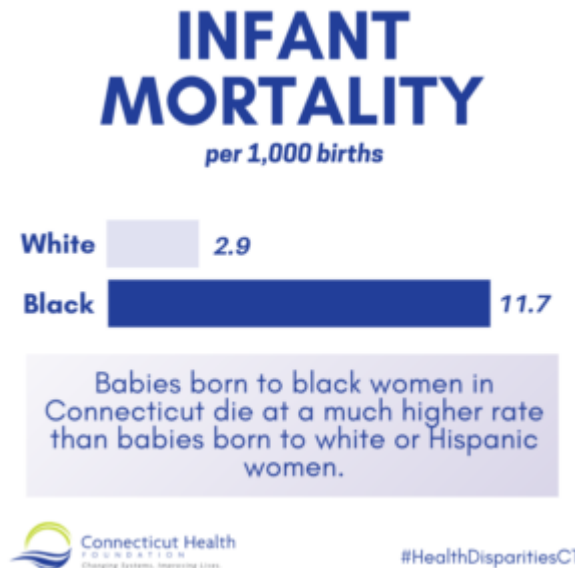
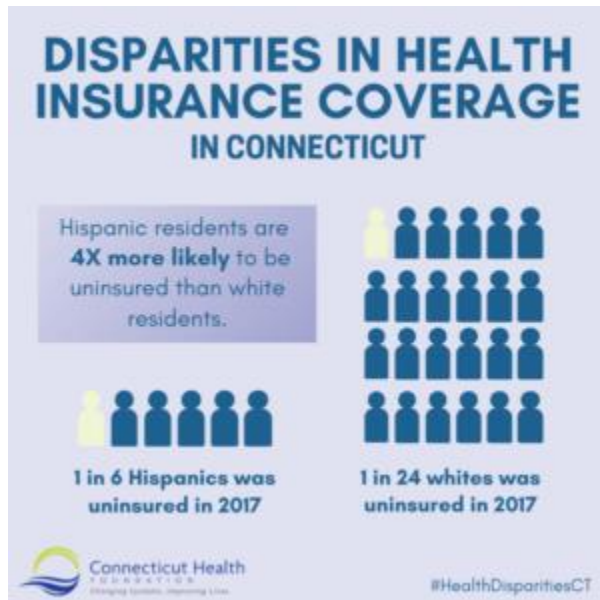
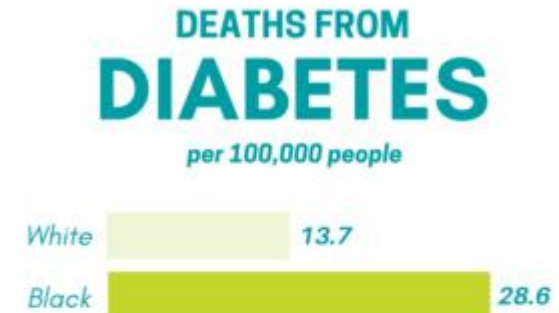
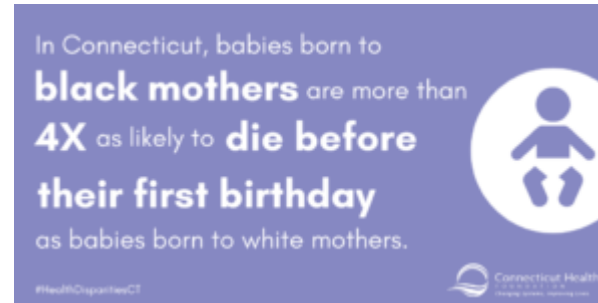
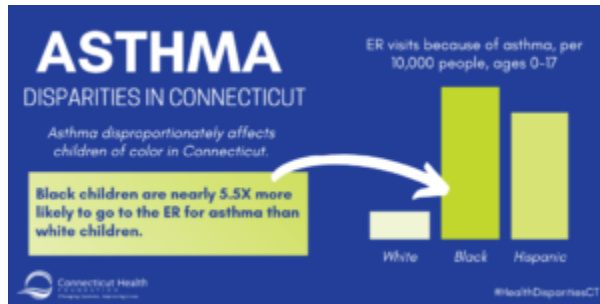
Describe how health sector representatives contribute to the sustainability of your organization.

Work toward partners owning prevention initiatives.  
What information or resources do they need from the coalition?  
Identify sector champions to lead and generate enthusiasm.



Appendix C: How the SPF Contributes to Sustainability Chart

# Report: Health Disparities in Connecticut CT Health Foundation



# Report: Health Disparities in Connecticut

## Factors that contribute to Health Disparities.

- Differences in Health Insurance Coverage
- Access to Healthcare
- Social Factors:
  - Food security, transportation, neighborhood safety, housing, disparate treatment and discrimination

## Recommended actions for Connecticut to address Health Disparities.

Improve data collection – to ensure health outcomes are measured and tracked by race and ethnicity – and act on the findings.

- Focus on getting more people health care coverage.
- Support community health workers, whose services have been shown to reduce disparities.
- Promote clinical practice guidelines and evidence-based treatments

Discussion Break Out 2: Health disparities you have observed or studied in the community(ies) you work or reside in. Who, What, Where, Why?

# Social Determinants of Health



*Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. SDOH can be grouped into 5 domains:*

Economic  
Stability

Education  
Access and  
Quality

Health Care  
Access and  
Quality

Neighborhood  
and Built  
Environment

Social and  
Community  
Context

# Social Determinants of Health



- **Economic Stability** indicators include housing, employment, nutrition, health care and poverty.
- **Education Access and Quality** indicators include providing education opportunities for children and adolescents, disability resources, high school graduation, post secondary education, school readiness and achievement.
- **Healthcare** indicators include access to services people need, health insurance coverage, preventative health visits, screening for substance use and mental health, reproductive health and prescription medication.
- **Neighborhood and Built Environments** include violence reduction, safe air and water, pollution reduction, work place safety practices, pedestrian and bicycle friendly neighborhoods.
- **Social and Community Context** indicators include social supports such as trusted adults, positive family communication, reducing stigma and increasing health literacy, food insecurity, and discrimination or bullying.

# Coalition Shared Experience & Speakers

Carolyn Wilson  
Ledge Light Health District  
Health Program Coordinator

Gina D'Angelo  
Ending the Epidemics Coordinator  
Health Program Associate  
CT Department of Public Health

Describe how the health sector plays across the SPF model within the coalition.

- What data and strategies has the health sector played a part in within the coalition and broader community?
- Were there any particular areas of the SPF that you found the health sector particularly impactful?
- What have been the results or outcomes of the sector in the coalition? Share some of your goals and achievements in those areas.

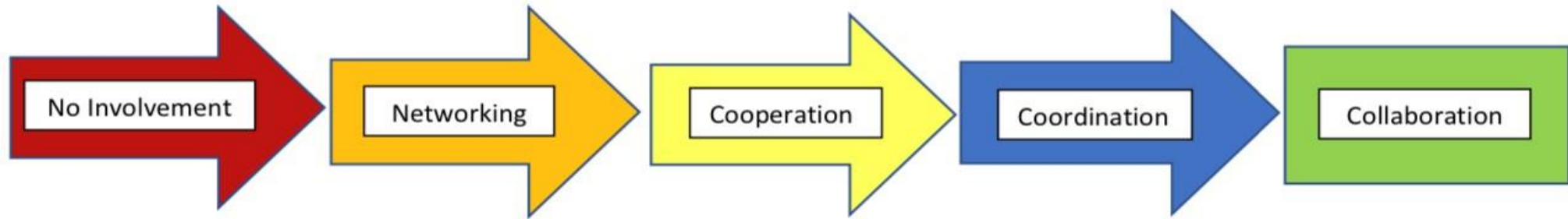
How has health sector engagement in the coalition benefitted the coalition and/or community? How has the health sector benefitted from being in the coalition?

What are some success stories you can share of the collaboration between the coalition and the health sector?

Gina D'Angelo will speak to population-based health, harm reduction strategies, value of coalition-based approaches, challenges and best practices. Additionally, Gina will demonstrate how the DPH planning model mirrors the SPF.



# SECTOR LEVELS OF INVOLVEMENT



Potential community partners will have varying levels of interest and/or availability to participate in prevention efforts. Some may be willing to help out with specific tasks, while others may be willing to take on leadership roles. Some participation options for prevention stakeholders are included below.

- **No involvement:** Stakeholders engage in separate activities, strategies, and policies. For example, “You do your thing, we’ll do ours.”
- **Networking:** Stakeholders share what they are doing during interagency meetings. They talk about community issues in which they all have a stake or communicate about existing programs, activities, or services. For example, “Let’s talk and share information.”
- **Cooperation:** Stakeholders publicize one another’s programs in agency newsletters, write letters in support of one another’s grant applications, co-sponsor trainings or professional development activities, and/or exchange such resources as technology expertise or meeting space. For example, “I’ll support your program, and you’ll support mine.”
- **Coordination:** Stakeholders serve together on event planning committees and community boards or implement programs and services together. For example, “Let’s partner on an event.”
- **Collaboration:** Stakeholders create formal agreements (e.g., memoranda of understanding or contracts). They develop common data collection systems; partner on joint fundraising efforts; pool fiscal or human resources; and create common workforce training systems. For example, “Let’s work together on a comprehensive plan to address the issue. After all, our missions overlap.”
- **Discuss how the health sector can be engaged in each of these levels of involvement.**

Levels of Engagement Tool provided at the end of this presentation.

Poll # 3 What level of involvement would you place the health sector in your prevention work?

# Barriers To Engagement

Some common barriers include:

- Health representatives do not perceive its mission to match coalition's goals.
- Challenged history between local agencies or with the community
- Availability of members of the health sector to actively participate
- Poor connections to the community or coalition
- Minimal organizational capacity to engage the sector
- Funding. Multiple prevention funding streams can result in duplicate planning groups or strategies.
- Recruiting and sustaining health participation over time/turnover
- Other

Poll Question #4:

What are some of the common barriers to engagement with the health sector that you have experienced?

# Engaging the Sector

The following list includes some of the ways to approach people and organizations in the community with information about, and invitations to participate in, prevention efforts:

- Invite health sector representatives to attend and speak at community meetings and events
- Leverage health sector capacity of programming for coalition events and activities
- Keep health sector representatives abreast of coalition data, focus areas, and emerging trends
- Ask for their insight on policy provisions
- Ask for coalition messaging to be shared by the health sector through their communication channels and in turn share their events and messages
- Anticipate and overcome roadblocks
- Offer to sponsor or co-host health promotion events

- Maintain relationships by keeping stakeholders informed of prevention activities and progress made
- Use health sector data in each step of the SPF
- Work with health sector representatives to promote and scale the healthy development activities they are engaged in with youth
- Ask for professional development to be conducted by health representatives on prevention topics so there is common language across settings and programs
- Ensure other sectors are aware health sector activities, events, and acknowledge their prevention efforts

**Poll Question #5: Identify at least 2 ways in which you think your coalition could further engage this sector in your community coalition work?**

# Regional Behavioral Health Action Organizations



<https://www.thehubct.org/>



<https://www.apw-ct.org/>



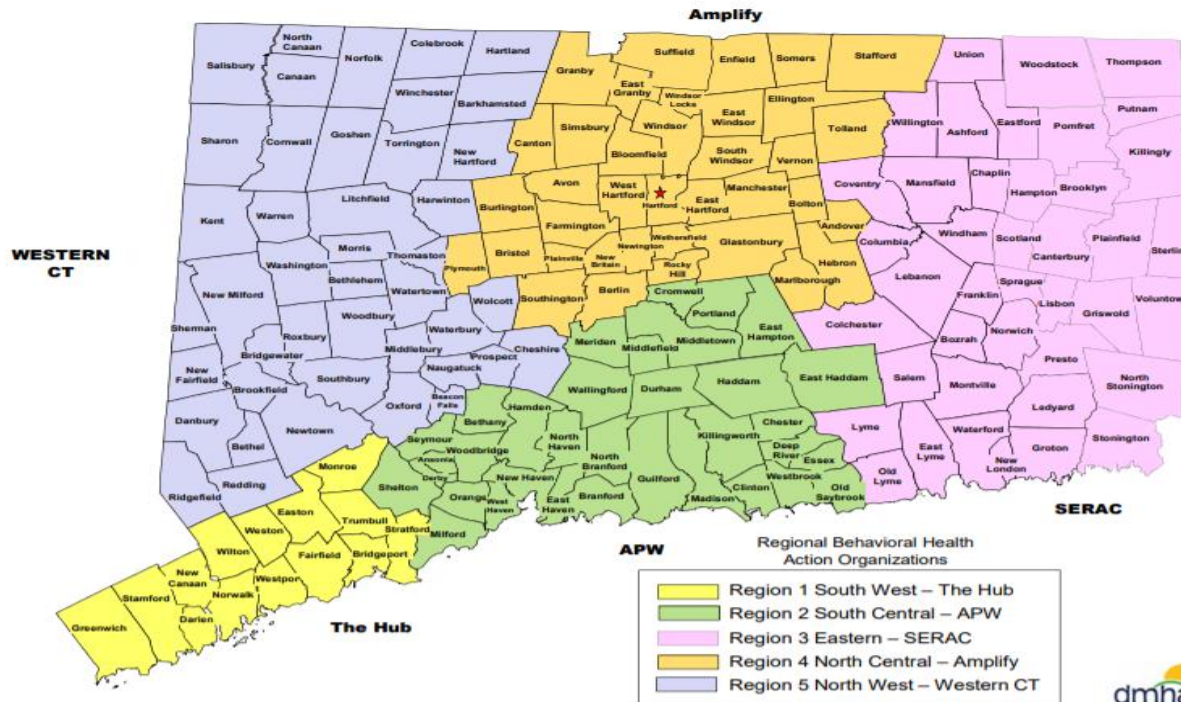
<https://www.seracct.org/>



<https://amplifyct.org/>



<https://www.wctcoalition.org/>



Appendix A:

Levels of Collaboration Tool

**Levels of Collaboration Scale**

(From Frey, B.B., Lohmeier, J.H., Lee, S.W., & Tollefson, N. (2006). Measuring collaboration among grant partners. *American Journal of Evaluation*, 27, 3, 383-392.)

This form is designed for those who work in one of the organizations or programs that are partners in the \_\_\_\_\_. Please review these descriptions of different levels of collaboration.

- On the response section at the bottom of the page, please circle the name of the organization or group with which you are associated.
- Using the scale provided, please indicate the extent to which you **currently** interact with each other partner. (Skip your own row.)

Five Levels of Collaboration and Their Characteristics						
Relationship Characteristics	Networking 1	Cooperation 2	Coordination 3	Coalition 4	Collaboration 5	
	-Aware of organization -Loosely defined roles -Little communication -All decisions are made independently	-Provide information to each other - Somewhat defined roles -Formal communication -All decisions are made independently	-Share information and resources -Defined roles -Frequent communication -Some shared decision making	-Share ideas -Share resources -Frequent and prioritized communication -All members have a vote in decision making	-Members belong to one system -Frequent communication is characterized by mutual trust -Consensus is reached on all decisions	
Partners	No Interaction at All	Networking	Cooperation	Coordination	Coalition	Collaboration
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5
	0	1	2	3	4	5

<b>Assessment</b>	<ul style="list-style-type: none"> <li>◆ Take steps to identify those sub-populations who are vulnerable to behavioral health disparities and the disparities that they experience.</li> <li>◆ Identify data gaps and take efforts to fill them.</li> <li>◆ Develop plans to share and solicit input about assessment findings with members of these sub-populations, and describe these findings using terms and phrases that are devoid of jargon.</li> </ul>
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<b>Capacity</b>	<ul style="list-style-type: none"> <li>◆ Build the knowledge, resources, and readiness of prevention practitioners and community members to address disparities, as well as to provide culturally and linguistically appropriate services.</li> <li>◆ Make sure that practitioners understand the role of cultural competence in their work, overall, and the unique needs of those sub-populations experiencing disparities.</li> <li>◆ Develop new partnerships that will help engage members of these groups in prevention planning efforts.</li> </ul>
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<b>Planning</b>	<ul style="list-style-type: none"> <li>◆ Make community representation in the planning process a priority.</li> <li>◆ Involve members of the focus population as active participants and decision-makers.</li> <li>◆ Identify and prioritize factors associated with disparities.</li> <li>◆ Develop logic models that include a reduction in health disparities as a long-term outcome.</li> <li>◆ Incorporate effective prevention programs and practices that have been developed for and evaluated with an audience similar to the focus population.</li> <li>◆ If and when misunderstandings arise, be persistent in keeping communication lines open.</li> </ul>
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<b>Implementation</b>	<ul style="list-style-type: none"> <li>◆ Implement prevention programs that target populations experiencing behavioral health disparities.</li> <li>◆ Involve members of these groups in the design and delivery of those programs.</li> <li>◆ Understand that people may choose to participate in different ways and that they may also have different learning styles.</li> <li>◆ Adapt and/or tailor evidence-based practices to be more culturally relevant. For example, create an in-person version of a training that was originally designed to be delivered virtually so that it is accessible to audiences with limited online access.</li> </ul>
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## Appendix B

# Opportunities to Integrate Cultural Competence across Steps of the Strategic Prevention Framework

<b>Evaluation</b>	<ul style="list-style-type: none"> <li>◆ Conduct process and outcome evaluations to demonstrate whether selected programs and practices are having the intended impact on identified disparities.</li> <li>◆ Track all adaptations.</li> <li>◆ Allocate the evaluation resources needed to learn whether the interventions you selected are having the intended impact on the behavioral health disparities you are hoping to reduce.</li> <li>◆ Conduct follow-up interviews with program participants to better understand program evaluation findings.</li> </ul>
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<b>Sustainability (Guiding Principle)</b>	<ul style="list-style-type: none"> <li>◆ Engage partners who represent and work with sub-populations experiencing behavioral health disparities in your sustainability planning efforts.</li> <li>◆ Sustain processes that have successfully engaged members of these populations.</li> <li>◆ Sustain programs that produce positive outcomes for these populations.</li> </ul>
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**SPF Step**      **How the SPF Contributes to Sustainability**

**Assessment**

- ◆ During assessment, practitioners begin making decisions based on a clear understanding of local prevention needs. They also begin building relationships with data keepers and stakeholders who can play important roles in supporting and sustaining local prevention efforts over time.

**Capacity**

- ◆ Intentional capacity building at all levels helps to ensure that successful programs are sustained within a larger community context, and therefore less vulnerable to local budgetary and political fluctuations.
- ◆ Effective capacity building increases an organization's or community's ability to respond to changing issues with innovative solutions.
- ◆ Building capacity also involves promoting public awareness and support for evidence-based prevention, and engaging partners and cultivating champions who will be vital to the success—and sustainability—of local prevention efforts.

**Planning**

- ◆ When developing a comprehensive approach to preventing substance misuse, communities should consider the degree to which prevention interventions fit with local needs, capacity, and culture: the better the fit, the more likely interventions are to be both successful and sustainable.

**Implementation**

- ◆ By working closely with community partners to deliver evidence-based programs and practices as intended, closely monitoring and improving their delivery, and celebrating "small wins" along the way, planners help to ensure their effectiveness and begin to weave prevention into the fabric of the community.

**Evaluation**

- ◆ Through process and outcome evaluation, communities can make important mid-course corrections to prevention efforts, identify which practices are worth expanding and/or sustaining, and examine ongoing plans for—and progress toward—sustaining those practices that work.
- ◆ By sharing evaluation findings, planners can also help build the support needed to expand and sustain effective interventions.

**Cultural Competence (Guiding Principle)**

- ◆ To ensure that prevention practices produce positive outcomes for members of diverse population groups, communities must engage in an inclusive and culturally appropriate approach to identifying and addressing their substance misuse problems.
- ◆ Culturally competent prevention is the only type of prevention worth doing—and sustaining.

## Appendix C

### How the SPF Contributes to Sustainability

# Resources

- [CT DPH Prevention and Health Promotion Division](#)
- [Department of Mental Health and Addiction Services](#)
- [CT Data Collaborative – Town Profiles](#)
- [CT Town Equity Reports](#)
- [Regional Priority Reports](#)
- [Regional Behavioral Health Action Organizations \(RBHAOs\)](#)
- [Local Prevention Councils](#)
- [TTASC Coalition Tools and Resources](#)



# TTASC Prevention Professional and Coordinator Trainings and Tools

## Trainings

- Prevention 101, due Fall
- Meeting Management 101, due Fall
- Strategic Prevention Framework (SPF) 101
- CPS Application Steps
- CPS Exam Prep
- 12 Sector Engagement Series
- Ethics Fundamentals- 2 hr.
- Ethics Across the SPF: - 2 hr.
- Ethics & Data Collection- 2 hr. in progress
- Coalition Sustainability
- Gambling – via Gambling Prevention Services

## Tools

- SPF Implementation Action Checklist
- Coordinator, Coalition Member, and Youth Peer Advocate job descriptions, roles and responsibilities
- Coalition Vitality Assessment Tool
- Onboarding Templates: 101 and Pro Versions, Youth Peer Advocate
- Sustainability Action Template
- Business Sector Action Checklist
- Faith Sector Action Checklist
- Evidenced Based Strategies Guides
- Drug Fact Sheets
- Parent Guide to Opioids- e-book, due June
- Vaping Resources

## Explainer Videos

- Engaging Coalitions in Logic Model Development
- SPF for Coalition Members
- Marijuana: Changing the Conversation
- Engaging Coalition Members in Sustainability Planning
- The Opioid Crisis: How can we make a difference?
- Opioid and Prevention Training
- Getting Your Prevention Specialist Credential
- Understanding Addiction
- Gambling Prevention Services video series coming soon
- Prevention Works,
- Vaping
- Polysubstance Abuse

# Upcoming Trainings and Ways to Connect

How to access tools on the TTASC Website:  
<https://preventiontrainingcenter.org/>

Feedback on this session:  
<https://www.surveymonkey.com/r/T678TBK>:

Save the Dates:

Prevention 101: Fundamentals of the Prevention Field: Oct. 12

Fundamentals of Meeting Management for Prevention Coalitions and Local Prevention Councils: Oct. 19

Certified Prevention Specialist Exam Prep Session: Oct. 27

Link to register: <https://preventiontrainingcenter.org/all-events>

You Tube Link to 12 Sector Collaboration Series:

<https://www.youtube.com/channel/UCHROCgAU6PaUmofYI3yx2uA>