ADAPT Substance Use Prevention Technical Webinar Series

PROGRAM PLANNING

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RESOURCE SUPPLEMENT

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ADAPT: A Division for Advancing Prevention & Treatment

Mission

ADAPT is a division within the Center for Drug Policy and Prevention at the University of Baltimore. The mission of ADAPT is to advance knowledge, skills, and quality outcomes in the field of substance use prevention while supporting successful integration of evidence-based strategies into communities.

Goals

- 1. Provide essential training and technical assistance services in the implementation and evaluation of substance use prevention strategies.
- 2. Promote public health and public safety collaboration in advancing substance use prevention.
- 3. Prepare the future public health and public safety workforces through student engagement in ADAPT operations and projects.

HIDTA Prevention

ADAPT supports the National High Intensity Drug Trafficking Area (HIDTA) Program by operationalizing the National HIDTA Prevention Strategy. ADAPT assists HIDTAs with implementing and evaluating substance use prevention practices within their unique communities. ADAPT also keeps HIDTA communities up to date with advances in prevention science. A variety of trainings and technical webinars to cultivate, nurture, and support hospitable systems for implementation are offered throughout the year.

Technical Assistance

Technical assistance is available to all HIDTA communities in the following domains:

- 1. Identification of Best Practices in Substance Use Prevention
- 2. Training
- 3. Implementation
- 4. Evaluation
- 5. Finance/Budgeting
- 6. Sustainability

CONNECT WITH US ON SOCIAL MEDIA!

For frequent updates from ADAPT, be sure to *follow* and *like* us on the platforms below. These platforms provide an opportunity to share resources and connect with each other.

Platform	Direct Link
facebook	Like our Facebook page today: https://www.facebook.com/ADAPT-100681361632663/
Linkedin	Follow our LinkedIn Company page for the latest insights and updates: https://www.linkedin.com/company/adapt-a-division-for-advancing-prevention-treatment
YouTube	Subscribe to our YouTube channel for informative video content! https://www.youtube.com/channel/UCbxhs3Kx69_OfAMw628PO7w/

For more information, email us at adapt@wb.hidta.org.

To be notified of upcoming webinars, products, and events, subscribe here!

ADAPT Upcoming Events

Concept Addressed	Technical Webinars (1.5 hours)	Date
Program Planning	Program Planning Fundamentals	2/18/21 2:30-4:00pm
Program Evaluation	Program Evaluation: Getting to Outcomes	3/4/21 2:30-4:00pm
Risk Factors	Interventions to Reduce Risk Factors for Substance Use	3/25/21 2:30-4:00pm
Protective Factors	Interventions to Promote Protective Factors for Substance Use	4/8/21 2:30-4:00pm
Prevention Systems	A Systems Perspective on Prevention Programs and Policies	4/22/21 2:30-4:00pm
Communication	Messaging, Elevator Speech, Media, & Social Media	5/6/21 2:30-4:00pm
Value Analysis	The Multiple Dimensions of Prevention Value	TBD
Appraising Evidence	Understanding Emerging, Promising, & Best Prevention Practices	TBD
Leadership	Leading Substance Use Prevention Efforts	TBD
Mentoring	Application of Mentoring Concepts in Substance Use Prevention	TBD
Project Management	Project Management Fundamentals	TBD

For each webinar, a corresponding 10-15 minute

Prevention Pearl will be released.

Subscribe here
for event announcements,
including our upcoming
Evidence Based Practice
Spotlight series.





The National Prevention Science Coalition to Improve Lives (NPSC) was formed as a vehicle to facilitate the use of prevention science findings and evidence-based practices to improve social conditions that otherwise contribute to poor mental, behavioral and physical health. The NPSC is composed of over 700 scientists (representing over 75 universities and organizations), educators, clinicians, practitioners, communications specialists, policymakers and advocates. Domains of interest include inequalities and disparities, mental health, substance misuse, poverty, juvenile justice, child development and welfare, violence, and police-community relations, just to name a few.

Over the past 30 years, prevention science has identified key environmental and social factors that harm health and wellbeing, along with several programs, practices, and policies shown to reduce harm. The Institute of Medicine issued a report in 2009 about what prevention science has achieved. It noted that society now has the knowledge to ensure that virtually every young person arrives at adulthood with the skills, interests, values, and health habits they need to lead productive lives in caring relationships with others. We formed the NPSC to help convey this knowledge to the public and policy arenas.

Effective strategies for preventing behavioral and health problems come from the accumulated research about the risk factors that lead to problems, and the protective factors that prevent them. Prominent among these risk factors are deleterious environmental conditions such as poverty, economic inequality, and discrimination, conditions that increase stress, conflict, and coercive relationships. Neuroscience, epigenetics and behavioral science converge in showing that stress and conflict contribute to the development of most of the psychological and behavioral problems that reduce quality of life and contribute directly to inflammatory processes that lead to poor health and premature death.

With this knowledge, prevention scientists developed programs and policies to prevent multiple problems. At least 16 family-based programs have been shown to significantly improve the quality of family life and prevent many problems (e.g., antisocial behavior, anxiety, depression, alcohol and other substance misuse, risky sexual behavior, school absences, and academic performance). Numerous tested and effective school-based interventions can prevent multiple problems, from early childhood into adulthood. In addition, more than 40 policies have proven benefits in increasing families' economic and social stability.

Extensive analyses of the costs and benefits of these programs indicate that most cost far less than reactive approaches and they save in reduced healthcare, criminal justice, and educational costs, and in increased income to recipients. And perhaps of greatest importance is the potential for the principles that underlie effective interventions, once infused into our mindsets and daily practices, to have an enduring impact on subsequent generations.

We know the science exists to improve lives on a population level. The challenge is to make this knowledge accessible to the public, as well as to policymakers and administrators in federal, state, and municipal agencies that can use it to improve public policy. Few are aware of the wealth of rigorous and replicated research findings generated by prevention science. The NPSC is committed to informing policymakers and the public about the need to widely implement effective preventive interventions and fully embrace their principles by applying them in our daily interactions with children and youth.

NPSC Closes the Gaps

NPSC addresses the major obstacles that often discourage policymakers from drawing on prevention science to formulate effective policies. Major barriers include:

- Prevention research is captured in academic journals where findings are presented in technical language. NPSC educates policymakers and the public through briefings, policy papers, op-eds, fact sheets, and other means that report the science in an accessible format;
- The volume and complexity of new research is daunting. NPSC helps policymakers to distill and analyze
 key research, making it relevant to conditions in the districts they represent or regions over which they
 have jurisdiction;
- Policy makers often lack access to scientists who can interpret new research on prevention science and

- draw connections to public policy. NPSC members include internationally prominent experts on the prevention of many of the most common and costly problems our nation contends with. We make ourselves available to policy makers and their staff for consultation and advice;
- Members of Congress and their staff lack personal relationships with researchers, which studies have found is an impediment to the use of research by policymakers. NPSC works to promote relationships between policy makers and researchers based on mutual trust, respect and responsiveness;
- Research findings often remain in silo'ed disciplines such as neuroscience or social psychology. NPSC grants policy makers access to interdisciplinary teams who can draw on various fields of study, analyze the best data, and make recommendations to strengthen specific policy proposals; and
- Policy makers have limited access to objective, non-partisan sources of information and analysis on policy. Policymakers embrace NPSC as a source of nonpartisan information and advice which is transparent, honest, impartial, and free of any preconceived policy agenda.
- There are many settings that present opportunities for "knowledge mobilization", one of 3 key goals for NPSC. We offer resources, informational materials, and expertise to governing bodies, school districts, community groups and stakeholders, primary care settings, foundations, and others that play a role in the nurturance of our children and youth.

Accomplishments

Since its creation in 2013, the NPSC has made significant progress in advancing the case for prevention. It has:

- Created a coalition of over 700 members and more than 60 nationally prominent organizations to promote prevention. A list of these organizations is available at http://www.npscoalition.org/affiliations.
- Formed the Congressional Prevention Policy Caucus to make the science accessible on Capitol Hill.
- Provided training to increase the capacity of NPSC members and scientists to advocate for prevention. We conduct workshops, trainings and resources useful for bridging science and policy.
- Hosted 20 <u>congressional briefings</u>. Topics include school violence, child poverty, prevention of violence
 against women, childhood poverty, home visiting, police-community relations, budgeting for evidencebased prevention, and the prevention of human trafficking.
- Published numerous essays in outlets such as the *New York Times*, *Huffington Post*, *Baltimore Sun*, *JAMA*, *This View of Life*, and others, plus scholarly papers and books designed to promote greater use of prevention science.
- Provided consultation and technical assistance to the federal Evidence-Based Policy Making Commission and to state and local governments and healthcare and human services agencies regarding implementation of evidence-based prevention.

Strengthening Our Impact

Scientific evidence of what works holds the key to preventing problems that can ruin lives and devastate communities. Prevention science, which aims to eliminate problems before they take root, has the ability to place children and youth on the track to lead productive and healthy lives. The extensive expertise of NPSC members across multiple disciplines enables us to advise foundations and policymakers regarding implementation of effective practices and policies with potential to prevent the entire range of mental and behavioral problems.

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WHAT IS PREVENTION SCIENCE?

Summary:

For 50 years, Prevention Science has generated practices that improve countless lives by strengthening the conditions for individuals, families, and communities to thrive. A wide range of effective programs and policies are now available to achieve these results. Strategies have been identified that fully support widespread scale-up, increase effective supports, and foster nurturing environments across all communities. By leveraging the policymaking process, we can ensure that the benefits of these advances reach all communities across our country.

Description:

Prevention science focuses on the development of evidence-based strategies that reduce risk factors and enhance protective factors to improve the health and wellbeing of individuals, families, and communities. Prevention science draws from a diverse range of disciplines—including the epidemiological, social, psychological, behavioral, medical, and neurobiological sciences—to understand the determinants of societal, community and individual level problems (e.g., trauma, poverty, maltreatment). A central tenet of prevention science is the promotion of health equity and reduction of disparities by studying how social, economic and racial inequalities and discrimination influence healthy development and wellbeing. For well over 50 years, prevention science has generated practices and policies that have improved countless lives throughout the lifespan by avoiding negative health and social outcomes (e.g., addiction, academic failure, violence, mental illness) and strengthening conditions that enable individuals, families, and communities to thrive.

The policies, programs, and practices generated by the field have been shown to reduce the incidence and prevalence of individual and community vulnerabilities and to promote healthy lifestyles, including:

- 1) Promoting daily physical activity to protect against chronic disease;
- 2) Disrupting pathways to substance use, abuse and addiction across the lifespan;
- 3) Improving academic and behavioral outcomes with the expansion of high-quality childcare and early learning and development, and promoting positive and supportive school environments;
- 4) Enhancing community-wide capacity to attenuate detrimental conditions and increase access to supportive services;
- 5) Increasing resilience, social competency and self-regulation in order to reduce impulsive, aggressive and off-task behavior; and
- 6) Supporting the development of healthy relationships to reduce interpersonal and domestic violence.

Moreover, evidence-based prevention strategies that address systemic and structural inequalities in neighborhoods, educational, and criminal justice practices have been developed and implemented.

The application of well-tested practices, strategies and policies generated by prevention science canlead to substantial cost-savings by investing in upstream strategies to avoid downstream costs. Examples of these investments include programs that prevent drug use in adolescents, reform educational practices, and support families to reduce the financial and human burden to communities. An integrated delivery system of comprehensive evidence-based prevention strategies that crosses many public sectors (e.g. education, child welfare, juvenile justice, health) is most cost-efficient and exerts wide scale benefits. Providing scientifically-based guidance and resources to legislative and administrative decision-makers will facilitate the integration of best practices from prevention science into policy.

A wide range of effective, well-tested programs and policies are available to achieve these results. Moreover, the field continues to harness the potential for prevention science to improve lives on apopulation level by further expanding upon the evidence-base. The impact on individual lives, systems (e.g., schools, child welfare), communities, and society can increase exponentially with additional investment of resources and systems to support the development, evaluation, and implementation of evidence-based programs and policies.

NATIONAL PREVENTION SCIENCE COALITION TO IMPROVE LIVES

Weblinks

1. The National Prevention Science Coalition to Improve Lives (NPSC)

www.npscoalition.org

The NPSC envisions a society that fosters nurturing environments and caring relationships for the well-being of all. This page highlights the evidence-based productions and projects used to protect individuals and their societies, including recentpublications and congressional briefings.

2. The Impact Center at the Frank Porter Graham (FPG) Child Development Institute

https://impact.fpg.unc.edu

The Impact Center at the University of North Carolina at Chapel Hill focuses on how effective prevention strategies are implemented to improve the wellbeing of individualsup to large scale communities. The three focus areas include Implementation Support, Quality and Outcome Monitoring, and Media and Networking.

3. Program for Translational Research on Adversity and Neurodevelopment

www.p-tran.com

The Program for Translational Research on Adversity and Neurodevelopment at Pennsylvania State University uses a neuroscientific approach to understand, and therefore prevent, behavioral health issues. The goal of this program is to utilize appliedresearch to impact child development, families, and communities.

4. The Coalition for the Promotion of Behavioral Health

https://www.coalitionforbehavioralhealth.org/training-modules/

The Coalition for the Promotion of Behavioral Health offers four different training modules for students, professionals, and the public created by coalition members. These include: 1) Introduction to Prevention Theory and Concepts, 2) Direct Practice in Prevention, 3) Community Prevention Practice, and 4) Policy Prevention Practice.

5. Life Skills Training Shields Teens From Prescription Opioid Misuse

https://archives.drugabuse.gov/news-events/nida-notes/2015/12/life-skills-training-shields-teens-prescription-opioid-misuse

This article summarizes three intervention given to 7th grade students from the PROSPER prevention program (or PROmoting School-community-university Partnerships to Enhance Resilience): 1) Life Skills Training, 2) All Starts, and 3) Project Alert. This overview outlines findings from a four-year follow up, notably a decrease in the use of drugs and/or alcohol.

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Substance Use Prevention Fundamentals Webinar: Program Planning

Dr. Robert G. LaChausse Department of Public Health Sciences California Baptist University



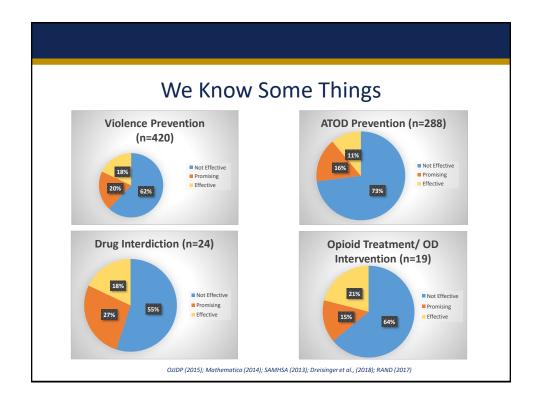






By the end of this webinar, participants will be able to:

- 1. Identify why programs are effective and others are ineffective.
- 2. Describe the program planning, implementation, and evaluation cycle.
- 3. Develop a logic model.
- 4. Create SMART program objectives.
- 5. Explain the rationale for program evaluation and measuring implementation fidelity.



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Essentials of Program Planning

- Planning is essential to getting to outcomes.
- Stakeholder involvement
- Needs assessment & SWOT analysis
- Theoretical basis for proposed program
- Clear logic model
- Agreed upon outcomes and standards

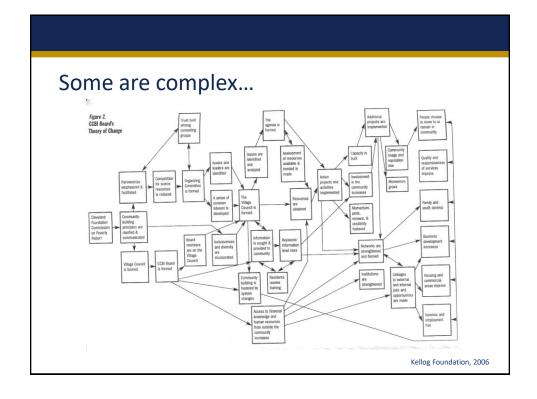
Poor planning \rightarrow Poor implementation \rightarrow Poor outcomes

Logic Models

What is a Logic Model?

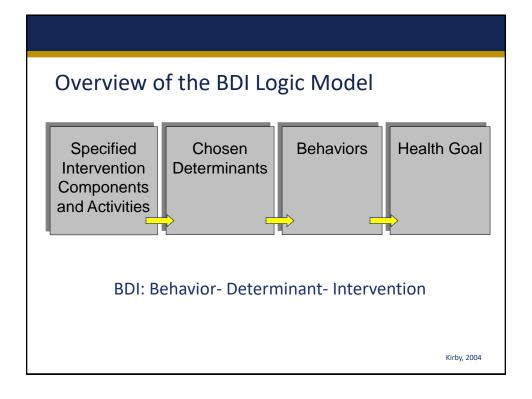
- A logic model is a visual representation of a program.
- Logic models illustrate a program's theory of change.
- Can be useful in program planning— evaluation cycle.
- Can assist stakeholders in organizational learning.

Some are simple... Activities Short-Term Outcomes -**Long-Term Outcomes** · Recruit and train parent leaders •Increase # of parents in · Increase involvement of Collaborations • Provide technical assistance to parents associated with FIP in parent leaders trained by parent leaders on their children's education • Planning Develop and disseminate · Increase parents' level of involvement in their children's educations – parents work closely with school systems and seek leadership positions materials on family involvement Increase parent knowledge on how to to parents • Build relationships with become involved in their children's education schools Develop coalitions of local Build or strengthen local · Establish FIP sustainability collaborations at each site to family involvement programs and organizations promote and sustain parent involvement Disseminate FIP materials to local and national funders and • Increase awareness of and commitment to FIP and it Build relationships with sustainability potential local or national longterm funders Coffman, 1999



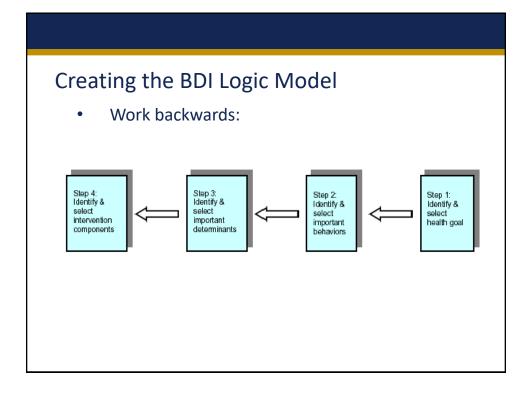
However, most logic models...

- Focus on activities rather than outcomes.
- Don't explicitly indicate the connection between program activities and outcomes.
- Aren't based on evidence of effectiveness.
- Do not allow for reflection.



Assumptions of BDI Logic Models

- Behaviors largely determine health goals.
- A variety of determinants impact behaviors.
- Program activities cannot directly control behaviors. However, programs can affect those determinants that lead to behaviors.



Creating the BDI Logic Model (cont.)

- Step #1: Identify the health goal
 - What are the key issues to be solved?
 - Prevalence?
 - Mandate of organization?
 - Resources of organization?
 - What is the greatest need?

Creating the BDI Logic Model (cont.)

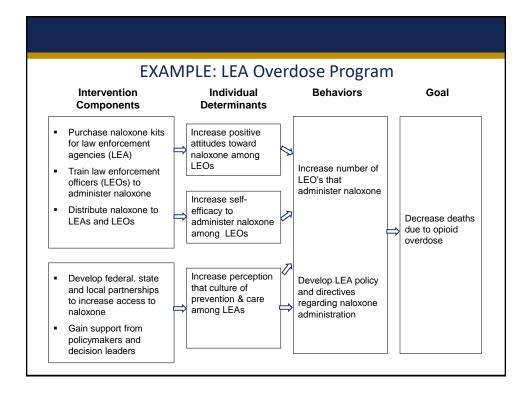
- Step #2: Identify the behaviors
 - What are the behaviors that directly cause or affect the goal?
 - Which have the greatest impact on the goal?
 - What are the most frequent or prevalent behaviors?
 - Given resources or mandates, which one's can you influence?

Creating the BDI Logic Model (cont.)

- Step #3: Identify the determinants
 - What are the risk factors?
 - What are the protective factors?
 - What evidence (theory or model) exists for these factors?
 - Consider:
 - Most strongly related
 - Strength of evidence
 - Quality of the evidence

Creating the BDI Logic Model (cont.)

- Step #4: Identify the intervention activities
 - Which interventions can have the greatest impact?
 - Are the interventions sufficiently powerful?
 - What is the evidence for effectiveness for each approach?
 - Are the activities feasible?



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Creating SMART Objectives

Writing SMART Objectives

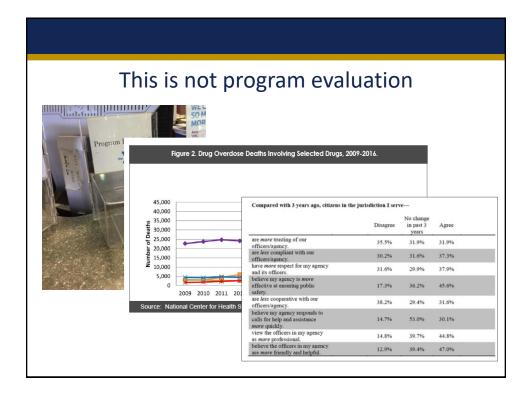
- SMART
 - Specific
 - Measurable
 - Achievable
 - Realistic
 - Time-phased

Types of Objectives

- Process
 - By March 30, 2021, the Community Action Team will have trained 250 LEOs from 3 departments in King County.
- Impact
 - By June 30, 2021, there will be a 25% increase is naloxone administration by LEOs compared to LEOs that have not been trained.
- Outcome
 - By June 30, 2022, there will be a 10% reduction in opioid overdose deaths in King County.

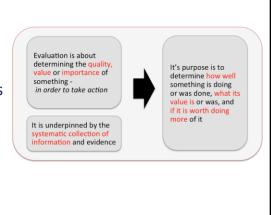
Program Evaluation

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What is Program Evaluation?

- · Evaluation defined
- Purpose of evaluation
- Determining impact or demonstrating outcomes with credible evidence.
- Only way to get PR and justify program.
- Only way to make good decisions about a program.



Why Don't We Evaluate our Programs?

- Do-Gooder Fallacy
- "If it helps just one person."
- Confirmation Bias
- · Lack of accountability
- Drowning in progress reports

Lack of Good Program Evaluation

- Staff must be willing to evaluate the program in order to improve it.
- Doing "evaluation" without really evaluating.
 - Collecting data on things not related to outcome of programs.
 - "The plural of anecdote is not evidence." (Ratzan, 2002)
 - Poor methods: one group pretest-posttest designs, low sample sizes, lack of reliability/validity in measurement tools, improper statistical techniques, bias in reporting.
- Policymakers are now interested in information about programs to make decisions.
 - Federal Evidence-Based Policymaking Act (2018)

Types of Program Evaluation

- Process
- Impact
- Outcome

Process Evaluation: Fidelity

- Implementation fidelity is ...
- The bridge between a promising approach and its impact is implementation
- Adapting or deleting program activities
- · Features of implementation fidelity
 - Quality
 - Adherence
 - Adaptations
 - Attendance
 - Dose

Impact and Outcome Evaluation

- Were there changes in the determinants, behaviors or goal?
- Where the changes due to the program or approach?
- Determining changes in KABB
- Impact on COM (goal)

Par FU DFC Evaluation: Reducing Youth Access to Marijuana Youth Marijuana Use in Past 30 days 29% 25% 25% 25% 28% Baseline 1 Year FU Comparison Intervention

9% reduction in marijuana use due to CTC program

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Moving Forward

- Hope is not a strategy.
- Focus on improving one thing in the planningimplementation-evaluation cycle
- Develop a good logic model.
- Write SMART objectives.
- Implement your program/approach with fidelity.
- Evaluate carefully and rigorously to have evidence of program impacts for decision-making.
- Use evaluation information to make program improvements.

Questions?

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References

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Participant Poll Questions

- What is your organization trying to accomplish? (open ended)
- 2. Do you feel your organization programs/approaches are effective? (yes/no)
- 3. Name one thing that you learned today that you can use in the next year to improve the effectiveness of your program/approach. (open ended)

Program Planning Resources Recommended by the Presenter

Topic	Resources
Writing Smart Objectives	https://www.adelphi.edu/fcpe/programs/online-and-blended-course-development/resources-for-planning-and-development/course-mapping-and-learning-objectives/writing-module-based-learning-objectives/
CDC Framework for Evaluation	https://www.cdc.gov/eval/framework/index.htm
Why Evaluation Matters?	http://www.childtrends.org/wp-content/uploads/2013/04/child_trends- 2007_10_01_rb_whyprogeval.pdf
Using an External Evaluator	https://nyshealthfoundation.org/wp-content/uploads/2017/11/internal-versus-external-evaluator.pdf
Measuring the Health of Your Coalition	https://www.buildinitiative.org/Portals/0/Uploads/Documents/resource-center/community-systems-development/4B%207%20Diagnosing%20the%20Health%20of%20Your%20Coalition.pdf
The Importance of Logic Models	https://measurementresourcesco.com/2016/01/11/five-reasons-your- organization-needs-a-logic-model/

^{*}Additional evaluation resources to follow in the Evaluation Resource Supplement.

Additional Program Planning Web Resources

Organization	Resources
Substance Abuse and Mental Health Services Administration (SAMHSA)	 "Plan and Implement a Program" https://www.samhsa.gov/workplace/toolkit/plan-implement-program Strategic Prevention Framework – "Planning" – pg 14 https://www.samhsa.gov/sites/default/files/20190620-samhsa-strategic-prevention-framework-guide.pdf
National Institute on Drug Abuse (NIDA)	"Chapter 2: Planning for Drug Abuse Prevention in the Community" from Preventing Drug Use among Children and Adolescents https://www.drugabuse.gov/publications/preventing-drug-use-among-children-adolescents/chapter-2-planning-drug-abuse-prevention-in-community
Community Anti-Drug Coalitions of America (CADCA)	Online Courses (launching between February 1 and March 15) "Planning" http://learning.cadca.org/