

TRANSITION FROM SIG (SICA) TO SPF SIG AND ROLE OF THE SEOW

This document is intended to provide general information about the past and present initiatives funded by the Federal Center for Substance Abuse Prevention (CSAP) in the State of Oklahoma. CSAP is currently shifting gears as it moves from the original State Incentive Grant Program (SIG) to the new Strategic Prevention Framework State Incentive Grant Program (SPF SIG). There are many similarities between the original SIG Program and the new SPF SIG Program, but also some important differences. The similarities and differences between these two programs will be discussed in an effort to illuminate where the prevention field in Oklahoma has just emerged from, where it is likely heading to, and the role of the newly formed State Epidemiological Outcomes Workgroup (SEOW) in this transition.

CSAP's State Incentive Grant Program

In 1997, CSAP began funding the SIG Program to promote the use of data driven prevention planning strategies by state prevention systems. The original SIG program represented an attempt by CSAP to motivate states who received the grant to integrate a 7-step planning process which included the following phases: needs assessment, prioritization of needs, resource assessment, identification of gaps between needs and resources, implementation of best practice programs to address identified gaps and evaluation of those programs. Oklahoma received a SIG (renamed the State Incentive Cooperative Agreement [SICA] in Oklahoma) from CSAP as part of the fourth cohort of sub-recipient states in October 2000, and the SICA Project was administered by the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) from October 2000 to September 2005.

The planning process promoted by the original SIG was guided by Hawkins and Catalano's Risk and Protective Factor Model of Adolescent Problem Behaviors and was focused on the prevention of substance use and abuse in the 12-17 age population. The Risk and Protective Factor Model specifies variables in four domains of a youth's life (family, school, community and peer-individual) which predict substance use and a host of other problem behaviors such as violence, delinquency, teen pregnancy and school drop out. As such, the data used by the 7-step planning process promoted through the SIG Program focused on data related to risk and protective factors identified by the model, as well as substance use and antisocial behavior rates. States and communities were expected to examine data relevant to risk and protective factors garnered through sources such as student surveys (e.g., the Oklahoma Prevention Needs Assessment Survey Data) and archival indicators routinely collected by agencies that are proxy indicators for risk and protection in the community (e.g., divorce rates, property and violent crime arrest rates) during the needs assessment phase. These data were used by prevention professionals to determine the priority risk/protective factors in the community contributing to substance use and antisocial behavior among youth. Programs were then selected based on the risk/protective factors they addressed: ideally prevention professionals would identify and select programs that addressed the

risk/protective factors that their community data suggested as priorities. Concomitantly, evaluation of the selected programs focused in large part on examining changes in risk/protective factors that were expected to result of program implementation. Presumably, programs should reduce the risk/protective factor levels they were chosen to address.

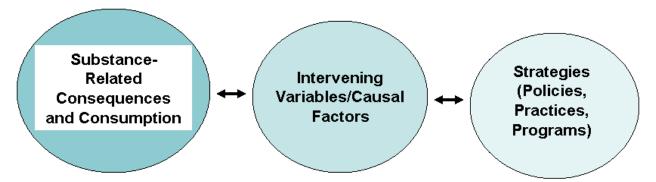
The focus of SIG implementation was more or less on prevention programs. Specifically, best practice programs that targeted risk and protective factors at the individual (participant) level. Likewise, the evaluation of SIG funded programs was primarily focused on measuring individual level changes in risk/protective factors as well as substance use and antisocial behavior.

CSAP's Strategic Prevention Framework State Incentive Grant Program

In October 2005, CSAP funded the first cohort of state sub-recipients for the SPF SIG Program. The SPF SIG Program builds upon the original SIG Program in supporting and motivating states to integrate and adopt data driven planning strategies into the state prevention systems. The Strategic Prevention Framework is made up of a 5-step process that is quite similar to the 7-step planning process promoted through the original SIG. The 5-step SPF process includes: a) an assessment phase where needs and resource assessment data are collected and examined, as well as community readiness data, b) a capacity building phase where needed capacity enhancements are identified and community mobilization occurs, c) a planning phase where a strategic prevention plan is developed which outlines the priority problem areas, capacity issues to be addressed and intervention implementation plans are specified, d) an implementation phase where the strategic prevention plan is carried out, and e) an evaluation phase where implementation is monitored, outcomes are examined and data informs changes to improve future implementation. In comparing the 7-step SIG and 5step SPF SIG planning processes, one notices a great deal of similarity between the actual activities included in both. There are, however, some important differences between SIG and SPF SIG, including these three major themes:

1) Focus on outcomes based prevention vs. causal factors (risk and protective factors) – One of the key principles of the SPF SIG Program is that it promotes an "outcomes based" prevention model. The diagram below presents a schematic of the SPF SIG planning focus. At the state level, prevention professionals are expected to first examine data relevant to the consequences and consumption of substance use and abuse in setting priorities for the state. Then and only then, community prevention professionals are to examine intervening variables which contribute to the prioritized consumption and consequence patterns as they identify and select interventions appropriate to address those issues in their community. By contrast, the original SIG Program was focused more directly on addressing the intervening variables (e.g., risk and protective factors) that lead to substance use and abuse at all stages of planning. With SPF SIG, intervening variables (risk and protective factors) are examined at the community level only after the consequence and consumption priorities are

identified at the state level. The focus of SPF SIG on consequence and consumption reflects a new step in the planning process, and the fact that the SPF SIG Program is promoting a public health approach to prevention where reduction of the consequences of substance abuse are the ultimate goals of prevention efforts rather than the reduction of the intervening variables.



- 2) Community level focus rather than individual level Another important change reflected in the SPF SIG Program is the fact that SPF SIG is explicitly focused on creating community level changes rather than individual level changes. Interventions funded by SPF SIG are expected to impact community level indicators; specifically, changes in consequence and consumption are expected to result from the SPF SIG planning and implementation process. CSAP has made it clear that community level change is the focal unit of analysis for SPF SIG funded interventions and individual (participant) level changes are of secondary importance. Therefore, if alcohol related motor vehicles crashes is the priority substance use consequence for the state, SPF SIG interventions would be expected to reduce the number or rate of such crashes during the life of the grant.
- 3) Prevention across the lifespan vs. the age 12-17 population Finally, whereas the original SIG was focused specifically on the age 12-17 population, SPF SIG is focused on prevention across the lifespan. States are expected to examine consequence and consumption data during the needs assessment and to identify target populations across the lifespan that contribute to the priority problem. Prevention interventions funded through SPF SIG may directly target youth, adult or elderly populations. With that said, there is a caveat: all SPF SIG states are required to address the issue of underage drinking within their State Strategic Prevention Plans.

State Epidemiological Outcomes Workgroups. As a means of increasing the use of data in prevention planning and decision making, CSAP requires that all SPF SIG subrecipient states organize and maintain a State Epidemiological Outcomes Workgroup (SEOW) for the duration of the grant period. The SEOW is expected to provide support and guidance to prevention staff who engage in planning and implementation of prevention activities by "bringing systematic, analytical thinking to the causes and consequences of the use of alcohol, tobacco and other drugs in order to effectively and efficiently utilize prevention resources."

Specifically, the role of the SEOW is to collect, analyze and interpret data on the causes and consequences of substance use and provide support and recommendations to prevention professionals at state and local levels to ensure that substance use related data is integrated into prevention planning efforts. In order to fulfill this role, the SEOW must have a membership made up of individuals with the following skills and abilities: access to critical state data on substance use consequences, consumption or causal factors, capability to analyze and interpret the data, ability to link outcomes of data analyses to decisions, and knowledge of state prevention system context. CSAP's recommendations regarding SEOW membership include the following possibilities: public health agencies, drug enforcement authorities, criminal justice/law enforcement, education, behavioral health (including substance abuse prevention), research/statistics and the like.

The Oklahoma State Epidemiological Outcomes Workgroup

The Oklahoma Department of Mental Health and Substance Abuse Services received a grant to fund a State Epidemiological Outcomes Workgroup (SEOW) through the CSAP in March 2006. Although Oklahoma had not yet received a SPF SIG grant, the receipt of an SEOW grant was intended to provide non-SPF SIG states like Oklahoma with a means of supporting and encouraging the use of data driven prevention planning, and the shift towards using the SPF process in prevention planning and implementation. The expectations of the SEOW grant were that an SEOW would be created and that a State Epidemiological Profile would be written which presented the available substance use consequence and consumption data, and potentially described the substance abuse prevention priorities for the state. In CSAP's own words, the epidemiological profile report is intended to provide a summary of the "nature, magnitude and distribution of substance use and related consequences across/within the state." Other potential activities of the SEOW included identification of relevant data indicators and sources from state agencies, identification of gaps in existing data relevant to substance use consumption and consequences, and providing consultation and guidance to state and local level prevention professionals regarding substance use data implications at the state and local levels.

For all intents and purposes, the SEOW grant can be viewed as a means for jump starting the SPF process in Oklahoma prior to the state receiving an actual SPF SIG award. The SEOW grant allowed Oklahoma to develop an improved data infrastructure for substance abuse prevention planning and provided a head start on the needs assessment phase of the SPF planning process. However it is important to remember, that while the SEOW grant was focused on promoting data driven prevention planning by providing the means for enhancing data use capacity at both the state and local levels, it was not intended to fund prevention interventions, strategies or programs. The grant was intended as a capacity building piece and as a primer for SPF SIG funding, not as an implementation grant.