Expanding and Enhancing Early Intervention Services Committee Meeting

May 15, 2018
Agenda:
1. Overview of Engaging Stakeholders Committee
   • Next Four Meeting Topics
   • Creating Shared Expectations
2. Principles of Prevention
   • Risk and Protective Factors
   • Harm Reduction and Risk Categories
3. Effective Prevention Strategies
Monthly Committee Meeting Structure

- Engaging Stakeholders & Building Capacity
- Expanding & Enhancing Early Intervention Services
- Multimedia AOD Prevention Strategies
- Expanding the Continuum of AOD Education

Ongoing Committee Updates and Information at:
https://shs.uconn.edu/aodstakeholders/
Outline of Our Next Four Meetings

Meeting 1: May 2018
  • Create Common Language and Shared Understanding
  • Review of Prevention Framework

Meeting 2: June 2018
  • Create a Shared Vision and Mission for the Overarching AOD Stakeholders Initiative

Meeting 3: July 2018
  • Review of the Worksheet from the Breakout Session
  • Create Specific Objectives and Goals for this Committee

Meeting 4: August 2018
  • Best Practices and Examples Specific to the Goals of this Committee
Introductions

1. Name
2. Department/Position
3. How does alcohol and other drug use show up in your work or in your interactions with students?
Creating
Shared Expectations

1. Establish a baseline understanding and common language
2. Be patient with each other as we learn together
3. Success depends on participation - Share your unique perspective
4. Stay open to new ideas and new ways of doing things
5. Be positive and non-judgmental
6. Ask “what’s possible?” and keep asking
7. Utilization of a parking lot for off-agenda or future topics
8. Check in at the end of each meeting

LET THE IDEAS BEGIN
Risk Factors and Protective Factors

Risk Factors = Factors associated with greater potential for harmful AOD use

Examples:
- Family history of addiction
- Began drinking/using at young age
- Co-occurring anxiety or depression
- Normalized use in social setting (especially high-risk use)
- Access to substances
- Affluence
- Trauma history
- Experiencing a life transition
- Impulsivity
Risk Factors and Protective Factors

- Protective Factors = Factors associated with reduced potential for harmful AOD use

Examples:
- Strong social support
- Healthy family dynamics
- Positive self-image
- High self-control
- Use initiated later in life
- Access to quality healthcare
- No history of anxiety/depression
- Little access to substances
- Use not normalized in social setting
Prevention Programs should:

1. Enhance Protective Factors
2. Reduce Risk Factors
3. Reinforce a Consistent Message

Core Elements of Prevention Programs:

1. Research-Based
2. Repeated and Reinforced
3. Skill-Based
4. Personally Relevant
5. Evaluated
Harm Reduction: Individual Level

Meets people at their level of readiness to change their drinking and other drug use

Provides information and support to help people achieve their individually chosen goals of:

- Less Harmful AOD Use
- Continued Low-Risk Use
- Reduced Use
- Quitting Use Altogether
Harm reduction includes policies, programs and practices that aim to keep people safe and minimize death, disease, and injury from high risk behavior, especially substance use.

**Examples:**
- Space capacities
- Social event registration processes
- Policies that prohibit items that facilitate high-risk use
- Good Samaritan Statements/Policies
- Stigma reduction efforts
- Substance-free programming on weekends
- Class attendance policies
- Scheduling Friday morning classes
- Quiet hours/noise ordinances
- Safe ride programs
- DUI checkpoints
Harm Reduction by Level of Risk Category

Drinkers’ Pyramid

- Alcohol Dependent: 5%
- At-risk Drinkers: 20%
- Low Risk Drinkers: 35%
- Abstainers: 40%

Source: Center for Substance Abuse Treatment (SBIRT)
UConn First Year Students: Drinkers’ Pyramid

- 62% Nondrinker/Abstainer
- 18% Moderate Drinker
- 14% Heavy Episodic Drinker
- 5% Problematic Drinker

Source: UConn Fall 2017 Everfi AlcoholEdu Data
Prevention Strategies That Work

- **Community-Based Processes** - strengthen resources such as community coalitions to prevent substance use and misuse, and to deliver effective prevention and treatment services.

- **Information Dissemination** - increases knowledge and changes attitudes through communications, including media campaigns and lectures.

- **Prevention Education** - teaches participants important social skills, including resisting pressure to use drugs, looking at the intent behind advertising, or developing other skills used in making healthy choices.

- **Identification of Problem and Referral to Services** - determines when high risk behavior or use of alcohol, tobacco, and other drugs requires education or other intensive interventions.

- **Positive Alternatives** - provides constructive and healthy ways to enjoy free time and learn skills.

- **Environmental Strategies** - focus on policy, access and enforcement to reduce risk factors and increase protective factors.
Questions?

What’s your one takeaway?

What, if anything, needs further clarification?