

# Medford Health Matters Drug Free Communities Grant: First Five Years at a Glance January 2010

This document summarizes the activities and plans implemented, the successes achieved, and the challenges encountered during the first five years (2004-2009) by Medford Health Matters (MHM) and the Greater Lawrence Family Health Center/Northeast Center for Healthy Communities (as fiscal agent) in implementing the Drug Free Communities Grant. The Substance Abuse and Mental Health Services Administration (SAMHSA) which funds and oversees the Drug Free Communities Grant Program (DFC) requires grantees to utilize the Strategic Prevention Framework to assess, prioritize, mobilize the community, implement programming and evaluate outcomes to reduce youth substance abuse in Medford and to build the Medford Health Matters Coalition as a whole. In addition, funded strategies and programs are expected to be culturally competent and sustainable so that strategies continue after grant funding ends. During the first five years of the DFC grant in Medford the focus was on alcohol and marijuana prevention with some efforts focused on prescription drug abuse prevention.

In 2010, the Greater Lawrence Family Health Center/Northeast Center for Healthy Communities received an additional round of DFC funding on behalf of Medford Health Matters. The information in this document will be used to inform the second five years of funding (2009-2014) to ensure that strategies and programs reduce substance abuse among Medford youth, effectively build and grow Medford Health Matters, and that programs are sustainable and culturally competent.

## ASSESSMENT

Assessment activities throughout the year included:

- Communities That Care Youth Survey (CTC) implemented in 2005, 2007 and 2009 in 6<sup>th</sup>-12<sup>th</sup> grades in Medford Public Schools;
- Community Needs and Assets Assessment in 2005, including archival data collection from police, local hospitals, MassCHIP (the state's interactive database of state collected data), and Census data;
- Faculty/Staff PRIDE Survey in 2005;
- Parent Survey developed by the Northeast Center for Healthy Communities in 2006 and 2008;
- Coalition Assessment in 2008;
- Youth AOD Access Survey in 2006;
- Key informant interviews in 2008;
- Police Survey in 2008;
- Parent focus groups in 2009;
- Youth focus groups in 2009;
- Key informant interviews of MHM board members in 2009; and
- Training Needs Survey of MHM board and members in 2009.

Assessment activities collected information on the 4 core measures for alcohol, tobacco and marijuana (age of onset, past 30 day use, parental disapproval and perception of harm) required by SAMHSA in addition to risk and protective factors that exist in the community, home, school, and peer environments in which Medford youth live.

Assessment data identified and confirmed the following concerns around which strategies were focused:

- Availability and ease of access to alcohol, tobacco and marijuana in the community;
- Limited youth connections to their community; and
- Youth perception that parents and community do not disapprove of youth alcohol, tobacco and marijuana use.

## CAPACITY AND COMMUNITY MOBILIZATION

Medford Health Matters' structures related to the DFC grant include the Substance Abuse Task Force, Team TADD West, and Team South. Additional task forces include the Finance Committee, Environmental Task Force, and Emotional Well-Being Task Force, as well as the Executive Committee and the Board of MHM. The membership of MHM and the Board has fluctuated over the years with new members joining and experienced members leaving the coalition for a variety of reasons (including lack of time, lack of relevance to their work, focus on substance abuse/youth).

In 2008, the City of Medford's Health Department secured funding from the Massachusetts Department's Bureau of Substance Abuse Services (BSAS) to implement strategies to reduce underage drinking using environmental strategies.<sup>1</sup> The activities required by this funder helped reinvigorate the Substance Abuse Task Force (SATF) in 2008 and its membership, which held a planning retreat in 2008 and has been meeting monthly since formed in 2008. The SATF's membership recently includes representatives from Tufts University, Hallmark Health, Medford Public Schools, Medford Police Department, Medford Health Department, DFC and BSAS staff, parents and grandparents, the business community, and the parent support and recovery community.

Within the first year of the DFC grant (2004) a youth advisory group was formed to provide feedback and guidance to the implementation of strategies to reduce youth substance abuse. Over the years the group has expanded into a working task force with a particular focus on alcohol and mentoring of youth in leadership skills. In late 2008 and early 2009 Team TADD (Teens Against Drinking and Drugs) South expanded into two separate youth groups with one meeting at 146 Exchange Ave. in South Medford and the other youth group meeting at the West Medford Community Center in West Medford. As with many coalitions and volunteer membership groups, membership in the Team TADDs

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<sup>1</sup> Environmental strategies include activities that address the social environment and social norms in a community to reduce substance abuse and underage drinking among youth. Environmental strategies include media advocacy and social marketing, policy change, and enforcement of current laws including compliance checks and penalties for non-compliance with underage drinking laws (social host and merchant sales to minors).

has also fluctuated over the life of the groups. Twenty youth are currently served by both groups on a regular and continuous basis. Some of Team TADD's DFC-related activities during the first five years included youth focus groups, "I Am Allergic to Stupid Decisions" texting campaign, compliance checks and shoulder tap surveys, Sticker Shock campaigns, articles in the Medford Transcript, regular meetings, and fundraising.

In 2009 a partnership also was formed with the local High School SADD chapter. Through this partnership a social marketing campaign aimed at reducing underage drinking was developed with the first piece in a 3-piece visual campaign launched.

Challenges the coalition identified during the first five years include:

- No protocols for recruiting, mentoring and orienting new members to MHM;
- No or limited policies and procedures for MHM's operations (i.e., decision making processes, role and autonomy/authority of task forces and committees, role of fiscal agent in staff oversight and budgeting, understanding of fiscal agent's fiduciary responsibilities to the funder and to Medford as a whole);
- Capacity of MHM board and members in addressing substance abuse through the board rather than the SATF;
- No or limited communications plan;
- Lack of clarity around MHM board members' roles, committees roles, members' roles, fiscal agents' roles, etc.;
- Representativeness of MHM membership and board vis-à-vis the larger Medford community; and
- Enhancing diversity of overall membership.

## PLANNING AND PRIORITIZATION OF CONCERNS AND STRENGTHS

Through the assessment process, the coalition identified the following objectives to reduce youth substance abuse in Medford:

- Each year 20 parents and 20 youth will increase their perception of harm of alcohol, tobacco and other drug use;
- Each year 1,000 parents and other significant adults will increase their perception of harm of youth substance use;
- Each year 1,000 youth ages 8-18 will increase their knowledge and perception of the risks of alcohol, tobacco, and other drug use;
- Each year 50 teachers, coaches, and school staff will increase their knowledge and skills to reduce youth substance use;
- Each year three new pharmacies will review and revise store policies to decrease the misuse of over-the-counter medications; and
- Merchants will decrease willingness to sell alcohol to minors.

Through the assessment process, the coalition identified the following objectives to build Medford Health Matters:

- Each year 10 MHM coalition members will increase their knowledge of and capacity to implement effective strategies to reduce youth substance use and build collaborations.
- Each year 10 MHM coalition members will increase their active membership.
- MHM coalition will increase their membership and diversity.

## IMPLEMENTATION

The following is a list of strategies implemented in the first five years of DFC funding to reduce youth substance abuse:

- Several rounds of Shoulder Tap Surveys;
- Quarterly compliance checks;
- Several rounds of Sticker Shock Campaign;
- Several messages developed for social marketing campaign – one launched;
- Resource and information dissemination to over 500 community members at Tufts Community Day, Victorian Stroll and other community events;
- Youth Asset Builder Award event recognizing contribution of volunteers and asset builders;
- Two key City Leadership Events;
- Monthly media articles in the Transcript;
- Revamped [www.medfordhealthmatters.org](http://www.medfordhealthmatters.org) website;
- Bi-annual trainings of MHM members, BSAS grant staff, and Team TADD members; and
- Ongoing evaluation including process and outcomes monitoring of efforts and youth data.

## EVALUATION

Communities That Care youth survey data reveals no significant changes in trend data for past 30 day use, perception of harm of use, parental disapproval of use, and age of onset of use of marijuana, tobacco, and alcohol.

### **Compared to their national counterparts**

Medford 8<sup>th</sup> graders reported lifetime use of alcohol, marijuana, cigarette, smokeless tobacco and cocaine at higher rates than their national counterparts. Ten percent (10%) more Medford 8<sup>th</sup> graders reported lifetime alcohol use than their national counterparts. With the exception of heroin use, Medford 8<sup>th</sup> graders reported past 30 day use of all substances, including binge drinking, at higher rates than their national counterparts.

Comparative higher trends in substance use continued from middle school to high school. Medford 12<sup>th</sup> graders reported higher rates of lifetime alcohol, marijuana, smokeless tobacco and Ecstasy use compared to national counterparts. In addition, with the exception of methamphetamine and Ecstasy, Medford 12<sup>th</sup> graders reported past 30-day use of all substances, including binge drinking, at higher rates than their national counterparts.

## SUSTAINABILITY

The Northeast Center for Healthy Communities, a Program of the Greater Lawrence Family Health Center, will continue to serve as fiscal agent for the Drug Free Communities grant after successfully obtaining the grant for an additional five years (October 2009-September 2014). Sustaining community efforts to help young people make healthy decisions, including not using drugs and alcohol, will continue to be critical to long-term success of the coalition's efforts. Efforts to change policy, institutionalize strategies (including trainings incorporated into schools and existing programs, alcohol policy changes, etc.), and change the normative environment of Medford will be effectively sustained without the support of grant funds or a coordinator.

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Northeast Center for Healthy Communities

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[www.nc4hc.org](http://www.nc4hc.org)

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