



ANNUAL REPORT 2020-21



www.csaciowa.org



www.camanche-dewittcoalition.org



www.gatewayimpactcoalition.com

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ANNUAL REPORT 2020-21



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The Clinton Substance Abuse Council, Inc. (CSAC) began in 1989, as a non-profit organization, and has demonstrated that when the community comes together, change happens. The Clinton Substance Abuse Council



CLINTON SUBSTANCE abuse COUNCIL

includes the Camanche-DeWitt Coalition, Gateway ImpACT Coalition, Clinton CRUSH +, and Clinton County Drug Endangered Children Alliance that represents over 100 partner agencies & organizations and over 300 volunteers that include individuals from key sectors including law enforcement, schools, parents, youth, healthcare, business, public health and others. CSAC emphasizes the power of the community to prevent substance misuse through collaborative community efforts. We believe that preventing substance use and misuse before it starts is the most effective and cost-effective way to reduce substance use and its associated costs.

The last two years were challenging for most non-profits like ours. As a community coalition we were out in the community learning from, working with, providing education, conducting awareness activities and policy change to reduce substance use, but that all changed in 2019. Parents, caregivers, and communities are struggling to keep their families safe and engaged during these unprecedented times.

A syndetic involves the clustering of two or more diseases within a population that creates a synergistic effect and have a unique impact across populations. On Thursday October 26, 2017, President Trump officially declared the opioid crisis a “public health emergency.” President Trump said from the White House that “This epidemic is a national health emergency.” More than 104,000 people died as a result of overdose in the United States between September 2020 and September 2021. (CDC, Drug Overdose Data). According to the CDC, fentanyl overdoses have killed more people aged 18 to 45 since 2020 than COVID, car accidents, and even suicides. The United States as a whole, is facing an unprecedented overdose epidemic, claiming 275 lives every day.¹



Before 2020 we also had a growing mental health crisis with approximately 12 million people ages 18 and over having serious thoughts of committing suicide in 2019 and 3.5 million of those people actually had a suicide plan.

Then came COVID. In March 2020, the World Health Organization declared the outbreak a pandemic. By April 2020, 95% of American’s were under lockdown with 1 million cases worldwide. We were told to wear masks, social distance, and limit gatherings. Daily lives are now reordered which for many causes anxiety, stress, and strain physically, mentally, and financially. According to a Kaiser Family Foundation poll in April 2020, more than 4 out of 10 Americans reported that pandemic-related stress had a negative impact on their mental health. (Kaiser Family Foundation, 2020)

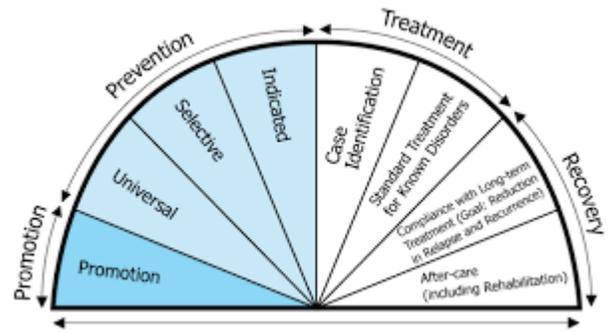
¹ <https://www.dea.gov/press-releases/2022/02/07/dea-washington-division-launches-operation-overdrive>

The fear, stress, isolation and hopelessness that many Americans have experienced during the pandemic are likely causes of drug overdose deaths. Fentanyl overdoses are now the leading cause of injury related death. In the year ending in April 2021, fentanyl claimed the lives of 40,010 Americans ages 18-45. That is more than car accidents (22,442), suicide (21,678), COVID (21,335), and cancer (17,114). (Families Against Fentanyl)

The Clinton Substance Abuse Council’s coalitions changed the way we operated and served our communities and found innovative ways to remain engaged with youth and their families and continue efforts to prevention youth substance use. One thing was undeniable, the need to work together was more important than ever. Afterall prevention is about saving lives.

CONTINUUM OF CARE

The CSAC (With the exception of Clinton CRUSH + coalition) engages primarily in Promotion & Prevention along the Continuum of Care. The Continuum of Care, as defined by the Institute of Medicine, is a graded framework that distinguishes between, promotion, prevention, treatment, and maintenance while also showing the interrelation among each state.



This continuum of care framework is applicable to intervening around substance misuse and substance use disorders, and with the addition of health promotion embraces much of what is important in the recovery support services movement (Bersamira, in press).

Promotion: “These strategies are designed to create environments and conditions that support behavioral health and the ability of individuals to withstand challenges. Promotion strategies also reinforce the entire continuum of behavioral health services” (SAMHSA, n.d., p. 2).

Prevention: “Delivered prior to the onset of a disorder, these interventions are intended to prevent or reduce the risk of developing a behavioral health problem, such as underage alcohol use, prescription drug misuse and abuse, and illicit drug use” (SAMHSA, n.d., p. 2).

image

- Universal prevention refers to interventions delivered to the general population without differentiating between persons at different risk levels. In prevention literature, the term “primary” prevention is used to describe efforts that occur before any sign of the target problem appear—universal prevention interventions are often applied.
- Selective prevention is more targeted than universal, and these interventions would be directed towards populations identified as having a potential greater than the general population for developing the focal problem.
- Indicated prevention is even more targeted, delivered to populations/groups of individuals exhibiting/expressing warning signs foreshadowing development of the focal problem. In some prevention literature, the term “tertiary” prevention is used to describe efforts that occur early in emergence of the target problem—this could involve indicated prevention interventions or early intervention in the form of treatment

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Treatment: “These services are for people diagnosed with a substance use or other behavioral health disorder” (SAMHSA, n.d., p. 2). Unlike prevention, treatment services are designed to identify individuals experiencing or exhibiting the focal problem—preferably as early in its development as possible before it becomes increasingly severe and more difficult to treat.

Recovery: “These services support individuals’ compliance with long-term treatment and aftercare” (SAMHSA, n.d., p. 2). The diagram mentions long-term adherence to treatment as fitting into this category, which may or may not reflect what happens during/following treatment for substance use disorder.



We know that 9 out of 10 people who have substance use problems started using before they turned 18 years old. We want to prevent terrible things happening to kids, and we know one way to do that is to prevent initiation of substance use. The Camanche-DeWitt Coalition and Gateway ImpACT Coalition know that individuals are the most vulnerable to substance use during early adolescence through young adulthood. The earlier the age at onset of drug use, the greater the risk for later substance-related problems. Drug abuse can impact the brain’s ability to function in the short-term as well as prevent proper growth and development for later in life. With substance use on the rise, we are perfectly positioned to collaborate with the community to PREVENT substance use before it starts.

Prevention addresses many facets of the lifespan, from childhood education, trauma response, to parent training and awareness efforts. We are proud of the work we are doing alongside enthusiastic community members! Some of our projects may appear “behind the scenes,” but a lot of work has been done by so many in our coalitions, to have influence in people’s lives for over 30 years.

Clinton Substance Abuse Council

PURPOSE

The purpose of Clinton Substance Abuse Council is to build strong, stable, and informed community-based coalitions in the gateway area for the purpose of establishing healthy and caring communities free of substance misuse and related behavioral health issues.

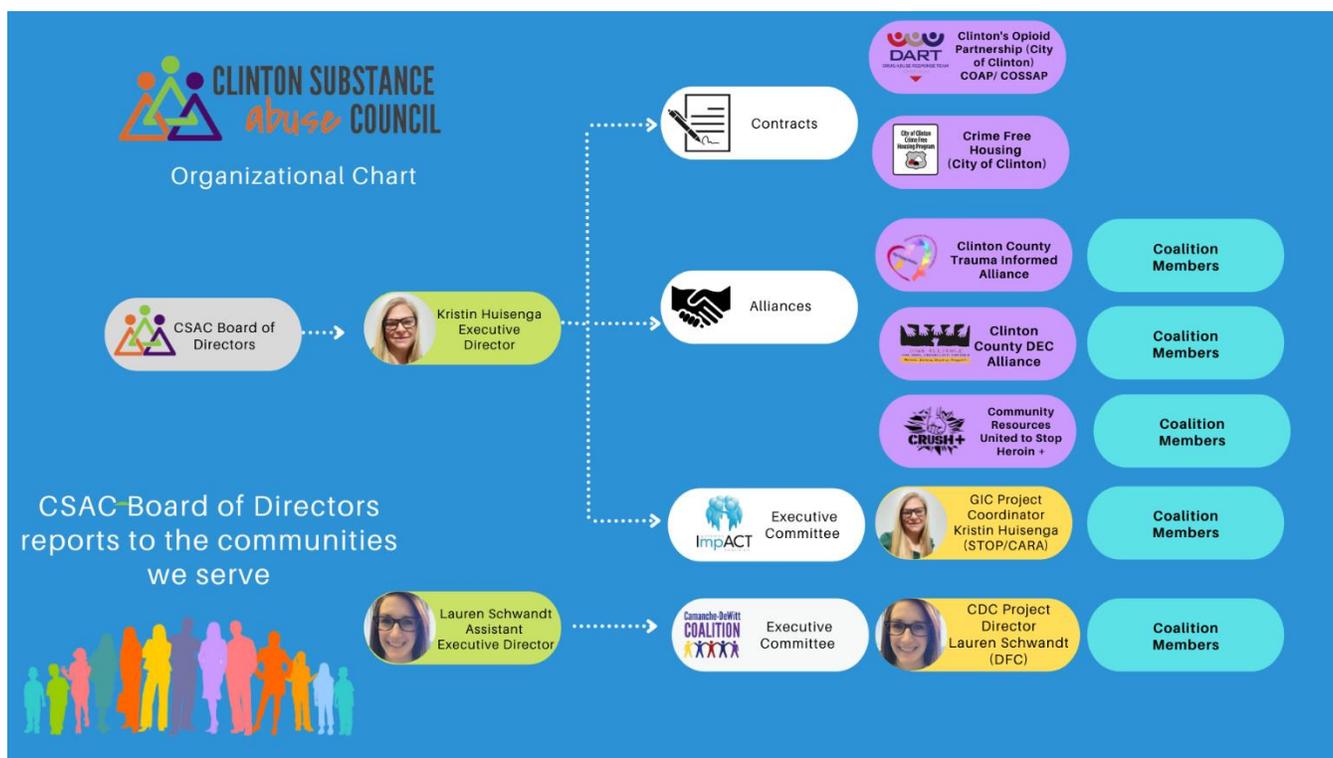
VISION

As a result of Clinton Substance Abuse Council's influence, community coalitions in the gateway area will have the support, knowledge, skills, resources, and structure they need to be successful in eliminating substance misuse and related behavioral health issues.

MISSION

The Mission of the Clinton Substance Abuse Council, through collaboration, works to develop solutions to community problems that are related to substance use/misuse issues through facilitation, cooperation, and communication.

The Clinton Substance Abuse Council Serves the gateway area community. The definition of community varies by project and grant funding, but typically serves Clinton County, Iowa area.



Board of Directors

The Clinton Substance Abuse Council is a non-profit organization that is governed by a diverse volunteer Board of Directors who is responsible for oversight and direction of the coalition. The board is a group of individuals who are not only committed to advancing the Clinton Substance Abuse Council (CSAC), but also to making our cities and neighborhoods better places to live, work, shop, learn, and play in a variety of ways.

Those who serve on the Clinton Substance Abuse Council Board of Directors have considerable responsibilities extending well beyond the basic expectations of attending meetings, establishing policy, and personal giving. All board members:

1. Ensure that CSAC Remains True to Itself and Accountable to the Larger Community

Each board member has primary responsibility for ensuring that CSAC remains true to its mission, vision, goals, and values, always acting first in the interests of our primary stakeholders. It is CSAC’s Board of Directors that is responsible for maintaining the professional and ethical policies and standards that will ensure that we remain a powerful force for change.

2. Fiduciary Duties: Duty of Care, Duty of Loyalty, and Duty of Obedience

CSAC nonprofit board members and officers must be aware of and comply with the three legal fiduciary duties related to their work: The Duty of Care, the Duty of Loyalty, and the Duty of Obedience.

3. Ensure Adequate Resources

Each board member, regardless of whether he or she is serving on the development committee, works to ensure the council has adequate funding to do the work needed.

4. Function as an Ambassador for CSAC

Board members demonstrate his or her concern for the organization and take both the work of the CSAC and his or her role as a board member seriously.

5. Actively Participate in Board Meetings

Board members participate in committee meetings and fulfill committee and/or officer responsibilities that in line with his or her own areas of expertise.

6. Foster Group Cohesiveness

Work together as an effective team.

7. Comply with the Board of Directors Code of Conduct

The successful operation and sustainability of CSAC is built upon a principal of ethical conduct on the part of its board members, employees, and volunteers. Our reputation for integrity and excellence requires scrupulous regard for the highest standards of conduct and personal integrity.



SHARED UNDERSTANDING OF THE CLINTON SUBSTANCE ABUSE COUNCIL

The CSAC Board of Directors, through the strategic planning process has developed the following shared understanding and guiding principles.

The role of the Clinton Substance Abuse Council is to facilitate and support the work of coalitions by providing an umbrella for the work and services they do.

CSAC board members, executive director and program directors are behind the scenes ensuring that coalitions get the support and resources they need to be successful.



1. The CSAC board is less concerned about promoting itself and more about ensuring that coalition initiatives are highlighted.
2. CSAC has paid staff members to help with the executive and organizational operations. This is to ensure that there is consistency with how things are done, to help ensure volunteer board does not burn out, and to ensure that funding requirements are met.
3. CSAC is made up of board members who have:
4. pertinent knowledge about substance uses and related behavioral health issues.
5. passion and concern for substance use and related behavioral health issues.
6. CSAC is a transparent and fiscally sound organization that portrays quality to the community and follows all non-profit, organizational, and funding rules.
7. The CSAC board is representative of the coalitions that it serves.
8. The CSAC board is an active volunteer board with members providing various skills, resources, and knowledge to the organization, executive director, and the coalitions that it serves.

ASPIRATION STATEMENTS

The Clinton Substance Abuse Council Board and staff believe it is our responsibility to reduce substance abuse in the gateway area through:

- Maintaining a board-based organizational structure that operates autonomously, making decisions based on the local and regional needs of the communities we service.
- Providing opportunities for the exchange of information and resources across partnering organizations.
- Offering management of substance abuse and related data, planning processes, and fiscal requirements for our partnering entities.
- Offering non-profit oversight, fundraising, and grant writing to behavioral health projects and coalitions.
- Providing our coalition partners with development tools, resources to be successful, and infrastructure development for sustainability.
- Empowering the behavioral health system in our community with updated substance abuse data, information, and opportunities.
- Ensuring the projects, we support use best practices.

2020-2021 BOARD OFFICERS



President: Michele Cullen, Community Health Manager, Genesis VNA. Michele has served on the Clinton Substance Abuse Council Board of Directors since 2014, prior she was a long-time member of the Gateway ImpACT Coalition. Michele serves on the CSAC Board because she's passionate about helping improve the health of our community.

Vice President: Darryl Waugh, Clinton Landlords Association/ GIC Executive Committee Liaison since 2015. Prior to serving on the CSAC Board Darryl was instrumental in the Meth Reduction Project and is a long-time member of the Gateway ImpACT Coalition. Darryl serves on the board because he wants to make a difference in his community, knows the importance of prevention, and believes we can all play a role combating drug use and addiction.



Secretary: Dan Boyd, Eagle Height Elementary School Principal (Clinton) has been on the CSAC Board of Directors since 2006. Dan serves on the board because he understands that working together is the best thing to help communities and coalitions are an effective tool that can strengthen collaboration in communities and address factors that increase the risk of substance use.

Treasurer: Ricci Aquilani, Senior Vice President & Compliance Officer for Clinton National Bank, recently joined the CSAC Board of Directors in 2019. Ricci serves on the board because substance abuse is a serious condition that drains community resources and prevents people from reaching their full potential.



2020-2021 BOARD MEMBERS



Jeff Chapman, Fire Marshall, Clinton Fire Department. Assistant Chief Chapman has served on the Clinton Substance Abuse Council Board of Directors since 2018. Jeff has served on the Clinton Fire Department for 27 years, 18 of them as a paramedic. It is his time as a paramedic that he has seen the effects of opioid abuse firsthand. Jeff also served as the building official for the City of Clinton from 2012 to 2019 and has been able to observe the toll this crisis has had on the City of Clinton and surrounding areas. It is Jeff's hope that his expertise and experience can assist in this fight from both sides of the table.



Steve Cundiff, Sergeant/Detective, Clinton County Sheriff's Office/CDC Exec. Committee Co-Chair and Liaison since 2019. Steve has been a long-time member of the Gateway ImpACT Coalition and served as a founding Co-chair of the Camanche-DeWitt Coalition. Steve serves on the board because he has seen firsthand after 30 years in Law Enforcement how drugs have destroyed so many lives. Working with the youth and the adults to prevent people from using drugs is a win-win for creating a healthier community. As a Law Enforcement Officer, he realizes we are not going to arrest our way out of this problem.

Jim Irwin, Clinton County Board of Supervisors, recently joined the CSAC Board of Directors in December 2019. Jim serves on the board because he cares about the residents of Clinton County and supports working together to make a difference in our communities.



Malissa Sprenger MS, IAADC- Malissa is Regional Vice President of Mission Integration for MercyOne's Eastern Iowa Region. Previously, she had served as Coordinator of Turning Point Treatment Center, including Medication Assisted Treatment Services, and was the Clinical Opioid Lead for MercyOne Dubuque Medical Center. She holds a Master of Science degree in Clinical Psychology and an International Advanced Alcohol and Drug Counselor Certification. She is currently pursuing a Bioethics PhD through Loyola of Chicago. For the past five years, Malissa has facilitated an Opioid Response Team with city, county, state, & federal representation. Malissa serves on the Iowa Board of Certification Board of Directors & is Chair of the MercyOne System Opioid Task Force.

In 2020-2021, the Amy Berentes stepped down from the CSAC Board of Directors. Thank you for all your service!

Finance

2020 FINANCES

• Total Revenue	\$323,813
• Total Expenses	(\$221,390)
Revenue less Expenses	\$104,344
• Net Assets	\$216,463

**Note, the profit shown here is a result of delayed billing.

2021 FINANCES

• Total Revenue	\$313,971
• Total Expenses	(\$243,211)
Revenue less Expenses	\$73,807
• Net Assets	\$293,513

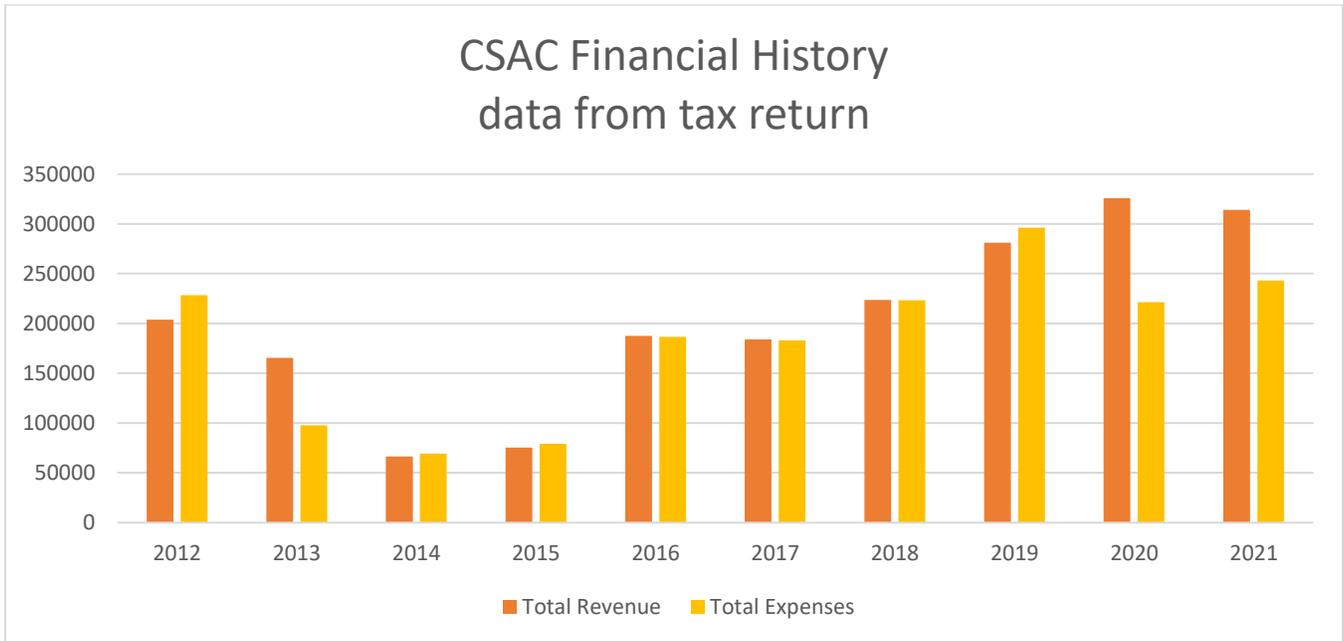
**Note, the profit shown here is a result of delayed billing.

2020 EXPENSE HIGHLIGHTS

Salary/Fringe/ payroll taxes	\$138,500
Accounting	\$4,307
Occupancy	\$9,427
Trainings, Conferences/Meetings	\$17,416
Program Expenses	\$12,204
Office expenses/supplies	\$17,508
Contractors	\$15,238
All other expenses	\$5,360
Depreciation	\$1,430

2021 EXPENSE HIGHLIGHTS

Salary/Fringe/ payroll taxes	\$111,905
Accounting	\$4,342
Occupancy	\$5,819
Trainings, Conferences/Meetings	\$17,505
Program Expenses	\$12,535
Depreciation	\$1,862
Office expenses/supplies	\$22,196
Contractors	\$49,717
Insurance	\$7,818
All other expenses	\$9,512



2020-2021 REVENUE/FUNDING HIGHLIGHTS

- \$10,000 Gateway ImpACT Coalition
- Annual Support to address substance use/misuse: MercyOne Clinton Medical Center



Thank you to Mercy for financially supporting the Council for over 30 years! Their annual contribution is vital to the success of the coalition!

- \$125,000 Camanche-DeWitt Coalition
- Drug Free Communities Support Program Grant Office of National Drug Control Policy-Center for Disease Control

October 1, 2019-September 29, 2020 (Year 4 of 10)

September 30, 2020-December 30, 2020 (Year 5 of 10)

December 30, 2020-September 29, 2021 (Year 6 of 10) * Competitive Year

September 30, 2021-September 29, 2022 (Year 7 of 10)

- \$45,030 Gateway ImpACT Coalition
- Sober Truth on Preventing Underage Drinking (STOP) Office of National Drug Control Policy

September 30, 2019-September 29, 2020 (Year 3 of 4)

September 29, 2020-September 29, 2021 (Year 4 of 4)



- \$10,000 Gateway ImpACT Coalition
- Community Coalition Grant-Iowa Department of Public Health:
- July 1, 2018-June 30, 2019
September 1, 2019-June 30, 2020 (Final Year grant will be offered)

- \$13,000 Gateway ImpACT Coalition
- Amphetamine Reduction Project-United Way of Clinton County
- October 1, 2019-September 30, 2020



United Way
of Clinton County, Iowa

- \$9,207 Gateway ImpACT Coalition
- Stimulant Misuse Reduction Project-United Way of Clinton County
- October 1, 2020-September 30, 2021

- \$6,750 Gateway ImpACT Coalition
- Stimulant Misuse Reduction Project-United Way of Clinton County
- October 1, 2021-September 30, 2022

- \$5,000 Gateway ImpACT Coalition
- City of Clinton JAG Grant-Contract to facilitate the Crime Free Housing Project
- July 1, 2019-June 30, 2020 (Year 2 of 4)



- \$4,112 Gateway ImpACT Coalition
- City of Clinton JAG Grant-Contract to facilitate the Crime Free Housing Project
- July 1, 2020-June 30, 2021 (Year 3 of 4)

\$2,500 Gateway ImpACT Coalition
 • City of Clinton JAG Grant-Contract to facilitate the Crime Free Housing Project
 July 1, 2021-June 30, 2022 (Year 4 of 4) 4 years maximum funding

\$41,600 Gateway ImpACT Coalition
 • City of Clinton-COAP Grant-Contract to facilitate the Opioid Reduction Project
 October 1, 2018 - September 30, 2019 (Year 1 of 2)
 October 1, 2019 -December 31, 2021 (Year 2 of 2 with no cost extension)

\$55,754 Gateway ImpACT Coalition
 • City of Clinton-COSSAP Grant-Contract to facilitate the Opioid Reduction Project
 October 1, 2020-September 29, 2023 (Total award amount)

\$50,000 Gateway ImpACT Coalition
 • Comprehensive Addiction and Recovery Act (CARA) Local Drug Crisis Grant-Center for Disease Control
 July 1, 2021-June 30, 2022 (Year 1 of 5)

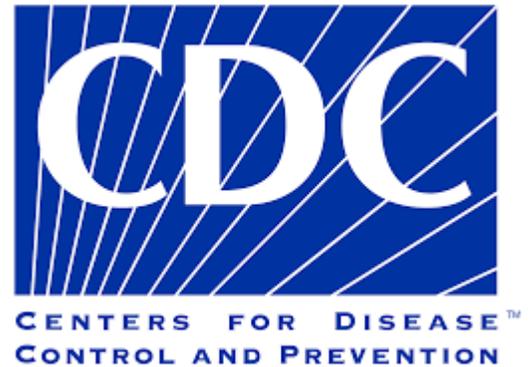
\$4,680 Gateway ImpACT Coalition
 • Clinton County/ASAC-Contract under Electronic Nicotine Delivery System (ENDS)grant
 July 1, 2019-June 30, 2020

\$25,300 Clinton Substance Abuse Council, Inc
 • PPP Forgivable Loan
 April 17, 2020-June 16, 2020

\$39,712 Clinton Substance Abuse Council, Inc
 • Summer Youth Internship Pilot Project, Iowa Workforce Development-CSAC fiscal agent with many subcontractors.
 May 1, 2021-September 2022

\$750 Gateway ImpACT Coalition
 • You Feel Different You Drive Different, The Auto club Group Foundation
 December 2020

\$3,000 Gateway ImpACT Coalition
 • Preventing Youth Drug Use, St. Vincent Home
 December 2021



**IF YOU FEEL DIFFERENT
 YOU DRIVE DIFFERENT**



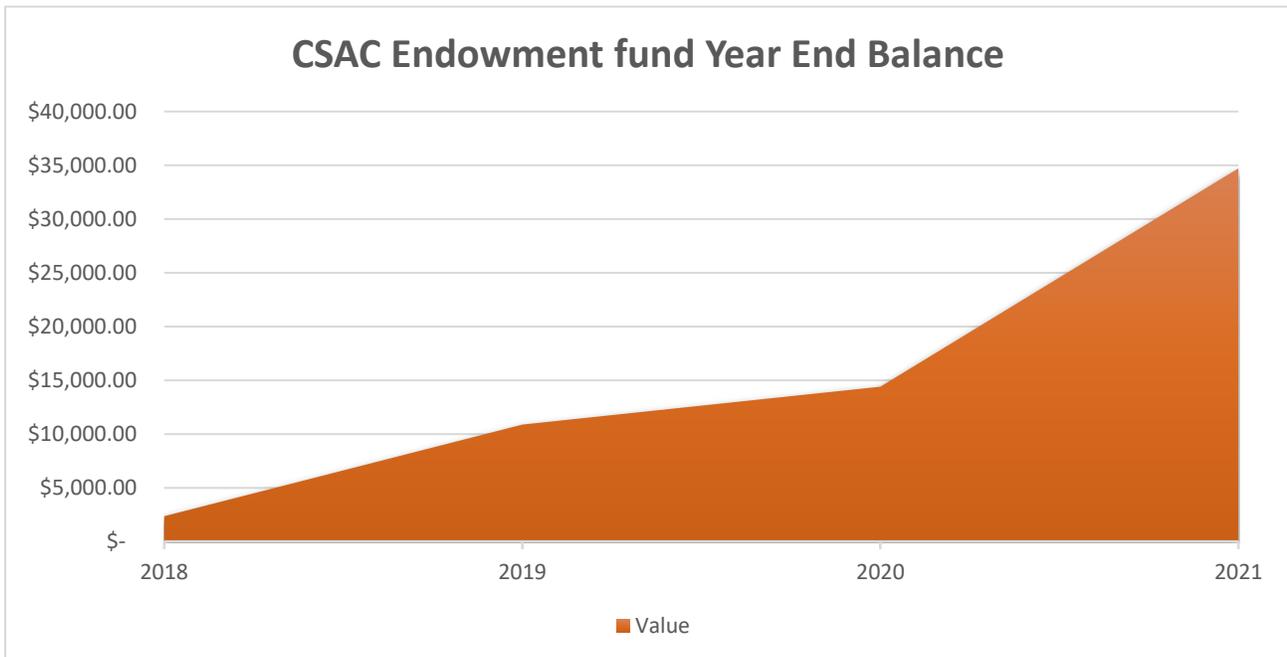
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CLINTON SUBSTANCE ABUSE COUNCIL ENDOWMENT FUND

In 2018, the Clinton Substance Abuse Council opened an acorn endowment fund. An acorn endowment requires that CSAC build our fund to \$10,000 within 5 years. CSAC wanted to diversify our funding streams. One new funding stream is an agency endowment at the Community Foundation of Greater Dubuque. This fund assures our organization a permanent source of steady income to stabilize and strengthen our programs.

In 2019, we were able to establish an endowment fund by raising over \$10,000. We had an anonymous gift of \$5,000 to the fund, and a \$1,500 gift from River Bluff Community Foundation Endowment Funds. Community foundations are charitable organizations that administer funds to benefit their communities and improve the lives of people in their geographic region. Nonprofit organizations and community members can create endowment funds at the River Bluff Community Foundation to benefit charitable causes.

These funds are invested and pay out annually to the designated nonprofits, providing a reliable source of income to sustain organizations' operations forever. Any gift over \$50 to this fund is eligible for the Endow Iowa 25% State Tax Credit. Anyone can contribute directly to this fund by visiting our page: <https://www.dbqfoundation.org/donors/giving-center/clinton-substance-abuse-council-fund> or by contacting CFGD at 563-588-2700.



In 2019, we had a very generous donor who stepped up and agreed to match all gifts to the CSAC Endowment Fund, and we have seen our balance grow. Thank you so much!

GREAT GIVE DAY

Additional funds for the CSAC endowment were raised on Great Give Day on Thursday, May 13, 2021. This was the second year the CSAC participated in this event. The Great Give Day is a 24-hour, online giving day established by the Community Foundation of Greater Dubuque to celebrate and support area nonprofits and build a stronger community. The event is open to all nonprofit organizations with endowment funds at the Community Foundation of Greater Dubuque including the Clinton Substance Abuse Council.

Community members are invited to visit www.greatgiveday.org to support their favorite participating nonprofits with online donations of \$10 or more, either on great give day or by scheduling a gift ahead of time to be automatically processed at midnight that night. All gifts will go directly to nonprofits, and all donations must be made online with a credit/debit card or with a banking account.

GIVINGTUESDAY

GivingTuesday is a global generosity movement unleashing the power of radical generosity. GivingTuesday was created in 2012 as a simple idea: a day that encourages people to do good. Since then, it has grown into a year-round global movement that inspires hundreds of millions of people to give, collaborate, and celebrate generosity.

On November 30, 2021, CSAC participated in Giving Tuesday as a way to jumpstart our fall giving campaign. Giving Tuesday encouraged members to join in the movement and give— whether it was a donation of time or money.

TAKE 5 GIVE 5

This campaign encourages everyone to talk to kids about alcohol and drugs each month and donate at least \$5 per month to the Clinton Substance Abuse Council or Gateway ImpACT Coalition for community drug prevention.

2020 CAMPAIGN: TAKE 5 GIVE \$5

MONTHLY GIVING CAMPAIGN

TALK TO KIDS ABOUT DRUGS

This campaign encourages everyone to talk to kids about alcohol and drugs each month and donate \$5 per month to the Clinton Substance Abuse Council or Gateway ImpACT Coalition for community drug prevention.



YOUR GIFT IS MATCHED!

During 2020, Each monthly gift of \$5 or more will be matched by an anonymous donor. Your total yearly gift of \$60 will be matched 1:1, plus a bonus match of \$100 for all first time donors! Your \$60 could equal a gift of \$220!



LONG TERM IMPACT

Your monthly donation allow us to take a planned long term approach. You work side by side with us to making long-lasting improvements to children's, families, and communities lives.



MORE AFFORDABLE

A monthly gift allows you to spread your giving across the entire year, lessening the financial impact to your budget, while supporting consistently.



COST EFFECTIVE

Monthly giving means low administration costs, which means that more of your money goes where it is needed most: Supporting youth, parents, the the community to prevent substance abuse.



DONATE TODAY AT WWW.CSACIOWA.ORG

HY-VEE GIVING TAG PROGRAM

In 2021, the Clinton Substance Abuse Council was selected to participate in the Hy-Vee Giving Tag Program. For each tag that was sold the Clinton Substance Abuse Council received a \$1 donation. This was a wonderful way to partner with local businesses.



JEANS DAY

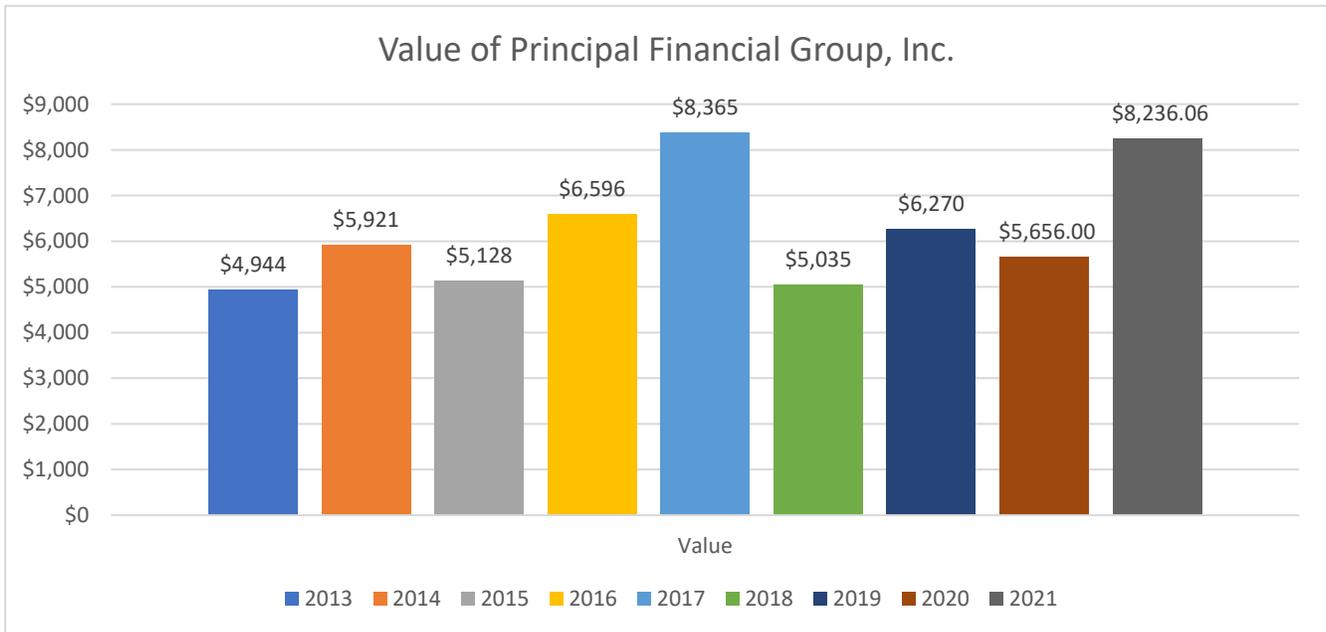
The Clinton Substance Abuse Council has been the recipient of the Winkle, Parker and Foster Jeans Day fundraiser in 2020 & 2021. Thank you so much for your support.

PAYCHECK PROTECTION PROGRAM (PPP)

The Paycheck Protection Program (PPP) was a \$953-billion business loan program established by the United States federal government, led by the Donald Trump administration in 2020 through the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) to help certain businesses, self-employed workers, sole proprietors, certain nonprofit organizations, and tribal businesses continue paying their worker. The CSAC closed for three months in 2020 and the PPP maintained staff on payroll and cover coalition expenses.

CLINTON SUBSTANCE ABUSE COUNCIL INVESTMENT: PRINCIPAL FINANCIAL (STOCK)

Clinton Substance Abuse Council, Inc. (Gateway ImpACT Coalition) has stock in Principle Financial. This stock was donated the Gateway ImpACT Coalition prior to 2013. The value of our stock was down over the last two years but during 2021 the stock almost reached its previous value of \$8,365. If you are interested in donating stock to the Clinton Substance Abuse Council, please contact the CSAC Executive Director.



CSAC Paid Staff

The Clinton Substance Abuse Council has a paid Executive Director and one full time staff that work under different coalitions and/or contracts. Staff assists with support for planning, problem solving and information management. Staff can have a critical role in monitoring the “business end” of coalition work, maintaining accurate records for funding and reporting requirements.

KRISTIN HUISENGA

Kristin has been with the Clinton Substance Abuse Council, since 2005, and has a BBA in Finance, BBA in Marketing, and BA Sociology from the University of Iowa. She is certified by the Iowa Board of Certification as Certified Prevention Specialist, a graduate of the National Coalition Academy, and holds a Non-Profit Management Certificate. Kristin lives in the country with her husband, 4 children, and lots of animals. She loves to be outside, watching her children’s events, scrapbooking and reading.



Kristin is the Executive Director (ED) for the Clinton Substance Abuse Council, Program Coordinator of the Gateway ImpACT Coalition, Clinton CRUSH +, Clinton’s Opioid Partnership, Clinton County Drug Endangered Children Alliance, Clinton County Trauma Informed Alliance (previous), and Breathe Easy Coalition (previous). Kristin serves as the Program Director for the Camanche-DeWitt Coalition Grant and serves as the treasurer of the Iowa Drug Endangered Children Alliance.

Responsibilities include:

- Establish a financially stable organization.
- Maintain and increase coalition support.
- Strengthen internal operations including the efficiency of the executive board.
- Develop a professional and skilled team
- Seek sources of appropriate funding, apply for, and administer monies and grants.
- Develop and author grants for council member agencies and collaborative partners
- Manage the Council’s annual budget, prepare/review all fiscal reports, funding requests and invoices
- Act as the grant administrator for the Clinton Substance Abuse Council grants.
- Maintain good working relationships
- Accept appointments to state level planning groups as appropriate and approved by the board.
- Establish a comprehensive, coordinated, balanced strategy through grant programs that expand prevention and education efforts while also promoting treatment and recovery.
- Facilitate programs utilizing community-based process and environmental prevention strategies.
- Mobilize community to address substance misuse
- Coordinate coalition meetings and activities

LAUREN SCHWANDT

Lauren has been with the Camanche-DeWitt Coalition since October 2015. She holds two bachelor's degrees: one in Biology and one in Social and Criminal Justice from Ashford University. She also holds a master's degree in Psychology with a Specialization in Criminology from the University of the Rockies. She enjoys traveling and spending time with her family and friends. In 2021, Lauren was promoted to the Program Director for the Camanche-DeWitt Coalition, Assistant Director of the Clinton Substance Abuse Council, and Business Official for the CARA grant.



Responsibilities include:

- Manage the Drug Free Communities Grant. Facilitate programs primarily utilizing community-based process and environmental prevention strategies
- Responsible for community mobilization to address underage drinking and youth marijuana use
- Coordinate coalition meetings and activities in the Drug Free Communities Action Plan
- Coordinate activities of coalition subcommittees
- Provide accurate documentation of Drug Free Communities Grant services, in kind match, required CORE outcomes
- Assist coalition with annual grant renewal documents
- Monitor programs to ensure compliance with agency policies and grant requirement
- Develop and maintain positive work relationships with each of the twelve community sectors
- Utilize media to promote agency, and services provided by the agency.
- Other duties as assigned by the DFC Business Official and coalition, including but not limited to:
 - Educate the community on ATOD issues
 - Provide/facilitate training to targeted sectors
 - Develop and implement community plans
 - Use the Strategic Prevention Framework process
 - Coordinate and facilitate the revision or creation of ATOD related environmental strategies
- As the Business Official Lauren assume the obligations imposed by federal laws, regulations, requirements, and conditions that apply to the CARA award

JORDAN LILLARD

Jordan Lillard worked at the Gateway ImpACT Coalition from September 2019 to August 2020. Jordan holds a B.S. in Genetics from Iowa State University. She enjoys reading, hanging out at her church, and spending time with her puppy and family. She worked under the COAP and STOP Grants.



CSAC Members & Supporters

EVERYTHING that happens in coalition work occurs because of our members and supporters! People and organizations volunteer their time, energy, skill set, resources, and expertise to accomplish the work of the coalition. People volunteer with the coalitions for main reasons ranging from altruism, wanting to make our community safer, meeting job or school requirements, or to meet new people. Whatever motivates our volunteers, we seek to make this relationship a win-win for both parties. We work to make the rewards plentiful for the volunteers, clients, organizations, and communities. We want a safe environment for our volunteers both youth and adults. Throughout the last few years, we have spent a considerable amount of time and resources developing policies and procedures for both our members and volunteers.

Everyone has a place in the coalition! Whether a person or organization participates on the Board of Directors, Executive Committee, attends regular meetings, serves on a workgroup, or contributes resources to a coalition event-they are a coalition member. The coalitions work hard to build membership and match an individual with the work of the coalition that piques their interest or utilizes their skill. Like many organizations, coalitions have missions and goals for their work, unlike other non-profit organizations, coalitions distribute their planning, resources, and activities across multiple stakeholder groups-all volunteers of the coalition- each with its own agendas, priorities, constraints, and a way of doing business. The coalition represents a nexus of these different organizations around an area of focus. The stronger the nexus, the more impact our coalitions can have.

WHAT IS A COALITION?

A coalition is comprised of a group of individuals and organizations working together to achieve a common goal, in our case, substance misuse prevention and related behavioral health issues.

WHO IS PART OF A COALITION?

Anyone and everyone! Coalitions aim to have members who represent the various sectors of the community they are serving. Having members who are representative of the community and understand the community's unique challenges is the key to any coalition's success.

HOW DO COALITIONS OPERATE?

When we bring various persons and professionals together from the community, we can truly have an impact on the issue at hand. As community members, and those serving the community, we want to empower you to be the leading force behind positive transformation in the places that you live, work and play.

MEMBER EXPECTATIONS?

Members who agree to an active member of the coalitions commit to the vision, goals, objectives, and strategies of the coalition. They agree to take part in the planning and collaboration that such coalitions undertake and understand that it will take time. They acknowledge the contributions and expectations of the other members of the coalition.

WHAT ARE THE BENEFITS OF A COALITION?

Coalitions can strengthen collaboration between public and private organizations in communities, address factors in the community that increase the risk of substance misuse, and support interventions that promote environmental strategies to address SUD in the community.

VOLUNTEERS ROCK

Like many organizations, coalitions have missions and goals for their work, unlike other non-profit organizations, coalitions distribute their planning, resources, and activities across multiple stakeholder groups- all volunteers of the coalition- each with its own agendas, priorities, constraints, and a way of doing business. The coalition represents a nexus of these different organizations around an area of focus. The stronger the nexus, the more impact our coalitions can have.

The Clinton Substance Abuse Council engages in a diverse group of projects and coalitions, all that align with our mission. The mission of the Clinton Substance Abuse Council, through collaboration, works to develop solutions to community problems that are related to substance abuse issues through facilitation, cooperation, and communication.

WE WOULD LIKE TO THANK AND ACKNOWLEDGE THOSE WHO HAVE SUPPORTED THE CLINTON SUBSTANCE ABUSE COUNCIL, CAMANCHE-DEWITT COALITION, GATEWAY IMPACT COALITION, CLINTON COUNTY DRUG ENDANGERED CHILDREN ALLIANCE, AND CLINTON CRUSH + THROUGH MEMBERSHIP, DONATIONS, OR OTHER SUPPORT IN 2020-2021.

3M
7th Judicial District
Adcraft
ADM
All Pets Mobile Clinic
Andrea Rumler
Ann Sanger
Anonymous Donations
Area Substance Abuse Council (ASAC)/New Directions
Ascension Lutheran Church-Gooselake, Iowa
Ben Cort – Smart Approaches to Marijuana
Billie Tack
Brenda McKone
Brett & Lauren Schwandt
Bri Price
Bridgeview Community Mental Health Center
Brother & Sisters in Christ (BASIC)

Brown's Shoe Store
Bruce Beasley
Building & Neighborhood Services (CFD)
Camanche Police Department
Camanche School District
Candace Seitz
Carroll Brandt
Casey's General Store
Center for Disease Control
Central DeWitt Community School District
Cheryl & John Stauffer
Chris & Leslie Mussmann
Chris Farwell
Church of the Open Door, Pastor Machen
City of Camanche
City of Clinton
City of Clinton Finance Department
City of Clinton Recreation Department
City of Clinton Wastewater Treatment
City of DeWitt
Clinton Community College
Clinton Community School District
Clinton County 911

Clinton County Attorney's Office
Clinton County Board of Supervisors
Clinton County Development Association
Clinton County Early Childhood Education/DECAT
Clinton County Public Health
Clinton County Resource Center
Clinton County Sheriff's Office
Clinton Fire Department
Clinton Herald
Clinton Housing Authority
Clinton Landlords Association
Clinton Leo's Club
Clinton LumberKings/Nelson Corp. Field
Clinton National Bank
Clinton Police Department
Clinton PTSA (Parent, Teacher, Student Association)
Coffee Club
Colleen Ryan
Community Anti-Drug Coalitions of America (CADCA)
Community Automotive Repair
Community Foundation of Greater Dubuque
Community Partnership for Protecting Children (CPPC)
Congressman Dave Loebsack's Office
Creative Catering Caravan
CRUSH of Iowa/Eastern Iowa Heroin Initiative
Crystal Lawburgh Photography
Cynde Green
Dale & Bobbi Dalton
Dan Boyd
Dan Peart
Danielle Moshure
Darryl & Judy Waugh
Denise & Norlin Mommsen
Department of Correctional Services
Department of Justice
Derek Clark
DeWight & Shirley Wheelen
DeWitt Bank & Trust
DeWitt Noon Lions
DeWitt Observer
DeWitt Police Department
DeWitt Police Foundation

Donald & Rita Schneider
Donald Sullivan
Douglas & Mary Hartman
Dr. William & Esther Killeen
Drug Enforcement Administration
Dudad's Hallmark Shop
Emergency Management
Environmental Protection Agency
Families Finding their Voice
Family and Friends Support Group
Family Resources
Franciscan Peace Center
Friends of the Windmill
Fulton Police Department
Gary Foster
Genesis VNA/Hospice
Governor's Office of Drug Control Policy
Grace Lutheran Church
Grandma Nells Antiques
Heather & Jim Randleman
Hope in Jesus Bible Study
Hy-Vee
Hy-Vee Catering
Iowa Department of Human Services
Iowa Department of Public Health
Iowa Drug Endangered Children Alliance
Irwin, Inc.
James McHugh
Jane Koenes
Jane Marlow
Jean Morgan
Jeff & Kristin Huisenga
Jewel-Osco
Jill Tegeler
Jim & Tara Irwin
Joann Ball
Joel Atkinson
JR Kuch
Kathi Fausnaught
Kathleen Pennock
KCLN Radio
KMAQ Radio
KROS Radio
Kyle & Magen Folk
Larry & Robin Schultz
Larry Libberton
Laura Norris

Let's Live Healthy Coalition
Life Connections Mental Health and Behavior Health Services
Life Connections Peer Recovery
Lighthouse
Lisa Thompson
Lori Brummer
Low Moor Lyons Club
Lutheran Services of Iowa
Lydia Bilyeu
Marilyn & Stephen Harrison
Markman Peet Corporation
Mayor Scott Maddison
Medical Associates
Melinda Dunlap
MercyOne Clinton Medical Center
MercyOne-Medication Assisted Treatment Clinic
Mid-America Prevention Technology Transfer Center
Mississippi Bend Area Education Agency
Nathan Gravert
Necker's Jewelers
Neil Libberton
Nelson Corp Wealth Management
New Life Computers
Northeast Community School District
Partnership for a Healthy Iowa
Pat & Michele Cullen
Paul Niedermeyer
Pearson Foundation
Pizza Ranch
Porters Phillips 66
Prevent Child Abuse Iowa
Prevent Child Abuse of Clinton County
QC Harm Reduction Coalition
Random Tanner
Raymond & Melinda Smith
Rena Kalina
Rhonda Schult
Ricci Aquilani

Rick & Mary Lincoln
Rita Hart
River Bluff Community Foundation
River Church
Riverbend School District
Riverfront Antiques
Rooted Boutique
Salvation Army
Sandy Huisenga
Scott & Renee Temple
Scott Drug Pharmacy
Senator Charles Grassley's Office
Senator Joni Ernst's Office
Senior V. Crime/TRIAD
Simply Aesthetic Design
Smiley Inc, dba Legend's Sports Bar
St. Joseph Catholic School
St. Vincent Home, Inc.
State Representative Mary Wolfe
State Representative Norlin Mommsen
State Senator Chris Cournoyer
Substance Abuse and Mental Health Services Administration (SAMHSA)
The Abbey Addiction Treatment Center
The Church of Jesus Christ of Latter-day Saints
The Insurance Group/Mark Mangler
The Project of the QC
Thrivent Financial
Twinky the Balloon Twister
UCS Clinic
United Way of Clinton County, Iowa
Urgent Care Center
Wagner Pharmacy Company
White House Office of National Drug Control Police (ONDCP)
Wild Rose Casino & Resorts
Winkel, Parker, and Foster CPA
Women's Health Services

CSAC Structure

COALITIONS

The Camanche-DeWitt Coalition is a group of your friends and neighbors in the Camanche, DeWitt, and surrounding areas who are committed to reducing unhealthy use and abuse of substances and related issues to give our youth a secure place to grow and explore.

The Gateway ImpACT coalition, through collaboration, work to develop solutions to community problems that are related to youth substance use and adult misuse issues through the process of facilitation, cooperation, education, and communication.

ALLIANCES

Clinton CRUSH+ (Community Resources United to Stop Heroin and other drugs) is a group of community members who seek to increase accessibility to treatment for substance use disorder and to increase awareness of substance use disorder and addiction.

The DEC (Drug Endangered Children) Alliance works to empower our community to break the cycle of drug abuse in families by providing the tools, technical assistance, and training that allow for a collaborative response that ensures the safety of children.

CONTRACTS

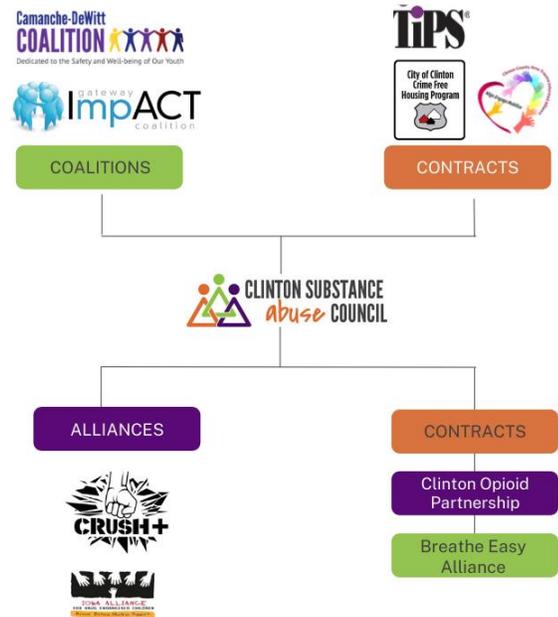
Training for Intervention ProcedureS training is designed to prevent intoxication, drunk driving, and underage drinking by enhancing the fundamental "people skills" of servers, sellers, and consumers of alcohol.

Gateway ImpACT Coalition is contracted with the City of Clinton to coordinate for the Comprehensive Opioid Abuse Site-Based Program (COAP) and Comprehensive Opioid and Stimulant Abuse Site Based Program Grant (COSSAP) which includes the Opioid Leadership Group.

The City of Clinton contract the Gateway ImpACT Coalition to provide Technical Assistance to the Crime Free Housing Program which brings together property owners, tenants, enforcement, and compliance to work together to reduce crime and illicit activity in rental property.

The GIC was contracted by Clinton County & ASAC to implement the Partnership to End ENDS (Electronic Nicotine Delivery System). CSAC was contracted to provide technical assistance to the Breathe Easy Coalition.

Clinton County Trauma Informed Alliance is a group of organizations and individuals with a mission to align, engage, and mobilize the community to identify and prevent the causes and impacts of trauma.



Methodology

STRATEGIC PREVENTION FRAMEWORK

The Clinton Substance Abuse Council uses the Strategic Prevention Framework (SPF) during the strategic planning process. The SPF is a comprehensive approach to understanding and addressing the substance misuse and related behavioral health problems facing our communities. Prevention must begin with an understanding of a complex behavioral health problems in our complex environments. It is only when we understand this, that we can implement effective plans to address substance misuse. The facilitate this understanding SAMHSA developed the SPF. The five steps and two guiding principles include:

1. **Assessment:** Identify local prevention needs based on data
 - a. community assessment is a comprehensive description of our community (different for each coalition, determined by coalition) for the purpose of identifying and addressing local substance use problems.
 - b. Coalition skills & process for Assessment:
 - i. Define & describe the community
 - ii. Conduct needs and resource assessment
 - iii. Conduct a problem analysis for each substance/need
 - iv. Create a plan of action for each problem
 - v. Update as needed
2. **Capacity:** Build local resources and readiness to address prevention needs
 - a. Capacity Building is increasing the ability and skills of individuals, groups, and organizations to plan, undertake and manage initiatives. A coalition is a living entity-its membership, organization, and leadership (FORM) will evolve and change over time based on the strategies and activities (FUNCTION) in which the coalition is engaged in.
 - b. Coalition skills & process for Capacity
 - i. Build coalition membership (sign coalition involvement agreements)
 - ii. Develop coalition structure (Board, executive committee, etc.)
 - iii. Cultivate leadership
 - iv. Identify training opportunities
3. **Planning:** Find out what works to address prevention needs and how to do it well
 - a. Planning includes the process of developing a logical set of steps and strategies that can lead to community level change to create healthier communities.
 - b. Coalition skills & process for Planning
 - i. Create a vision, mission, and purpose
 - ii. Create SMART objectives (SPECIFIC, MEASURABLE, ACHIEVABLE, RELEVANT AND TIME-BOUND)
 - iii. Plan comprehensive strategies (7 strategies for community change)
 - iv. Develop action plans for each prioritized local condition



4. Implementation: Deliver evidence-based programs and practices as intended
 - a. Put plans into action to address the problems, root causes, and local conditions our coalitions seek to change.
 - b. Coalition skills & process for Implementation
 - i. Prioritize strategies and action plans
 - ii. Secure resources
 - iii. Implement action plans
 - iv. Ensure fidelity
5. Evaluation: Examine the process and outcomes of programs and practices
 - a. Using the results as a way to share information between coalition partners to empower them to make community change in the most effective way possible.
 - b. Coalition skills & process for Evaluation
 - i. Update data on logic model and/or need statements
 - ii. Document coalition's work
 - iii. Tell your story
 - iv. Develop data collection plan



The SPF is also guided by two cross-cutting principles that are integrated into every step including:
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. Coalition skills and process for Cultural Competency:

1. Commit to Cultural Competency
2. Identify Culture and Diversity in the community
3. Build Cultural Competence
4. Recruit members to represent the culture and diversity in the community

Sustainability: The process of building an adaptive and effective system that achieves and maintains desired long-term results. This includes the ability of our coalitions to maintain the human, social, and material resources needed to achieve our long-term goals. Coalition skills and process for Sustainability:

1. Coalition skills: Engage volunteers & partners
2. Build a credible process
3. Ensure the need is relevant and timely
4. Determine how to sustain efforts

To be successful, the coalitions that the Clinton Substance Abuse Council works with implement each element of the Strategic Prevention Framework. The great part about this process is that because we are a community coalition, all the skills and knowledge are not required in one individual but in the community and partners' collective knowledge and skills.

STRATEGIES FOR COMMUNITY CHANGE

CSAC focuses on environmental level change. Environmental strategies incorporate prevention efforts aimed at changing or influencing community conditions, standards, institutions, structure, systems and policies. Environmental strategies: Produce quick wins and instill commitment toward long-term impact on practices and policies within a community; Require substantial commitment from various sectors of the community to contribute to sustainable community change; Create lasting change in community norms and systems, producing widespread behavior change and, in turn, reducing problems for entire communities. Individual-focused strategies, such as prevention education classes, are based on the premise that substance use develops because of deficits in knowledge about negative consequences, inadequate resistance skills, poor decision-making abilities, and low academic achievement. But these efforts, while important in a multiple strategy approach, do little to independently alter the overall environment in which people live and work. Comprehensive strategies involve implementing both individual and environmental-focused strategies.

According to the Community Anti-Drug Coalitions of America (CADCA), environmental strategies can produce widespread and lasting behavior change by making appropriate (or healthy) behaviors more achievable for the individuals in the target population.

Furthermore, these strategies can result in behavior change that reduces problems for the entire community, including those outside the target population. In contrast, individual strategies do little to independently alter the overall environment in which people live and work.

Environmental strategies offer well-accepted prevention approaches that coalitions use to change the context (environment) in which substance use and misuse occur.

Provide Information

- Educational presentations, workshops or seminars, and data or media presentations (e.g., PSAs, brochures, town halls, forums, web communication).

Enhance Skills

- Workshops, seminars, or activities designed to increase the skills of participants, members and staff (e.g., training and technical assistance, TIPS classes, strategic planning retreats, model programs in schools).

Provide Support

- Creating opportunities to support people to participate in activities that reduce risk or enhance protection (e.g., alternative activities, mentoring, referrals for service, support groups, youth clubs).

Enhance Access/Reduce Barriers

- Improving systems/processes to increase the ease, ability, and opportunity to utilize those systems and services (e.g., assuring transportation, housing, education, safety, and cultural sensitivity) in prevention initiatives.

Change Consequences

- Increasing or decreasing the probability of a behavior by altering the consequences for performing that behavior (e.g., increasing taxes, citations, and fines; revocation/loss of driver's license).

Change Physical Design

- Changing the physical design of the environment to reduce risk or enhance protection (e.g., re-routing foot/car traffic, adjusting park hours, alcohol/tobacco outlet density).

Modify/Change Policies

- Formal change in written procedures, by-laws, proclamations, rules, or laws (e.g., workplace initiatives, law enforcement procedures and practices, public policy actions, systems change).

Annual Celebration

PROBLEM

Everyone is not aware of the work of the Clinton Substance Abuse Council.

NEED

Raise awareness and provide transparency of the Clinton Substance Abuse Council and the coalitions and activities we support.

OBJECTIVES

- Increase community awareness of the Clinton Substance Council, Inc.
- Highlight coalition successes throughout 2019
- Recognize the outstanding leaders and members of our coalition



DESCRIPTION

On February 26 & 28, 2020, the Clinton Substance Abuse Council held its' annual celebrations. Each year the coalitions host this event to reflect on the previous year's activities, events, and successes.

The annual celebration is an opportunity for the coalitions to acknowledge the leaders of the coalition. The following were acknowledged for their leadership and service:

- Clinton Substance Abuse Council Board: Michele Cullen, Darryl Waugh, Dan Boyd, Amy Berentes, Jeff Chapman, Ricci Aquilani, Steve Cundiff, Jim Irwin, Randy Meier, Gabe Gluba & Mike Wolf
- Camanche-DeWitt Coalition Executive Committee: Steve Cundiff, Mayor Don Thiltgen, Eric Dau, Duane Hansen, Carole Dunkin, Lisa Abbott, & Erin Schlotfeldt.
- Gateway ImpACT Coalition Executive Committee: Leslie Mussmann, Renae Kalina, Jocelyn Meyer, Darryl Waugh, Judy Waugh, Randy Meier & James McHugh

Above and Beyond Recognition: Darryl & Judy Waugh; MercyOne Clinton Medical Center; Clinton Hy-Vee; Winkel, Parker & Foster; Clinton Middle School; Jennifer Austin; Clinton Police Department; Clinton Fire Department; Steve Cundiff; Brenda McKone & St. Joseph's 8th grade class; Mayor Don & Peg Thiltgen; Rachel Green; Jaiden Goodman



RESULTS

Thirty-five community members attended the Annual Celebrations, and over 100 annual reports were distributed. All the participants reported an increase in their knowledge about the coalitions and the Clinton Substance Abuse Council. Attendees had positive feedback with comments like "Reiteration that this is a great program with great leaders" and "Great work being done in the community!" The Annual Report was also sent out electronically to countless community members.

There was no Annual Celebration in 2021 due to COVID.

Drug Endangered Children Alliance

A drug endangered child is a person, under the age of 18, who lives in or is exposed to an environment where drugs, including pharmaceuticals, are illegally used, possessed, trafficked, diverted, and/or manufactured and, as a result of that environment; the child experiences, or is at risk of experiencing physical, sexual, or emotional abuse; the child experiences, or is at risk of experiencing medical, educational, emotional, or physical harm, including harm resulting or possibly resulting from neglect; or the child is forced to participate in illegal or sexual activity in exchange for drugs or exchange for money likely to be used to purchased drugs.



MISSION

To empower our community to break the cycle of drug abuse in families by providing the tools, technical assistance, and training that allow for a collaborative response that ensures the safety of children.

VISION

Clinton County's children will grow up in drug-free homes.

DESCRIPTION

Clinton County formed a local Drug Endangered Children (DEC) Alliance in 2006. The Clinton County Drug Endangered Children Alliance is a policy and practice alliance that looks at internal policies and adapts them to best suit the drug endangered children in Clinton County.

The Clinton County DEC Alliance focuses on policies and procedures that effect drug endangered children and how these policies can be adopted to better help children. We are continuously looking for ways to identify children in these environments sooner and looking for better ways to help these families.

Goal I: Identify the number of drug endangered children in Clinton County

- Objective 1: Compile accurate statistical data for the number of children in Clinton County found in environments with conditions of contamination or hazardous lifestyle that result in abuse, life or health endangerment, or neglect perpetrated on the child as a result of illicit drug use, sales, or manufacturing.

Goal II: Prevent endangerment to children in dangerous drug environments by encouraging intervention at the earliest possible point.

- Objective 1: Identify kids sooner.

Goal III: Facilitate multi-disciplinary, coordinated provisioning of services and care to drug endangered children. (Maintain a Drug Endangered Children Alliance and Multi-Disciplinary Team in Clinton County)

- Objective 1: Develop and sustain a network of experts and professionals who are working locally to help drug endangered children.

Meeting as a Multidisciplinary Team (MDT): An MDT is a group of professionals from diverse disciplines who come together to provide comprehensive assessment and consultation in child abuse cases. If DHS (Department of Human Services) has a case that is difficult, the DEC Alliance can work together to develop a comprehensive solution.

Goal IV: Increase awareness of Drug Endangered Children

- Objective 1: Cross train and educate DEC members and community.

Goal V: Provide support, information, and resources to all individuals and organizations that serve and care for drug endangered children

- Objective 1: Develop product with protocol on it.

IOWA DRUG ENDANGERED CHILDREN ALLIANCE

Kristin is the Treasurer for the Iowa Drug Endangered Children Alliance, a non-profit organization.

The Iowa Alliance for Drug Endangered Children defines drug endangered children as children who are at risk of suffering physical harm or neglect as a result of illegal drug use, possession, manufacturing, cultivation, or distribution.

They may also be children whose caretakers' substance misuse interferes with his or her ability to parent and provide a safe and nurturing environment. Iowa's drug endangered children's efforts are a coordinated response to the impact of parental/caregiver substance abuse on Iowa children, who are often found to be living in deplorable conditions; neglected and suffering. Iowa professionals are coming together as teams to provide immediate intervention and follow-up care for these children.

The Iowa Alliance for Drug Endangered Children reflects an advocacy community in Iowa driven by the need to stand up for Iowa children endangered by their parents or caregivers illicit drug use. The Iowa DEC community, like similar collaborative efforts in other states, is a committed group of professionals from multiple disciplines dedicated to finding solutions to the problems children face as the result of living with substance abusing parents, and to build a better world for these children.



IOWA DEC ACADEMY

The DEC Alliance took a break during 2020-2021 due to COVID but did support the Iowa DEC Alliance in hosting a DEC Academy. Fourteen communities throughout Iowa engaged in the 6-month virtual academy. Kristin sits on the Iowa Drug Endangered Children Alliance and as part of our mission will continue to support the new communities.

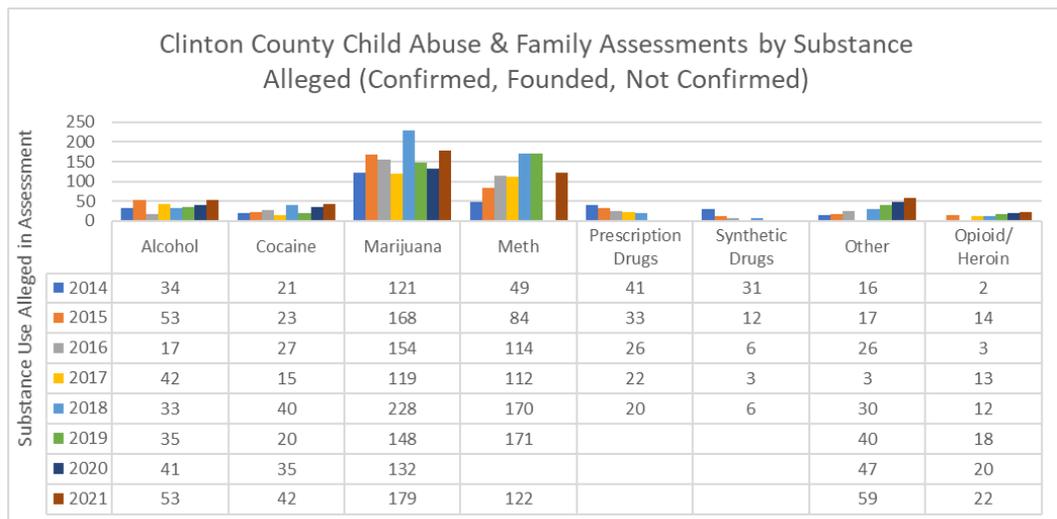
The Mid-America Prevention Technology Transfer Center, National Alliance for Drug Endangered Children and ACT Missouri are pleased to announce the DEC Development Academy: Building Community Capacity to Address the Needs of Drug Endangered Children. The purpose of this academy is to support local communities in building their local alliance for drug endangered children by providing targeted and intensive technical assistance to a select group of community partners. DEC Development Academy participants worked with child welfare, law enforcement, and prevention experts to:

- Gain awareness about drug endangered children and the risks they face.
- Gain awareness about drug endangered children and the risks they face. Understand the many opportunities (often missed) to identify children living in dangerous drug environments.
- Learn the benefits of intervening at the earliest possible point to reduce physical and psychological harm to children.
- Learn what a multidisciplinary collaborative response looks like and how it incorporates the unique resources within a community and applies them in a manner that provides better care for drug endangered children.
- Develop an increased understanding of, and increased capacity to implement the DEC Approach.

DEC DATA

The Clinton County Drug Endangered Children (DEC) Alliance has been collecting data since 2014 on the number of child abuse (and family assessments) by substances alleged, including confirmed, founded, and not confirmed, as reported to the Iowa Department of Human Services. All categories of substances have increased since 2014. From 2014 to 2021 we saw the following increases:

- Alcohol-56% increase
- Cocaine-100% increase
- Marijuana-48% increase
- Methamphetamine-149% increase
- Opioids/Heroin-1000% increase



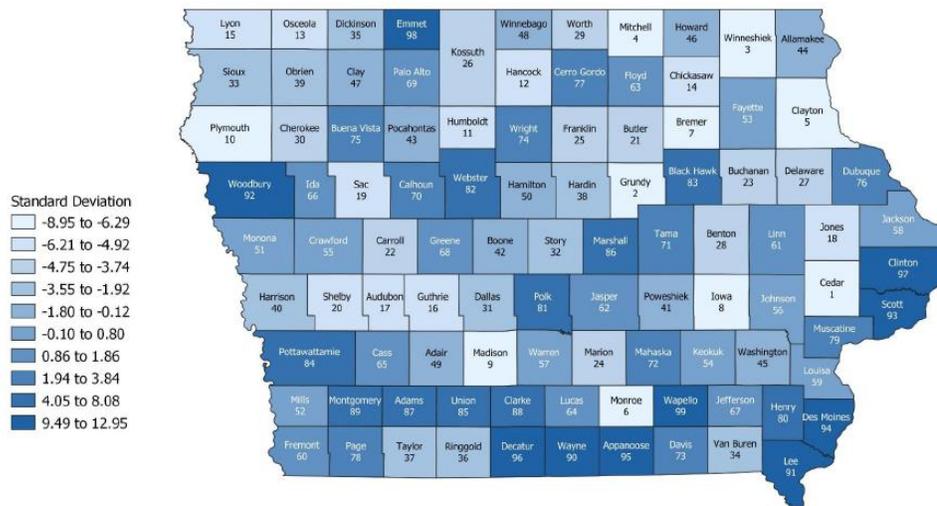
The Drug Endangered Children Alliance also tracks other risk factors for child abuse. Clinton County is the 3rd most at risk county in Iowa for Child maltreatment.² Clinton County ranked 97 out of 99 for counties at greatest risk for child maltreatment. (99 is the most at risk). This data and analysis were taken directly from the report.

IOWA CHILD MALTREATMENT PREVENTION NEEDS ASSESSMENT DATA UPDATE

In 2019, Prevent Child Abuse Iowa (PCA Iowa) contracted with Public Consulting Group, Inc. (PCG, formerly Hornby Zeller Associates, Inc.) to provide an update to the 2017 child maltreatment prevention needs assessment. The aim of the 2019 assessment was to use updated data to identify the counties at greatest risk for maltreatment. To achieve this aim, a county-by-county index of need was created, which incorporates actual incidence of abuse and neglect, along with the incidence of known risk factors. This document presents the findings from the 2019 assessment and is intended to be added as an addendum to the 2017 assessment.

COUNTIES AT GREATEST RISK FOR MALTREATMENT

Like the 2017 needs assessment, the current assessment examined current child abuse and neglect incidence in Iowa, in conjunction with data on multiple known risk factors. Child abuse rates, comprised of confirmed and founded reports of physical abuse and sexual abuse, were examined for 2018. The initial needs assessment also included reports of cohabitation with a sex offender in the definition of child abuse, but data for this risk factor were not available for the 2019 assessment. Child neglect data included confirmed reports of a registered sex offender being allowed access to a child, neglect, mental injury, and presence of illegal drugs in a child’s system. Additionally, results of the 2019 assessment did not include data on the exposure of children to methamphetamine manufacturing because data were not available as these cases are now classified under category of dangerous substances.



Counties with higher standard deviations (the darkest colors) have higher percentages of abuse, neglect, and all risk factors.

To develop this map, the standard deviations for all risk indicators correlated with maltreatment were summed and then the counties were ranked by the sum. The factors included are child abuse and neglect, child poverty, teen births, low-birthweight births, children living with parents with 4+ ACEs, children living with domestic violence, children living in households where rent is more than 35 percent of income, child population between the ages of zero and five, and children living with mental illness in the family.

² <https://dhs.iowa.gov/child-welfare/ICAPP-providers-admin>

The eight risk factors found to be statistically significantly correlated to child abuse and neglect in the 2017 needs assessment were included in the 2019 assessment. Table 1 lists the 10 indicators (eight risk factors, child abuse, and child neglect) and their data sources. Iowa Child Maltreatment Prevention Data Update 2019. The following steps were completed to identify counties at highest risk for maltreatment:

1. Determined County rankings for each of the 10 indicators (eight risk factors, child abuse, and child neglect),
2. Calculated the county-level composite score by summing the standard deviation from the mean for each score and
3. Created a risk ranking by summing the standard deviations for all county scores.

Table 1. Indictors and associated data sources

Indicator	Data Source	Year
Teen Births	Iowa Department of Public Health	2016 – 2018
Children Living in Poverty	U.S. Census, American Community Survey	2013 – 2017
Low Birthweight Births	Iowa Department of Public Health	2016 – 2018
Children Living with Domestic Violence*	Iowa Department of Public Safety	2016
Children Living with Parents with 4+ ACEs*	Iowa Behavioral Risk Factor Surveillance Study	2012 – 2015
Children Living in Households Where Rent is >35% of Family Income	U.S. Census, American Community Survey	2013 – 2017
Children Between Ages Zero and Five	U.S. Census, American Community Survey	2013 – 2017
Children Living with Mental Illness in Family*	Iowa Behavioral Risk Factor Surveillance Study	2012 – 2015
Child abuse	Iowa Department of Human Services	2016 – 2018
Child neglect	Iowa Department of Human Services	2016 – 2018

*Data from the 2017 needs assessment were used because updated data were not available

BECOMING A TRAUMA INFORMED COMMUNITY

Goal: Building Resilient and Trauma-Informed Communities Project This project seeks to raise the level of awareness of and commitment to child abuse prevention efforts in targeted communities through a strategic planning approach.

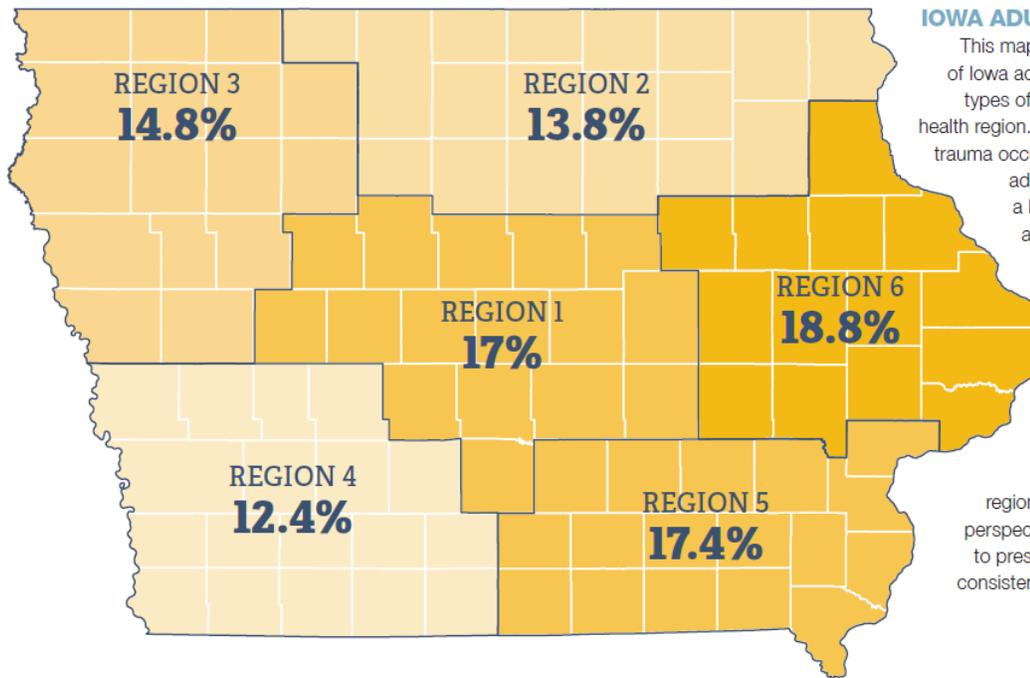
The prevention, identification, and community awareness of Adverse Childhood Experiences (ACES) was identified as a priority in the County Needs Assessment, MercyOne Clinton Medical Center’s Community Health Assessment, Clinton County Council Against Child Abuse & Neglect, and United Way. It was determined that ACES needed to be a priority initiative and ACES awareness and education needed to be integrated into all other health priorities which include substance abuse, mental health, access to care, homelessness, violence, and more. Specifically, the long-term goals that were established were: 1) Reduce ACE score in youth in Clinton County; 2) Increase Resiliency in all Clinton County youth and adults with ACE scores; 3) Decrease the incident of risk behaviors that lead to childhood trauma.

Early experiences share the quality of our adult lives. When terrible things happen to kids, we can expect to see the side effects later in life. Clinton County ranks the 3rd highest risk, with a score of 12.49 on the Iowa Child Maltreatment Prevention Needs Assessment Data Update. Clinton County has the 3rd highest rates of child abuse, neglect, and all risk factors.

Adverse Childhood Experiences (ACEs) are stressful or traumatic experiences, including abuse, neglect and a range of household dysfunction. ACEs are strongly related to development and prevalence of a wide range of health problems, including substance abuse, throughout the lifespan. Clinton County is located in region 6 according to Iowa ACES 360 and is in the region of the state with the greatest number of adults reporting four or more ACEs.³

³ <https://www.iowaaces360.org/2020-iowa-aces-report.html>

Prevalence of ACEs by region



IOWA ADULTS WITH 4+ ACEs

This map highlights the percentage of Iowa adults reporting four or more types of ACEs or neglect by public health region. It does not indicate where trauma occurred, but rather where the adults who have experienced a higher percentage of ACEs are living today. The regions range from 12-19% of adults reporting 4+ ACEs, signifying the need for trauma-informed frameworks throughout Iowa.

Why did we feature a regional map? Using a regional rather than county-level perspective allows Iowa ACEs 360 to present the most accurate and consistent data analysis throughout the state.

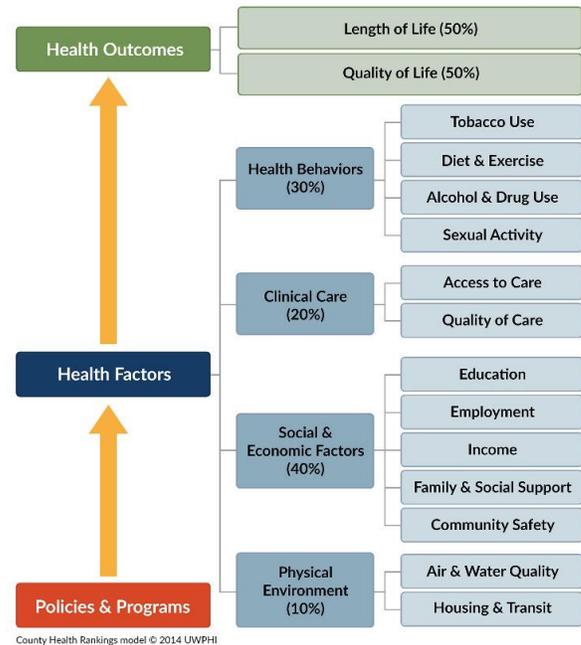
The ACE Study focuses on ten types of adversity that can occur within the home. However, many kinds of experiences—such as poverty, violence in the community, systemic racism, the loss of a loved one, or natural disasters—can cause trauma. What we experience as trauma is personal and influenced by our past experiences, current relationships, and the community where we live. These questions determine the prevalence of 10 types of ACEs among Iowa’s population. Source: Center for Disease Control and Prevention

ABUSE	NEGLECT	HOUSEHOLD DYSFUNCTION	
 Physical	 Physical	 Mental Illness	 Incarcerated Relative
 Emotional	 Emotional	 Mother treated violently	 Substance Abuse
 Sexual		 Divorce	

COUNTY HEALTH RANKINGS

The Rankings help us understand what influences how long and how well we live. They provide measures of the current overall health (health outcomes) of each county in all 50 states and the District of Columbia. Rankings data include a variety of measures, such as high school graduation rates, access to nutritious foods, and the percent of children living in poverty, all of which impact the future health of communities (health factors).

According to the 2021 County Health Rankings, Clinton County ranks eighty-four out of ninety-nine counties in health outcomes and thirteen out of ninety-nine counties in health factors. That means Clinton County has one of the lowest rankings of healthy behaviors in the entire State of Iowa. The Rankings help us understand what influences how long and how well we live. They provide measures of the current overall health (health outcomes) of each county in all fifty states and the District of Columbia. Rankings data include a variety of measures, such as high school graduation rates, access to nutritious foods, and the percent of children living in poverty, all of which impact the future health of communities (health factors).⁴



While we understand that all the Risk factors are important, we pay particularly close attention to the indicators that are in the Chart Below (2021-Clinton County Health Rankings Table). The boxes in red are the indicators where Clinton County scored worse than the Iowa average.

- Poor mental health days- average number of mentally unhealthy days reported in past 30 days (age-adjusted).
- Low birthweight- Percentage of live births with low birthweight (< 2,500 grams). (2013-19)
- Life expectancy- average number of years a person can expect to live. (2017-19)
- Frequent mental distress- Percentage of adults reporting 14 or more days of poor mental health per month (age-adjusted). (2018)
- HIV prevalence- Number of people aged 13 years and older living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population. (2018)
- Adult smoking- percentage of adults who are current smokers (age-adjusted). (2018)
- Excessive drinking- Percentage of adults reporting binge or heavy drinking (age-adjusted) (2018)
- Alcohol-impaired driving deaths-Percentage of driving deaths with alcohol involvement. (2015-19)
- Sexually transmitted infections-Number of newly diagnosed chlamydia cases/100,000 population. (2018)
- Teen births- Number of births per 1,000 female population ages 15-19. (2013-2019)
- Drug overdose deaths- Number of drug poisoning deaths per 100,000 population. (2017-2019)
- Motor vehicle crash deaths- Number of motor vehicle crash deaths per 100,000 population. (2013-2019)
- Primary care physicians- Ratio of population to primary care physicians. (2018)
- Mental health providers- Ratio of population to mental health providers. (2020)

⁴ <https://www.countyhealthrankings.org/app/iowa/2022/downloads>

- High school completion- Percentage of adults ages 25 and over with a high school diploma or equivalent. (2015-19)
- Some college- Percentage of adults ages 25-44 with some post-secondary education. (2015-2019)
- Unemployment- Percentage of population ages 16 and older unemployed but seeking work. (2019)
- Children in poverty- Percentage of people under age 18 in poverty. (2019)
- Children in single-parent households- Percentage of children that live in a household headed by single parent. (2015-19)
- Violent crime- Number of reported violent crime offenses per 100,000 population. (2014-16)
- Injury deaths- Number of deaths due to injury per 100,000 population. (2015-19)
- High school graduation- Percentage of ninth-grade cohort that graduates in four years. (2017-18)
- Disconnected youth- percentage of teens and young adults ages 16-19 who are neither working nor in school. (2015-19)
- Median household income- The income where half of households in a county earn more and half of households earn less. (2019)
- Children eligible for free or reduced-price lunch- Percentage of children enrolled in public schools that are eligible for free or reduced-price lunch. (2018-19)
- Suicides- Number of deaths due to suicide per 100,000 population (age-adjusted). (2015-19)

2021-Clinton County Health Rankings Table ⁵	Clinton (CN) County	Error Margin	Top U.S. Performers	Iowa
Health Outcomes				
Quality of Life				
Poor mental health days	3.9	3.6-4.3	3.8	3.5
Low birthweight	8%	7-9%	6%	7%
Additional Health Outcomes (not included in overall ranking) –				
Life expectancy	77.9	77.1-78.6	81.1	79.4
Frequent mental distress	12%	11-14%	12%	11%
HIV prevalence	87		50	106
Health Factors				
Health Behaviors				
Adult smoking	20%	17-23%	16%	17%
Excessive drinking	28%	27-29%	15%	26%
Alcohol-impaired driving deaths	30%	18-42%	11%	27%
Sexually transmitted infections	459.5		161.2	466.7
Teen births	29	26-32	12	18
Additional Health Behaviors (not included in overall ranking) –				
Drug overdose deaths	11	7-19	11	10
Motor vehicle crash deaths	11	7-15	9	11
Clinical Care				
Primary care physicians	1,860:1		1,030:1	1,360:1
Mental health providers	690:01:00		270:01:00	610:01:00
Additional Clinical Care (not included in overall ranking) +				
Social & Economic Factors				
High school completion	91%	90-92%	94%	92%
Some college	61%	56-66%	73%	70%
Unemployment	3.70%		2.60%	2.70%
Children in poverty	18%	13-24%	10%	13%
Children in single-parent households	32%	25-38%	14%	21%
Violent crime	484		63	282
Injury deaths	82	70-93	59	68
Additional Social & Economic Factors (not included in overall ranking) –				
High school graduation	87%		95%	91%
Disconnected youth	7%	3-11%	4%	5%
Median household income	\$56,900	\$49,800 to \$63,900	\$72,900	\$61,800
Children eligible for free or reduced-price lunch	48%		32%	43%
Suicides	20	14-27	11	15

⁵ <https://www.countyhealthrankings.org/app/iowa/2021/rankings/clinton/county/outcomes/overall/snapshot>

Clinton County Trauma Informed Alliance

Adverse childhood experiences (ACEs) are stressful or traumatic experiences, including abuse, neglect and a range of household dysfunction such as witnessing domestic violence, or growing up with substance abuse, mental illness, parental discord, or crime in the home. ACEs are strongly related to development and prevalence of a wide range of health problems, including substance abuse, throughout the lifespan.

Clinton County has established the Clinton County Trauma Informed Alliance (CCTIA), a subgroup of PCA and a coalition-lead, grassroots movement, to educate our communities about ACEs and the effects of toxic stress. The group's intent is to help Clinton County understand trauma and stress, integrate trauma-informed and resilience-building practices into community services and individual lives.



The effect of ACEs is undeniable, and many community groups were working on this idea. In 2018, Leslie Mussmann, at ASAC helped pull together the partners and together we developed a joint action plan. CSAC's role in this was to apply for funding through the Iowa Child Abuse Prevention Programing to help Clinton County become a Trauma Informed Community and help to facilitate the alliance throughout 2020 & 2021. Goals of this project include reaching and informing the community on how to reduce the incidents of child abuse and neglect in our communities. This project will be three pronged including 1) entire community with general prevention, Community Readiness Surveys, and Connections Matter training and specifically target: 2) Early childhood providers; and 3) educators/caregivers at 2 middle schools.

This project has adapted the definition provided by the Substance Abuse and Mental Health Services Administration (SAMHSA). SAMHSA defines any setting as "trauma-informed" if the people there realize how widespread trauma is, recognize signs and symptoms, respond by integrating knowledge into practice, and resist doing further harm. We know that building resilient and trauma informed communities is essential to improving public health and well-being. Communities can be places where traumatic events occur, and they can also help keep us safe; They can be a source of trauma, or buffer us against the negative effects of adversity; Communities can collectively experience trauma much like individuals do, and they can be a resource for healing.

ACE INTERFACE TRAININGS

The ACE Interface Training is designed to support rapid dissemination of ACE and resilience science and promote understanding and application of the science to improve health and wellbeing across the lifespan. The program is structured with licensed materials, and a process for effectively implementing a massive ACE education campaign that is based on person-to-person interaction and community engagement. Trained

ADVERSE CHILDHOOD EXPERIENCES INCLUDE:



ADVERSE CHILDHOOD EXPERIENCES HAVE BEEN LINKED TO:



presenters use a flexible script, PowerPoint presentation, and background information that has been reviewed by national content experts, improved over time using field experience, and proven to be effective with diverse audiences. In 2020, twelve ACE Interface Trainings were held by 13 ACE Interface Trainings with a total of 144 participants. 100% of participants increased their awareness of ACEs and trauma.

CONNECTIONS MATTER TRAININGS

Connections Matter is a community-based initiative that explores how the connections we make in life profoundly impact our brain's ability to grow and our own individual abilities to cope and thrive. Through our workshops and trainings, we educate the public on the intersecting topics of Adverse Childhood Experiences (ACEs), trauma, brain development, and resilience. We utilize an evidence-based program, along with real-world and concrete examples, to demonstrate how ACEs adversely affect brain development and health outcomes - and how caring connections serve as a primary buffer in the negative effects of trauma. Connections Matter strives to promote the building of more resilient, compassionate, and trauma-informed communities - thus allowing all children and individuals to succeed. Twenty-three individuals from throughout Clinton County are now Connections Matter facilitators. In 2020, three Connections Matter Trainings were held with sixty-three participants. 92% of participants reported that they increased their knowledge of ACEs and 100% of participants reported their knowledge increased of the importance of the Connections Matter concept.



CONNECTIONS MATTER MESSAGING

Our overall goal was to maximize the number of impressions and have adequate dosage of our message. In 2020, we ran a Connections Matter billboard on Manufacturing Drive for four weeks and on Camanche Avenue for four weeks. The billboard generated 406,760 impressions over the eight weeks. Additionally, we ran a Connections Matter social media campaign throughout the month of April, which is Child Abuse Awareness month. Each day we posted facts about child abuse or helpful tips about staying connected. The campaign generated 21,153 impressions over the month.



The ICAPP grant also supported Genesis VNA in working with specific populations including early childcare providers. They organized an Early Childhood PBIS (Positive Behavioral Interventions and Support) training which is a proactive approach to put behavioral and social strategies in place for all children while building individualized support for those at risk for social-emotional disorders and the development of (or already persistent) challenging behaviors. Risk circumstances may include poverty, exposure to abusive, neglectful, or violent home situations, maternal depression and delays or disabilities in learning or communication. Childcare providers who attended the PBIS training learned problem-solving processes that uses research-based strategies to involve childcare providers and parents to create learning environments that support social and emotional development and academic engagement through effective instructional methods and positive feedback.

The Early Childhood trainings were held virtually to 20 childcare centers. In addition, toolkits were provided to each center.

The Trauma Informed Alliance continues to collaborate with schools. The alliance worked with Clinton Middle School and identified a potential resiliency-based program based on assessment data. The alliance collaborated with Camanche and Clinton School District and identified Life Skills and the resiliency-based program to be implemented. Both Clinton and Camanche will be implementing Life Skills in the Fall of 2020.

A trauma-informed system is not just about raising awareness, but changing behavior, actions, and responses. The approach requires doing things differently so as not to re-traumatize or introduce additional trauma. Systems need to support the natural resiliency of children and youth and assist them in identifying their unique strengths. In a trauma-informed system, caregivers play a significant role in recovery, help promote youth's natural resiliency, and give youth tools for managing stress. A strengths-based approach considers and includes the assistance given to caregivers within the system. This approach considers how the system helps caregivers deal with both current and past traumatic stress. The trauma-informed system assists caregivers understand the significant trauma histories of the children and youth that are in their care. Therefore, the trauma-informed system responds to the varying impacts of traumatic stress on children, caregivers, and all those who are in contact with the system.

MercyOne Community Health Needs Assessment

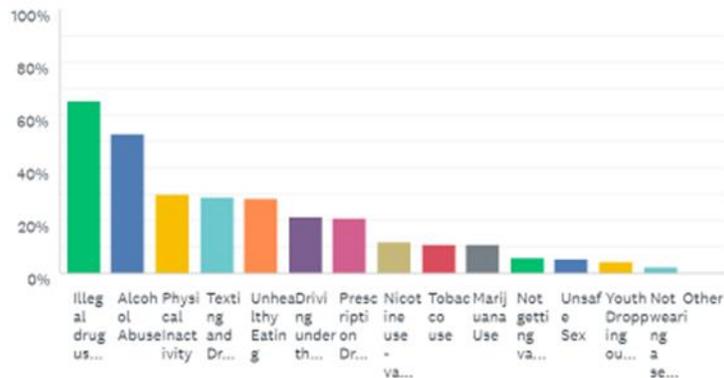
In 2019- 2020, MercyOne completed a community assessment. Substance misuse has been one of the top-ranking health needs for this community the past several years. Clinton County has one provider that offers outpatient substance use services, and there are two intensive outpatient programs with housing, a substance use prevention agency, two substance abuse coalitions, and additional community partners who address substance use as part of their services. Over the past year accessing services became more challenging due to COVID-19 restrictions. Statewide substance use providers have seen a 30% decrease in patients, due to COVID-19 and related closings/restrictions. In addition, prevention efforts have been limited due to not being able to do community outreach or school-based services.

Overall, the early data suggests that in the United States, COVID-19 has led to an increase in substance use, increase in overdoses, mental health related issues due to increased stress, social isolation, and lack of healthcare. According to the Centers for Disease Control and Prevention, as of June 2020, 13% of Americans reported starting or increasing substance use as a way of coping with stress or emotions related to COVID-19. Overdoses have also spiked since the onset of the pandemic. A reporting system called ODMAP shows that the early months of the pandemic brought an 18% increase nationwide in overdoses compared with those same months in 2019. Goal: Reduce substance misuse to protect the health, safety, and quality of life for all, especially children and increase community readiness and strategies to reduce initiation of substance use. (Healthy People 2020 Substance Abuse Goal)

Substance use was identified as the second highest concern and priority area. CSAC then assisted with narrowing down what substances and what factors contributed to this priority. Kristin helped to lead the Substance Use Workgroup (CHNA SA), which included various community partners from substance use prevention, treatment providers, corrections, housing, healthcare, law enforcement, and youth serving organizations.

Please check the top 3 risky "behaviors" in the community you live.

Answered: 550 Skipped: 50



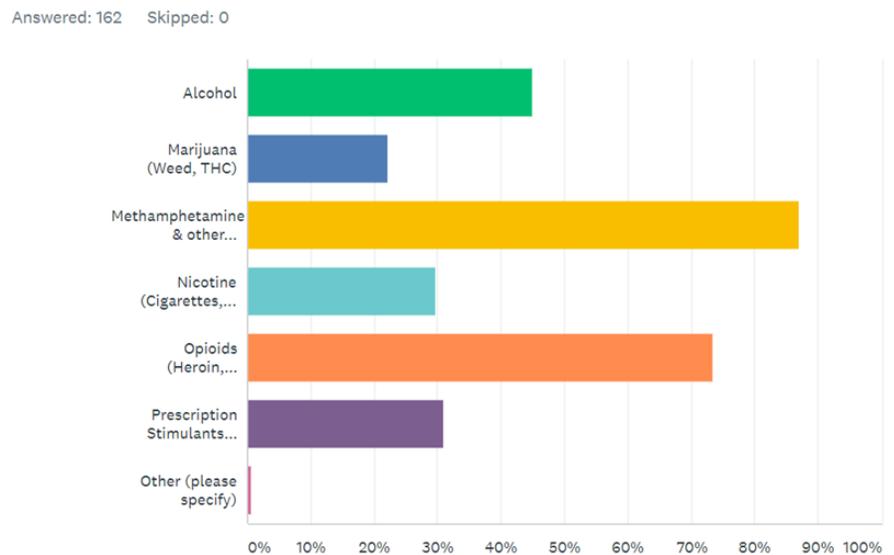
ANSWER CHOICES	RESPONSES
Illegal drug use - meth, opioids	65.64% 36
Alcohol Abuse	52.91% 291

The CHNA SA workgroup completed various assessments to get a better picture of the local conditions and problems. An assessment completed by Mercy One showed that substance use was the #2 priority in our service area, and on a follow up survey of almost two hundred community members by the CSAC the following substance use priority areas were identified:

- Stigma
- Access to substance use providers (various levels of treatment)
- Transportation to services.
- Poverty, unemployment/Underemployment, transient, homeless, ALICE constraints
- Availability
- Substance use and contributions to Crime/Violence.

The top three substances of concern were alcohol, opioids, and methamphetamine. The CHNA SA workgroup held 2 community input meetings to discuss these specific concerns and brainstormed goals and objectives for the CHNA. Based all input at these meetings, an importance & changeability survey was then sent to committee members and completed at the Gateway ImpACT Coalition meeting. Participants were asked to rate the importance of each intervention (not important to important) and the changeability of each intervention (not able to change to most changeable

What three substances should community efforts focus on addressing? (Pick up to 3)



Based on the results, the items that were listed as: most important and most changeable were identified as areas to work on.

- Stigma
- Access to substance use providers (various levels of treatment)
- Transportation to services
- Poverty, unemployment/Underemployment, transient, homeless, ALICE constraints
- Availability of substances.

The following interventions were identified as both important and changeable to affect adult substance use: Increasing treatment options (detox, # of providers, etc.); reducing barriers to treatment (transportation); and increase jail-based services. There was support to expand the resource center to an access center, but while the respondents thought this action was important, they did not think this was some that was changeable.

The interventions that was listed as the most important and changeable to address youth substance use and prevention was to increase the number of evidence-based programs in the service area; and increase the number of youth screened at providers offices for risky behavior (SA/MH). Other factors to note was there was a need to change community parental norms in accepting youth substance use, but respondents did not think that was changeable.

Strategies to address Stigma that were identified as both important and changeable included: Increasing community readiness of both Meth and Opioids, (Opioids may be easier), Increased adult screening for SA (& MH) issues, (Would align with Mercy One's "One" theme..." Every Person, Every Visit") and to Increase Trauma Informed Care. There was support for both doing so with PACES (Positive and Adverse Childhood Experiences) and focusing on the healthcare specific sector. Based on the results here are the goals:

Goal: Reduce substance misuse to protect the health, safety, and quality of life for all, especially children and increase community readiness and strategies to reduce initiation of substance use. (Healthy People 2020 Substance Abuse Goal) SMART Objective(s):

1. Increase the number of substance use disorder treatment providers in Clinton County by 1 per year. (As measured by # of CADCs – Certified Alcohol and Drug Counselors)
2. Reduce barriers to substance use treatment by providing additional resources including additional locations and additional peer support/CHWs by 1 per year for the next 3 years.
3. Increase the number of kids in MercyOne's service area that participate in an Evidence Based Program on substance use/resiliency each year for 3 yrs.
4. Implement the Physician Committed program to identify number of youth and adults at risk for substance abuse by June 30, 2024.
5. Decrease the total (males and females) percentage of youth that try alcohol from the Iowa Youth survey by June 30, 2024.

Strategies:

- 1A. Provide community trainings for treatment providers on substance use, culture competency with stigma and/or resiliency training.
- 1B. Train more individuals to provide substance use assessments
- 1C. Recruit more treatment providers to the MercyOne Service area
- 2A. Survey treatment centers to identify barriers or gaps and map out current locations to identify geographical gaps in our service area.
- 2B. Utilize community health worker and/or peer support to connect patients with treatment. (Expand peer support additional settings i.e., Urgent Care, MMU, MAT clinic, ED)
- 3A. Survey the number schools and ages of students currently implementing EBPs include a menu of possible EBP programs.
- 4A. Develop and get approval of Physician Committed.
- 4B. Provide trainings on the stigma related to substance use and increase the communities understanding of stigma that goes with individuals that abuse substances.
- 5A. Work with the Brain Now Campaign and Brain Health coalition to connect how early initiation of substance use leads to problematic substance abuse and health problems.

Clinton CRUSH +

The Clinton Chapter of CRUSH started in May 2016. CRUSH stands for Community Resources United to Stop Heroin. The plus sign indicates other drugs. CRUSH+ recognizes all drugs of abuse with the main focus on opioids and psychostimulants.



MISSION

Empower the Gateway Area to break the cycle of substance use.

PURPOSE

Clinton CRUSH+ (Community Resources United to Stop Heroin and other drugs) is a group of concerned individuals including professionals, those with lived experience, and volunteers. These members seek to empower the Gateway Area to break the cycle of substance use by supporting interventions, treatment, and recovery efforts with tools, support, training, and education. Ending addiction changes everything.

VISION

A community that reduces the stigma and supports substance use disorder treatment and recovery.

GOALS

Goal 1: Increase collaboration on Substance Use Treatment & Recovery Issues.

- CRUSH + meetings
- CRUSH Structure
- CRUSH + outreach
- Resource Assessment
- Early ID of Drug issues

Goal 2: Increase awareness of substance use disorder

- Reduce the stigma of this disease.
- Trainings/presentations
- Information dissemination: community engagement, education, & outreach.
- Media engagement

Goal 3: Increase involvement in preventing, identifying, and treating SA addictions.

- Promote compliance of the CDC prescribing guidelines
- Expand use of evidence based early detection and intervention programs.
- Support/Encourage new treatment methodologies

Goal 4: Increase access to timely, affordable, appropriate treatment.

- Compile list of treatment options, contact information and barriers.
- Increase availability of MAT
- Create new pathways to treatment.
- Find/support funding to fill in gaps.

Goal 5: Increase support for those dealing with addiction.

- Support resource center
- Support groups

Goal 6: Increase Recovery Support.

- This strategy recognizes that treatment alone may not be enough to support long-term recovery.

Goal 7: Overdose Prevention

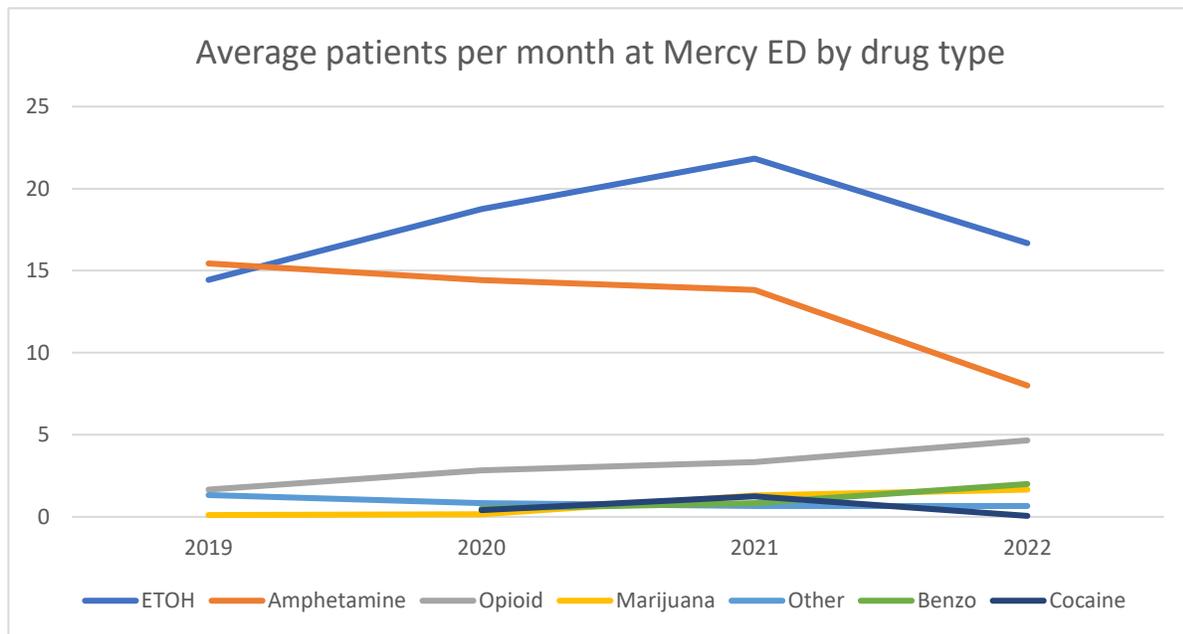
Harm reduction incorporates a spectrum of strategies that includes safer use, managed use, abstinence, meeting people who use drugs “where they’re at,” and addressing conditions of use along with the use itself.

Tracking the data

EMERGENCY DEPARTMENT VISITS

The Clinton Substance Abuse Council worked on updated both the Opioid and Amphetamine Assessment during 2020-2021. The report is still a work in progress, but some data collected so far continues to show an increase in Opioid Emergency Department admission, treatment admissions, and arrests. The Data from Mercy One ED shows that Opioid Emergency Department (ED) admissions increased by 197% from 2019 to 2022.

Amphetamine ED admissions are much higher overall but decreased by 10% from 2019 to 2021. Also, there was an increase of marijuana related admissions from 2019 to 2022 of Over 1400%.

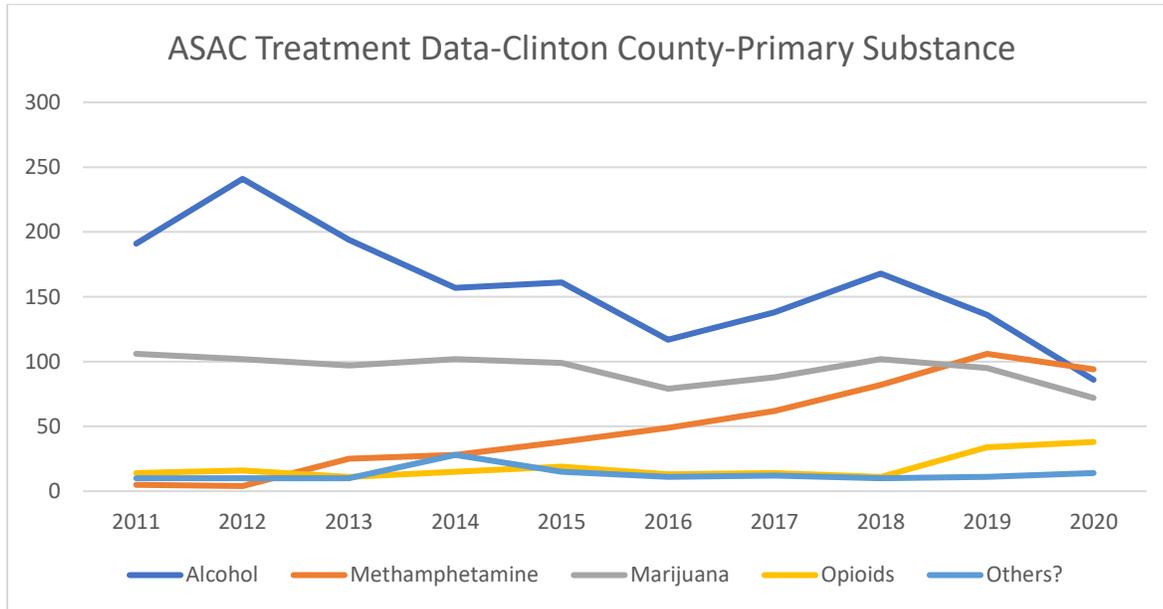


Clinton County ranks the 21st highest in Amphetamine-Related Poisoning Emergency Department Visits (2018-2020), with 6.459/100,000.⁶

⁶ Iowa Department of Public Health Division of Behavioral Health Strategic Initiative to Prevent Drug Overdose (SIPDO) County Selection Indicators, 2016-2020, Prepared 2.9.22

TREATMENT DATA

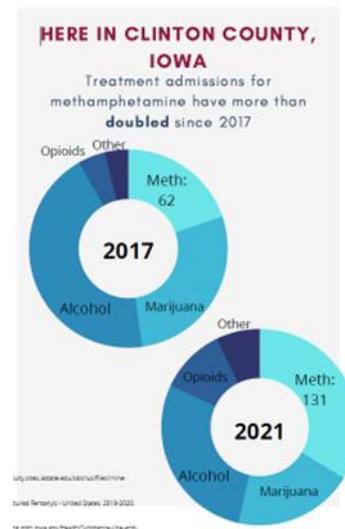
Treatment data for Clinton County shows a decrease in alcohol as the primary substance of abuse at admission since 2011, marijuana has remained about the same, and there were increases in methamphetamine and opioid treatment admissions during the same time period. Clinton County ranks 27th in Iowa for methamphetamine treatment admissions with a rate of 344.67/100,000.⁷ Clinton County ranks 9th in Iowa for opioid treatment admissions with a rate of 114.69/100,000.⁸



SIPDO (ASAC)

Additional data from ASAC’s SIPDO project show that here in Clinton County, Iowa treatment admissions for methamphetamine had more than doubled since 2017. ASAC was awarded a Strategic Initiatives to Prevent Drug Overdoses Grant to address this issue here locally through the Clinton Collaborative Council, which is a countywide group of stakeholders that work together to address substance misuse issues. Both Lauren and Kristin sit on the CCC representing GIC, CDC, and CRUSH+. Additional statistics provided by the project indicate that in 2020, Iowa substance use treatment data for methamphetamine showed...

- 2 in 3 pregnant women reported methamphetamine use
- 1 in 3 people were homeless
- 2 in 3 people had a co-occurring mental health disorder⁹



⁷ Iowa Department of Public Health Division of Behavioral Health Strategic Initiative to Prevent Drug Overdose (SIPDO) County Selection Indicators, 2016-2020, Prepared 2.9.22

⁸ Iowa Department of Public Health Division of Behavioral Health Strategic Initiative to Prevent Drug Overdose (SIPDO) County Selection Indicators, 2016-2020, Prepared 2.9.22

⁹ SIPDO Overview document (ASAC)

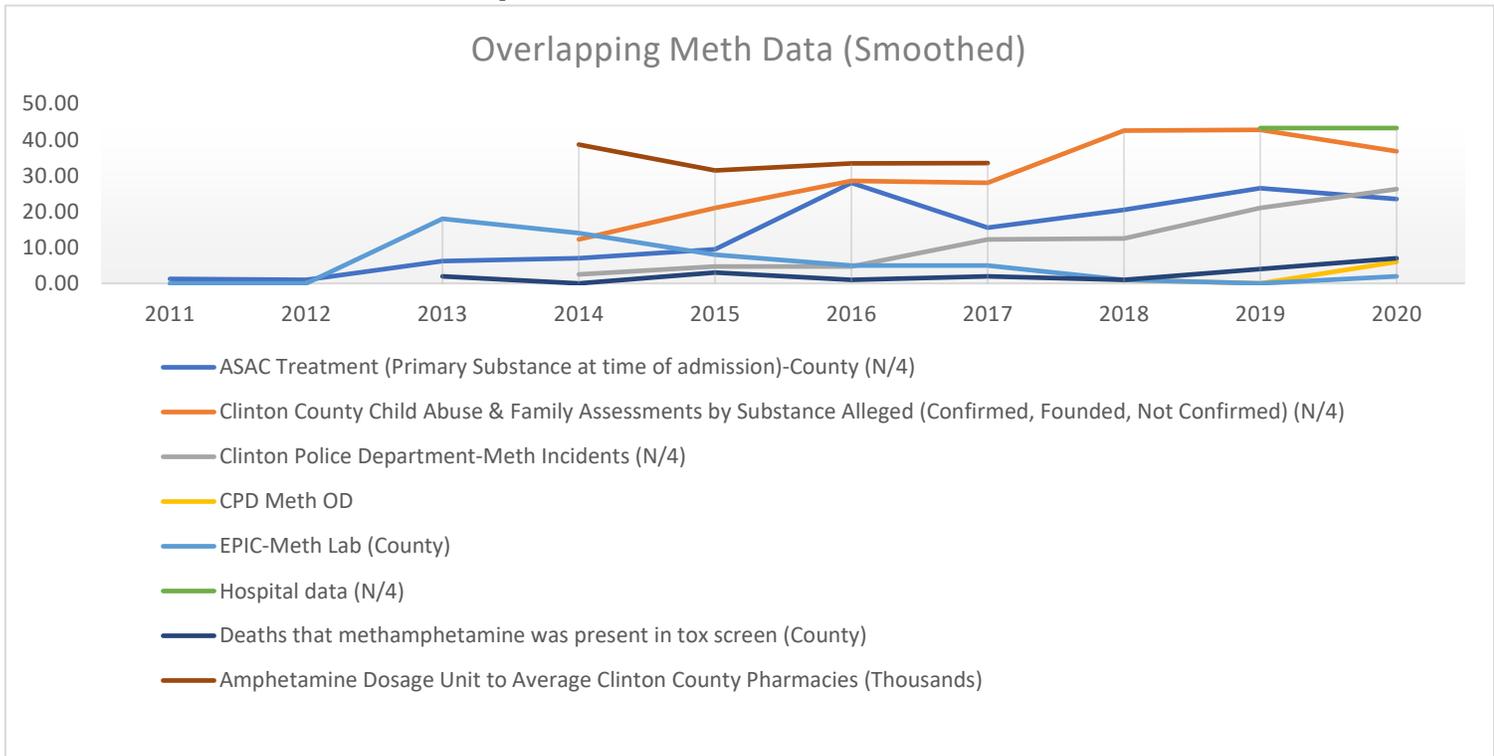
Methamphetamines/Amphetamines/Stimulants

Psychostimulant use has been increasing in our community. Stimulants (also often referred to as psychostimulants or colloquially as uppers) is an overarching term that covers many drugs including those that increase activity of the central nervous system and the body.¹⁰

METHAMPHETAMINE ON THE RISE

Methamphetamine use in Iowa is high, rising, and increasing at a faster rate than in other states. The most recent DEA National Drug Threat Assessment speculates that changes in the chemical profile and supply networks of methamphetamine may have resulted in its penetration into new markets (National Drug Threat Assessment, 2020). We can confirm new markets are emerging in Iowa. Methamphetamine is spreading from rural to urban places, from lower to higher education groups, and from younger to older ages. We provide evidence of rising use among Hispanic and Native American populations, and also among women, including expecting mothers. Homelessness among people who use methamphetamine (PWUM) is more common now than it was in the past and is higher in Iowa than regionally or nationally. Methamphetamine represents a growing share of all chemicals identified in Iowa drug seizure lab tests, more than doubling from 21% in 2011 to 44% in 2019. Most seriously, overdose mortality attributable to methamphetamine use in Iowa is on the rise.¹¹

The Gateway ImpACT Coalition was able to pull together several types of data that showed that Methamphetamine data is increasing across various sectors. One area that was particularly concerning is that there has been an increase in methamphetamine related deaths.

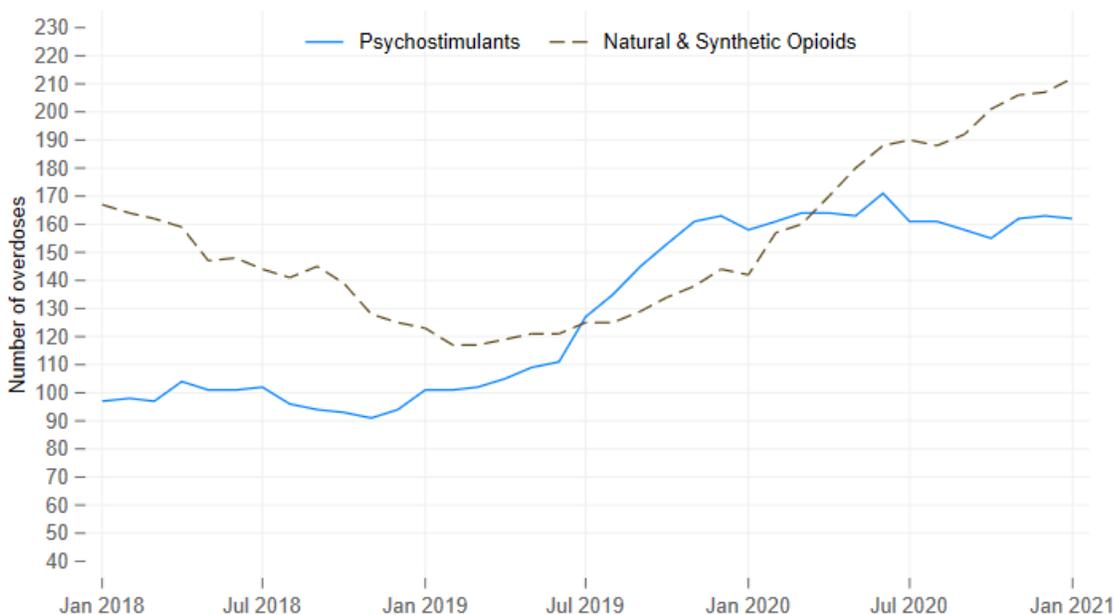


¹⁰ "Stimulant – definition of stimulant in English | Oxford Dictionaries". Oxford Dictionaries | English. Archived from the original on 26 February 2017

¹¹ Taken directly from: Methamphetamine Use in Iowa, September 2021, Dorius, et.al.

INCREASED OVERDOSE MORTALITY

Most importantly, methamphetamine is contributing the death of more Iowans (see Figure 15). From January 2018 to January 2021, the number of overdoses from psychostimulants including methamphetamine rose in Iowa. In fact, the psychostimulant overdoses rose from about 100 in January of 2019 to 160 in January of 2020. Since January 2020, the twelve-month ending provisional count of psychostimulant overdoses averaged 162 people in Iowa, representing a plateau in the number of overdoses. Conversely, overdoses of natural and synthetic opioids in Iowa continued to rise from about 120 in January 2019 to more than 2000 in January 2021. The COVID-19 pandemic impacted supply of illicit drugs, particularly opioids, but other factors impacted rising opioid overdose deaths (Mason et al., 2021; Slavova et al., 2020). In Iowa, providers and PWUM reported varying impact on supply of methamphetamine related to COVID-19 within their communities and personal networks, provisional data from the National Center for Health Statistics showed a plateau of psychostimulant overdose deaths during 2020. There were varying trends of psychostimulant overdoses nationally. Nationally, the number of psychostimulant overdoses rose by 50% during the pandemic. Conversely some regions in the country had evidence of a similar slowing of psychostimulant overdoses while the national incidence rose (Appa et al., 2021). There is not enough data available to decisively identify which mechanisms affected the psychostimulant overdose deaths in Iowa during the COVID-19 pandemic.¹²



Notes: Psychostimulants include substances such as methamphetamine, amphetamine, and cocaine. ICD-10 Codes: T40.2-T40.4 & T43.6. Reported provisional counts for 12 month ending periods are the number of deaths received and processed for the 12 month period ending in the month indicated.
Source: Provisional drug overdose death counts, National Center for Health Statistics, 2021

Data collected by the Iowa Department of Public Health shows that Psychostimulant-Involved Overdose Deaths (2016-2020) in Clinton County are at 6.42/100,000 individuals which is the 8th highest rate in Iowa.¹³

¹² Taken directly from: Methamphetamine Use in Iowa, September 2021, Dorius, et.al.

¹³ Iowa Department of Public Health Division of Behavioral Health Strategic Initiative to Prevent Drug Overdose (SIPDO) County Selection Indicators, 2016-2020, Prepared 2.9.22

METHAMPHETAMINE VULNERABILITY INDEX

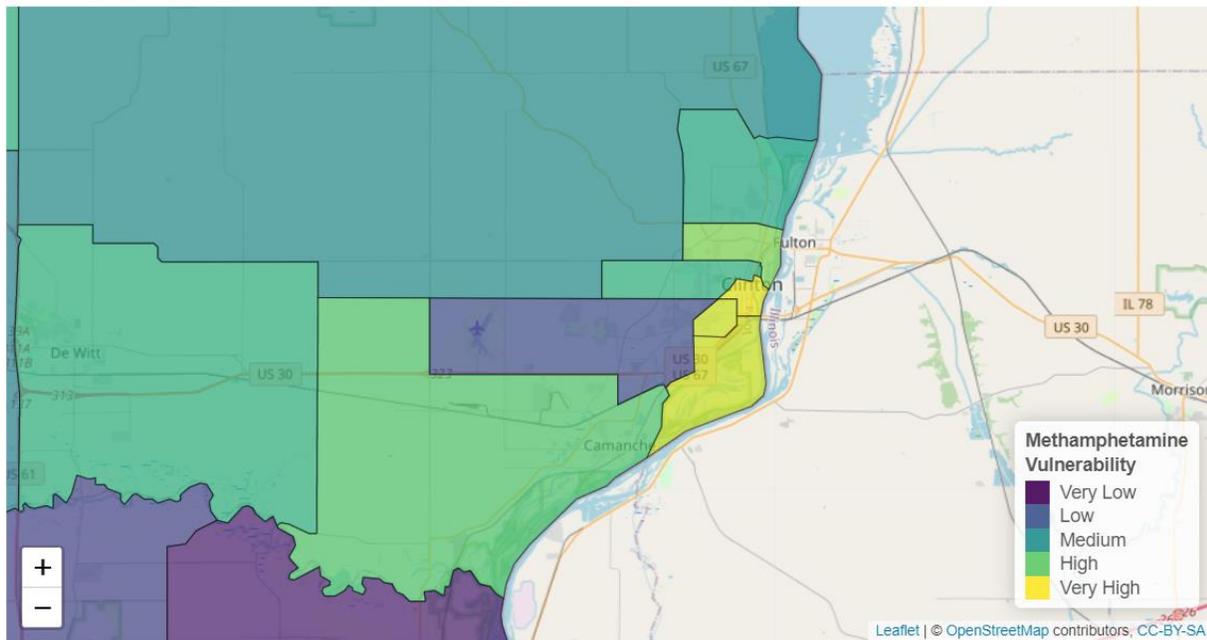
The Public Science Collaborative has developed data resources to support public health leaders and those who work in Iowa's substance use space to target methamphetamine interventions more effectively for the people in greatest need of support. Geographic 'hot spots' of people at risk for methamphetamine use were first predicted based on analysis of extensive administrative data. Then, the predictions of risk were overlaid with Census data and mapped to geographically depict communities in greatest need of support. As a result, program leaders have an opportunity to visually identify areas of concern and align services and resources to best meet the needs of Iowa communities. The goal of the prediction and alignment process is to eventually reduce or prevent methamphetamine use in these communities.

Our population risk index can strengthen public health's ability to monitor vulnerable populations and coordinate the delivery of prevention, treatment, and recovery resources and interventions. Knowing where this high-vulnerability population is at the neighborhood level allows for a very granular application of prevention messaging, mobile clinical and treatment services, and community recovery resource investments, among other outreach efforts.



Methamphetamine Risk in Iowa

Methamphetamine Vulnerability Index



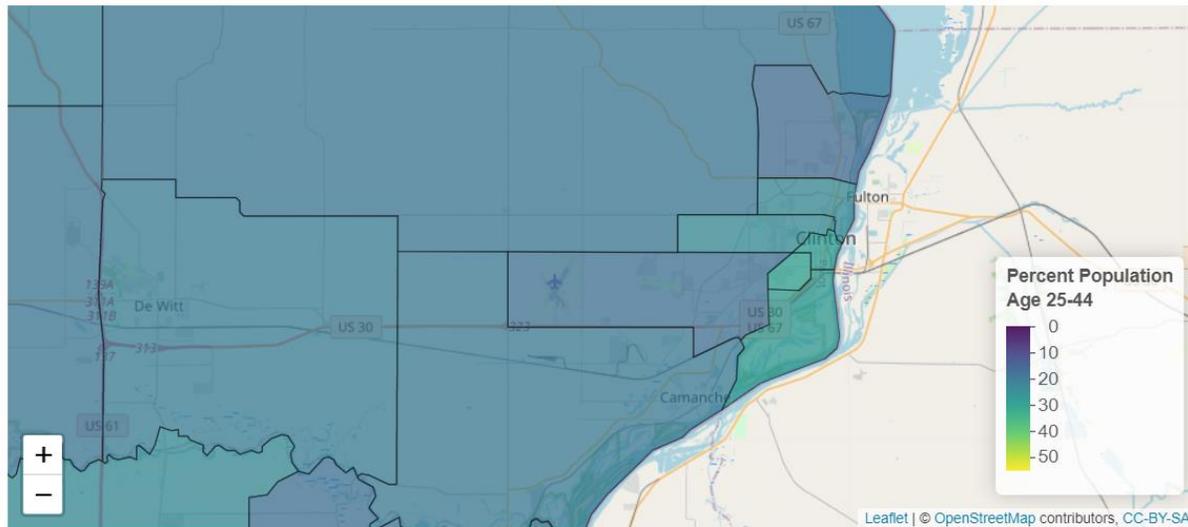
Components for this index are percent of population between 25 and 44 years of age; percent of population with household income below 125% of federal poverty line; percent of population that is divorced, separated, or widowed; percent of population above 25 without a bachelor's degree; unemployment rate; percent of population that is white; and percent of families with a single parent.¹⁴

¹⁴ https://publicsciencecollaborative.shinyapps.io/methamphetamine_vulnerability/

INDEXES

Percent of population between 25 and 44 years of age

National estimates from NSDUH indicate that the average age of a person reporting past-year methamphetamine use increased by 1.6 years between 2015 and 2019, from 36.6 to 38.2 (see Figure 10). The national trend is being driven by fewer younger people (<26) using in 2019 than in 2015, and more people between the ages of 26-49 using (there has also been a very slight uptick among the 50+ ages). Broadly, methamphetamine use is most common among people aged 26-49, with very low usage among minors (Jones et al., 2020; Larson et al., 2019). Between 2015 and 2018, there was a 30% national increase in methamphetamine use among people aged 26-34 (Palamar et al., 2020).¹⁵



Percent of population with household income below 125% of federal poverty line

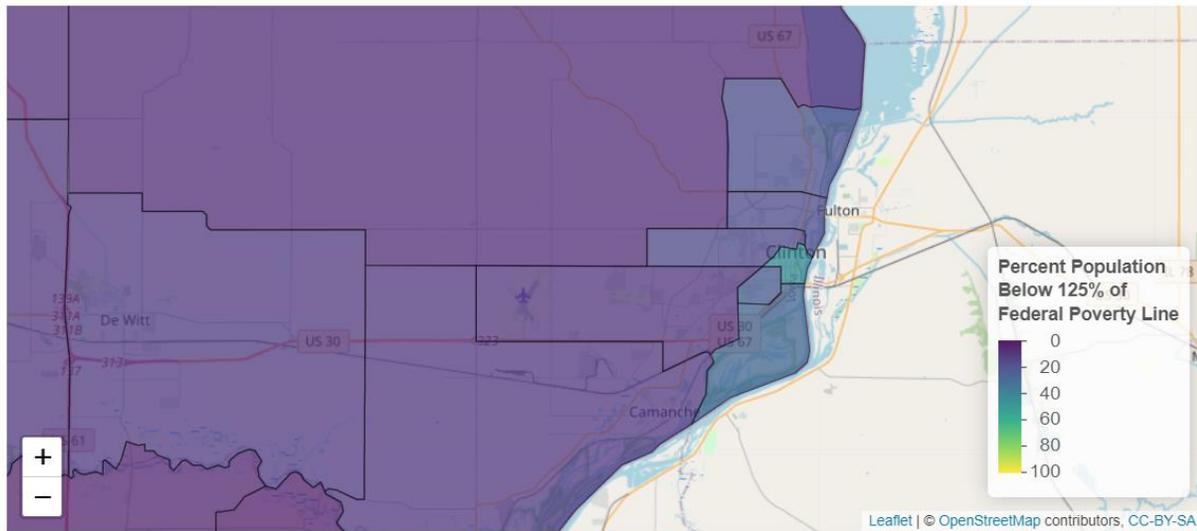
Homelessness among people who use methamphetamine (PWUM) is rising nationally, regionally, and within Iowa (see Figure 13). Homeless is more common among PWUM entering treatment in Iowa than in the region or country as a whole. A third of people in Iowa who report homelessness when entering treatment also report methamphetamine use, compared to 22% nationally, and 18% regionally. Following several years of low homelessness among the treatment seeking population in Iowa, the rate nearly tripled among PWUM from 8% to 22% between 2006 and 2007 and has increased and stabilized at around 33% since 2014.

Although homelessness has been increasing among PWUM all across the state, some areas (e.g., Clinton, Iowa City, & Sioux City) had an especially large increase over the last decade in the number of people experiencing homelessness when entering treatment. The rise in homelessness continued until 2011 where homelessness prevalence has remained persistently at about 40% of PWUM who inject methamphetamine, 35% of all PWUM, and 27% of those who use other substances.

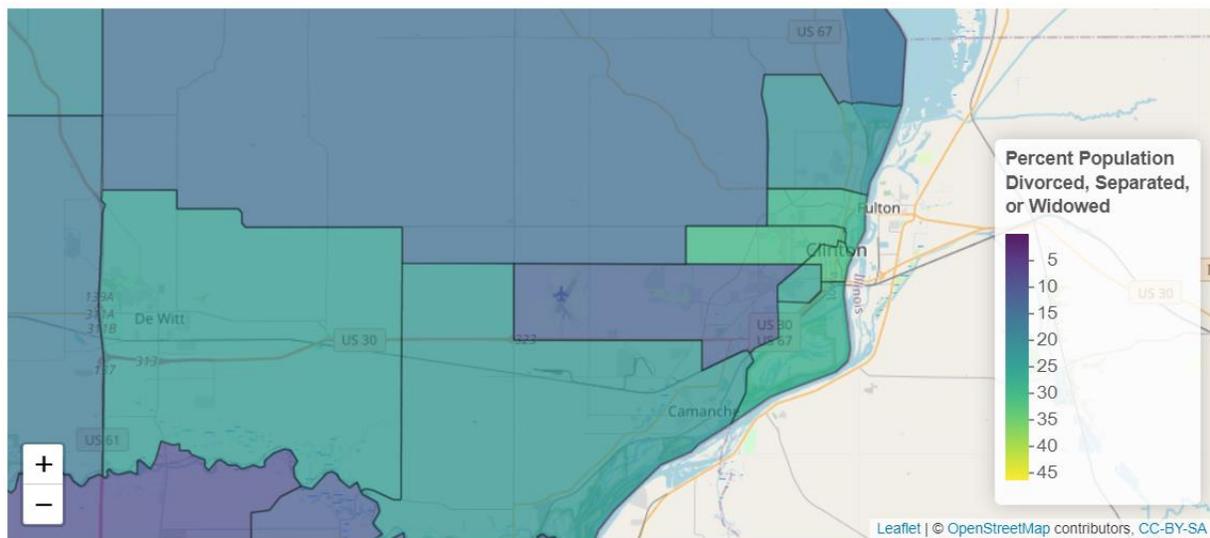
In addition to geographic variability, there has been a rise among all sociodemographic groups, although unevenly. About 40% of those aged 18-34 who reported being homeless also reported methamphetamine use, up from 25% just ten years earlier. Almost half of Native Americans who were homeless also report methamphetamine use and two in five PWUM who were homeless also reported intravenous use. Persistent protective factors against

¹⁵ Taken directly from: Methamphetamine Use in Iowa, September 2021, Dorius, et.al.

homelessness among PWUM include being married, working full-time, and having a college degree.¹⁶



Percent of population that is divorced, separated, or widowed
Persistent protective factors against homelessness among PWUM include being married, working full-time, and having a college degree.

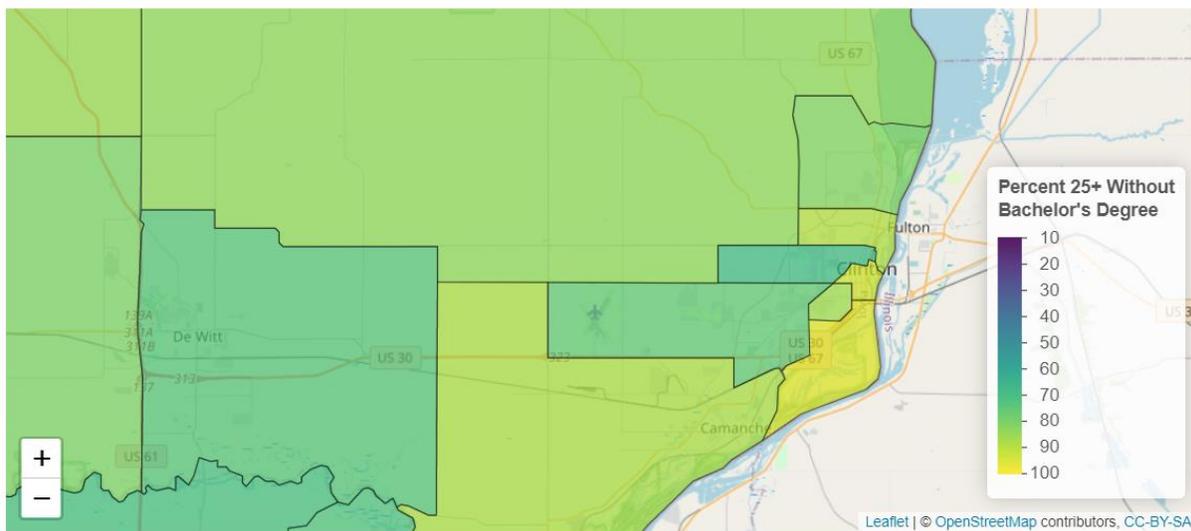


Percent of population above 25 without a bachelor’s degree
Methamphetamine prevalence rates have been high among people with limited education, with education post high school as somewhat of a protective factor (Brecht et al., 2006; Vangeest & Johnson, 2002a). It is unclear exactly how education protects against methamphetamine use, but theoretical explanations that may describe this include the extension of adolescence during college years, increased parental oversight, or positive selection into college among those with more social and economic resources. Further, education is often used as a proxy for social class, and methamphetamine use is linked to lower socioeconomic status. Or, as one PWUM put it, “Meth is poor man’s coke [cocaine].”

¹⁶ Taken directly from: Methamphetamine Use in Iowa, September 2021, Dorijs, et.al.

We find that while people in treatment with a high school degree continue to constitute the largest share of all methamphetamine cases in Iowa (~50%), this is changing. The share of people entering treatment for methamphetamine increased among those with 'some college' or with a college degree, while the share of those with a high school degree (or less) represent a declining share of all cases. We find that among people with some college who enter treatment programs in Iowa, the percentage reporting methamphetamine use increased from 12% in 2000 to 22% in 2018. Methamphetamine prevalence increased from one to three percent among college degree holders. Together, these data show that more people are entering Iowa treatment programs for methamphetamine use at all educational attainments, but in relative terms, there has been a steady shift from lower to higher education among PWUM in treatment that aligns with the demographic shift from rural to urban places (see Figure 6).

Because of the large prevalence rate increase among those with "some college" or a college degree, we suggest that public health coordinate its prevention, treatment, and outreach efforts with college campuses to better support this growing at-risk population. Coordinated effort could include the expansion of campus treatment and recovery services, such as collegiate recovery programs, and more general amphetamine prevention efforts (e.g., Adderall prescription misuse).¹⁷



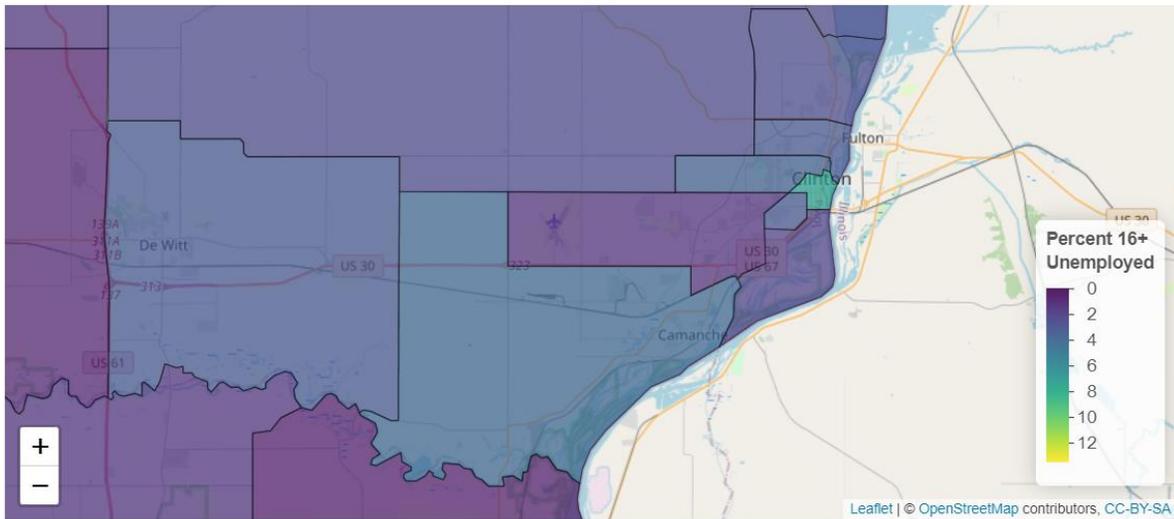
Author: Matthew Voss
Date Created: 8/3/2021

Unemployment rate

Our analysis of treatment episode data indicates that people with higher education are more likely to complete treatment than individuals with lower education, and those that were retired, disabled, employed part-time or unemployed also had lower completion rates than their counterparts.¹⁸

¹⁷ Taken directly from: Methamphetamine Use in Iowa, September 2021, Dorius, et.al.

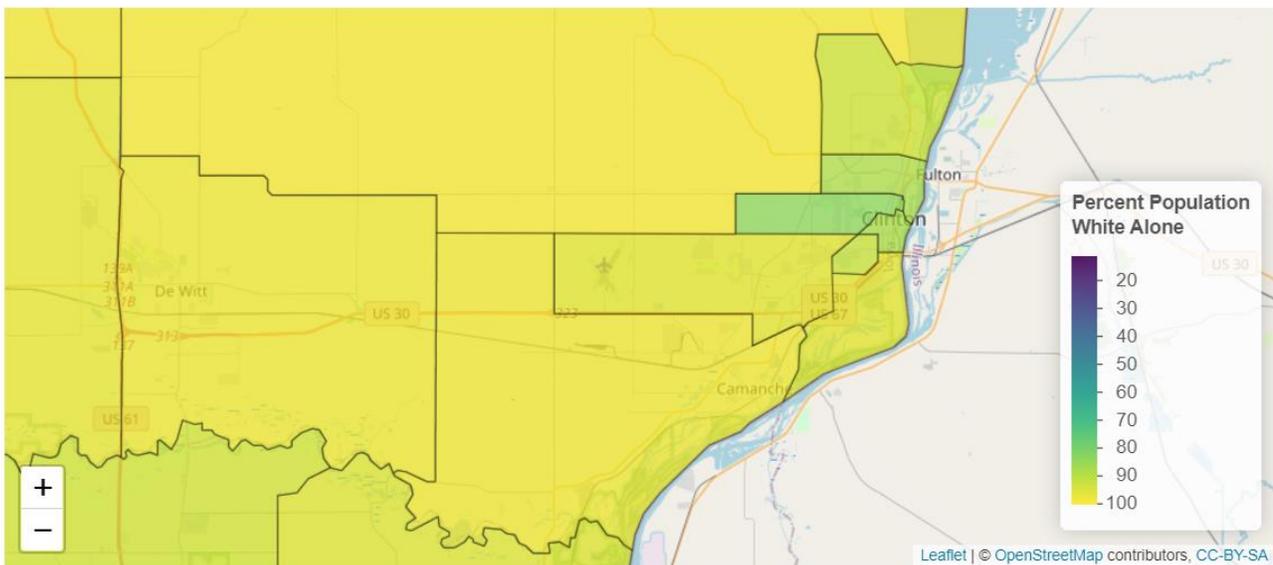
¹⁸ Taken directly from: Methamphetamine Use in Iowa, September 2021, Dorius, et.al.



Author: Matthew Voss
Date Created: 8/3/2021

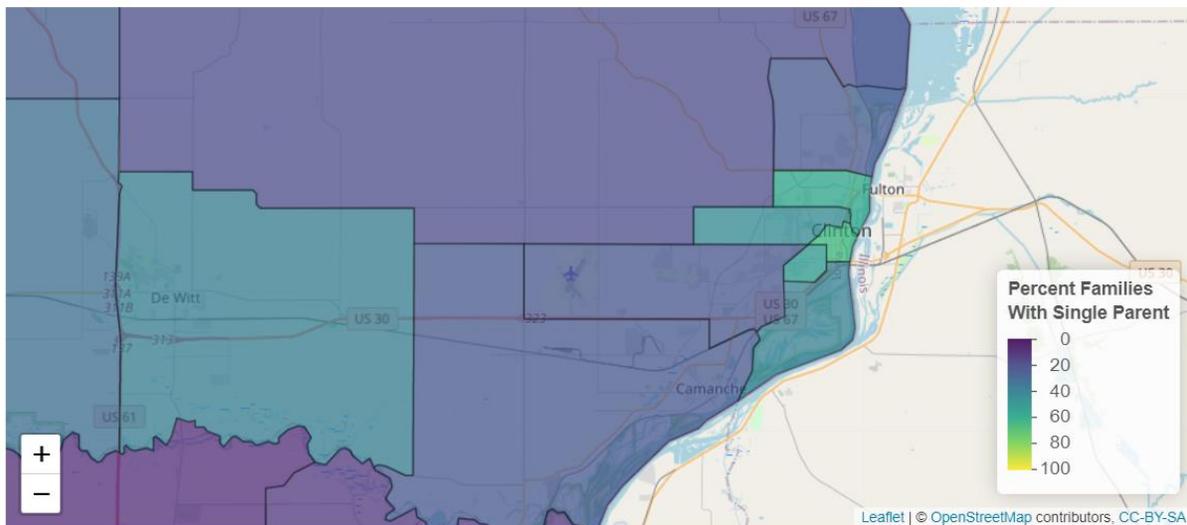
Percent of population that is white

Gaining steam may be an understatement, considering that national methamphetamine-related overdose deaths have increased among all major racial and ethnic groups (~500%), with non-Hispanic whites having the second highest rates (9.4 per 100,000) and only trailing usage rates among American Indian/Alaskan Natives (20.9 per 100,000) (Han et al., 2021). Evidence suggests the prevalence of methamphetamine use among American Indians/Alaskan Natives is almost four times higher than any other group (Coughlin, 2021). Non-Hispanic blacks had the largest overdose death rate increase over the 2011-2018 period (Han et al., 2021).¹⁹



¹⁹ Taken directly from: Methamphetamine Use in Iowa, September 2021, Dorius, et.al.

Percent of families with a single parent



PSYCHOSTIMULANT COMMUNITY READINESS SURVEY

According to the Community Toolbox from the University of Kansas, “Community readiness is the degree to which a community is ready to take action on an issue.” Figuring out where your community is, in terms of readiness, can also be a key component in deciding what interventions and approaches are likely to work best.

In February 2021, Kristin Huisenga and Ellen Gackle conducted 6 community readiness surveys in Clinton, Iowa to measure attitudes, knowledge, efforts, activities, and resources of community members and leadership related to “Psychostimulant Use/Misuse in Clinton County”. Psychostimulant Use/Misuse includes methamphetamines, cocaine, ecstasy, and prescription stimulants. Representatives from Law Enforcement, Healthcare/Brain Health, School, Faith/Religious Community, Substance Use Professional, and Workplace/Business were familiar with the issue of Psychostimulant Abuse but were not currently part of Clinton CRUSH+.

Both Kristin and Ellen recorded the representatives’ answers independently. After all the interviews were completed, ASAC Prevention Staff and the CSAC Staff scored the answers on 5 key dimensions:

- Community Knowledge of Efforts
- Leadership
- Community Climate
- Knowledge of Issue
- Resources Related to the Issue

Based on the responses, Clinton scored 3.6 overall, which indicates Vague Awareness. Leadership and community members believe that this issue may be a concern in the community. They show no immediate motivation to act. This score will help the and Clinton CRUSH+ and other planning groups determine appropriate actions that match our community’s readiness levels.

While the overall score was 3.6 each key dimension had an individual score that indicated one aspect of the community's readiness level. Below is each key dimension's readiness level and associated readiness stage.

Community Knowledge of Efforts, 3.7-Vague Awareness

- Some community members have at least heard about local efforts but know little about them. For example, they know local efforts exist and may recognize their names, but they have little other knowledge.

Leadership, 3.6-Vague Awareness

- Leadership believes that this issue may be a concern in the community. They show no immediate motivation to act. It may not be a priority.

Community Climate, 3.5 -Vague Awareness

The community believes that this issue may be a concern in the community. They show no immediate motivation to act. It may not be a priority.

Knowledge of Issue, 3.3-Vague Awareness

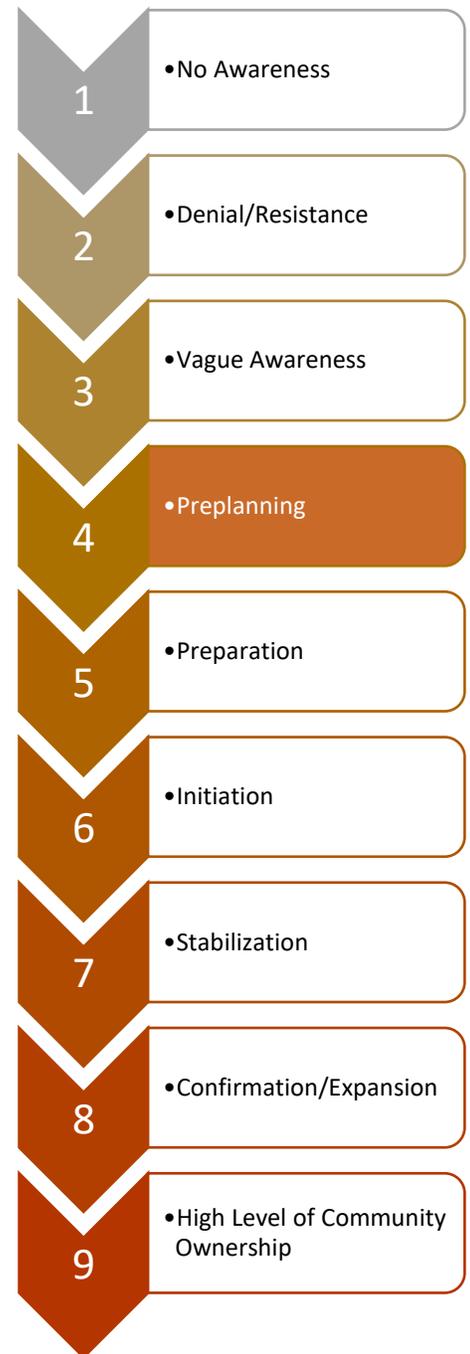
- Community members have only vague knowledge about the issue (e.g., they have some awareness that the issue can be problem and why it may occur). Among some community members, there may be misconceptions about the issue, how and where it occurs, and why it needs addressing.

Resources Related to the Issue, 3.9 - Vague Awareness

- Current efforts may be funded, but the funding is not necessarily stable or continuing. There are limited resources (such as a community room) identified that could be used for further efforts to address the issue. There is little motivation to allocate these resources to this issue.

Our overall score of 3.6 is a fair representation of our scores in all five key dimensions. In summary:

- A few community members have at least heard about local efforts but know little about them.
- Leadership and community members believe that this issue may be a concern in the community. They show no immediate motivation to act.
- Community members have only vague knowledge about the issue (e.g., they have some awareness that the issue can be problem and why it may occur).
- There are limited resources (such as a community room) identified that could be used for further efforts to address the issue.



To increase our overall community readiness level, we need to continue and expand our efforts and can take the following actions:

- One-on-one visits with community leaders and members. Pay particular attention to the details of these visits (message, communicator, etc.)
- Visit existing and established unrelated small groups to inform them of the issue.
- Get individuals in your social network excited and solicit their support – be creative! Give them ideas and information that they can post on their Facebook page or other outlets.
- Collect stories of local people who have been affected by this issue in this community and find creative ways to disseminate these.
- Conduct an environmental scan to identify the community’s strengths, weaknesses, opportunities, and threats.
- Put information in church bulletins, club newsletters, respected publications, Facebook, etc.
- Distribute media articles that highlight issue in the community.
- Communicate strategically with influencers and opinion leaders.
- Present information at local community events and unrelated community groups. Don’t rely on just facts. Use visuals and stories. Make your message –sticky.
- Post flyers, posters, and billboards.
- Begin to initiate your own events (e.g., potlucks) to present information on this issue. But they must be fun or have other benefits to potential attendees.
- Publish editorials and articles in newspapers and on other media with general information but always relate the information to the local situation.



Some key themes identified during the interviews regarding Knowledge of Efforts include:

- There have been professionals concerned about putting kids on medication if they did not really need them.
- There have been concerns about other parents finding their kids had been given [prescription stimulants] by other students.
- Meth is increasing in Clinton County and causing the most family problems and people cannot keep a job or manage life.
- In the past there were a lot of meetings at school, but do not know what happened since COVID began.
- The public has put this in the back of their mind, do not hear about it, so they do not know about it.
- The general population does not have much knowledge of the extent of the problem here.
- There is a lack of information in the community, people do not know about the efforts or who does what in this community.
- Meth is everywhere, almost easier to get meth than marijuana.
- We are not solving the problem by taking people to the hospital to sober up.
- Our only hope as providers is to find some connection or source, they may have that may lead them down a different path.
- There are efforts in the community but those struggling lean on the efforts to not get arrested. “I want help, I need help,” what resources can you give me to look good, so they do not get arrested or get a lenient sentence.

- Community members are either really concerned or getting these individuals help is important. Then there are other community members who are more concerned about how it is negatively impacting the community as far as crime rates or abandoned houses.
- Unless you ask about the problem, you don't know.
- So, it looks like we are just giving these people chance after chance, so they do not view them as successful. They do not recognize small successes. It is normal to take someone multiple times in treatment before they can maintain sobriety. Does not mean that individual is doing anything wrong, or treatment is doing anything wrong, it is just how the disease of addiction works, but do not think the community understands
- We need to work as a team to get them the services they need.
- Observations in the community, people that you see are not necessarily "high on life."



Some key themes identified during the interviews regarding Leadership include:

- Hard for leadership to deny there is a huge drug problem including methamphetamine. Not necessarily the top of their priority list because they have everything else to deal with and keep the community running.
- When it affects your department/agency specifically you take a little more stake in trying to fix it.
- [Coalition] pushes initiatives forward and we want to continue to grow and support the community. If more successful the [coalition] is the more successful [providers] are, the more successful the community is.
- Anything we can do to get control of this problem is beneficial for everybody.
- [Leadership] is concerned about it because it is taking up time and the people in the community need help.
- [Leadership] often thinks "How much money does this make me?? They must see the benefit to them to get involved.
- [Leadership] may be passively supportive, they show up at meetings and do what they can to be visible, but what does that look like when they are not at the table?
- Even if leadership passively supports, it still looks good.
- People that are community leaders are confined to their home and have not been involved.
- Some key themes identified during the interviews regarding Community Climate include:
- Hardly any teaching about meth, cocaine, or ecstasy happening due to COVID. Still having overdoses happen. People are not getting the help they need because they do not have the time.

Some key themes identified during the interviews regarding Knowledge of Issue include:

- There are not enough people looking out for the community. They are only looking out for themselves and do not see the impact on children and families.
- There are some who are involved, but most are not.
- Someone needs to create a "need" to address [psychostimulant use]
- News media has been so overwhelmed with [COVID] for over a year now, they have not reporting on [drug use].
- I do not think the community understands or has the information to know. The community does not recognize the extent of the problem, they are not going to say that recommending more action.

- People are starting to realize how big of a problem [meth use] is, it is not as hidden as it was.
- People that it affects are becoming more involved, like neighbors of abandoned houses, property owners, in the fight against it. Other people who have not been affected as much still see the problem but are not as engaged until it impacts them.
- [Community members] want change, but what are they willing to do for change?
- This should be somewhat of a priority. I do not want to live in an area that's predominantly folks with these types of issues. Not saying that all the people involved in these things are bad people, but crime go along with that type of abuse.
- I do not know that community members know how to be supportive of these efforts.

Some key themes identified during the interviews regarding Resources Related to the Issue include:

- Current efforts are funded by fee for service, insurance, grants, and some volunteers. Not sure if this funding will continue but some funding will, just not sure in what capacity.
- [Community members] would support using resources. You have supporters at table who are there to carry the team and make sure patients get what they need. Address the issue and keep moving forward.
- The community has a dwindling number of active volunteers, and it is typically the same people always volunteering.
- There are more experts in our community than what we realize.



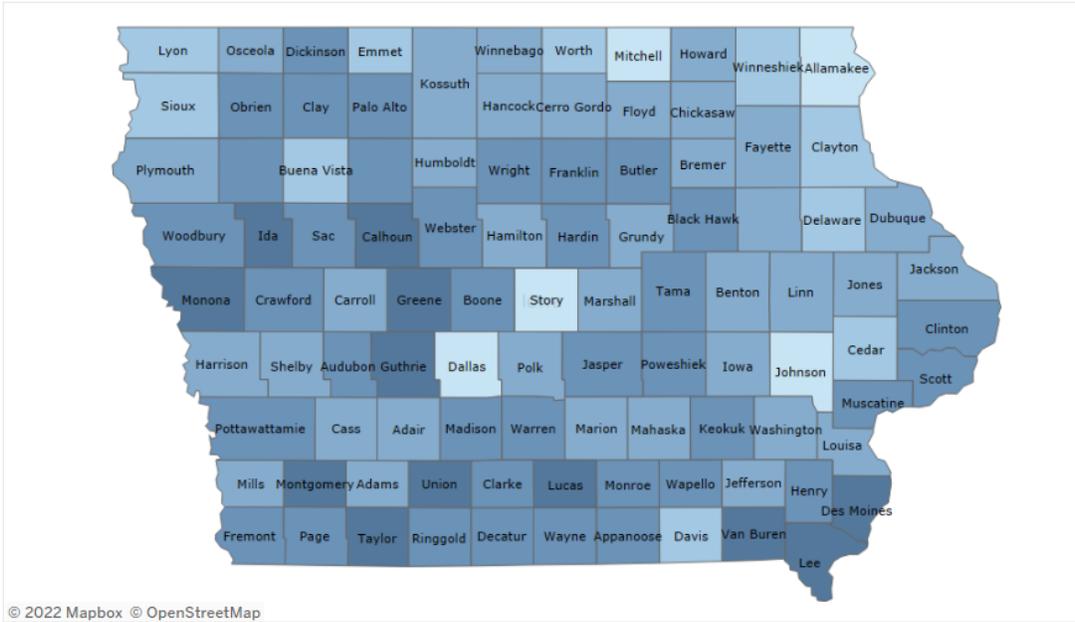
Opioids

CONSUMPTION

The following charts show the rate of Opioid Prescriptions per 10,000 population. Clinton County has 1,933 Opioid Prescriptions/10,000 population, compared to 1,587/10,000 Iowa Average.²⁰ Clinton County has an average of 15.05/opioids per 1,000 population which ranks Clinton County having the 10th highest rate in Iowa.²¹

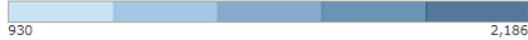
Opioid Prescriptions Rate per 10,000 Population - 2019

Hover over a County to see a County Name and values for that County.
 Selecting Counties will show the values for those counties in the lower right.
 SUPPR means data was suppressed because there was <= 5 Patients.



© 2022 Mapbox © OpenStreetMap

Number of Patients by 10K



Iowa Measures 2019 by Select County

Selected Prescription Drug: **Opioid Prescriptions**
 SUPPR means data was suppressed because there was <= 5 Patients.

State of Iowa Measures 2019

Selected Prescription Drug: **Opioid Prescriptions**

Patient Rate per 10,000 1,587

County
 Clinton 1,933

YOUTH

Risk factors for substance use include a lack of knowledge regarding the risks of use and abuse, along with the misperception that substance use is “normal”, and that most people engage in use. Based on data from the IYS Students in Clinton County misuse prescription drugs at higher rates than their peers across the state in part because they believe that it is not harmful. In addition, some students think they would be more popular or a lot more popular if they used substances. These risk factors contribute to the initiation and escalation of drug use.

²⁰ <https://tracking.idph.iowa.gov/Health/Substance-Use-and-Misuse/Prescription-Monitoring-Program/Prescription-Monitoring-Program-Data>

²¹ Iowa Department of Public Health Division of Behavioral Health Strategic Initiative to Prevent Drug Overdose (SIPDO) County Selection Indicators, 2016-2020, Prepared 2.9.22

TABLE: PERCENTAGE OF STUDENTS WHO REPORTED MISUSING PRESCRIPTIONS

Source IYS

Indicators	Area	Grade	2012	2014	2016	2018
Students Who Used Prescriptions Not Prescribed by a Doctor in the past 30 Days - 2012-B43, 2014-B44, 2016-B45, 2018-B44	Clinton County	6th	1%	2%	2%	3%
		8th	3%	2%	3%	4%
		11th	6%	5%	8%	5%
	Iowa	6th	2%	2%	3%	3%
		8th	3%	3%	3%	3%
		11th	6%	5%	5%	4%
Students Who Used Prescriptions Differently than Directed in the past 30 Days - 2014-B45, 2016-B46	Clinton County	6th	N/A	4%	4%	N/A
		8th	N/A	3%	2%	N/A
		11th	N/A	3%	4%	N/A
	Iowa	6th	N/A	5%	6%	N/A
		8th	N/A	3%	3%	N/A
		11th	N/A	4%	4%	N/A
Students Who Used an illicit opioid (heroin) or used a prescription opioid (oxycodone, hydrocodone, Oxycontin, codeine, etc.) for non-medical reasons? 2018-B49	Clinton County	6th	N/A	N/A	N/A	1%
		8th	N/A	N/A	N/A	1%
		11th	N/A	N/A	N/A	2%
	Iowa	6th	N/A	N/A	N/A	1%
		8th	N/A	N/A	N/A	1%
		11th	N/A	N/A	N/A	2%

BENZOS & OPIOIDS

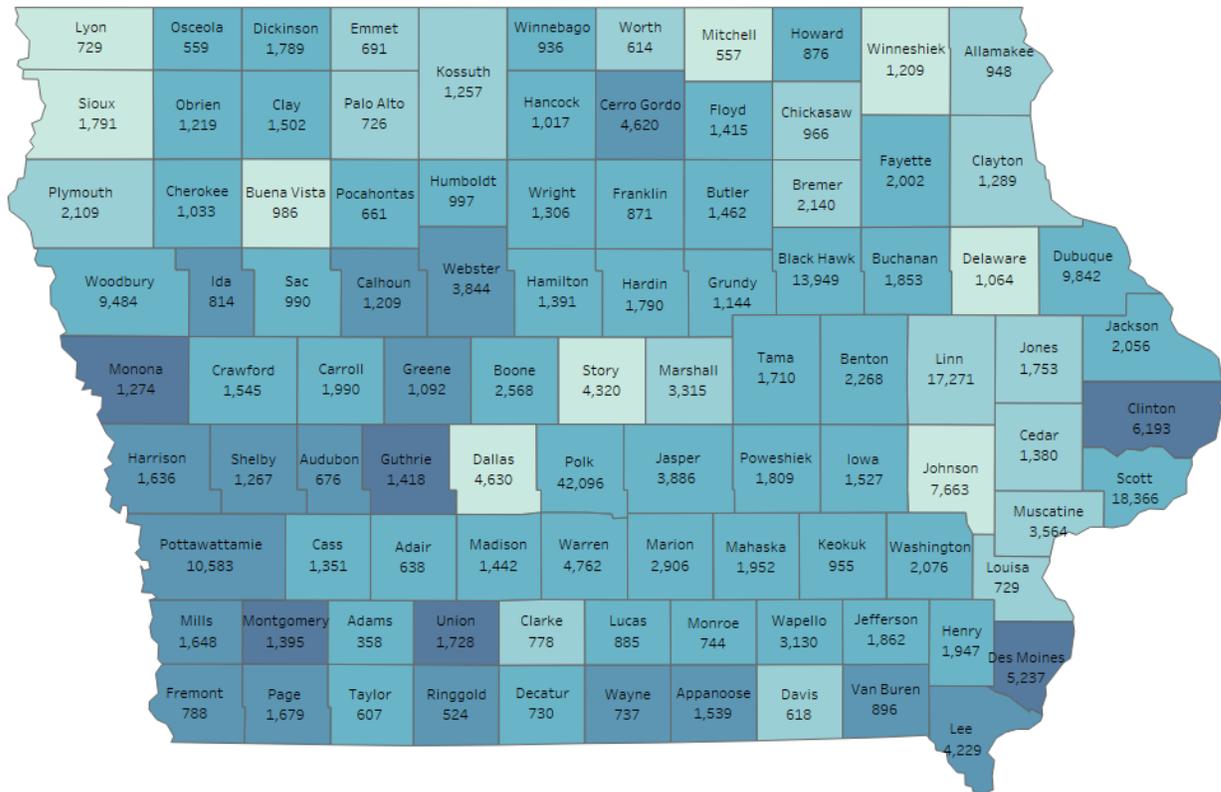
In 2019, over 70 percent of prescription and illicit drug overdose deaths in the United States involved an opioid, with over 15 percent of these opioid related overdose deaths also involving benzodiazepines.

Benzodiazepines, sometimes called "benzos," are a type of prescription sedatives commonly used to treat anxiety, insomnia or other conditions. Benzodiazepines work to calm or sedate a person by raising levels of a neurotransmitter in the brain known as gamma-aminobutyric acid (GABA). Combining opioids and benzodiazepines can be potentially unsafe, because both types of drug sedate users and suppress breathing, the primary cause of overdose fatality in addition to impairing cognitive functions. Studies have estimated that overdose death rates for patients receiving both benzodiazepine and opioids may be 10 times higher relative to patients receiving only opioids. Common benzodiazepines include diazepam (Valium®), alprazolam (Xanax®), and clonazepam (Klonopin®) and lorazepam (Ativan®).

The chart below shows the number of Iowa residents who filled a prescription for benzodiazepines and opioids per 10,000 population, with at least one day of prescription overlap submitted to the PMP (prescription Monitoring Program).²² As you can see, Clinton County had the highest number of residents who filled a prescription for benzodiazepines and opioids per 10,000 population.

²² <https://tracking.idph.iowa.gov/Health/Substance-Use-and-Misuse/Prescription-Monitoring-Program/Prescription-Monitoring-Program-Overlap-Data>

Number of patients who filled concurrent opioid and benzo prescriptions by county(s)



COMMUNITY READINESS SURVEY

According to the Community Toolbox from the University of Kansas, “Community readiness is the degree to which a community is ready to take action on an issue.” Figuring out where your community is, in terms of readiness, can also be a key component in deciding what interventions and approaches are likely to work best.

In February 2021, Kristin Huisenga and Ellen Gackle conducted 7 community readiness surveys in Clinton, Iowa to measure attitudes, knowledge, efforts, activities, and resources of community members and leadership related to “Opioid Abuse in Clinton”. Representatives from Law Enforcement, Local Government, Healthcare, Faith/Religious Community, Opioid Recovery Community, Pharmacist, and Homeless/Housing Representative were familiar with the issue of Opioid Abuse but were not currently part of Clinton CRUSH+ or involved with the Comprehensive Opioid Abuse Site-based Program (COAP) in Clinton.

Both Kristin and Ellen recorded the representatives' answers independently. After all the interviews were completed, ASAC Prevention Staff and the CSAC Staff scored the answers on 5 key dimensions:

- Community Knowledge of Efforts
- Leadership
- Community Climate
- Knowledge of Issue
- Resources Related to the Issue

Based on the responses, Clinton scored 4.2 overall, which indicates Preplanning. The score is 0.18 LOWER than our score in December 2019, but Higher than our October 2017 score of 3.85. This score will help the COAP program and Clinton CRUSH+ determine appropriate actions that match our community's readiness levels.

While the overall score was 4.20 each key dimension had an individual score that indicated one aspect of the community's readiness level. Below is each key dimension's readiness level and associated readiness stage.

Community Knowledge of Efforts, 4.0 (was 4.2)– Preplanning.

- At least some community members have heard of local efforts and are familiar with the purpose of the efforts.

Leadership, 4.7 (was 4.6) – Preplanning.

- At least some of the leadership believes that this issue is a concern in the community and that some type of effort is needed to address it. Although some may be at least passively supportive of current efforts, only a few may be participating in developing, improving, or implementing efforts.

Community Climate, 3.9 (Was 4.4) –Vague Awareness

- The community believes that this issue may be a concern in the community they show no motivation to act. We are close to 4, Preplanning which means some community members believe that this is a concern in the community and that some type of effort is needed to address it. Although some may be at least passively supportive of efforts, only a few may be participating in developing, improving, or implementing.

Knowledge of Issue, 3.7 (Was 4.08) -Vague Awareness

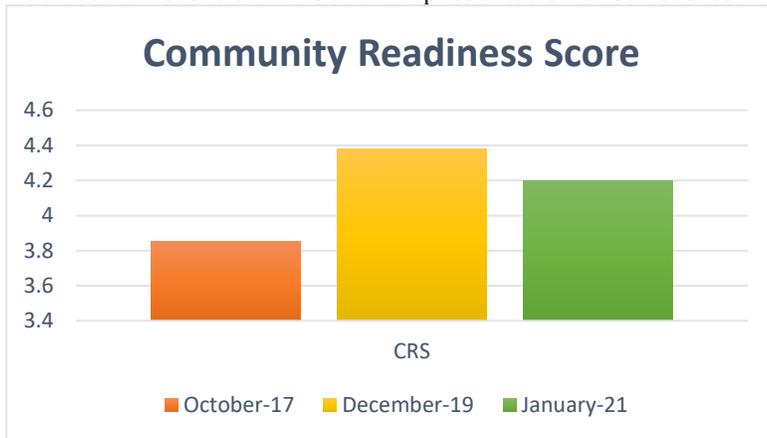
- Community members have only vague knowledge about the issue (e.g., they have some awareness that the issue can be a problem and why it may occur. Among some community members, there may be misconceptions about the issue, how and where it occurs, and why it needs addressing.



Resources Related to the Issue, 4.7 (was 4.6) – Preplanning.

- There are some resources identified that could be used for further efforts. Some community members or leaders have investigated or are looking into using these resources to address the issue.

Our overall score of 4.2 is a fair representation of our scores in all five key dimensions. Three dimensions scored



between a 4 and a 5, and we did have two areas that dropped below a 4 and they were Knowledge of the Issue and Community Climate.

Based on these scores, we can assume that our current strategies are widespread and are affecting our leadership, but more effort needs to be allocated to educating general community members. We need to serve and educate all sectors of our community.

To increase our overall community readiness level, we need to continue and expand our efforts with leadership and the public.

In reviewing our work throughout 2020 and 2021, we noticed the following changes in our strategies:

- We used social media to spread the word, some coverage buried due to COVID-19.
- Reduced opportunities to present information at local community events and unrelated community groups.
- Increasing access to resources for those who struggle with opioid use disorder.
- To increase our overall community readiness score, we plan to focus on the following strategies:
- Continue and expand the efforts that we focused on in 2018, 2019, and 2020.
- Present information at local community events and unrelated community groups.
- Post flyers, posters, and billboards.
- Begin to initiate your own events to present information on this issue. But they must be fun or have other benefits to potential attendees.
- Publish editorials and articles in newspapers and on other media with general information but always relate the information to the local situation.
- Increasing media exposure through radio and TV public service announcements and other forms of social media
- Conducting local focus groups to discuss issues and develop strategies.
- Get key leaders to speak out.

Some key themes identified during the interviews regarding Knowledge of Efforts include:

- Some Clinton residents are concerned because of problems in their neighborhood that need to be addressed like burglaries, people gathering, squatters, drug paraphernalia.
- People do think that drugs are a problem in town and heroin is one of them, but people in the grips of heroin addiction do not recognize it.

- Once they get started, they truly cannot stop.
- Police forces are incredibly passionate about people and that is a really good thing. We must love these people back to life, and we have a community that is willing to do that and help people that suffer from addictions.
- Drug and alcohol abuse is NOT socially acceptable, mental illness is way more socially acceptable.
- Public may not be aware of the efforts. Hope that the public thinks that it is a good idea to help people.
- There are different opinions on using Narcan.
- Doctors are not supposed to prescribe opioids as much, preventing doctor hopping, but people get angry when they do not get prescribed opioids.
- Not seeing as much about opioid abuse because of pandemic.
- Program at Mercy is great help. Other than that, there is not really a lot here in Clinton for help, but the clinic is a blessing, if it were not for them, I would still be struggling with addiction.
- We need a clean needle exchange.
- When you are struggling and wanting to use in the middle of the night and there is no one there to talk to-that is something that needs to be addressed.
- Police Officers use to be rougher with users, but now they understand (especially DART) it is an addiction and not a crime. Some of the crimes are feeding the addiction, but the addiction itself is a disease and not a crime.
- I do not think everyday people know about opioid abuse if you are not in law enforcement or dealing with it you probably do not know.
- Misconceptions is that it is just somebody doing drugs, but it is really an addiction. Misconception that they can just stop and that it is a choice, but it is not.
- Not everybody is aware of everything that Clinton is doing, but I know that it is greater than just a handful of people.



Some key themes identified during the interviews regarding Leadership include:

- Leadership is a direct reflection of the public's perception. The public does not care so leadership does not make it a priority.
 - Leadership is more aware than the general public but is also aware of many other issues that take precedence.
 - Leadership has a good awareness of opioid abuse but are not prioritizing it. They are allocating resources to other "bigger" needs.
 - Leadership is more reactive than proactive.
 - Leadership is engaged in the efforts to reduce opioid addiction.
- Some key themes identified during the interviews regarding Community Climate include:
- members want to attract more jobs. Their priority is not addressing opioids.
 - Not a lot of the community is engaged or know how bad the issue is.
 - If it is no money out of community members' pockets, many would support efforts.
 - There are people that actually put their head in the sand and ignore common signs.
 - Many blur the issue into another issue like homelessness.

- The community would support efforts if it did not cost them any money.
- People are aware of the issue; it is just not a top priority.

Some key themes identified during the interviews regarding Knowledge of Issue include:

- There are not enough people looking out for the community as a whole. They are only looking out for themselves and do not see the impact on children and families.
- People think they know where [opioid abuse] is happening and what it is, but they do not really know.
- Most of the community thinks “it’d never happen in my family.”
- Not a lot of people know what opioids are, but they understand that drug abuse is a problem.
- If you are not dealing with it every day, you are unaware. It is not in the media. I do not think many people in Clinton know what addiction is.
- Many do not realize that it could be their neighbor [dealing with opioid abuse].
- Social media shows people feel like they are pay for addicts to get treatment out of their taxes. They do not understand how much it will cost the community to not have these resources.
- There are people who think they know a lot, but their information is outdated. They think the person “just needs to go to treatment”.
- The community members that are the most accurate are those that have been through lived experience.
- The public is increasing their knowledge due to the national epidemic.
- Most people recognize the problem, but few know what to do.
- People think of the “typical drug addict”. They would be shocked at the number of middle-aged adults that use opioids.

Some key themes identified during the interviews regarding Resources Related to the Issue include:

- The community has a small number of active volunteers, and it is typically the same people always volunteering.
- Most of the funding comes from federal grants, which are not sustainable.
- Grassroots efforts are likely to continue.
- There are more experts in our community than what we realize. Lived experiences can make people experts on opioid abuse.

FAMILY & FRIENDS SUPPORT GROUP

Through CRUSH + a new family & friends support group was started by one of the members. This group is designed to help families & friends deal with the consequences of a loved one’s addiction. Meetings are held on the 2nd and 4th Monday of the Month, from 6:00-8:00 PM at the Clinton Community Human Service Campus (Old Horace Mann School), 250 20th Avenue North, 1st floor conference room. Meetings have ranged from 2-10 participants. JoAnn Ball and Shirley Darsidan lead this group. This group did take a break during COVID, they are meeting again and welcome new participants.



Friends & Family Support Group

This group is designed to help families & friends deal with the consequences of a loved one’s addiction. This group is facilitated by parents who have adult children who are/have been addicted to drugs and/or alcohol.
EVERYONE IS WELCOME.

2022 Meeting Schedule 3:00 PM-5:00 PM

- February 28
- March 14
- March 28
- April 11
- April 25
- May 9
- May 23
- June 13
- June 27
- July 11
- July 25
- August 8
- August 22
- September 12
- September 26
- October 10
- October 24
- November 14
- November 28
- December 12

All meetings are held at the Clinton Human Service Campus, 250 20th Avenue North, 1st Floor Conference Room, Clinton, Iowa

For Questions contact:
Joanne at 563-219-6906 or
Shirley at 563-613-2850

For more resources visit:
www.clintoncrush.org

<https://www.facebook.com/ClintonIowaCRUSH/>



CLEAN OUT YOUR MEDICINE CABINET EVENTS

On Saturday, October 24, 2020, from 10AM-2PM the Clinton Police Department partnered with the Drug Enforcement Administration and the Gateway ImpACT Coalition to hold a “Clean Out Your Medicine Cabinet Event” at Nelson Corp Field, 537 Ballpark Drive, Clinton, Iowa. Law Enforcement Agents along with coalition volunteers collected 172.2 pounds of medication from the 92 vehicles that drove through the take back event. These participants were disposing of medication from 108 households. 91% of participants were from Clinton County. We estimate that 30% of the participants were under 60 years old, and 75% of participants reported this being their first Clean Out Your Medicine Cabinet Event they participated in.



In addition to the Clean Out Your Medicine Cabinet Day, local law enforcement had been collecting medication in their permanent drop boxes located in the lobbies of their departments. Camanche Police Department collected 163 pounds, from their drop box, and DeWitt Police Department collected another 22 pounds. Clinton County disposed of a total of 357.2 pounds of medication through the Drug Enforcement Agency’s Take Back Initiative. That is 357.2 pounds of medication that was safely removed to reduce the potential for abuse, mis-medication, and poisoning. The DEA incinerates the medication at an EPA approved medical waste incinerator.

This Clean Out Your Medicine Cabinet Event we placed an emphasis on not being the dealer and encouraging homes to lock up medicine or safely disposing of medication properly to protect the water. Of the participants that went through only a few reported that they keep their medication secure in their home, and the remainder of participants report not securing medication, stating the most popular place to keep medication is in their bathroom/medicine cabinet. We also asked participants “Do you have children under age 18 live/ visit your household” and 55% reported yes meaning children would have access to their medication. All participants were encouraged to secure medication in a room where children and/or visitors to not have access to get into accidentally or intentionally.

An exit survey was done with participants to learn where they heard about the event, 36% of people heard about it from the Clinton Herald or other newspaper, 44% from Facebook, 18% from TV, and 8% from radio.

Drive Through **CLEAN OUT YOUR MEDICINE CABINET EVENT**

Saturday, October 24, 2020, 10AM-2PM
Nelson Corp Field
537 Ballpark Drive, Clinton, Iowa
For more information:
563-241-4371 or
www.gatewayimpactcoalition.com



On Saturday, October 23, 2021, from 10AM-2PM the Clinton Police Department and Clinton County Sheriff's Office partnered with the Drug Enforcement Administration, the Camanche DeWitt Coalition, and the Gateway ImpACT Coalition to hold a "Clean Out Your Medicine Cabinet Event" at Nelson Corp Field, 537 Ballpark Drive, Clinton, Iowa. Law Enforcement Agents along with coalition volunteers collected 35 pounds of medication from the 30 vehicles that drove through the take back event.

In addition to the Clean Out Your Medicine Cabinet Day, local law enforcement had been collecting medication in their permanent drop boxes located in the lobbies of their departments. Camanche & DeWitt Police Departments collected 137 pounds from their drop boxes. Clinton County disposed of a total of 172 pounds of medication through the Drug Enforcement Agency's Take Back Initiative. That is 172 pounds of medication that was safely removed to reduce the potential for abuse, mis-medication, and poisoning. The DEA incinerates the medication at an EPA approved Medical Waste Incinerator.

Drive Through
CLEAN OUT YOUR MEDICINE CABINET EVENT



Saturday, October 23, 2021, 10AM-2PM
 Clinton County Law Center/Courthouse
 241 7th Avenue North, Clinton, Iowa
 For more information:
 563-241-4371 or kristin@csaciowa.org
 www.csaciowa.org



This Clean Out Your Medicine Cabinet Event we placed an emphasis on not being the dealer and encouraging homes to lock up medicine or safely disposing of medication properly to protect the water. Of the participants that went through only a few reported that they keep their medication secure in their home, and the remainder of participants report not securing medication, stating the most popular place to keep medication is in their bathroom/medicine cabinet

DROP BOXES

There is a large amount of unused, expired, or unneeded medication in Clinton County that is misused or abused or has the potential for misuse and/or abuse. 65% of teens who have abused prescription drugs took them from friends or family. 54% of local junior's report that it is easy or very easy to get prescription drugs. A partnership between Gateway ImpACT Coalition, several Clinton County law enforcement agencies, and Iowa American Water brought convenient medication disposal boxes to four locations in Clinton County, which were installed on October 29, 2012.

The disposal boxes, donated by Iowa American Water, are installed and administered by three law enforcement agencies. Unused or expired medications can be disposed of during normal business hours in the lobbies of the:

- Camanche Police Department, 819 S Washington Blvd, Camanche
- DeWitt Police Department, 1505 6th Ave, DeWitt
- Fulton City Hall, 413 11th Avenue, Fulton, Illinois

In addition to the law enforcement drop offs, local pharmacies have also stepped up and installed drop boxes. These drop boxes are preferred locations.

- HyVee Pharmacy, 901 South 4th Street, Clinton
- Scott Thrifty White Drug, 629 6th Avenue, DeWitt
- Wagner Pharmacy & Integrated Health, 1726 North, 2nd Street, Clinton
- Walgreens North, 1905 N. 2nd Street, Clinton, Iowa
- Walmart Pharmacy, 2715 S. 25th Street, Clinton, Iowa



OVERDOSE & ADDICTION AWARENESS VIGIL

NEED

Raise awareness and reduce the stigma of addiction and overdose.

DESCRIPTION

On Tuesday, August 31, 2021, from 5:00PM-8:00PM, at the Riverview Bandshell located at 251, Ball Park Drive, (Across from Riverview Pool) in Clinton, Iowa. Over 150 Clinton community professionals and community members stood in the pouring rain to hold Clinton's 4th Overdose and Addiction Awareness Vigil, at the Riverview Bandshell. The theme of the vigil was "Ending Addiction Changes Everything." This was an evening of education and awareness, as well as an opportunity to pay tribute to those lost to overdoses and struggling or recovering from addiction. The International Overdose Awareness Day is a global event held on August 31st each year and aims to raise awareness and reduce the stigma of addiction and overdose.



As part of the effort to raise awareness of addiction, the Overdose Awareness Committee also sold bracelets. Over 300 bracelets were purchased. The bracelets state "Ending Addiction Changes Everything." The opioid epidemic is a National Challenge that needs a community solution. This part of creating awareness, is one piece of our community solution. There were also media opportunities leading up to the event that our co-chairs engaged in including, newspaper, television, radio and social media.

Professionals from different sectors shared their commitment to working together and raised awareness of addition during the opening. The following individuals shared: Mayor Scott Maddison; Sgt. Joel Wehde (CPD/DART); Assistant Chief Greg Forari (CFD/DART); Laura Norris, MercyOne Medication Assisted Treatment Clinic; and Amanda Asay, Life Connections Mental Health and Behavioral Health Services.



Larry Schultz at KROS with Dave Vickers

Music by Dan Peart and Resource Tables started the event at 5PM. Twenty-two community organizations were present and available to answer questions including: Clinton CRUSH +, Life Connections Peer Recovery, Bridgeview Community Mental Health Center, Area Substance Abuse Council, Alcoholics Anonymous, March for Our Lives, MercyOne MAT Clinic, The Church of Jesus Christ of Latter-day Saints, The Project of the Quad Cities, BASIC (Brothers and Sisters in Christ), DART Team (Drug Abuse Response Team), Al-Anon, Life Connections Mental Health and Behavioral Health Services, Gateway ImpACT Coalition, Coffee Club, Twinky the Balloon Twister, Church of the Open Door, Clinton County Sheriff's Office, Clinton County Resource Center, UCS Clinic, Family & Friends Support Group, and Iowa Total Care provided bags. In addition, Carole & Cynde collected silent auction items for the event.

Individuals could also create luminaries to show support for someone in recovery or someone they lost to addiction. This opportunity was open to the community prior the event and there were over 50 luminaries at the event. Some of the wording on the luminaries included:

- You taught me so much. I'm sorry that you lost your battle!
- A light in the world that went out way too soon from addiction and mental health struggles.
- I hope you find your way back to treatment....
- We love you. You can do this
- X lost his battle with addiction on September 22. He is missed by many friends and family.
- Stay strong!
- Keep doing the work!
- Stay sober, your kids need you!
- You were my kindred spirit & true love of a best friend; I wish I could have helped you stay clean. I miss you so much!
- So proud of you! Over 2 years sober is awesome!
- Keep on keeping on!
- Lives cut too short. Never forgotten our loves
- We are proud of how far you have come & pray you continue on this right path
- Loved and missed by her children, parents and siblings
- Though you struggle & fight, we are here for you day and night. We love you.



This event was free and open to the public. The evening consisted of education and awareness from community professionals and testimonials. This event helped to bring everyone together to support recovery. Robin & Larry Schultz were the co-chairs of the Overdose Vigil and helped to recruit individuals and families to share their story. Larry emceed the event. Over ten individuals participated in open mic testimonials. New this year was cardboard testimonials where individuals could write something on a big piece of cardboard and stand in front of the crowd. Random Tanner played music while over twelve people gave their cardboard testimonial. Individuals shared their story of addiction and recovery. Representative Mary Wolfe and Senator Chris Cournoyer closed the event with a candlelight vigil. Candles were donated by the Family & Friends Support Group.

Before the vigil closed, Clinton participated in a National Movement for Overdose Awareness Day. At 8PM on August 31, 2021, communities all around the United States Facebook Lived 2 minutes of silence. The 1st minute is to remember those who have lost. It is a moment to remember. The 2nd minute is for the recovery of those who are either still suffering in their addiction or those who have found recovery. It is a moment of hope. Clinton, Iowa stood still for 2 minutes. After the vigil was over Pastor Jim Machen lead a prayer vigil. Friends and family were able to participate in the vigil. Music was provided as part of this service.

RESULTS

Over 150 individuals attended the event. Prior to the event: two media stations The Clinton Herald newspaper, Catholic Messenger, KROS & KCLN Radio, and Clinton Area Chamber of Commerce promoted the event, 97X, Quad Cities today. In addition, local businesses along 2nd Street advertised on their marquees. Two media stations were at the event along with Clinton Herald. Overall, the event had over 324,000 media impressions.

Comprehensive Opioid Abuse Site-Based Program Grant

AWARDED

On September 28, 2018, the City of Clinton was notified that they were awarded a \$500,000 Comprehensive Opioid Abuse Site-Based Program Grant to address the opioid issue in Clinton. This grant is a partnership between various agencies including the Clinton Substance Abuse Council/Gateway ImpACT Coalition. The Clinton Substance Abuse Council would not have been able to be part of this project without MercyOne- and United-Way Support!

NEED

Clinton, Iowa has been disproportionately impacted by opioid drug abuse without having resources to meet the growing demand. The Emergency Department at MercyOne has experienced a five-fold increase of opioid related admissions from 2013 to 2016. Clinton County has the fifth highest hospitalization rate for opioids in Iowa, and the 18th highest rate of treatment admissions. These rankings do not capture the number of patients that go out of county for treatment. Residents must travel from 40 miles to 200 miles to access residential or detox treatment because Clinton does not have these options available within our community.

It is estimated that about 80% of community resources are utilized by 20% of the population. Those who are overdosing fall into the "high utilization users" category use a tremendous amount of time and resources, often with little opportunities to disrupt this process.

GOALS

Goal 1: Provide viable resources within the community through the use of a multidisciplinary team (MDT), that focuses efforts on community systems working in collaborative efforts to identify, educate, treat, and prevent further instances of opioid abuse, addiction, and fatalities within our community.

- An MDT will be created to break down those silos and create a comprehensive cross-system MDT. The goal of these meetings will be to identify those high-risk individuals and determine and/or evaluate a patient specified plan. The MDT team consists of staff from: Clinton Police Department, Clinton Fire Department, Clinton County Public Health, Bridgeview Community Mental Health Center, Area Substance Abuse Council, and Gateway ImpACT Coalition. MDT meets twice a month and have focused on problem-solving the barriers to treatment and recovery. One major issue we ran into early on was the issue of transportation. Collaborative efforts like these are allowing us to break down the barriers between separate agencies and the stigma of addiction in our community. We continue to try and bring additional agencies to the table to ensure that we are providing the best resources within our community to our participants to maximize their opportunity for success and a higher quality of life.
 - In order to tackle this community epidemic, the multidisciplinary team engaged in this project has determined to formulate and implement a Drug Abuse Response Team (DART), which will be comprised of law enforcement officers Clinton Fire Department, as well as a specially trained ASAC member, who will work in partnership with other community agencies such as MercyOne and Bridgeview in order to identify, educate, assist, and provide resources to at-risk individuals.



The DART meetings focus on current climate community and individuals that are high-risk and who we'd like to get involved in our program. DART collaborates to do outreach in the community and with the goal of making connections to potential participants. DART has started going to a weekly food pantry event where they can converse with some of our more at-risk population. They've also done outreach in community parks. Between law enforcement, Clinton Fire Department EMS, MercyOne ER staff and MAT nurse coordinator, we are trying to contact all individuals who may have overdosed, have an opioid use disorder, or may be at risk for developing one.

Goal 2: Develop and sustain a Medication Assisted Therapy (MAT) program that will allow opportunity for treatment within the community, as well as provide and partner with community agencies for recovery support services, prevention education and intensive physiological and psychological support to those in need of treatment.

- The MAT program will consist of a waived physician, a MAT nurse coordinator, resources from ASAC for cognitive behavioral therapy and case management, and Bridgeview for other community needs including a peer support recovery specialist. The process begins with medical assessments and a treatment plan is devised based on the results from these assessments.

In October of 2019, our MAT clinic opened. The best practice for opioid use disorder includes receiving both cognitive behavior therapy (CBT) and case management along with pharmaceutical intervention. There are twenty-three patients who are currently in the program. The grant goal was to serve ten patients in the first year, which was surpassed in the first month. The clinic is open one afternoon a week, where patients can see the waived physician (Dr. Jill Johnson), MAT nurse coordinator (Laura Norris), MAT care coordinator (Shelia Voss) and peer recovery specialist (Josh Meyer) also attended clinic every week. This makes those resources readily available to our participants all in one place. Group is also available to patients prior to clinic starting, so they can get all the resources they need in one afternoon. We are trying to break down all barriers to recovery, so these patients can be successful.

In August of 2021 we gave the Clinton City Council the following update:

22 active patients currently. 32 discharged patients

Of the discharged patients:

- 7 transferred to UCS clinic for methadone or early morning hours availability,
- 6 moved out of the area,
- 2 were/are incarcerated,
- 1 was weaned off the medication with assistance,
- 1 decided he no longer needed the medication,
- 11 missed visits and have not returned to date,
- 1 was unable to be compliant with the hours of MercyOne or UCS clinic due to his work hours at the time,
- 1 was not admitted due to polysubstance use and mental health issues that needed a higher level of care,
- 1 left to find a higher level of care in the Quad Cities,
- 1 fatal OD related to fentanyl



Gender:

Gender:21 females/33 males

Race:
3 African American
51 Caucasian or another race.

Location:
5 from IL,
49 from IA – Clinton, Camanche, Delmar, Maquoketa,
Bettendorf.

Age:
24 – 30 years old – 17
31 – 40 years old – 19
41 – 63 years old – 18.



DART OUTREACH/MDT MEETINGS

Clinton’s DART (Drug Abuse Response Team) held ten outreach events in 2019. The purpose of the event is to help those struggling with addiction find the help and resources they need. At this event, attendees can learn about substance abuse treatment, opioid overdose recognition and response, receive free naloxone (Narcan) to reverse an opioid overdose, learn about the Good Samaritan Law, and find community support groups for individuals and family.

Throughout 2020-2021, MDT and DART continued to meet regularly, with MDT meeting twice a month and DART meeting biweekly. Meetings were temporarily canceled due to COVID-19 developments. Meetings resumed at the end of May but were limited to once a month to try and accommodate our partners busy schedules and increased need in the community. MDT meetings have focused on problem-solving the barriers to treatment and recovery and discussing increasing rates of overdose in our community – likely due to isolation and other pandemic-associated consequences. We have met with various community partners to try and assess ways our community can better serve those with a substance use disorder and how to fill in some of the gaps that we have encountered with our participants. Some of these partners include the Medical Examiner’s Office, MTA City Transportation, YWCA Empowerment Center, ASAC Housing Initiative, HIV Special Projects of IDPH, and the North Bridge Project of Iowa City. Continuing to collaborate and grow our relationships with community partners like these allows us to provide resources to our participants that would have otherwise been unavailable. Collaborative efforts like these are allowing us to break down the barriers between separate agencies and the stigma of addiction in our community. We continue to try and bring additional agencies to the table to ensure that we are providing the best resources within our community to our participants to maximize their opportunity for success and a higher quality of life.

The DART meetings were also temporarily canceled due to COVID-19. Prior to the pandemic the DART had made substantial gains in the presence within the community. When they did meet, they focused on the current climate of the community and individuals that are high-risk and who we would like to get involved in our program.

DART collaborates to do outreach in the community and with the goal of making connections to potential participants. DART continued to go to weekly food pantry event where they could converse with some of our more at-risk population. Between law enforcement, Clinton Fire Department EMS, and the MercyOne ER staff and MAT nurse coordinator, we are trying to contact all individuals who may have overdosed, have an opioid use disorder, or may be at risk for developing one. Our DART team also implemented five different trainings so all fire department and police department personnel could be educated on what the DART is, the science behind addiction and opioid use disorder, and the importance of the work we are doing.

The DART team started attending events where community members already attended in order to reach more people. This included farmers market, food pantries, community events, and even cook-outs at the MAT clinic. Most events have between 2-15 contacts. Typically, DART happens on a monthly basis but was paused during COVID.

From January-December 2020-2021, over 10,000 DART Cards were distributed.



NARCAN

The DART Team and Opioid Leadership Team also hand out Narcan information. Throughout 2021 over 500 Narcan information cards were handed out. The team has heard that this Narcan is being used and has saved lives. One downside is that when Narcan is administered by a non-medical professional, usually the patient does not call 911 or go to the Emergency Department.

HOW TO GET FREE NARCAN	
BY MAIL 319-678-7825 www.naloxoneiowa.org /telenaloxone	IN PERSON Hy-Vee Pharmacy 901 S. 4th Street, Clinton Osco Drug 1309 N. 2nd Street, Clinton Walgreens Pharmacy 806 S. 4th Street, Clinton Walmart Pharmacy 2715 S. 25th Street, Clinton

In addition, the DART team created a brochure with lifesaving information on it. During 2021, over 300 brochures were distributed. This is the front and back of the brochure.

If an overdose is suspected:

- Stimulate the person by calling their name
- If unresponsive - try sternum rub- grind knuckles into chest
- Move person into recovery position



- Call 911
- Attend to the person's breathing (CPR)
- Administer naloxone once, maybe twice if no response after first dose
- Stay with the person

Do not put person in shower or on ice.

To get Naloxone (Narcan) by mail:
 Call 319-678-7825 or visit:
www.naloxoneiowa.org/telenaloxone

- To get Naloxone (Narcan) in person:**
- Hy-Vee Pharmacy, 901 S. 4th Street, Clinton
 - Osco Drug, 1309 N. 2nd Street, Clinton
 - Walgreens Pharmacy, 806 S. 4th Street, Clinton
 - Walmart Pharmacy, 2715 S. 25th Street, Clinton

In the case of an emergency or overdose

Call 911

24/7 Crisis Lines
Eastern Iowa Crisis Line
844-430-0375

24/7 Support
 Rhonda's House
 563-659-1171

DART Team-Clinton PD non-emergency line
 563-243-1458

Office Contacts (Typical Business Hours)
 Area Substance Abuse Council
 (Substance Use Assessment & Treatment)
 563-243-2124

Bridgeview Community Mental Health Center
 (Mental Health/Co-Occurring Behavior Health)
 563-243-5633

Life Connections Mental Health and Behavioral Health Services
 (Mental Health/ Substance Use Assessment & Treatment)
 563-559-7090

MercyOne Medication Assisted Treatment Clinic (Opioid Treatment)
 563-244-7525

Support Groups
 For a complete list of support group for friends, family, and those in recovery visit our website:
www.clintonerush.org

www.aa.org or www.na.org
 To learn more about the City of Clinton's Opioid Partnership please contact Kristin at the Gateway ImpACT Coalition. She can help with any programmatic questions.



ARE YOU OR SOMEONE YOU CARE ABOUT STRUGGLING FROM AN ADDICTION?

COAP FINAL REPORT

The number of overdoses actually remained about the same based on EMS Narcan use. In 2020 3rd Quarter we had 17 deployments of Narcan, in 2021 3rd Quarter we had 17 deployments of Narcan. We saw an increase in fentanyl in Clinton in 2020 which we believe has led to our overdoses. We typically have a dip in the number of Narcan deployments in the winter months. We also track the number of people coming to the emergency department by drug type and in 2019 we average 1.7 patients per month for Opioids, 2.83 in 2020, and 3.20 in 2021. Unfortunately, we have seen an increase in number of Visits. 73% of MAT patients were successful in the program 14/52 27% were not successful in the program.

During the COAP Project, there were a total of:

- 712 individuals referred to recovery support services
- 73 individuals received recovery support services
- 155 individuals who received substance abuse or co-occurring treatment services
- 69 individuals were assessed for substance abuse or co-occurring disorders
- 63 of those individuals assessed received substance abuse or co-occurring treatment services

Comprehensive Opioid, Stimulant, and Substance Abuse Site-Based Program Grant (COSSAP)



In October 2020, The Office of Justice Programs awarded the City of Clinton a Comprehensive Opioid, Stimulant, and Substance Abuse Site-based Program (COSSAP) for \$600,000. The project period is 36 months spanning from October 1, 2020-September 30, 2023. This grant built upon the COAP grant. The new component of Life Connection Peer Recovery was added in 2021, but the remainder of the funding was not used until December 2021, when the COAP money ran out.

NEED

This project will serve Clinton, Iowa's 25,637 residents, and surrounding area. The purpose of this project is to expand on the City of Clinton's efforts to tackle the opioid crisis along with address stimulant use and provide a broader reach of services to those in need to provide viable resources within the community through the use of an expanded multidisciplinary team (MDT), that focuses efforts towards community systems working in collaborative efforts to identify, educate, treat, and prevent further instances of substance use addiction, and fatalities within our community; a Drug Abuse Response Team (DART), will follow up with overdoses victims while connecting them with interventions or treatment options; update Opioid Community Assessment; Expand and enhance a MAT program as well as provide and partner with community agencies for recovery support services that include peer support/case management, and healthcare treatment.

GOALS

Goal 1, Objective 1: By September 30, 2023, increase community collaboration with a MDT approach that has established a sustainable structure that would include at least 5 MOUs, policies, and procedures, adapted by the MDT committee.

- Expand our community consortium of resources to include 2 new service providers

Goal 1, Objective 2: By September 20, 2023, a Drug Abuse Response Team (DART) will follow up with 100% of overdoses victims who sought medical attention and provide resources.

- Data will be collected on all overdose victims and each person will have a tracking sheet to ensure that 100% of the cases had follow up. In addition, we will track the outcome.

Goal 1, Objective 3: By September 30, 2023, complete an updated Opioid Community Assessment with updated data, and action research.

- 100 copies of the document will be printed and/or shared with partners and policy makers.

Community Readiness Surveys will be conducted every two years.

Goal 2, Objective 1: By September 30, 2023, 50 patients will have utilized the MAT Program.

Goal 3, Objective 1: By September 30, 2023, 50 patients will have been linked to recovery services and receiving recovery treatment specific to their needs.

- Track number of overdoses that present to ED and provide follow up and resources to 95% of individuals.
- Link 100% of patients in MAT program diagnosed with Hepatitis C to treatment options.



The Opioid Leadership Team oversees the COSSAP grant and makes recommendations to the COSSAP grant and in 2021 recommended the following updates to the grant based on lessons learned under COAP. The team is dedicated to helping as many patients as possible.

These changes were approved and will take effect in 2022:

- We need to have options for Substance Use Assessments, and timely options available. New in 2021 Life Connections Mental Health and Behavioral Health Services is able to offer substance use and mental health assessments. This is in addition to assessments that are available through the Area Substance Abuse Council (ASAC)/New Directions.
- We need more aggressive case management.
- Having a fee for service model may make the most sense by serving the patients' needs and current staffing allotments.
- Internal Referrals would be more streamline/seamless if a case manager would be with provider agency. Better patient care.
- Less is more, Connections are key. Reduce the number of agencies/ individuals the person must meet with.

United Way

OPIOID ABUSE PROJECT (2018-2019)

From January-September 2019, Gateway ImpACT Coalition was funded under a United Way Opioid

Abuse Project. As a result of this project there were various new funding streams acquired to address the Opioid issue, including the COSSAP grant. Without United Way funding, this grant would not have been possible.



United Way
of Clinton County, Iowa

AMPHETAMINE REDUCTION PROJECT (2019-2020)

In October 2019, Gateway ImpACT Coalition was awarded a United Way to shift focus to amphetamine abuse. In an effort to increase our community's capacity to address the mental health and substance abuse needs we will create a comprehensive amphetamine (prescription amphetamines and Methamphetamine) Action Plan that will be shared with providers which will promote strategies to prevent amphetamine abuse, restrict access of amphetamines, increase access to treatment, and outline the local problem for partners to share to leverage their own resources. We will raise awareness about the risks of unhealthy behaviors and/or change public attitudes regarding the acceptance of risky behaviors. The goals of our project include:

Develop provider education about medication/amphetamine abuse including the risks of sharing medication, available tools, and community resources available to address issue.

- Data collected and shared throughout CRUSH +, Gateway ImpACT Coalition and partners. (Also, data is listed in this report)

Increase awareness of amphetamine and methamphetamine abuse and the connection between mental health and substance abuse by providing training to over 500 individuals who will report an increase in their skills/knowledge on medication and amphetamine abuse and mental health.

- Over 600 individuals received education on Amphetamine abuse and 92% reported an increased knowledge of amphetamine abuse.

Increase awareness of proper medication storage and disposal, by implementing at least Social Marketing Campaign that has over 100,000 impressions.

- We held a Medication Take Back Day in 2020 that had over 267,000 media impressions, in addition we collected 357.2 pounds of medication from 92 vehicles and 108 households. 91% of participants were from Clinton County, and we estimate 30% of the participants were under 60 years old. 75% of participants reported this being the first time they attended the event.

Clinton County will determine a tool to collect adult AOD and MH prevalence, not related to consequence data to determine targeted strategies to address the specific behaviors that reduce risk or enhance protection, baseline data will be presented

- Data was collected and shared throughout CRUSH +, Gateway ImpACT Coalition and partners. (Also, data is listed in this report)
- This data was used to prepare for a CARA grant.

STIMULANT MISUSE REDUCTION PROJECT (2020-2021)

The goals of this project were to enhance the current prevention infrastructure by expanding the capacity to identify current and emerging prevention problems and concerns to address these concerns with culturally appropriate evidence-based programs, practices, and policies.

The goal was to re-engage the core in the Strategic Prevention Framework. Increase awareness of AOD issues and the connection between mental health, prevalence, consequences, and what to do if they suspect a problem.

- Over 500 individuals received education on Stimulant abuse and 98% reported an increased knowledge of amphetamine abuse. During COVID most presentations were done online.

There will be a 50% increase in new data for adult AOD use and/or Mental prevalence that is non-consequence related data and will be shared with community.

- Data was collected and shared throughout CRUSH +, Gateway ImpACT Coalition and partners. (Also, data is listed in this report)
- This data was used to prepare for a CARA grant.

An evaluation of the social marketing campaign will show an increase in the use of the drop boxes.

This goal is still under evaluation. We have been unable to get drug drop box weights during this time period.

STIMULANT MISUSE REDUCTION PROJECT (2021-2022) ²³

In October 2021, Gateway ImpACT Coalition was awarded United Way Funding to continue the Stimulant Misuse Project. In the aftermath of a pandemic, mental health and substance use are at an all-time high with both adults and youth. The coalition will work to increase the use of screening tools to identify and provide early intervention to substance misuse and mental health related issues. It is too early to report results, but our goals and activities include:

- Develop Physician Committed materials and work with three providers to implement the policy aimed at preventing or reducing medication/stimulant abuse as identified in the action plan. Physician (Changed to HealthCare) Committed provides the medical community a toolkit with screening information, and algorithm for substance use and mental health, and protocol for next steps and follow up. Screening for substance use is just as critical for teens as checking their height and weight.
- Provide community education and training on prevention and substance use. 500 youth, young adults, or adults will report a 10% increase knowledge in AOD including the connection between mental health, prevalence, consequences of use and what to do if they suspect a problem.
- Work with Clinton County Health needs assessment on the Substance Use Priority & continue to help facilitate the Clinton County Trauma Informed Alliance, Clinton CRUSH +, and Gateway ImpACT Coalition.
- Work at the Resource Center and help track the needs of the community and put in an easy-to-use format to use to make community change to meet the needs of the community.

In May 2021, Clinton County opened a resource center in the law center. As part of that process community volunteers are providing support to individual in need of assistance and coming out of jail on a volunteer basis. As the coalition we can provide support and connection with may resources throughout the community and examine how we can look at system level change. The current funding stream that Kristin is using will not be available after September, and the coalition would continue to participate. In the first two weeks of opening there was about 20 clients who were provided support, 50% coming directly from jail and 50% from community resources. 25% of those requested substance abuse services/connection and Kristin was able to help them to make the connections. 75% of the people Kristin worked with were involved with Methamphetamine (Stimulants).

New resource center 'a model for Iowa'

Sheriff: We can help people 'get their lives turned around'

By JOHN ROHLF Observer Correspondent Jun 29, 2021



Photo from DeWitt Observer at Resource Center ²³

²³ https://www.dewittobserver.com/news/local/new-resource-center-a-model-for-iowa/article_d9153cc0-d911-11eb-9a07-ff773f553dea.html

SYIPP

The Clinton Substance Abuse Council was awarded a Summer Youth Internship Pilot Project for the summer of 2021. This project was a partnership between the Clinton Substance Abuse Council (CSAC), iJAG, and community employer partners. Eight employers will provide opportunities for 13 youth to explore career options and gain work experience. The students' wages will be paid by a \$62,773 grant from Iowa Workforce Development.



Iowa Gov. Kim Reynolds announced 26 awardees of the Future Ready Iowa Summer Youth Internship Pilot Program Grant in April of 2021. A total of \$1,611,415 will be distributed to the awarded projects. Award amounts range from \$5,900 to \$246,720 toward each program.

The grants pay for internships for high school youths, including those who are at risk of not graduating or are from under-represented communities in the Iowa workforce. Programs must be designed to last at least six weeks and include developing soft skills and working with or for local employers in high-demand occupations.

The Summer Youth Internship Pilot Program was created under the Future Ready Iowa Act as a way to develop Iowa's skilled workforce. The initiative aims to ensure 70 percent of Iowans in the workforce ages 25-64 have education and training beyond high school by the year 2025.

The goals of our project were to:

1. Provide at least thirteen high school youth with internship opportunities that allow them to explore and prepare for high-demand careers, to gain work experience, and to develop personal attributes necessary to succeed in the workplace from May 2021-August 2021.
2. Connect and provide support for at least seven organizations/businesses with youth internship programs.
3. Create a culture where youth will want to return to Clinton County after secondary education, as measured by key indicators.

There were a broad range of opportunities available including internships that will be for 10 hours/week to 40 hours/week and in-between in a variety of settings and supervisory structures. All programs will build upon soft skills and build specific career related skills. Partners for this project included:

1. Camanche-DeWitt Coalition
2. Gateway ImpACT Coalition
3. City of Clinton-Parks & Recreation
4. City of Clinton-Public Works
5. Clinton Lumberkings
6. United Way of Clinton County
7. YWCA Empowerment Center
8. Against the Ropes (Gateway Community Center)

Overall, this project served twelve youth participants who were at risk for not graduating or facing multiple barriers. There were 2937 hours community partners worked with youth. Eleven youth completed the project with an attendance rate of 92%. The total amount of the grant used was \$39,712.13

Project Participants

Number of Youth Served by the Project	Number of Youth Identified as At Risk for Not Graduating or as Facing Multiple Barriers	Total number of Hours Spent Working with Youth	Number of Youth Completing the Project	Attendance Rate of Completing Participants
12	12	2937 Hours	11	92%

SUCCESS STORY FROM THE SYIPP PROJECT

Youth Success Story 1:

- Around the time after I turned 9 years old, I didn't really have all the stuff I wanted or needed because of the situations we were going through. My family was really struggling because of the issues we had going on, and as a kid I hated watching my mom struggle. It hurt me a lot. I always wanted the best for my mom, and I would hate the fact that I couldn't help her out. So, I promised her that when I got older, and I got my job I would help her with anything she needed. And that was always the reason I got up in the morning even when I didn't want to. All I had to do was think of my mom. I wanted to show her that I appreciate her by just being there whenever she needs me. I also wanted to prove my family wrong by showing them I am responsible, and I could do good things for myself, I wanted that self-discipline. I wanted to be able to have time for myself and do the things I wanted to do now that I am capable and able to do so. I am glad I pulled through with this experience.

Youth Success Story 2:

- During my internship, I was given multiple opportunities that allowed me to learn more about drug usage in my community. One of my tasks was to scan in old newspapers and files. While I scanned, I got to see many newspapers that had information about meth usage in my community. I was able to learn about the root cause of meth in my community and what my community was doing to help stop citizens of using meth. I also got to watch webinars and documentaries and read books about the war on drugs in the United States. These things taught me more about the corrupt system of the drug industry and how the war on drugs began. Learning the origin of a problem can help significantly when trying to find a solution. I learned about the opioid crisis and how the medical field allowed doctors to start an epidemic. I hope to become a psychiatrist & neurologist and reform the opioid and pain relief system, and the knowledge I learned has prepared me for my next step. The information I learned helped create background knowledge for when I start doing research during my undergraduate years. I will participate in research involving addiction, and the knowledge I learned helped me learn the basics of addictive drugs and mental health. As an intern, I was able to learn and become more inspired to help my community become drug-free.



Youth Success Story 3:

- While working at the [non-profit] I learned very many life skills for the future. I've learned things such as how to make copies, file, and how to stay organized. It has also taught me how to be patient with other who are not as fortunate as we are. Learning about other people's



problems really teaches you how to be grateful for what you have in life. While working I've learned how to maintain a schedule and a healthy sleep schedule. Working with [supervisors] over the summer has probably been one of the most amazing experiences of my life and my favorite part of my summer, so that you for everything. I will miss you all and the office so much.

Success Story 4:

- When an internship turns from being an opportunity to life changing moments for those who simply wanted to participate and make a few dollars, you have no choice but to consider it a giant success. [Intern 1] who was having trouble staying on a steady path to maintain high grades has taken the structure of the program and the responsibility of all the tasks assigned to him and has learned to adapt them to his social and educational skills. When he first started there was only a paycheck in mind, now he has goals on continuing with a higher education past high school. He himself directly attributes it to his internship. [Intern 2] was a quiet kid that stayed to himself counting the days until he graduated. He turned 18 while in the internship and says it helped him develop verbal skills, taught himself confidence to be affirmative and now is thinking of a trade school where he can put his on hand physical abilities to a career. This internship pilot program is a complete success when it comes to these two individuals who not only learned to represent themselves with confidence but their School, City, County & State. Lessons that will never be forgotten by either. Thank you for providing this opportunity. Look forward to another partnership next summer.

Employer Success Story 5

- During the eight-week internship [intern] was given the opportunity to work on skill building in the areas of clerical work and interpersonal relationships. She was immersed in a face-paced environment that requires multi-tasking and prioritization. She assisted in filing of charts and client information, all that must meet the standards for confidentiality. She assisted with development of a new filing system to improve the workflow in the intake office, and she helped to sort and create a tracking system for physical donations, i.e., hygiene products, blankets, towels, and diapers. She spent a portion of each shift observing and assisting case managers as they performed direct services to clients. This was an effort to introduce [intern] to diverse populations and the various barriers they face.

TRANSITIONAL WORK PLACEMENT

The Clinton Substance Abuse Council participated in the Transitional Workplace Program in 2021. We had an employee who worked at our organization, and whose salary was paid by a local employer. This program allows the employee to remain in the workforce and support local non-profit organizations. This employee was able to help staff complete various office tasks including:

- Collect and organize data
- Enter data into appropriate systems
- Assist with year-end mailings and community outreach
- General office work.



Transitional Work Placement provided 133 hours of work at our office, at a value of \$5,320 (at our In-kind rate of \$40/hour) If you had staff that would interest in the program, please contact Kristin.

TIPS Training (Responsible Alcohol Beverage Server Training)

The Gateway ImpACT Coalition and Camanche-DeWitt Coalition have contracted with Clinton Substance Abuse Council to provide TIPS training. Both coalitions encourage businesses to prepare for alcohol compliance checks by obtaining free materials or by attending one of the TIPS (Training for Intervention Procedures) classes that have been offered for free through the coalitions.



Throughout 2020-2021, 15 TIPS (Training for Intervention Procedures) classes were offered. Due to Covid-19, TIPS trainings were offered online instead of in person. 18 TIPS (Training for Intervention Procedures) classes were offered. Two participants from one establishment attended a TIPS training, with a 100% pass rate. TIPS is a dynamic, skills-based training program designed to prevent intoxication, drunk driving, and underage drinking by enhancing the fundamental “people skills” of servers, sellers, and consumers of alcohol. TIPS offer individuals the knowledge and confidence they need to recognize potential alcohol-related problems and intervene to prevent alcohol-related incidents and tragedies.

Statistically many youths in our community will experiment with alcohol. This is a common theme and problem in other communities as well. As a community, we try our best to keep our youth from being exposed to alcohol and its negative effects. One way to do that is to make sure we keep alcohol out of the hands of our youth. CSAC can provide the following types of TIPS training and services:

- **On Premise:** This program is offered to those employees who serve alcohol to customers who will drink the alcohol in the establishment from which it was sold. Employees learn strategies for serving alcohol responsibly while providing the best possible customer service.
- **Off Premise:** This program addresses the sale of alcohol at a store. Clerks learn strategies for preventing illegal alcohol sales to underage and/or intoxicated patrons.
- **Concessions:** This program teaches individuals how to recognize, detect, and prevent intoxication in their customers at events such as ball games.
- **University:** This program teaches students how to recognize, detect, and prevent intoxication in their peers by intervening effectively to prevent alcohol-related problems.
- **Follow Up Alcohol Consultation Services.**



TIPS Trainings are marketed through the coalitions, contact with law enforcement and cities. If retailers attend a TIPS training, they also received a three-ring binder with beneficial tools.

Both the Camanche-DeWitt Coalition and Gateway ImpACT Coalition offer free consultations to review all alcohol policies and procedures and to discuss ways to make current alcohol policies even more effective. Many business owners begin utilizing the provided tools after the TIPS training and policy consultation.

Crime Free Housing

PROBLEM

Clinton has a total of 11,140 units, 7,709 are owner occupied, and 3,434 are rental property. Which means that rental property accounts for 31% of all property. Unfortunately, drug and criminal behavior occurs at much higher rates on rental property than owner-occupied.

NEED

Create partnerships that share the responsibility of preventing crime in the community.

DESCRIPTION

Throughout 2017-2018, a Crime Free Housing group meet to discuss what options there are related to Crime Free Housing Program in Clinton/Clinton County. Crime Free Housing Programs bring together property owners, tenants, enforcement, and compliance to work together to reduce crime and illicit activity in rental property. CSAC provides project management and technical assistance for this project.



Effective property management can have a major impact on the health of a community and the quality of life. There are legitimate techniques that can be used to stop the spread of drugs and illegal activity on rental property.

- Phase 1: Equips the property management employee with the necessary skills to prevent or spot problems before they occur, deal with the problem behavior before it becomes too dangerous or requires police involvement. This is the basic premise of this community-based policing initiative, developing partnerships, and sharing the responsibility of preventing crime in the community. Currently, law enforcement looks to property owners to deal with these issues, and property owners want to know what the police are going to do about the problem. This program allows us to address the root causes of crime in rental property, which will result in less crime, fewer calls for police service, more time available for beat officers to be proactive in preventing crime.
- Phase 2: CPTED (Crime Prevention Through Environmental Design) Assessments. CPTED prepares the property by manipulating the physical environment so that it does not attract crime. These security requirements should appeal to the honest renter looking for a safe apartment in which to live.
- Phase 3: Works with tenants by training and educating them to be the eyes and ears for the apartment community by using neighborhood watch concepts.

GOALS

The City of Clinton was awarded a Justice Assistance Grant to implement the Crime Free Housing Project. The Gateway ImpACT Coalition is contracted to help facilitate the project. The goals of the project include:

Goal 1: Facilitate an effective and positive working relationship between governmental agencies and rental properties, focused on keeping drug and criminal activity from rental properties.

- Objective 1: By June 30, 2019, Clinton will have established a crime free housing pilot program.
- Objective 2: By June 30, 2023, identified government agencies (Police/Fire), property owners, and tenants will report a 25% increase in their effectiveness working with the partners in this project.
- Objective 3: By June 30, 2023, the Clinton's Crime Free Housing Project shows successful outcomes, and is sustained.

Goal 2: Enhance the quality of life and create a safer environment for law abiding residents.

- Objective 1: By December 30, 2018, determine baseline data at pilot properties by surveying tenant's quality of life.
- Objective 2: By June 30, 2020, increase tenant's quality of life (at pilot properties) as measured by survey by 10% compared to baseline.

Goal 3: Train rental property owners, managers, and residents in crime prevention and to give them tools to deal with drug and criminal activity fairly and legally.

- Objective 1: By June 30, 2019, Implement the 3 Phases of Crime Free Housing (Landlord Training; CPTED Assessments, Resident Training) in Clinton Iowa to a minimum of 3 properties.
- Objective 2: Certify at least 50% of the properties involved with the Pilot Project as "Crime Free Housing Properties" Upon completion of the program, including completing the 3 phases, management will be issued signage that states they are part of the Crime Free Housing initiative, "Keeping Illegal Activity Out of Rental Property."

Goal 4: To reduce crime in rental property.

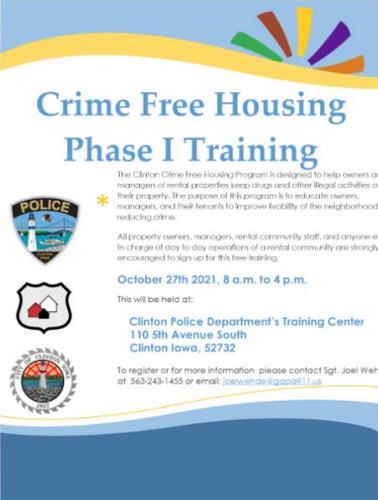
- Objective 1: By June 30, 2023, reduce calls for service at Crime Free Housing properties, as tracked in Zuercher, by 10%.

RESULTS

There have been six cohorts of Crime Free Housing Classes which include 28 properties, and about 600 units. (Approximately 10% of the units in Clinton)

Additional assistance/training has been provided for mobile home security and temporary housing.

In 2019 we did a pre survey to Cohort 1, and in 2020 a presurvey to Cohort 2, then in January 2021, we did a post survey on both properties. What we found is that the percent of tenants who reported that they felt somewhat safe to very safe in their apartment increased from 78% pretest to 84% posttest. We also saw a slight increase from 74% to 78% of tenants who report feeling very safe/somewhat safe in their neighborhood. We had an increase from 73% pretest to 86% posttest of the number of tenants with deadbolts. We saw an increase in the number of tenants' who report "Never" seeing crime in the rental property from 50% to 68% posttest, "never seeing assaults" went from 73% to 81%, and "never seeing drug use" went from 50% to 57%. The CFH team is excited about these improvements to the tenants, while being cautious that we have a small sample size, and that we may be fluctuations over time.



**Crime Free Housing
Phase I Training**

The Clinton Crime Free Housing Program is designed to help owners and managers of rental properties keep drugs and other illegal activities off their property. The purpose of this program is to educate owners, managers, and their tenants to improve livability of the neighborhood by reducing crime.

All property owners, managers, rental community staff, and anyone else in charge of day to day operations of a rental community are strongly encouraged to sign up for this free training.

October 27th 2021, 8 a.m. to 4 p.m.

This will be held at:

Clinton Police Department's Training Center
110 5th Avenue South
Clinton Iowa, 52732

To register or for more information please contact Sgt. Joel Wehde at 563-243-1455 or email joelwehde@copaia711.us

The poster features logos for the Clinton Police Department, a house with a red roof, and a circular seal with a scale of justice. It has a colorful wave graphic at the top and bottom.

ENDS Contract



On July 1, 2019, Clinton County was awarded a Justice Assistance Grant to increase the Clinton County community’s perception of harm from Electronic Nicotine Delivery Systems (ENDS) and to decrease the number of youths using ENDS. Area Substance Abuse Council is the primary lead on this project and Clinton County has contracted with the Clinton Substance Abuse Council to build community capacity to address Electronic Nicotine Delivery Systems (ENDS); provide technical assistance to the Breathe Easy Taskforce, including facilitation of meetings, participation in the Strategic Prevention Framework, and assistance on assessment and evaluation.

Let’s Live Healthy, Clinton Area Initiative, MASTER PLAN.

Feel Better	Tactics	SMART Objectives
<p>A. Tobacco/nicotine prevention and cessation and elimination of secondhand smoke</p> <p>B. Increase community perception of harm from Electronic Nicotine Devices (ENDS)</p> <p>C. Increase the number of stakeholders using ACE strategies</p> <p>C. Increase youth who report “Adults in my community care about people my age”</p>	<p>A-1 Creation of Youth ISTEP Advocacy group in Clinton County</p> <p>A-2 Nicotine-free worksite policies</p> <p>A-3 Increase the number of people using Iowa Quitline</p> <p>B-1 Marketing Campaign to Address ENDS</p> <p>B-2 Increase Youth Media Literacy</p> <p>B-3 Community Speaker Forums on ENDS</p> <p>B-4 Strengthen Coalition structures</p> <p>C-1 Provide Stakeholder Training</p> <p>C-2 Assist Stakeholder Procedure Changes</p>	<p>A-1 By June 30, 2020, one local ISTEP Youth Advocacy group will be created in Clinton County based on completed and approved application</p> <p>A-2 By June 30, 2020, at least one worksite in Clinton County will implement a nicotine-free policy.</p> <p>A-3 By June 30, 2020, Clinton County will see an increase in the number of adults that call the Quitline by 5 people based on total Quitline County numbers reported through Quitline Iowa.</p> <p>B-1 By June 30 2020, one ENDS perception of harm media campaign will be implemented with youth in Clinton County based on number of marketing venues campaign is displayed</p> <p>B-2 By June 30, 2020, Clinton County 20% of Clinton County youth will report an increase in their knowledge of media literacy-based survey results</p> <p>B-3 By June 30, 2020, 12 presentations will be completed highlighting the risks associated with ENDS to 4 different sector groups based on sign-in sheets</p> <p>B-4 By June 30, 2020, the Breathe Easy workgroup of the Feel Better group will have completed coalition strategic plan based on completed plan.</p> <p>C-1 By June 30, 2020, Provide Early Childhood Education and toolkits to 25 of the Early Childhood providers in Clinton County.</p> <p>C-2 By June 30, 2020, 3-5 Clinton County Stakeholders will be trained to be ACE Interface facilitators</p> <p>C-3 By June 30, 2020, Clinton County Ace Facilitators will complete a minimum of 6 community Ace Interface trainings where 120 people report an increase in their knowledge of ACEs</p> <p>C-4 By June 30, 2020, 2 Schools in Clinton County will implement resilience-based interventions</p>

This project fits in the Let’s Live Healthy, Clinton Area Initiative, Master Plan. In 2020, CSAC led the Breathe Easy meetings, and one strategic planning meeting.

ANNUAL REPORT 2020-21



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www.camanche-dewittcoalition.org

-  [camanchedewittcoalition](https://www.facebook.com/camanchedewittcoalition)
-  [camanchedewittcoalition](https://www.instagram.com/camanchedewittcoalition)
-  [CD_Coalition](https://twitter.com/CD_Coalition)

Camanche-DeWitt COALITION



ABOUT US

The Camanche-DeWitt Coalition (CDC) is a group of your friends and neighbors in the Camanche, DeWitt, and surrounding areas, who are concerned with the safety and wellbeing of our youth. The CDC is committed to reduce unhealthy use of substances and related issues to give our youth a secure place to grow and explore.

OUR MISSION

Through partnership and collaboration, work to reduce unhealthy use of substances and related issues by youth and, over time, adults in Camanche, DeWitt, and surrounding areas.

OUR VISION

To be communities free from unhealthy use of substances.

OUR GOALS

- Increase community collaboration to prevent and reduce substance use among youth.
- Reduce substance use among youth and, over time, reduce substance use among adults by addressing the factors in a community that increase the risk of substance use and promoting the factors that minimize the risk of substance use.

WHAT IS A COALITION?

A coalition is a formal arrangement for collaboration among groups or sectors of a community, in which each group retains its identity, but all agree to work together towards a common goal of building a safe, healthy, and drug-free community.

- A coalition is not a program, although staff and partners often conduct programs as their “piece” of the community-wide strategic plan.
- Coalitions seek to ensure that all causes of identified problems are addressed. Systems level solutions include integration, coordination, policy, and practice changes.
- Action in coalitions is diffused and taken by all members.
- Coalition staff plays a coordinating and supportive role.
- Members (Sector Representatives) act within their own spheres of influence increasing the coalition’s ability to create change and implement multiple strategies.
- New members are encouraged to join to increase the coalition's sphere of influence and gain needed capacity.
- Coalition staff assists with support for planning, problem solving and information management (evaluation, reporting, etc.).



Some Camanche-DeWitt Coalition Executive
Committee Members

FUNDING

The Camanche-DeWitt Coalition received the Drug-Free Communities (DFC) Grant in October 2015 for \$125,000 per year for five years. In October 2019, the coalition started their 5th year of the grant. In Spring 2020, the coalition reapplied for the DFC grant through a competitive grant process for another five years and was awarded an additional 5 years. The coalition has been awarded the DFC funding from October 2020 through September 2025. Each coalition can receive a maximum of 10 years of total finding.

The Drug-Free Communities (DFC) Support Program, created by the Drug-Free Communities Act of 1997, is the Nation's leading effort to mobilize communities to prevent youth substance use. Directed by the White House Office of National Drug Control Policy (ONDCP) in partnership with the Centers for Disease Control and Prevention (CDC), the DFC Program provides grants to community coalitions to strengthen the infrastructure among local partners to create and sustain a reduction in local youth substance use. Recognizing that local problems need local solutions, DFC-funded coalitions engage multiple sectors of the community and employ a variety of environmental strategies to address local substance use problems. DFC grantees involve local communities in finding solutions and help youth at risk for substance use recognize that most of our Nation's youth choose not to use substances.

The coalition has also received fiscal donations from both City of Camanche and City of DeWitt. The cities recognize the issues of youth substance abuse in their communities and support the coalition's mission. The coalition also received donations from DeWitt Police Association and community members.



OUR HISTORY

Camanche and DeWitt started working collaboratively in their respective communities as part of the Iowa SAFE Community Network; Camanche became a SAFE certified community in 1996 and DeWitt in 2005. The mission of the Iowa SAFE Community Network is to build a safe and healthy Iowa by mobilizing local coalitions to coordinate community-wide prevention efforts to reduce substance abuse. This framework encourages individuals, groups, and organizations to collaborate on projects and activities that build strengths and reduce risks in their community.



Coalition members in the Senate chambers at Day on the Hill

Throughout the 2000s, Camanche and DeWitt addressed youth substance abuse issues by providing youth programs and direct services within the community (For example: Life Skills Training). Starting in 2007, Camanche and DeWitt started working with Clinton Substance Abuse Council (CSAC), on community level environmental change. Both Camanche's coalition, the Caring Community Coalition of Camanche (4C), and DeWitt's coalition, the Community Alliance Against Substance Abuse (CAASA) were made up of a variety of community members that were interested in trends and solutions to reduce marijuana use, underage drinking, and medication abuse in their community.

In 2008 and 2010, Camanche and DeWitt held town hall meetings on underage drinking as part of SAMHSA's Alcohol Awareness Month that addresses the Surgeon General's Call to Action to Reduce Underage Drinking. After the town hall meetings, both communities reached out to the CSAC and requested more technical assistance and wanted help moving their coalitions forward. Throughout 2009 and 2010, CSAC provided technical assistance to the coalitions on a limited basis until CSAC was awarded a DFC Mentoring grant to mentor both 4C and CAASA. In October 2010, the DFC Mentoring grant was awarded to the CSAC to mentor 4C and CAASA. At this point 4C and CAASA were two separate but similar coalitions. CSAC continued to mentor 4C and CAASA for two years under the DFC mentoring grant which ended in the Spring of 2013. During this time the CADCA Primers were used to establish a strong coalition with representation from all 12 sectors and go through the Assessment, Capacity Building, Planning, Implementation, and Evaluation process for both new coalitions.



Lauren Schwandt, Steve Cundiff, and Jordan Lillard at the 2019 Annual Celebration

After the DFC Mentoring funding ended and CSAC was no longer able to formally mentor the coalitions due to budget constraints, two co-chairs stepped up and provided leadership for the coalition, Don Thiltgen (Mayor of DeWitt, Iowa) and Sgt. Det. Steven Cundiff (Clinton County Sheriff's Office/Camanche Parent).

The coalitions in Camanche and DeWitt merged in late summer of 2013 to combine resources and create one stronger, vibrant coalition, the Camanche DeWitt Coalition (CDC). The CDC applied for the Drug-Free Communities Grant in 2014 and unfortunately, they did not receive the funding.

The CDC applied for the grant again in 2015, creating a stronger application. This time, the CDC was awarded the DFC grant. The goals of this project include creating a stronger coalition to address underage drinking and youth marijuana use.

OUR COMMUNITIES-CAMANCHE, IOWA

Camanche is located on the banks of the Mississippi River in Northeast Iowa, and its northern border is US Highway 30. Many residents live here with extended family, and commute to work outside of city limits, often to Clinton, Iowa or the Quad Cities. Camanche has 9.43 square miles (24.42 km²), of which, 8.68 square miles (22.48 km²) is land, and 0.75 square miles (1.94 km²) is water.

As of 2021 census information, there were 4,411 people, 1,918 households, and 1,303 families residing in the city. The racial makeup of the city was 97.96% White, 0.83% Native American, and 1.64% from two or more races.

There are 1,918 households out of which 29.3% had children under the age of 18 living with them, 52.9% are married couples living together, 8.3% have a female householder with no husband present, 4.0% have a male householder with no wife present, and 34.9% are non-families. The average household size is 2.37 and the average family size is 2.85.

22.6% of the population is under the age of 18, 6.3% ages 18 to 24, 22.9% ages 25 to 44, 30.6% ages 45 to 64, and 17.6% who are 65 years of age or older. The median age is 49.3 years. The gender makeup of the city is 51.0% male and 49.0% female.

The average household income in Camanche is \$61,731 with a poverty rate of 7.12%. The median rental costs is \$630 per month, and the median house value is \$125,100.

Camanche School District has 990 students which includes elementary, middle, and high school students.

OUR COMMUNITIES-DEWITT, IOWA

DeWitt is located at the intersection of two major highways, Highway 30 (East-West), and Highway 61 (North-South) in Northeast Iowa and its slogan is crossroads to opportunity. DeWitt is a community where many residents live while working in larger cities that are about 20 minutes south or east. DeWitt has a total area of 5.98 square miles (15.49 km²), all of it land.

As of the 2021 census, there were 5,212 people, 2,208 households, and 1,278 families residing in the city. The racial makeup of the city was 96.6% White, 0.1% African American, 1.3% Asian, 0.5% from other races, and 1.5% from two or more races.

There are 2,208 households of which 32.4% have children under the age of 18 living with them, 50.9% are married couples living together, 10.2% have a female householder with no husband present, 3.0% have a male householder with no wife present, and 35.9% are non-families. 31.5% of all households are made up of individuals and 15.9% have someone living alone who is 65 years of age or older. The average household size is 2.47 and the average family size is 2.88.

The median age in the city is 34.8 years. 25.8% of residents are under the age of 18; 7.5% are between the ages of 18 and 24; 24.3% are ages 25 to 44; 26.1% are ages 45 to 64; and 16.3% are 65 years of age or older. The gender makeup of the city is 46.8% male and 53.2% female.

The average household income in DeWitt is \$69,816 with a poverty rate of 14.50%. The median rental costs is \$808 per month, and the median house value is \$146,000.

Central Clinton School District has 1,534 students which includes elementary, middle, and high school students.

CAMANCHE-DEWITT COALITION STRUCTURE

The Clinton Substance Abuse Council is the grantee of the DFC grant that was awarded to the Camanche-DeWitt Coalition. The role of the Clinton Substance Abuse Council is to facilitate and support the work of the coalition by providing an umbrella for the work and services they do. CSAC provides support to community coalitions by providing an umbrella of funding, staffing, administrative, and operational resources. CSAC board members, executive director and program directors are behind the scenes ensuring that coalitions get the support and resources they need to be successful. The CSAC board is less concerned about promoting itself and more about ensuring that coalition initiatives are highlighted. The CSAC board is an active volunteer board with members providing various skills, resources, and knowledge to the organization, executive director, and the coalitions that it serves.



Members of CSAC

2020-2021 Board Officers

- President: Michele Cullen, Community Health Manager, Genesis VNA.
- Vice President: Darryl Waugh, Clinton Landlords Association/ GIC Executive Committee Liaison
- Secretary: Dan Boyd, Eagle Heights Elementary School Principal
- Treasurer: Ricci Aquilani, Senior Vice President & Compliance Officer for Clinton National Bank

2020-2021 Board Members

- Jeff Chapman, Fire Marshall, Clinton Fire Department
- Steve Cundiff, Sergeant/Detective, Clinton County Sheriff's Office/CDC Executive Committee Liaison
- Jim Irwin, Clinton County Board of Supervisors
- Malissa Sprenger, Regional Vice President of Mission Integration for MercyOne's Eastern Region

In 2020-2021, the following board members stepped down. Thank you for your service:
Amy Berentes, SVP/COO at MercyOne Medical Center

CAMANCHE-DEWITT COALITION EXECUTIVE COMMITTEE

The Executive Committee is responsible for maintaining and expanding coalition support, providing coalition oversight, approving coalition action plans, logic models, and budgets, oversees coalition activities, and is the liaison between CDC and CSAC (DFC Grantee). The Executive Committee consists of two co-chairs, a secretary, a treasurer, and four at-large seats. 2021 Executive Committee

- Co-Chair: Sergeant Steve Cundiff, Clinton County Sheriff's Office
- Co-Chair: Mayor Don Thiltgen, City of DeWitt Mayor (Retired as Mayor in 2021)
- Secretary: Sally Burroughs, DeWitt Noon Lions Treasurer: Carole Dunkin, Genesis
- At-Large: Jaiden Goodman, College Student
- At-Large: Lisa Abbott, Parent & County Attorney's Office
- At-Large: Sam Genson, Iowa State University Outreach & Extension
- At-Large: Brooke Paasch, Youth



Executive Committee members

In 2020 and 2021, the following executive committee members stepped down. Thank you for all of your service:

- Eric Dau, Clinton County Communication and 911
- Duane Hansen, DeWitt Noon Lions
- Erin Schlotfeldt, Camanche School District

CSAC PAID STAFF

The paid staff with the Clinton Substance Abuse Council oversee the of the day-to-day operations of the coalitions, including coordination of coalition services and DFC project activities such as budget, community relations, data collections, implementation, and evaluation.



Drug-Free Communities Business Official/Authorizing Representative: Kristin Huisenga
Kristin has been with the Clinton Substance Abuse Council, since 2005, and has a BBA in Finance, BBA in Marketing, and BA Sociology from the University of Iowa. Kristin is the Executive Director (ED) for the CSAC, and the Program Director for the Camanche-DeWitt Coalition Drug Free Communities Support Program (DFCSP).



Drug-Free Communities Program Director: Lauren Schwandt

Lauren has been with the coalition since 2015. She holds two bachelor's degrees: one in Biology and one in Social and Criminal Justice from Ashford University. She also holds a master's degree in Psychology with a specialization in Criminology and Justice Studies. She loves working with the community and youth to make a difference and building positive relationships.

CAMANCHE-DEWITT COALITION SUBCOMMITTEES

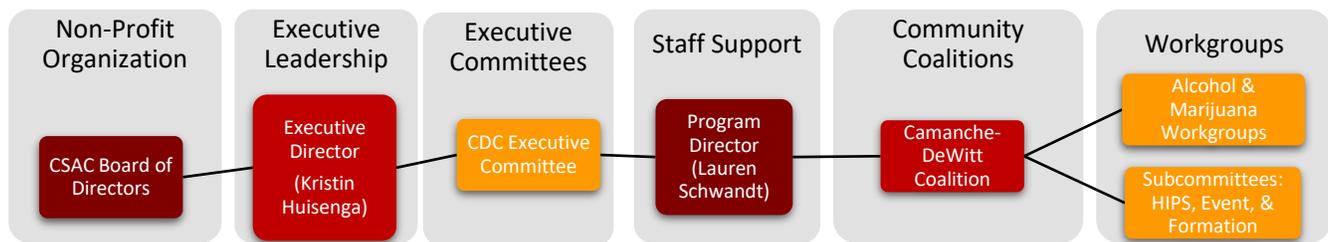
The CDC uses subcommittees which are organized for a specific project or event. There are three subcommittees within the Camanche-DeWitt Coalition. These subcommittees are:

- Coalition Formation Subcommittee
 - The purpose of the Coalition Formation Committee is to oversee the use of the Strategic Prevention Framework process and develop necessary documentation on behalf of and in consultation/collaboration with the entire Camanche-DeWitt Coalition. They also work on sustainability Example: Creating a sustainability plan.
- Event Development/Implementation Subcommittee
 - The purpose of the Event Development/Implementation Committee is to oversee the planning and implementation of the strategies determined through the Strategic Prevention Framework. While implementation of activities is the responsibility of all coalition members, the Event Development/Implementation Committee will create the steps required to complete each assignment. Example: Planning national speaker events.
- Hidden in Plain Sight (HIPS) Committee
 - The purpose of the HIPS committee is to oversee the HIPS trailer/program. The committee makes decisions on what to spend money on for the trailer including items for trailer and updates needed and policies in regard to the trailer, this committee is a CSAC committee that has members of the Camanche-DeWitt Coalition and Gateway ImpACT Coalition represented.

CAMANCHE-DEWITT COALITION WORKGROUPS

The CDC uses workgroups as an opportunity for coalition members to break down the work of the coalition into specific interest or focus areas. The CDC has two different workgroups:

- Alcohol Workgroup
 - The alcohol workgroup works on the goals and objectives involving underage drinking.
- Marijuana Workgroup
 - The marijuana workgroup works on the goals and objectives involving youth marijuana use.



SECTOR REPRESENTATIVES

The most important part of the coalition are the community volunteers. Everything that happens in coalition work occurs because people and organizations lend their time, energy, skills, resources, and expertise to these collective activities. The coalition represents a nexus of different organizations and volunteers that are organized around substance abuse issues. The Camanche-DeWitt Coalition responds to community conditions by developing and implementing multi-faceted plans to lead to measurable, population level change regarding substance abuse issues.

The CDC is composed of specific sectors of the community. Each sector brings a wealth of knowledge to the coalition regarding substance use issues. Members (Sector Representatives) act within their own spheres of influence increasing the coalition's ability to create change and implement multiple strategies. By having different sectors of the community come together and collaborate, we can make positive changes in our communities to reduce substance use issues.

The different sectors are Youth, Parents, Businesses, Media, School Representatives, Youth Serving Organizations, Law Enforcement, Religious/Fraternal Organizer, Civic or Volunteer, Healthcare Professionals, State or Local Government, Substance Abuse Organizations, Concerned Citizens, and Young Adult/College Student

MEMBERS

Every person or organization interested in promoting Camanche, DeWitt, and surrounding areas as caring, drug and alcohol abuse free communities is eligible to be a member if:

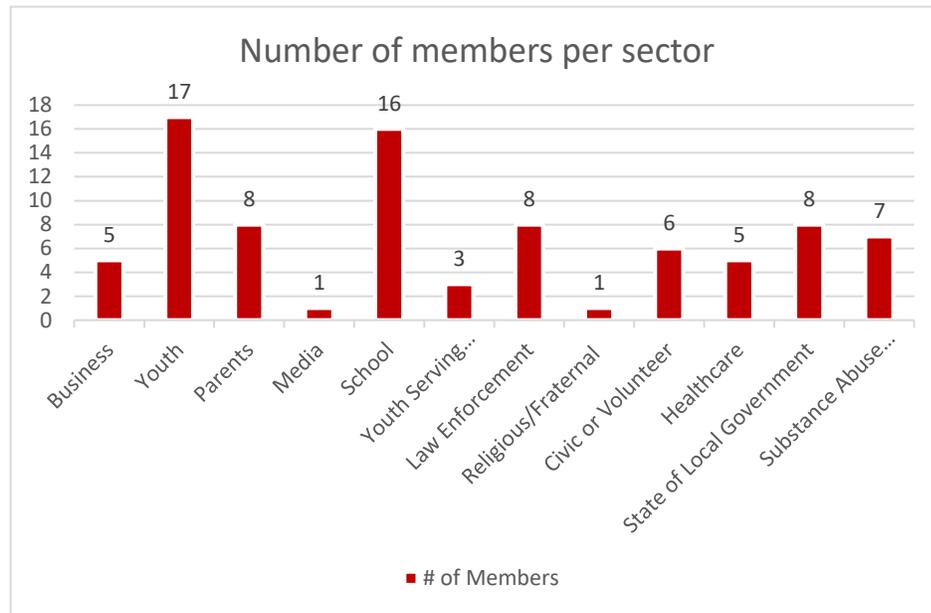
They agree to support the Camanche-DeWitt Coalition's mission which is "Through partnership and collaboration, work to reduce unhealthy use and abuse of substances and related issues by youth and, over time, adults in Camanche and DeWitt and surrounding areas."

Members contribute to the coalition or the work in the coalition in at least one way. Ways include:

- Coalition Leadership: Sit on the Camanche-DeWitt Coalition Executive Committee and/or Clinton Substance Abuse Council Board of Directors
- Donate financial resources toward the Camanche-DeWitt Coalition/projects. Please note all financial donations are tax deductible
- Donate resources toward the Camanche-DeWitt Coalition projects (resources are defined broadly to include but not limited to staffing for coalition projects, organization support, publicity, facility usage, project materials, volunteer time, etc.)
- Serve as a Champion for the Camanche-DeWitt Coalition (Actively engage as an advocate for the Camanche-DeWitt Coalition and its mission. This may include representing the coalition in the local media, at community events, or other public functions)
- Serve as a Friend of the Coalition (support the Camanche-DeWitt Coalition by regularly receiving communication and sharing information)

MEMBERS RIGHTS INCLUDE:

- Attending general coalition meetings, trainings, and events
- Being identified as a member of the Camanche-DeWitt Coalition
- Voting on decisions made by coalition
- Receive communications (newsletters, meeting, and event notices, etc.)
- Opportunities to serve on committees and/or workgroup on a voluntary basis
- Sharing ideas and networking opportunities



STRATEGIC PREVENTION FRAMEWORK (SPF)

The Camanche-DeWitt Coalition uses the Strategic Prevention Framework (see image below) during the strategic planning process. The SPF uses a community-based risk and protective factors approach to prevention and a series of guiding principles that can be utilized at the federal, state, tribal, and community levels.

While being mindful of sustainability and cultural competency, the SPF requires communities to systematically:

- Assess the needs based on community data
- Build the coalition's capacity
- Develop a strategic plan
- Implement effective community prevention policies, practices, and procedures
- Evaluate the effectiveness of the strategies with sustainability and cultural competence



STRATEGIES FOR COMMUNITY CHANGE

According to the Community Anti-Drug Coalitions of America (CADCA), there are two types of strategies: individual and environmental. Environmental strategies can produce widespread and lasting

behavior change by making appropriate (or healthy) behaviors more achievable for the individuals in the target population. Furthermore, these strategies can result in behavior change that reduces problems for the entire community, including those outside the target population. In contrast, individual strategies do little to independently alter the overall environment in which people live and work.

Individual Strategies: target the knowledge, attitudes, and skills of individuals. Environmental Strategies: target the broader physical, social, cultural, and institutional forces that contribute to problem behaviors. The Camanche-DeWitt Coalition primarily focuses on environmental level change.

The coalition chooses strategies that will lead to community level change. Community level change strategies:

- Limit access to substances,
- Change the culture and context within which decisions about substance use are made, and/or
- Shift the consequences associated with youth substance use

Evidence exists that well-conceived and implemented policies at the local, state, and national levels can reduce community level substance abuse problems.

7 STRATEGIES FOR COMMUNITY LEVEL CHANGE

The CDC uses the Seven Strategies for Community Change. The Seven Strategies for Community Change is a conceptual understanding of strategies a coalition may employ, include efforts that affect individuals as well as an entire community. These seven strategies are as follows:

Provide Information

- Educational presentations, workshops or seminars, and data or media presentations (e.g., PSAs, brochures, town halls, forums, web communication).

Enhance Skills

- Workshops, seminars, or activities designed to increase the skills of participants, members and staff (e.g., training and technical assistance, TIPS classes, strategic planning retreats, model programs in schools).

Provide Support

- Creating opportunities to support people to participate in activities that reduce risk or enhance protection (e.g., alternative activities, mentoring, referrals for service, support groups, youth clubs).

Enhance Access/Reduce Barriers

- Improving systems/processes to increase the ease, ability, and opportunity to utilize those systems and services (e.g., assuring transportation, housing, education, safety, and cultural sensitivity) in prevention initiatives.

Change Consequences

- Increasing or decreasing the probability of a behavior by altering the consequences for performing that behavior (e.g., increasing taxes, citations, and fines; revocation/loss of driver's license).

Change Physical Design

- Changing the physical design of the environment to reduce risk or enhance protection (e.g., re-routing foot/car traffic, adjusting park hours, alcohol/tobacco outlet density).

Modify/Change Policies

- Formal change in written procedures, by-laws, proclamations, rules, or laws (e.g., workplace initiatives, law enforcement procedures and practices, public policy actions, systems change).

Increased Community Awareness & Voting Membership

PROBLEM

Community members are not aware of the coalition and what all the Camanche-DeWitt Coalition does.

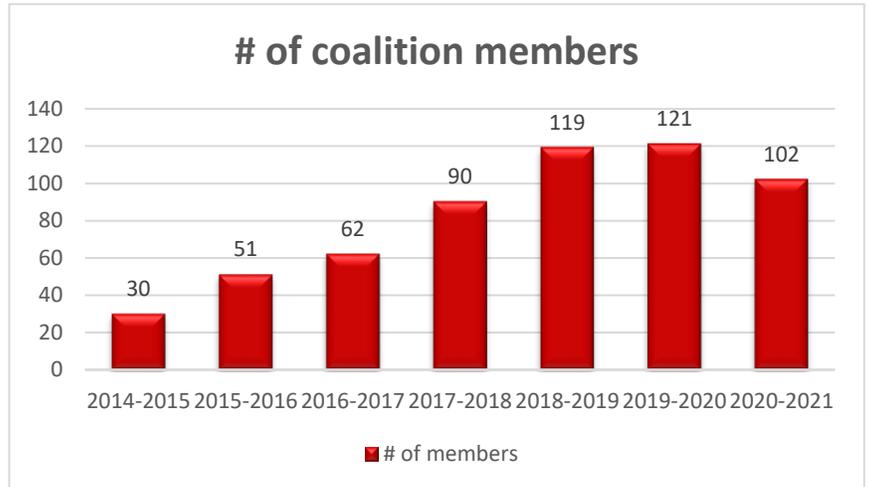
NEED

Increase community awareness of the CDC to gain both membership and partnerships.

DESCRIPTION

The coalition continues to focus raising awareness and recruiting new members. The coalition reviewed and discussed community events that would be taking place during the year and decided which events they would like to participate in. CDC participated in the following events:

- 4th of July Parade-DeWitt
- Autumnfest- DeWitt
- Camanche City Council presentation
- Camanche Days Parade-Camanche
- Parent-Teacher Conferences- Camanche, DeWitt, & County
- Annual Celebration
- One on One Meetings
- Police Night Out-DeWitt
- Speak Out Against Suicide Walk- Clinton
- Taco Tuesday-DeWitt
- Tunes in Town-DeWitt
- Central DeWitt School Club Fair



The coalition also spread their message through media including local newspapers, radio, and television, coalition webpage and social media.

RESULTS

The coalition handed out over 1,800 CDC promotional items like pens, pencils, cups, hand sanitizer, stress balls, and pop sockets during the community events. This was a way to get our name out to the public. 35 community members attended the Annual Celebration. The 2019 Annual Report was published and distributed after the Annual Celebration in which over 100 reports were printed & disseminated, and many electronic versions were accessed. There were 45 coalition meetings during 20-21 which included monthly meetings, executive committee meeting, sub-committee meetings, and youth meetings.

The coalition had over 600,000 media impressions which consisted of information in newspapers, billboards, webpage, and social media. Over 3,000 volunteer hours were provided to Camanche-DeWitt Coalition with a value to the coalition of over \$125,000. The coalition had an annual celebration where community members, legislators, press, coalition members and other community members attend to learn about the coalition and their accomplishments. Staff & coalition members had four one-on-one meetings with community members.

Increased Youth Collaboration

PROBLEM

Youth do not see their importance in the CDC and often do not feel like their opinions are heard or matter.

NEED

The CDC assessed and determined a key piece to understanding youth substance use is having youth input to plan and implement strategies. The youth have a better understanding of substance abuse issues in the communities since they are around it every day with other youth. The coalition wanted to get more youth involved in the coalition in hopes to make a bigger impact.

DESCRIPTION

The coalition continues to work with key stakeholders in the community such as school counselors, teachers, and principals to help recruit youth. These stakeholders were able to work with staff on setting up meeting times to meet with the youth, educate them on the coalition, and gain their involvement in the coalition.



Some coalition youth assisting at the Central DeWitt Club Fair explaining the coalition

The coalition also offered opportunities to the youth to get involved in community events and other coalition action plans.

RESULTS

The coalition had 6 new youth get involved with the coalition and help with their mission. It was harder to reach and work with the youth during these two years due to COVID-19 and not being able to get in the schools for safety reasons. During the 2021-2022 school year, coalition staff was allowed to meet face to face with students during school hours where there was more attendance and coalition involvement.

Increased Coalition Members' Knowledge of Alcohol & Drugs

PROBLEM

Coalition members may not know current trends, statistics, and facts about alcohol and other drugs.

NEED

For the coalition to be address current youth substance use issues, coalition members must be educated on those issues so that they can better plan and implement effective strategies. Coalition members also need to be educated on coalition work and how to be effective.

DESCRIPTION

The coalition offered many trainings throughout the year to members. These trainings included CADCA (Community Anti-Drug Coalitions of America) Leadership Forum, Iowa Governor's Conference, Iowa Drug Endangered Children Conference, Parent Education Series, Day on the Hill event, and AC4C (Alliance of Coalitions for Change) quarterly trainings.

RESULTS

Seven coalition members attended the CADCA Leadership Forums where they learned about current alcohol and drug trends as well as the strategic prevention framework. The youth that went to this CADCA training presented what they learned at a coalition meeting. Two staff attended the Iowa Drug Endangered Children Conference. One staff member attended the AC4C retreat, 65 youth learned about the SPF process, legislative processes, and drugs between CADCA, Day on the Hill, and presentations given. 97% of participants said they increased their knowledge of the SPF process, legislative process, and education on drugs.



Youth presenting information they worked on during a virtual CADCA training session

Drug Scans

PROBLEM

Drugs & alcohol are heavily marketed in our communities.

NEED

65% of Camanche & DeWitt 11th graders reported that it's easy or very easy to get alcohol in their community and 56% of those same 11th graders reported that it's easy or very easy to get marijuana in their community.

OBJECTIVE

Reduce youth retail access to alcohol.

DESCRIPTION

Coalition Program Director and the CDC summer intern conducted drug paraphernalia scans. Drug paraphernalia scans are when a person goes to a location such as gas station, grocery store, dollar store, liquor store, etc. to see what all is advertised on the inside and outside, if minors are permitted in the store, if there are specific areas where minors are not permitted, what items are being sold such as vapes, alcohol, any drug paraphernalia etc. These scans were conducted to evaluate how our communities are doing when it comes to promoting alcohol and drugs within the community.

RESULTS

The program director and summer intern scanned 15 locations throughout Camanche and DeWitt and these were some of their findings:

- 33% of establishments had some form of alcohol and tobacco advertising on the outside of the building
- One establishment had advertisement that they sell CBD in their store. After further investigating, this establishment also had delta-8 and hemp products for purchase
- All establishments that sold alcohol had no age-restricted area and they all had self-serve areas
- All the establishments that sold tobacco/nicotine had the products behind the counter and no self-serve
- 22% of establishments had advertisement for alcohol and tobacco inside the store with a total of 3 advertisements each
- 55% of establishments sell some kind of vaping device and 44% sell vape juice
- One establishment sold alcohol drinking games and concealment containers
- 89% of establishments had some sort of signage that stated they card/ID and/or had a coalition legal age calendar



A picture taken of some of the alcohol that is for purchase at a local gas station

Annual Celebration 2019

PROBLEM

Everyone is not aware of the work of the Camanche-DeWitt Coalition.

NEED

There are still many community members in Camanche and DeWitt that have not heard of the Camanche-DeWitt Coalition and the work that they do.

OBJECTIVE

Increase community awareness.

DESCRIPTION

On February 26 & 28, 2020, the Clinton Substance Abuse Council and CDC held annual celebrations. Each year this event reflects on the previous year's activities, events, and successes, and recognizes those doing the work of the coalition.



2019 Annual Celebration

The annual celebration is an opportunity for the coalitions to acknowledge the leaders of the coalition. The following were acknowledged for their leadership and service:

- Clinton Substance Abuse Council Board: Michele Cullen, Darryl Waugh, Dan Boyd, Amy Berentes, Jeff Chapman, Ricci Aquilani, Steve Cundiff, Jim Irwin, Randy Meier, Gabe Gluba and Mike Wolf
- Camanche-DeWitt Coalition Executive Committee: Steve Cundiff, Mayor Don Thiltgen, Eric Dau, Duane Hansen, Carole Dunkin, Lisa Abbott, and Erin Schlotfeldt.
- Above and Beyond Recognition: Darryl & Judy Waugh; MercyOne Clinton Medical Center; Clinton Hy-Vee; Winkel, Parker & Foster; Clinton Middle School; Jennifer Austin; Clinton Police Department; Clinton Fire Department; Steve Cundiff; Brenda McKone & St. Joseph's 8th grade class; Mayor Don & Peg Thiltgen; Rachel Green; Jaiden Goodman

RESULTS

35 community members attended the Annual Celebrations, and over 100 annual reports were distributed. All the participants reported an increase in their knowledge about the CDC and the Clinton Substance Abuse Council. Attendees had positive feedback with comments like "Reiteration that this is a great program with great leaders" and "Great work being done in the community!" The Annual Report was also sent out electronically to countless community members.

“If You Feel Different, You Drive Different”

PROBLEM

Too many youth in Camanche & DeWitt believe there is no risk or slight risk in using marijuana.

NEED

46% of Camanche & DeWitt 11th graders reported that there is no risk or a slight risk in harming themselves if they smoke marijuana once or twice a week.

OBJECTIVE

Increase youth’s (ages 12-17) perception of risk/harm related to marijuana use by 6% by September 29, 2021.

DESCRIPTION

The Camanche-DeWitt Coalition partnered with Gateway ImpACT coalition on a mobile campaign that targeted the risk of driving under the influence of marijuana. The campaign was “If You Feel Different, You Drive Different”. The mobile ad was run for eight weeks and geofenced around certain areas where there was high community traffic as well as places of interest like the Fulton marijuana dispensary.

RESULTS

The “If You Feel Different, You Drive Different” mobile ad did very well and had 153,304 impressions. There were 631 click throughs to the CSAC website from the specific ad. The two biggest days for impressions were on Monday and Friday. The area with the most impressions was the Fulton dispensary. When we did the calculations for what we spent on the mobile campaign, it broke down to us spending about a penny per impression.

**IF YOU FEEL DIFFERENT
YOU DRIVE DIFFERENT**



Alcohol Compliance Checks

PROBLEM

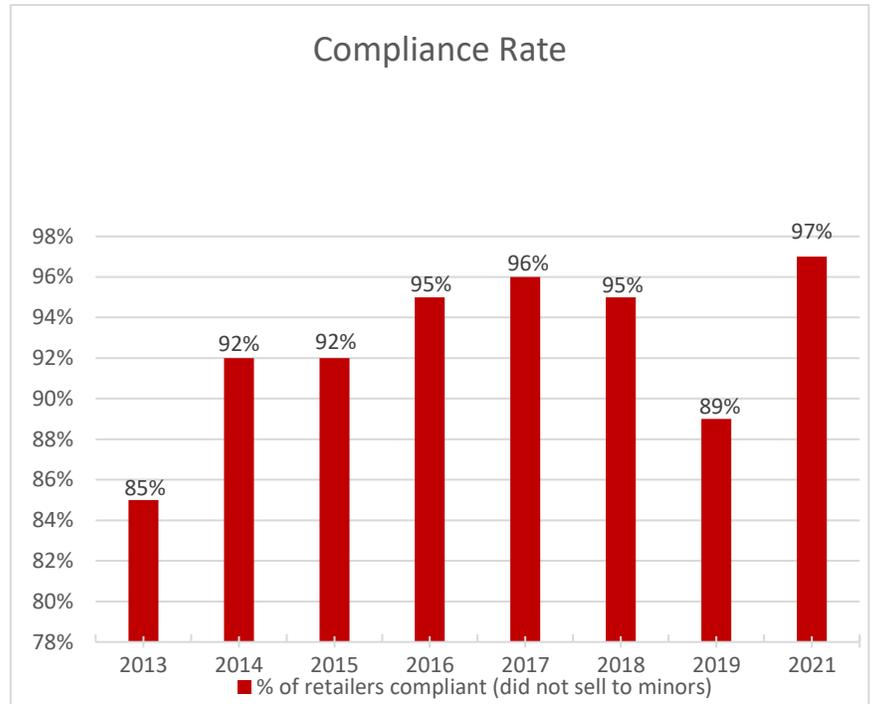
Youth say alcohol is easily accessible in the community.

NEED

In 2013 the coalition started doing compliance checks, 84 compliance checks were completed in Camanche, DeWitt, and the county. Out of the 84 checks done, 13 failed, giving an 85% pass rate. The Camanche-DeWitt Coalition wanted to see an increase in the pass rate to ensure alcohol was not getting purchased by minors.

OBJECTIVE

By September 29, 2021, decrease youth access (ages 12-17) from retail sources by increasing the percentage of establishments that are in compliance with alcohol compliance checks by 5%.



DESCRIPTION

Compliance checks are an enforcement strategy, which targets retail availability of alcohol to individuals under the legal drinking age to determine the number of outlets illegally selling alcohol to those under 21. Compliance checks are thought to be most effective when they are frequent, well publicized, and well designed; solicit community support; and impose penalties on the licensed establishment rather than just the server.

Alcohol compliance checks are routine checks done by law enforcement to ensure that businesses selling and/or serving alcohol are following all the laws and local ordinances.

Coalition partners notified alcohol establishments that compliance checks would be happening along with resources to help establishments stay compliant, sent out information when an establishments failed, and acknowledged the establishments that passed. There is limited advertising on alcohol in gas stations, grocery stores, and dollar stores. Most alcohol is in one general area of the store.

RESULTS

In 2021, 60 compliance checks were conducted in Camanche, DeWitt, and Clinton County by the Camanche Police Department, DeWitt Police Department, and Clinton County Sheriff's Office. Out of the 60 compliance checks done, 2 establishments failed. Compliance rate increased by 8% over the past year with a 97% pass rate.



TIPS (Training for Intervention Procedures)

PROBLEM

Youth say alcohol is easily accessible in the community.

NEED

65% of Camanche & DeWitt 11th graders reported that it's easy or very easy to get alcohol in their community

OBJECTIVE

By September 29, 2021, decrease youth access from retail sources by providing community businesses that sell alcohol with resources to avoid selling alcohol to minors by offering regular TIPS training and providing legal age calendars.



DESCRIPTION

TIPS (Training for Intervention Procedures) is a dynamic, skills-based training program designed to prevent intoxication, drunk driving, and underage drinking by enhancing the fundamental “people skills” of servers, sellers, and consumers of alcohol. TIPS offers individuals the knowledge and confidence they need to recognize potential alcohol-related problems and intervene to prevent alcohol related incidents and tragedies.

In 2018, the Iowa Alcohol Beverage Division (ABD) discontinued their free production and distribution of legal age calendars. Legal age calendars are tear-off calendars that show the birthdate of individuals who are of legal age to purchase alcohol. These are a great resource for establishments that sell alcohol so that they may stay in compliance with the law and not sell alcohol to minors. Since ABD discontinued the free production, the Camanche-DeWitt Coalition partnered with the Gateway ImpACT Coalition to create their own legal age calendars which included information for both alcohol and tobacco/e-cigarettes.

RESULTS

Due to Covid-19, TIPS trainings were offered online instead of in person. 18 TIPS (Training for Intervention Procedures) classes were offered. Two participants from one establishment attended a TIPS training, with a 100% pass rate.

60 legal age calendars were distributed to establishments that sell alcohol in Camanche, DeWitt, and Clinton County.

Strategic Prevention Framework Training

PROBLEM

Not all coalition members are educated on the Strategic Prevention Framework and how it relates to coalition work.

NEED

Without proper knowledge on how coalitions work and best practices, a coalition may not be able to make the community change they are working toward.

OBJECTIVE

Increase coalition members knowledge of alcohol and other drug best practices by 10%.

DESCRIPTION

The CDC Program Director reached out to one of the coalition's partners, Area Substance Abuse Council (ASAC) to see if one of their staff members would like to give a Strategic Prevention Framework (SPF) training during a monthly coalition meeting. ASAC agreed and Certified Prevention Specialist, Ellen Gackle presented at the December 2, 2020, meeting. Ellen educated on SPF, why it's important, and broke down all the pieces of the SPF which include, assessment, capacity, planning, implementation, and evaluation and how they are all connected. She reviewed sustainability and cultural competency as well.

RESULTS

There were 16 coalition members that attended the December 2, 2020, meeting and were educated on the SPF. An evaluation was given to all attendees to see if their knowledge increased on SPF and 75% of attendees had an increase in knowledge of the SPF.



Day on the Hill 2020

PROBLEM

Youth underestimate the importance of their voice and opinions when it comes to legislation and creating bills.

NEED

The Camanche-DeWitt Coalition wants to increase youth involvement in the coalition by giving youth leadership opportunities while educating youth on substance use issues.

OBJECTIVE

Increase youth collaboration and involvement with the Camanche-DeWitt Coalition as well as increase the youth's knowledge of alcohol and other drugs.

DESCRIPTION

On February 10, 2020, the Camanche-DeWitt Coalition and Gateway ImpACT Coalition joined the Alliance of Coalitions for Change (AC4C) for Day on the Hill. Day on the Hill is an opportunity for coalition representatives and youth to visit the Iowa State Capitol and meet with their legislators. Students learned about legislation and how it works and then informed their legislators of the impact of substance use in their local communities.



Youth at Day on the Hill in Des Moines

During Day on the Hill, students had the opportunity to:

- Learn about substances of use including alcohol and marijuana
- Understand how making one bad choice can affect the rest of your life
- Speak with Senator Cournoyer, Representative Mommsen, and Representative Wolfe on substance issues in their communities and discuss how to help solve those issues
- Learn how legislative bills work and how they pass into a law
- Tour the Senate and House chambers, the state library, and Iowa Secretary of State Office

RESULTS

42 middle and high school students from Camanche, Clinton, and Central DeWitt schools attended Day on the Hill. 94% of participants said they increased their knowledge on marijuana and the harms associated with it, 94% increased their knowledge on alcohol and its harms, and 94% increased their knowledge on vaping and the harms associated with it. 97% of participants increased their knowledge on how to educate legislators.

Parent LifeSkills

PROBLEM

Too many youth in Camanche & DeWitt think that their parents feel that it would not be wrong at all or a little bit wrong to drink alcohol and use marijuana.

NEED

7% of Camanche and DeWitt 11th graders, 4% of Camanche and DeWitt 8th graders, and 6% of Camanche and DeWitt 6th graders believe that their parents feel it would not be wrong at all or a little bit wrong for them to drink alcohol. Out of those same youth, 14% of 11th graders, 2% of 8th graders, and 2% of 6th graders believe that their parents feel it would not be wrong at all or a little bit wrong for them to smoke marijuana.

OBJECTIVE

Increase perception of parental disapproval of consuming alcohol and marijuana.

DESCRIPTION

The program director for the coalition, Lauren, became trained in the Botvin Life Skills programs for both youth and parents. The Botvin Life Skills Parent Program is designed to help parents strengthen communication with their children and prevent them from using drugs. This program contains materials and exercises that help parents teach their children the skills that help them resist the threats of tobacco, drugs, and violence. These tools help parents prepare their children for a successful transition from adolescence to early adulthood. The program director, along with a parent that was also Life Skills trained, collaborated, and hosted a seven-week Life Skills Parent Program. This was done online, every Thursday from 6:30 -8:00p.m. from July 1-August 12, 2021, and was free for participants.

RESULTS

There were two parents that completed the program. Both participants said that training was valuable, and they felt that they were a stronger parent and more equipped to talk to their children about hard issues such as peer pressure, drinking, and drug use. Both participants would recommend this program to other parents.



Hidden in Plain Sight Trailer

PROBLEM

Youth report that their parents do not talk to them about alcohol and drugs.

NEED

Only 9% of youth report that their parents talk to them about drugs and alcohol and the effects it has on them. Most youth report that parents simply tell them not do drugs and drink alcohol because they are bad, but they rarely ever give them reasons as to why they are bad. Youth also report that parents are alright with them drinking as long as they are not driving. Youth are also reporting the majority of parents do not check their rooms or cell phones to see what they are engaging in.



The inside of the HIPS trailer

OBJECTIVE

By September 29, 2021, decrease the percentage of 11th graders who report that their parents feel it would not be wrong at all or a little wrong to have one or two alcoholic drinks nearly every day by 5% and decrease the percentage of 11th graders that report that their parents feel it would not be wrong at all or a little bit wrong to smoke marijuana by 22%.

DESCRIPTION

The “Hidden in Plain Sight” (HIPS) experience offers adults an insight into what youth may be hiding in their rooms. This interactive exhibit displays a typical teenage bedroom, with drug paraphernalia “Hidden in Plain Sight”. The HIPS trailer focuses on alcohol, nicotine use, current trends in the use of other drugs such as cannabis, synthetic and “designer” drugs, opiates, cocaine, amphetamine-type stimulants, hallucinogens and prescription drugs. Participants learn about several types of paraphernalia for the use, processing and concealment of illicit drugs.

The HIPS trailer is a tool for the coalition to provide parent education. The focus is to get parents to talk early, talk often about drugs and alcohol, and setting clear rules with their children. During the HIPS experience, an officer gives a tour of the trailer to adults and points out items parents should be aware of. After the tour, participants are asked to do an evaluation and are given materials to assist in helping talk to their children about drugs and alcohol.

The coalition found the best way to reach parents is going to events where parents attend such as parent-teacher conferences and community events.

RESULTS

The coalition had 98 adults go through the trailer in 2020 and 2021 and 92% have increased their knowledge on drugs and alcohol and stated they would talk to their child/children about drug use.

Youth Coalition

PROBLEM

Coalition work cannot be as effective in preventing youth substance use without youth involvement.

NEED

Youth in Camanche and DeWitt report in focus groups that many youth are experimenting with drugs and alcohol. Youth report between 40-70% of high school students, have tried or experimented with some sort of substance. In order to prevent youth substance use, the coalition needs youth involvement.

OBJECTIVE

Increase youth collaboration and involvement in the coalition by 10%.

DESCRIPTION

The coalition continues to work with key stakeholders in the communities such as school counselors, teachers, and principals to help recruit youth. These stakeholders were able to work with staff on setting up meeting times to meet with the youth, educate them on the coalition, and gain their involvement in the coalition.

The coalition also offered opportunities to the youth to get involved in community events and other coalition action plans.

RESULTS

The coalition had 6 new youth get involved with the coalition and help with their mission. It was harder to reach and work with the youth during these two years due to COVID-19 and not being able to get in the schools for safety reasons. During the 2021-2022 school year, staff was allowed to meet face to face with students during school hours where there was more attendance and coalition involvement. One initiative that the youth are taking is creating their own social media accounts to gain more involvement from other youth.



One of the youth presenting to Central DeWitt's Assistant Principal

Tobacco 21-Update

PROBLEM

Vaping has become a nationwide epidemic amongst youth.

NEED

In 2019, 8% of Camanche and DeWitt 11th graders reported vaping in the past 30 days. In 2020, that rate rose to 11%. Youth in our communities say that vaping is the number one issue when it comes to substance use whether they are vaping nicotine or marijuana.

OBJECTIVE

Reduce youth (ages 12-17) 30-day substance use rates.

DESCRIPTION

St. Joseph students attended the Day on the Hill event in February 2019 with their teacher and brought back what they had learned from that day and put it in to action. The 8th grade

St. Joseph class discussed working on legislation to raise the tobacco age to purchase to 21 in which they were all in agreeance that the age should be raised due to some high school seniors being able to legally purchase vaping devices and bring them into the schools for younger students.

The St. Joseph class worked on educating themselves, the public, and legislatures on vaping since March 2019. The students did research on vaping, the harms associated with it, the use of vape flavoring, and how easily accessible vapes and vaping products are to purchase, and online availability. The class reached out to their local legislatures regarding what they have learned about vaping and what they would like to see done in their state. Senator Cournoyer came to their class and spoke with them about creating bills for legislation and steps to take to raise awareness. The class then sent an email to all of the Iowa House and Senate representatives, as well as Iowa federal representatives. Throughout 2019 youth created local and state press releases including newspapers, radio, and T.V. interviews.

The St. Joseph class was invited to be Senator Cournoyer's guest at a legislative dinner where Iowa Governor Reynolds was also attending. Governor Reynolds spent a significant amount of time talking to the students where they educated her on vaping and their concerns. Governor Reynolds shared she was extremely impressed with the students and their hard work.



St. Joseph 8th grade students with Governor Reynolds & Senator Cournoyer

RESULTS

With the determination and hard work of the St. Joseph 8th grade class a bill was introduced in the 2020 legislative session to increase the age of tobacco/nicotine purchase to 21. Senator Cournoyer, who was an integral part of this movement, took the bill head on and pushed to have it sent through the State and Government subcommittee that she chaired. On June 29, 2020, Governor Reynolds signed the Tobacco 21 legislation into law! Governor Reynolds invited the St. Joseph 8th grade class to the capitol to watch her sign the bill into law. The law was put into effect on July 1, 2020.

The class generated over 200,00 media impressions from all their press releases and radio and television interviews.



Governor Reynolds signing the "Tobacco 21" bill into law

Camanche 8th Grade Health Presentations

PROBLEM

Too many youth in Camanche and DeWitt are unaware of the harms associated with underage drinking and youth drug use.

NEED

26% of Camanche & DeWitt 8th graders feel there is no risk or slight risk in harming themselves by drinking five or more drinks of an alcoholic beverage and 24% of those same 8th graders feel there is no risk or slight risk of harming themselves by smoking marijuana once or twice a week.

OBJECTIVE

Increase youth's (ages 12-17) perception of harm of underage drinking and marijuana use.

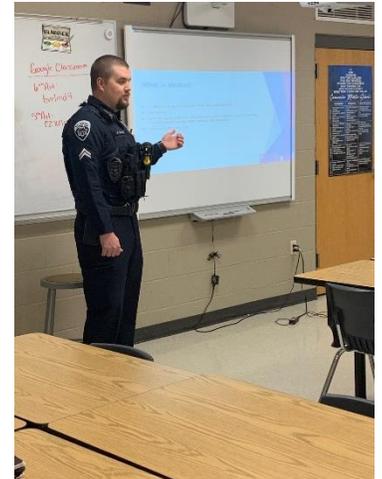
DESCRIPTION

The Camanche-DeWitt Coalition program director, Executive Committee Co-Chairs, and Camanche School Resource Officer present to the 8th grade health class students on alcohol, marijuana, narcotics, and vaping. Every six weeks, new students take health, and the coalition comes to speak to all the students during these classes.

During these presentations, the 8th graders are educated on risks associated with using addictive substances, what it does to their developing brains and bodies, and how industries deliberately market towards youth so that they can get them addicted to their product.

RESULTS

During 2020-2021, 12 presentations were given to 47, 8th graders. 95% of participants said they increased their knowledge on alcohol, marijuana, narcotics, or vaping.



Corporal Weingart with Camanche Police Department presenting to an 8th grade class on alcohol

Parent Education Series: The Pact

PROBLEM

Some people, including parents, avoid talking about race—especially with their kids. They think that they can lead by example, showing kindness in the ways they know how. Conversations surrounding race and discrimination are vital for all parents to partake in.

NEED

17% of Clinton County students identify as race other than white or Caucasian. 8% of Clinton County students reported that they had been bullied at school in the past 30 days because of their race or skin color. (Iowa Youth Survey 2018)

OBJECTIVES

Identify racial issues that are impacting communities and understand the importance of having open conversations with your children and peers about race, class, education, etc.

DESCRIPTION

On January 22, 2020, Adam Holroyd and Jason Woods facilitated an interactive dialogue about a story of two lifelong friends exploring the journey of their deep friendship in a racially charged America.

The Pact is an exploration of two childhood friends from Moline, Illinois. Jason L. Woods and Adam M. Holroyd first met in second grade at Logan Elementary School, where their “Pact” began. Jason moved in and out of the area throughout their childhood, but the “Pact” continued throughout. They graduated from Moline High School and became college roommates. Their friendship continued to grow and has always been one of open and honest communication. About 4 years ago, Adam called Jason in a panic about miscegenation. Adam was amazed to know Jason’s wedding would have technically been outlawed in Alabama until year 2000 since the couple was interracial. From that day, the two have entered an even greater “Pact” to explore their relationship that moved beyond race, class, location, education, and more. This presentation is just that - the exploration of their relationship, on stage, in front of others. They did not know what questions they or the audience might have presented, but the one thing they do know is their “Pact” will continue.

RESULTS

14 people attended the event, and 100% of participants said that the speakers met their expectations and that they would recommend them in the future. On average, participants reported a 25.4% increase in their knowledge of racial issues. Participants reported an average of a 27.4% increase in their understanding of the importance of having open conversations with their children and peers about race, class, education, etc.



Parent Education Series: Hidden in Plain Sight

PROBLEM

Parents do not think marijuana use is harmful (in general); they do not understand the risks and do not talk to their kids about marijuana.

NEED

9% of youth report that their parents talk to them about marijuana and the effects it has on them. Most youth report that parents will just tell them drugs are bad, don't do them with no real facts or information to back it up. Youth are also reporting the majority of parents do not check their kids' rooms or cell phones to see what they are engaging in.

OBJECTIVE

Increase the percentage of youth that report their parents talk to them about marijuana and the risks associated with it by 33% by September 29, 2021

DESCRIPTION

On January 23, 2020, Sergeant Steve Cundiff and coordinator Jordan Lillard presented at Calamus-Wheatland High School on current trends that youth are experimenting with and ways they can conceal their drugs and drug paraphernalia in their bedrooms. This session also stressed the importance of parents talking to their children about drugs and alcohol, which includes giving their children information about drugs and making sure they are talking early and talking often.

RESULTS

5 people attended the event to learn about the current drug and alcohol trends that youth are experimenting with. On average, participants increased their knowledge of current trends in youth substance use and drug paraphernalia by 32%. 100% of participants reported that they are very confident in their understanding of the importance of having open conversations with their children about alcohol and drugs.



The HIPS Trailer

Parent Education Series: When It's More Than Sad

PROBLEM

Teens are especially vulnerable to drug use and mental health issues because of their developing brains and parents are unsure of how to effectively communicate with their teens about these issues.

NEED

28% of Camanche & DeWitt 6th, 8th, and 11th graders report that they have felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities in the past twelve months. Out of those same youth, 8% report that they have used drugs or alcohol to deal with stress, anxiety, or depression.



OBJECTIVE

Increase perception of parental disapproval of alcohol and marijuana and increase the percentage of youth that report their parents talk to them about drugs and alcohol and risks associated with them including impacts they have on mental health.

DESCRIPTION

On March 5, 2020, Kristina Rebelsky, a Licensed Independent Social Worker and Certified Alcohol and Drug Counselor with Life Connections, presented at Central DeWitt Middle School on depression, anxiety, and other aspects of mental health. Participants learned about mental illnesses, their causes, signs and symptoms, and their prevalence in adolescent and adult populations. They also learned about suicide, self-injury, and what parents and community members can do to help.

RESULTS

11 people attended the event, and 100% of the participants increased their knowledge of the Camanche-DeWitt Coalition. After the educational event, 100% of participants reported a clear understanding in how to recognize when a child is anxious, stressed, or depressed. All participants also reported a clear understanding of the importance of having open conversations with children about mental health and substance use.

Marijuana in the 21st Century

PROBLEM

Too many youth in Camanche and DeWitt think that their parents feel that it would not be wrong at all or a little bit wrong to use marijuana.

NEED

14% of Camanche and DeWitt 11th graders, 2% of Camanche and DeWitt 8th graders, and 2% of Camanche and DeWitt 6th graders believe that their parents feel it would not be wrong at all or a little bit wrong for them to use marijuana.

OBJECTIVE

Increase perception of parental disapproval of marijuana by building the skills of parents/adults to monitor youth's activities, supervise substance free parties, talk to kids with information and increase access to resources.

DESCRIPTION

On April 27, 2021, the coalition brought in national speaker Ben Cort from Smart Approaches to Marijuana to give two virtual presentations on today's marijuana. The sessions were called "Marijuana in the 21st Century" and were offered during the lunch period and evening. Ben educated the audience on how teens are being impacted by marijuana legalization, the effects of teen marijuana use, and what is happening in Colorado due to legalization.

RESULTS

78 people attended these presentations, and 98% of participants reported they increased their knowledge on how marijuana has changed over the years, the harms marijuana has, how marijuana companies market their products towards youth, and current marijuana youth trends. 66% of participants said they would either talk to their children that day or within a week about their expectations when it comes to drugs and alcohol.



Ben Cort discussing marijuana at the "Marijuana in the 21st Century" session

You Can't Stop What You Don't See

PROBLEM

Youth report that their parents do not talk to them about alcohol and drugs.

NEED

9% of youth report that their parents talk to them about marijuana and the effects it has on them. Most youth report that parents will just tell them drugs are bad, don't do them with no real facts or information to back it up. Youth are also reporting the majority of parents do not check their kids' rooms or cell phones to see what they are engaging in.

OBJECTIVE

By September 29, 2021, decrease the percentage of 11th graders who report that their parents feel it would not be wrong at all or a little wrong to have 1 or 2 alcoholic drinks nearly every day by 5% and decrease the percentage of 11th graders that report that their parents feel it would not be wrong at all or a little bit wrong to smoke marijuana by 22%.

DESCRIPTION

On March 24, 2021, the coalition brought in national speaker Jermain Galloway to deliver two virtual training sessions. Jermaine also known as "Tall Cop" stands at 6'9" and can look intimidating. But in fact, he's a devoted, passionate man who cares about America's (and beyond) youth and communities. Jermaine's training sessions covered various youth drug trends including marijuana, opioids, over the counter drugs, legal drugs that are used, alcohol changes, items used to conceal drugs, and stash compartments.

RESULTS

There were 83 people in attendance during both presentations. 96% of participants said they increased their knowledge of alcohol, underage drinking trends, risks associated with underage drinking and 98% of participants said their knowledge of marijuana and new marijuana products, drug paraphernalia and concealment, and youth drug trends increased from the training. 60% of participants said they would talk to their children about alcohol and drugs and their expectations within the week.



Charlie Applestein *Helping Your Kids to Be All That They Can Be*

PROBLEM

Some parents don't fully understand the importance of their role as a parent in their child's life and the impact that a positive, strength-based approach has on their children.

NEED

Youth report that their parents don't talk to them about drugs and alcohol and also do not always lay out what consequences would be if they use drugs and alcohol.

OBJECTIVE

Increase the percentage of parents that talk to their children about their expectation when it comes to drugs & alcohol.

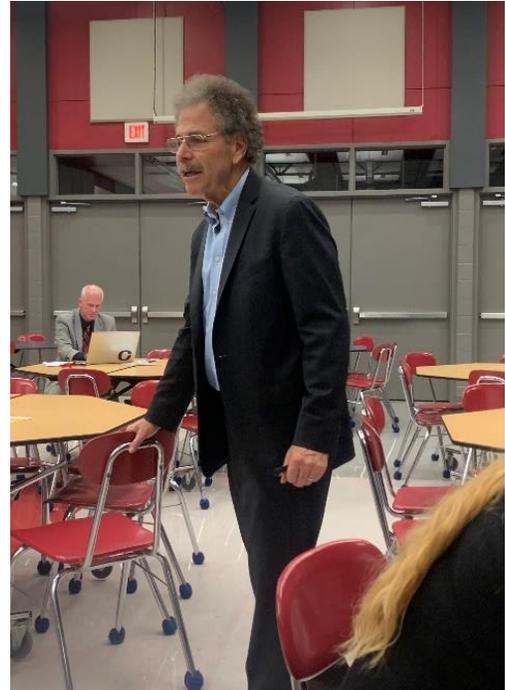
DESCRIPTION

On September 29, 2021, the Gateway ImpACT Coalition brought in national speaker Charlie Applestein to educate Clinton Elementary staff and faculty. Charlie taught a parent session about positive, strength-based approaches for effective parenting in the evening. CDC helped promote this event and offered it to all coalition members. The "Helping Your Kids to Be All That They Can Be"

parent session had an objective of getting your children to have a more positive mindset and avoid negative thinking. Charlie reviewed way to change our own mindsets and use a positive approach to parenting, activities and self-esteem building, how to help inflexible children, reframing your parenting logic, and limit setting and consequences.

RESULTS

This presentation was in person but also available online via Facebook live. There were eight people in attendance and all attendees said they had a better understanding of positive parenting approaches and would use at least one of the new methods discussed in their own homes or professional career.



Charlie Applestein talking during his presentation

Youth Intern

PROBLEM

Some youth do not have basic job entry level skills and know how coalitions work.

NEED

Youth state they do not know how coalitions work. Youth also state that they would like to have jobs but either their schedules do not allow it or they feel they do not have the right skills for the job.

OBJECTIVE

Empower youth and give them basic job entry level skills to help succeed in the workforce.



DESCRIPTION

The Clinton Substance Abuse Council applied and received the Summer Youth Internship Pilot Project grant through Iowa Workforce Development. This grant was to help cover the cost of youth summer interns. There were specific qualifications that youth applicants must have met to be considered as an intern and those were:

- Be between ages 14-19
- Live in Clinton County
- And either be a high school student at risk of graduating, come from a low-income household, come from communities underrepresented in Iowa Workforce, or youth who otherwise face barriers to success and upward mobility in the labor market with internship opportunities

Both Camanche-DeWitt Coalition and Gateway ImpACT Coalition requested to have a youth summer intern for the summer of 2021.

RESULTS

The coalition hired one youth for this summer intern program. This youth was going to be a senior at Camanche High School and her goals after high school are to be a psychologist that focuses on addiction. The summer intern helped the coalition move office buildings, enter survey data, create social media campaigns, assist with drug paraphernalia scans, attend coalition trainings, and other office tasks. When the summer internship was over, an evaluation was given, and the intern stated that she felt like she had learned a lot over the summer and felt more prepared for the workforce. She can use what she learned over the summer to help her in her future goals.

LumberKings Advertising

PROBLEM

Too many youth in Camanche and DeWitt think that their parents feel that it would not be wrong at all or a little bit wrong to drink alcohol.

NEED

7% of Camanche and DeWitt 11th graders, 4% of Camanche and DeWitt 8th graders, and 6% of Camanche and DeWitt 6th graders believe that their parents feel it would not be wrong at all or a little bit wrong for them to drink alcohol.

OBJECTIVE

Increase perception of parental disapproval of consuming alcohol.

DESCRIPTION

The coalition partnered with the Gateway ImpACT Coalition and advertised at the Clinton LumberKings ballpark during their 2020 and 2021 baseball seasons. The coalitions wanted to get the Parent Committed campaign out to the public and reach as many parents as possible. The Parent Committed campaign is about providing support to parents and families with children. This campaign urges parents to renew their commitment as a parent and support their child through their journey into adulthood—when they are discovering and defining who they are.

The following were used for advertisements during the season:

- A large banner was placed in the picnic/beer garden
- The rotating ribbon board in the outfield
- Front entrance monitors rotating message
- Radio drop-in announcements

RESULTS

During the LumberKings seasons there were 70 home games with an average attendance of 1,800 people creating 938,000 media impressions! This does not include the high school football and baseball games held at Nelson Corp Field during the LumberKings season.



COVID-19

PROBLEM

COVID-19 became a world-wide pandemic, creating fear, stress, isolation, and hopelessness.

NEED

With the pandemic in full swing in April 2020, 95% of Americans were under lockdown and 4 out of 10 Americans reported that pandemic-related stress had a negative impact on their mental health.

OBJECTIVE

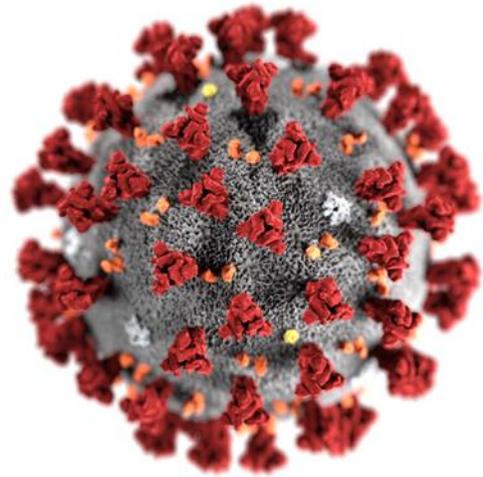
Ensure youth are getting adequate help for any mental health issues instead of coping with them in unhealthy ways like using drugs & alcohol.

DESCRIPTION

In March 2020, the World Health Organization declared the COVID-19 outbreak a pandemic and by April 2020, 95% of Americans were under lockdown. With much of the country on lockdown, the coalition work was put on stand still. Schools went to an online format, businesses shut down, there were stops on social gatherings, and more. From April 17 – June 16, 2020, Clinton Substance Abuse Council received a PPP Forgivable loan to help pay for salaries of the employees while there was a national lockdown as there was concern on how grants would be paying for salaries if no work was able to get done.

RESULTS

During the lockdowns, the coalition found other ways to stay in contact with one another and continue the work of the coalition. The coalition became familiar with online formats for meetings, presentations, and conferences. The coalition was able to figure out ways to present information such as the HIPS trailer and national speaker information by using virtual tools. Coalition activities were delayed due to COVID-19, lockdowns, and social distancing requirements. The Camanche-DeWitt Coalition continues to monitor COVID-19 and makes sure we follow guidelines and safety protocols to promote health and safety.



ANNUAL REPORT 2020-21



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www.gatewayimpactcoalition.com





WHAT IS THE GATEWAY IMPACT COALITION?

The Gateway ImpACT Coalition is a community coalition. Often, community problems or issues are too large and complex for any one agency or organization. In those circumstances, putting together a coalition of groups and individuals be an effective strategy for bringing the community's resources to bear, and getting everyone moving in the same direction.

Community coalitions are groups of individuals and/or organizations with a common interest who agree to work together toward a common goal. That goal could be as narrow as obtaining funding for a specific intervention, or as broad as trying to improve permanently the overall quality of life for most people in the community.

GATEWAY IMPACT COALITION PURPOSE

Coordinating, empowering, and educating the Clinton community area's effort to keep our community healthy, safe, and free of youth substance use and adult misuse.

GATEWAY IMPACT COALITION VISION

Our community free from substance abuse.

GATEWAY IMPACT COALITION MISSION

The Gateway ImpACT coalition, through collaboration, work to develop solutions to community problems that are related to youth substance use and adult misuse issues through the process of facilitation, cooperation, education, and communication.

WHAT IS A COALITION?

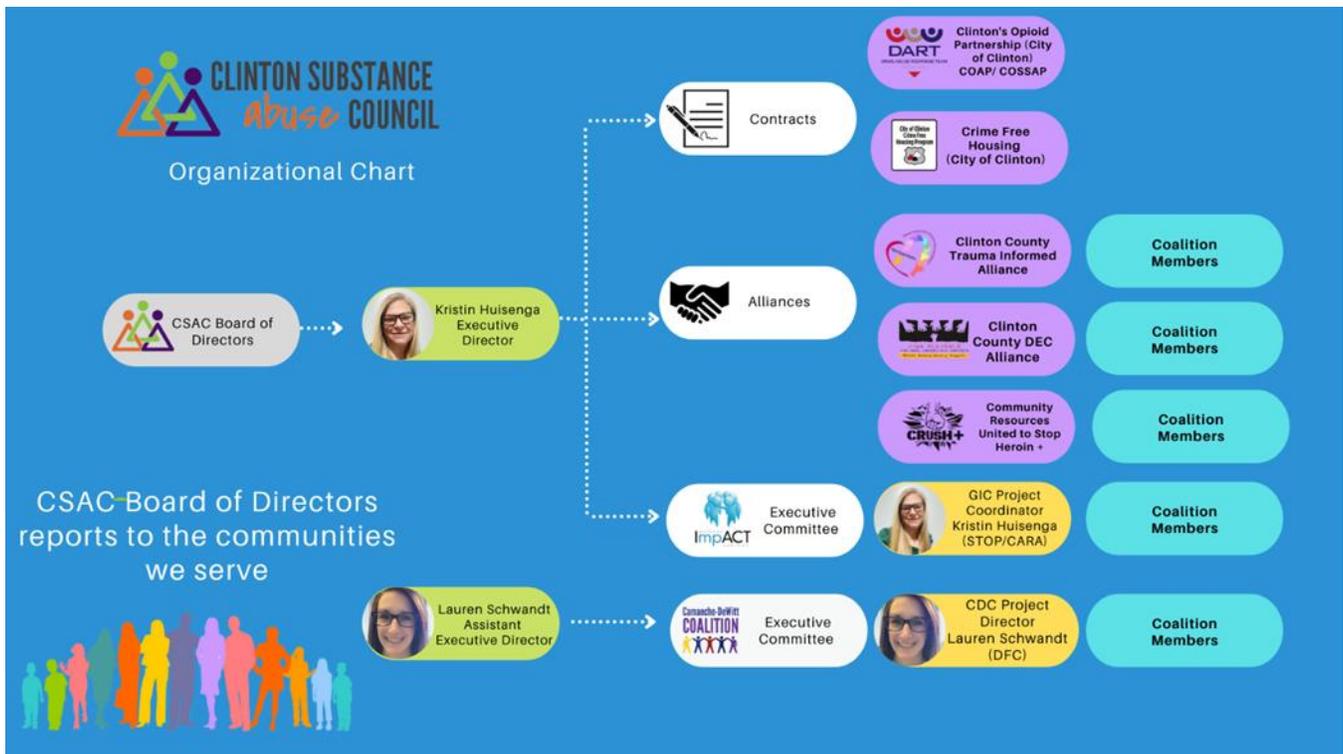
A coalition is a formal arrangement for collaboration among groups or sectors of a community, in which each group retains its identity, but all agree to work together towards a common goal of building a safe, healthy, and drug free community.

- A coalition is not a program, although staff and partners often carry out programs as their "piece" of the community-wide strategic plan.
- Coalitions seek to ensure that all causes of identified problems are addressed. Systems level solutions include integration, coordination, policy, and practice changes.
- Action in coalitions is taken by all members.
- Coalition staff plays a coordinating and supportive role.
- New members are welcome to join in an effort to increase the coalition's sphere of influence and gain needed capacity.

- Coalition staff assists with support for planning, problem solving and information management (evaluation, reporting, etc.).
- Members (Sector Representatives) act within their own spheres of influence expanding the coalition's ability to create change and implement multiple strategies.

GATEWAY IMPACT COALITION STRUCTURE

The Clinton Substance Abuse Council is a non-profit organization that is governed by a diverse Board of Directors who is responsible for oversight and direction of the coalition. The purpose of Clinton Substance Abuse Council is to build strong, stable, and informed community-based coalitions in the gateway area for the purpose of establishing healthy and caring communities free of substance misuse and related behavioral health issues.



EXECUTIVE LEADERSHIP/STAFF SUPPORT: KRISTIN HUISENGA

Drug-Free Communities Business Official/Authorizing Representative: Kristin Huisenga
 Kristin has been with the Clinton Substance Abuse Council, since 2005, and has a BBA in Finance, BBA in Marketing, and BA Sociology from the University of Iowa. Kristin is the Executive Director (ED) for the CSAC, and the Business Official for the Camanche-DeWitt Coalition Drug Free Communities Support Program (DFCSP).



CARA Business Official/Authorizing Representative: Lauren Schwandt
 Lauren has been with the coalition since 2015 and has a BS in Biology and BA in Social and Criminal Justice from Ashford University, a MA in Psychology from the University of the Rockies. She loves working with the community and youth to make a difference and building positive relationships.

EXECUTIVE COMMITTEE

The CSAC Bylaws allow for coalition executive committees in Article VI, Section 2: The Board of Directors may establish an executive committee for each coalition or special purpose. If an executive committee is established, it shall consist of the at least one CSAC Board member. The CSAC Board Member, Coalition Executive Committee liaison, reports to the Board of Directors on its actions at the next meeting of the Board of Directors.

The Gateway ImpACT Coalition Executive Committee is responsible for maintaining and expanding coalition support, providing coalition oversight, approving coalition action plans, logic models, and budgets, oversees coalition activities, and is the liaison between CSAC and said coalition. Coalition Executive Committees will make recommendations for approval to the CSAC Board of Directors for action items that relate to organizational operation including but not limited to policies, procedures, staffing, actions or resolutions, legal matters, contracts, and insurance.

2021 EXECUTIVE COMMITTEE

Leslie Mussmann-Co-Chair-Prevention Professional-Private Citizen

- Renae Kalina, Co-Chair-Healthcare Professional-Private Citizen
- Darryl Waugh, Clinton Landlords Association (CSAC Board Member)
- James McHugh, Clinton County Attorney's Office
- Judy Waugh, Clinton Landlords Association
- Mindy Dunlap, Assistant Principal, Clinton Middle School

Thank you to GIC Executive Committee members who stepped down in 2020-2021:

- Jocelyn Meyer- Co-Chair/Secretary-Bridgeview Community Mental Health Center
- Randy Meier, Seniors vs. Crime, CC Sheriff's Office



MEMBERS

The Gateway ImpACT Coalition (GIC) currently consists of members from a variety of community sectors including youth, parents, schools, law enforcement, religious and fraternal organizations, civic/volunteer groups, healthcare professionals, businesses, media, state and local governmental agencies and other organizations involved in reducing substance use. Every person or organization interested in promoting the Clinton area as caring drug and alcohol abuse free community is eligible to be a member, if:

- Their involvement aligns with the Gateway ImpACT Coalition's mission which is through collaboration, work to develop solutions to community problems that are related to youth substance use and adult misuse issues through the process of facilitation, cooperation, education, and communication.
- They commit to be an active member of the Gateway ImpACT Coalition by:
 - Being committed to the vision, goals, objectives, and strategies of the coalition.
 - Taking part in planning and collaboration.
 - Acknowledging the contributions and expectations of the other members of the coalition.
 - As part of their commitment, agree to do the following as opportunities arise:
 - Attend monthly committee meetings
 - Read minutes, and reports to keep abreast of coalition decisions and activities

- Disseminate relevant information to organizational members through listservs, social media, and websites
- Maintain coalition confidentiality by refraining from sharing or acting upon ideas or projects discussed in the coalition without the consent of coalition members
- Volunteer at community events
- Function as a positive role model for youth, families, and peers

Benefits of membership include access to coalition listserv, resources, educational events, and connections to other members and priority populations.



SECTORS

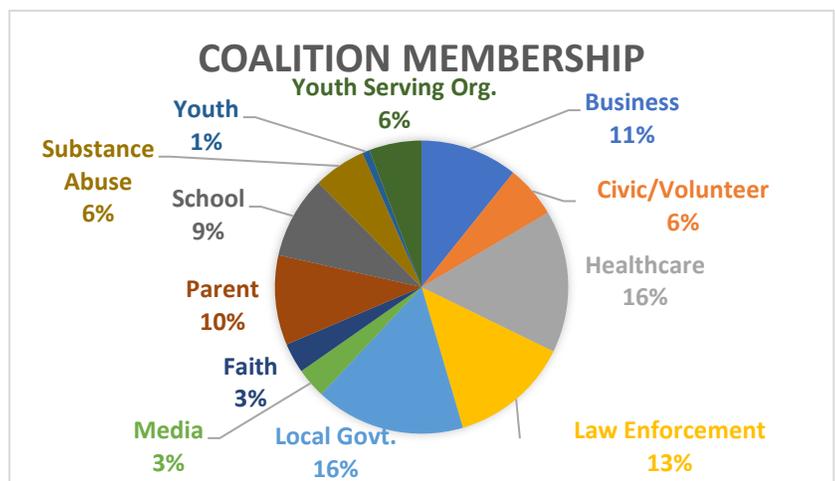
The GIC actively recruits members from the twelve required sectors and includes some additional sectors of young adult, veteran, and person with lived experience. The GIC has a mix of new and longtime members. We have lost youth members in 2020-2021 because of the inability to host events or sponsor youth events due to COVID 19.

Youth (Under 18)/Student
 Parent/caregiver (of a youth under 18)
 Parent/caregiver (of a young adult)
 Business professional/community
 Media
 Educator/school district
 Youth-Serving representative/organization
 Law enforcement professional/organization
 Religious/fraternal representative/organization

Civic/ volunteer representative/ organization
 Healthcare professionals/organization
 Elected official
 Substance use professional/organization
 Young adult/college student
 Senior citizen
 Veteran
 Person with relevant lived experience
 Concerned citizen
 State or local government

In 2020, the Gateway ImpACT Coalition had 122 coalition members with 105 signed Coalition Involvement Agreements (CIA). The total signed CIAs increased from 79 to 105, which is an 33% increase. The Coalition Membership Chart shows the breakdown of membership by the 12 DFC required sectors. These are the same sectors required for the STOP and CARA grants.

In 2021, the Gateway ImpACT Coalition updated our Coalition Involvement Agreements to provide clarification if members were organizational representatives or individual members.

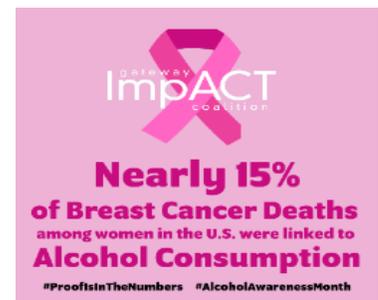
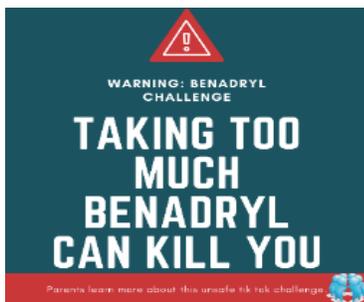


Throughout 2021, the Gateway ImpACT Coalition and Camanche-DeWitt Coalition worked to increase involvement from all sectors through the 12-12-12 challenge. Each month of the year (12 months) we took 12 minutes to identify potential partners in one sector. There are 12 DFC identified sectors, so we did one a month. This was a great opportunity to increase awareness about the coalition, get supporters and even financial donations.

COALITION HISTORY

The Clinton Substance Abuse Council (CSAC) began in 1989 as a volunteer coalition concerned with the escalating trend of drug abuse among Clinton youth. CSAC was involved in various initiatives including Iowa SAFE Community, Communities that Care, Gateway Initiative, FAST, FAST Works Program, Coordinated school and service relations (Day Treatment, 21st Century, Literacy Grant), CTC Summer Adventure Zone, Methamphetamine Reduction Project, and formation of AC4C. In 2003, Clinton Substance Abuse Council was awarded a Drug Free Communities (DFC) Support Program Grant for the City of Clinton, Iowa, and organized efforts by drug, resulting in the CAAD (Community Alliance Against Drugs) workgroup, and MUD (Marijuana and Underage Drinking) workgroup. Meanwhile, the Clinton Substance Abuse Council had expanded to providing coalition support in multiple communities in Clinton County and found the need to clarify roles and expectations for each project and/or coalition.

When the DFC ended in 2013, the coalition merged CAAD and MUD into what is now known as the Gateway ImpACT Coalition. It was determined that the Gateway ImpACT Coalition would be the name of the coalition that served the City of Clinton and surrounding areas, and what was previously known as CSAC.



Methodology

STRATEGIC PREVENTION FRAMEWORK

The Clinton Substance Abuse Council uses the Strategic Prevention Framework (SPF) during the strategic planning process. The SPF is a comprehensive approach to understanding and addressing the substance misuse and related behavioral health problems facing our communities. Prevention must begin with an understanding of complex behavioral health problems in our complex environments. It is only when we understand this, that we can implement effective plans to address substance misuse. To facilitate this understanding SAMHSA developed the SPF. The five steps and two guiding principles of the SPF include:

1. **Assessment:** Identify local prevention needs based on data
 - a. A community assessment is a comprehensive description of our community (different for each coalition, determined by coalition) for the purpose of identifying and addressing local substance use problems
 - b. Coalition skills and process for assessment:
 - i. Define and describe the community
 - ii. Conduct needs and resource assessment
 - iii. Conduct a problem analysis for each substance/need
 - iv. Create a plan of action for each problem
 - v. Update as needed
2. **Capacity:** build local resources and readiness to address prevention needs
 - a. Capacity Building is increasing the ability and skills of individuals, groups, and organizations to plan, undertake and manage initiatives. A coalition is a living entity-its membership, organization, and leadership (FORM) will evolve and change over time based on the strategies and activities (FUNCTION) in which the coalition is engaged in.
 - b. Coalition skills and process for capacity
 - i. Build coalition membership (sign coalition involvement agreements)
 - ii. Develop coalition structure (board, executive committee, etc.)
 - iii. Cultivate leadership
 - iv. Identify training opportunities
3. **Planning:** Find out what works to address prevention needs and how to do it well
 - a. Planning includes the process of developing a logical set of steps and strategies that can lead to community level change to address local conditions.
 - b. Coalition skills and process for planning
 - i. Create a vision, mission, and purpose
 - ii. Create SMART objectives (specific, measurable, achievable, relevant and time-bound)
 - iii. Plan comprehensive strategies (7 strategies for community change)
 - iv. Develop action plans for each prioritized local condition



4. Implementation: Deliver evidence-based programs and practices as intended
 - a. Put plans into action to address the problems, root causes, and local condition our coalition seeks to change
 - b. Coalition skills and process for implementation
 - i. Prioritize strategies and action plans
 - ii. Secure resources
 - iii. Implement action plans
 - iv. Ensure fidelity
5. Evaluation: Examine the process and outcomes of programs and practices
 - a. Use the results as a way share information between coalition partners to empower them to make community change in the most effective way possible.
 - b. Coalition skills & process for evaluation
 - i. Update data on logic model and/or need statements
 - ii. Document coalition's work
 - iii. Tell your story
 - iv. Develop data collection plan

The SPF is also guided by two cross-cutting principles that are integrated into every step including: cultural competence and sustainability. Cultural competency is 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. Coalition skills and process for cultural competency:

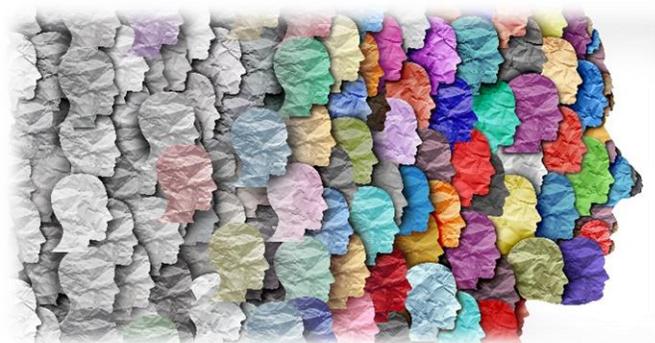
1. Commit to cultural competency
2. Identify culture and diversity in the community
3. Build cultural competence
4. Recruit members to represent the culture and diversity in the community

Sustainability: The process of building an adaptive and effective system that achieves and maintains desired long-term results. This includes the ability of our coalitions to maintain the human, social, and material resources needed to achieve our long-term goals.

Coalition skills and process for sustainability:

1. Engage volunteers & partners
2. Build a credible process
3. Ensure the need is relevant and timely
4. Determine how to sustain efforts

To be successful, the coalitions that the Gateway ImpACT Coalition implements each element of the Strategic Prevention Framework. The great part about this process is that because we are a community coalition, all the skills and knowledge are not required in one individual but in the community and partners collective knowledge and skills.



STRATEGIES FOR COMMUNITY CHANGE

CSAC focuses on environmental level change. Environmental strategies incorporate prevention efforts aimed at changing or influencing community conditions, standards, institutions, structure, systems and policies. Environmental strategies, produce quick wins and instill commitment toward long-term impact on practices and policies within a community; require substantial commitment from various sectors of the community to contribute to sustainable community change; create lasting change in community norms and systems, producing widespread behavior change and, in turn, reducing problems for entire communities. Individual-focused strategies, such as prevention education classes, are based on the premise that substance use develops because of deficits in knowledge about negative consequences, inadequate resistance skills, poor decision-making abilities, and low academic achievement. But these efforts, while important in a multiple strategy approach, do little to independently alter the overall environment in which people live and work. Comprehensive strategies involve implementing both individual and environmental-focused strategies.

According to the Community Anti-Drug Coalitions of America (CADCA), environmental strategies can produce widespread and lasting behavior change by making appropriate (or healthy) behaviors more achievable for the individuals in the target population. Furthermore, these strategies can result in behavior change that reduces problems for the entire community, including those outside the target population. In contrast, individual strategies do little to independently alter the overall environment in which people live and work. Environmental strategies offer well-accepted prevention approaches that coalitions use to change the context (environment) in which substance use and misuse occur.

The Seven Strategies for Community Change, a conceptual understanding of strategies a coalition may employ, include efforts that affect individuals as well as an entire community. These seven strategies are in the chart.

Provide Information

- Educational presentations, workshops or seminars, and data or media presentations (e.g., PSAs, brochures, town halls, forums, web communication).

Enhance Skills

- Workshops, seminars, or activities designed to increase the skills of participants, members and staff (e.g., training and technical assistance, TIPS classes, strategic planning retreats, model programs in schools).

Provide Support

- Creating opportunities to support people to participate in activities that reduce risk or enhance protection (e.g., alternative activities, mentoring, referrals for service, support groups, youth clubs).

Enhance Access/Reduce Barriers

- Improving systems/processes to increase the ease, ability, and opportunity to utilize those systems and services (e.g., assuring transportation, housing, education, safety, and cultural sensitivity) in prevention initiatives.

Change Consequences

- Increasing or decreasing the probability of a behavior by altering the consequences for performing that behavior (e.g., increasing taxes, citations, and fines; revocation/loss of driver's license).

Change Physical Design

- Changing the physical design of the environment to reduce risk or enhance protection (e.g., re-routing foot/car traffic, adjusting park hours, alcohol/tobacco outlet density).

Modify/Change Policies

- Formal change in written procedures, by-laws, proclamations, rules, or laws (e.g., workplace initiatives, law enforcement procedures and practices, public policy actions, systems change).

BEST PRACTICES

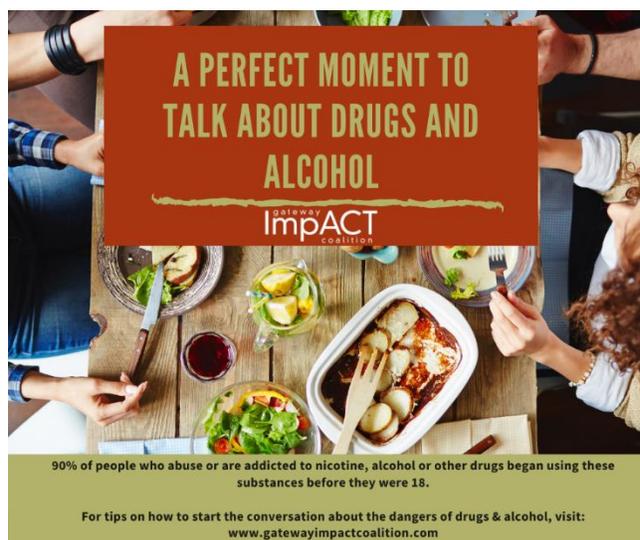
Community coalitions are popular vehicles for health promotion. Coalitions can be used to conduct needs assessments, mobilize resources, select, and implement strategies, and complete evaluations. This method has demonstrated effectiveness for reducing alcohol, tobacco, and other drug use in general.²⁴ Community coalitions are successful when they have a clear, shared vision of the coalition's objective, have committed partnerships and active participation from various community sectors, and utilize a broad menu of prevention strategies.

"We know that preventing drug abuse before it begins, particularly with young people, is absolutely the most cost-effective way to reduce crime and drug use and its consequences. Recent research has concluded that every dollar invested in research-based substance use prevention programs, strategies, and activities, has the potential to save up to \$7 in areas such as substance abuse treatment and criminal justice system costs," Said ONDCP Director Gil Kerlikowski.²⁵ Community coalitions are an effective vehicle to promote drug use before it starts.

With the assistance of coalition members and the community, Gateway ImpACT Coalition identifies current and emerging problems or gaps in the community and works to resolve them by involving the community to help develop, implement, and evaluate these solutions.

GATEWAY IMPACT COALITION GOALS

1. Increase community collaboration
 - a. Increase number of active members
 - b. Expand coalition participation in events
 - c. Enhance coalition membership satisfaction
 - d. Increase and enhance coalition leadership opportunities
 - e. Increase efforts to sustain coalition.
2. Reduce youth substance use including:
 - a. Prescription drug misuse/Opioid misuse
 - b. Amphetamine Misuse
 - c. Underage Drinking
 - d. Marijuana/Synthetic Marijuana use
3. Reduce adult substance misuse and consequences.
(Clinton CRUSH +)



²⁴ Brounstein, Zweig, and Gardner, 1998

²⁵ Taken from CADCA online 4/25/13

Annual Celebration 2019

PROBLEM

Everyone is not aware of the work of the Gateway ImpACT Coalition.

NEED

There are still many community members in Clinton that have not heard of the Gateway ImpACT Coalition or the Clinton Substance Abuse Council. Without knowledge of the organizations, people cannot get involved with our efforts.

OBJECTIVES

- Increase community awareness of the Gateway ImpACT Coalition
- Highlight coalition successes throughout 2019
- Recognize the outstanding leaders and members of our coalition

DESCRIPTION

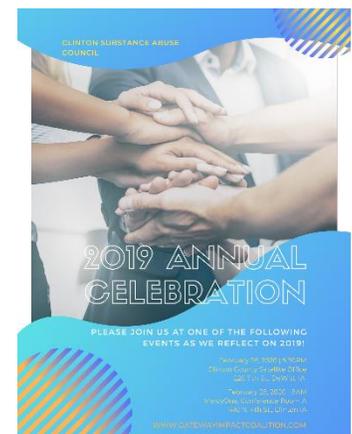
On February 26 & 28, 2020, the Clinton Substance Abuse Council held its' annual celebrations. Each year the coalitions host this event to reflect on the previous year's activities, events, and successes.

The annual celebration is an opportunity for the coalitions to acknowledge the leaders of the coalition. The following were acknowledged for their leadership and service:

- Clinton Substance Abuse Council Board: Michele Cullen, Darryl Waugh, Dan Boyd, Amy Berentes, Jeff Chapman, Ricci Aquilani, Steve Cundiff, Jim Irwin, Randy Meier, Gabe Gluba and Mike Wolf
- Gateway ImpACT Coalition Executive Committee: Leslie Mussmann, Renae Kalina, Jocelyn Meyer, Darryl Waugh, Judy Waugh, Randy Meier and James McHugh
- Above and Beyond Recognition: Darryl Waugh, Judy Waugh, MercyOne Clinton Medical Center, Clinton Hy-Vee, Winkel, Parker & Foster, Clinton Middle School, Jennifer Austin, Clinton Police Department, Clinton Fire Department, Steve Cundiff, Brenda McKone, St. Joseph's 8th grade class, Mayor Don & Peg Thiltgen, Rachel Green, Jaiden Goodman

RESULTS

35 community members attended the Annual Celebrations, and over 100 annual reports were distributed. All the participants reported an increase in their knowledge about the coalitions and the Clinton Substance Abuse Council. Attendees had very positive feedback with comments like "Reiteration that this is a great program with great leaders" and "Great work being done in the community!" The Annual Report was also sent out electronically to countless community members.



Community Awareness

PROBLEM

Community members are unaware of the Gateway ImpACT Coalition.

NEED

Increase community awareness of the Gateway ImpACT Coalition.

DESCRIPTION

Throughout 2020-2021, the Gateway ImpACT Coalition tried to increase our visibility in the community. Because of COVID we worked to increase our social media presence. The following actions were taken:

- Continuous updating and modernizing of our website.
- All CSAC Coalitions and activities are part of www.csaciowa.org.
- Increase our presence on social media including Facebook, Twitter, and Instagram.
- Pizza Ranch's Community Impact Night including.
- Gateway ImpACT Coalition volunteers wore their shirts at events.
- Moved to a new location and held an open house.

RESULTS

These events increased our awareness in the community. Every event that we attended we conducted pre/post surveys at 100% of people reported they increased their knowledge of the Gateway ImpACT Coalition. We grew our Facebook followers from 318 followers to 534 followers which is a 69% increase. In addition, the Gateway ImpACT Coalition was also able to gain name recognition and 25 new financial supporters.



To our community: During these hard times, we have temporarily closed our office to walk in traffic until it's safe to reopen. During this time we are available via social media, phone, and email. We look forward to seeing you soon.



We are all
in this together.

A graphic with a dark blue background. At the top, a large red and blue pill is shown with the text "1 in 5" in white. Below the pill is the Gateway ImpACT logo. The main text reads "Prescription Opioid Deaths Involve Alcohol" in white and red. At the bottom, it says "#ProofsInTheNumbers #AlcoholAwarenessMonth".

1 in 5
Prescription Opioid
Deaths Involve
Alcohol
#ProofsInTheNumbers #AlcoholAwarenessMonth

A graphic with a dark red background. At the top, it says "5 CONVERSATION GOALS" in white. Below that is a list of five goals. At the bottom right is the Gateway ImpACT logo.

5 CONVERSATION GOALS

1. Show you disapprove of underage drinking and other drug misuse.
2. Show you care about your teen's health, wellness, and success.
3. Show you're a good source of information about alcohol and other drugs.
4. Show you're paying attention and you will discourage risky behaviors.
5. Build your teen's skills and strategies for avoiding drinking and drug use.

Gateway ImpACT coalition

Underage Alcohol and Drug Use: STOP Grant

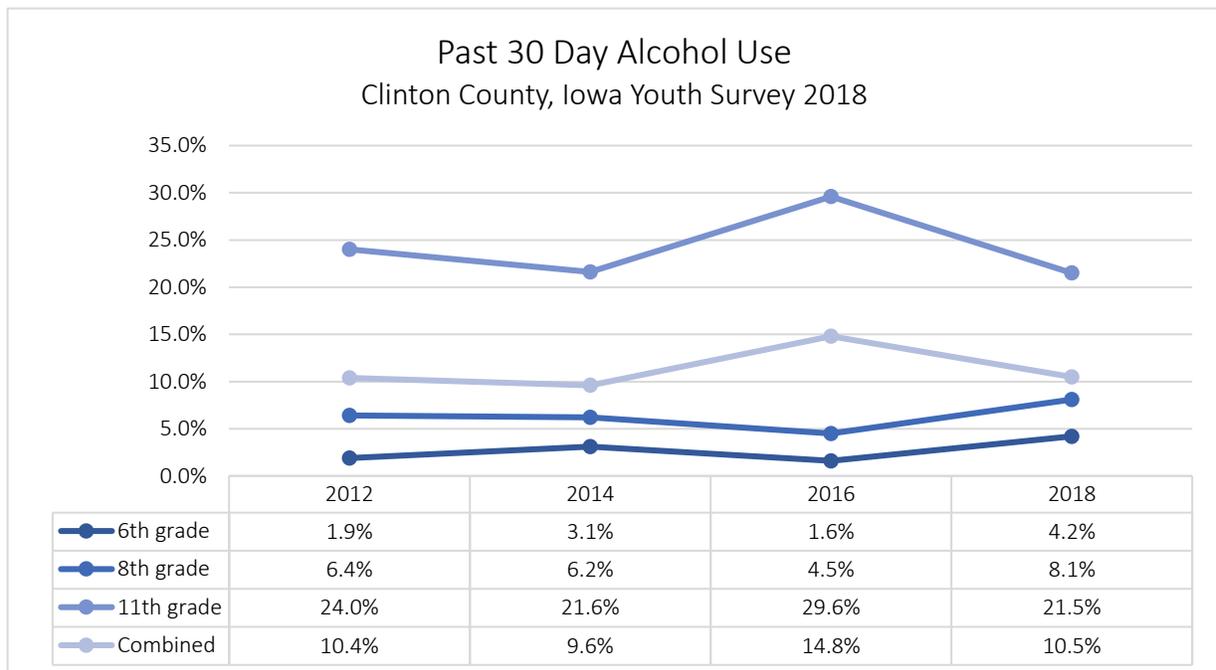
PROBLEM

According to the Center for Disease Control and Prevention (CDC), alcohol is the most used and abused drug among youth in the United States. Excessive drinking is responsible for more than 4,300 deaths among underage youth each year and cost the U.S. \$24 billion in economic costs in 2010. Although the purchase of alcohol by persons under the age of 21 is illegal, people aged 12 to 20 years drink 11% of all alcohol consumed in the United States. More than 90% of this alcohol is consumed in the form of binge drinks.

NEED

8.1% of Clinton County 8th graders and 21.5% of 11th graders reported alcohol use in the past 30 days. 2.8% of 8th graders and 13.1% of 11th graders reported binge drinking in the past 30 days.

OBJECTIVES



Goal 1: Enhance cooperation and coordination among federal agencies and non-federal organizations to prevent and reduce underage drinking among youth and young adults by:

- Objective 1: Increase voting membership of the coalition by 10% by September 29, 2020.
- Objective 2: The coalition will adapt at least 15 coalition policies to promote effective coalition building and comply with STOP Act requirements by September 29, 2020.
- Objective 3: By September 29, 2020, at least 15 Gateway ImpACT Coalition members will report an increase in their knowledge of Underage Drinking by 10%.
- Objective 4: By September 29, 2020, at least GIC members increase their knowledge of the Strategic Prevention framework and federal partners by 10%.

Goal 2: Reduce youth (ages 12-17) 30-day alcohol use rates by using environmental strategies to address favorable peer attitudes that tolerate and/or encourage underage drinking and reduce availability of alcohol in Clinton by:

- Objective 1: By September 29, 2020, decrease the percent of 8th graders who report that their peers would feel it would not be wrong at all or a little wrong to drinking alcohol by 3% which will be done by decreasing perception of peer approval, increasing developmentally appropriate factual information provided to middle school youth, increasing the capacity of those who work with youth on use rates, behavior, and community resources, and use of best practices/research based strategies to prevent and identify.
- Objective 2: By September 29, 2020, reduce youth ages 12-17 access to alcohol from social sources by 3% which will be done by decrease the number of Clinton 8th graders that report getting alcohol from homes, parties, and special events where alcohol is not secured which will be done by increasing parental awareness and monitoring. Decrease parents that tolerate and/or promote underage drinking by provide support for parents to monitor their children’s activities and use facts when talking to their children about alcohol, review policies, and reporting line more closely.



DESCRIPTION

On October 1, 2017, the Gateway ImpACT Coalition's Project to Reduce Underage Drinking in Clinton, Iowa was awarded a FY2016 Sober Truth on Preventing Underage Drinking Act grant for \$45,030 by the Substance Abuse and Mental Health Services Administration (SAMHSA) to increase collaboration, address favorable peer attitudes, and social access to alcohol for middle school age youth. This grant was for four years and ended September 29, 2021.

RESULTS-MEMBERSHIP

In 2020, the Gateway ImpACT Coalition has 122 coalition members with 105 signed CIAs. The total signed CIA's increased from 79 to 105, which is an 33% increase. The coalition regularly held meetings over the lunch hour to ensure stakeholders can attend. During COVID we could not adhere by public health's recommendations for social distancing if meeting in person, so we moved all meeting to online platforms. Offering meetings online actually increased participation, with 22 members attending the May meeting – an increase of 37.5% as compared to our last in person meeting in February.



From 2019-2020, we held 11 coalition meetings, with an average of 16 people per meeting. An additional 9 executive committee meetings were held. From September 2020 through September 2021, we held 11 coalition meetings were held with an average of 17 members attending. Additionally, the executive committee held nine meetings, two trainings during regularly scheduled coalition meetings, and two middle school provider meetings. The coalition regularly held meetings over the lunch hour to ensure stakeholders can attend. We resumed in person meeting in February 2021 but continued to offer a zoom option so now our meetings are hybrid.

Awareness

The Gateway ImpACT Coalition provided various community presentations to raise awareness about the GIC, including to the Kiwanis Group, local school districts, the Council of Social Agencies. We raised awareness about Gateway ImpACT Coalition and educated over 50 people.

We worked on developing our GIC website, Facebook page, and use of constant contact. Our Facebook following increased from 404 in July 2020 to 515 In September 2021, a 27% increase! The coalition also updated their website to make it more user friendly and provide more relevant information. The coalition is excited to see how we can continue to grow our online presence.

Six coalition members shared information about underage drinking and the important role parents play in talking to their kids about underage drinking to approximately 60 parents at Pizza Ranch's Community Impact Night. In March 2020, the coalition also raised \$276.85 through donations and Pizza Ranch's contribution of 10% of the evening's sales, and in September 2021, \$594.



17 coalition members were trained at the January 2020 coalition meeting on advocacy vs. lobbying and how to use advocacy to help change laws and policies that create safer environments for youth and how they can communicate with state and federal partners on these issues. 16 coalition members were trained at the July 2020 coalition meeting on the Strategic Prevention Framework (SPF). On average, attendees reported an overall increase of 14.4% in their knowledge and understanding of the Strategic Prevention Framework.

ROYAL STANDARDS

Memorial Day Weekend 2021 was very busy for Clinton High School students. Over the holiday weekend the students celebrated prom and graduation. The coalition was concerned that there may be multiple opportunities for underage drinking and risky behavior. The Gateway ImpACT Coalition decided to remind the youth that most students are not drinking or using drugs, but rather making good choices. Thanks to the STOP grant and donations we were able to print and display 50 of these signs in Clinton. They were primarily located on 2nd Street, 3rd Street, Camanche Avenue, and Millcreek Expressway. Community partners were happy to support this initiative.

School Based Intervention & Evidence Based Coordinator worked to build the skills of key school officials and staff including SRO, Principal, At-Risk teacher, PE teacher, Administration, Curriculum coordinator about local underage use rates, and associated risky behavior, risk and protective factors and provide community resources that can help address issues and researched information regarding risky behaviors and have shared information found with school administrators and grade level staff.



In April 2020, the coalition ran a weeklong social media campaign for National Drug & Alcohol Facts Week. The campaign generated 14,323 impressions on Facebook and grew our overall page likes by 11 users!

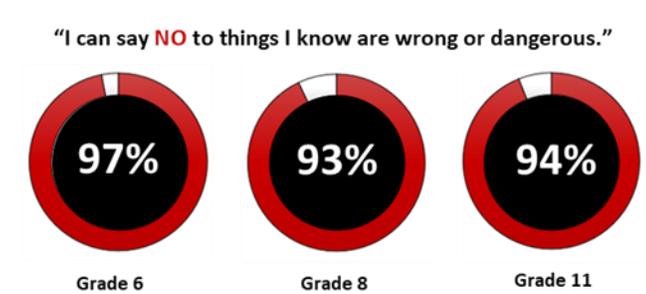
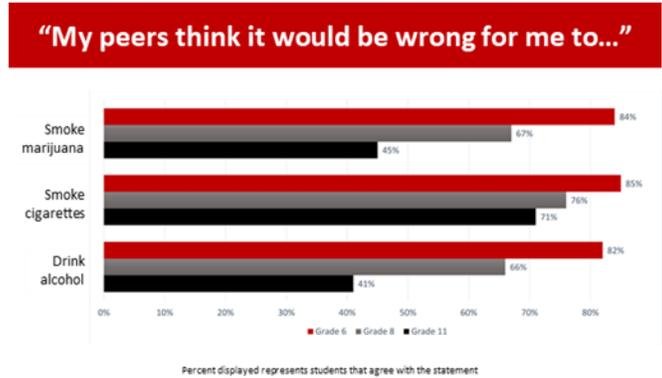
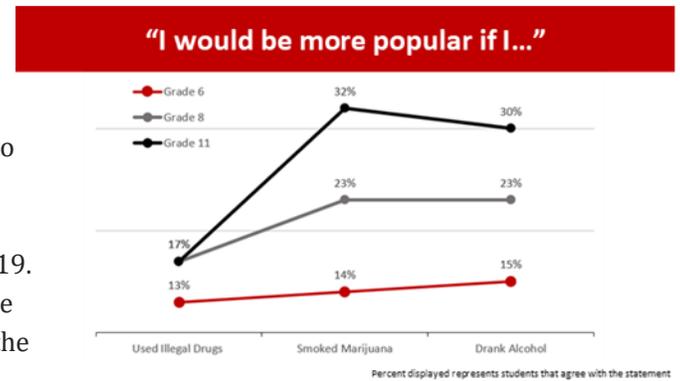
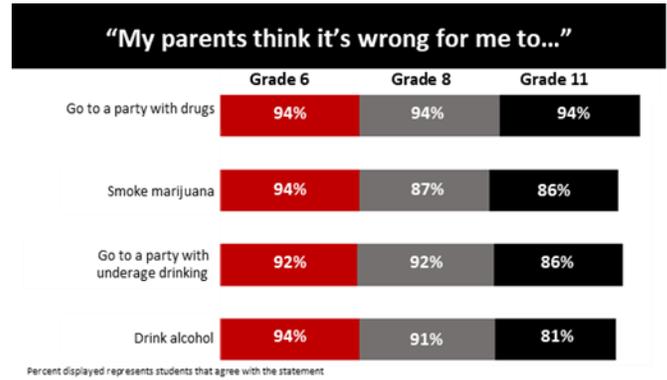


Community Committed

The Gateway ImpACT Coalition works to make sure that marketing materials and coalition materials are offered at an easy-to-read level. 17% of the target population has below a high school education. 3% of the population is linguistically isolated, and the coalition has translated youth release documents to Spanish so all parents can understand what they are allowing their child to attend. The coalition continues to explore new ways to meet the needs of this population. Staff is careful to not use technical terminology, explains concepts in basic terms, and uses a glossary of terms as appropriate. The Parent Activity Coordinator did have some of the Community Committed material reviewed to see if it would translate appropriate to Spanish. The Core Measurement Survey was completed by all middle school students (6th – 8th grade) and 11th graders in November 2019. Over 780 students completed the survey, and the results were compiled in a reader-friendly document to be distributed to the schools. The survey collected information on alcohol and substance use, peer approval, parental approval, and the risk associated with alcohol and substance use. The coalition used the data from the Iowa Youth Survey and the Core Measurement Survey to create the Community Committed booklet. This booklet contained information about:

- The Gateway ImpACT Coalition
- The role data plays in community decision making
- Brain development
- Risk and protective factors
- Tips for parents
- Resources
- Data (see images)

The coalition distributed more than 2,000 of the Community Committed booklets, shared data with coalition partners, presented the findings to the Clinton School District Board, and had the data on our website. The Iowa Youth Survey was scheduled in 2020, but due to COVID was delayed to the 2021-2022 school year. We are hoping to use the new data to update the booklet.



Good News! Most students agree.

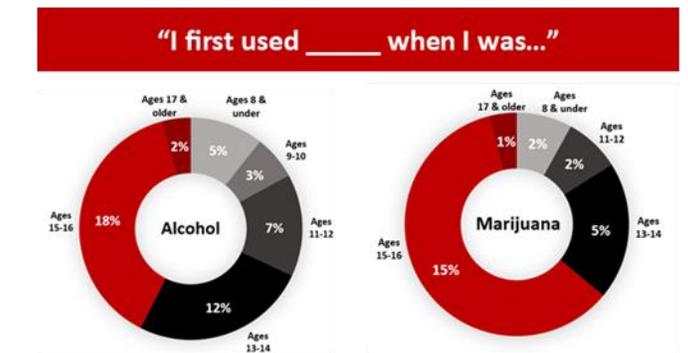
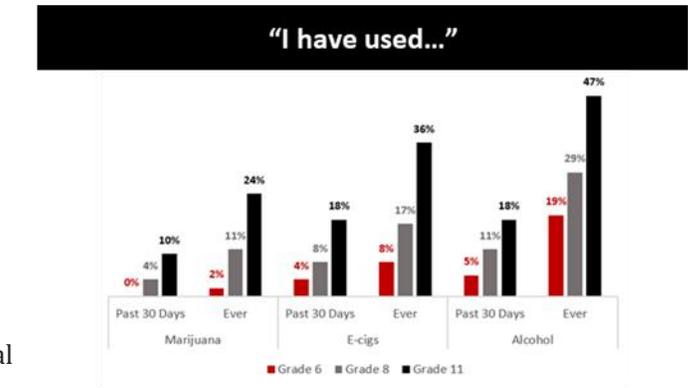
POLICY & PRACTICE

The coalition continued to follow and comply with the following policies/practices that were previously adopted:

- Data collection & Core Survey Policy reviewed by school
- Evaluation
- School Focus Group Consent
- Youth Events/Travel Policy
- Medical Information and Releases
- Consent to Travel with Minor child
- Assumption of Risk and Release of Liability
- Travel & Reimbursement Agreement
- Transportation Release
- Publicity/Image/Voice Permission
- Code of Conduct
- Core Survey Approved by Evaluators
- Fiscal Practice by CSAC Board of Directors
- By-Laws reviewed by GIC Executive Committee
- High Risk Volunteer Policy reviewed by external legal team
- Conflict of Interest Policy adopted by CSAC Board of Directors
- Document Retention and Destruction Policy
- Board Member Commitment Form
- Approve contracts for Parent Activities Coordinator and School Based Intervention & Evidence Based Coordinator
- Conduct annual voting of GIC Executive Committee and Board of Directors.

Adopting and complying with policies and practices helps ensure transparency, accountability, and helps with sustainability of the coalition!

The School Based Intervention & Evidence Based Coordinator worked to build the skills of key school officials and staff including school resource officer, principal, At-Risk teacher, PE teacher, administration and curriculum coordinator about local underage use rates, and associated risky behavior, risk and protective factors and community resources that can help address issues.



BOTVIN Lifeskills Training Program

Clinton Middle School(CMS) worked with the coalition and identified Botvin Life Skills curriculum through the SPF process to address risky behavior and build resiliency. Six middle school staff, three administrators and three counselors, were trained and certified to implement the LifeSkills curriculum, an evidence-based program proven to cut alcohol use by up to 60%. The coalition also had two members trained to ensure proper fidelity checks and evaluation could be completed once the curriculum is implemented in Fall of 2020.

Botvin LifeSkills Training Program is THE top research-based substance abuse prevention program in the country.



LifeSkills objectives include:

- Personal Self-Management Skills – Students develop skills that help them enhance self-esteem, develop problem-solving abilities, reduce stress and anxiety, and manage anger.
- General Social Skills – Students gain skills to meet personal challenges such as overcoming shyness, communicating clearly, building relationships, and avoiding violence.
- Drug Resistance Skills – Students build effective defenses against pressures to use tobacco, alcohol, and other drugs.

The program is delivered by CMS counselors who have received brief training from the LifeSkills Training organization. The teachers provide the program to students in 15 classroom sessions, each approximately 40-45 minutes in length, during students’ 6th grade year. This was taught during the Explorer Block, which is typically from 8:30-10:09AM each day, for one quint (1/5) of the 2020-2021 School Year. The program is designed to be taught in sequence over three years in middle school. The curriculum is intended to be taught sequentially to build on skills learned in the previous levels. In the classroom sessions, the teachers first explain a variety of life skills (e.g. giving assertive responses in a social interaction) and demonstrate how to use it. Students then practice using these skills in role plays during class, and in behavioral homework assignments outside of school. In the 2020-2021 school year, LifeSkills Training was taught to all 6th and 7th graders, and the goal is by the 2022-2023, all 6th, 7th, and 8th graders will receive LifeSkills Training. During 2020-2021, Clinton Middle School had 223 students take LifeSkills Training in Year 1.

BOTVIN Parent LifeSkills Training Program

PROBLEM

Too many youth in Clinton think that their parents feel that it would not be wrong at all or a little bit wrong to drink alcohol and use marijuana.

NEED

81% of Clinton 11th graders believe that their parents feel it would be wrong or very wrong for them to drink alcohol, and 86% of Clinton 11th graders believe that their parents feel it would be wrong or very wrong for them to smoke marijuana. That means that 19% and 14% respectively don't think their parents think it would be wrong for them to engage in these risky behaviors.

OBJECTIVE

Increase perception of parental disapproval of consuming alcohol and marijuana.

DESCRIPTION

The program director for the Camanche-DeWitt Coalition and the Parent Activities Coordinator for the Gateway ImpACT Coalition became trained in the Botvin LifeSkills program for parents. The Botvin LifeSkills Parent Program is designed to help parents strengthen communication with their children and prevent them from using drugs. This program contains materials and exercises to help parents teach their

children the skills that help them resist the threats of tobacco, drugs, and violence. These tools help parents prepare their children for a successful transition from adolescence to early adulthood. The coalitions collaborated and hosted a seven-week LifeSkills Parent Program. This was done online, every Thursday from 6:30 -8:00p.m. from July 1-August 12, 2021, and was free for participants.

Botvin LifeSkills Training		Parent Program Scope and Sequence	
	Unit Goals	Key Skills	Class Periods
LST Parent Program Orientation	To introduce participants to the program; to understand the challenges of combating substance use.	Identifying group's concerns; setting group's goals.	1
Family Communication	To help participants develop family communication skills.	Analyzing family communication styles; building skills for avoiding misunderstandings and expressing feelings effectively; family goal-setting.	1
Parental Monitoring	To help participants understand the importance of parental monitoring and determine an appropriate level.	Assessing family risk factors; establishing rules.	1
Being a Good Role Model	To help participants realize the power of positive role models and how to model positive behaviors.	Role modeling drug resistance and healthy stress management; value assessment.	1
Use of Appropriate and Consistent Discipline	To analyze disciplinary styles and help participants understand the importance of establishing rules.	Identifying different parenting styles; establishing rules; compromising; negotiation.	1
Effects and Warning Signs of Substance Use	To discuss commonly used substances, their effects, and warning signs of their use.	Analyzing adolescent behaviors; identifying signs of substance use; expressing substance-use concerns effectively.	1
Taking a Clear Stand on Drugs	To help participants communicate rules and consequences on substance abuse to their children.	Preparing to respond to substance-related questions; analyzing rules and the consequences for breaking them.	1
Total Class Periods			7

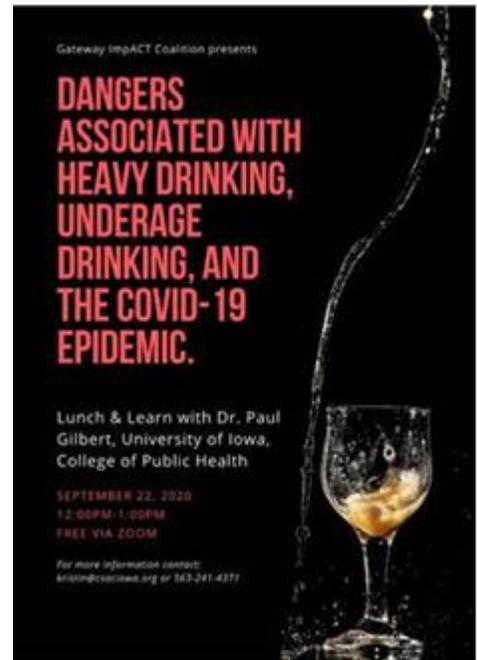
RESULTS

There were two parents completed the program. Both participants said that the training was valuable, and they felt that they were a stronger parent and more equipped to talk to their children about hard issues such as peer pressure, drinking, and drug use. Both participants would recommend this program to other parents.

Lunch & Learn

The Gateway ImpACT Coalition sponsored a Lunch and Learn on September 22, 2020, titled: Dangers associated with heavy drinking, underage drinking, and the COVID-19. Dr. Gilbert, from the University of Iowa College of Public Health shared his insights. Dr. Gilbert conducts research to understand and address alcohol-related disparities. He is particularly interested in the ways that gender, race/ethnicity, and sexual orientation shape drinking patterns, risk of alcohol use disorders, and use of study to investigate how people define recovery when they don't seek treatment, the behavior change strategies leading to resolution of a drinking problem without treatment, and how untreated recovery may vary by gender and race/ethnicity.

17 participants took the pre/post survey, and 94% of participants increased their knowledge on underage drinking.



Parent Committed-Social Access

PROBLEM

Surveys of students, parents, and local law enforcement officers indicate that the most likely place for youth to get and use alcohol is at home or a friend's home.

NEED

Social access is the most common place youth access alcohol. Surveys of students, parents, and local law enforcement officers indicate that the most likely place for youth to get and use alcohol is at home or a friend's home.

Parents need resources to reduce access to

alcohol. The average age of first use of alcohol among Clinton youth is 11-12 years old. Youth who begin drinking before age 15 are four times more likely to develop alcohol dependence than those who begin drinking at or after age 21. The human brain continues to develop from before birth into the mid-20s and is vulnerable to the effects of addictive substances. Frequent alcohol use during adolescence is associated with overall poorer attention and executive function and heightened emotional reactivity and poorer distress tolerance.

Alcohol consumption has the potential to affect the adolescents developing brain, which can lead to negative health consequences. Frequent alcohol use during adolescence is associated with:

- Earlier sexual activity and frequently changing sexual partners. It is also associated with a higher rate of unwanted (teenage) pregnancy, and sexually transmitted diseases.
- Increased rates of suicide attempts.
- Increased rates of drinking and driving and increased rates of being the passenger of a driver who has been drinking.
- Involvement in significantly more types of violent behaviors, compared with nondrinkers.

OBJECTIVE

By September 29, 2020, reduce youth ages 12-17 access to alcohol from social sources by 3% which will be done by decreasing the number of Clinton 8th graders that report getting alcohol from homes, parties, and special events where alcohol is not secured which will be done by increasing parental awareness and monitoring.

DESCRIPTION

The Gateway ImpACT Coalition provided three items at Middle and High School Parent Teacher Conferences to prevent social access:



1. Tamper Resistant Tape for Alcohol Containers

By placing the tamper-resistant tape over a bottle tops. Parents will know if someone has opened it. Youth will get the message that adults are watching and want to prevent underage drinking.

2. Free At-Home Alcohol Test Strips

For urinary screening of alcohol consumption. This test determines whether a person has consumed any alcoholic beverage within the last 2-3 days. These test strips serve as a deterrent in two ways. First, they let your kids know that you're serious about your no-drinking policy. Secondly, your children can tell friends you have test strips in your home when facing pressure to drink.



3. Tips to prevent Underage Drinking

- Secure and monitor alcohol in your home.
- Talk honestly with your kids. Let them know what your expectations are about drinking. Research tells us that youth want to know what you think, and it affects their behavior – even if they roll their eyes.
- Have family gatherings that don't include alcohol, so kids see it's not necessary for a good time.
- Give your kids a "Come Pick Me Up" code word or phrase to call or text if they find themselves in an uncomfortable situation.
- Be visible and available when your child hosts friends. Do not serve or allow alcoholic beverages or drugs to be used on your premise.
- Discuss and setting clear boundaries, rules, and consequences when it comes to alcohol and drugs.
- Know where your children will be and expect them to communicate if plans change.

RESULTS

We're happy to report that 90% of Clinton students choose to avoid drinking. Even better news is that we have seen a decrease in youth alcohol use over the past 9 years.²⁶ Still, alcohol remains the most likely drug of choice among teens. Drinking can cause long term health problems. 100 alcohol test kits, 500 tamper proof labels, and 100 tips were handed out at Middle School conferences and events in 2021. 99% of parents report that they would talk to their kid about alcohol and drugs.

²⁶ 2012-2018, Iowa Youth Survey, Clinton School District Results

Community Readiness Survey-Underage Drinking

UNDERAGE DRINKING-2020

Lauren Schwandt and Jordan Lillard conducted 6 community readiness surveys in Clinton, Iowa to measure attitudes, knowledge, efforts, activities, and resources of community members and leadership related to “Underage Drinking in Clinton”.

Representatives from Law Enforcement, Media, State/Local Government, School System, Healthcare, and a Parent were interviewed. Representatives interviewed were familiar with the issue of underage drinking but were not currently part of the Gateway ImpACT Coalition underage drinking efforts in Clinton.

Both Lauren and Jordan recorded the representatives’ answers independently. After all the interviews were completed, ASAC Prevention Staff and the CSAC Executive Director scored the answers on 5 key dimensions:

- Community Knowledge of Efforts
- Leadership
- Community Climate
- Knowledge of Issue
- Resources Related to the Issue

Based on the responses, Clinton scored 4.62 overall, which indicates preplanning. This score helps the Gateway ImpACT Coalition to determine appropriate actions that match our community’s readiness levels.

While the overall score was 4.62, each key dimension had an individual score that indicated one aspect of the community’s readiness level. Below is each key dimension’s readiness level and associated readiness stage.

Community Knowledge of Efforts, 3.83 – Vague Awareness

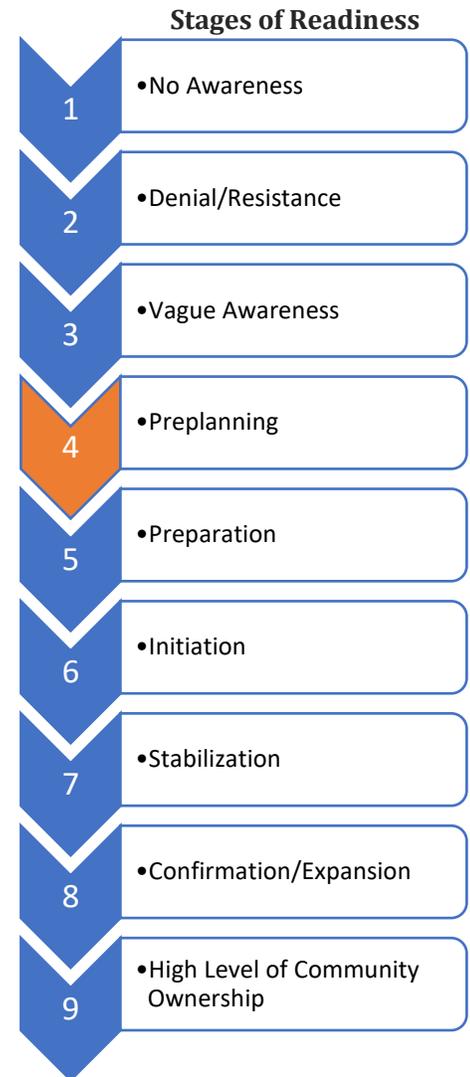
- At least some community members have heard of local efforts but little else.

Leadership, 4.75 – Preplanning

- At least some of the leadership believes that this issue is a concern in the community and that some type of effort is needed to address it. Although some may be at least passively supportive of current efforts, only a few may be participating in developing, improving, or implementing efforts.

Community Climate, 4.17 – Preplanning

- Some community members believe that this is a concern in the community and that some type of effort is needed to address it. Although some may be at least passively supportive of efforts, only a few may be participating in developing, improving, or implementing.



Knowledge of Issue, 5.33 – Preparation

- At least some community members know some about the causes, consequences, signs, and symptoms. At least some community members are aware that the issue occurs locally.

Resources Related to the Issue, 5.0 – Preparation

- There are some resources identified that could be used for further efforts to address the issue. Some community members or leaders are actively working to secure resources. (i.e., soliciting donations, grant proposals, seeking volunteers.)

Our overall score of 4.68 is a fair representation of our scores in all five key dimensions. The lowest area was community knowledge of efforts. The overall score was a 3.83. Five of the participants scored this between a 4 and 5, but one participant reported no knowledge of community efforts, which lowered the overall score. Without that response, the score would have been a 4.4, which the scorers believe may be more in line with the community's knowledge, but it is important to recognize that not all community members are aware of efforts that the coalition is working on.

Based on these scores, we can assume that our current strategies are widespread and are affecting our leadership, as well as our general community members. Future efforts need to continue to serve and educate all sectors of our community.

To increase our overall community readiness level, we need to continue and expand our efforts with leadership and the public. In reviewing our work over the past few years, we focused on the following strategies:

- Putting information in newsletters, respected publications, Facebook, etc.
- Presenting information at local community events and unrelated community groups
- Posting flyers and poster
- Introducing information about the issue through presentations/media
- Increasing access to resources for those who struggle with opioid use disorder
- Presenting information to key partners such as law enforcement and healthcare
- Engaging leaders from all sectors in the community
- Using the Hidden in Plain Sight trailer to engage parents

To increase our overall community readiness score, we plan to focus on the following strategies:

- Continue and expand the efforts that we focused on in 2018 and 2019.
- Increasing media exposure through radio and TV public service announcements and other forms of social media.
- Conducting local focus groups to discuss issues and develop strategies.
- Getting key leaders to speak out and support strategies to reduce underage drinking.
- Use the coalition position paper to educate community members and leaders about the effects of underage drinking and brain development.



Some key themes identified during the interviews regarding Knowledge of Efforts include:

- underage drinking is only a concern if it is a problem.
- Underage drinking is a “Rite of Passage.
- People know that underage drinking is happening and turn a blind eye and do not question or challenge those who are allowing it to happen. They would only question or challenge the issue when they see things go wrong.
- What catches [peoples] attention is bad behaviors NOT preventing them.
- [People] are more aware of efforts if they have kids in this age group.
- A lot of community members know of underage drinking but feel like that do not have a voice.
- Parents condone it [underage drinking] if they are at home.
- The ImpACT Coalition, ASAC, and law enforcement bring these issues to the community’s attention.



Some key themes identified during the interviews regarding Leadership include:

- [Leadership] has compartmentalized underage drinking. It is the School Resource Officer (SRO) or Juvenile Courts issue. It is a high priority but most of us [Leadership] do not see it or deal with it.
- [Underage Drinking] is a high priority. The greater deterrent there is to Underage Drinking the less likely law enforcement will be dealing with intoxicated subjects or drunk driving.
- There are people in the community that know that underage drinking is happening and want it stopped.

Some key themes identified during the interviews regarding Community Climate include:

- We have delegated so much towards education, so it is expected to be covered in school.
- [Community members] would not oppose expanding efforts but they would not go out of their way to support them or go to a special event.
- [Community members] would support law enforcement expanding efforts, no one wants an intoxicated youth driving a vehicle.
- Some parents do not seem to care. They allow their kids to drink underage. It happens a lot in our community.
- Underage drinking has not gone away but it has faded from people’s priorities over time and not seen as a top priority.
- A lot of community members and parents care about the issue but do not reach out to the right resources.
- Most community members feel like something needs to be done about it [underage drinking] but do not know where to start or how to get involved.

Some key themes identified during the interviews regarding Knowledge of Issue include:

- Drinking seems almost like a gateway drug. Minimizing how serious it affects the young brain and people do not put together how brain development is affected.
- Kids are doing things other than consuming alcohol. There is a conscience effort to not drink, and they are turning more to vaping and drugs.
- A lot of people just accept it. A lot of elderly people do not realize it is happening.
- Community members think “It doesn’t happen, and that if it does, it’s not a big deal.
- I did it [drank underage], and I am ok.
- It is not a big deal. Kids will be kids.
- There is nothing else to do in Clinton.
- [Problems with alcohol and/or underage drinking] are not going to happen to their kid.
- People have no idea that it can lead to a pattern [addiction/alcohol problems]



Some key themes identified during the interviews regarding Resources Related to the Issue include:

- Some people would participate in efforts, some would not.
- The community would support anything that is available to combat underage drinking.
- Once we raise awareness of underage drinking, efforts will be support.
- The people that currently work on addressing underage drinking are working very hard.
- State and Federal government is focused on overdoses and harder drugs. Underage drinking has slid down the priority list.
- The community and leadership would want to help and want to tackle this issue that we have been battling for decades because they want to see youth succeed.
- Little knowledge of how current efforts are funded.



After the CRS, Gateway ImpACT Coalition conducted a SWOT analysis. Our biggest Strengths/Assets within the community:

- Engaged coalition addressing underage drinking.
- School district collaborates well with area providers and agencies to bring services in (MH) and leadership and administration recognizes the importance.
- Increase awareness in school & community.
- A lot of activities for students to get involved with (A lot of stuff providing protective factors).
- Diverse group of organizations personalities working on this issue.

Weaknesses within community:

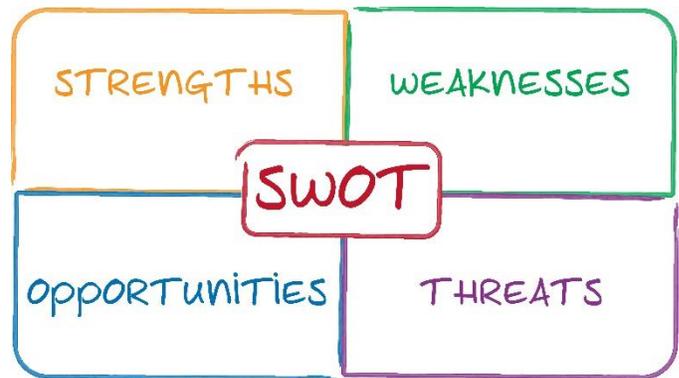
- People do not think it is a problem or someone else's problem.
- Adults giving underage youth the impression that alcohol use is acceptable.
- Just alcohol...
- Normalized behavior.

Opportunities outside community

- Priority for Iowa Department of Public Health.
- Scientific advancements in brain research.

Threats outside of community

- Compartmentalization of state government (IDPH/ABD), want alcohol sales to continue.
- State law does not allow for local control.
- Pandemic caused isolation and increased alcohol use.
- Resources for pandemic may increase but may decrease for underage drinking and other issues may be lower priority even though seen as important.



Based on the results of the SWOT analysis and discussion at the GIC, it was determined to include the following in future action plans:

- Continue to get the word about the dangers of underage drinking by engaging both parents and youth.
- Use recently published brain development research to create more buy-in from community.
- Support partners and programming that keep youth occupied.
- Use GIC Position Paper more and get that out to community members.
- Do awareness with community. Get attention of high school and middle school by setting up program and educate them. Have experts come and speak.
- Use virtual learning to students.
- Emphasize the importance of PREVENTION.

The Gateway ImpACT Coalition is also part of the Alliance of Coalition 4 Change. They look at various state related issues, like local control, which was a barrier identified in the most recent evaluation.

Charlie Applestein *Helping Your Kids to Be All That They Can Be*

PROBLEM

Some parents don't fully understand the importance of their role as a parent in their child's life and the impact that a positive, strength-based approach has on their children.

NEED

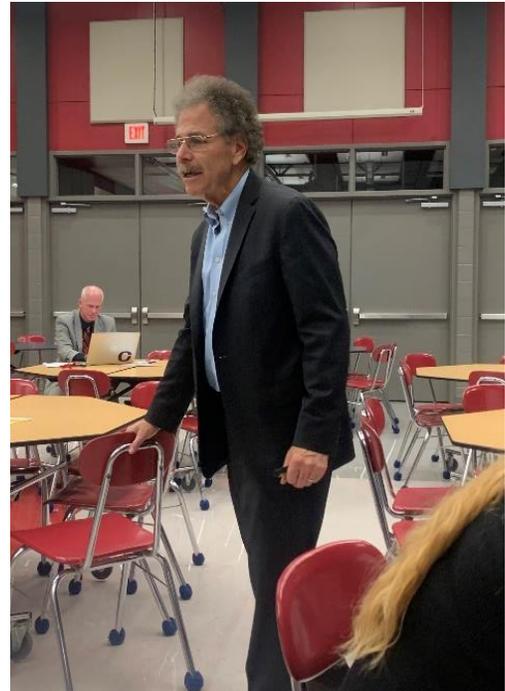
Youth report that their parents don't talk to them about drugs and alcohol and also do not always lay out what the consequences would be if they use drugs and alcohol.

OBJECTIVE

Increase the percentage of parents that talk to their children about their expectation when it comes to drugs & alcohol.

DESCRIPTION

On September 29, 2021, the Gateway ImpACT Coalition hosted national speaker Charlie Applestein to educate Clinton Elementary staff and faculty. That evening the Gateway ImpACT Coalition and Camanche-DeWitt Coalition hosted a parent session about positive, strength-based approaches for effective parenting.



Charlie Applestein talking during his presentation

The "Helping Your Kids to Be All That They Can Be" parent session had an objective of getting your children to have a more positive mindset and avoid negative thinking. Charlie reviewed way to change our own mindsets and use a positive approach to parenting, activities, and self-esteem building, how to help inflexible children, reframing parenting logic, and limit setting and consequences.

PARENT EDUCATION TRAINING:

HELPING YOUR KIDS TO BE ALL THAT THEY CAN BE!
WITH CHARLES APPELSTEIN, MSW

- The session will cover getting kids to adopt more positive mindsets and avoiding negative thinking. -

Where: Eagle Heights Cafeteria
When: Wednesday, Sept. 29th
6:30-7:30 PM

The training will also be available via Zoom and streamed on Facebook Live.

For questions about this event, please contact
Kristin at (563) 241-4571 or
kristin@gatewayimpactcoalition.com.

COMMUNITY COMMITTED
A Gateway Impact Coalition Program



RESULTS

This presentation was in person but also available online via Facebook live. There were eight people in attendance and all attendees said they had a better understanding of positive parenting approaches and would use at least one of the new methods discussed in their own homes or professional career.

Day on the Hill 2020

PROBLEM

Youth underestimate the importance of their voice and opinions when it comes to legislation and creating bills.

NEED

The Gateway ImpACT Coalition wants to increase youth involvement in the coalition by giving youth leadership opportunities while educating youth on substance misuse issues.

OBJECTIVES

- Engage the youth in our community with the Gateway ImpACT Coalition
- Help youth understand just how important they are in affecting local legislation
- Give youth the opportunity to interact and collaborate with their legislatures



Clinton, Camanche, and DeWitt students at Day on the Hill

DESCRIPTION

On February 10, 2020, the Camanche-DeWitt Coalition and Gateway ImpACT Coalition joined the Alliance of Coalitions for Change (AC4C) for Day on the Hill. Day on the Hill is an opportunity for coalition representatives and youth to visit the Iowa State Capitol and meet with their legislators. Students learned about legislation and how it works and then informed their legislators of the impact of substance misuse in their local communities.

During Day on the Hill, students had the opportunity to:

- Learn about substances of misuse and use including alcohol and marijuana
- Understand how making one bad choice can affect the rest of your life
- Speak with Senator Cournoyer, Representative Mommsen, and Representative Wolfe on substance issues in their communities and discuss how to help solve those issues
- Learn how legislative bills work and how they pass into a law
- Tour the Senate and House chambers, the state library, and Iowa Secretary of State Office

RESULTS

42 middle and high school students from Camanche, Clinton, and Central DeWitt schools attended Day on the Hill. 94% of participants said they increased their knowledge on marijuana and the harms associated with it, 94% increased their knowledge on alcohol and its harms, and 94% increased their knowledge on vaping and the harms associated with it. 97% of participants increased their knowledge on how to educate legislators.

Day on the Hill was cancelled in 2021 due to COVID-19.

Parent Education Series: Hidden in Plain Sight

PROBLEM

Substance use by teens can have a big impact on their health and well-being. Parents play a major role in preventing substance abuse among youth and in helping them if they have initiated use. Talking with a child about the dangers of substance use and showing disapproval of such behavior are key to shaping children's attitudes and behaviors.

LOCAL NEED

22% of Clinton County 11th graders reported that their parents would feel it was not wrong at all or only a little wrong if their student drank beer, wine, or liquor without their permission. (Iowa Youth Survey 2018) Parent communication of disapproval is key in preventing substance use in youth.

OBJECTIVES

- Identify the current trends in youth substance use and drug paraphernalia
- Describe the current trends in concealment of illicit drugs and alcohol
- Understand the importance of having open conversations with your children about alcohol and drugs

DESCRIPTION

On January 23, 2020, Sergeant Steve Cundiff and coordinator Jordan Lillard presented at Calamus-Wheatland High School on current trends that youth are experimenting with and ways they can conceal their drugs and drug paraphernalia in their bedrooms. This session also stressed the importance of parents talking to their children about drugs and alcohol, which includes giving their children information about drugs and making sure there is an open forum of communication.

RESULTS

5 people attended the event to learn about current drug and alcohol trends that youth are experimenting with. On average, participants increased their knowledge of current trends in youth substance use and drug paraphernalia by 32%. 100% of participants reported that they are very confident in their understanding of the importance of having open conversations with their children about alcohol and drugs.



Parent Education Series: The Pact

PROBLEM

It is no secret that many people, and many parents, largely avoid talking about race—especially with their kids. They think that they can lead by example, showing kindness in the ways they know how but politely keeping their mouths shut and their hands clean. Unfortunately, that is not a privilege everyone has. Conversations surrounding race and discrimination are vital for all parents to partake in—especially if you benefit from the privilege of not being a racial minority.

LOCAL NEED

17% of Clinton County students identify as race other than white or Caucasian. 8% of Clinton County students reported that they had been bullied at school in the past 30 days because of their race or skin color. (Iowa Youth Survey 2018)

OBJECTIVE

Identify racial issues that impact communities today and understand the importance of having open conversations with your children and peers about race, class, education, etc.

DESCRIPTION

On January 22, 2020, Adam Holroyd and Jason Woods facilitated an interactive dialogue about a story of two lifelong friends exploring the journey of their deep friendship in a racially charged America.

The Pact is an exploration of two childhood friends from Moline, Illinois. Jason L. Woods and Adam M. Holroyd first met in second grade at Logan Elementary School, where their “Pact” began. Jason moved in and out of the area throughout their childhood, but the “Pact” continued throughout. They graduated from Moline High School and became college roommates. Their friendship continued to grow and has always been one of open and honest communication. About 4 years ago, Adam called Jason in a panic about miscegenation. Adam was amazed to know Jason's wedding would have technically been outlawed in Alabama until year 2000 since the couple was interracial. From that day, the two have entered an even greater "Pact" to explore their relationship that moved beyond race, class, location, education, and more. This presentation is just that - the exploration of their relationship, on stage, in front of others. They did not know what questions they or the audience might have presented, but the one thing they do know is their "Pact" will continue.

RESULTS

14 people attended the event, and 100% of participants said that the speakers met their expectations and that they would recommend them in the future. On average, participants reported a 25.4% increase in their knowledge of racial issues. Participants reported an average of a 27.4% increase in their understanding of the importance of having open conversations with their children and peers about race, class, education, etc.



Parent Education Series: When It's More Than Sad

PROBLEM

According to the CDC, 7.1% of children aged three to 17 (approximately 4.4 million) have diagnosed anxiety, while 3.2% of children aged three to 17 (approximately 1.9 million) have diagnosed depression. The National Alliance on Mental Illness (NAMI) reports that one in five teenagers between 13 and 18 will experience at least one "severe mental disorder" during their life, as will roughly 13% of kids aged between five and 15 years.



LOCAL NEED

27% of Clinton County students reported that during the past 12 months, they felt so sad or hopeless almost every day for 2 weeks or more in a row that they stopped doing some usual activities. 21% of students reported seriously thinking about killing themselves in the past 12 months. (Iowa Youth Survey 2018)

OBJECTIVES

- Identify key indicators of your child being stressed, anxious, or depressed
- Learn how to appropriately respond to your child's stress, anxiety, or depression
- Understand the importance of having open conversations with your child about mental health and substance misuse

DESCRIPTION

On March 5, 2020, Kristina Rebelsky, a Licensed Independent Social Worker and Certified Alcohol and Drug Counselor with Life Connections, presented at Central DeWitt Middle School on depression, anxiety, and other aspects of mental health. Participants learned about mental illnesses, their causes, signs and symptoms, and their prevalence in adolescent and adult populations. They also learned about suicide, self-injury, and what parents and community members can do to help.

RESULTS

11 people attended the event, and 100% of the participants increased their knowledge of the Gateway ImpACT Coalition or Camanche-DeWitt Coalition. After the educational event, 100% of participants reported a clear understanding in how to recognize when a child is anxious, stressed, or depressed. All participants also reported a clear understanding of the importance of having open conversations with children about mental health and substance use.

Hidden in Plain Sight Trailer

PROBLEM

Youth report that their parents do not talk to them about alcohol and drugs.

NEED

Parents need to be educated about youth substance use and given strategies to talk to their kids.

DESCRIPTION

The "Hidden in Plain Sight" (HIPS) experience offers adults an insight into what youth may be hiding in their rooms, and drug paraphernalia that is available in the community. This interactive exhibit displays a typical teenage bedroom, with drug paraphernalia "Hidden in Plain Sight." This exhibit focuses on alcohol, nicotine use, current trends in the misuse of other drugs such as cannabis, synthetic and "designer" drugs, opiates, cocaine, amphetamine-type stimulants, hallucinogens, and prescription drugs. Participants learn about different types of paraphernalia for the use, processing and concealment of illicit drugs.

The Hidden in Plain Sight Trailer is a tool for the coalition to reach parents and provide parent education. We want parents to start talking early, talk often, and set clear rules. In addition, we want parents to know that the Gateway ImpACT Coalition is a community resource they can turn to.

Coalition staff and volunteers recruit parents to come through the HIPS experience. Parents take an evaluation after going through the experience. An officer (Thank you to the Clinton Police Department) gives a tour of the trailer and points out things parents should be aware of. After the tour, coalition volunteers talk to parents about any questions they may have, and emphasizes the importance of talking to their children. They are given additional materials that include how to talk to your kid (by age) and how to reach the coalition. After participating, participants will know:

- Key times youth are at risk for substance use issues.
- When and how parents should start talking to their children about drugs.
- Risk factors of youth substance use.
- Signs and symptoms of substance use.
- Common ways/places drugs are hidden.
- Paraphernalia used in the processing and use of illicit drugs.
- Law enforcement's experiences in addressing alcohol and drug use.
- What youth are saying about substance use issues in the communities.
- Local & National resources for those seeking help and information.

We found the Hidden in Plain Sight Experience to be very popular, and the best way to reach parents is going to events where they are. We attended Spring and Fall Conferences at Clinton Middle School and Clinton High School, and at the Back to School Bash. We are able to bring the trailer to events when we have coalition volunteers and law enforcement present.



HIPS COMMITTEE

- Kristin Huisenga, CSAC Executive Director, Program Director, Gateway ImpACT Coalition (staff)
- Lauren Schwandt, Program Director, Camanche-DeWitt Coalition (staff)
- Sgt. Det. Steve Cundiff, Clinton County Sheriff's Office, (CDC Co-chair)
- Captain Joe Raaymakers, Clinton Police Department
- Cpl. Shane Haskell, Clinton Police Department
- Sgt. Kelli Elliot, Camanche Police Department
- SRO Andrew Weingart, Camanche Police Department
- SRO Justin Witt, DeWitt Police Department/ Central DeWitt Schools
- SRO Zach Lange, Clinton County Sheriff's Office
- Sgt. Adam Wherry, Fulton, IL Police Department

RESULTS

Throughout 2020-2021, the Gateway ImpACT Coalition had 279 individuals go through the HIPS trailer. 185 of them took a survey and reported that:

- 98% increased their knowledge of marijuana
- 90% increased their knowledge of alcohol
- 90% increased their knowledge of prescription drugs
- 94% increased their knowledge of current drug trends
- 95% increased their knowledge of the importance of talking to their kids about drugs and alcohol
- 79% increased their knowledge of proper medication disposal
- 87% increased their knowledge of local resources
- 85% increased their knowledge of the Gateway ImpACT Coalition

99% of participants reported they will talk to their kid/grandkid about what they learned and 70% reported they will talk to them TODAY!

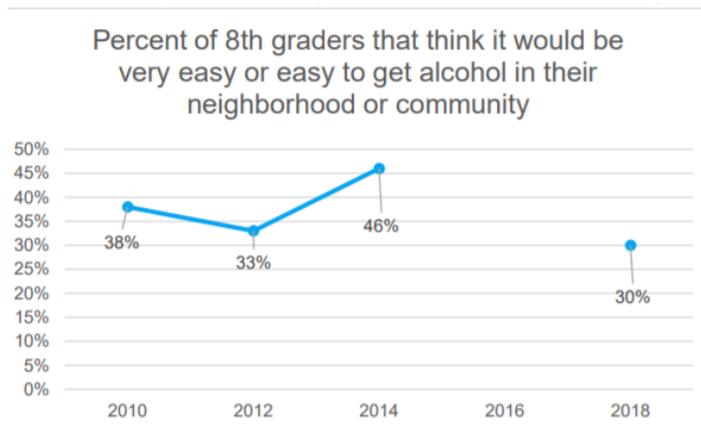
Most parents reported talking to their kids about alcohol and marijuana, despite that in our youth focus groups, youth do not report the same. Few parents report talking to their kids about vaping and prescription drug misuse.



Retail Strategies

PROBLEM

One way to prevent teens from drinking is to cut off easy access to alcohol. Unfortunately, right now most teens report that it is easy to get alcohol. One way youth access alcohol is by buying it directly from businesses who don't properly ID their customers. Educating businesses on asking for and properly checking identification is critical in preventing the sale of alcohol to minors.



NEED

41% of Clinton County students reported that it would be easy or very easy to get alcoholic beverages in their community (Iowa Youth Survey 2018).

OBJECTIVES

- Reduce the number of businesses in the Clinton community that sell to minors through annual alcohol compliance checks
- Provide community businesses with the resources to avoid selling alcohol to minors by offering regular TIPS training and providing legal age calendars to all establishments that sell alcohol

DESCRIPTION

Alcohol compliance checks were completed in Clinton by local law enforcement. Law enforcement reported the results of checks to the coalition. Before compliance checks are completed a letter is mailed to all establishments reminding them that compliance checks will be happening. Any business that fails a compliance check is fined and rechecked later that year. The business is provided with a list of resources they can use to prepare staff for the next round of alcohol compliance checks.



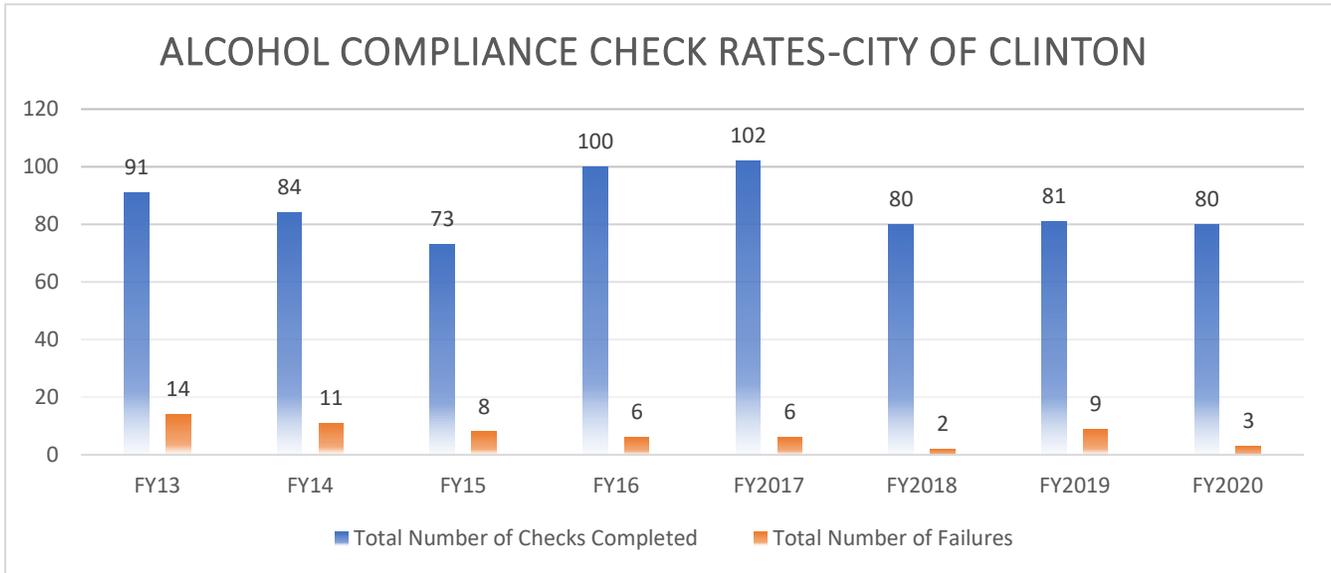
The Gateway ImpACT Coalition contracts with the Clinton Substance Abuse Council to provide TIPS training in Clinton. TIPS is a dynamic, skills-based training program designed to prevent intoxication, drunk driving, and underage drinking by enhancing the fundamental “people skills” of servers, sellers, and consumers of alcohol. TIPS offer individuals the knowledge and confidence they need to recognize potential alcohol-related problems and intervene to prevent alcohol-related incidents and tragedies.

In 2018, the Iowa Alcohol Beverage Division discontinued their free production and distribution of Legal Age Calendars. Legal Age Calendars are tear-off calendars that show the birthdate of individuals who are of legal age to purchase alcohol. The Gateway ImpACT Coalition partnered with the Camanche-DeWitt Coalition to create legal age calendars with information for both alcohol and nicotine/e-cigarettes. The coalitions provided these calendars to all establishments that serve alcohol in the community.

RESULTS

Overall, the results of alcohol compliance checks have improved since 2013. We attribute that to businesses becoming more aware of the underage drinking problem in Clinton County and increasing their attention to protecting their staff and business assets.

The FY2020 alcohol compliance checks were paid for by the Gateway ImpACT Coalition through the Community Coalition Grant from the Iowa Department of Public Health. Checks were completed by the Clinton Police Department. The Clinton Police Department completed 80 Checks, 3 failed for a total compliance rate of 96%. All businesses that were compliant received a Merchant Committed Sign to display in their establishment.



Throughout 2020-2021, 15 TIPS (Training for Intervention Procedures) classes were offered. Due to Covid-19, TIPS trainings were offered online instead of in person. Two participants from one establishment attended a TIPS training, with a 100% pass rate. The Gateway ImpACT Coalition, Camanche-DeWitt Coalition, and Clinton Substance Abuse Council have trained a total of 292 participants.

TIPS is a dynamic, skills-based training program designed to prevent intoxication, drunk driving, and underage drinking by enhancing the fundamental “people skills” of servers, sellers, and consumers of alcohol. TIPS offer individuals the knowledge and confidence they need to recognize potential alcohol-related problems and intervene to prevent alcohol-related incidents and tragedies.

In the City of Clinton, 100 calendars were distributed in January 2020 and January 2021. Establishments continue to show immense appreciation for these calendars, since they are no longer provided by the Iowa Alcohol Beverage Division.

Youth Intern

PROBLEM

Many high school students are at risk of not graduating and face barriers to success and upward mobility in the labor market.

NEED

The Future Ready Iowa goal is to have 70 percent of Iowans with education and training beyond high school by 2025. This project recognizes the importance of internships, youth development, and community collaboration. We know that internships create beneficial relationships between organizations and youth that encourage both economic and personal growth. We know that by providing various opportunities to learn soft skills, these crucial first experiences teach youth the importance of being on time, organizing their responsibilities, and dealing with people of all ages and from all walks of life which will help them in postsecondary education and the job market.

OBJECTIVE

Empower youth and give them basic job entry level skills to help succeed in the workforce.

DESCRIPTION

The Clinton Substance Abuse Council applied and received the Summer Youth Internship Pilot Project grant through Iowa Workforce Development. This grant was to help cover the cost of youth summer interns. There were specific qualifications that youth applicants must have met to be considered as an intern and those were:

- Be between ages 14-19
- Live in Clinton County
- And either be a high school student at risk of graduating, come from a low-income household, come from communities underrepresented in Iowa Workforce, or youth who otherwise face barriers to success and upward mobility in the labor market with internship opportunities.

Both Camanche-DeWitt Coalition and Gateway ImpACT Coalition had youth summer intern for the summer of 2021.

RESULTS

The coalition hired one youth for this summer intern program. The summer intern helped the coalition move office buildings, enter survey data, create social media campaigns, and other office tasks. When the summer internship was over, an evaluation was given, and the intern reported an increase in at least one soft skill (Communication, Leadership, Critical thinking, Listening, Adaptability, Organization, Teamwork, and Punctuality).



Parent Committed-Get Engaged, Stay Engaged

PROBLEM

Too many youth in Clinton think that their parents feel that it would not be wrong at all or a little bit wrong to drink alcohol.

NEED

Too many youth are unclear of their parents' expectations when it comes to alcohol and drugs.

OBJECTIVE

Increase perception of parental disapproval of consuming alcohol.

DESCRIPTION

The Gateway ImpACT Coalition partnered with the Camanche-DeWitt Coalition and advertised at the Clinton LumberKings ballpark during their 2021 baseball season. The coalitions wanted to get the Parent Committed campaign out to the public and reach as many parents as possible. The Parent Committed campaign is about providing support to parents and families with children.

This campaign urges parents to renew their commitment as a parent and support their child through their journey into adulthood—when they are discovering and defining who they are.

The graphic features the title "PARENT COMMITTED" in large, bold, blue letters. Below it is a teal banner with the text "TO STOPPING UNDERAGE DRINKING AND YOUTH DRUG USE". The central image shows a father and son looking at a laptop together. To the left of the image, under the heading "GET ENGAGED", are three bullet points: "Talk to your child early & often about alcohol & drugs", "Lead by example", and "Build warm supporting relationships with your child". To the right, under "STAY ENGAGED", are three bullet points: "Have ongoing conversations about the facts and your values", "Monitor, supervise and set boundaries", and "Know who has access to what is in your home". At the bottom, there are logos for the Camanche-DeWitt Coalition and Gateway ImpACT Coalition, along with contact information: "For more information, call 563-241-4371, visit www.camanche-dewittcoalition.org or www.gatewayimpactcoalition.com".

The following were used for advertisements during the season:

- A large banner was placed in the picnic/beer garden
- The rotating ribbon board in the outfield
- Front entrance monitors rotating message
- Radio drop-in announcements

RESULTS

During the LumberKings season there were 70 home games with an average attendance of 1,800 people creating 938,000 media impressions! This does not include the high school football and baseball games held at Nelson Corp Field during the LumberKings season.

Marijuana Driving Campaign

PROBLEM

Too many youth and adults are driving under the influence of marijuana.

NEED

11% of Clinton County 11th graders report driving a car after using alcohol or drugs. Youth in focus group report teens driving around using marijuana.

OBJECTIVE

Reduce the number of youth who report driving a car after using drugs or alcohol.

DESCRIPTION

The Gateway ImpACT Coalition partnered with the Camanche-DeWitt Coalition on a mobile campaign that targeted the risk of driving under the influence of marijuana. This funded through a Traffic Safety Grant from the AutoClub Group. The campaign was *If You Feel Different, You Drive Different*. The mobile ad ran for eight weeks beginning August 2, 2021. For this marketing we used geofencing marketing (also called geofencing advertising) which is a type of location-based marketing that lets you connect with smartphone users in a designated geographic area, such as a store, through mobile apps. We selected the following geographical areas for geofencing:

Your CBD Store
Fulton Marijuana Dispensary
Hot Box
Vapor City
Holistic Hub
BP Gas Station
Westbrook Park
Dyke (Showboat)
Clinton High School
Camanche High School
Center DeWitt High School
Smokin Joes

Jail
SA Liquor mart
Clinton Park
Camanche Park
Clinton Liquor and Conv.
Vaporocity
Phoenix Gifts
Co-op Records
DeWitt Travel Mart
Platt Park
Camanche Elementary
St. Joes

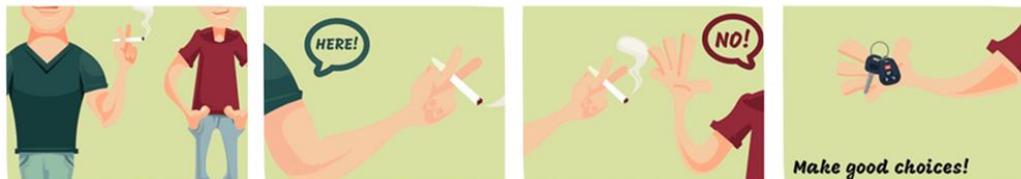
Jefferson Elementary
Eagle Heights
Bluff Elementary
Camanche Middle School
Whittier Elementary School
Central DeWitt Middle
Eagle Point Park
Genesis Medical Center
MercyOne
Camanche Food Pride

**IF YOU FEEL DIFFERENT
YOU DRIVE DIFFERENT**



RESULTS

The “If You Feel Different, You Drive Different” mobile ad did very well and had 153,304 impressions. There were 631 click throughs to the CSAC website from the specific ad. The two biggest days for impressions were on Monday and Friday. The area with the most impressions was the Fulton dispensary. The cost for this campaign was about a penny per impression.



Clean Out Your Medicine Cabinet Events

On Saturday, October 24, 2020, from 10AM-2PM the Clinton Police Department partnered with the Drug Enforcement Administration and the Gateway ImpACT Coalition to hold a “Clean Out Your Medicine Cabinet Event” at Nelson Corp Field, 537 Ballpark Drive, Clinton, Iowa. Law Enforcement Agents along with coalition volunteers collected 172.2 pounds of medication from the 92 vehicles that drove through the take back event. These participants were disposing of medication from 108 households. 91% of participants were from Clinton County. We estimate that 30% of the participants were under 60 years old, and 75% of participants reported this being their first Clean Out Your Medicine Cabinet Event they participated in.



In addition to the Clean Out Your Medicine Cabinet Day, local law enforcement had been collecting medication in their permanent drop boxes located in the lobbies of their departments. Camanche Police Department collected 163 pounds, from their drop box, and DeWitt Police Department collected another 22 pounds. Clinton County disposed of a total of 357.2 pounds of medication through the Drug Enforcement Agency’s Take Back Initiative. That is 357.2 pounds of medication that was removed to reduce the potential for abuse, mis-medication, and poisoning. The DEA incinerates the medication at an EPA approved medical waste incinerator.

This Clean Out Your Medicine Cabinet Event placed an emphasis on not being the dealer and encouraging homes to lock up medicine or safely disposing of medication properly to protect the water. Of the participants that went through only a few reported that they keep their medication secure in their home, and the remainder of participants report not securing medication, stating the most popular place to keep medication is in their bathroom/medicine cabinet. We also asked participants “Do you have children under age 18 that live or visit your household” and 55% reported yes meaning children would have access to their medication. All participants were encouraged to secure medication in a room where children and/or visitors do not have access to get into accidentally or intentionally.

An exit survey was done with participants to learn where they heard about the event, 36% of people heard about it from the Clinton Herald or other newspaper, 44% from Facebook, 18% from TV, and 8% from radio.

Drive Through CLEAN OUT YOUR MEDICINE CABINET EVENT

Saturday, October 24, 2020, 10AM-2PM

Nelson Corp Field

537 Ballpark Drive, Clinton, Iowa

For more information:

563-241-4371 or

www.gatewayimpactcoalition.com



On Saturday, October 23, 2021, from 10AM-2PM the Clinton Police Department and Clinton County Sheriff's Office partnered with the Drug Enforcement Administration, the Camanche DeWitt Coalition, and the Gateway ImpACT Coalition to hold a "Clean Out Your Medicine Cabinet Event" at the Clinton County Law Center/Courthouse, 241 7th Avenue North, Clinton, Iowa. Law Enforcement Agents along with coalition volunteers collected 35 pounds of medication from the 30 vehicles that drove through the take back event.

In addition to the Clean Out Your Medicine Cabinet Day, local law enforcement had been collecting medication in their permanent drop boxes located in the lobbies of their departments. Camanche & DeWitt Police Departments collected 137 pounds from their drop boxes. Clinton County disposed of a total of 172 pounds of medication through the Drug Enforcement Agency's Take Back Initiative. That is 172 pounds of medication that was safely removed to reduce the potential for abuse, mis-medication, and poisoning.

Drive Through
CLEAN OUT YOUR MEDICINE CABINET EVENT



Saturday, October 23, 2021, 10AM-2PM
Clinton County Law Center/Courthouse
241 7th Avenue North, Clinton, Iowa



For more information:
563-241-4371 or kristine@csaciowa.org
www.csaciowa.org



This Clean Out Your Medicine Cabinet Event placed an emphasis on not being the dealer and encouraging homes to lock up medicine or safely disposing of medication properly to protect the water. Of the participants that went through only a few reported that they keep their medication secure in their home, and the remainder of participants report not securing medication, stating the most popular place to keep medication is in their bathroom/medicine cabinet

OPIOID ABUSE PROJECT (2018-2019)

From January-September 2019, Gateway ImpACT Coalition was funded under a United Way Opioid Abuse Project. As a result of this project there were various new funding streams acquired to address the Opioid issue, including the COSSAP grant. Without United Way funding, this grant would not have been possible.

AMPHETAMINE REDUCTION PROJECT (2019-2020)

In October 2019, Gateway ImpACT Coalition was awarded a United Way grant to shift focus to amphetamine abuse. In an effort to increase our community's capacity to address the mental health and substance abuse needs we created a comprehensive amphetamine (prescription amphetamines and Methamphetamine) Action Plan that will be shared with providers which will promote strategies to prevent amphetamine abuse, restrict access of amphetamines, increase access to treatment, and outline the local problem for partners to share to leverage their own resources. We raised awareness about the risks of unhealthy behaviors and/or change public attitudes regarding the acceptance of risky behaviors. The goals of our project included:

Develop provider education about medication/amphetamine abuse including the risks of sharing medication, available tools, and community resources available to address issue.

- Data collected and shared throughout CRUSH +, Gateway ImpACT Coalition and partners. (Also, data is listed in this report)

Increase awareness of amphetamine and methamphetamine abuse and the connection between mental health and substance abuse by providing training to over 500 individuals who will report an increase in their skills/knowledge on medication and amphetamine abuse and mental health.

- Over 600 individuals received education on Amphetamine abuse and 92% reported an increased knowledge of amphetamine abuse.

Increase awareness of proper medication storage and disposal, by implementing at least Social Marketing Campaign that has over 100,000 impressions.

- We held a Medication Take Back Day in 2020 that had over 267,000 media impressions, in addition we collected 357.2 pounds of medication from 92 vehicles and 108 households. 91% of participants were from Clinton County, and we estimate 30% of the participants were under 60 years old. 75% of participants reported this being the first time they attended the event.

Clinton County will determine a tool to collect adult AOD and MH prevalence, not related to consequence data to determine targeted strategies to address the specific behaviors that reduce risk or enhance protection, baseline data will be presented

- Data was collected and shared throughout CRUSH +, Gateway ImpACT Coalition and partners. (Also, data is listed in this report)
- This data was used to prepare for a CARA grant.

STIMULANT MISUSE REDUCTION PROJECT (2020-2021)

The goals of this project were to enhance the current prevention infrastructure by expanding the capacity to identify current and emerging prevention problems and concerns to address these concerns with culturally appropriate evidence-based programs, practices, and policies.

The goal was to re-engage the core in the Strategic Prevention Framework.

Increase awareness of AOD issues and the connection between mental health, prevalence, consequences, and what to do if they suspect a problem.

- Over 500 individuals received education on stimulant abuse and 98% reported an increased knowledge of amphetamine abuse. During COVID most presentations were done online.

There will be a 50% increase in new data for adult AOD use and/or mental prevalence that is non-consequence related data and will be shared with community.

- Data was collected and shared throughout CRUSH +, Gateway ImpACT Coalition and partners. (Also, data is listed in this report)
- This data was used to prepare for a CARA grant.

An evaluation of the social marketing campaign will show an increase in the use of the drop boxes.

This goal is still under evaluation.

STIMULANT MISUSE REDUCTION PROJECT (2021-2022) ²⁷

In October 2021, Gateway ImpACT Coalition was awarded United Way Funding to continue the Stimulant Misuse Project. In the aftermath of a pandemic, mental health and substance use are at an all-time high with both adults and youth. The coalition will work to increase the use of screening tools to identify and provide early intervention to substance misuse and mental health related issues. It is too early to report results, but our goals and activities include:

- Develop Physician Committed materials and work with three providers to implement the policy aimed at preventing or reducing medication/stimulant abuse as identified in the action plan. Physician (Changed to HealthCare) Committed provides the medical community a toolkit with screening information, and algorithm for substance use and mental health, and protocol for next steps and follow up. Screening for substance use is just as critical for teens as checking their height and weight.
- Provide community education and training on prevention and substance use. 500 youth, young adults, or adults will report a 10% increase knowledge in AOD including the connection between mental health, prevalence, consequences of use and what to do if they suspect a problem.
- Work with Clinton County Health needs assessment on the substance use priority & continue to help facilitate the Clinton County Trauma Informed Alliance, Clinton CRUSH +, and Gateway ImpACT Coalition.
- Work at the Resource Center and help track the needs of the community and put in an easy-to-use format to use to make community change to meet the needs of the community.

In May 2021, Clinton County opened a resource center in the law center. As part of that process community volunteers are providing support to individual in need of assistance and coming out of jail on a volunteer basis. As the coalition we can provide support and connection with many resources throughout the community and examine how we can look at system level change. The current funding stream that Kristin is using will not be available after September, and the coalition would continue to participate. In the first two weeks of opening there were about 20 clients who were provided support, 50% coming directly from jail and 50% from community resources. 25% of those requested substance abuse services/connection and Kristin was able to help them to make the connections. 75% of the people Kristin worked with were involved with Methamphetamine.

New resource center 'a model for Iowa'

Sheriff: We can help people 'get their lives turned around'

By JOHN ROHLF Observer Correspondent Jun 29, 2021



Photo from DeWitt Observer at Resource Center ²³

²⁷ https://www.dewittobserver.com/news/local/new-resource-center-a-model-for-iowa/article_d9153cc0-d911-11eb-9a07-ff773f553dea.html

CARA Local Drug Crisis Grant

OVERVIEW

The ongoing drug overdose crisis and the changing nature of drugs that contribute to overdoses in the U.S. highlight the urgency and importance of preventing illicit and prescription drug use and misuse among youth. Overall higher rates of opioid-related deaths and opioid prescriptions have been recorded in rural areas than in synthetic opioid (e.g., illicitly manufactured fentanyl), often combined with other substances such as cocaine and meth, are contributing to a substantial proportion of overdose deaths.

NEED

Studies have shown that prescription opioid misuse among youth is strongly linked with developing an opioid use disorder, injection drug use, use of meth, and experiencing a drug overdose. Research has also shown that misuse of prescription opioids is associated with other risk behaviors, such as suicidal ideation, youth violence, and risky sexual behaviors. The increase of overdose deaths involving opioids and stimulants as well as the risks associated with youth initiation of these substances underline the need for enhanced efforts to prevent illicit and prescription opioid use/misuse among youth.

OBJECTIVE

Goal 1: By June 30, 2026, Reduce the number of 11th grade students who have misused Rx s in the last 30 days by 25% from 5% to 4%.

- Objective 1.1: By June 30, 2022, Increase the number of Clinton Community School District youth who complete an Evidence Based Prevention Program (EBP) by 25%.
- Objective 1.2: By June 30, 2022, Increase the number of Clinton Community School District staff who have completed training in an evidence-based program focused on early identification and referral by 10 staff.

Goal 2: Increase community support for evidence-based prevention. By June 30, 2026, 2% of 6th graders report most adults in their community feel it would not be wrong at all to misuse Rx.

- Objective 2.1: Increase coalition capacity to maintain and enhance systems using the Strategic Prevention Framework by increasing coalition voting membership by 10%.
- Objective 2.2: By June 30, 2021, Increase the amount of medication collected at take back locations by 10%.
- Objective 2.3: Increase parental self-efficacy to talk with youth about Rx misuse, family expectations & access resources.



DESCRIPTION

On July 1, 2021, The Gateway ImpACT Coalition was awarded a \$50,000 CARA Local Drug Crisis Grant. This grant is for 5 years and funds our Prescription Drug Misuse Reduction Project targeted at youth ages 12-18 in Clinton. The goals of the coalition are to reduce opioid, methamphetamine, and/or prescription drug use/misuse among youth and change the culture and context regarding acceptability of youth opioid, methamphetamine, and/or prescription drug use/misuse.



The coalition will achieve its goals by implementing these strategies: increase number of students receiving an evidence-based prevention program and early intervention program; increased collaboration to build capacity to change community conditions; increase of medication safely disposed of; and increase parent capacity to talk to youth about medication misuse. Intermediate outcomes include increase drug refusal skills, increase number of referrals made to substance use treatment; increased community readiness and capacity of coalition, youth report less medication available in community and parents talk to their kids about prescription drug misuse. Long term objectives include: a reduction in the number of youth who misuse medication and change the culture and context regarding the acceptability of opioid, methamphetamine, and/or prescription drug misuse.

RESULTS

The CARA project got off to a slow start due to staffing. The Gateway ImpACT Coalition tried to hire a part time staff person to fill the role of project coordinator. Unfortunately, we did not have any qualified candidates. CSAC was able to submit a key staff change and Kristin began in the role of Program Director and Lauren as the Authorized Organizational Representative in January 2022.

One success that has been reported is that LifeSkills, an evidence-based program, was expanded to another grade level at Clinton Middle School.

Youth Marijuana Community Assessment



OVERVIEW

Addressing marijuana use among youth is a major public health concern. Some studies suggest early use can cause disruptions to adolescent brain development that may result in negative consequences, such as cognitive impairment and delayed maturation of the brain areas responsible for decision-making. Research on long-lasting effects has produced mixed results. However, there is increasing evidence that heavy and/or regular (e.g., daily or near daily) marijuana use among young people may be associated with cognitive deficits, such as impaired learning. Other concerning risks include physical changes in the brain areas responsible for attention and memory, and increased risk for and early onset of psychiatric conditions and SUDs, such as schizophrenia and marijuana use disorder. Youth marijuana use is also correlated with suicidal ideation and behavior, poor school performance, and increased high school dropout rates.

NEED

Reduce the age of onset of youth marijuana use. The full scope of long-term health and social effects of youth marijuana use is still unknown, particularly among those who may be using marijuana regularly or daily. The high prevalence of youth marijuana use is concerning, with the age of onset in Clinton County of 13.3 years old. (2018 IYS). Evidence suggests initiation of marijuana use at a young age is associated with some of the most serious harms. These factors, combined with marijuana's clear evidence of harm, makes preventing initiation of its use among youth a public health priority.

The Gateway ImpACT Coalition currently does not have any funding to address youth marijuana use. Funding is being sought, but more data would be helpful.

Combat risk factors for dependence:

1. Age of onset
2. Frequency of use
3. Potency of product

OBJECTIVE

1. Complete a community needs assessment on youth marijuana use (but would require funding)
2. Acquire funding to use the Strategic Prevention Framework process for youth marijuana use.
3. Include marijuana prevention in current strategies where applicable.
4. Reduce paraphernalia promotion in Clinton.
5. Get updated assessment data.

DESCRIPTION

Marijuana became legal in nearby Illinois on January 1, 2020. The coalition has identified that there are high rates of 11th graders reporting that marijuana is easy or very easy to get in the community. Youth report in focus groups that they believe the youth marijuana use rates are higher than what is reported on both Iowa Youth Survey and DFC Core Measures Survey. Instead, they believe that 25% - 30% of high schoolers use marijuana. Vaping is a new trend we are seeing among youth; not only can they vape nicotine products, but they can also vape marijuana which we are seeing more. Youth further report in focus groups they use marijuana to fit in, they believe it isn't harmful since it's been legalized, and some are using it to self-medicate. Youth additionally report that students come to school high, or they will use marijuana while on school grounds.

Youth in Clinton report in focus groups that many youth are experimenting with vaping and weed. Youth report very large numbers, typically between 40-70% of high school students, have tried or experimented with some sort of substance. The perception of how harmful marijuana use can be is declining. Increasingly, young people today do not consider marijuana use a risky behavior. Eleven percent of youth report that their parents talk to them about marijuana and the effects it has on them.

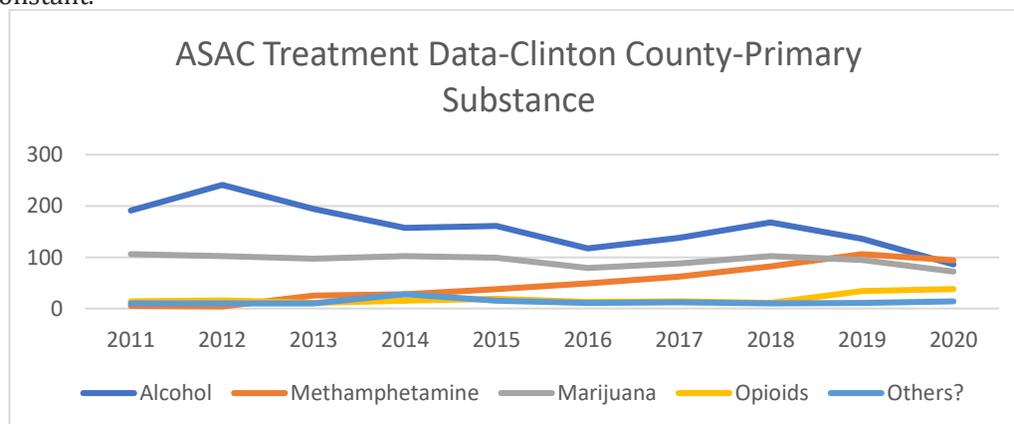
At each Hidden in Plain Sight presentation parents are flabbergasted about the new marijuana trends and report that they thought it was still the weed of Woodstock.

According to a report from the Iowa Office of Drug Control Policy, around 7% of Iowa adults smoke marijuana²⁸ A Gallup poll found that nationally, 68% of adults favor legalizing marijuana. In Iowa, that figure is 54%, according to a poll from Mediacom and the Des Moines Register.²⁹

The following was taken directly from the 2022 Iowa Drug Control Strategy:

Data indicate marijuana is one of Iowa's most used illegal drugs after alcohol, the third most frequent reason for substance use disorder (SUD) treatment admissions, just after meth. Although marijuana use is prevalent in Iowa, according to the 2017-2018 National Survey on Drug Use and Health (NSDUH), 7.04% of Iowans say they currently use the drug.

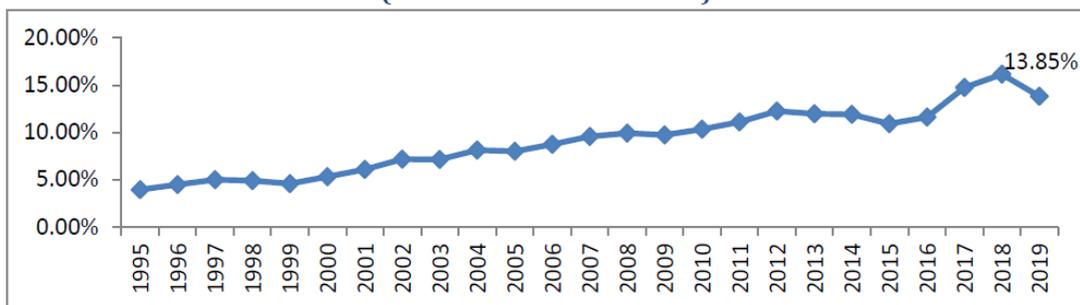
Treatment data for Clinton County shows marijuana treatment admissions have remained relatively constant.



The National Institute on Drug Abuse (NIDA) estimates 30% of users have some degree of marijuana use disorder (MUD), about nine percent will become dependent on the drug, and up to 17% of marijuana users who start using in their teens will become dependent.

Law enforcement officials have also reported that the potency of marijuana has increased in recent years. The Division of Criminal Investigation Laboratory reports that most of the marijuana it currently sees is made primarily of the buds of the female plants, versus marijuana of the past, which also contained inactive particles such as leaves and stems. The buds contain the delta-9-tetrahydrocannabinol (THC), which is the primary psychoactive chemical in marijuana. This change represents a significant increase in the potency of this drug, which is expected to have more acute personal and societal consequences. THC

Increasing THC Potency of Marijuana (Plant Material in the U.S.)

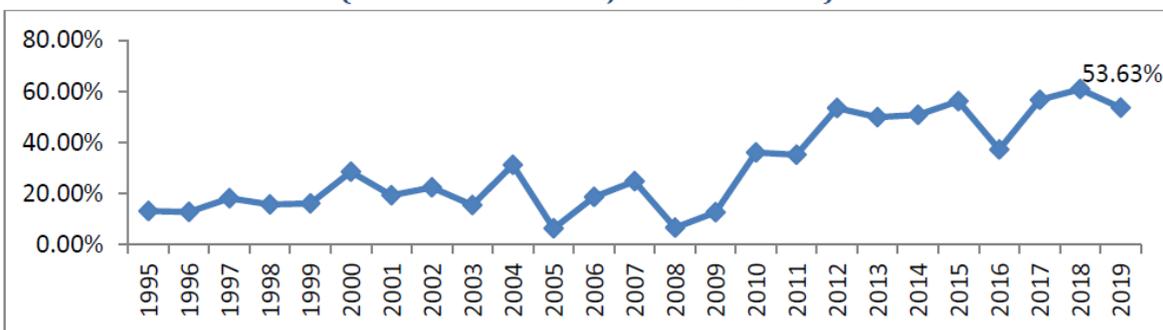


Source: [DEA National Drug Threat Assessment](#)

levels for the plant form of marijuana in the U.S. averaged less than 1% in 1972, compared to over 16% in 2018. THC levels are even higher in marijuana concentrates.

According to the DEA, new marijuana “concentrates” including hash oils, waxes, and marijuana-infused edibles may contain THC levels in excess of 89%.

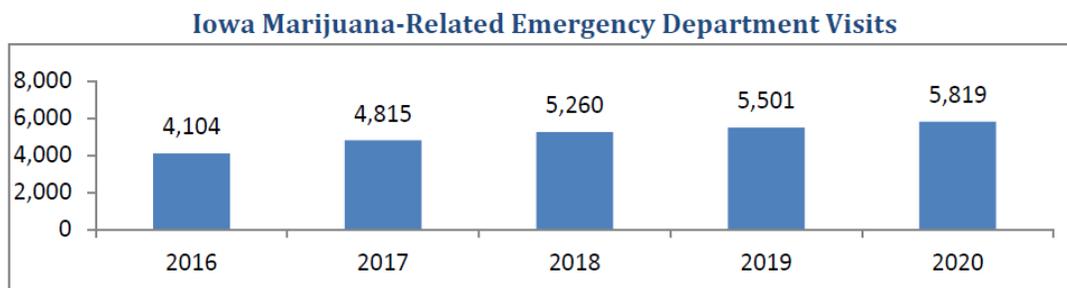
Increasing THC Potency of Marijuana (Concentrated Marijuana in the U.S.)



Source: [DEA National Drug Threat Assessment](#)

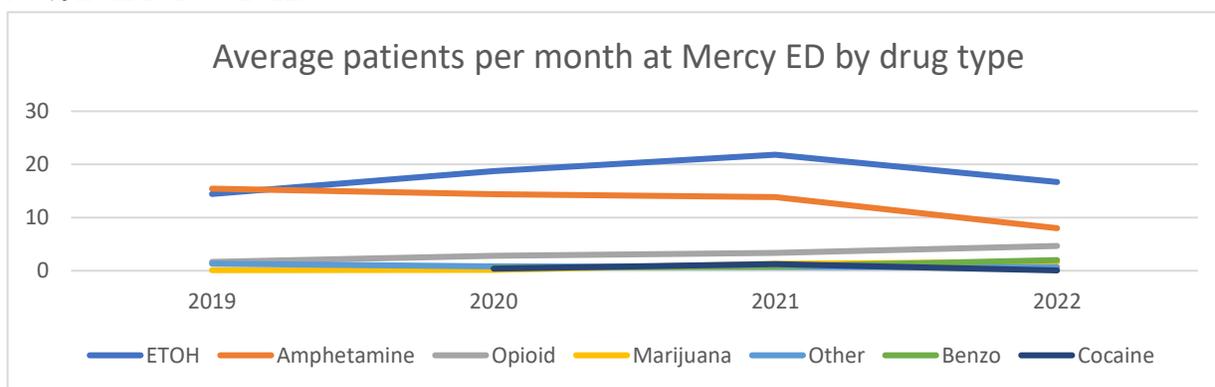
The prevalence of marijuana use is further demonstrated by the adult screenings/admissions to substance use disorder treatment programs in Iowa, as well as emergency department visits due to marijuana use. In data collected, marijuana was the most often reported primary drug of use, other than alcohol, for adults during the period of SFY 1997 – 2019. In 2020, methamphetamine surpassed marijuana as the most often reported primary drug of use for adults.

Hospital emergency department visits have risen dramatically. This data reinforces the fact that despite misconceptions by some, marijuana can be a harmful and addictive drug. The increase in potency and availability of marijuana products may also be contributing to the increase in visits to hospital emergency departments.



Source: CY, [Iowa Department of Public Health Division of Behavioral Health](#)

Data from MercyOne shows that Marijuana Emergency Department (ED) admissions increased by 1400% from 2019 to 2022.



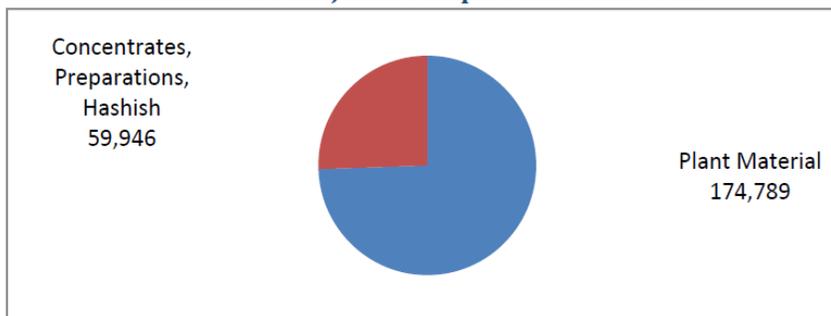
Marijuana seizures reported by the Iowa Department of Public Safety (DPS) have fluctuated in recent years. According to the DPS, marijuana submission rates are up, but there have been fewer cases involving large amounts of the drug. This may be due, at least in part, to the rise of marijuana concentrates, which typically involve smaller amounts of more potent marijuana.

Just as CBD is the marijuana compound garnering the most attention for potential therapeutic benefits, delta-9 THC (a.k.a. THC) remains the primary psychoactive ingredient identified in the cannabis plant. However, other compounds are also being synthesized and sold for consumption. These include THC-A, delta-8 THC, delta-10 THC, CBG and CBG-A. These newer compounds raise questions about their potential harm or benefit, as well as their legal status in some jurisdictions. Experts estimate there may be a total of more than 100 compounds in it, all primed for additional research.

The Iowa Youth Survey shows that marijuana is the illicit drug of choice among youth. In 2018, 11% of 11th graders reported current use. Again, attitude drives behavior. Nearly one quarter of Iowa 11th graders and 15% of 6th graders perceive no risk in smoking marijuana once or more per week. This

number has risen and then remained steady in the past ten years, coinciding with an increase in “medical marijuana” discussions and laws, and the legalization of marijuana for general use in a few states.

Grams of Marijuana Samples Tested in Iowa



Source: CY 2020, [Iowa Department of Public Safety](#)

SURGEON GENERAL WARNING

I, Surgeon General VADM Jerome Adams, am emphasizing the importance of protecting our Nation from the health risks of marijuana use in adolescence and during pregnancy. Recent increases in access to marijuana and in its potency, along with misperceptions of safety of marijuana endanger our most precious resource, our nation’s youth.³⁰

FOLLOW THE RESEARCH

Daily use, especially of high-potency cannabis, drives the earlier onset of psychosis in cannabis users.³¹

Lancet Study of “Skunk Weed”

- Daily use sees a 5x increase in psychosis
- Weekend use sees a 3x increase
- 24% of psychosis cases in the study group caused by weed alone

Mental Health Consequences: Casual Use

- Risk of depression: 1.4x (Casual?)
- Acute Anxiety
- Increased risk of anxiety disorders (Casual?)
- Worsened outcomes in bipolar disorder (Casual?)
- Risk of attempted suicide requiring hospitalization: 2x (Casual?)

Reviewed in Hall, 2014; Di Forti et al 2014, Giordano et al 2014

Pareto Principle, also called the 80/20 Rule, says that in any system, you can generally count on 80% of the effect to come from just 20% of the causes. In Colorado 75.7% of the THC products purchased in Colorado come from 6.1% of the users.³²

³⁰ <https://www.hhs.gov/surgeongeneral/reports-and-publications/addiction-and-substance-misuse/advisory-on-marijuana-use-and-developing-brain/index.html>

³¹ Di Forti M, Sallis H, Allegri F, Trotta A, Ferraro L, Stilo SA, Marconi A, La Cascia C, Reis Marques T, Pariente C, Dazzan P, Mondelli V, Paparelli A, Kolliakou A, Prata D, Gaughran F, David AS, Morgan C, Stahl D, Khondoker M, MacCabe JH, Murray RM. Daily use, especially of high-potency cannabis, drives the earlier onset of psychosis in cannabis users. *Schizophr Bull.* 2014 Nov;40(6):1509-17. doi: 10.1093/schbul/sbt181. Epub 2013 Dec 17. PMID: 24345517; PMCID: PMC4193693.

³² Ben Cort, Marijuana in the 21st Century

Taking a further look

AGE OF ONSET

9 out of 10 people who meet the clinical criteria for substance use disorders involving nicotine, alcohol or other drugs began smoking, or drinking or using other drugs started using alcohol and marijuana before they turned 18. Our current interventions have been focused on the middle school level.

Throughout 2021, additional assessment has shown that we need to start sooner to PREVENT or DELAY the onset of substance use. We have had several reports of 6th grade youth vaping THC (psychoactive chemical ingredient in marijuana). If we are implementing interventions at 6th grade but kids are



already using substances by 6th grade, we need to back up to PREVENT the initial use. A risky time identified is the summer before 6th grade. We need to complete the SPF to determine risk factors at the elementary level and determine how we can collect data and select an evidence-based program will be applicable at the elementary level. St. Vincent provided a grant in 2021 to move this goal forward.

DISPARITIES

During our CARA application process and needs assessment, we realized that we do not actual know the specific number of Black and Hispanic youth who use drugs, or the number of youth who use who identify their sexual orientation as LGBTQ+. The Iowa Youth Survey does ask questions about race/ethnicity but does not report out on the break-down of use by race. While we don't break down use by race, we are going to look to see if we can break down that data further as the Core Survey that we implement in our school district each fall. In addition, there are no questions in Iowa Youth Survey or the Core Survey that ask about sexual orientation. We estimate that about 10% of student population identifies as LGBTQ+, based on other survey responses.

In addition, we will do more investigation into determining the need to offer programing in various languages.

