

### Year 3 Action Plan

#### DFC Goal 1: Increase sustainable, meaningful and inclusive community collaborations

Objective 1: Increase coalition members' understanding, shared leadership and use of effective collaborative principles, processes, and tools as measured by annual online assessment.

Strategy 1: *Provide opportunities for coalition members to get information and enhanced skills to implement community change strategies.*

Activity	Responsible	Target Date
Advisory Board and Action Team members attend annual Healthy Maine Partnership. Maine Association of Substance Abuse Programs, and Partnership for Tobacco Free Maine Conferences	Coalition Director, Action Team leads, Advisory Chair	December 2013
Coalition web site and newsletter will include education on collaborative principles, processes, and tools.	DFC Project Coordinator, Youth Coordinator	Quarterly
Annual online coalition assessment will be conducted and used to inform process and content of coalition skill building	Coalition Director	Spring 2013
Each Action Team and Board meeting will include at least one opportunity for learning	Action Team leads; Board Chair	monthly
Youth will be recruited annually through application process to be leaders in coalition	Youth Coordinator	February 2013
Youth leaders and adult advisors will be trained in advocacy and policy change Maine Youth Action Network peer leadership conference.	Youth Coordinator; Community Health Specialist	November 2012
Youth will receive regional training on policy and action planning	Youth Coordinator; DFC Project Coordinator	January 2013

Coalition staff will attend CADCA conferences and training	DFC Project Coordinator and Youth Coordinator	February 2013
Coalition members will learn about the collaborative process, environmental strategies, the latest research in substance abuse evaluation and sustainability at workshops offered through state and local resources.	Project Coordinator, Board Chair, Substance Abuse Action Team	Quarterly

Objective 2: Increase coalition membership of diverse volunteer representation by 10%.

Strategy 1: *Coalition members will outreach to communities members.*

Activity	Responsible	Target Date
Continue to recruit and maintain a diverse and reflective membership that participates in CTBH via Advisory Board, Action Teams and Work Groups.	All members	On-going; assessment at annual meeting in May 2013
Annual online coalition assessment will be conducted and used to inform process and content of coalition building.	Project Coordinator	Winter 2013
Hold annual organizational development and planning retreat For Advisory Board and leaders of Action Team work groups	Board Chair	Winter 2013

**DFC Goal 2: Reduce youth substance use**

Objective 1: Decrease youth alcohol use in the past 30 days by at least 5% in 5 years.

Strategy 1: *Increase consistent, visible law enforcement restricting youth access to alcohol.*

	Responsible	Target Date
Quarterly party patrols for alcohol	York and South Berwick Police reps; Project	October 2012 Dec. 2012; May 2013; July 2013;

Choose To Be Healthy Drug Free Communities at York Hospital, York, Maine SPO 17403-03 for COMET February 2013

	Coordinator	October 2013
Extra surveillance at “hot spots” (outdoor locations, hotels, motels and stores)	York and South Berwick Police reps; Project Coordinator	October 2012 Dec. 2012; May 2013; July 2013; October 2013
Compliance Checks and Shoulder Taps	York and Kittery Police reps; Youth Coordinator	August 2013 October 2013
Publicize increased enforcement through local media	Parent/Community Education Workgroup; Project Coordinator	Monthly

*Strategy 2: Decrease youth access and increase barriers to alcohol through consistent education and policy development guidance for local businesses.*

<b>Activity</b>	<b>Responsible</b>	<b>Target Date</b>
Help liquor licensee complete self assessment and participate in education and policy development	Project Coordinator; Community Health Specialist; Youth Coordinator	May 2013
Media Campaign through Chamber e-newsletter and events; posters, brochures and newspapers	Project Coordinator	April 2013
Responsible Seller and Server Trainings	Project Coordinator, Frank Lyons, Trainer	March 2013 and June 2013

*Strategy 3: Increase access and reduce barriers to youth substance abuse recovery resources and treatment.*

<b>Activity</b>	<b>Responsible</b>	<b>Target Date</b>
Work with Cottage Program staff and schools to improve policies and protocols for assessing and referring youth for treatment.	Cottage Program substance abuse counseling staff	Fall 2012
Support creation of new Making Change transition youth groups through facilitator trainings	Cottage Program substance abuse counseling staff	Fall 2012

Objective 2: Increase the average age of first use for alcohol, tobacco and marijuana by 1 year.

Strategy 1: *Increase youth beliefs about harmful consequences of alcohol, marijuana use and prescription drug misuse.*

<b>Activity</b>	<b>Responsible</b>	<b>Target Date</b>
All Stars for Middle School grades will be implemented through support, promotion, training and evaluation.	School Health Coordinators; Project Coordinator	Winter 2012 implementation in Spring of 2013

Strategy 2: *Correct youth misperceptions about peer use and strengthen expressions of healthy youth norms against underage substance use.*

<b>Activity</b>	<b>Responsible</b>	<b>Target Date</b>
Youth Leaders will implement asset based initiatives in their schools reaching peers and younger students.	Youth Coordinator; School Health Coordinators; Adult Advisors	Spring 2013
Youth leaders will use media to develop and implement healthy norms education for peers about the real life consequences of substance use and abuse.	Community Health Coordinator	Quarters 2, 3 2013

Strategy 3: *Decrease access and increase barriers to marijuana.*

<b>Activity</b>	<b>Responsible</b>	<b>Target Date</b>
Youth leaders will assess risks and resources to address use, access and promotion of marijuana use in their communities.	Youth Coordinator; Youth Groups in Kittery, Wells, Noble schools	October 2012
Youth will present policy change recommendations to local leaders re sales of smoking products that promote marijuana use.	Youth Coordinator; Youth Groups in Kittery, Wells, Noble schools	October 2012
Police Enforcement Team will use experience in developing party patrol protocols, mou's and policies to create similar for marijuana laws	Lt. Charles Szeniaowski and Project Coordinator	Spring 2013

Objective 3: Increase youth perception of parental disapproval of alcohol, prescription drugs and marijuana use by at least 5% in 5 years.

Strategy 1: *Increase number of adults sharing clear and healthy messages about alcohol, prescription drugs and marijuana use.*

<b>Activity</b>	<b>Responsible</b>	<b>Target Date</b>
'Table Talk' parent discussion initiative to increase parental networking and monitoring skills.	Parent Leads; PTOs	Winter 2012
Social marketing campaigns with youth and Maine Parent survey data via youth Face book site, youth created PSAs and health classes to promote restricting access and increased monitoring at home.	Youth Coordinator, Community Health Specialist	Spring 2013
Coordinate regional prescription drug proper use and disposal education, protocol, policies and events	Project Director; Police Enforcement Team; Youth Groups	Fall 2012 Spring 2013

Objective 4: Decrease youth tobacco use in the past 30 days by at least 5% in 5 years.

Strategy 1: *Decrease access and increase barriers to tobacco through consistent education and policy development guidance to local businesses.*

<b>Activity</b>	<b>Responsible</b>	<b>Target Date</b>
Implement Star Store and No Butts campaigns to assess and then improve tobacco advertising, signage and sales practices of local stores	Community Health Specialist, Youth Coordinator	Summer 2013
Media Campaign through CTBH e-newsletter and events; posters, brochures and newspapers	Community Health Specialist; Youth Coordinator; Youth Groups	Quarterly
Provide assistance using model policy template to all businesses	Youth Coordinator	March and June 2013 and quarterly visits

Strategy 2: *Increase access and reduce barriers to youth treatment.*

Activity	Responsible	Target Date
Provide free training to adults at youth serving organizations and schools to provide tobacco cessation for youth.	Community Health Specialist	February 2013

Objective 5: Increase youth perception of risk of harm of substance use/abuse by 5%+ in 5 years.

Strategy 1: *Correct youth misperceptions about peer use and strengthen expressions of healthy youth norms against underage use.*

Activity	Responsible	Target Date
Disseminate accurate youth data at local schools	Project Coordinator; Youth Coordinator and Youth Groups	February 2013
Use social networking site (The Maine Voice) to counter unhealthy media messages and promote youth led activities	Youth Coordinator	on going
School staff will be trained in implementing All Stars for Middle School grades	School Health Coordinators	Winter 2013

**Strategic and Action Plans Coalition: Choose To Be Healthy**

**Mission:** “Choose To Be Healthy is a multi-sector comprehensive community health coalition whose mission is to provide every opportunity for adults and youth in our communities to choose behaviors that help them to achieve their optimum health. We do this by assessing population need and resources to help us implement environmental change strategies that reduce the incidence of cardiovascular disease, diabetes, cancer, and chronic lung disease and prevent youth and adult substance use and abuse.”

<b>Objectives</b>
<p><b>Long-Term Objectives (Problem)</b></p> <ol style="list-style-type: none"> <li>By 2015, past 30 day marijuana use by 9-12<sup>th</sup> graders will decrease from an average of 24% (MIYHS, 2009) to an average of 19% or less in our 5 school districts as measured by the Maine Integrated Youth Health Survey.</li> </ol> <p><b>Baseline Data:</b> 29% Noble HS; 29% Wells HS; York and Marshwood HS 24% and Kittery 20% All but Kittery are at or higher than state 24%.</p>
<p><b>Intermediate Objectives (Risk Factors)</b></p> <ol style="list-style-type: none"> <li>By 2013, youth access to marijuana will be reduced 5% from an average of 59% to 54% as measured by perception of availability in the MIYHS, 2013.</li> <li>By 2013, youth will report higher rates of carding from 23% to at least 50% when attempting to purchase tobacco and tobacco products.</li> </ol> <p><b>Baseline Data:</b> Youth say marijuana is easy to get. Wells HS – 67%; Marshwood HS – 65%; All of our schools are higher than state average of 58% 23% of York County youth say they were carded the last time they attempted to buy tobacco in the past 30 days</p>
<p><b>Short-Term Objectives (Local Conditions)</b></p> <ol style="list-style-type: none"> <li>By fall of 2012, there will be an increase of school districts from 1 to 5 who report using a curriculum and doing a good job of teaching dangers of marijuana use to youth as measured by annual assessment of school health coordinators.</li> </ol> <p><b>Baseline Data:</b> Only 1 of 5 school districts think they do an “ok” job of teaching about marijuana as measured by key informant interviews with school health coordinators. 0 of 5 uses a curriculum to teach about marijuana.</p> <ol style="list-style-type: none"> <li>By fall of 2012, there will be a reduction in the number of stores that sell and promote marijuana smoking products by 50% as measured by an annual youth led local store assessment.</li> </ol> <p><b>Baseline Data:</b> Currently 17/30 stores checked sold legal tobacco products that are used primarily for marijuana use ( i.e. flavored blunt wraps, lighters with marijuana messages on them)</p> <ol style="list-style-type: none"> <li>Increase number of schools who review and update their aod policies from 2 to 5 by fall of 2012.</li> </ol> <p><b>Baseline Data:</b> 24% York County youth were offered or sold drugs on school property in last 12 months 2 out of 5 school districts have reviewed their policies in past 5 years; 1 out of 5 feels their policies are enforced</p>

**Strategies and Action Plans  
(For each Local Condition)**

**Problem Statement: Youth Marijuana use**

**Root Cause: Unhealthy community norm/easy access**

**Local Condition: Convenience stores sell smoking products used to smoke marijuana**

Strategy(s)	Action Plan			
	Who?	Will do What?	By When?	Resources Needed?/Who Should Know?
1. Police/youth educate local leaders on prevalence of paraphernalia and easy access to youth.	AC Youth GP JS	<ul style="list-style-type: none"> <li>Local news articles</li> <li>Presentation to selectmen, rotary, chamber?</li> <li>Video/photos of assessment and presentation posted on Facebook, Maine Voice</li> <li>Attend MYAN conference</li> <li>Present at MYAN 2012</li> <li>Help coordinate youth</li> <li>Help with legal aspects of assessment and presentation</li> </ul>	<b>Fall 2011</b> <b>Fall 2012</b> <b>Fall 2011</b>  <b>Fall 2011</b>	Police involvement JS 2 Dedicated students Adult advisor at school, GP
2. Provide stores with free training on best ID practices	SM, Tobacco Prev. Spec.	<ul style="list-style-type: none"> <li>Research current Maine regulations on smoking products, paraphernalia, sales and promos</li> <li>Create database of stores</li> <li>Invitation to training</li> <li>Adapt tobacco training</li> </ul>	<b>Winter/ Spring 2011/2012</b>	<b>PTM,SP, John Archer</b>
3. Help stores develop/review their smoking product sales and promotion policies	SM, AC, Action Team	<ul style="list-style-type: none"> <li>Letter sent post-store assessment</li> <li>Work with other Maine DFC's/ adapt OSA Alcohol Policy tool</li> <li>Provide incentive to stores who discuss policy with CTBH</li> </ul>	<b>Fall/Winter 2011</b>	<b>MAPSA, Chamber</b>
4. Provide merchants with education on best practices for sales of smoking products and influence of products on youth smoking rates	SM, other Maine DFCs	<ul style="list-style-type: none"> <li>Adapt tobacco materials</li> <li>Research other marijuana prevention edu. Resources (California)</li> <li>Create materials and signs</li> <li>Disseminate info/materials</li> </ul>	<b>Spring 2012</b>	<b>Other DFC's, PTM, CDM, Chambers</b>



Strategy(s)	Action Plan			
	Who? Will do What?	By When?	Resources Needed?/Who Should Know?	
<p>5. Stores that do not sell products are recognized (Star Store/ No Buds designation) and promoted through media, local chambers and certification.</p> <p>Stores that sell smoking paraphernalia are identified through the store assessment and presented by youth to local selectmen.</p>	<p>AC, Youth, JS AC AC AC, SM AC AC, Youth, JS AC</p>	<ul style="list-style-type: none"> <li>• Youth conduct store assessments. <ul style="list-style-type: none"> <li>○ Youth recruited and hired.</li> <li>○ Youth trained in research, data presentation, advocacy</li> <li>○ Compile and analyze data</li> <li>○ Create presentation</li> </ul> </li> <li>• Conduct store compliance checks</li> <li>• Create standards for CTBH No Buds certification</li> <li>• Create certificate</li> <li>• Send letter of recognition and offer assistance</li> <li>• Re visit stores</li> <li>• Create press release</li> </ul>	<p><b>Aug 2011</b> <b>June, 2011</b> <b>July 2011</b> <b>Aug 2011</b> <b>Sept 2011</b> <b>Sept 2011</b> <b>Oct 2011</b></p>	<p>Tool Manager's consent SP, police in each town, project handout</p>
<p>6. Encourage stores to keep all smoking paraphernalia locked up behind the sales counter.</p> <p>Encourage stores to restrict smoking paraphernalia promotions.</p>	<p>School health coordinators, PTO's, Parents, AC + youth</p>	<ul style="list-style-type: none"> <li>• Presentation to parents on store assessment results + marijuana trends in area</li> <li>• Review tobacco guidelines/ordinances</li> <li>• Get parent involvement with online petition on FB site (to be created)</li> </ul>	<p><b>Spring 2012</b></p>	<p><b>PTOs, Schools, School health coordinators</b></p>
<p>7. Partnership for a Tobacco Free Maine to incorporate marijuana prevention campaign into Star Stores program.</p> <p>Encourage stores to have policy regarding staff training, product placement and product promotion for all smoking products (ex. Rolling papers, wraps and pipes).</p>	<p>SM, AC, Police, Youth, PTOs</p>	<ul style="list-style-type: none"> <li>• Parents/ youth present store assessment data to town selectmen</li> <li>• Local proclamation to town selectmen</li> <li>• Towns adopt proclamation (i.e. dangers of smoking and how effects health)</li> </ul>	<p><b>Winter 2012</b></p>	<p><b>Town selectmen</b></p>

### Objectives

**Long-Term Objectives (Problem)** By 2015, past 30 day marijuana use by 9-12<sup>th</sup> graders will decrease from an average of 24% (MIYHS, 2009) to an average of 19% or less in our 5 school districts as measured by the Maine Integrated Youth Health Survey.

**Baseline Data:** 29% Noble HS; 29% Wells HS; York and Marshwood HS 24% and Kittery 20% All but Kittery are at or higher than state 24%

**Intermediate Objectives (Risk Factors)** Increase youth perception of risk of harm of marijuana use 5%+ by 2013 from 54% to 59% as measured by the MIYHS.

**Baseline Data:** Only an average of 44% of students (grades 9-12) think that daily marijuana use is NOT harmful

**Short-Term Objectives (Local Conditions)** Increase number of schools teaching dangers of marijuana use to youth as measured by annual assessment of school curriculum.

**Baseline Data:**

**Strategies and Action Plans  
(For each Local Condition)**

**Problem Statement: Youth Marijuana use**

**Root Cause: Youth perception of harm**

**Local Condition: Schools do not teach about negative effects of marijuana**

Strategy(s)	Action Plan			
	Who?	Will do What?	By When?	Resources Needed?/Who Should Know?
1. School Health Coordinators/ teachers teach drug/ marijuana education curriculum in school systems.	School Health Coordinator (SHC) SM AC	<ul style="list-style-type: none"> <li>School Health Coordinators adopt curriculum</li> </ul>	<b>Fall 2012</b>	<ul style="list-style-type: none"> <li>Social Norms curriculum</li> <li>SHC</li> <li>Health teachers</li> <li>Principal</li> <li>PTO</li> </ul>
2. Train youth to create and implement social norms marketing campaigns	SHC AC	<ul style="list-style-type: none"> <li>As a part of curriculum, students will work with Youth Coordinator to learn about social norms marketing campaign</li> <li>Develop PSAs</li> <li>Develop youth FB page, "Maine Voice"</li> </ul>	<b>Fall 2012</b>	Principal, Teachers, video camera, access to FB
3. Have Table Talks/Wellness Café with parents/family members	SM AC Youth School counselors	<ul style="list-style-type: none"> <li>Plan educational opportunities after school to provide additional information and raise family/community awareness,</li> </ul>	<b>Spring 2013</b>	PTO, Family, Teachers, principal, local organizations
4. Risks and resources will be assessed to address use, access and unhealthy norms.	AC Youth SM	<ul style="list-style-type: none"> <li>Leadership Development               <ul style="list-style-type: none"> <li>Students trained on substance abuse prevention, youth advocacy, and leadership development.</li> </ul> </li> </ul> Marijuana Task Force	<b>Fall 2012</b>	MYAN

Strategy(s)	Action Plan			
	Who? Will do What?	By When?	Resources Needed?/Who Should Know?	
5. Curriculum that focuses on the Positive effects/outcomes/rewards for not smoking Marijuana	SHC Teachers SM AC Youth	<ul style="list-style-type: none"> <li>• Students are rewarded for positive behavior               <ul style="list-style-type: none"> <li>○ Chem free events</li> <li>○ Sober pledges</li> <li>○ End of year celebrations</li> </ul> </li> </ul>	<b>Spring 2013</b>	Counselors, school faculty, principal, PTO
6. Make drug/marijuana education curriculum comprehensive	SHC Teachers AC SM	<ul style="list-style-type: none"> <li>• Involve school, community, local organizations in curriculum.</li> </ul>	<b>Fall 2013</b>	CTBH, Principal, PTO, Family, community organizations, restaurants, stores etc.
7. Schools have X amount of hours dedicated to teaching drug education per year under designated curriculum.	SHC Teachers	<ul style="list-style-type: none"> <li>• "Most of us don't" curriculum</li> </ul>	<b>Fall 2013</b>	Principal, School board members, Counselors

## Objectives

**Long-Term Objectives (Problem)** By 2015, past 30 day marijuana use by 9-12<sup>th</sup> graders will decrease from an average of 24% (MIYHS, 2009) to an average of 19% or less in our 5 school districts as measured by the Maine Integrated Youth Health Survey.

**Baseline Data:** 29% Noble HS; 29% Wells HS; York and Marshwood HS 24% and Kittery 20% All but Kittery are at or higher than state 24%

### **Intermediate Objectives(Risk Factors)**

By 2013, youth access to marijuana will be reduced 5% from an average of 59% to 54% as measured by perception of availability in the MIYHS, 2013.

**Baseline Data:** Wells HS – 67%; Marshwood HS – 65%; All of our schools are higher than state average of 58%

### **Short-Term Objectives (Local Conditions)**

Decrease access to Marijuana through decreasing the number of adults and peers that do not express disapproval of Marijuana use.

**Baseline Data:**

Any use in past year: York County (N=45) 55%

Any use in past month: York County (N=45) 41%

Reg. smoking not harmful- York County 48%, state 37%

**Strategies and Action Plans  
(For each Local Condition)**

**Problem Statement: Youth Marijuana use**

**Root Cause: Perceived Unhealthy community norm**

**Local Condition: Adults and peers do not express disapproval of Marijuana use**

Strategy(s)	Action Plan			
	Who?	Will do What?	By When?	Resources Needed?/Who Should Know?
1. Provide facilitated discussion for parents and 7 <sup>th</sup> and 8 <sup>th</sup> grade students about Marijuana risks/use.	SM School health co. (SHC)	<ul style="list-style-type: none"> <li>• Provide initial Table Talk discussion</li> <li>• All Stars Curriculum</li> </ul>	<b>Fall 2012</b>	PTO, Parents
2. Provide Parents with skills and materials to be Table Talk Facilitators	SM SHC	<ul style="list-style-type: none"> <li>• Parents attend initial Table Talk based around Marijuana use and how to talk to youth about use. Then parent volunteers to facilitate next discussion</li> </ul>	<b>Fall 2012</b>	PTO, Parents, Counselors
3. Use FB sites and networking as a way for both parents and youth to discuss prevention.	SM AC	<ul style="list-style-type: none"> <li>• Maine Voice</li> <li>• Parent FB Site</li> <li>• Table Talk</li> </ul>	<b>Now</b>	Parents, Teachers, SHC, School Counselors
4. Parents create a comfortable, "safe" environment for youth to talk	Parents	<ul style="list-style-type: none"> <li>• Parents take initiative to talk to youth about Marijuana use</li> </ul>	<b>Fall 2012</b>	Youth, School Counselors
5. Have an open conversation about Marijuana with youth before it becomes a negative/necessary action or consequence.	Parents	<ul style="list-style-type: none"> <li>• Have parents reward youth for talking about drug use/pressure.               <ul style="list-style-type: none"> <li>○ Have the conversation while doing something enjoyable (i.e., out to dinner, eating ice cream, playing sport, walk etc.)</li> </ul> </li> </ul>	<b>Fall 2012</b>	Youth, School Counselors

Strategy(s)	Action Plan			
	Who? Will do What?	By When?	Resources Needed?/Who Should Know?	
6. Have local police enforcement team monitor areas where drug deals frequently occur.	Police SM	<ul style="list-style-type: none"> <li>Undercover cop to hang around designated "drug spot"</li> <li>Put lights in areas that are normally dark/dim where drug deals occur</li> </ul>	<b>Spring 2013</b>	\$ to pay cops to do special detail, \$ for lights,
7. Law made to ban youth to be on specified property after certain hours	Police	<ul style="list-style-type: none"> <li>Youth are banned from parks, playgrounds, beach?, basketball courts etc. after ?hour in order to reduce drug deals/use</li> </ul>	<b>Summer 2013</b>	Police, policy makers, Courts, \$ for signs