

Executive Summary

During the past three years of the Partnership for Success (PFS), the CT Department of Mental Health and Addiction Services (DMHAS) has utilized the Strategic Prevention Framework (SPF) to address the priority problem of underage drinking. Connecticut's SPF implementation has included data-driven strategic planning; data collection and data systems development; state and community capacity building for prevention; leveraging, re-directing and re-aligning statewide funding for prevention; and funding and oversight of 19 PFS sub-recipients to implement the SPF related to underage drinking prevention activities and coalition processes at the community level.

The overall goals of Connecticut's PFS initiative are to:

- 1) Reduce substance abuse-related problems in the State, particularly those related to underage alcohol use;
- 2) Prevent the onset and reduce the progression of substance abuse, including underage drinking;
- 3) Strengthen state and community-level capacity and infrastructure in support of substance abuse prevention; and
- 4) Leverage, redirect and realign statewide funding streams for prevention.

At the end of Year 3 of the CT PFS, the cumulative evidence indicates that the state has been successful in reducing and preventing underage drinking in Connecticut.

The target performance indicator for Connecticut's PFS project was exceeded. Past month alcohol use among 12 to 17 year olds dropped from 19.6% in the 2006-2007 baseline year to 17.8% in 2009-2010 as measured by the National Survey of Drug Use and Health (NSDUH), surpassing Connecticut's CSAP-approved performance target of 18.1%. According to the NSDUH underage drinking among the state's population ages 12 to 17 decreased 9.2% in the three-year period.

Over the same time period, September 2009 to September 2012, Other underage consumption indicators monitored for the PFS evaluation showed trends consistent with this GPRA target. Over the same time period, the data from the NSDUH revealed:

- A 15.2% reduction in binge drinking among 12 to 17 year olds (13.2% to 11.2%),
- A 2.7% decrease in past month alcohol use among the larger population of 12 to 20 year olds (32.8% to 31.9%),
- A 5.1% decrease in binge drinking among 12 to 20 year olds (23.5% to 22.3%).

- A 14.4 % increase in perceived harm of binge drinking (35.2% in 2006-2007 to 40.3% in 2009-2010)

Overall, the NSDUH data suggest that younger adolescents 12 to 17, who have been the primary target of the PFS, have responded to the strategies to reduce and prevent underage drinking more than older adolescents and young adults.

Other state-level data supports the conclusion that underage drinking was reduced during the PFS. The school-based Youth Risk Behavior Surveillance (YRBS) Survey data collected by the Department of Public Health showed that 14 to 18 year old students attending public high schools in Connecticut reduced alcohol use. Data includes:

- A decrease in past month alcohol use from 43.5% in 2009 to 41.5% in 2011, a 4.6% reduction.
- A decrease in binge drinking from 24.2% in 2009 to 22.3% in 2011, a 7.9% decrease.
- A decrease in the percentage of students reporting alcohol use before age 13 from 17.6% to 15.6%.

While these YRBS measures of reductions in underage drinking did not reach statistically significance, both are consistent with expectation. This pattern of reduction indicates that the changes seen in NSDUH data are likely to continue through the PFS.

There are positive changes in many of the consequence and intervening indicators measured to evaluate the CT PFS. For the overall population in Connecticut, there was a statistically significant decrease in the rate of alcohol-involved motor vehicle accidents statewide from 6.91 per 10,000 persons in 2008 to 6.29 in 2010. There was a non-significant drop in alcohol-involved 16 to 20 year old drivers from 10.5 per 10,000 to 8.9.

Arrest data specific to the target population of youth between the ages of 10 to 20 have shown differences over time. DUI arrest data from the Department of Public Safety show that the rate of juvenile DUI arrests fell to its lowest rate in eight years. The rate decreased from 18 per 10,000 youth to 14 per 10,000 youth in 2010, a 22.2% reduction that is statistically significant. The rate of juvenile liquor law violations dropped significantly from 24.4 per 10,000 juveniles in 2008 to 17.8 in 2010. As measured by the Connecticut's Community Readiness Survey (CRS) there has been a statistically significant increase in ratings of community readiness for prevention in Connecticut between 2008 and 2012. Data has shown a statistically significant improvement in key informants ratings of their community readiness since the CT SPF-SIG was first initiated in 2006. This result is consistent with the hypothesized

intermediate outcomes expected from both the SPF-SIG and PFS initiatives, and it is expected to continue to increase over time.

The table below summarizes the performance indicators monitored and measured for this evaluation report and the results to date.

PFS Progress: Performance Target and Evaluation Benchmarks

Indicator	Source	Year 1 (Baseline)	Year 2	Performance Target (Year 3)	Year 3	Evaluation Benchmark (Year 5)
Past 30 day use, 12-17*	NSDUH	19.6% (2006-07)	18.3% (2007-08)	18.1% (2009-10)	17.8% (2009-10)	17.6% (2011-12)
Past 30 day use, 12-20	NSDUH	32.8% (2006-07)	32.4% (2007-08)		31.9% (2009-10)	29.5% (2011-12)
Past 30 day use, high school students	YRBS	43.5% (2009)	NA		41.5% (2011)	39.2% (2013)
Past month binge alcohol use, 12-20	NSDUH	23.5% (2006-07)	24.3% (2007-08)		22.3% (2009-10)	21.8% (2011-12)
Past month binge alcohol use, high school students	YRBS	24.2% (2009)	NA		22.3% (2011)	21.7% (2013)
Level of statewide community readiness for substance abuse prevention	CRS	4.3% (2006)	4.6% (2008)		5.1% (2012)	statistically significant increase

Community level outcomes also showed positive results with respect to underage drinking rates. Nearly half (9) of the 19 community grantees funded through the PFS initiative were able to provide follow-up survey data, and all of them reported decreases in past 30 day use among their underage survey populations. These community-level data support the state-level evidence of a reduction in underage drinking.

These positive results are due in large part to concerted efforts at the state and community levels. The DMHAS has led the initiative to strengthen state and community-level capacity and

infrastructure in support of substance abuse prevention. Over the past three years, building on its SPF-SIG initiative, DMHAS implemented and achieved numerous key objectives, including:

- Funding 19 community-level grantees to implement and maintain the SPF process in their communities to reduce underage drinking;
- Expanding the reach of the PFS statewide by realigning Block Grant-funded Best Practice programs to adopt the SPF in 14 communities;
- Providing support to community grantees for the SPF five steps training and technical assistance;
- Convening the State's SEOW to continue data sharing and use of data;
- Contracting to develop and implement a web-based interactive data repository as a clearinghouse for Connecticut's prevention data;
- Increasing capacity for data-driven planning to continue to generate epidemiological profiles to guide local substance abuse prevention efforts;
- Utilizing epidemiologic profile data from the state and regional levels to identify priorities for substance abuse prevention and treatment;
- Obtaining a \$600,000 planning grant from CSAP to plan expansion and strengthening of the prevention infrastructure
- Disseminating substance abuse prevention epidemiological information to a wide variety of stakeholders, including sister state agencies, the Governor's Office, RACs, community-level grantees, substance use prevention and treatment providers, consumers and others through presentations, inter-agency meetings, learning communities, reports, and information briefs;
- Working to improve its performance monitoring system to more accurately capture substance abuse prevention activities of PFS and other DMHAS-funded grantees by acquiring and implementing the Performance-Based Prevention System (PBPS), a data-based software tracking system which affords enhanced data security and report capabilities;
- Expanding the use of the SPF in 156 local prevention councils to facilitate effective substance use prevention initiatives at the local level throughout the state;
- Using its epidemiological data, DMHAS successfully applied for and was awarded additional federal and State grant funding to support prevention, linking substance abuse prevention efforts to violence prevention and mental health initiatives.