Partners for Prevention in Allegany County

Allegany County Comprehensive Substance Abuse Prevention Plan

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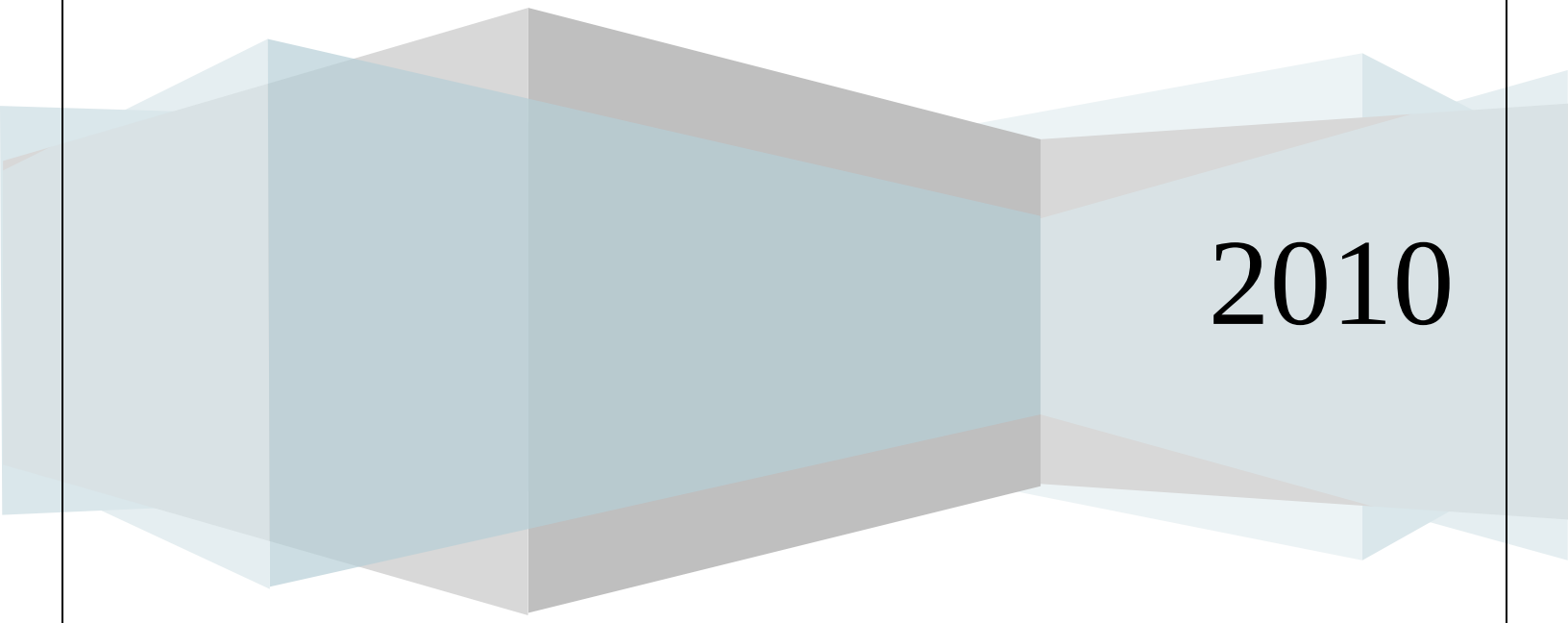


2010

EXECUTIVE SUMMARY

Background and History

This Comprehensive Substance Abuse Prevention Plan is a product of the Allegany County Drug Free Communities Project that has resulted in the establishment of Partners for Prevention in Allegany County (PPAC). PPAC is a community coalition that uses collaboration among agencies, organizations, and individuals from every sector of the community. PPAC is one of 850 Drug Free Community Coalitions nationally that operate under the Strategic Prevention Framework (SPF) developed by the U.S. Substance Abuse Mental Health Services Administration (SAMHSA). The SPF is built on a community-based risk and protective factors approach to prevention and a series of guiding principles that can be utilized at the federal, state/tribal and community levels.

This comprehensive plan, following the SPF, utilizes a data-driven approach, that is, need is defined in terms of risk and protective factors and then measured using valid and reliable measures. A resource assessment provided an analysis of existing programs and services that potentially reduce risk factors or increase protective factors. The comparison of resources to identified risk and protective factors provided the basis for a gaps analysis. Needs assessment, resource assessment, and gaps analysis were used to determine priorities for developing prevention strategies. Once potential strategies were identified, Prevention Action Workplans (PAW) are developed to provide a blueprint for implementing evidence-based strategies.

PPAC was formed to conduct strategic planning and to mobilize every sector of the community to implement collaborative prevention strategies. PPAC provides technical assistance to members of the coalition. Data collected for the strategic planning process is made available to agencies preparing grant applications for prevention strategies consistent with this Comprehensive Plan.

Status of Youth Risk & Protective Factors and Substance Use.

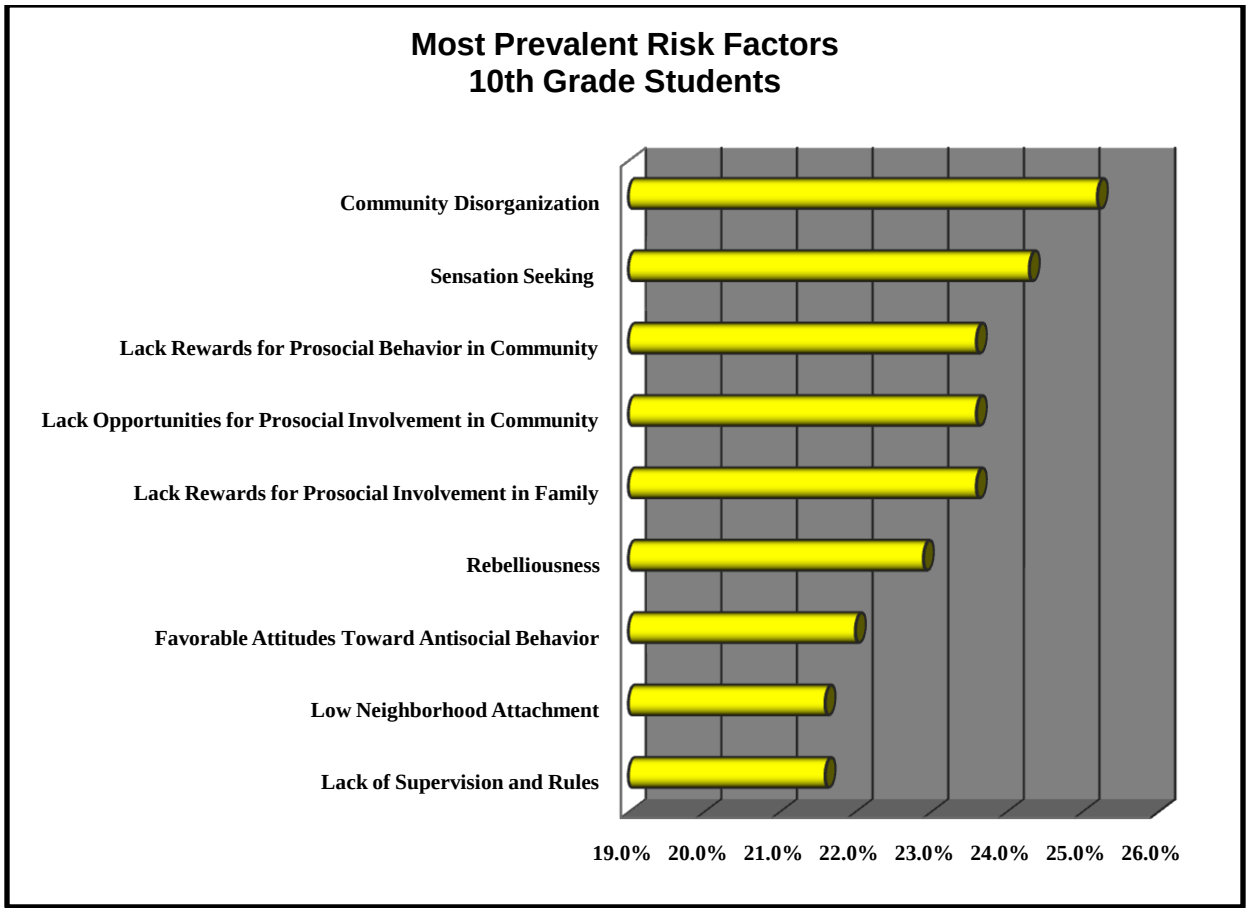
In 2009, the Risk and Protective Factor Survey was repeated for the fifth time since 2001 (see attachment I). Analysis of student responses indicate significant improvement in overall risk with more young people having no significant risk factors and fewer young people showing extreme risk with multiple factors.

Protective Factors/Assets—Most Allegany County youth benefit from protective factors such as *Involvement in Religion, Belief in Moral Order,* and *Perceived Opportunities* and *Rewards for Positive Involvement in their schools*. Compared to the regional norms, far fewer Allegany students are at risk from lack of *Attachment to School*, *Antisocial Behavior* or *Interaction with Antisocial Peers*.

Reduced Risk Factors—*Sensation Seeking* and *Impulsiveness*, two of the most prevalent risk factors for several years, decreased substantially among middle and high school students in 2009.

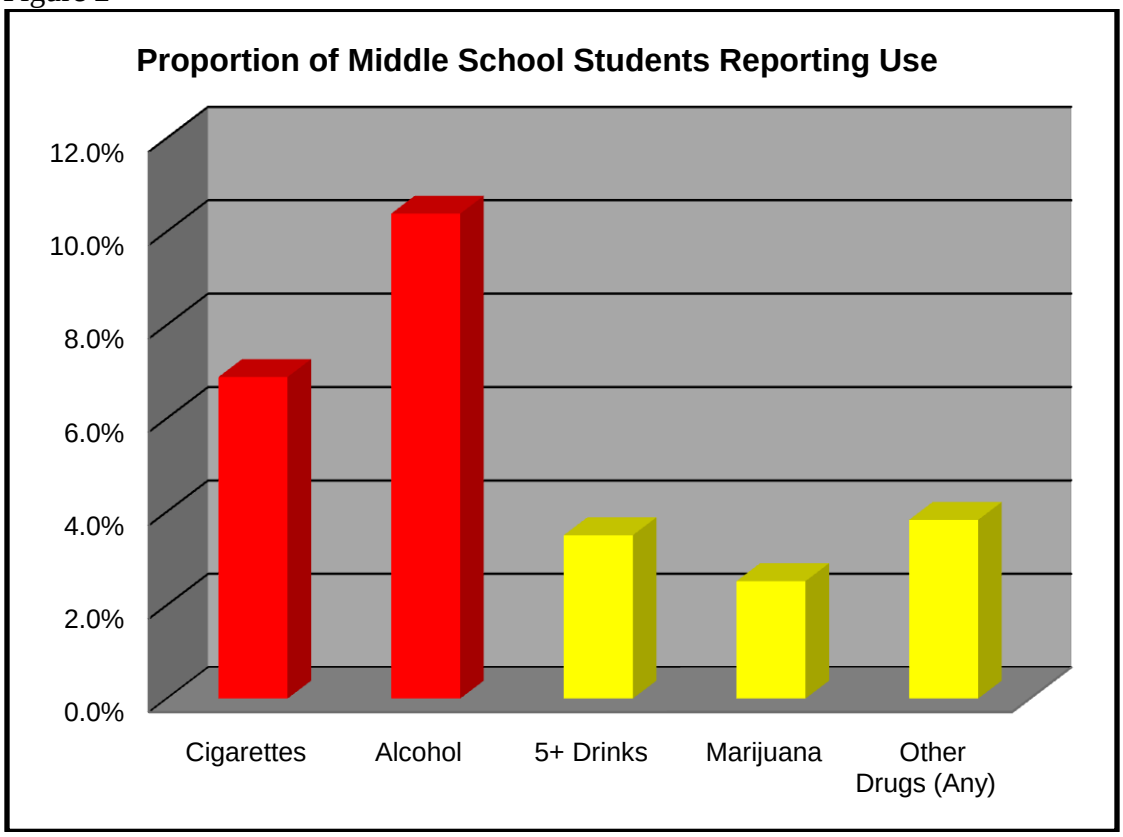
Most Prevalent Factors—community and family factors remain problematic. The most prevalent risk factor among middle school students in Allegany County Schools was *Community Disorganization* with more than one in five (20.2%) scoring above the risk level on the 2009 survey. *Family History of Antisocial Behavior* (19.1%) and students' *Personal Transition and Mobility* (17.9%) were also prevalent risk factors. In terms of protective factors, Allegany County middle school students were most likely to lack *Rewards for Prosocial Involvement in the Community* (16.1%), *Opportunities for Prosocial Involvement in the Community* (15.1%), and *Attachment to the Family* (10.7%).

Figure 1



Prevalence of Substance Use—Middle school students reported decreased binge drinking and decreased use of marijuana while high school students showed rates of use of alcohol and marijuana comparable to 2005. Overall, the pattern of reported substance use is below recently reported national surveys and, with exception of cigarettes, showed substantial decreases in reported use. In Allegany County schools, as in most of upstate New York, alcohol remains the drug of choice.

Figure 2



Core Measure—PPAC and SAMHSA monitor four core measures as the indicators of community-level substance use. The Government Performance and Results Act (GPRA) for the Drug Free Communities Support Program requires reporting levels of: 1. Recent Use of Substances; 2. Perceived Risk of Harm from Use; 3. Perceived Parent Disapproval and 4. Age of First Use. Each Core Measure is specific to alcohol, cigarettes and marijuana. Analysis of the core measures in Allegany County indicates substantial improvement for most grade levels on most measures Since 2005, the year before the Allegany County Drug Free Communities Project started, 6th graders showed improvement in 10 of the 12 measures; 8th graders showed improvement in 10 of 12 measures and; 10th graders showed improvement in seven of 12 measures.

6th and 8th grade students showed improvement on 10 of 12 measures of substance abuse.

Status of the Coalition

Allegany County has a history of collaboration between public and private agencies in all areas of human services, business, education, health, faith and public safety. Prior to the formation of PPAC under a Drug Free Community Grant in 2005, youth-serving agencies in Allegany County were represented on the Comprehensive Youth Unified Services (CYUS) coalition with the mission of planning youth services including substance abuse prevention. However, CYUS had limited resources and no funding for staff or consultants.

With the Drug Free Communities Grant, PPAC was able to engage a full-time Coordinator and utilize the services of a Planning and Evaluation Consultant. In addition, the grant provided limited funds for logistical support for planning activities and community mobilization. The Drug Free Communities Grant provides critical resources to establish a coalition consisting of a Key Leader Group, to provide input and support, and several sector workgroups to identify and implement prevention initiatives. Sector workgroups selected strategies to implement. In some cases, other workgroups, e.g. environmental strategies, underage drinking, consist of members of several sectors who work to implement strategies addressing specific issues. The Coalition provides the opportunity for members of different sectors and, in some cases, organizations in the same sector, to collaborate on strategies that meet common goals.

Since its inception in 2005, PPAC has overseen the establishment of several community-based groups consisting of individuals with specific interests in youth issues related to the coalition's mission. For example, the School Nurse Network was formed in response to the perceived lack of communication and barriers between schools and communities. Nurses from all school districts now participate in bridging the gap as well as promoting awareness of underage drinking, dangers of drugs and other risky behavior. The High Risk Drinking Prevention Committee came about through collaborative efforts to reduce high risk drinking on college campuses. A committee with representatives from PPAC, Alfred University, Alfred State College, and the Alfred Community Coalition meet regularly to address the common needs of their college students.

Using This Plan

This document contains detailed information about the steps in developing the comprehensive prevention plan including assessing need, identifying resources, establishing priorities and identifying prevention action workplans. It also includes detailed statistical information that measures the current status of substance use and risk and protective factors among Allegany County youth. The sections of the Plan follow the steps in the Strategic Prevention Framework.

It is the intent of PPAC and this Plan to provide local government, schools, community-based organizations and members of the community with a blueprint to preventing substance abuse among young people in Allegany County. The following report reflects the current accomplishments, challenges, and future substance abuse prevention initiatives.

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2010 COMPREHENSIVE SUBSTANCE ABUSE PREVENTION PLAN

INTRODUCTION

Coalition History
Founded in 1998, PPAC is a community coalition that uses collaboration among agencies, organizations, and individuals from every sector of the community. Prior to the formation of Partners for Prevention in Allegany County (PPAC) under a Drug Free Community Grant in 2005, youth-serving agencies in Allegany County were represented on the Comprehensive Youth Unified Services (CYUS) coalition with the mission of planning for youth services including substance abuse prevention. However, CYUS had limited resources and no funding for staff or consultants. With the Drug Free Communities Grant, PPAC was able to engage a full-time Coordinator and utilize the services of a Planning and Evaluation Consultant. In addition, the grant provided limited funds for logistical support for planning activities and community mobilization.

Drug Free Communities Support Grant
PPAC is one of 850 Drug Free Community Coalitions nationally that operate under the Strategic Prevention Framework (SPF) developed by the U.S. Substance Abuse Mental Health Services Administration (SAMHSA).

The DFC Grant operates in two five year cycles. Each year, the coalition must report on the current status of the coalition as well as submit yearly proposals that show how the coalition implemented SPF model. In 2010, PPAC will submit a new grant proposal for the second five year cycle of the DFC Grant.

Strategic Prevention Framework
Background: President Bush called on the U.S. Department of Health and Human Services (HHS) to realize his vision of a healthier U.S. in which its citizens use the power of prevention to help lead longer, healthier lives. Today, HHS is using the power of prevention to help prevent, delay, and/or reduce disability from chronic disease and illnesses, including substance abuse and mental illnesses, which take a toll on health, education, workplace productivity, community engagement, and overall quality of life. Research has shown that a broad array of evidence-

based programs can effectively prevent substance abuse, promote mental health, and prevent related health and social problems by reducing risk factors and increasing protective factors. SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP) (www.nrepp.samhsa.gov) identifies proven programs that work.

Barriers to Effective Prevention—All too often, individuals, communities, or State and Federal agencies do not translate into action what is known about prevention. The result is increased health care costs, lost education and employment opportunities, disability, and lost lives. Efforts to promote prevention have been hindered, in part, by insufficient collaboration and coordination to accomplish what needs to be done. Separate funding silos and the absence of a common strategic prevention framework have frustrated the kind of cross-program and cross-system approach that health promotion and disease prevention demand.

The Strategic Prevention Framework (SPF) was developed by the U.S. Substance Abuse Mental Health Services Administration (SAMHSA). The SPF is built on a community-based risk and protective factors approach to prevention and a series of guiding principles that can be utilized at the federal, state/tribal and community levels. The idea behind SPF is to use the findings from public health research along with evidence-based prevention programs to build capacity within States and the prevention field. This in turn will promote resilience and decrease risk factors in individuals, families, and communities.[1]

SPF uses a five-step process known to promote youth development, reduce risk-taking behaviors, build assets and resilience, and prevent problem behaviors across the life span. The SPF calls for communities to systematically:

- Assess their prevention needs based on epidemiological data
- Build their prevention capacity
- Develop a strategic plan
- Implement effective community prevention programs, policies and practices
- Evaluate their efforts for outcomes

Figure 3

[1] U.S. SAMHSA

NEEDS ASSESSMENT

The PPAC Comprehensive Plan, following the SPF, utilizes a data-driven approach, that is, need is defined in terms of problems as well as risk and protective factors and then measured using valid and reliable measures. The primary measurement tool was the student Risk and Protective Factor Survey completed by 6th, 8th and 10th graders in 11 Allegany County school districts (see Attachment I). The survey measures 32 risk and protective factor scales and measures of alcohol, tobacco, marijuana and other drug use.

In addition to student survey results, archival data (see Attachment II) related to a variety of community, school and family risk and protective factors were extracted from several public and private agency information systems. The New York State Council of Children and Families compiles archival data into the Touchstones Report and makes data sets available on line via their Kids' Well-being Indicators Clearinghouse (KWIC) website. In addition, indicators of substance abuse are contained in the New York State Office of Alcoholism and Substance Abuse Services' (OASAS) Prevention Risk Indicator Service Monitoring System (PRISMS). The PRISMS Profiles provide counties with summary risk and consequences information on fifteen risk areas or "constructs" and two consequences indices. Using a research-based risk framework, the PRISMS Profiles group indicators into constructs through a statistical technique known as factor analysis. For example, indicators that measure violence (homicides, hospital diagnoses for intentional injuries, and violent crime arrests) are combined through factor analysis into the Violence Risk Construct. Consequences indicators are grouped through factor analysis into the Youth Alcohol Consequences Index, and the Youth Drug Consequences Index.

In order to get input from every sector of the community, needs were also identified through input from sector planning workgroups. Sector workgroups served as focus groups responding to the survey results and other needs assessment data. These groups provided input into the relevance of each factor to their sector's interests as well as providing input into how their respective sector could help address these factors. The structured process, facilitated by PPAC, resulted in a thorough assessment of need and establishing priority on needs to be addressed.

CAPACITY

COALITION STRUCTURE

The PPAC coalition has an organizational structure and processes that are (1) clear and apparent to all members; and (2) appropriate to the coalition's work. Coalition work falls outside the individual accountability structures of participating member organizations, and the extent to which individual members engage in the coalition work is voluntary. The work of the coalition is distributed among various coalition members and partners, each of whom have primary allegiance to their home organization or individual interest or need. Because of this, the coalition has its own sense of organization strong and coherent enough to keep the common strategy on track.

Staff—The coalition employs a Project Director and Project Coordinator. Staff assists with support for planning, problem solving and information management. Staff may help prepare meeting minutes, compile reports and facilitate meeting coordination and communication with partners between meetings. Staff has a critical role in monitoring the "business" end of coalition work as well as, maintains accurate records for funding and reporting requirements.

Key Leader Advisory Board—Members leverage resources for change in the community through their professional and personal spheres of influence. Key leaders are responsible for developing and implementing the sustainability plan and overseeing the implementation of the coalition prevention plan. Key Leaders are representatives of major human service, law enforcement, education, and government agencies.

General Membership—Members participate in coalition efforts to assess and analyze root causes of the problem in the community, develop comprehensive strategies, and implement their parts of the identified solutions. PPAC is not a membership organization in the sense that there are dues or formal application. All members of the community willing to support the mission of or participate in activities of PPAC are welcome.

Sector Action Groups (SAGs)—Planning workgroups participate in the planning and implementation of particular and diverse strategies according to their professional experience and interests within their sector. Each group focuses on planning and implementation of strategies to reduce risks and increase protective factors within an identified population group. SAGs operate independently with the full support of the general membership. The active workgroups are listed within the capacity building activities section below.

Environmental Workgroup—Members focus on the environmental strategies identified as solutions related to regulation, availability, and norms of alcohol use within the community. Strategies identified by the group are detailed below.

CAPACITY BUILDING ACTIVITIES

Capacity building includes activities that bring representatives of every sector of the community together to form a coalition that has a greater ability to plan, implement, and sustain effective prevention strategies. Major capacity building activities of PPAC include the following:

Key Leader Meetings—members meet monthly at ACASA in Wellsville. Key leaders set the agenda and provide guidance to the Project staff.

General Membership Meetings—Membership meetings are held every other month at the Wellsville Creative Arts Center. Meetings include progress coalition activities, updates from individual members, and presentations of general interest to the membership.

Workgroup/Sector Meetings- workgroup meetings are highly structured with specific tasks in order to maintain the momentum and enthusiasm of members. PPAC also provides technical assistance, including event coordination and arranging the logistics for and providing facilitation of meetings. The PPAC Coordinator works with workgroups to identify and select prevention activities consistent with the Strategic Plan and the SPF. The activities of these groups are described in detail in the Implementation Section of this plan. These groups include the following and full descriptions of each are provided throughout the plan.

- Citizens On Patrol Of Wellsville (COPOW)
- Communities Mobilizing for Change on Alcohol (CMCA)
- Teen Action Board (TAB)
- School Nurse Network of Allegany County (SNNAC)
- Sheriffs Telling Our Parents & Promoting Educated Drivers (STOPPED)
- Faith Alliance
- High Risk Drinking Prevention Committee
- Safe Homes Parent Network

COALITION FUNCTION

DFC Grant Guidelines/Restrictions—The coalition is funded through the Substance Abuse Mental Health Services Administration (SAMHSA) and falls under the Drug Free Communities Support Program guidelines. The purpose of the DFC grant is to assist communities with identifying and responding to local substance use problems. The grant is a 5-year cycle and each coalition is allowed 2 cycles for a total of 10 years of funding, depending upon their meeting the goals and objectives of the grant.

Fiscal Agent Policies/Restriction—The coalition's fiscal agent is Allegany Council on Alcoholism and Substance Abuse (ACASA), a 501-c-3 non-profit agency. Staff operates under their direct supervision as it pertains to agency policies and procedures. The Executive Director of ACASA also is an active member of the Key Leader group for the coalition and recognizes that all member agencies have an equal say and invested interest in the direction of the coalition.

Coalition Decision-making—The decision-making process is a consensus model, each member having a voice and vote whether or not a plan or strategy goes forth.

Coalition Policies—The policies and procedures are developed by the coalition key leaders, which must meet grant requirements and guidelines.

Coalition Sustainability Efforts—Key leaders are responsible for the development and implementation of the sustainability plan.

Coalition Strategies/Activities—Activities are planned and implemented by members, including Key Leaders, who have a general or specific interest in the project. All activities are voluntary and are generated by coalition and community members.

Technical Assistance—PPAC is often called upon to respond to concerns of individuals or organizations regarding substance abuse or youth related issues. PPAC strives to assist in developing prevention activities with a priority given to activity consistent with the Strategic Plan.

Business Lunches—The coalition has provided lunch activities for local business leaders and members in the past. This is an opportunity to garner financial and volunteer involvement for future activities, strategies, and other input that relate to reducing risk factors. The business sector capacity building initiatives are a vital component to the sustainability of the coalition.

PLANNING

Needs Assessment

Following the Strategic Prevention Framework and the Risk and Protective Factor Model of Prevention, "needs," for purposes of prevention planning, are framed in terms of risk factors that predict substance use and protective factors that predict less substance use. The process of selecting risk and/or protective factors to be addressed in the Comprehensive Substance Abuse Prevention Plan included several steps. The factor selection process is a vital part of the strategic prevention planning process.

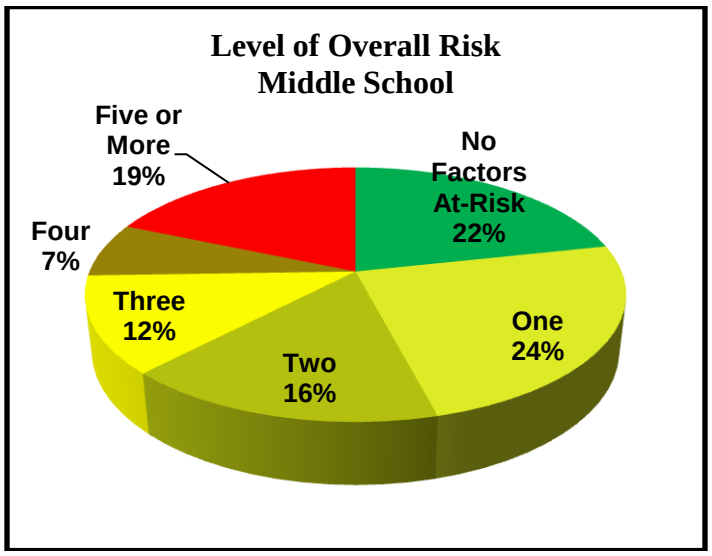
Risk and Protective Survey—The first step in identifying factors to be addressed in the plan is to measure the prevalence of each factor. The student Risk and Protective Factor Survey was conducted in 11 school districts in Allegany County in odd numbered years from 2001 to 2009. The current plan used results from the 2007 survey. Results from the recent 2009 survey will be used to update the plan over the next year. A detailed report of the survey findings can be found in attachment I. Thirty two scales, representing risk or protective factors, were calculated for each student. Scale scores are standardized based on a large sample of students from upstate New York schools and the proportion of students at risk is calculated. Each factor was assigned a rank based on the most prevalent.

The most prevalent risk factor among middle school students in Allegany County Schools was *Community Disorganization* with more than one in five (20.2%) scoring above the risk level on the 2009 survey. *Family History of Antisocial Behavior* (19.1%) and students' *Personal Transition and Mobility* (17.9%) were also prevalent risk factors. In terms of protective factors, Allegany County middle school students were most likely to lack *Rewards for Prosocial Involvement in the Community* (16.1%), *Opportunities for Prosocial Involvement in the Community* (15.1%), and *Attachment to the Family* (10.7%).

Among high school students in Allegany County Schools, *Community Disorganization* was the most prevalent risk factor with 25.2% at risk while 24.3% were at risk from *Sensation Seeking* and 22.7% scored above the risk level on *Rebelliousness*. The least prevalent protective factor was *Rewards for Prosocial Behavior in the Community* with 23.6% at the risk level. In addition, 23.6% lacked *Opportunity for Prosocial Involvement in the Family* and 23.8% lacked *Rewards for Prosocial Involvement in the Family*.

The Risk and Protective Factor framework states that an individual student's likelihood of being involved in substance abuse, violence or other negative behavior increases relative to the number of factors from which the student is at-risk. Thus, an additional measure of overall Risk and Protection in a community is the number of individual students reporting multiple factors beyond the at-risk level.

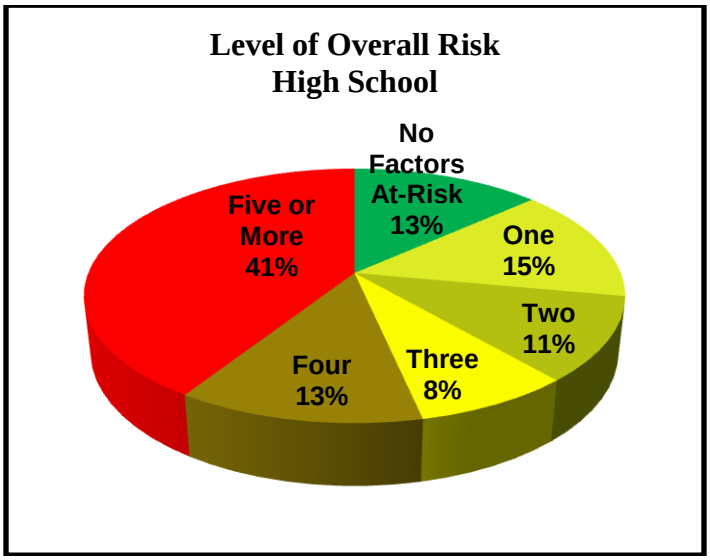
Figure 5



Among middle school students the overall risk profile showed improvement in 2009 compared to 2007 with more students having no risk factors (21.6% vs. 18.1%) and fewer students scoring at risk on five or more scales (18.6% vs. 23.0%).

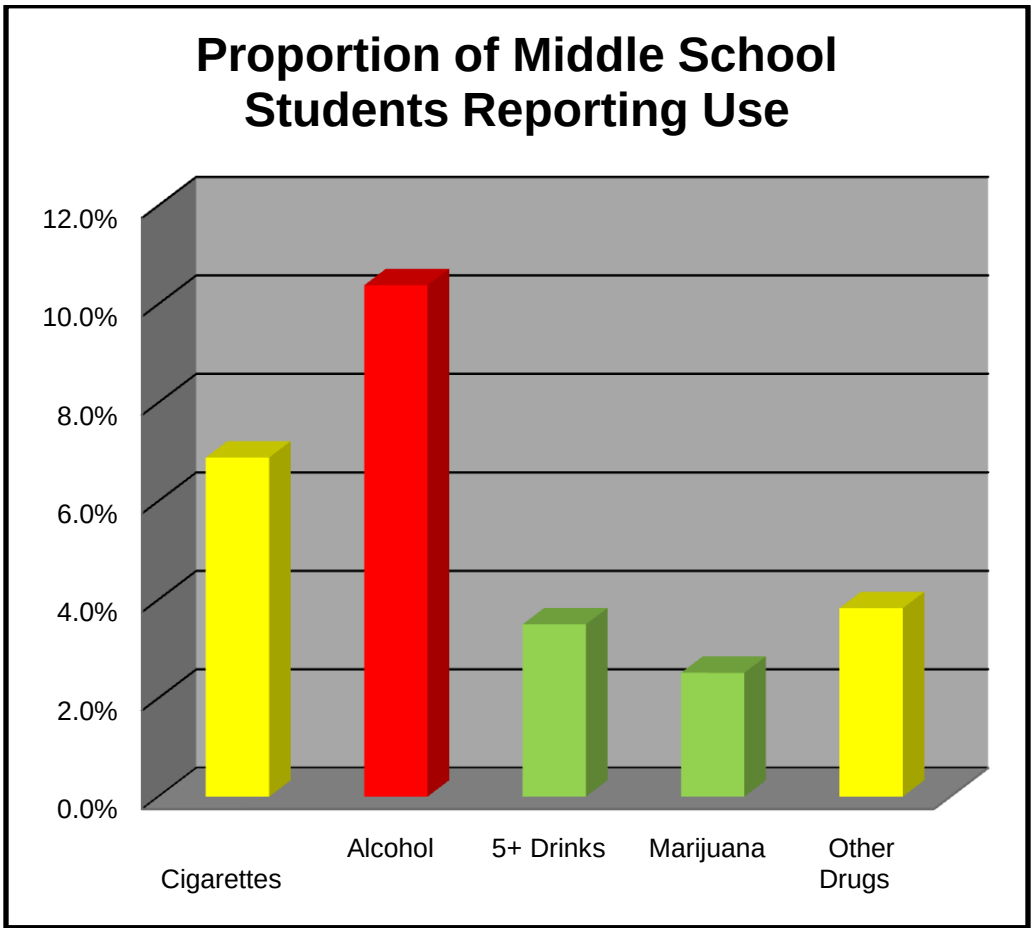
Figure 6

High school students in Allegany County Schools showed an increase in the proportion of students scoring below the risk on all factors, (13.4% vs. 10.6%) however; there was a small increase in students with five or more risk factors (40.9% vs. 38.4%).



In 2009, increasing proportions (6.9% middle school, 19.8% high school) of students reported use of cigarettes in the 30 days prior to the survey. One in ten (10.4%) of middle school students reported any use of alcohol with 3.5% reporting having five or more drinks on any one occasion. More than a third (36.3%) of high school students reported drinking in the previous 30 days. This is a substantial increase from the 2007 level (32.1%). Acute intoxication in high school students, that is, five or more drinks on a single occasion, increased from 17.3% in 2007 to 25.2% in 2009. Compared to 2007, fewer (2.5%) middle school students and slightly more high school students (14.7%) reported marijuana use. Among middle school students only 3.8% reported use of any other drug while 11.6% of high school students reported use of any other drug in the past 30 days, both substantial increases from the 2007 survey. (see Attachment I)

Overall, the pattern of reported substance use is below recently reported national surveys and, with exception of cigarettes, showed substantial decreases in reported use. In Allegany County Schools, as in most of upstate New York, alcohol remains the drug of choice.



SAMHSA Core Measures—SAMHSA requires all grantees to monitor four core measures. These include: 1. Substance Use in the Past 30 Days, 2. Perception of Parents' Disapproval, 3. Perception of risk of Harm from Substance Use, and 4. Age of Onset of Use. Figure 7 shows the results of items from the 2009 Student Risk and Protective Factor Survey capturing the four core measures. The table shows improvement in most measures compared to 2005.

Figure 7

Core Measures 2005 vs. 2009	***Substance***	***Grade 6***		***Grade 8***		***Grade 10***	
		2005	***2009***	***2005***	***2009***	***2005***	***2009***
30-Day Use	***Alcohol***	4.1%	4.8%	16.6%	5.3%	37.1%	33.5%
	Tobacco	3.1%	2.7%	3.7%	10.2%	7.3%	18.4%
	Marijuana	1.2%	0.8%	5.8%	3.9%	14.5%	13.7%
Perception of Risk	***Alcohol***	76.1%	77.1%	62.3%	71.7%	59.0%	58.6%
	Tobacco	80.1%	87.9%	71.2%	87.0%	54.5%	89.2%
	Marijuana	87.8%	81.7%	83.8%	73.7%	88.4%	50.0%
Perception of Parental Disapproval	***Alcohol***	92.5%	96.0%	83.8%	86.2%	70.6%	69.4%
	Tobacco	92.9%	96.9%	90.5%	93.7%	84.5%	86.6%
	Marijuana	95.2%	98.1%	93.6%	96.9%	92.7%	92.1%
Age of Onset	***Alcohol***	8.8	10.6	10.5	12.1	12.2	13.7
	Tobacco	9.0	9.6	10.4	10.9	11.5	11.7
	Marijuana	9.3	11.2	11.5	12.1	13.1	13.0
Perception of Peer Disapproval	***Alcohol***	88.4%	95.6%	65.2%	70.9%	70.3%	54.9%
	Tobacco	81.7%	86.9%	71.8%	77.0%	71.1%	75.7%
	Marijuana	89.2%	90.6%	77.0%	85.3%	72.7%	66.2%

Archival Data—In addition to student survey results, archival data related to a variety of community, school, and family risk and protective factors are available in a variety of public and private agency systems. The New York State Council of Children and Families compiles archival data into the Touchstones Report and makes data sets available on line via their Kids' Well-being Indicators Clearinghouse (KWIC) website**.**

KWIC—Archival data were extracted from the Kids' Well-being Indicators Clearinghouse (KWIC) Website from the New York State Council of Children and Families. Tables in Attachment II show rates of youth related problem indicators and health risks. Allegany County rates were higher than the upstate average on 39 of 92 indicators. Compared to other upstate counties, Allegany County had higher rates of children living in poverty, child abuse reports, unintentional injury hospitalization and mortality for children age 0 to 19 and a higher rate of DWI arrests for drivers age 16 to 21.

PRISMS—In addition, indicators of substance abuse are contained in the New York State Office of Alcoholism and Substance Abuse Services' (OASAS) Prevention Risk Indicator Service Monitoring System (PRISMS). Tables in attachment II show the rates of selected risk indicators for youth in Allegany County compared to the average rate for similar counties and for New York State as a whole. Compared to other upstate counties, Allegany was worse on the "community constructs" of poverty, violence, family dysfunction, and school separation. Allegany youth were also at greater risk from alcohol accessibility. On the positive side Allegany ranked below the upstate average on youth alcohol and drug consequences.

Resource Assessment

A Resource Assessment was conducted in which organizations and agencies were surveyed to collect detailed information about 71 programs serving youth in Allegany County. Each program was reviewed to determine which risk or protective factors they addressed either directly or indirectly. Results were summarized across factors to determine the number of programs addressing each factor. Factors were ranked according to fewest programs addressing them. (see Attachment III)

Gaps Analysis

Gaps-analysis included a comparison of the prevalence of risk and protective factors and the level of prevention resources addressing each. Though the Resource Assessment collected information on the number of clients served, the information was often imprecise or missing. Thus, the number of programs that were determined to potentially address risk and/or protective factors was used in the gaps analysis. (see Attachment III)

Problem Priority Setting

Three factors were used to determine the priority of each factor. The first was to determine the prevalence of each risk and protective factor as described above. The second was to determine the resources (or lack of resources) currently addressing each factor. The third was to determine the relative strength with which each factor was a predictor of substance use. For each factor, students scoring above the risk level were compared to those not at risk on their reported alcohol use, tobacco use, marijuana use and other drug use. Factors were ranked according to the strongest statistical relationship to the four outcomes.

Thus, the final rankings for each factor combined the prevalence of that factor, the strength of the relationship between each factor and substance use and the number of programs potentially influencing each factor. The three sets of rankings were combined to give an overall rank. Attachment III shows the results of this process for middle school students in Allegany County.

Sector Workgroups served as focus groups to review and react to statistically derived priority risk and protective factors (see Attachment III). Each group reviewed the information related to each factor and provided input related to the implications of each factor for their sector. Groups then rated the factors on a 1 to 10 scale for the extent to which they are an issue for the sector.

The second step in the process was to have each sector workgroup rate each factor on the extent to which the sector could potentially reduce the risk from that factor. The results of the ratings are shown in Attachment III. The highest priority was given to addressing: *Parental Attitudes That Favor Drug Use*, students' *Favorable Attitudes Toward Drug Use,* and students' *Favorable Attitudes Toward Antisocial Behavior.*

Implementation

This Plan has described a process which led to identifying a variety of potential prevention strategies to fit documented needs in Allegany County. This section addresses the steps in implementing these strategies.

Prevention Action Workplans (PAW)

Prevention Action Workplans are prevention strategies that have been identified by sector workgroups during the strategic planning process. Workgroups completed PAW worksheets for numerous strategies. These PAW worksheets are available from the Project Coordinator at swright@alleganycouncil.org.

Current Prevention Strategies—Prevention planning must address not only new needs but strategies currently in place. PAWs were also developed for programs that have been in place and continue to provide effective prevention services in Allegany County.

- **Citizens on Patrol of Wellsville (COPOW)**—In response to citizen concerns about drug use and drug sales among youth in Wellsville, the PPAC Coordinator assisted in the formation of Citizens on Patrol of Wellsville. COPOW established a citizen patrol of areas in which drug sales, vandalism, and crime were visible. PPAC continues to provide technical assistance to assure cooperation and stability of the group. Members are residents, business owners, and those who have an interest in the Village and Town of Wellsville. Their purpose is:

    - To educate the Citizens of Wellsville concerning crime prevention.
    - To promote drug free youth.
    - To patrol the Village of Wellsville
    - To maintain effective communication between citizens and the Village of Wellsville.
    - To enhance the quality of life in all neighborhoods in the Village of Wellsville.

- **Teen Action Board (TAB)**—Is a collaborative effort with the ACCORD Corporation and PPAC that seeks to build leadership skills, awareness and education, and to create a response by the youth sector. TAB is developing strategies to reduce risk factors within their peer groups and families.

- **School Nurse Network of Allegany County (SNNAC)**—Is a group of school nurses, hospital nurses, and health educators with the mission to *"strive to bridge the gaps between school personnel, communities at large, healthcare professionals, and the families we serve."* The PPAC Coordinator helped form this group in response to school nurses' shared concerns and their perception of the lack of communication and coordinated efforts. PPAC provided the forum for nurses to share experiences and share ideas. PPAC provides guidance and access to resources including materials for media campaigns and Town Hall meetings.

- **Reality Check**—A movement made up of teens ages 13-18, from every county in New York State, who want to tell the Tobacco Industry that if they think they can keep targeting New York teens without any resistance, they need a "reality check!"

- **Parents Who Host; Lose the Most—**Is a media campaign that educates parents on the consequences of serving alcohol to teens.

- **Sheriffs Telling Our Parents & Promoting Educated Drivers (STOPPED)**—The STOPPED program, which originated in the Onondaga County Sheriff's Department, provided an opportunity to engage the law enforcement community in Allegany County in a positive, non-threatening outreach to parents of driving age youth. The PPAC Coordinator approached the Allegany County Sheriff and other law enforcement agencies to implement the program. The Coordinator also provided logistical support for a series of Town Hall Meetings at which the Sheriff explained STOPPED and encouraged parents to enroll.

  This program is sponsored by the Allegany County Sheriff's Office and members of law enforcement in local and state level agencies, as well as public safety entities such as the Department of Motor Vehicles, and the 911 Department. They function independently with the full support of the coalition to increase parental supervision and to increase community awareness of consequences of teen drinking, and promoting a collective community response that supports youth and families. STOPPED is also consistent with the environmental approach of creating a deterrence of risky driving behavior as well as increasing parental supervision, which is an identified risk factor in the county.

- **Faith Alliance**—The Faith sector is extremely influential in the lives of families in Allegany County. The PPAC Coordinator invited representatives of faith communities to participate in the strategic planning process and to provide the faith perspective on identified problems and solutions. The Faith Sector Group evolved into the Faith Alliance, which planned and implemented the "MyChoice" Youth Summit. With logistical support from the PPAC Coordinator, the summit provided 90 young people with the opportunity to respond to issues important to youth such as underage drinking, teen pregnancy and violence.

  Members are active pastors and youth leaders of the faith sector that participate in the planning and implementation of community youth events. These events are specific responses from the faith community that help to reduce alcohol and drug use among churched youth.

Community Events

- **Town Hall Meetings—**PPAC has sponsored or co-sponsored at least three Town Hall Meetings or forums each year since 2005. The PPAC Coordinator provides planning and logistical support working with schools, community groups and other sponsors. Issues addressed include: underage drinking, internet safety, drug use, drug sales and availability, bullying, and parents who host teen parties.

- **Youth Leadership/Outreach—**Community-level youth events, with technical assistance from the PPAC Coordinator, have been used to engage young people in safe and drug free activities as well as to promote awareness and motivate youth to become involved in prevention in their own communities.

Evidence-based Activities—There are several agencies providing evidence-based strategies. PPAC helps to promote these activities by providing data for use in planning, evaluation, and grant writing, as well as promoting these programs to assure sustainability. Some examples are:

- ACASA Prevention Services
  - Life Skills Training
  - Here's Looking at You
- ACCORD Corporation's 21st Century Learning Center Project

Strategies in Development—The planning process provided an opportunity to match evidence-based strategies to documented risk and/or protective factors. PAWs were developed for strategies and included definition of the need, the estimated costs and resources, potential implementers, strengths and challenges in implementing each strategy. Some examples are:

- **Communities Mobilizing for Change on Alcohol (CMCA)—**Evidence-based environmental strategy that seeks to reduce availability of alcohol to youth.

- **Safe Homes Parent Network**—A national effort to develop a community-wide coalition of parents and other adults working together to implement the program in homes, schools and communities. The program is a pledge-based, drug prevention program for parent/guardians of youth in grades Pre-K thru 12th grade.

- **Caught Doing Good Ticket**—Local police departments will be the lead agency to hand out "Caught Doing Good Tickets." This project will help to bring recognition and reward for those youths that were determine to have made good judgment in any particular situation.

Other Proposed Strategies—Other evidence based strategies were reviewed and selected as fitting the need profile. These strategies will be implemented in the future when resources become available.

- Al's Pals
- All Stars
- Families that Care: Guiding Good Choices

Environmental Strategies—The Public Health Model, on which the Strategic Prevention Framework is based, recognizes the necessity of addressing host (individual), agent (substances), and environmental factors in order to prevent and reduce problems such as substance abuse. In addition to PAWs for evidence-based strategies (host/individual), PPAC, through its environmental workgroup, is addressing environmental factors that influence substance use and environmental strategies that can reduce use and abuse. PPAC is currently conducting an assessment of the status of environmental factors and identifying strategies.

Figure 8

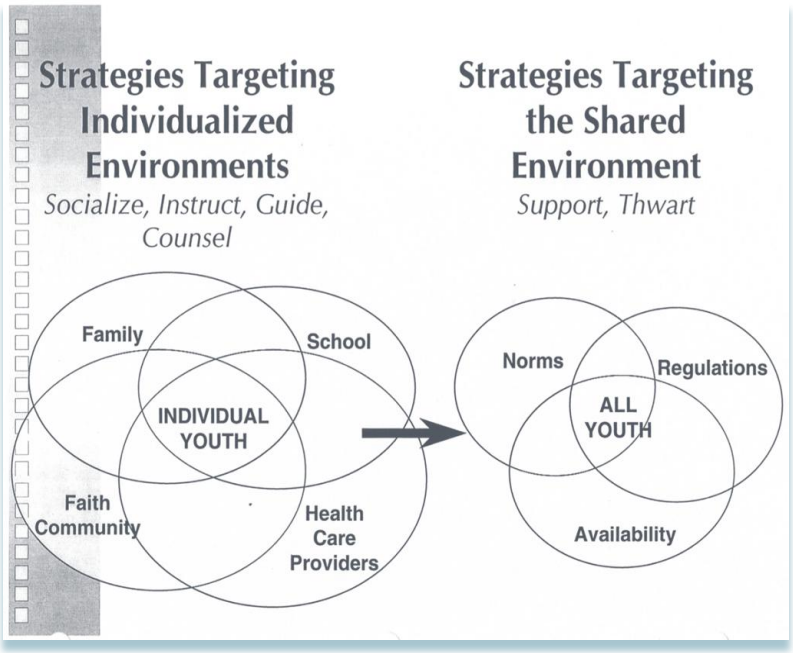


Figure 8 shows a framework for analyzing environmental factors and strategies.

Some PAWs address "Individual Environments" of youth and are intended to educate them and build resiliency.

Environmental strategies addressing the "Shared Environment" fall under several areas:

1. **Regulations/Policies—**State and local, public and private laws, regulations and policies influence access to alcohol and other drugs.

2. **Availability—**Where, when, and at what cost alcohol and other substances are available, are a significant influence on use and abuse.

3. **Norms—**Norms include perception of approval (or disapproval) of use by peers, families and the community.

Specific environmental strategies that have been identified by PPAC include:

Underage Drinking Enforcement Laws—The Allegany County Underage Drinking-Not a Minor Problem campaign will be targeting youth, parents, adults and media throughout Allegany County. The program will use a multi-media approach to educate the public about community norms and use counter marketing/counter advertising to disseminate information about the hazards of underage drinking and/or the industry that promotes it.

Environmental Analysis—PPAC reviews alcohol service policies of organizations and community groups that promote events at which alcohol is served. Based on this analysis, organizations are encouraged to implement model alcohol service policies.

Model Policy for Alcohol Service—A model policy will be formed for community and civic groups to utilize to provide improvements in safety regarding consumption of alcohol and reduction in availability of alcohol to youth.

Communities Mobilizing for Change on Alcohol (CMCA)—This evidence-based environmental strategy that mobilizes the community to implement policy changes and strategies to reduce the availability of alcohol to youth.

STOPPED—This strategy uses vehicle stickers to create a deterrence of risky behavior of youth while driving and to help encourage parental supervision.

Safe Homes Parent Network—An environmental strategy that works with families to increase parental supervision and reduces youth access to alcohol in unsupervised settings.

Parents Who Host; Lose the Most Media Campaign—A media awareness campaign to change parental norms related to providing alcohol to youth.

Pill Drop— Pill disposal is a strategy in which residents of Allegany County and surrounding areas can dispose unused prescription and non-prescription medications in a controlled and safe setting. The Allegany County Sheriff's Office in collaboration with PPAC conducts pill drops in order to remove prescription drugs from the potential of being diverted and abused. This strategy also raises public awareness of the dangers of the abuse of prescription medications.

EVALUATION

The data-driven planning process is complemented by a comprehensive evaluation component. Evaluation includes global measures such as changes in population substance use rates and prevalence of risk and protective factors. In addition, all prevention strategies and activities implemented by coalition member organizations are offered technical assistance in designing and implementing outcome evaluations.

Global Evaluation

Global evaluation includes collection and analysis of:

- **Trend data—**Student Surveys have been conducted in 2001, 2003, 2005, 2007, 2009, and is scheduled for 2011. This series of surveys allows for analysis of trends as well as cohort analysis following groups of students over time.

- **Core Measures—**SAMHSA requires all Drug Free Communities grantees to measure and track four core measures including: Substance use in the Past 30 Days; Perception of Parents' Disapproval; Perception of Risk of Harm from Substance Use and age of Onset of Use. The Allegany County Student Risk & Protective Factor Surveys include items structured and worded consistent with SAMHSA standards to measure these variables.

Strategy-specific Evaluation.

- **Technical Assistance—**The Drug Free Communities grant provides support for evaluation technical assistance through an outside evaluation consultant. PPAC assists in designing evaluations for prevention strategies implemented by coalition member organizations.

- **Exposure Measures**—It is not always possible to implement strategies with a true experimental design. However, it is possible to calculate differences in sub-populations identified by responses to exposure questions on surveys. The Risk and Protective Factor Survey, completed by 6^{th}, 8^{th} and 10^{th} graders every odd-numbered year, includes questions about participation in various prevention programs.

ACTIVE COALITION MEMBER AGENCIES

ACCORD Corporation
Alfred Community Coalition
Alfred State College
Alfred University
Allegany Council on Alcoholism and Substance Abuse
Allegany County Community Services
Allegany County Department of Health
Allegany County Department of Social Services
Allegany County Sheriff's Office
Allegany County Youth Bureau
Allegany Western Steuben Rural Health Network
Basil Chevrolet
Belmont Police Department
Cattaraugus Community Action
Citizens on Patrol of Wellsville
Cuba Rushford Central School
Evalumetrics Research
Friendship Central School
Healthy Families Allegany
Houghton College
Jones Memorial Hospital
Kinship Family & Youth Services
New York State Department of Environmental Conservation
New York State Police
Parent Education Program
Patriot Newspaper
Reality Check of Allegany County
Richardson & Stout Insurance Agency
Rural Justice Institute
School Nurse Network of Allegany County
Teen Action Board
Texas Hot
The Patriot Free Press
Wellsville Central School
Wellsville Daily Reporter
Wellsville Police Department
Wellsville Presbyterian Church
WZKZ Radio
Youth For Christ

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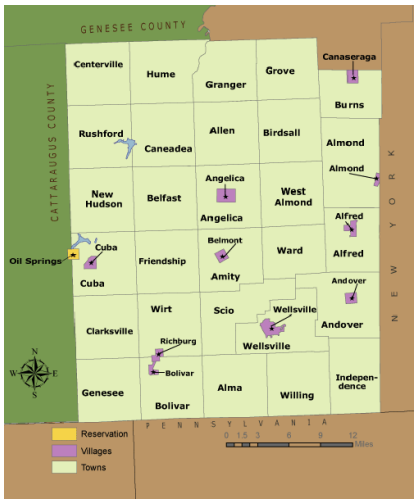
ATTACHMENT I

ALLEGANY COUNTY
RISK AND PROTECTIVE FACTOR SURVEY REPORT



Allegany County, New York

Allegany County Schools Student Risk and Protective Factor Survey 2009

DRAFT

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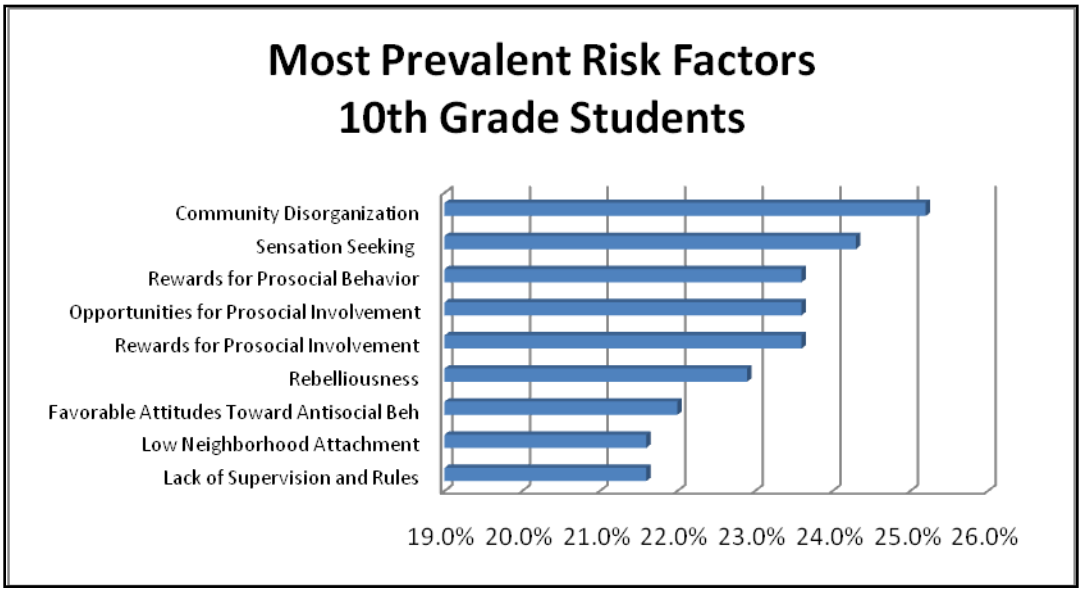
Allegany Council on Alcoholism and Substance Abuse, Inc. (ACASA)
This research was supported in part with funds from the U.S. Substance Abuse Mental Health Administration Drug Free Communities Support Program

Risk and Protective Factor Survey
Allegany County Schools
2009

Summary

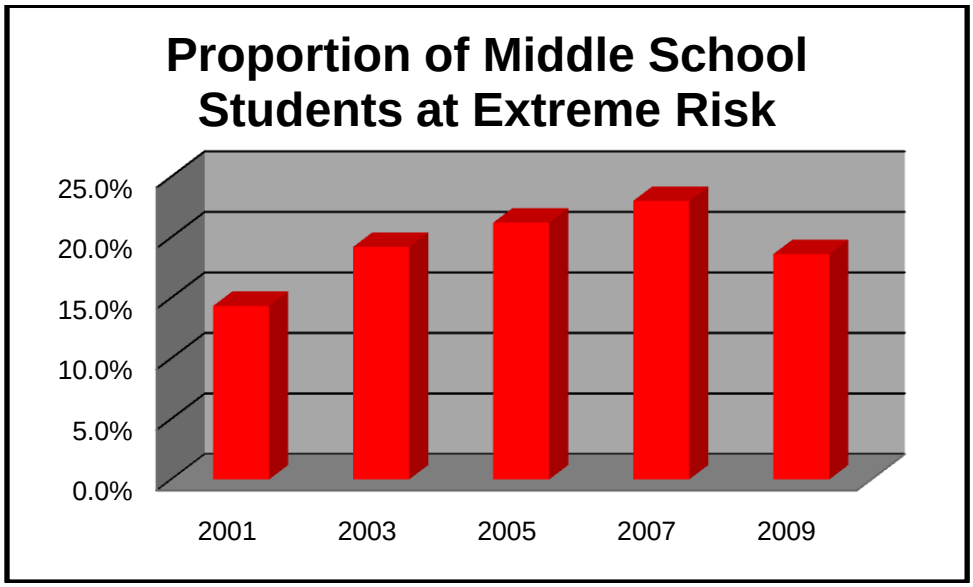
Students in schools in Allegany County participated in the Risk and Protective Factor Survey in the winters of 2001, 2003, 2005, 2007 and 2009. The survey was developed by Hawkins and Catalano at the Center for Social Research at the University of Washington. This survey measures critical individual, school; family and community factors that have been demonstrated to either increase the likelihood of substance abuse and violence (Risk Factors) or decrease the likelihood of these behaviors (Protective Factors). Factor scores are calculated for each student on each of 33 scales. The proportion of students scoring above the statistical risk level on each factor was analyzed. The survey included 915 Allegany County Middle School Students (grades 6 and 8) and 449 Allegany County High School Students (grade 10).

The most prevalent risk factor among middle school students in Allegany County Schools was *Community Disorganization* with more than one in five (20.2%) scoring above the risk level on the 2009 survey. *Family History of Antisocial Behavior* (19.1%) and students' *Personal Transition and Mobility* (17.9%) were also prevalent risk factors. In terms of protective factors, Allegany County middle school students were most likely to lack *Rewards for Prosocial Involvement in the Community* (16.1%), *Opportunities for Prosocial Involvement in the Community* (15.1%), and *Attachment to the Family* (10.7%).



Among high school students in Allegany County Schools, *Community Disorganization* was the most prevalent risk factor with 25.2% at risk while 24.3% were at risk from *Sensation Seeking* perceived and 22.7% scored above the risk level on *Rebelliousness*. The least prevalent protective factor was *Rewards for Prosocial Behavior in the Community* with 23.6% at the risk level. In addition, 23.6% lacked *Opportunity for Prosocial Involvement in the Family* and 23.8% lacked *Rewards for Prosocial Involvement in the Family*.

Among middle school students the overall risk profile showed improvement in 2009 compared to 2007 with more students having no risk factors (21.6% vs. 18.1%) and fewer students scoring at risk on five or more scales (18.6% vs. 23.0%). High school students in Allegany County Schools showed a increase in the proportion of students scoring below the risk on all factors, (13.4% vs. 10.6%) however; there was a small increase in students with five or more risk factors (40.9% vs. 38.4%).



Risk and Protective Factor Survey
Allegany County Schools
Spring 2009

Introduction

Young peoples' use and abuse of alcohol, tobacco and other drugs remains a major concern for parents, heath professionals, law enforcement and schools. Since the 1990's substance abuse prevention has developed programs based on the Risk and Protective Factor Model developed at the University of Washington by J. David Hawkins, Richard Catalano, and Janet Miller. The model was developed by reviewing two decades of research that identified a link between certain risk factors and several problem behaviors and between protective factors and avoidance of problem behaviors. A major strength of this model is that in addressing alcohol and other drug abuse risks for adolescents, it also addresses other negative behaviors, such as violence, delinquency, teen pregnancy, gambling and dropping out of school.

Students in schools in Allegany County participated in the Risk and Protective Factor Survey in the winter of 2001, 2003, 2005, 2007 and 2009. The survey was developed by Hawkins and Catalano and measures critical individual, school; family and community factors that have been demonstrated to either increase the likelihood of substance abuse and violence (Risk Factors) or decrease the likelihood of these behaviors (Protective Factors)[2].

Factor scores were calculated for each student on each of 33 scales. The proportion of students scoring above the statistical risk level on each factor was analyzed to determine areas of greatest risk and to establish prevention priorities.

In 2009 the survey included 1,029 Allegany County Middle School Students (grades 6 and 8) and 506 Allegany County High School Students (grade 10).

[2] Note: The student survey does not measure all factors in the model. For example, poverty is a major risk factor.

Method

The survey instrument was a self-report paper and pencil form completed by students in a classroom setting. The sample for the survey was all 6th, 8th and 10th grade students in Allegany County Schools. Each Risk and Protective Factor is represented by one or more scale consisting of one or more items from the survey. Attachment I provides the definition of each scale. Each student was given a score for each of the scales. Separate analyses were conducted for middle school (grades 6 and 8) and high school (grade 10). Based on the distribution of scores for all students in a large Upstate New York sample, standard scores (z-scores) were calculated by subtracting the mean score from each individual's score and dividing by the standard deviation. Students with a standard score of 1 or greater on any Risk Factor were considered to be at-risk. A standard score of –1 or less on any Protective Factor was considered a lack of protection and therefore at-risk.

Sample

Each school was asked to arrange distribution and completion of the surveys on a day and in a class-period of their choice. Parents were notified about the survey and were given the option of having their child opt out of the survey without prejudice. In addition, students were told that they were not required to complete the survey or to answer any question they did not understand or choose to answer. Students were instructed not to put their name or any identifying information on the survey form.

Staff from the Allegany Council on Alcoholism and Substance Abuse (ACASA) gave instructions, answered questions from students and monitored students during the survey. Surveys were distributed to students present in selected classes in the participating schools. Table 1 shows the number of students completing the survey in each participating district.

Table 1.

2009 Risk and Protective Factor Survey

Number of Completed Surveys	**Grade**			
School	**6th**	**8th**	**10th**	**Total**
Andover	24	21	30	**75**
Belfast	25	32	30	**87**
Bolivar-Richburg	114	114	114	**342**
Canaseraga	23	15	24	**62**
Cuba-Rushford	63	69	63	**195**
Fillmore	44	41	53	**138**
Friendship	29	26	21	**76**
Genesee Valley	42	44	44	**130**
Immaculate Conception	18	15	0	**33**
Scio	26	37	26	**89**
Wellsville	93	78	84	**255**
Whiteville	19	17	17	**53**
Allegany County Total	**520**	**509**	**506**	**1,535**

Results

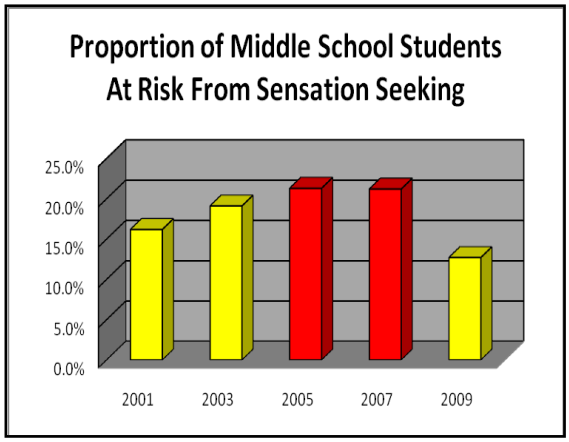
Risk and Protective Factors - Tables 2a and 2b show the percent of middle school and high school students who scored at or above the risk level on each factor. Tables are sorted by column five, that is, from the most common Risk Factors to least common in 2009 in the county. The final column gives the percentage of change from the 2007 survey to the 2009 survey.

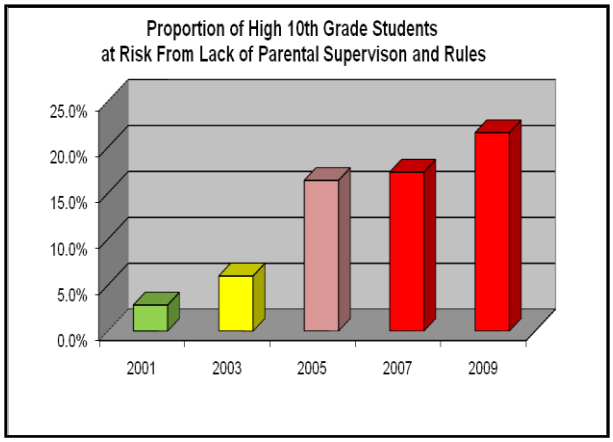
The most prevalent risk factor among middle school students in Allegany County Schools was *Community Disorganization* with more than one in five (20.2%) scoring above the risk level on the 2009 survey. *Family History of Antisocial Behavior* (19.1%) was the next most prevalent risk factor followed by *Personal Transition and Mobility* (17.9%) and *Low Neighborhood Attachment* (14.3%). In terms of protective factors, Allegany County middle school students were most likely to lack *Rewards for Prosocial Involvement in the Community* (16.1%), *Opportunities for Prosocial Involvement in the Family* (15.1%), and *Attachment to Family* (10.7%).

Sensation Seeking, which had been the most prevalent risk factor for several years, decreased over 40% in 2009 though it remains one of the 10 most prevalent factors.

Among high school students in Allegany County Schools, *Community Disorganization* was the most prevalent risk factor with 25.2% at risk while 24.3% were at risk from perceived *Sensation Seeking* and 22.9% scored above the risk level on *Rebelliousness*. The least prevalent protective factor was *Rewards for Prosocial Behavior in the Community* with 23.5% at the risk level. In addition, 23.6% lacked *Opportunity for Prosocial Involvement in the Family* and 23.6% lacked *Rewards for Prosocial Involvement in the Family.*

There has been a dramatic increase in *Lack of Supervision and Rules in the Family* from 2.8% at risk in 2001 to 21.6% in 2009.

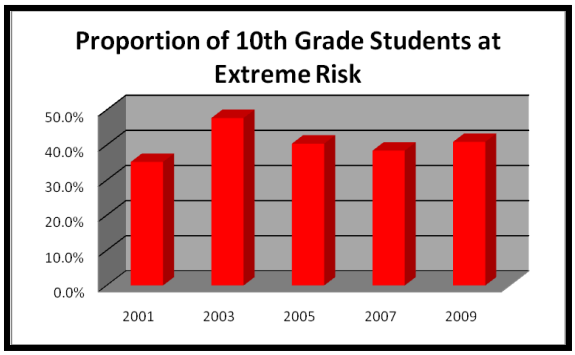


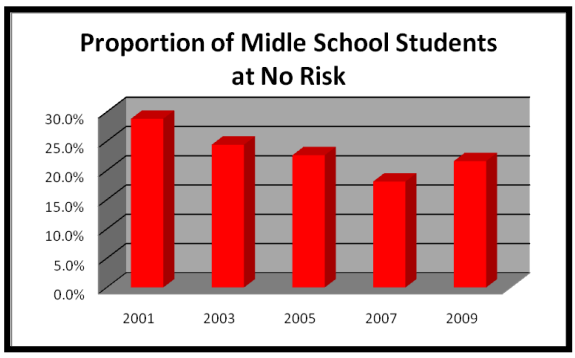


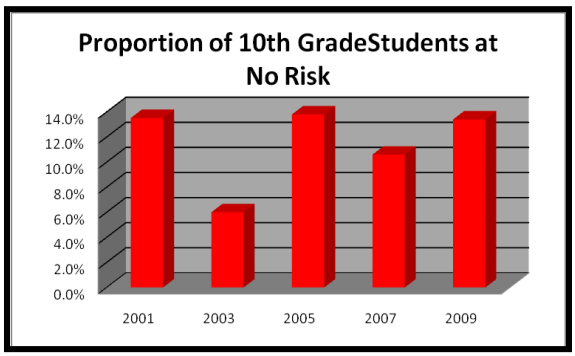
Overall Risk Levels - The Risk and Protective Factor framework states that an individual student's likelihood of being involved in substance abuse, violence or other negative behavior increases relative to the number of factors from which the student is at-risk. Thus, an additional measure of overall Risk and Protection in a community is the number of individual students reporting multiple factors beyond the at-risk level. Table's 3a and 3b show the frequencies of the number of factors on which students scored above the risk level.

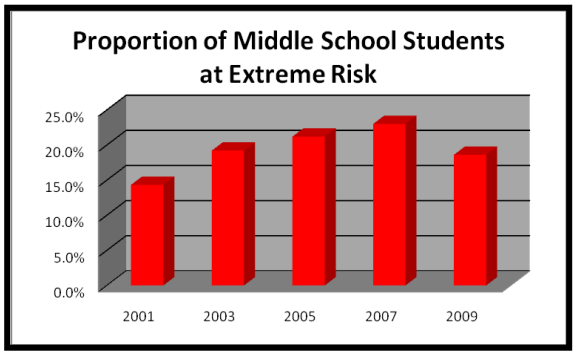
Among middle school students the overall risk profile showed substantial improvement in 2009 compared to 2007 with more students having no risk factors (21.6% vs. 18.1%) and fewer students scoring at risk on five or more scales (18.6% vs. 23.0%).

High school students in Allegany County Schools showed an increase in the proportion of students scoring below the risk on all factors, (13.4% vs. 10.6%) however; there was an increase in students with five or more risk factors (40.9% vs. 38.4%).



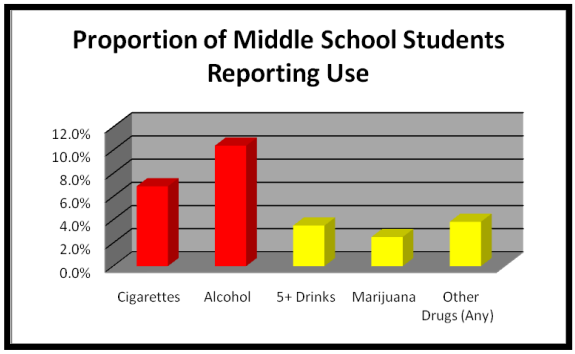


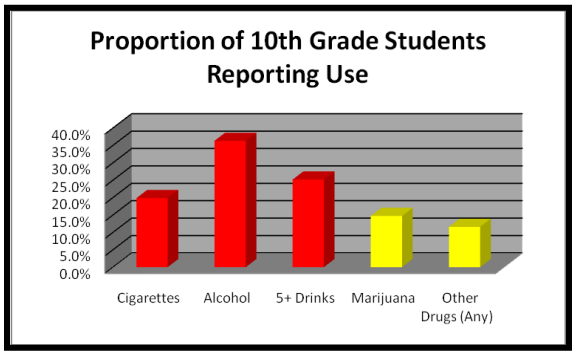




Substance Use

In 2009, increasing proportions (6.9% middle school, 19.8% high school) of students reported use of cigarettes in the 30 days prior to the survey. One in ten (10.4%) middle school students reported any use of alcohol with 3.5% reporting having five or more drinks on any one occasion. More than a third (36.3%) of high school students reported drinking in the previous 30 days, a substantial increase from the 2007 level (32.1%). Acute intoxication, that is, five or more drinks on a single occasion, increased from 17.3% in 2007 to 25.2% in 2009. Compared to 2007, fewer (2.5%) middle school students and more high school students (14.7%) reported marijuana use. Among middle school students 3.8% reported use of any other drug while 11.6% of high school students reported use of any other drug in the past 30 days, both substantial increases from the 2007 survey.





Overall, the pattern of reported substance use is below recently reported national surveys though cigarette, alcohol and other drug use, showed substantial increases in reported use. In Allegany County Schools, as in most of upstate New York, alcohol remains the drug of choice.

Table 2a
Allegany County Middle School Students
Percentage of Students at Risk[1]

Risk and Protective Factor	Survey 2001	Survey 2003	Survey 2005	Survey 2007	Survey 2009	Change 2007 to 2009
N	1075	1057	1000	919	915	
Community Disorganization (R2-C)	19.8%	10.3%	20.7%	18.4%	**20.2%**	9.8%
Family History of Antisocial Behavior (R9-F)	8.7%	17.6%	6.7%	19.2%	**19.1%**	-0.5%
Personal Transitions/Mobility (R3-C)	12.2%	16.0%	15.3%	19.4%	**17.9%**	-7.7%
Rewards for Prosocial Behavior (P2-C)	10.4%	14.0%	15.4%	16.4%	**16.1%**	-1.8%
Opportunities for Prosocial Involvement (P1-C)	7.9%	11.6%	16.6%	13.6%	**15.1%**	11.0%
Low Neighborhood Attachment(R1-C)	12.9%	23.2%	14.6%	13.3%	**14.3%**	7.5%
Sensation Seeking (R22-PI)	16.2%	19.1%	21.3%	21.2%	**12.7%**	-40.1%
Rebelliousness (R14-PI)	14.1%	8.9%	13.8%	12.3%	**11.1%**	-9.8%
Family Conflict (R8-F)	13.2%	9.7%	12.0%	11.4%	**10.9%**	-4.4%
Attachment (P3-F)	11.3%	9.4%	11.2%	11.1%	**10.7%**	-3.6%
Favorable Attitudes Toward Antisocial Beh (R18-PI)	10.1%	8.8%	13.9%	12.5%	**10.6%**	-15.2%
Rewards for Prosocial Involvement (P5-F)	8.6%	9.4%	11.9%	12.6%	**10.2%**	-19.0%
Opportunities for Prosocial Involvement (P4-F)	9.8%	9.5%	11.1%	13.8%	**9.8%**	-29.0%
Lack of Supervision and Rules (R6-F)	2.7%	3.2%	9.9%	9.8%	**9.4%**	-4.1%
Poor Discipline (R7-F)	5.9%	6.3%	6.7%	9.9%	**8.9%**	-10.1%
Social Skills (P10-PI)	7.1%	5.9%	16.4%	8.9%	**8.7%**	-2.2%
Rewards for Antisocial Involvement (R23-PI)	15.7%	8.2%	10.5%	7.8%	**8.5%**	9.0%
Opportunities for Prosocial Involvement (P6-S)	11.6%	17.9%	10.3%	7.3%	**7.7%**	5.5%
Perceived Risks of Drug Use (P8-PI)	6.6%	6.9%	7.1%	8.5%	**7.4%**	-12.9%
Impulsiveness (R16-PI)	13.4%	14.4%	16.9%	16.5%	**6.7%**	-59.4%
Rewards for Prosocial Involvement (P7-S)	9.1%	9.0%	7.2%	5.3%	**6.4%**	20.8%
Laws and Norms Favorable to Drug Use (R4-C)	6.8%	5.1%	6.0%	4.6%	**5.6%**	21.7%
Parental Attitudes Favor Antisocial Beh (R11-F)	8.0%	6.1%	6.6%	8.2%	**4.9%**	-40.2%
Perceived Availability of Drugs (R5-C)	4.7%	2.5%	4.8%	5.3%	**4.4%**	-17.0%
Favorable Attitudes Toward Drug Use (R19-PI)	6.2%	3.6%	4.9%	3.9%	**4.2%**	7.7%
Belief in Moral Order (P11-PI)	6.1%	5.6%	3.6%	4.4%	**3.3%**	-25.0%
Friend Use Drugs (R21-PI)	5.7%	1.9%	4.0%	3.5%	**2.2%**	-37.1%
Interaction With Antisocial Peers (R20-PI)	4.7%	3.3%	4.0%	5.5%	**1.2%**	-78.2%
Antisocial Behavior (R17-PI)	1.4%	1.5%	3.5%	3.6%	**0.8%**	-77.8%
Parental Attitudes Favorable to Drug Use (R10-F)	3.6%	2.9%	3.1%	2.9%	**0.3%**	-89.7%
Little Commitment to School (R13-S)	4.7%	4.2%	7.9%	3.7%	**0.3%**	-91.9%
Early Initiation of Problem Behavior (R15-PI)	0.0%	0.4%	0.0%	0.0%	**0.0%**	na
Religiosity (P9-PI)	0.1%	0.0%	0.0%	0.0%	**0.0%**	na

(1-"At-risk"=>1 standard score on Risk Factor or <-1 on Protective Factor)
(R=Risk Factor P=Protective Factor)
(PI=Peer/Individual Domain)
(S=School Domain)

Table 2b
Allegany County High School Students

Percentage of Students at Risk[1]

Risk and Protective Factor	Survey	Survey	Survey	Survey	Survey	Change
	2001	2003	2005	2007	2009	2007 to 2009
N	563	503	499	502	449	
Community Disorganization (R2-C)	24.7%	9.1%	26.3%	24.1%	**25.2%**	4.6%
Sensation Seeking (R22-PI)	24.0%	43.1%	32.1%	32.3%	**24.3%**	-24.8%
Rewards for Prosocial Behavior (P2-C)	15.1%	24.5%	21.0%	19.5%	**23.6%**	21.0%
Opportunities for Prosocial Involvement (P4-F)	17.9%	20.9%	22.4%	18.1%	**23.6%**	30.4%
Rewards for Prosocial Involvement (P5-F)	14.4%	20.7%	18.8%	19.3%	**23.6%**	22.3%
Rebelliousness (R14-PI)	21.8%	23.9%	19.2%	18.3%	**22.9%**	25.1%
Favorable Attitudes Toward Antisocial Beh (R18-PI)	19.2%	21.5%	19.8%	22.7%	**22.0%**	-3.1%
Low Neighborhood Attachment(R1-C)	17.8%	41.7%	18.6%	19.3%	**21.6%**	11.9%
Lack of Supervision and Rules (R6-F)	2.8%	6.0%	16.4%	17.3%	**21.6%**	24.9%
Personal Transitions/Mobility (R3-C)	16.3%	11.5%	18.6%	21.9%	**21.4%**	-2.3%
Family Conflict (R8-F)	14.4%	15.3%	16.0%	16.9%	**20.7%**	22.5%
Attachment (P3-F)	16.0%	14.3%	17.8%	16.1%	**20.0%**	24.2%
Impulsiveness (R16-PI)	15.8%	16.5%	15.4%	21.3%	**19.8%**	-7.0%
Poor Discipline (R7-F)	14.6%	14.1%	11.0%	15.5%	**19.4%**	25.2%
Family History of Antisocial Behavior (R9-F)	18.7%	46.3%	15.8%	15.9%	**18.0%**	13.2%
Laws and Norms Favorable to Drug Use (R4-C)	20.2%	22.1%	17.4%	19.5%	**17.1%**	-12.3%
Perceived Risks of Drug Use (P8-PI)	12.8%	11.7%	14.0%	10.0%	**16.7%**	67.0%
Rewards for Antisocial Involvement (R23-PI)	17.6%	14.5%	15.2%	14.5%	**14.5%**	0.0%
Opportunities for Prosocial Involvement (P1-C)	9.1%	8.3%	9.4%	8.4%	**12.9%**	53.6%
Perceived Availability of Drugs (R5-C)	15.3%	23.1%	14.2%	13.9%	**12.7%**	-8.6%
Parental Attitudes Favor Antisocial Beh (R11-F)	9.9%	9.9%	12.2%	11.4%	**11.6%**	1.8%
Friend Use Drugs (R21-PI)	19.0%	16.3%	16.2%	12.2%	**10.7%**	-12.3%
Opportunities for Prosocial Involvement (P6-S)	16.3%	25.6%	9.6%	11.4%	**10.0%**	-12.3%
Parental Attitudes Favorable to Drug Use (R10-F)	11.9%	12.7%	12.6%	10.0%	**9.4%**	-6.0%
Social Skills (P10-PI)	7.5%	8.0%	10.2%	9.4%	**9.4%**	0.0%
Rewards for Prosocial Involvement (P7-S)	12.6%	19.7%	8.0%	11.6%	**8.2%**	-29.3%
Favorable Attitudes Toward Drug Use (R19-PI)	21.0%	16.1%	4.2%	6.0%	**5.6%**	-6.7%
Belief in Moral Order (P11-PI)	12.1%	15.9%	6.6%	3.8%	**4.5%**	18.4%
Little Commitment to School (R13-S)	10.8%	9.9%	10.4%	9.6%	**2.4%**	-75.0%
Interaction With Antisocial Peers (R20-PI)	9.4%	8.7%	7.2%	8.6%	**1.6%**	-81.4%
Antisocial Behavior (R17-PI)	3.7%	8.2%	5.6%	7.4%	**0.4%**	-94.6%
Early Initiation of Problem Behavior (R15-PI)	0.0%	11.9%	0.0%	0.0%	**0.0%**	na
Religiosity (P9-PI)	0.0%	0.0%	0.0%	0.0%	**0.0%**	na

(1-"At-risk"=>1 standard score on Risk Factor or <-1 on Protective Factor)
(R=Risk Factor P=Protective Factor)
(PI=Peer/Individual Domain)
(S=School Domain)

Table 3a
Middle School Students by Number of Factors at the At-Risk Level

	Allegany County 2001	Allegany County 2003	Allegany County 2005	Allegany County 2007	Allegany County 2009
No Factors At-Risk	28.8%	24.4%	22.6%	18.1%	**21.6%**
One	24.7%	24.5%	22.1%	24.0%	**24.3%**
Two	17.4%	15.1%	15.1%	16.2%	**16.3%**
Three	7.7%	9.8%	11.1%	10.6%	**12.3%**
Four	7.0%	7.0%	7.9%	8.1%	**6.9%**
Five or More	14.3%	19.2%	21.2%	23.0%	**18.6%**

Table 3b
High School Students by Number of Factors at the At-Risk Level

	Allegany County 2001	Allegany County 2003	Allegany County 2005	Allegany County 2007	Allegany County 2009
No Factors At-Risk	13.5%	6.0%	13.8%	10.6%	**13.4%**
One	16.7%	11.1%	16.4%	18.3%	**14.5%**
Two	13.9%	14.1%	13.8%	14.5%	**10.7%**
Three	12.1%	13.7%	10.4%	9.6%	**8.0%**
Four	8.5%	7.4%	5.2%	8.6%	**12.5%**
Five or More	35.2%	47.7%	40.4%	38.4%	**40.9%**

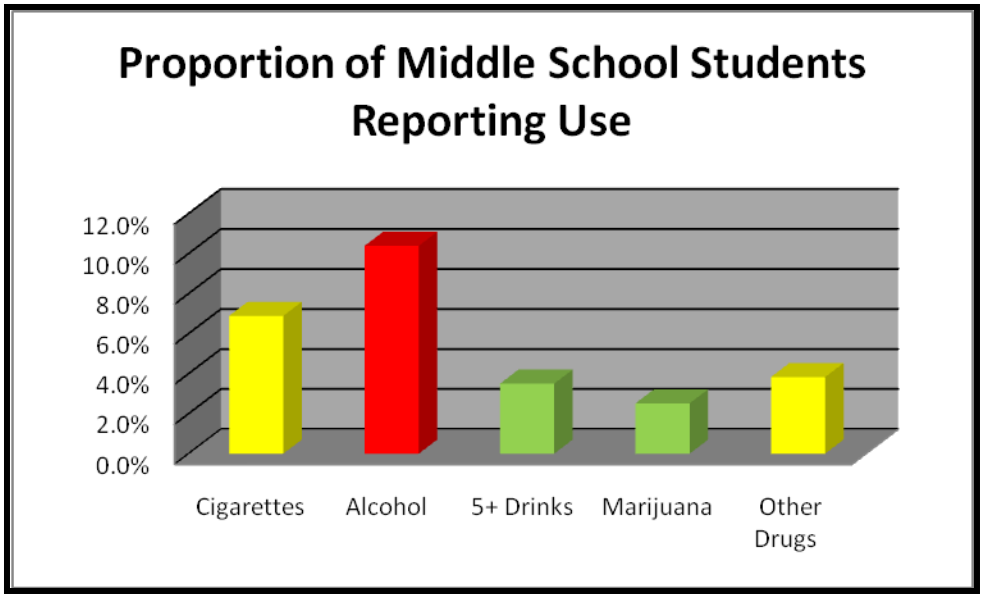
Prevalence of Substance Use

Table 4 provides the proportions of middle and high school students who reported one or more use of each substance in the 30 days prior to the survey.

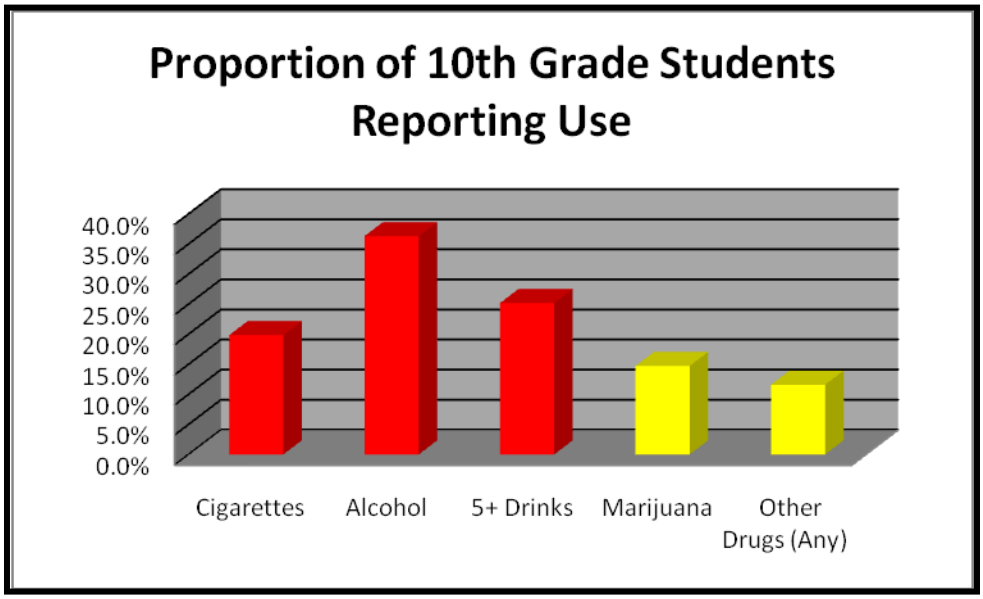
Table 4

Allegany County Schools Risk and Protective Factor Survey Used in Past 30 Days **N=**	**Middle School 2005 1000**	**Middle School 2007 919**	**Middle School 2009 1029**	**High School 2005 499**	**High School 2007 499**	**High School 2009 506**
Cigarettes	3.3%	6.0%	**6.9%**	7.4%	15.1%	**19.8%**
Alcohol	9.8%	9.7%	**10.4%**	36.1%	32.1%	**36.3%**
5+ Drinks	3.6%	4.7%	**3.5%**	24.4%	17.3%	**25.2%**
Marijuana	3.5%	3.2%	**2.5%**	14.6%	14.3%	**14.7%**
Other Drugs (Any)	3.7%	1.0%	**3.8%**	10.0%	3.8%	**11.6%**
Cocaine	1.1%	0.7%	**1.3%**	2.2%	1.0%	**1.8%**
Cough/Cold Med	1.5%	0.4%	**2.0%**	3.2%	1.2%	**2.4%**
Crack	1.4%	0.7%	**0.9%**	1.2%	1.2%	**0.9%**
Ecstasy	0.8%	0.5%	**1.0%**	2.2%	1.0%	**0.9%**
Heroin	1.0%	0.4%	**0.9%**	1.0%	0.6%	**0.7%**
Inhalants	1.1%	0.8%	**1.6%**	3.6%	3.2%	**2.9%**
LSD/psychedelic	0.9%	0.2%	**0.8%**	2.2%	0.2%	**1.3%**
Steroids	0.7%	0.5%	**0.9%**	1.0%	1.2%	**0.7%**
Uppers/Amphetamines	0.5%	0.5%	**0.9%**	2.0%	1.2%	**2.0%**
Vicodin\Oxycontin	1.0%	0.7%	**1.9%**	3.6%	2.6%	**6.9%**
Other Prescription Drug	2.0%	0.8%	**1.2%**	4.2%	2.0%	**4.5%**
Other	2.4%	0.7%	**1.7%**	3.8%	2.4%	**2.7%**

In 2009, increasing proportions (6.9% middle school, 19.8% high school) of students reported use of cigarettes in the 30 days prior to the survey. One in ten (10.4%) of middle school students reported any use of alcohol with 3.5% reporting having five or more drinks on any one occasion. More than a third (36.3%) of high school students reported drinking in the previous 30 days. This is a substantial increase from the 2007 level (32.1%). Acute intoxication, that is, five or more drinks on a single occasion, decreased from 17.3% in 2007 to 25.2% in 2009. Compared to 2007, fewer (2.5%) middle school students and slightly more high school students (14.7%) reported marijuana use. Among middle school students only 3.8% reported use of any other drug while 11.6% of high school students reported use of any other drug in the past 30 days, both substantial increases from the 2007 survey.



Overall, the pattern of reported substance use is below recently reported national surveys and, with exception of cigarettes, showed substantial decreases in reported use. In Allegany County Schools, as in most of upstate New York, alcohol remains the drug of choice.



Attachment I

Risk and Protective Factor Survey

Factor (Scale) Definitions

October 2000

COMMUNITY: Low Neighborhood Attachment (R1)
I like my neighborhood.
If I had to move, I would miss the neighborhood I now live in.

COMMUNITY: Community Disorganization (R2)
How much do each of the following statements describe your neighborhood:
- crime and/or drug selling.
- fights.
- lots of empty or abandoned buildings.
- lots of graffiti.

COMMUNITY: Personal Transitions and Mobility (R3)
Have you changed homes in the past year?
How many times have you changed homes since kindergarten?
Have you changed schools in the past year?
How many times have you changed schools since kindergarten?

COMMUNITY: Laws and Norms Favorable to Drug Use (R4)
How wrong would most adults in your neighborhood think it was for kids your age:
- to use marijuana.
- to drink alcohol.
- to smoke cigarettes.

If a kid drank some beer, wine or hard liquor (for example, vodka, whiskey, or gin) in your neighborhood would he or she be caught by the police?
If a kid smoked marijuana in your neighborhood would he or she be caught by the police?
If a kid carried a handgun in your neighborhood would he or she be caught by the police?

COMMUNITY: Perceived Availability of Drugs & Handguns (R5)
If you wanted to get some beer, wine or hard liquor (for example, vodka, whiskey, or gin), how easy would it be for you to get some?
If You wanted to get some cigarettes, how easy would it be for you to get some?
If you wanted to get some marijuana, how easy would it be for you to get some?
If you wanted to get a drug like cocaine, LSD, or amphetamines, how easy would it be for you to get some?
If you wanted to get a handgun, how easy would it be for you to get one?

COMMUNITY: Opportunities for Prosocial Involvement (P1)
Which of the following activities for people your age are available in your community?
sports teams.
scouting.
boys and girls clubs.
4-H clubs.
service clubs.

COMMUNITY: Rewards for Prosocial Involvement (P2)
My neighbors notice when I am doing a good job and let me know.
There are people in my neighborhood who encourage me to do my best.
There are people in my neighborhood who are proud of me when I do something well.

FAMILY: Lack of Supervision and Rules (R6)
My parents ask if I've gotten my homework done.
My parents want me to call if I'm going to be late getting home.
Would your parents know if you did not come home on time?
When I am not at home, one of my parents knows where I am and who I am with.
The rules in my family are clear.
My family has clear rules about alcohol and drug use.

FAMILY: Poor Discipline (R7)
If you drank some beer or wine or liquor (for example, vodka, whiskey, or gin) without your parents' permission, would you be caught by your parents?
If you skipped school would you be caught by your parents?
If you carried a handgun without your parents' permission, would you be caught by your parents?
FAMILY: Family Conflict (R8)
People in my family often insult or yell at each other.
People in my family have serious arguments.
We argue about the same things in my family over and over.

FAMILY: Family History of Antisocial Behavior (R9)
Has anyone in your family ever had a severe alcohol or drug problem?
Have any of your brothers or sisters ever:
drunk beer, wine or hard liquor (for example, vodka, whiskey or gin)?
smoked marijuana?
smoked cigarettes?
taken a handgun to school?
been suspended or expelled from school?

About how many adults have you known personally who in the past year have:
used marijuana, crack, cocaine, or other drugs?
sold or dealt drugs?
done other things that could get them in trouble with the police like stealing, selling stolen goods, mugging or assaulting others, etc)
gotten drunk or high?

FAMILY: Parental Attitudes Favorable Toward Drug Use (R10)
How wrong do your parents feel it would be for <u>you</u> to:
drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?
smoke cigarettes?
smoke marijuana?

FAMILY: Parental Attitudes Favorable to Antisocial Behavior (R11)
How wrong do your parents feel it would be for <u>you</u> to:
steal anything worth more than $5?
draw graffiti, or write things or draw pictures on buildings or other property (without the owner's permission)?
pick a fight with someone?

FAMILY: Attachment (P3)
Do you feel very close to your mother?
Do you share your thoughts and feelings with your mother?
Do you feel very close to your father?
Do you share your thoughts and feelings with your father?

FAMILY: Opportunities for Prosocial Involvement (P4)
My parents give me lots of chances to do fun things with them.
My parents ask me what I think before most family decisions affecting me are made.
If I had a personal problem, I could ask my mom or dad for help.

FAMILY: Rewards for Prosocial Involvement (P5)
My parents notice when I am doing a good job and let me know about it.
How often do your parents tell you they're proud of you for something you've done?
Do you enjoy spending time with your mother?
Do you enjoy spending time with your father?

SCHOOL: Academic Failure (R12)
Putting them all together, what were your grades like last year? (#53)
Are your school grades better than the grades of most students in your class? (#54)

SCHOOL: Little Commitment to School (R13)
How often do you feel that the school work you are assigned is meaningful and important? (#55)
How interesting are most of your courses to you? (#56)
How important do you think the things you are learning in school are going to be for your later life? (#57)
Now, thinking back over the past year in school, how often did you...
Enjoy being in school? (#58a)
Hate being in school? (#58b)
Try to do your best work in school? (#58c)
During the LAST FOUR WEEKS how many whole days have you missed...
because of illness (#59a)
because you skipped or "cut" (#59b)
for other reasons (#59c)

SCHOOL: Opportunities for Prosocial Involvement (P6)
In my school, students have lots of chances to help decide
things like class activities and rules. (#60)
There are lots of chances for students in my school to talk with a teacher one-on-one. (#61)
Teachers ask me to work on special classroom projects. (#62)
There are lots of chances for students in my school to get involved in
sports, clubs, and other school activities outside of class. (#63)
I have lots of chances to be part of class discussions or activities. (#64)

SCHOOL: Rewards for Prosocial Involvement (P7)
My teacher(s) notices when I am doing a good job and lets me know about it. (#65)
The school lets my parents know when I have done something well. (#66)
I feel safe at my school. (#67)
My teachers praise me when I work hard in school. (#68)

PEER-INDIVIDUAL: Rebelliousness (R14)
I do the opposite of what people tell me, just to get them mad.
I ignore rules that get in my way.
I like to see how much I can get away with.

PEER-INDIVIDUAL: Early Initiation of Problem Behavior (r15)
How old were you when you first:

- smoked marijuana?
- smoked a cigarette, even just a puff?
- had more than a sip or two of beer, wine or hard liquor (for example, vodka, whiskey, or gin)?
- began drinking alcoholic beverages regularly, that is, at least once or twice a month?
- got suspended from school?
- got arrested?
- carried a handgun?
- attacked someone with the idea of seriously hurting them?

PEER-INDIVIDUAL: Impulsiveness (R16)
It is important to think before you act.
Do you have to have everything right away?
I often do things without thinking about what will happen.
Do you often switch from activity to activity rather than sticking to one thing at a time?

PEER-INDIVIDUAL: Antisocial Behavior (R17)
How many times in the past year (12 months) have you:

- been suspended from school?
- carried a handgun?
- sold illegal drugs?
- stolen or tried to steal a motor vehicle such as a car or motorcycle?
- been arrested?
- attacked someone with the idea of seriously hurting them?
- been drunk or high at school?
- taken a handgun to school?

PEER-INDIVIDUAL: Favorable Attitudes Toward Antisocial Behavior (R18)
How wrong do you think it is for someone your age to:

- take a handgun to school?
- steal anything worth more than $5?
- pick a fight with someone?
- attack someone with the idea of seriously hurting them?
- stay away from school all day when their parents think they are at school?

PEER-INDIVIDUAL: Favorable Attitudes Toward Drug Use (R19)
How wrong do you think it is for someone your age to:

- drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?
- smoke cigarettes?
- smoke marijuana?
- use LSD, cocaine, amphetamines or another illegal drug?

PEER-INDIVIDUAL: Perceived Risks of Drug Use (P8)
How much do you think people risk harming themselves (physically or in other ways) if they:

Smoke one or more packs of cigarettes per day?
Try marijuana once or twice?
Smoke marijuana regularly? Take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day?

PEER-INDIVIDUAL: Interaction with Antisocial Peers (R20)
Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:

been suspended from school?
carried a handgun?
sold illegal drugs?
stolen or tried to steal a motor vehicle such as a car or motorcycle?
been arrested?
dropped out of school?

PEER-INDIVIDUAL: Friends' Use of Drugs (R21)
Think of your four best friends (the friends you feel closest to). In the past year (12 months), how many of your best friends have:

smoked cigarettes?
tried beer, wine or hard liquor (for example, vodka, whiskey or gin)
when their parents didn't know about it?
used marijuana?

PEER-INDIVIDUAL: Sensation Seeking (R22)
How many times have you done the following things?

Done what feels good no matter what.
Done something dangerous because someone dared you to do it.
Done crazy things even if they are a little dangerous.

PEER-INDIVIDUAL: Rewards for Antisocial Involvement (R23)
What are the chances you would be seen as cool if you:

smoked cigarettes?
began drinking alcoholic beverages regularly,
that is, at least once or twice a month?
smoked marijuana?
carried a handgun?

PEER-INDIVIDUAL: Religiosity (P9)
How often do you attend religious services or activities?

PEER-INDIVIDUAL: Social Skills (P10)

You're looking at CD's in a music store with a friend. You look up and see her slip a CD under her coat. She smiles and says "Which one do you want? Go ahead, take it while nobody's around." There is nobody in sight, no employees and no other customers. What would you do now?

Ignore her
Grab a CD and leave the store
Tell her to put the CD back
Act like it's a joke, and ask her to put the CD back

It's 8:00 on a weeknight and you are about to go over to a friend's home when your mother asks you where you are going. You say "Oh, just going to go hang out with some friends." She says, "No, you'll just get into trouble if you go out. Stay home tonight." What would you do now?

Leave the house anyway
Explain what you are going to do with your friends, tell her when you'd get home, and ask if you can go out
Not say anything and start watching TV
Get into an argument with her

You are visiting another part of town, and you don't know any of the people your age there. You are walking down the street, and some teenager you don't know is walking toward you. He is about your size, and as he is about to pass you, he deliberately bumps into you and you almost lose your balance. What would you say or do?

Push the person back
Say "Excuse me" and keep on walking
Say "Watch where you're going" and keep on walking
Swear at the person and walk away

You are at a party at someone's house, and one of your friends offers you a drink containing alcohol. What would you say or do?

Drink it
Tell your friend "No thanks, I don't drink" and suggest that you and your friend go and do something else
Just say "No, thanks" and walk away
Make up a good excuse, tell your friend you had something else to do, and leave

PEER-INDIVIDUAL: Belief in the Moral Order (P11)

I think it is okay to take something without asking if you can get away with it.
I think sometimes it's okay to cheat at school.
It is all right to beat up people if they start the fight.
It is important to be honest with your parents, even if they become upset or you get punished.

ATTACHMENT II

Archival and Indicator Data Used in Strategic Planning

KIDS WELL-BEING INDICATORS CLEARNINGHOUSE (KWIC)

KWIC- Archival data were extracted from the Kids' Well-being Indicators Clearinghouse (KWIC) Website from the New York State Council of Children and Families. Tables IV-A-6-a-l show rates of youth related problem indicators and health risks.

Table IV-A-6-a.
KWIC Profile: Allegany County - 2007
Life Area: Economic Security

Indicators	Allegany County Number	Rate	Upstate New York Number	Rate
Children and Youth Living Below Poverty, percent of children/youth ages birth-17 years.	2,056	19.8	345,747	13.5
Children and Youth Receiving Food Stamps, percent of children/youth ages birth-17 years	1,789	17.8	299,858	11.9
Children and Youth Receiving Public Assistance, percent of children/youth ages birth-17 years	509	5.1	94,098	3.7
Children and Youth Receiving Supplemental Security Income, percent of children/youth ages birth-19 years	185	1.4	37,630	1.3
Children Receiving Free or Reduced-price School Lunch - Public Schools, percent of children in grades K-6	2,004	53.6	284,378	32.3

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-b.
Life Area: Physical and Emotional Health

Indicators	Allegany County Number	Rate	Upstate New York Number	Rate
Adolescent Births by Age - 10-14 years, rate/1,000 females ages 10-14 years	0	0	117	0.3
Adolescent Births by Age - 15-17 years, rate/1,000 females ages 15-17 years	12	10.7	2,533	11.4
Adolescent Births by Age - 15-19 years, rate/1,000 females ages 15-19 years	45	18	8,908	24
Adolescent Pregnancies by Age - 10-14 years, rate/1,000 females ages 10-14 years	1	0.7	349	0.9
Adolescent Pregnancies by Age - 15-17 years, rate/1,000 females ages 15-17 years	14	13.9	5,790	24.3
Adolescent Pregnancies by Age - 15-19 years, rate/1,000 females ages 15-19 years	53	20.9	17,021	41.5
Asthma - Hospitalizations 0-4 years (Three-Year Average),rate/10,000 children ages birth-4 years	11	40.5	2,479	37.8
Asthma - Hospitalizations 5-14 years (Three-Year Average),rate/10,000 children ages 5-14 years	4	6.9	1,625	11.1

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-c.
KWIC Profile: Allegany County - 2007
Life Area: Physical and Emotional Health

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
Births - Low Birth weight Births (<2,500 Grams) Mothers 10-19 years, percent of live births for females ages 10-19 years	4	8.9	933	10.3
Births - Low Birth weight Births (<2,500 Grams) Mothers All Ages, percent of live births for females all ages	37	7.3	10,235	7.9
Births - Premature Births (Less Than 37 Weeks) - Mothers 10-19 years, percent of live births for females ages 10-19 years	3	7	1,158	14
Births - Premature Births (Less Than 37 Weeks) - Mothers All Ages, percent of live births for females all ages	39	8.2	14,638	12
Infant Mortality (Three-Year Average), rate/1,000 live births	4	7.1	751	5.8
Infant Mortality - Neonatal (Three-Year Average), rate/1,000 live births	2	4.5	537	4.1
Infant Mortality - Post neonatal (Three-Year Average), rate/1,000 live births	1	2.6	214	1.7
Lead Elevated Incidence, percent of screened children ages birth-6 years	6	1.1	2,805	1.6

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-d.
KWIC Profile: Allegany County - 2007
Life Area: Physical and Emotional Health

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
Lead Screening, percent of children birth-2 years	313	59.5	88,751	67.6
Mortality by Age - Adolescents 10-14 years (Three-Year Average),rate/100,000 youth ages 10-14 years	0	10.6	95	12.2
Mortality by Age - Adolescents 15-19 years (Three-Year Average),rate/100,000 youth ages 15-19 years	3	53.1	373	45.9
Mortality by Age - Children 1-4 years (Three-Year Average),rate/100,000 children ages 1-4 years	2	78.4	118	22.5
Mortality by Age - Children 5-9 years (Three-Year Average),rate/100,000 children ages 5-9 years	0	0	78	11.4
Motor Vehicle Crashes - Hospitalizations (Three-Year Average),rate/100,000 youth/young adults ages 15-24 years	11	92.9	2,351	149.1
Motor Vehicle Crashes - Mortality (Three-Year Average),rate/100,000 youth/young adults ages 15-24 years	3	29	289	18.3

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-e.
KWIC Profile: Allegany County - 2007
Life Area: Physical and Emotional Health

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
Prenatal Care - Births to Women 10-19 Years Receiving Early (1st Trimester) Prenatal Care, percent of live births for females ages 10-19 years	30	69.8	4,514	55.5
Prenatal Care - Births to Women 10-19 Years Receiving Late (3rd Trimester) or No Prenatal Care, percent of live births for females ages 10-19 years	2	4.7	810	10
Prenatal Care - Births to Women All Ages Receiving Late (3rd Trimester) or No Prenatal Care, percent of live births for females all ages	17	3.6	5,013	4.2
Prenatal Care - Births to Women Receiving Early (First Trimester) Prenatal Care, percent of live births for females all ages	391	81.8	90,806	76.3

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-f.
KWIC Profile: Allegany County - 2007
Life Area: Physical and Emotional Health

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
Self-Inflicted Injuries - Hospitalizations 10-14 years (Three-Year Average),rate/100,000 youth ages 10-14 years	1	31.8	194	25
Self-Inflicted Injuries - Hospitalizations 15-19 years (Three-Year Average),rate/100,000 youth ages 15-19 years	5	82.6	824	101.5
Self-Inflicted Injuries - Suicide Mortality (Three-Year Average),rate/100,000 youth ages 10-19 years	0	3.8	47	3
Unintentional Injuries - Hospitalizations 0-19 years, rate/100,000 children/youth ages birth-19 years	43	312	7,670	262.4
Unintentional Injuries - Mortality 0-19 years (Three-Year Average),rate/100,000 children/youth ages birth-19 years	3	21.2	276	9.4

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-g.
KWIC Profile: Allegany County - 2007
Life Area: Physical and Emotional Health

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
STD - Reported Cases of Chlamydia, Females - all ages,rate/100,000 females all ages	51	201.3	19,145	338.2
STD - Reported Cases of Chlamydia, Females 15-19 yrs,rate/100,000 females ages 15-19 years	22	836.5	7,757	1970
STD - Reported Cases of Chlamydia, Males - all ages,rate/100,000 males all ages	17	66.8	6,694	122.8
STD - Reported Cases of Chlamydia, Males 15-19 yrs,rate/100,000 males ages 15-19 years	3	99.4	1,633	390.8
STD - Reported Cases of Early Syphilis (Three-Year Average),rate/100,000 youth ages 15-19 years	0	0	6	0.7
STD - Reported Cases of Gonorrhea (Three-Year Average),rate/100,000 youth ages 15-19 years	2	29.5	2,053	253

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-h.
KWIC Profile: Allegany County - 2007
Life Area: Education

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
Annual Dropouts - Public Schools, percent of students enrolled in grades 9-12	61	2.0	16,581	2.3
High School Graduates Intending to Enroll in College - Public Schools, percent of graduating seniors	462	86.2	102,952	88.1
High School Graduates Receiving Regents Diplomas - Public Schools, percent of graduates	474	88.4	101,313	86.7
Student Performance in English Language Arts - Public Schools - Grade 3,percent at or above Level 3	370	64.9	92,399	73.2
Student Performance in English Language Arts - Public Schools - Grade 4,percent at or above Level 3	355	67.6	94,468	74.6
Student Performance in English Language Arts - Public Schools - Grade 5,percent at or above Level 3	404	73.7	96,866	74.9
Student Performance in English Language Arts - Public Schools - Grade 6,percent at or above Level 3	348	67.1	93,714	70.3
Student Performance in English Language Arts - Public Schools - Grade 7,percent at or above Level 3	342	56.3	89,020	64.4

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-i.

KWIC Profile: Allegany County - 2007 Life Area: Education Indicators	Allegany County Number	Rate	Upstate New York Number	Rate
Student Performance in English Language Arts - Public Schools - Grade 8,percent at or above Level 3	307	52.7	91,066	65.2
Student Performance in Mathematics - Public Schools - Grade 3,percent at or above Level 3	485	85.5	110,303	87
Student Performance in Mathematics - Public Schools - Grade 4,percent at or above Level 3	401	76.2	105,927	83.2
Student Performance in Mathematics - Public Schools - Grade 5,percent at or above Level 3	416	76.2	102,502	78.9
Student Performance in Mathematics - Public Schools - Grade 6,percent at or above Level 3	393	76.3	100,954	75.4
Student Performance in Mathematics - Public Schools - Grade 7,percent at or above Level 3	411	67.7	100,310	72.2
Student Performance in Mathematics - Public Schools - Grade 8,percent at or above Level 3	337	58.2	92,328	65.9
Student Performance in Science -Public Schools - Grade 4,percent at or above Level 3	482	91.8	116,679	92.1
Student Performance in Science -Public Schools - Grade 8,percent at or above Level 3	476	83.1	94,174	78.1
Student Performance in Social Studies -Public Schools - Grade 5,percent at or above Level 3	453	83.6	112,608	87.5
Student Performance in Social Studies -Public Schools - Grade 8,percent at or above Level 3	402	69.7	97,125	70.4
Students with Limited English Proficiency - Public and Non-Public Schools, percent of students enrolled in Pre-K-grade 12	37	0.5	77,228	4

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-j.
KWIC Profile: Allegany County - 2007
Life Area: Citizenship

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
Hospitalizations Resulting from Assault (Three-Year Average),rate/100,000 youth ages 10-19 years	0	0.0	544	34.3
Referral to Court - JD Intakes rate/1,000 youth ages 10-15 years	72	19.1	15,044	16.1
Referral to Court - JD Intakes by Outcomes - Adjusted, percent of JD intakes of youth ages 10-15 years	48	66.7	6,127	40.7
Referral to Court - JD Intakes by Outcomes - Referred for Court Petition After Diversion Attempt, percent of JD intakes of youth ages 10-15 years	5	6.9	1,495	9.9
Referral to Court - JD Intakes by Outcomes - Referred for Court Petition Immediately, percent of JD intakes of youth ages 10-15 years	16	22.2	7,119	47.3
Referral to Court - JD Offenses Designated as Felonies, percent of JD intakes of youth ages 10-15 years	0	0.0	41	0
Young Adult Arrests - Property Crimes - 16-21 years, rate/10,000 young adults ages 16-21 years	68	96.0	16,406	167.6
Young Adult Arrests - Violent Crimes - 16-21 years, rate/10,000 young adults ages 16-21 years	14	19.8	5,014	51.2
Young Adults - Driving While Intoxicated, rate/10,000 of arrests for young adults ages 16-21 years	55	77.6	6,449	65.9
Young Adults Arrests - Drug Use/Possession/Sale, rate/10,000 of arrests for young adults ages 16-21 years	34	48.0	8,980	91.7

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

Table IV-A-6-k.

KWIC Profile: Allegany County - 2007

Life Area: Family

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
Child Abuse/Maltreatment - Children/Youth in Indicated Reports of Abuse/Maltreatment, rate/1,000 children/youth ages 0-17 years	292	27.8	42,286	15.8
Child Abuse/Maltreatment - Indicated Reports of Child Abuse and Maltreatment, percent of reports	190	30.7	27,119	28.3
Foster Care Admissions - Children/Youth Admitted to Foster Care, rate/1,000 children/youth ages 0-17 years	35	3.3	6,065	2.3
Foster Care Adoption Milestone - Children/Youth Discharged to Adoption, percent of children/youth in foster care with goal and status of free for adoption	11	47.8	948	37.8
Foster Care Adoption Milestone - Children/Youth Freed for Adoption, percent of children/youth in foster care	8	6.4	947	5.8
Foster Care Adoption Milestone - Children/Youth Placed for Adoption, percent of children/youth in foster care with goal of adoption or goal set, freed, placed or discharged to adoption	2	8.7	921	25.2
Foster Care Adoption Milestone - Children/Youth with Adoption Goal Set, percent of children/youth in foster care	7	6.7	1,245	6.9
Foster Care Children In Care - Children/Youth 0-17 years (pre-2000),rate/1,000 children/youth ages birth-17 years	100	8.0	12,567	4.3
Foster Care Children In Care - Children/Youth 0-21 years, rate/1,000 children/youth ages birth-21 years	90	6.1	10,367	3.1
Foster Care Discharges - Children/Youth Discharged from Foster Care, percent children/youth in foster care	39	27.3	7,253	40.2
Foster Care Surrendered Judgments - Surrendered Parental Rights, percent of surrendered parental rights judgments	3	25.0	818	76.8
Foster Care TPR Judgments - Dismissed or Withdrawn Judgments, percent of TPR determinations in given year	7	41.2	538	37.2
Foster Care TPR Judgments - Other Judgments, percent of TPR determinations in given year	3	17.6	78	8.5
Foster Care TPR Judgments - Suspended Judgments, percent of TPR determinations in given year	0	0.0	121	10
Foster Care TPR Judgments - Terminated Judgments, percent of TPR determinations in given year	7	41.2	723	49.8

Source: Kids' Well-being Indicators Clearinghouse (KWIC) Website from the New York State Council of Children and Families.

Table IV-A-6-l.
KWIC Profile: Allegany County - 2007
Life Area: Community

Indicators	Allegany County Number	Allegany County Rate	Upstate New York Number	Upstate New York Rate
Crimes Known to the Police - Firearm Related Index Crimes - General Population, rate/10,000 persons in general population	6	1.2	5,255	4.7
Crimes Known to the Police - Property Index Crimes - General Population, rate/10,000 persons in general population	624	124.4	230,215	207.9
Crimes Known to the Police - Violent Index Crimes - General Population, rate/10,000 persons in general population	85	16.9	29,274	26.4
Unemployment - Resident Civilian, rate of persons 16 years of age and older in the labor force	1,300	5.5	237,800	4.2

Source: Kids' Well-being Indicators Clearinghouse (KWIC)
Website from the New York State Council of Children and Families.

PRISM- The New York State Office of Alcoholism and Substance Abuse Services (OASAS) has developed the Prevention Risk Indicator Services Monitoring System (PRISMS) Risk Profiles to assist New York counties in identifying youth chemical dependence risks and problems. The PRISMS County Profiles provide the 57 counties outside of New York City with information on risk factors for youth chemical dependence. These research-based risk factors, tested in earlier studies, have been found to predict youth chemical dependence problems at the county level. The PRISMS Profiles provide counties with summary risk and consequences information on fifteen risk areas or "constructs" and two consequences indices. Using a research-based risk framework, the PRISMS Profiles group indicators into constructs through a statistical technique known as factor analysis. For example, indicators that measure violence (homicides, hospital diagnoses for intentional injuries, and violent crime arrests) are combined through factor analysis into the Violence Risk Construct. Consequences indicators are grouped through factor analysis into the Youth Alcohol Consequences Index, and the Youth Drug Consequences Index. Tables IV-A-7-a-d show the index scores for Allegany County compared to the average for all upstate counties.

Table IV-A-7-a.

Community Constructs Community Disorganization	**Allegany County**	**Upstate Average**
Urbanicity	11	29
Poverty	79	50
Violence	61	40
Crime	42	44

OASAS Prevention Risk Indicator Services Monitoring System (PRISMS)

Table IV-A-7-b.

Community Constructs Community Alcohol/Drug Exposure	**Allegany County**	**Upstate Average**
Alcohol Accessibility	19	20
Adult Alcohol Treatment	35	32
Adult Probation-Alcohol Indicated	57	58
Adult Drug Exposure	38	32

OASAS Prevention Risk Indicator Services Monitoring System (PRISMS)

Table IV-A-7-c. Youth Risk Constructs	Allegany County	Upstate Average
Interpersonal Problems	36	48
Family Dysfunction	44	42
School Conduct	44	48
School Separation	52	39
Problem Behavior-Delinquency	36	38
Problem Behavior-Sexual	14	33

OASAS Prevention Risk Indicator Services Monitoring System (PRISMS)

Table IV-A-7-d. Youth Consequences Constructs	Allegany County	Upstate Average
Alcohol Consequences	30	35
Drug Consequences	21	37

OASAS Prevention Risk Indicator Services Monitoring System (PRISMS)

ATTACHMENT III

RESULTS OF STRATEGIC PLANNING PRIORITY SETTING PROCESS

The following tables present the result of the PPAC strategic planning process conducted by sector workgroups.

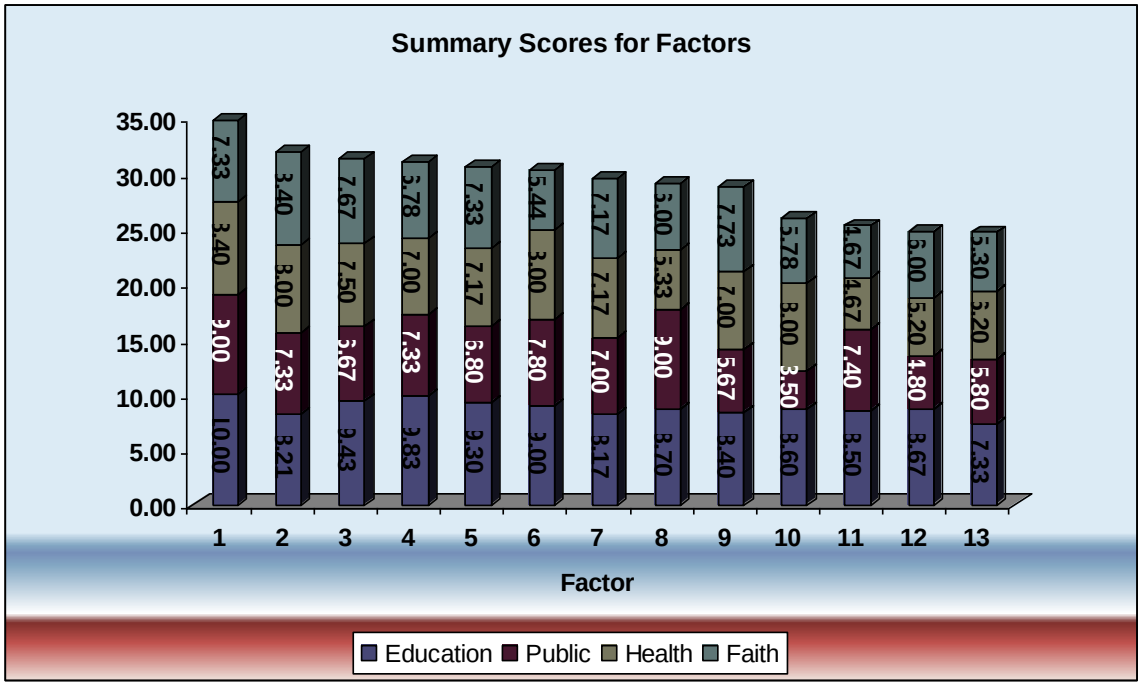
Table IV-D-1.
Priority Factors

Rank Order by Frequency and Prediction **Middle School**	**Predicts*** **ATOD**	**Prevalence**	**# of Resources**	**Overall Rank**
Quartile I				
Little Commitment to School (R13-S)	8	10.9%	21	**1**
Interaction With Antisocial Peers (R20-PI)	19.5	7.7%	22	**2**
Sensation Seeking (R22-PI)	14.5	5.9%	21	**3**
Parental Attitudes Favorable Antisocial Be(R11-F)	18	10.2%	15	**4**
Laws and Norms Favorable to Drug Use (R4-C)	12.5	3.8%	15	**5**
Rewards for Prosocial Involvement P7-S)	8	4.1%	17	**6**
Community Disorganization (R2-C)	26.75	11.5%	25	**7**
Impulsiveness (R16-PI)	20.75	6.5%	8	**8**
Quartile II				
Rebelliousness (R14-PI)	10.25	3.0%	8	**9**
Fam History of Antisocial Behavior (R9-F)	14.25	6.0%	15	**10**
Early Initiation of Problem Behavior (R15-PI)	18.25	21.7%	7	**11**
Social Skills (P10-PI)	5.25	8.1%	24	**12**
Family Conflict (R8-F)	9.25	2.9%	25	**13**
Opportunities for Prosocial Involvement (P6-S)	3.75	4.0%	20	**14**
Friend Use Drugs (R21-PI)	21.75	5.4%	7	**15**
Perceived Risks of Drug Use (P8-PI)	19.25	8.8%	22	**16**
Quartile III				
Personal Transitions/Mobility (R3-C)	27.5	10.0%	8	**18**
Rewards for Antisocial Involvement (R23-PI)	14.5	6.8%	21	**19**
Antisocial Behavior (R17-PI)	23.5	16.7%	9	**20**
Opportunities for Prosocial Involvement (P4-F)	30.5	15.8%	9	**21**
Favorable Attitudes Toward Drug Use (R19-PI)	19.25	8.4%	15	**22**
Religiosity (P9-PI)	22.5	0.0%	25	**23**
Favorable Attitudes Toward Antisocial B(R18-PI)	22.25	13.4%	12	**24**
Rewards for Prosocial Behavior (P2-C)	16	5.1%	15	**25**
Quartile IV				
Lack of Supervision and Rules (R6-F)	22.5	10.5%	17	**26**
Perceived Availability of Drugs (R5-C)	16.75	3.7%	19	**27**
Rewards for Prosocial Involvement (P5-F)	11	2.7%	25	**28**
Parental Attitudes Favorable to Drug Use (R10-F)	28.5	5.5%	17	**29**
Low Neighborhood Attachment(R1-C)	29	11.8%	17	**30**
Attachment (P3-F)	16	0.0%	12	**31**
Belief in Moral Order (P11-PI)	4.5	3.4%	25	**32**
Opportunities for Prosocial Involvement (P1-C)	29.75	7.4%	17	**33**
Poor Discipline (R7-F)	13.75	4.6%	17	**34**

*** Lower number indicates stronger prediction.**

Sector Workgroup Rankings

Table IV-E-1.						
	PPAC Strategic Planning - 2007	**Total**	**Education**	**Public**	**Health**	**Faith**
	Priority Factors for Prevention Plan	**Average**	**Average**	**Average**	**Average**	**Average**
	Factor					
1	**Parental Attitudes Favor Drug Use**	**8.68**	10.00	9.00	8.40	7.33
2	**Favorable Attitudes Toward Drug Use**	**7.99**	8.21	7.33	8.00	8.40
3	**Favorable Attitudes Toward Antisocial Behavior**	**7.82**	9.43	6.67	7.50	7.67
4	**Friends Use Drugs**	**7.74**	9.83	7.33	7.00	6.78
5	**Laws and Norms Favor Drug Use**	**7.65**	9.30	6.80	7.17	7.33
6	**Perceived Risk of Harm From Drugs**	**7.56**	9.00	7.80	8.00	5.44
7	**Social Skills**	**7.38**	8.17	7.00	7.17	7.17
8	**Community Disorganization**	**7.26**	8.70	9.00	5.33	6.00
9	**Lack Neighborhood Attachment**	**7.20**	8.40	5.67	7.00	7.73
10	**Rewards in the Community**	**6.47**	8.60	3.50	8.00	5.78
11	**Perceived Availability of Drugs**	**6.31**	8.50	7.40	4.67	4.67
12	**Lack of Rewards in School**	**6.17**	8.67	4.80	5.20	6.00
13	**Lack of Opportunity in School**	**6.16**	7.33	5.80	6.20	5.30



Legend: Factor Numbers

1 **Parental Attitudes Favor Drug Use**
2 **Favorable Attitudes Toward Drug Use**
3 **Favorable Attitudes Toward Antisocial Behavior**
4 **Friends Use Drugs**
5 **Laws and Norms Favor Drug Use**
6 **Perceived Risk of Harm From Drugs**
7 **Social Skills**
8 **Community Disorganization**
9 **Lack Neighborhood Attachment**
10 **Rewards in the Community**
11 **Perceived Availability of Drugs**
12 **Lack of Rewards in School**
13 **Lack of Opportunity in School**