

Together Promoting Healthy Youth

Marinette County, WI & Menominee County, MI

Communities that Care
Community Action Plan
2019

2019 Communities that Care of Marinette and Menominee Counties Participants

Communities that Care of Marinette and Menominee Counties is a collaborative project of public and private health, education, human service and civic organizations; local businesses; and citizens. Some of those represented include:

Area Youth and Adult Members
Aurora Bay Area Health Center - Aurora Health Care
Bay Cities Insurance Agency
Bellin Health, Marinette
Big Brothers Big Sisters of the Bay Area
CASA of Menominee County

City of Marinette Police Department

Community Action Agency, Menominee, Delta, Schoolcraft

DAR Boys & Girls Club

Extension, University of Wisconsin Madison of Marinette County

Farmers & Merchants Bank & Trust

Fincantieri Marinette Marine

Greater Marinette-Menominee YMCA

Healthy Youth Coalition of Marinette & Menominee Counties

Marinette County Health & Human Services

Marinette County Public Health Department

Marinette Municipal Court

Marinette School District

Menominee Area Public Schools

Menominee County Great Start Collaborative

Menominee County Intermediate School District

Menominee County Sheriff's Department

Nicklaus Counseling Center

Northcare Network

Northeast Wisconsin Technical College

Northpointe Behavioral Health

Peshtigo School District

Place Perfect Realty

Public Health, Delta & Menominee Counties

State of Wisconsin Department of Corrections

Statewide Realty

Stephenson National Bank & Trust

Suicide Prevention Network of Marinette & Menominee Counties

Tangles Salon

The Wellness Clinic

Trauma Sensitive Schools

Tri-City Area United Way

Tri-County Safe Harbor

Veriha Trucking

Waupaca Foundry

Zion Lutheran Church, Marinette

Communities That Care of Marinette and Menominee Counties' vision is to provide a community in which all area youth feel safe and connected; a community in which youth are empowered to be healthy, resilient, and compassionate members of society; and a community in which young people positively contribute and impact future generations.

Our Problem Behavior Reduction Goals							
Behavior (8th Grade)	2012	2014	2016	Goal (2021)			
Substance Use Outcomes							
Lifetime Use of Alcohol	44%	41%	32.6%	22% (2021)			

The Communities That Care model focuses on promoting positive youth development and preventing problem behaviors by assessing predictors both of problem behaviors and positive youth outcomes. Risk and protective factors have been identified in research in many fields, including for problem adolescent behaviors. We have identified the following risk and protective factors as our priorities for immediate action, and have set the following goals:

Our Risk Factor Goals							
Risk Factor (6th Grade)	2012	2014	2016	Goal (2021)			
Favorable Attitudes Towards Drug Use	22%	22%	23%	18%			
Poor Family Management	37%	33%	37%	41%			
Our Protective Factor Goals							
Protective Factor (8th Grade)	2012	2014	2016	Goal (2023)			
Community Opportunities for Prosocial Involvement	55%	51%	51%	65%			

Communities that Care of Marinette and Menominee Counties Community Action Plan Outline

I. EXECUTIVE SUMMARY

II. INTRODUCTION

- A. Purpose and use of the plan
- B. Prevention science overview
- C. Description of community involvement
- D. Brief summary of community planning results

III. THE COMMUNITY ACTION PLAN

- A. Community profile
 - 1. Data collection efforts & community assessment
 - 2. Prioritization process
 - 3. Existing programs in our community
 - 4. Gaps, issues and barriers of programming
 - 5. Program recommendations
- B. Community planning results
 - 1. Community-level outcomes
 - 2. Selected programs, policies and practices
 - 3. Program-level outcomes
 - 4. Preliminary evaluation plans
 - 5. Preliminary implementation plans and budgets
- C. How to use the plan
- D. Goals for Community Board Development
- E. Goals for using the Social Development Strategy for Board Development and Community Engagement

IV. PROGRAM CONCLUSIONS & RECOMMENDATIONS

- A. Conclusion of key findings
- B. Recommendations for next steps

V. ADDITIONAL WORKGROUP STRATEGIES TO SUPPORT COMMUNITIES THAT CARE (CTC)

- A. Funding
- B. Mental Health Awareness/Suicide Prevention
- C. Outreach & Maintenance
- D. Resource Assessment
- E. Risk and Protective Factor (Data)
- F. Youth Involvement

I. EXECUTIVE SUMMARY

The Community Action Plan addresses the priority risk factors identified by Communities that Care (CTC) of Marinette & Menominee Counties. CTC provides an opportunity for members of a community to work together to promote positive youth development. The system was developed by the Social Development Research Group at the University of Washington whose research has identified risk factors that predict youth problem behaviors, and protective factors that buffer children from risk and help them succeed in life.

In July 2018, members of the Community Board attended the Community Planning Workshops. They drafted community-level outcomes to help define the desired changes for the community and measure the progress toward those outcomes. CTC developed its outcome-focused plan after the Risk and Protective Factor Assessment (Data) workgroup identified two risk factors and one protective factor as priorities for community planning. These priorities include favorable attitudes towards drug use, poor family management, and community opportunities for prosocial involvement. In September of 2018, the Resources Assessment and Evaluation workgroup then completed an assessment of the youth-development and prevention resources that target these risk factors. Community Board members selected preliminary programs, policies and practices at the Community Planning Workshop and finalized their selections at a Community Action Planning meeting in November of 2018. The Resource Assessment workgroup continued to meet through May 2019, to complete program-level outcomes and implementation goals, which will measure the way in which the programs will effect change, participant outcomes and the extent of the desired change. Drafting of this document was the next step in the Communities that Care process.

II. INTRODUCTION

A. Purpose and Use of the Plan

This plan describes the results of the work completed thus far by CTC. It also describes the changes we want for our community, the programs, policies and practices that will be implemented to address the community's identified priority risk factors and the outcomes that will measure progress toward our community vision.

B. Prevention Science Overview

The CTC system was developed by Dr. J. David Hawkins and Dr. Richard F. Catalano of the Social Development Research Group at the University of Washington, Seattle. CTC is based on their research.

C. Description of Community Involvement

The Community Board is comprised of community members from public and private institutions including local government, education, health, law enforcement, local businesses, private social services, and parents and youth.

Key Leaders who have been involved in the CTC process include the Mayor of Menominee, Director of Tri-City Area United Way, Director of the Greater Marinette-Menominee YMCA, Director of Marketing and Health & Wellness of Aurora Bay Area Health Center, Vice-President of Stephenson National Bank & Trust, Director of DAR Boys & Girls Club, Marinette & Menominee County Health & Human Services, Public Health Departments, Menominee County Friend of the Court, several religious affiliations, Executive Director of the Extension, University of Wisconsin Madison of Marinette County, President of Tri-County Credit Union, Director of the M&M Area Community Foundation, Menominee County Sheriff's Department, Marinette County Sheriff's

Department, Director of Rainbow House Domestic Abuse Shelter, Wisconsin State Representative, Menominee County Probate & Family Court representatives, Marinette City Municipal Court Judge, Wisconsin Public Service Community Relations, UWGB- Marinette, Marinette County Board of Realtors and school superintendents and staff of the districts that serve youth in Menominee and Marinette Counties.

Northcare Network provided the initial funding to support a part-time Menominee County coordinator as well as training and technical support. Tri-City Area United Way provided initial funding for a part-time Marinette County coordinator. The Menominee County Intermediate School District houses CTC staff and serves as the fiscal agent.

D. Brief Summary of Community Planning Results

A key goal of the CTC process is to develop a Community Action Plan that focuses on priority risk factors and builds on the data-based assessment of a community's priorities, strengths and resources. It also addresses resource gaps, issues and barriers by recommending five Blueprints programs that identify specific desired outcomes, and discusses system change strategies that will help with implementation. The plan describes how each selected program, policy and practice will work to bring about desired changes in CTC's youth, and presents preliminary recommendations for how these programs will be implemented in the community.

III. THE COMMUNITY ACTION PLAN

This plan is intended to help guide participants at the Implementation Planning Workshop, the Evaluation Planning Workshop, and the Funding Workshop. Participants attending these workshops should use this plan to develop:

- funding strategies and reevaluate funding priorities as outcomes are monitored,
- implementation procedures for the programs identified,
- evaluation systems for selected programs by first monitoring the short term program level outcomes and then monitoring long term community level outcomes.

A. Community Profile

1. Data Collection Efforts & Community Assessment

The Risk and Protective Factor Assessment (DATA) workgroup collected and analyzed data for Marinette and Menominee counties from youth surveys done for the past 12 years and existing public data sources. The youth survey was administered to students in grades 6-12 in all schools throughout Menominee and Marinette counties. In order to get a complete picture of our community, the Risk and Protective Factor Assessment workgroup also collected data from public records to measure risk factors and problem behaviors not covered by the survey. Outcome statements identifying gaps in the programming within the two counties were drafted based on the data provided. The data addressed ages, topics, and family supports. The Community Assessment Report details the results of this work.

2. Prioritization Process

Based on the analysis of the data and input from the community, the following risk factors were identified by the Risk and Data workgroup as priorities for community attention:

- Priority #1 Poor Family Management (risk factor)
- Priority #2 Favorable Attitudes Towards Drug Use (risk factor)
- Priority #3 Community Involvement for Prosocial Behavior (protective factor)

Priorities #1 & #2 were selected for prevention action because data indicated those risk factors are significantly elevated throughout Marinette and Menominee counties. The community further voted to focus prevention efforts on priority #3 to protect youth in the late elementary and middle school age range. The transition from childhood to adolescence provides multiple challenges to our community youth and is a time when effective prevention programming can make a huge impact in the quality of their lives. Additionally, data shows a steep increase in youth health & behavior problems between 6th and 10th grade. By focusing on the selected priorities the community hopes to strategically focus efforts on creating systemic change to lower risk and increase resilience.

3. Existing Programs in the Community

Workshop participants noted that our counties serve over 60,000 people, yet only implements three evidence-based Blueprints programs: Strengthening Families; Big Brothers, Big Sisters; and Botvin's LifeSkills (6-8 grades).

4. Gaps, Issues, and Barriers

Community organizations only implement three evidence-based Blueprints programs and numerous other (non-blueprints) programs that target our three top priorities. Participants expressed concern that priority #1, in particular, has over 20 Blueprints programs available and we are only implementing one. This was the highest priority voted on among community members, but yet is the priority the group felt was not being targeted enough. It was also discussed that even though our counties are implementing a few Blueprints programs, we tend to be targeting only middle-school aged youth. All other age groups tend to be missed, especially in Marinette County.

Gaps in existing programming:

Strengthening Families:

- Strengthening Families is being replaced with Guiding Good Choices in the action plan of Public Health Delta & Menominee Counties
- Tri-City Area United Way no longer has funding to implement Strengthening Families in Marinette County and hopes to have another agency facilitate it in Wisconsin.
- The Healthy Youth Coalition will no longer be able to allot funds to this program in Marinette County after 2020. Unfortunately, even with the large amount of trained facilitators, gathering enough facilitators to hold a session has been a struggle for both United Way and Public Health. This particular program only targets middle school youth.

Botvin's LifeSkills:

 Botvin's does not have long-term funding for Marinette County. The Healthy Youth Coalition currently receives Partnership For Success (PFS) dollars to offer the program to the school districts, but does not receive additional funds to provide staff to teach the program. They will no longer be able to provide funds to continue supporting training and materials to schools after 2020.

Big Brothers Big Sisters:

 Big Brothers Big Sisters have limited staff and funding resulting in less programming and matches in the counties.

5. Recommendations

To follow the national CTC model with fidelity, we must select evidence-based programs solely from the "Blueprints" website (www.blueprintsprograms.org). According to the website, Blueprints for Healthy Youth Development provides a registry of evidence-based positive youth development programs designed to promote the health and well-being of children and teens. Blueprints programs are family, school, and community-based

and target all levels of need — from broad prevention programs that promote positive behaviors while decreasing negative behaviors, to highly-targeted programs for at-risk children and troubled teens that get them back on track. The evidence-based Blueprints model and promising programs will help us get a head start on preparing children for success with programs that have the highest standards in the field. Blueprints programs are identified based upon an initial review by the Center for the Study and Prevention of Violence (CSPV) of a program's evaluation evidence and a final review and recommendation from a distinguished Advisory Board, consisting of seven experts in the field of positive youth development.

Workshop participants spent hours researching Blueprints programs online based off of the top three priorities. After a compilation of recommended programs from each group, participants narrowed down the list to the six top programs that seem feasible for our counties. The group tried to select the programs that targeted two or more of the priorities if possible. One program targets all three priorities and is noted with an asterisk symbol (*).

- Child First
- Family Foundations
- Guiding Good Choices
- Project Northland
- Raising Healthy Children*
- Safe Dates

B. Community Planning Results

1. Community-Level Outcomes

CTC of Marinette & Menominee Counties drafted community-level outcomes, which consist of behavior and risk-and protective factor outcomes. Recommended program selection took place at workshops in June and July of 2018, with the CTC Community Board members, along with outside community members, selecting six new possible programs to address the identified priority risk and protective factors.

CTC of Marinette & Menominee Counties developed outcome goals for the following priority **risk factors**:

- Favorable Attitudes Towards Drug Use
- Poor Family Management

CTC of Marinette & Menominee Counties developed outcome goals for the following **protective factor**:

Community Involvement for Prosocial Behavior

Health & Behavior Outcomes are meant to identify the changes that need to be made in behaviors to reach the CTC of Marinette & Menominee Counties' vision. The outcomes will help measure changes in the problem behaviors of community involvement for prosocial behavior, favorable attitudes towards drug use and poor family management.

The following behavior <u>outcome statements</u> were drafted to help identify the changes that need to be made:

Desired Behavior Outcome Statement: Decrease lifetime alcohol use by 8th graders as measured by the CTC survey from the baseline of 32.6% in 2017 to 22% in five years (by 2022).

Risk-factor outcomes are meant to identify the changes CTC of Marinette & Menominee Counties needs to make in its priority risk factors to achieve the previously described behavior changes.

The following risk-factor <u>outcome statements</u> was developed to describe this desired change:

- Poor Family Management:
 - To strengthen family management by 4% by 2021 for 6th graders. As measured by the CTC youth survey it stands at 37%
- Favorable Attitudes Towards Drug Use:
 - To decrease favorable attitudes toward drug use by 6th graders as measured by the CTC survey from the baseline of 23% in 2016/2017 to 18% by 2021

Protective factor outcomes specify the desired changes CTC of Marinette & Menominee Counties wants to make in protective factors, based on the community assessment. The following protective factor outcome was drafted for the protective factor school recognition for prosocial involvement:

Community Involvement for Prosocial Behavior:
 To increase community opportunities for prosocial involvement for 8th graders from a baseline of 51% in 2016/2017 to 65% in the spring of 2023 as indicated on the CTC Youth Survey.

2. Selected Programs, Policies, and Practices

In identifying gaps and researching programming, the group chose to focus on three existing programs and implement two new programs moving forward. CTC evidence-based program selections were based upon the designated priorities of Marinette & Menominee counties.

The following five programs were chosen by the group:

- Big Brothers, Big Sisters (Existing)
- Strengthening Families 10-14 (Existing)
- Botvin's Lifeskills Training (Existing)
- Family Foundations
- Raising Healthy Children

The following describes each program:

Big Brothers Big Sisters of the Bay Area (Existing)

- A community mentoring program which matches a volunteer adult mentor to an at-risk child or adolescent to delay or reduce antisocial behaviors; improve academic success, attitudes and behaviors, peer and family relationships; strengthen self-concept; and provide social and cultural enrichment.
 - Currently, Menominee & Marinette Counties have one full time staff doing both community and school matches with one office located in the local United Way.
- Addresses all three risk and protective factors.
- Additional Cost/Funding Needed:
 - o Full-time employee costs \$31,347.68 per employee (three additional needed)
- Gaps:
 - o Current lack of staff and number of "Bigs."
 - o Funding needed for additional three full-time staff members to enhance an additional caseload, coordinate activities, and organize fundraising efforts.
 - Local advisory board (volunteers)
 - Meeting location (Ideally at no cost)

Strengthening Families (For Families with Children 10-14) (Existing)

- A group parenting and youth skills program that aims to promote good parenting skills and positive family relationships; reduce aggressive, hostile behavior, and substance abuse in adolescence; and improve family relationships through weekly parent effectiveness training and child skills-building, followed by a family session.
 - Menominee & Marinette Counties have 15 community professionals trained at this time.
 - Menominee County has funding for the entire program (including staff) through Public Health of Delta & Menominee Counties.
 - Marinette County has funding for only supplies and meals through the Healthy Youth Coalition's PFS 2015 grant through 2020.
- Addresses all three risk and protective factors.
- Additional Needs:
 - o Program Coordinator
 - o Three to four facilitators
 - o Daycare/Childcare volunteers
 - o Families to participate
 - o Training for additional facilitators
- Cost:
 - o \$1,500-\$2,000 per cycle for supplies
 - o Currently unpaid facilitators
 - o Coordinator salary
 - \$4,000 for training costs and an additional \$1,500 for trainer travel

Gaps:

- o Marinette County program coordinator to facilitate getting the programs up and running.
 - This coordinator could also be a lead facilitator to increase hours for this position.
 - Agency to "house" or take on program coordinator and program.
 - Funding needed to hire a coordinator to get the programs going in Marinette County.
- o Three to four facilitators to run the programs in Marinette County.
- o Consistent child care volunteers (at least two for each cycle) for younger children who can't participate in the program.
 - Background checks
 - First Aid Training
- o Funding for supplies in Marinette County after 2020.
- Enough families to host a program (minimum of seven to ten families needed).

Botvin's LifeSkills Training (Existing)

- A classroom-based, 3-year, middle school substance abuse prevention program to prevent teenage drug and alcohol abuse, adolescent tobacco use, violence and other risk behaviors. The LifeSkills curriculum teaches students self-management skills, social skills, and drug awareness and resistance skills.
- Addresses the risk factor "favorable attitudes towards drugs use".
- Cost:
 - o 1 day training online \$235/individual or \$3,500 plus travel for 20 person session.
 - o Materials \$6/student/year and \$125 for each teacher manual.
 - o Funding will end for Marinette County in 2020.
 - Funding is provided through NorthCare Network in Menominee County for all supplies and staff time.
- Gaps:

- o School allowed time: 15 sessions (6th grade), 10 sessions (7th grade), 5 sessions (8th grade); organized with the school principal.
- o Marinette County schools have a lack of involvement at this time.
- o Ability of schools to implement the program utilizing their staff.
- o At least three additional staff to deliver the program in Marinette County.
 - Agency to utilize educators or staff to facilitate program or replace current programming with Botvin's.
- o Funding to purchase the supplies, workbooks, and training costs after 2020.

Family Foundations

- A universal prevention program developed in collaboration with childbirth educators to improve mother, child, and birth outcomes and enhance coparenting quality among couples who are expecting their first child.
- Addresses the risk factor "poor family management".
- Cost:
 - o Total Year One Cost \$9550 based on 40 couples a year at \$239/family (plus possible dinner and childcare costs)

Gaps:

- o Six to Ten couples to run a program
- o Need agency to take on this new program.
- o Staff needed; female and male with female leader preferably being a childbirth educator, but not mandatory.

Raising Healthy Children

- A preventive intervention with teacher, parent, and child components, designed to promote positive
 youth development by enhancing protective factors, reducing identified risk factors, and preventing
 problem behaviors and academic failure. Target population of elementary, middle, and high school.
- Addresses all three risk and protective factors.
- Costs:
 - o First year costs \$56,900. This is the cost for training a staff member for 300 students. Averages out to be about \$190/student
- Gaps:
 - o Completely new program to be implemented
 - School-level buy in and approval needs to be obtained before addressing gaps in this program

3. Program-Level Outcomes

Drafting program-level outcomes consists of implementation goals (describe how the programs will be delivered in order to match the program design) and participant outcomes (describe the desired changes in knowledge, attitudes, skills or behaviors that the program will produce for participants). Community Board members drafted participant outcomes and implementation goals at the Community Planning Workshop in November 2018.

The following program-level outcomes were drafted for the selected programs:

Big Brothers, Big Sisters Program Outcomes:

 To significantly increase positive social/ Prosocial behavior for youth as measured by Baseline and Annual evaluations.

Strengthening Families (10-12) Program Outcomes:

- To significantly increase parenting skills including setting appropriate limits and building a positive relationship with child for parents of 10-14 year olds as measured by the pre/post test.
- To significantly increase parent's general child management as measured by the pre/post test.
- To significantly decrease youth rates of substance use of 10-14 year olds as measured by the pre/post test.

Botvin's LifeSkills Program Outcomes:

To significantly increase LifeSkills knowledge, substance use knowledge, perceived adult substance
use, resistance skills, problem solving skills and social interaction skills for 6th-8th graders as
measured by LifeSkills pre and post tests

Family Foundations Program Outcomes:

- To significantly increase parenting skills including setting appropriate limits as measured by the pre/post test.
- To significantly increase parent's general child management as measured by the pre/post test.

Raising Healthy Children Program Outcomes:

- To significantly increase parenting skills including setting appropriate limits as measured by the pre/post test.
- To significantly increase parent's general child management as measured by the pre/post test.
- To significantly decrease youth rates of substance use as measured by the pre/post test.

4. Preliminary Evaluation Plans

In order to evaluate program outcomes, the following evaluation plans will be used in each of the chosen programs as follows:

Big Brothers/Big Sisters of America: Evaluation of this program will be used to report the program's achievements to CTC of Marinette & Menominee Counties' community members and funding agencies. Implementation goals will be measured by the Big Brothers/Big Sisters of America case manager who will record attendance, hours logged and activities to ensure program implementation fidelity.

Strengthening Families: Outcomes for this program will be evaluated using an evaluation package which includes pre-tests, post-tests, follow-up tests, and instructions. Marinette County facilitators will turn in evaluation packages to the Risk and Protective Factor Workgroup for scoring. Menominee County facilitators through Public Health, Delta and Menominee Counties will share evaluation results with Coalition Coordinators who will then share results with the Risk and Protective Factor Workgroup.

Botvin LifeSkills: Participant outcomes for this program will be evaluated using pre-tests and post-tests with identified behaviors. Program facilitators will score these tests and provide results to Coalition Coordinators.

Family Foundations: This program will be evaluated using pre-tests and post-tests. Key outcome measures within the post-tests of this program include pregnancy-related indicators, attitudes and behaviors of mothers and fathers, co-parenting and parenting behaviors, and child developmental outcomes.

Raising Healthy Children: Outcomes for this program consist of workshop evaluations and student/parent assessments that cover specific developmental risk areas.

5. Preliminary Implementation Plans and Budgets

Big Brothers/Big Sisters is an existing program with existing trained staff. CTC's plan is to locate funding as additional staff are needed. Details concerning the gaps of the existing program will be finalized during an upcoming implementation planning session.

Strengthening Families is an existing program with existing trained staff. CTC's plan is to locate funding for training costs, a coordinator's salary, and supplies. An agency is needed to take on and coordinate the program. Details concerning the gaps of the existing program will be finalized during an upcoming implementation planning session.

Botvin's Life Skills is an existing program with existing trained staff. CTC's plan is to locate funding for supplies, workbooks, and training costs. Additional staff or an agency to facilitate the program is needed. Details concerning the gaps of the existing program will be finalized during an upcoming implementation planning session.

Family Foundations is a new program to be implemented. CTC's plan is to locate an agency to fund and facilitate the program. Staff including a male and female leader will be needed; ideally the female leader being a childbirth educator. Details concerning other gaps of the program will be finalized during an upcoming implementation planning session.

Raising Healthy Children is a new program to be implemented. CTC's plan is to connect with the Marinette County and Menominee County schools to discuss how this program could fit their needs. There is a need for a funding source and coordination of program implementation. Details concerning other gaps of the program will be finalized during an upcoming implementation planning session.

C. How to Use the Plan

The Community Action Plan is intended to help guide participants at the Implementation Planning Workshop, the Evaluation Planning Workshop, and the Funding Workshop to develop implementation, evaluation and budgeting plans for the selected programs, policies and practices. Participants developing these plans should use this plan to develop:

- Funding strategies by tying funding plans to outcomes, and reevaluating funding priorities as outcomes are monitored.
- Implementation plans for the programs identified in the plan.
- Evaluation plans for programs by first monitoring the short-term program-level outcomes and the longer-term community-level outcomes.

D. Goals for Community Board Development

We currently have 53 persons actively involved in workgroups; mostly within the cities of Marinette and Menominee. We plan to increase the number of persons actively engaged in CTC; both on the Community Board and on specific workgroups. As we move further into the funding acquisition phase of the Communities that Care model, we also plan to specifically work to increase the number of active members on the Funding Work Group. One of the ways we would like to increase participation is to offer remote participation in workgroup meetings. We will also be offering an additional Community Board Orientation in the fall of 2019 to recruit and train new potential members.

E. Goals for Promoting the Social Development Strategy

A key element of our CTC effort is to build protection community-wide by promoting the Social Development Strategy. We hope to apply this Strategy by ensuring coalition members have opportunities to use their skills, and recognizing our youth members for their contributions within CTC and the community. During this action plan period, we plan to enhance the youth-based Healthy Youth Coalition organization and their projects, in collaboration with our Youth Involvement Workgroup. This partnership will help strengthen their membership, while allowing us to assist in more widespread youth related prevention projects within the two counties.

IV. CONCLUSIONS & RECOMMENDATIONS

A. Conclusion of Key Findings

The following are the key findings of the CTC of Marinette & Menominee Counties Community Action Plan:

- To address the risk factor of favorable attitudes towards drug use, CTC of Marinette & Menominee
 Counties will enhance the Botvin LifeSkills Training program, Big Brothers Big Sisters, and
 Strengthening Families (10-14). One goal will be to find an organization to implement Raising Healthy
 Children in our community to help address this risk factor.
- To address the risk factor of poor family management, CTC of Marinette & Menominee Counties selected to add the new program, Raising Healthy Children, and will continue to focus on enhancing Strengthening Families (10-14).
- To address the protective factor, community involvement for prosocial behavior, CTC of Marinette & Menominee Counties selected Raising Healthy Children, and will continue to focus on enhancing the Big Brothers Big Sisters program.

More research and implementation of the programs mentioned above will take place over the next 1-2 year cycle(s). CTC of Marinette & Menominee Counties will continue to work on how to implement new programs, enhance existing programs, fill in gaps, and create funding plans for each program. Further details for timelines and implementation plans will be developed in the next phase.

B. Recommendations for next steps

The following are recommendations for next steps that need to be taken by those responsible for implementing, budgeting and evaluating programs in Phase Five of the Communities that Care effort:

- Develop detailed implementation plans to deliver each program with fidelity.
- Develop specific evaluation plans to monitor program delivery and participant outcomes.
- Identify future sources of funding, including local, State and Federal funding streams and local, State and Federal grants.
- Partner with school districts to develop implementation plans for Raising Healthy Children and Botvin's LifeSkills.
- Partner with outside agencies for implementing Family Foundations.

- Schedule program trainings for community staff who will be administering programs.
- Recruit and train program coordinators and necessary staff to assist in coordinating and administering program and monitoring program delivery.

VI. ADDITIONAL WORKGROUP STRATEGIES TO SUPPORT CTC

A. Funding Workgroup

• Secure general funding to maintain coalition, salary for coordinator, and implement selected programming through fundraising events and grants.

B. Mental Health Awareness/Suicide Prevention

- Develop and maintain a comprehensive mental health resource list for public reference.
- Organize community events, trainings, and movie showings around mental health awareness and suicide prevention.
- Partner with other agencies to further develop strategies around mental health awareness and prevention, and to identify additional community needs and gaps in resources around mental health.

C. Outreach & Maintenance

- Publish brochures, Quarterly Newsletters, and other publications to the community.
- Develop and maintain CTC Website, Facebook page, and other media outlets.
- Assist with planning and advertise CTC community events.
- Maintain CTC policies and by-laws.
- Recruit for membership in workgroups and offer orientations to new members.

D. Resource Assessment

- Create and maintain a Community Resource Smartphone App.
- Support and assist data collection for local 211.

E. Risk and Protective Factor (Data)

- Implement youth survey in county-wide school districts to obtain data on drug and alcohol use among youth.
- Gather county-wide data on teen pregnancy, poverty levels, alcohol outlets etc.
- Analyze data gathered for determination of highest risk areas of our area.
- Through multiple outlets, displays, and development of a video, highlight priority risk and protective factors designated by our county data and programs chosen to address those factors.

F. Youth Involvement

- Partner with the Healthy Youth Coalitions to help strengthen their membership, while allowing us to assist in more widespread youth related prevention projects within the two counties.
- Identify and implement prevention strategies and projects around substance abuse issues in the schools, community, and health system.
- Partner with other agencies to further develop strategies around harm reduction, substance abuse awareness and prevention, and to identify additional community needs and gaps in resources around substance abuse.
- Discussion of other efforts to improve policies and systems changes in the schools, community, and health system.

G. Whole Group

As a whole group, we are focusing our attention on creating and/or changing policies that target the
priorities in our communities on an as needed basis. This includes influencing the city ordinances on
marijuana sales, alcohol curbside pick up and reducing youth use and abuse of harmful substances.