

Ashtabula County Mental Health and Recovery Services Board
 CCIM4C Strategic Plan Map: Social Determinant of Health - CONNECTEDNESS

Statement of how the plan is related to at least one of Ohio’s CURES Act Goals: (1) reducing OUD deaths and (2) increasing access to treatment (including MAT):

Increase positive social connections to reduce the effects of trauma that will allow community members to thrive. [Suggestion for Future: From the theory of change, it seems like the overall goal is to reduce OUD deaths. That should be reflected here.](#)

Population of Focus:

Residents of Ashtabula County

Theory of Community Change:

If we implement the PAX Tools for Parents Community events, then we can expect increased knowledge of parents in building their children’s resilience and increased school and community connectedness.

If we increase parent education and connectedness to the schools and community then we can expect an increase in youth protective factors and a decrease in social isolation.

If we increase youth protective factors and family social connectedness in schools and the community then we can expect a reduction in overdose deaths.

Community Logic Model – Theory of Change				Theory of Action		Measurable Outcomes		
Opioid Use Disorder Outcome	Causal Factor	Root Causes	Evidence-Informed Strategy(ies)	Lead Partner for Strategy & Approximate Budget	Time Line	Outcome for the Root Causes (Shorter-term Outcomes)	Outcome for the Causal Factor (Mid-term Outcome)	Opioid Use Disorder Outcome
Reduction in OUD deaths of Ashtabula County Residents	Ashtabula County youth do not feel connected to adults in their community.	Adult residents have experienced trauma that has interfered with their ability to connect with the youth in their lives and their communities	Provide two educational community events that feature the PAX Good Behavior Game Tools for parents and community members.	The Substance Abuse Leadership Team will lead the implementation of the strategy in collaboration with community partners. The anticipated budget is \$10,000 for trainers and materials, facility, food and incentives, printing and copying, evaluation services, and staff and materials for students attending the training.	The strategy will be implemented in March and April 2019.	Adults who attend PAX Tools training will express that they feel better equipped to support and connect with youth in their lives as evidenced by 90% of participants submitting an evaluation that demonstrated new learning.	Youth will be able to identify an adult they can talk to about something important as evidenced by a 20% increase in affirmative youth responses to the corresponding questions on the Ashtabula County Youth Survey.	The number of overdose deaths in Ashtabula County will be decreased as measured by the baseline of 23 OUD deaths in 2018 as reported by the Ashtabula County Coroner’s Office
Ashtabula County Coroner’s Office reported 23 OUD deaths in 2018	53% of 2,365 youth surveyed by the Ashtabula County Prevention Coalition in 2017 did not believe there were a lot of adults in their neighborhood they could talk to about something important.	18% of Ashtabula County adults had 3 or more ACEs in their lifetime, increasing to 34% of those with incomes less than \$25,000.						

Coalition/Group Name: Substance Abuse Leadership Team
County: Ashtabula
Date Submitted: 4/12/2019
Date Reviewed: 4/30/2019

**Ohio's Community Collective Impact Model for Change (CCIM4C)
 Strategy Description Form**

Social Determinant of Health – COMMUNITY CONNECTEDNESS

Overview of the Strategy (Please answer each question using 100 words or less for each response.)

Using the results of your needs assessment as a guide, please provide a concise description of your strategy including the following ten (10) elements:

1. Who is the intended recipient (priority population) of this strategy?

Adult residents of Conneaut and Ashtabula communities who have or are interested in children aged preschool through grade 5. This will include targeted outreach to foster parents, persons providing kinship care, Head Start, and those disconnected from their schools, neighborhoods, and community.

2. How will you address the unique needs of the service population?

Residents of Conneaut and Ashtabula struggle with poverty, trauma, knowledge of and access to resources. Extensive outreach to engage adults with children will be conducted by the Substance Abuse Leadership Team and its partners in this strategy. In addition, the strategy will include activities that will appeal to those with limited resources such as providing a meal and incentives for participation.

3. What is the strategy that will be implemented?

Provide two educational community events that feature the PAX Good Behavior Game Tools for parents and community members.

4. What is the history of this strategy in the community? (i.e., Has this strategy been implemented before in the community? Is it a continuation of an existing strategy? Is it an expansion of an existing strategy? Is it a brand new strategy?)

All teachers in grades K-5 in the Conneaut and Buckeye school districts have been trained in the PAX Good Behavior Game. Kindergarten and first grade teachers in the Ashtabula City school district have also been trained. Head Start, which has satellite offices in the cities of Conneaut and Ashtabula, will be trained in January 2019. In addition, a PAX Tools Training for Community leaders will be provided in February 2019. The Ashtabula County Prevention Coalition has been working with the Ohio PAX initiative to develop and implement a PAX Tools Training for Parents.

5. What agency/organization will implement the strategy? Why is this agency/organization taking the lead on this strategy?

The Substance Abuse Leadership Team will implement the strategy in collaboration with the MHRS Board, Ashtabula County Prevention Coalition, Ashtabula County Trauma and Resilience Committee, Schools, Children Services, Catholic Charities, Elevation, AIM Higher Ashtabula, YMCA, Schools, and Head Start. The Substance Abuse Leadership Team is

taking the lead because it addresses the Team's Strategic Plan Goal of increasing positive community connectedness to reduce the use of opiates in Ashtabula County

6. How will this strategy be funded and what is the anticipated cost associated with the strategy? (Please specify source of funds – grant, general revenue, in-kind support, etc.; funding agency/organization if applicable; etc.).

To date, PAX Teacher Training has been funded by the 2018-2019 Ohio Cures Initiative and the Ohio Department of Mental Health and Addiction Services. The Ashtabula County Mental Health and Recovery Services Board spent \$5,655 in Fiscal Year 2018 to expand teacher training in PAX. The MHRS Board has spent \$42,781 of state and local dollars this fiscal year to expand the implementation of PAX in Ashtabula County. In addition, the Board has allocated \$15,000 in levy funds to provide additional trainings in January 2019.

At this point in time, 253 elementary teachers have been trained in Ashtabula County. Additionally, the Ashtabula County Prevention Coalition Coordinator and Community Counseling Center Prevention Specialist are trained as PAX Partners.

The funding of this strategy to provide PAX Tools to parents in two Ashtabula County school districts has been provided through the implementation grant. The Substance Abuse Leadership Team will engage all partners to provide in-kind services to this project via outreach and marketing of these events.

The Substance Abuse Leadership Team views the implementation of these trainings as pilot projects to learn and refine what works in engaging parents to connect to their schools and community. The Ashtabula County Mental Health and Recovery Services Board will work with all partners involved in this project to continue the training in other school districts throughout the county. The Ashtabula County Prevention Coalition Coordinator and Community Counseling Center Prevention Specialist are submitting applications to attend the PAX Tools Facilitator Training. If accepted, they will be able to continue these trainings at a significant cost savings.

Anticipated costs for this project are \$10,000. These include: trainer and training materials for two events; facility for two events; food for 120 participants; incentives for participation; printing and copying for outreach materials;- evaluation Services; materials for crafts for students who attend the training; and compensation to an agency that provides staff for the child activities for the event.

7. Where will it be implemented?

The events will be located in the cities of Ashtabula and Conneaut. The intent is to have them take place at local schools or other facilities that are easily accessible to the community members.

8. When will it be implemented?

The strategy will be implemented in March and April 2019.

9. How will it be implemented?

Members of the Substance Abuse Leadership Team conferred to determine locations and dates of the two trainings. Meeting will be conducted between Substance Abuse Leadership Team members and representatives from Ashtabula County Prevention Coalition, Ashtabula County Trauma and Resilience Committee, Schools, Children Services, Catholic Charities, Elevation, AIM Higher Ashtabula, YMCA, Schools, and Head Start to develop marketing materials and plans to outreach to persons who are not connected to their schools or communities. Donations will be sought from businesses in the two communities to assist in incentivizing the event. The two events will be held in March and April of 2019. The events will include an evaluation of the event by the attendees and outreach to persons who have

attended to seek their involvement in planning and implementing future events. Results will be reviewed and utilized by the Substance Abuse Leadership Team and its partners to plan additional events that result in increased community connectedness and resilience.

10. What challenges and/or barriers do you expect to encounter when implementing the strategy?

A challenge will be to determine the most effective day and times of the week to provide the event that would result in maximizing attendance. In addition, the Leadership Team and its partners will be tasked with determining the best way to market the events and the most meaningful incentives that will ensure the events are appealing to parents who typically do not attend events or connect with the schools.

Demonstrate a Conceptual Fit with the Community's Opioid-Related Priorities (250 words or less)

How is the strategy relevant to the data from your needs assessment?

Ashtabula County has identified social isolation and a lack of connectedness as its wicked problem that it's Goal for Resilient and Thriving Communities will address. Ashtabula chose this focus because various community needs assessments and the Thrive assessments indicated this issue exists throughout the county and is a risk factor for developing a substance use disorders and also a barrier to accessing treatment and other services once an individual has developed a substance use disorder.

Several sources of data were used to support the selection of the wicked problem including the following:

- The Ashtabula County Coroner's Office reported an increase in suicide completions in Ashtabula County from 18 in 2016 to 23 in 2017.
- The 2017 Robert Wood Johnson County profile data indicates that 19.6% of Ashtabula County residents live in poverty and that 29% of children live in poverty.
- 53% of 2,365 youth surveyed by the Ashtabula County Prevention Coalition in 2017 did not believe there were a lot of adults in their neighborhood they could talk to about something important. causal
- The 2016 Community Readiness Assessment completed by the Ashtabula County Prevention Coalition indicated that the community's readiness to address the misuse of prescription pain medications was rated as 'vague awareness' whereby some of the community believed there is a local problem, but there was no immediate motivation to address the problem. Persons interviewed noted there is little concern about the misuse of prescription pain medications by underage youth unless their family has been directly affected by it.
- The United Way 2016 ALICE Report of Economic Viability rated Ashtabula County as 36 for community resources on a scale of 1- worse to 100-better.
- According to the 2016 County Health Needs Assessment the following were reported:
 - 7% of Ashtabula County adults considered attempting suicide. 15% of adults had a period of two or more weeks when they felt so sad or hopeless nearly every day that they stopped doing usual activities.
 - Ashtabula County adults indicated the following caused them anxiety, stress or depression: financial stress (44%), job stress (28%), death of close family member or friend (20%), other stress at home (20%), poverty/no money (20%), marital/ dating relationship (14%), fighting at home (12%), sick family member (12%), unemployment (10%), caring for a parent (8%), family member with mental illness (5%), divorce /separation (4%), not having enough to eat (3%), not feeling safe in the community (2%), sexual orientation/ gender identity (2%), not feeling safe at home (1%), and not having a place to live (<1%).

- **18% of Ashtabula County adults had 3 or more ACEs in their lifetime, increasing to 34% of those with incomes less than \$25,000.**

Demonstrate a Practical Fit: Theoretical “if-then” Proposition

Please include the “if-then” proposition for this strategy from your coalition/group’s strategic plan map.

If we implement the PAX Tools for Parents Community events, then we can expect increased knowledge of parents in building their children’s resilience and increased school and community connectedness. If we increase parent education and connectedness to the schools and community then we can expect an increase in youth protective factors and a decrease in social isolation. If we increase youth protective factors and family social connectedness in schools and the community then we can expect a reduction in overdose deaths.

Demonstrate a Cultural Fit (250 words or less)

Based on the results of your needs assessment, how does this strategy align with the needs of the population? Think about the following:

- Why are you choosing this specific strategy for this specific population?
- How does your workforce/partnerships/collaborations for this project reflect the needs of the population?

Schools have already invested significant human resources in implementing the PAX Good Behavior Game which is resulting in positive gains in student’s behavior. Based upon our needs assessment, we are aware of the many challenges faced by parents specifically in the poorer parts of the county. Providing parents with the PAX tools will increase their ability to work with their children in an effective manner. Increasing the connection of parents to schools and their communities can reduce trauma and social isolation. Expanding access to pro-social events results in increased resiliency skills for parents and their children.

Demonstrate a High Likelihood of Sustainability within the Community (250 words or less)

How will the opioid ecosystem sustain this strategy in the community? Please consider the following resources: time, money, human resources, political support, etc..

The Substance Abuse Leadership Team’s opioid ecosystem includes a Connectedness Committee that is charged with creating a community where all people are connected to the people, processes, and systems they need to lead meaningful and productive lives. The ecosystem also includes a Communication Committee that will assist in marketing and promoting the events. The Leadership Team and Connectedness Committee will sustain this initiative in several ways. Evaluation results of this strategy will be utilized to identify parents and community members willing to provide input and assist in planning future initiatives. In addition, lessons learned through the two events will be reviewed and used to develop continued strategies to educate parents and increase social connections to the schools and communities. Representatives of city government and the county commissioners are included in the Substance Abuse Leadership Team to ensure political support. The Team has significant partnerships with schools, grass root organizations, committees that share a similar mission, and organizations dedicated to youth, family, and persons living in poverty. These individuals and organizations are committed to providing in-kind support to this and future strategies.

Demonstrate Effectiveness (What is the evidence that the strategy will work?)

A. If you are implementing a **workforce development or infrastructure development strategy**, please place an “X” next to the description that best fits the strategy:

- This is not a workforce development of infrastructure development strategy.
- Expand evidence-based treatment for opioid use disorder, including MAT and behavioral therapies.
- Improve education in treatment of opioid use disorder for health care providers.
- Increase access, availability, and provision of evidence-based resources for women with opioid and/or other substance use disorders who are pregnant and/or newly parenting
- Increase access, availability, and provision of high-quality, evidence-based pain care that reduces the burden of pain for individuals, families, and society while also reducing the inappropriate use of opioids and opioid-related harms
- Improve access, availability, and distribution of overdose-reversing drugs
- Improve access, availability, and distribution of safe injection equipment or other harm reduction strategies.
- Improve access to comprehensive and sustainable (i.e., beyond one day events) drug take-back programs.
- Increase access, availability, and provision of supportive housing for individuals in recovery
- Increase access, availability, and provision of mental health consumer organization groups to provide peer recovery support (e.g., self-help, advocacy, stigma reduction, etc.)
- Increase the availability and quality of long-term recovery supports for individuals in or seeking recovery from addiction.

B. For **any other strategy**, please describe the evidence or support for documented effectiveness to select the intervention and include it in the CCIM4C strategic plan. And complete the supplemental document.

1. Is the strategy included in Federal registries of evidence-based interventions?
 - a. Yes
 - b. If yes, please provide supporting documentation.

“The PAX Good Behavior Game is an Evidence-based Practice that comes recommended by the Substance Abuse and Mental Health Service Administration (SAMHSA), the Washington State Institute for Public Policy, and the Institute of Medicine. By strengthening inhibition, extending self-regulation, and improving social emotional scaffolding, PAX GBG creates changes in electrical, neurochemical, neural connectivity, and epigenetic make-up that strengthen inhibition, extend self-regulation, and improve social emotional scaffolding. PAX is the only classroom-based strategy shown to cause the expression of brain derived neurotrophic factor (BDNF) genes that serve as adaptive protections for young people through adulthood and into future generations.

The strategies in PAX GBG have been subjected to multiple randomized control trials and numerous peer-reviewed studies. PAX has shown to provide numerous short-term and lifetime benefits.”

The Washington State Institute for public policy estimates that the chance the program produces benefits greater than the costs is 70%.

- c. If no, please continue to question 2.
2. Has the strategy been reported (with positive effects on the priority targeted outcome) in peer reviewed journals?
 - a. Yes or No
 - b. If yes, please list supporting documentation. Please type your response here or you may attach any additional information.
 - c. If no, please continue to question 3.
3. Does the strategy have documented effectiveness supported by other sources of information and the consensus judgement of informed experts as described in the following set of guidelines, *all of which must be met*:
 - a. Guideline 1: The intervention is based on a theory of change that is documented in a clear logic or conceptual model.

- i. Please provide supporting documentation. Please type your response here or you may attach any additional information.
- b. Guideline 2: The intervention is similar in content and structure to interventions that appear in registries and/or the peer-reviewed literature.
 - i. Please provide supporting documentation. Please type your response here or you may attach any additional information.
- c. Guideline 3: The intervention is supported by documentation that it has been effectively implemented in the past, and multiple times, in a manner attentive to scientific standards of evidence and with results that show a consistent pattern of credible and positive effects.
 - i. Please provide supporting documentation. Please type your response here or you may attach any additional information.
- d. Guideline 4: The intervention is reviewed and deemed appropriate by a panel of informed prevention experts that includes: well-qualified prevention researchers who are experienced in evaluating prevention interventions similar to those under review; local prevention practitioners; and key community leaders as appropriate, e.g., officials from law enforcement and education sectors or elders within indigenous cultures.
 - i. Please provide supporting documentation. Please type your response here or you may attach any additional information.

Evaluation

1. Please describe your intervening variable and your outcome variable and how you will track outcomes and demonstrate success. Please indicate any quantitative or qualitative measures you will be tracking.

The intervening variable is a family’s lack of connection to schools and community increases the misuse of opioids. The outcome variable is the number of adults who attend the PAX Tools events and the number who agree to volunteer for future planning and events. Measures that will be tracked include the number of adults attending each event and stay for the entire presentation. A qualitative survey will be solicited from participants at each event. The survey will include questions that address participants’: perception of value of the event, satisfaction with event, willingness to attend similar or other events that increase connectedness, interest in providing input for or volunteering at future events and outreach activities, willingness to be part of a mailing list for future plans.

2. Who will collect and analyze data?

The Ashtabula County Mental Health and Recovery Services Board will be responsible for data collection and analysis.

3. How the data will be shared and with whom?

A written report of findings will be shared with: Ashtabula County Mental Health and Recovery Services Board, Substance Abuse Leadership Team, Connectedness Committee, Communication Committee, School Superintendents, Ashtabula County Prevention Coalition, Ashtabula County Trauma and Resilience Committee, Ashtabula County Family and Children First Council, Parents from the event who identified willingness to provide input and plan future events.

4. What costs are associated with the evaluation and how will the evaluation be funded? If there are no costs, please explain why there are no costs.

The Ashtabula County Mental Health and Recovery Services Board will provide in-kind administrative support to the Evaluation of the project. In addition, the Board will utilize \$750.00 of grant funding to pay its contract evaluator to collect and analyze the data and prepare a written report of findings.