

Handbook for Community Anti-Drug Coalitions



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INSTITUTE



Community Anti-Drug Coalitions of America
National Community Anti-Drug Coalition Institute

Coalition building is hard and fulfilling work. By bringing together different sectors of the community, your coalition can effectively work to develop a comprehensive solution to your community's unique substance abuse problem.

This brief handbook was developed by CADCA's National Coalition Institute. The Institute was established in 2002 by an Act of Congress to improve the effectiveness of community anti-drug coalitions across the nation.

We developed this resource to educate, inform and empower your coalition. It will provide you with some of the basic tools needed for success. We hope it will help you in your important work and that you will contact us whenever a need arises.

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CADCA (Community Anti-Drug Coalitions of America)

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Introduction to Anti-Drug Coalitions

History of Community Anti-Drug Coalitions

Local coalitions have changed the way that American communities respond to the threats of illegal drugs, excessive alcohol, and tobacco use. For example, the crack epidemic of the late 1980's overwhelmed many communities. There was a sense that communities did not have the power or ability to solve their own problems. Some, in despair, advocated for legalization. Others mistakenly believed that only a select few - researchers, outside experts and consultants - could solve the problems of excessive alcohol and illicit drugs.

But America's communities found the answer. By bringing together the entire community - parents, teachers, young people, police, prosecutors, health providers, churches, business and civic leaders, elected officials and concerned citizens - communities can transform themselves. The coalition movement that developed in response to crack has played a significant role in keeping today's problem drugs like methamphetamines, Ecstasy and prescription drugs from assuming the same national epidemic proportions as did crack cocaine. And, in communities where one or more of these drugs has created overwhelming problems, coalitions have been key to the development of effective solutions.

Throughout the United States, community coalitions are making a significant difference. As we saw in the National Institute of Drug Abuse's 2003 Monitoring the Future results, the number of young people using drugs continues to decline. America's anti-drug coalitions can claim part of the credit for the continuing decline in substance use and abuse.

What Are Coalitions?

CADCA defines coalitions as a formal arrangement for collaboration between groups or sectors of a community, in which each group retains its identity but all agree to work together toward a common goal of building a safe, healthy, and drug-free community.

Not all programs or initiatives are coalitions.

Coalitions have and need deep connections to the local community and they serve as catalysts for change in their community. Coalitions are not run by outside organizations nor are they human service organizations.

Coalitions must work hard to connect with their community members on a grassroots level and accept that coalition building takes time and effort.

A coalition uses multiple strategies across multiple sectors of the community.

Coalition building, collaborative problem solving, and community development are some of the most effective interventions for change available to us today. Coalitions are partnerships of the many sectors of a community which gather together collaboratively to solve the community's problems and guide the community's future. When they are driven by citizen identified issues, citizens become involved in all steps of the problem solving process.

Source: Excerpts from "What Coalitions Are Not" by Tom Wolff

The Public Health Model

The public health model requires coalitions to think in a comprehensive manner beyond the part of the problem they see. The model stresses that problems arise through the relationships and interactions among the agent, the host, and the environment. In the case of alcohol, tobacco, and other drug problems, the agent is the substance, the host is the individual drinker or drug user, and the environment is the social and physical context of drinking or drug use.

A public health approach to prevention requires not only an understanding of how the three factors of host, agent, and environment interact, but also inclusion of a plan of action for influencing all three.

Influencing the Host

Prevention practitioners can reach people directly through schools, social programs, workplaces, day care centers, religious organizations, and other groups.

Influencing the Agent and Other Causative Factors

The agent in the public health model is the substance. Public health advocates have had some success in influencing legal agents such as alcohol and tobacco.

Influencing the Environment

Programs that influence the environment to reinforce healthy behaviors are increasingly part of community-based prevention efforts. Environments include schools, families, neighborhoods, and communities, as well as broader social and cultural settings.

Risk and Protective Factors

Research over the past two decades has tried to determine how drug abuse begins and how it progresses. Identifying and understanding the risk and protective factors in your community provides a solid base from which to begin planning. Risk factors can increase a person's chances for drug abuse, while protective factors can reduce the risk. Most individuals at risk for drug abuse do not start using drugs or become addicted.

The table below describes how risk and protective factors affect people in settings where interventions can take place.

Risk Factors	Domain	Protective Factors
Early Aggressive Behavior	Individual	Self-Control
Lack of Parental Supervision	Family	Parental Monitoring
Substance Abuse	Peer	Academic Competence
Drug Availability	School	Anti-drug Use Policies
Poverty	Community	Strong Neighborhood Attachment

Some risk factors may be more powerful than others at certain stages in development. An important goal of prevention is to change the balance so protective factors outweigh risk factors.

Source: Excerpt from National Institute of Drug Abuse's Preventing Drug Use among Children and Adolescents

Some Things to Consider

Collaborative Leadership Principles

Keep the coalition focused on goal

Successful collaborative leaders keep the diverse members attuned to their common goal.

Persuade and utilize influential community partners

Strong leaders bring community ties to the table and develop partnerships with organizations and individuals.

Maintain collaborative process

Instead of being the decision-maker, collaborative leaders actively seek to continue the group decision-making, planning and infrastructure building processes.

Diversify, motivate and energize your volunteer base

Leaders should help recruit diverse community members, involve them in meaningful ways, and keep them feeling upbeat about their experience as a member of the team.

Help resolve member conflicts

Collaborative leaders make deliberate efforts to help resolve member conflicts in open, unbiased ways.

Communicate with the community

Coalition leaders that bring excellent written and verbal communication skills to the table help get the coalition message out to the community and potential partners.

Cultivate leadership in members, including youth

For a coalition to sustain that momentum, it is crucial that new leadership is both allowed and encouraged to develop.

Cultural Competency

The ability of a coalition to communicate effectively within a culturally-diverse environment brings new perspectives, ideas and strategies to the table and can deepen trust and cooperation by community members.

Higher levels of cultural competence can also increase respect and mutual understanding between cultures while helping to shine light on potential problems. By fostering inclusion and equality, coalitions can enhance community participation and in doing so improve their sustainability.

Possible Interventions:

- Increase the number of diverse persons in your coalition
- Develop an educational plan for employees, coalition members, volunteers, to improve competencies
- Identify and re-write policies, practices, and structures that limit the full participation of diverse communities
- Hold educational events that explore the history, cultural, issues, and strengths of diverse groups within your communities
- Assure that diverse voices are "at the table"
- Establish, communicate, and model how the mission, vision, goals and values of the coalition align with and are served by a diverse membership and inclusive practices.

Coalition Self-Assessment

By answering the following questions your coalition can see if all the necessary elements are in place to initiate and sustain a plan to successfully reduce one or more substance abuse problems in your community.

1. What is the strategy you are using to mobilize your community or address your most pressing substance abuse problems? Why is this strategy effective? How will you be able to sustain the selected strategy over time, or make changes with shifts in your community?
2. What are the most important substance abuse problems(s) in your community that you are trying to address? Why have you chosen to address it (or them)? How do you know that those are the most serious substance abuse problems in your community? (What data and experience confirm your conclusions?).
3. What specific programs, policies, mobilization efforts, or additional actions must you and others take to address your priority issues? Why are these actions likely to be effective?
4. What other community institutions and leaders must be involved for your efforts to achieve greater success? How do you expect to get their collaboration and what roles do you want them to fulfill?
5. How do you know that your efforts are achieving the expected results? Who collects and analyzes the information necessary for

you to make these conclusions? How is this data used to improve your prevention efforts?

6. What governance structure have you established to achieve your strategy and hold yourselves accountable and to ensure continuing community and financial support?

7. What mechanisms have you developed to ensure that your coalition reviews and publicly reports information about its efforts and about community changes that may affect your priorities, strategies and activities?

8. How does your coalition train, encourage and mobilize your current and future leaders, workers, and volunteers?

9. What are your resource development plans to ensure that you meet matching requirements and have long term sustainability for your strategies?

10. What are your plans for strengthening your governance structure to achieve your strategies and policies for getting money, maintain focus on your highest priorities, and meet the needs of the project itself?

11. How do you relate to your host institution (where applicable)? What do you expect financially from the groups that you work with? What is the mix of public and private funding that you have to address the priority issue (s) identified in your planning process?

CADCA and the National Coalition Institute

Overview

CADCA (Community Anti-Drug Coalitions of America) is the national membership organization for local coalitions working to build drug-free communities using multiple strategies across multiple sectors of the community.

CADCA has many tools and resources available for coalitions, including a weekly e-newsletter, quarterly newsletter and an extensive website. The National Leadership Forum, CADCA's annual conference, is designed around the training needs and interests of coalition members.

CADCA administers the National Community Anti-Drug Coalition Institute. The Institute was established in 2002 by an Act of Congress to serve as a center for coalition training, technical assistance, evaluation, research and capacity building.



The Institute provides training and technical assistance to community coalitions. The Institute is available to answer coalition or prevention related questions and provide resources to improve the effectiveness of coalitions, including training opportunities, publications and an extensive website.

News & Information for Coalitions

- **Coalitions Online**

Coalitions Online, CADCA's electronic newsletter is an HTML-based newsletter distributed on a weekly basis to more than 10,000 subscribers. Content includes feature articles highlighting the work of America's coalitions, items on new sources of funding and research findings, and information to help strengthen your coalition. Sign up for your free e-mail subscription at cadca.org

- **Research into Action**

CADCA's National Coalition Institute has introduced a new free publication called "Research into Action," which reports on the relevant findings of research that impact the work of coalitions and examines what coalitions can do to put the new knowledge into action. "Research into Action" is available by e-mail and on the Institute's website. Sign up for your free e-mail subscription at www.coalitioninstitute.org.

- **www.coalitioninstitute.org**

CADCA's National Coalition Institute's website www.coalitioninstitute.org is a valuable resource for community anti-drug coalitions. The site features coalition information on evaluation, training, technical assistance, prevention programs, Institute services, and puts you in touch with our knowledgeable staff.

Coalition Training and Technical Assistance

Call or email the Institute

CADCA's National Coalition Institute is available to provide your coalition with training or technical assistance. Please call 1-800-54-CADCA, ext. 240, or email training@cadca.org to receive quick and friendly service.

Satellite Broadcasts

CADCA, the National Guard Bureau (NGB) and the Multijurisdictional Counterdrug Task Force Training Program (MCTFT) co-sponsored live satellite broadcasts on varied topics related to substance abuse prevention, intervention and treatment. Visit the Institute's website for the current schedule.

Audio Teleconferences

CADCA's National Coalition Institute offers regular no-cost audio teleconferences on substance abuse topics of interest to coalitions. Visit the Institute's website for the current schedule and archived events.

On-site training workshops

Arrangements can be made for trainers from the National Coalition Institute to come to your location to train your coalition on a variety of topics, including strategic planning, evaluation, and cultural competency.

Training at national, regional and state conferences

CADCA and the National Coalition Institute plan, sponsor and participate in a number of national, regional and state coalition-focused conferences throughout the year.

Publications

Strategizers

CADCA has published over 47 Strategizers. These brief publications provide practical guidance to coalition leaders about topics related to coalition operations and effectiveness. Available at cadca.org

Practical Theorist

CADCA has published several Practical Theorists in collaboration with the National Institute on Drug Abuse. This series is devoted to illustrating how research results can be applied to the daily practice of community coalitions. Available at cadca.org

Coalitions

CADCA's print newsletter provides information about CADCA and practical tips for coalition leaders and others who support coalitions. Available at cadca.org

Coalitions Online

Coalitions Online, CADCA's electronic newsletter is an HTML-based newsletter distributed on a weekly basis to more than 10,000 subscribers. Content includes feature articles highlighting the work of America's coalitions. Available at cadca.org

Research into Action

Research into Action is a free, one-page briefing published six times a year by CADCA's National Coalition Institute. To view the briefing, go to <http://www.coalitioninstitute.org/researchintoaction.asp>.

National Coalition Academy

Through a unique format that combines classroom instruction with video teleconferencing, mentoring and a comprehensive online support system, participants of the CADCA Institute's National Coalition Academy learn to become more effective coalition leaders.

The training equips coalition leaders with vital skills and techniques necessary to make real change happen in a community. The National Coalition Academy is offered to coalitions free of charge through support from CADCA's Institute and the National Guard Bureau.

Participants receive instruction on core competencies essential for a highly-effective coalition. The competencies range from developing strategic action plans and building partnerships to enhancing cultural competency and writing grant applications.

In addition to classroom sessions, trainees participate in six video teleconferencing community broadcasts, where they communicate with their classmates and work together to implement essential coalition strategies.

The year-long training also includes an interactive website that allows participants to obtain additional resources and communicate with their instructors and classmates.

For more information or to sign up your coalition, contact Mark Yanick, Training Manager at myanick@cadca.org or 1-800-54-CADCA.

Leader Mentor Program

CADCA's National Coalition Institute's Coalition Leader Mentor Program is a formal, structured relationship between two coalitions.

Novice coalitions are guided through a process to achieve skills and gain knowledge that will help them reach their goals to create and sustain their community anti-drug coalition and generate outcomes.

Program objectives include developing an environment of mutual learning between new coalitions and experienced coalitions with documented success in their communities, and to expand the amount of technical assistance available to forming coalitions.

Coalitions are matched based the following criteria:

- Geographic proximity
- Culture/ language
- Geographic similarity (rural, urban, etc.)
- Size of coalition
- Size of area served (local, county, state, etc.)
- Socio-economic similarities

Leader Mentors also advise the Institute as well as the National Coalition Academy participants, and work cooperatively on a national project to benefit the field.

For more information contact Amy Wiley at awiley@cadca.org or call 1-800-54-CADCA, ext. 240.

GOT OUTCOMES! Coalition of Excellence Awards

CADCA's National Coalition Institute offers your coalition an opportunity publicize its successes. Awardees will receive GOT OUTCOMES! "Coalition of Excellence" Award presented at CADCA's National Leadership Forum, free registration and hotel stay at CADCA's Forum, opportunity to be highlighted as a model coalition, and assistance to position your coalition to seek NREPP (National Registry of Effective Programs and Practices) status.

Make a clear case for why your coalition should be a candidate for the GOT OUTCOMES! "Coalition of Excellence" Awards. Describe your strategies and back up your successes with data. You are free to provide information in any format that you choose. Your story will be judged on its clarity, comprehensiveness and level of success.

If your coalition is selected as a finalist, you will be contacted to provide additional information. We can help you fill out tables on substance abuse outcome measures, intermediate variables such as risk and protective factors, and social indicator data.

For additional application details visit
www.coalitioninstitute.org/gotoutcomes.asp.

If you have any questions, please contact Evelyn Yang, M.A., Evaluation and Research Manager, at 1-800-54-CADCA or email eyang@cadca.org.

Conferences

National Leadership Forum

CADCA's National Leadership Forum is the nation's premier training conference for community anti-drug coalition members and prevention professionals. Senior Federal officials, members of Congress, and Presidents Clinton and Bush have spoken at past Forums. The Forum is an annual event, usually held within the first months of the new year in Washington, DC.

The Forum provides networking opportunities, training and workshops on coalition core competencies, drug abuse trends, the latest techniques and research in substance abuse, and a chance to meet key congressional leaders.

Other conference highlights include regional receptions, roundtable discussions, a special program for Youth participants, Capitol Hill Day, and the award luncheon. Visit cadca.org for more details.

Mid-Year Training Institute

CADCA hosts the Mid-Year Training Institute. The Institute is designed to provide focused and hands on training on core coalition competencies to participants in a small group format. The Mid-Year is held in a different city each year to provide people from all regions of the country the opportunity to participate. Participation is limited to 400 attendees. Visit cadca.org for more information.

Funding Links

The Foundation Center

Online foundation directory, library, and searchable issues of Philanthropy News Digest.

<http://www.fdncenter.org/>

Office of National Control Drug Policy - Funding

Listing of drug-related funding opportunities, training and technical assistance, equipment procurement programs, and resources from public and private sources.

<http://www.whitehousedrugpolicy.gov/funding/index.html>

The Robert Wood Johnson Foundation

Funding overview, news, publications and grant info.

<http://www.rwjf.org/>

SAMHSA Funding Opportunities

Information on current grant funding opportunities, awardees, assistance with applications, special notices, and archives.

<http://www.samhsa.gov/grants/grants.html>

US Dept. of Education - Grants

Funding opportunities forecast, searchable guide to ED programs, discretionary grants process overview.

<http://www.ed.gov/about/offices/list/ocfo/grants/grants.html>

The W. K. Kellogg Foundation

Provides knowledge base with resources as well as an overview of its grant making guidelines.

<http://www.wkkf.org/>

General Resources

The American Indian and Alaskan Native National
Resource Center for Substance Abuse Services
www.oneskycenter.org

CADCA (Community Anti-Drug Coalitions of America)
<http://cadca.org>
1-800-54-CADCA

CADCA's National Coalition Institute
www.coalitioninstitute.org

Center for Underage Drinking Laws
www.udetc.org

Center on Addiction and Substance Abuse at Columbia
University (CASA)
www.casacolumbia.org

University of Kansas Community Tool Box
<http://ctb.ku.edu/>

Join Together
www.jointogether.org

National Asian Pacific American Families Against
Substance Abuse
www.napafasa.org

National Association for Children of Alcoholics
www.nacoa.org

National Institute on Alcohol Abuse and Alcoholism
<http://www.niaaa.nih.gov/>

National Clearinghouse for Alcohol and Drug
Information
<http://ncadi.samhsa.gov>
1-800-729-6686

National Institute on Drug Abuse
www.drugabuse.gov

National Youth Anti-Drug Media Campaign
www.mediacampaign.org

Partnership for a Drug-Free America
www.drugfreeamerica.org

SAMHSA's Center for Substance Abuse Prevention
<http://csap.samhsa.gov>

SAMHSA's National Centers for the Application of
Prevention Technologies
www.captus.org

SAMHSA's Prevention Platform
<http://preventionplatform.samhsa.gov>

SAMHSA's Science-Based Prevention Programs
<http://modelprograms.samhsa.gov>

White House Office of National Drug Control Policy
www.whitehousedrugpolicy.gov

Useful Definitions

Activities: Efforts to be conducted to achieve the identified objectives.

Adaptation: Modification made to a chosen intervention; changes in audience, setting, and/or intensity of program delivery. Research indicates that adaptations are more effective when underlying program theory is understood; core program components have been identified; and both the community and needs of a population of interest have been carefully defined.

Age of Onset: The age of first use.

Agent: In the Public Health Model, the agent is the catalyst, substance, or organism causing the health problem. In the case of substance abuse, the agents are the sources, supplies, and availability.

ATOD: Acronym for alcohol, tobacco, and other drugs.

Baseline: The level of behavior or the score on a test that is recorded before an intervention is provided or services are delivered.

Capacity: The various types and levels of resources that an organization or collaborative has at its disposal to meet the implementation demands of specific interventions

Capacity Building: Increasing the ability and skills of individuals, groups, and organizations to plan, undertake, and manage initiatives. The approach also enhances the capacity of

the individuals, groups, and organizations to deal with future issues or problems.

Coalition: A formal arrangement for cooperation and collaboration between groups or sectors of a community, in which each group retains its identity but all agree to work together toward a common goal of building a safe, healthy, and drug-free community.

Community: People with a common interest living in a defined area. For example, a neighborhood, town, part of a county, county, school district, congressional district or regional area.

Community Readiness: The degree of support for or resistance to identifying substance use and abuse as significant social problems in a community. Stages of community readiness for prevention provide an appropriate framework for understanding prevention readiness at the community and state levels.

Cultural Diversity: Differences in race, ethnicity, language, nationality, or religion among various groups within a community. A community is said to be culturally diverse its residents include members of different groups.

Cultural Sensitivity: An awareness of the nuances of one's own and other cultures

Culture: The shared values, traditions, norms, customs, arts, history, folklore, and institutions of a group of people that are unified by race, ethnicity, language, nationality, or religion

Environment: In the Public Health Model, the environment is the context in which the host and the agent exist. The environment creates conditions that increase or decrease the chance that the host will become susceptible and the agent more effective. In the case of substance abuse, the environment is a societal climate that encourages, supports, reinforces, or sustains problematic use of drugs.

Evaluation: A process that helps prevention practitioners discover the strengths and weaknesses of their activities so that they can do better over time. Time spent on evaluations is well spent because it allows groups to use money and other resources more efficiently in the future. Some evaluations can be done at little or no cost, and some can be completed by persons who are not professional evaluators.

Expected Outcomes: The intended or anticipated results of carrying out program activities. There may be short-term, intermediate, and long-term outcomes.

Goal: A broad statement of what the coalition project is intended to accomplish (e.g., delay in the onset of substance abuse among youth).

Host: In the Public Health Model, the host is the individual affected by the health problem. In the case of substance abuse, the host is the potential or active user of drugs.

Impact Evaluation: Evaluation that examines the extent of the broad, ultimate effects of the project, i.e., did youth drug use decrease in the target area?

Logic Model: A comprehensive and sequential method of moving from defining needs to developing goals, objectives, activities, and outcome measures. The Logic Model shows the link between each component. The goal is often built around the ultimate impact that is sought by the program. The objectives are often built around the risk and protective factors. The activities then may indicate several interventions.

Multisector: More than one agency or institution working together.

Multistrategy: More than one prevention strategy, such as information dissemination, skill building, use of alternative approaches to substance abuse reduction, social policy development, and environmental approaches, working with each other to produce a comprehensive plan.

Objectives: What is to be accomplished during a specific period of time to move toward achievement of a goal, expressed in specific measurable terms.

Outcome Evaluation: Evaluation that describes the extent of the immediate effects of project components, including what changes occurred.

Process Evaluation: Evaluation that describes and documents what was actually done, how much, when, for whom, and by whom during the course of the project.

Protective Factors: Those factors that increase an individual's ability to resist the use and abuse of drugs, e.g., strong family bonds, external support system, and problem-solving skills.

Resiliency Factors: Personal traits that allow children to survive and grow into healthy, productive adults in spite of having experienced negative/traumatic experiences and high-risk environments.

Risk Factors: Those factors that increase an individual's vulnerability to drug use and abuse, e.g., academic failure, negative social influences, and favorable parental or peer attitudes toward or involvement with drugs or alcohol.

Substance Abuse: The use or abuse of illegal drugs; the abuse of inhalants; or the use of alcohol, tobacco, or other related product as prohibited by State or local law.

Sustainability: The likelihood of a program to continue over a period of time, especially after grant monies disappear.

Target Group: Persons, organizations, communities, or other types of groups that the project is intended to reach.

Technical Assistance (TA): Services provided by professional prevention staff intended to provide technical guidance to prevention programs, community organizations, and individuals to conduct, strengthen, or enhance activities that will promote prevention.

Theory of Change: As used in the Achieving Outcomes Guide, a set of assumptions (also called hypotheses) about how and why desired change is most likely to occur as a result of a program. Typically, the theory of change is based on past research or existing theories of human behavior and development.



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