Table of Contents

Community Overview……..2
Project Narrative …….3
Budget Narrative ……27
Attachment _1_ Sector Table …….....36
Attachment _2_ Coalition Involvement Agreements ……...40
Attachment _3_ 2 Sets of Coalition Minutes ……52
Attachment _4_ Coalition Mission Statement ……..57
Attachment _5_ Grantee/Coalition MOU ……58
Attachment _6_ Assurance of One Grant at a Time……..60
Attachment _7_ 10-Year Funding Limit……61
Attachment _8_ Resumes & Job Descriptions ……63
Attachment _9_ General Applicant Information Table ……66
Attachment _10_ Letter to SSA……68
Attachment_11_ Assurance of Compliance with Civil Rights……70
Attachment _12_ Disclosure of Prior DFC Funding……71
Attachment _13_ DFC National Cross-site Evaluations Info……...72
Attachment _14_ Congressional Notification……...73
Attachment_15_ Assurance of Compliance with SAMHSA Charitable Choice Statutes...….74
Attachment _16_ Lease Agreement and Floor Plan……..75
Pre-submission Checklist …….….78

Community Overview

The Shawnee neighborhood is comprised of two zip codes (40211 and 40212) in West Louisville. The total population, approximately 17,000, is a predominantly African American (77%) neighborhood, and is one of the largest of the 70 neighborhoods located in the Metro area. According to 2011 census data, 36.2% of the service area population lives below the Federal Poverty Level (FPL), which is more than double the rate of Jefferson County (15.7%), and 64.5% of the service area population lives below 200% of the FPL. Based on these figures, poverty rates are more than double the national rates. Over half (52.1%) of children in the service area live in poverty compared to only 24.0% in Jefferson County overall and 20.0% nationally. Over three-fourths (75.7%) of students receive free or reduced lunch compared to 60% of students in the Jefferson County School System as a whole. These statistics show the dramatic difference between the service area and the county overall. While Jefferson County has poverty rates similar to national rates, rates in the Shawnee Neighborhood Transformation Youth Coalition (NTYC) community are incredibly high.

The Shawnee neighborhood, located 4 miles west of downtown, is bounded by I – 264 on the East, Broadway on the South, Bank Street on the North and the Ohio River on the West. The Shawnee neighborhood has an aging housing stock. Most of the homes were built around 1946 and now require maintenance that many of the homeowners cannot afford. The neighborhood has led in too many crime statistics as reported by Louisville Metro Police Department. Up to the 1950's, Shawnee was a white neighborhood consisting primarily of working middle class families. There was a substantial base of retail and service-oriented businesses to adequately meet the needs of the neighborhood. The Market Street corridor was the hub of business activity anchored by a small shopping plaza. At that time, the Shawnee neighborhood was considered one of the more affluent neighborhoods in the city. In the 1960s, as Louisville desegregated housing, schools, and public facilities, wealthier white families moved east to the suburbs, withdrawing financial resources and tax base, while many working black middle class families remained in the area. The shifts lead to the closure of many businesses and the subsequent movement of many middle class families from the neighborhood.

The absence of an organized community effort in the Shawnee neighborhood caused the neighborhood to practically stand still as other neighborhoods made some gains. In 2007, residents organized to initiate a wet/dry vote and ban liquor sales within five precincts within the neighborhood. As a result of this success, in 2008, the Shawnee Neighborhood Association was developed. The Shawnee Neighborhood Association is a non-profit organization committed to developing and supporting neighborhood programs, services, businesses and activities that empower and improve the quality of life for all residents in the neighborhood.

Residents are rising to the occasion to reduce the incidence of substance abuse and crime, creating opportunities for employment, and to address the influences that seek to impair the health of the community.

Section A: Project Narrative

COALITION HISTORY & COALITION MEMBER INVOLVEMENT

1. **How did the coalition develop and how is the coalition collaborating with community leaders/organizations to prevent youth substance use?**

The Shawnee Neighborhood Transformation Youth Coalition (NTYC) was organized as a result of ongoing collaborative efforts within the Shawnee neighborhood to increase the capacity of the youth within the Shawnee neighborhood to create solutions and facilitate activities that address the social causes of poor health outcomes that include higher than average youth substance use and abuse.

As a result of the development of the Shawnee Neighborhood Association in late 2008 and the ongoing efforts of the community to address the social and environmental impact of substance abuse, addiction and other health problems among youth and families, the Shawnee Christian Healthcare Center (SCHC) was formed in 2009 to facilitate a comprehensive approach to community outreach and health outcomes. The Shawnee Christian Healthcare Center (SCHC) is a non-profit organization created to provide quality preventative and curative care for Shawnee residents. In order to better understand and address the community's identified health care needs, SCHC facilitated community dialogues regarding health care needs in partnership with the Shawnee Neighborhood Association. Through this collaboration and other community based organizations, a neighborhood transformation initiative was set in motion, under the leadership of a community-based board of directors. Through the generosity of local foundations, SCHC hired a Neighborhood Transformation (NT) Director to initiate and oversee community outreach and coordinate youth focused programming.

In 2009, in collaboration with the Shawnee neighborhood organizations, NT coordinated activities from funding received through a US Department of Justice Weed & Seed grant. The grant allowed NT to recruit and engage high school students from The Academy @ Shawnee (high school within the Shawnee neighborhood) to facilitate community assessments in an effort to determine needs of residents. The work implemented by the youth led to NT partnering with The Louisville Metro Department of Public Health Center for Health Equity in the facilitation of the Prevention Institute Convergence Partnership grant. This award allowed for youth within the neighborhood to positively impact community safety by addressing policies and initiating environmental changes that decrease alcohol and tobacco promotion signage; increase adequate lighting surrounding the neighborhood and its local businesses to reduce crime and encourage physical activity.

The efforts supported by the Convergence Partnership Grant, not only gave birth to the development of the Shawnee Youth Advocates Leadership Training Program, but it also guided the development of the Communities United for Health Collaborative. NT provided leadership in the development of Communities United for Health, a collaborative formed to integrate neighborhoods addressing similar issues and advocate for policy changes to promote better health outcomes across the City of Louisville. The partnership is made up of representatives from the Shawnee Neighborhood Association, the Louisville Metro Department of Health & Wellness Center for Health Equity, the YMCA, the Peace Education Center, Louisville Metro Police Department, the West Louisville Crime Vision, the Louisville Metro Tobacco-Free

Coalition: School & Youth Task Group, the Center for Women and Families, Portland Now Prevention Partnership and engaged community residents.

In late 2012 and throughout 2013, the Shawnee Youth Advocates, under the guidance of the NT director, provided leadership in activities facilitated under the Partnership for Success Underage Drinking Prevention grant. The objective was to increase the capacity of youth within the neighborhood to lead their peers in focus group conversations to address the prevalence of underage drinking within the neighborhood and to create a photovoice project as an educational and advocacy tool to highlight the health and social impacts of negative behaviors on families and the overall community.

To move these efforts forward, representatives from the Youth Advocates Leadership Training Program, from the Communities United Collaborative, and from the Shawnee Neighborhood Association have been engaged to form the Shawnee NT Youth Coalition. Additional members from community faith based organizations and churches within the neighborhood have been engaged as well.

Youth: Kajah Cunningham has served as a member of the Shawnee Youth Advocates since 2012. The Youth Advocates have helped to reach diverse populations within the neighborhood in the promotion of healthy lifestyles to eliminate the rate of youth substance use/abuse. Kajah Cunningham facilitated underage drinking focus groups with middle school students within the neighborhood and coordinated community events to engage residents in the prevention of youth substance abuse through environmental efforts.

Parent: Evelyn Spurley served as the home school coordinator for The Academy @ Shawnee for over 15 years. Ms. Spurley is currently raising grandchildren and serves as a conduit of real-time information and concerns. Ms. Spurley also has knowledge and experience in collaborating at the grassroot level to affect change for youth. Currently, Ms. Spurley serves as the chair of the Northwest Neighborhood Place Resident Council.

Business: Verna' Goatley is the Executive Administrator for the Louisville Metro Department of Economic Growth and Innovation. Ms. Goatley is a resident of the Shawnee neighborhood and acts as a conduit to businesses throughout Louisville Metro as a source of in-kind resources. Ms. Goatley has facilitated trainings with the Louisville Youth Advocates, providing them skills and understanding in micro-business development.

Media: Mr. Ralph S. Merkel Professor with the University of Louisville Communication Department serves a resource for the development of press releases, development of PSAs, and leadership in the development of marketing material to be used for coalition activities.

School: Sandra Easley with ESL Newcomer Academy and the Academy @ Shawnee is a resident of the neighborhood, promotes the mission of the coalition within the School; assists in youth engagement in program activities; collaborates on prevention projects and provides avenues for the promotion of educational and awareness campaigns to youth and families.

Youth-Service Organization: William Mack serves on the Advisory Board for Youth Christ, a neighborhood based organization committed to empowering youth to make change in their neighborhood. Mr. Mack is a resident in the neighborhood and supports the Coalition through technical assistance in program development and facilitation as well as guidance in the strategic planning process.

Law Enforcement: Major David James serves with the University of Louisville Police Department. University of Louisville also facilitates Crime Prevention through Environmental Design and officers will partner with Coalition through training opportunities and facilitation of mock compliance checks. Major James supports the efforts of the Coalition and will assist in obtaining crime stats for the neighborhood in the area of youth substance use and abuse and participates in area enforcement and seeks to work with youth to strengthen community policing initiatives.

Religious/Fraternal Organization: Titus and Lydia Kennebrew are the directors of the Youth Outreach Ministry for the Spirit of Love Center, a neighborhood based church committed to serving the community. Titus and Lydia currently lead outreach activities with the sports program at The Academy @ Shawnee, the only high school within the neighborhood. The commitment of the Spirit of Love Center strengthens the capacity of the coalition to promote social norms campaigns to targeted youth and to reach parents with prevention activities.

Civic/Volunteer Group: Larry Tyus has served with the Shawnee Neighborhood Association since its inception and has been instrumental in maintaining efforts to deter businesses from obtaining license to sell alcohol within the dry precincts within the neighborhood. Mr. Tyus consistently promotes the mission of the coalition throughout the neighborhood, and regularly participates in information and educational activities. Serve as a vehicle for volunteer recruitment and engagement.

Healthcare professional: Sandra Marshall has served with the Shawnee Christian Healthcare Center since 2013 as a patient navigator; helping to eliminate barriers to healthy lifestyles. Ms. Marshall has over 15 years in healthcare administration and education. Ms. Marshall promotes the mission of the coalition; participates in activities and brings the healthcare perspective to the strategic planning process.

State, Local or Tribal Governmental Agency: Angela Hollingsworth currently serves as Community Outreach Coordinator with the Louisville Metro Department of Public Health & Wellness Center for Health Equity. Ms. Hollingsworth has provide health equity and leadership training for the Shawnee Youth Advocates, members of the Shawnee Neighborhood Association and as a member of the Coalition will provide the same for coalition members, youth within the neighborhood and the neighborhood at large.

Other Organization Involved in Reducing Substance Abuse: Brittany Watkins serves with Seven Counties Services Regional Prevention Center and actively promotes the mission of the coalition, assists and collaborates in the development of coalition activities, provides technical assistance in the area of prevention and will assist with the evaluation process.

COALITION DECISION MAKING

2. What are the coalition's decision-making processes?

The Project Director, current staff of the Shawnee Christian Healthcare Center, with direction and guidance from the Coalition officers, will provide day-to-day oversight of grant activities. The Shawnee Christian Healthcare Center serves as the fiscal agent for Coalition activities and will monitor and maintain financial records and management. A Program Coordinator and office assistant will be engaged through this grant. The Coordinator, in partnership with the Shawnee NT youth Coalition, will be responsible for the ongoing engagement and recruitment of coalition

members and implementation of Coalition activities. The governing body of the Shawnee NT youth Coalition is made up of a Chair, Co-Chair, and Secretary. Elections will be held annually and will be voted on by coalition membership. Decisions and activities are communicated through meeting minutes that are mailed out to membership. When timing of communication is necessary, information will be shared through emails. Communication of activities and awareness campaigns will be shared via Coalition members' connections, local print media, grassroots efforts (door-to-door) of Coalition youth members and through the local Council's weekly electronic communications. Committees will be formed as needed to further the Coalition's goals and objectives.

ANALYZE AND DISSEMINATE DATA

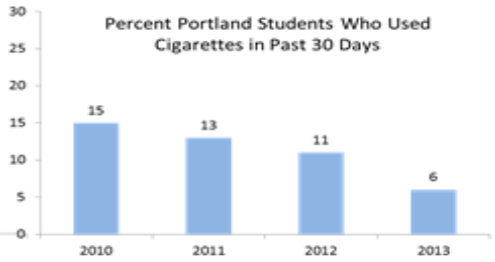
3. What are the current youth substance use problems in the community?

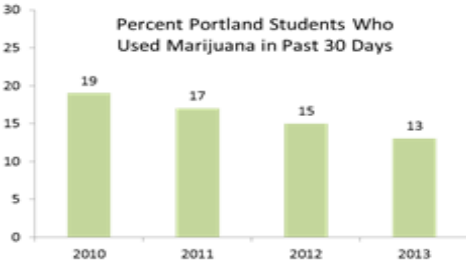
The Shawnee Neighborhood Transformation Youth Coalition (NTYC) will use the Jefferson County Public Schools (JCPS) Safe and Drug Free Schools (SDFS) survey data related to self-reported student substance use and abuse. Jefferson County Public Schools surveys the student body annually regarding Safe and Drug Free Schools. In the 2012-2013 school year, approximately 37,000 middle and high school students responded to the survey.

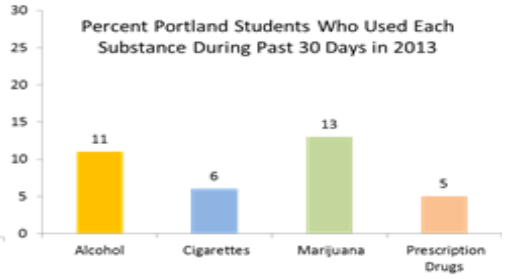
The SDFS survey is part of the school district's Comprehensive School Survey (CSS) which is given to all students, teachers, and parents annually. The Shawnee neighborhood contains two JCPS schools, The Academy @ Shawnee and Western Middle School. The SDFS survey collects data on each of the four core measures required by the Drug Free Communities program, including 'Past 30 days Use', 'Perceptions of Risk', 'Perceptions of Parental Disapproval', and ''Perceptions of Peer Disapproval' for tobacco, alcohol, marijuana, and prescription drugs. Student characteristics such as age, gender, grade, ethnicity and home zip codes are included as well. The Shawnee NT Youth Coalition plans to purchase access to data from the SDFS survey from JCPS and contract with an evaluator to interpret the data.

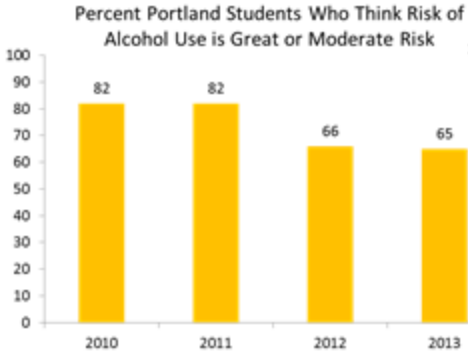
A neighboring community in close proximity to the Shawnee Neighborhood is the Portland neighborhood. Until Shawnee NTYC contracts with an evaluator and is able to access the SDFS survey data, we will rely on the core measures from the neighboring Portland neighborhood SDFS survey data as an indicator of the levels of substance abuse among youth in the neighborhood.

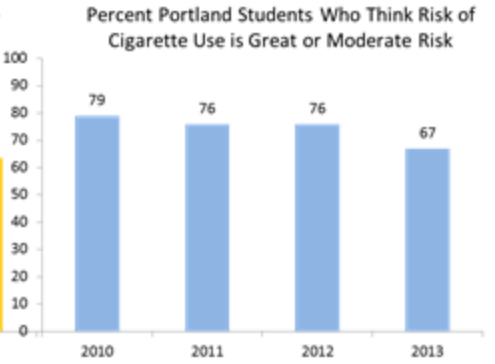
Percent Portland Students Who Used Alcohol in Past 30 Days
15
14
15
11
2010
2011
2012
2013

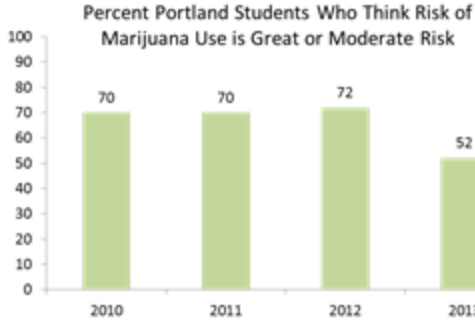

Percent Portland Students Who Used Cigarettes in Past 30 Days
15
13
11
6
2010
2011
2012
2013

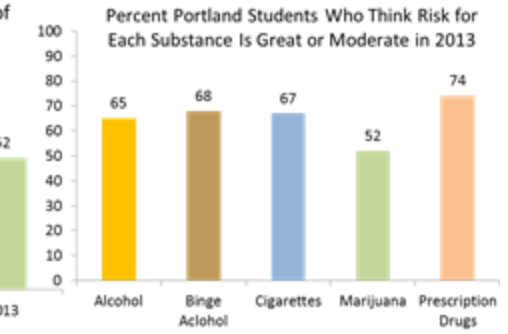

Percent Portland Students Who Used Marijuana in Past 30 Days
19
17
15
13
2010
2011
2012
2013

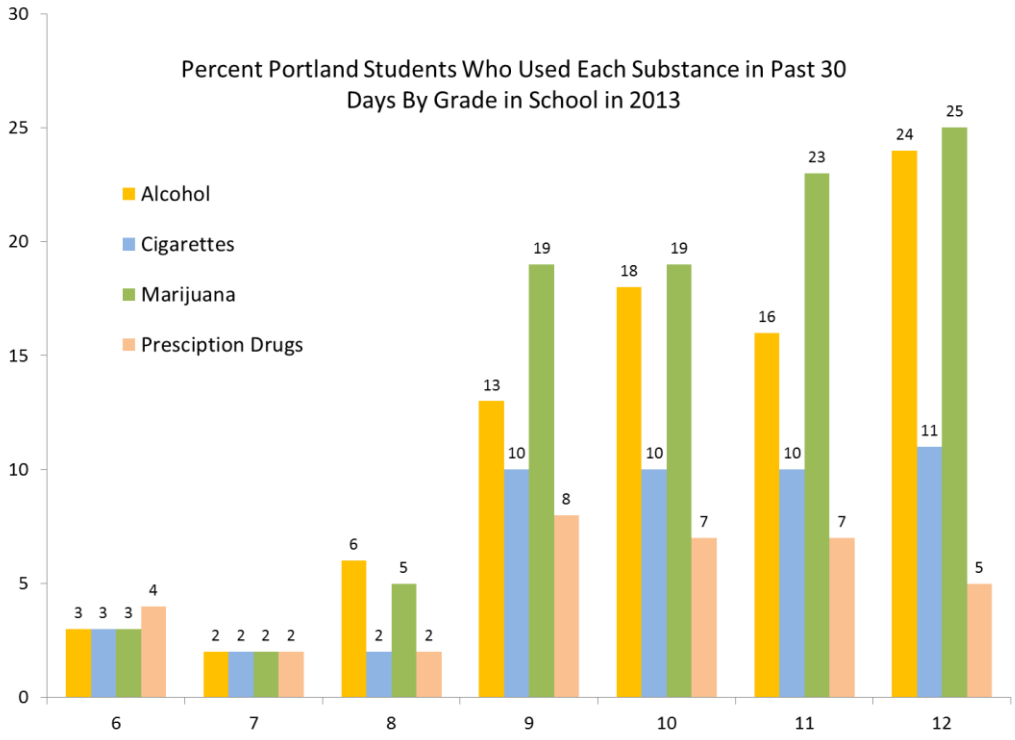

Percent Portland Students Who Used Each Substance During Past 30 Days in 2013
11
6
13
5
Alcohol
Cigarettes
Marijuana
Prescription Drugs


Percent Portland Students Who Think Risk of Alcohol Use is Great or Moderate Risk
82
82
66
65
2010
2011
2012
2013


Percent Portland Students Who Think Risk of Cigarette Use is Great or Moderate Risk
79
76
76
67
2010
2011
2012
2013


Percent Portland Students Who Think Risk of Marijuana Use is Great or Moderate Risk
70
70
72
52
2010
2011
2012
2013


Percent Portland Students Who Think Risk for Each Substance Is Great or Moderate in 2013
65
68
67
52
74
Alcohol
Binge Aclohol
Cigarettes
Marijuana
Prescription Drugs



Percent and number who used during past 30 days and the significance level (P-value) by racial/ethnic groups for middle and high school students

Substance / Race/Ethnic	Alcohol		Cigarettes		Marijuana		Prescription	
	Middle	High	Middle	High	Middle	High	Middle	High
African Americans	3.1% n=14	15.2% n=82	1.9% n=9	7.1% n=38	3.2% n=15	19.7% n=27	1.9% n=9	6.7% n=36
White	3.5% n=6	22.8% n=22	1.7% n=3	17.7% n=25	1.7% n=3	19.1% n=27	1.7% n=3	2.2% n=3
P-value	ns	ns	ns	.001	ns	ns	ns	.026

ns = not statistically significant

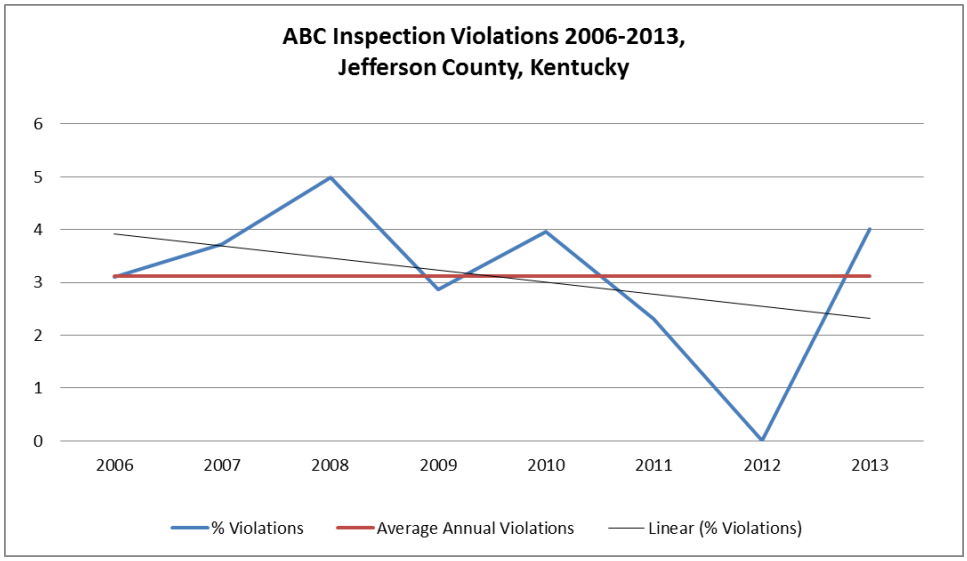
In summary for the 2010/2011 through 2012/2013 school years, marijuana is the most used substance (19%-25% past 30-day use among high school students), closely followed by alcohol, then tobacco and prescription drugs. Male and female 30-day use rates are similar, except that males have a higher rate of marijuana use. A majority of students perceive use of all four

substances as having a "Great or Moderate Risk." Females perceive more risk for all four substances than males. Students perceive their parents as having more disapproval for each substance than the disapproval of their friends. In high school, significantly more White students report using cigarettes while significantly more African American students reported greater use of prescription drugs. The best predictors of substance use are the students' perception of their parents and friends disapproval.

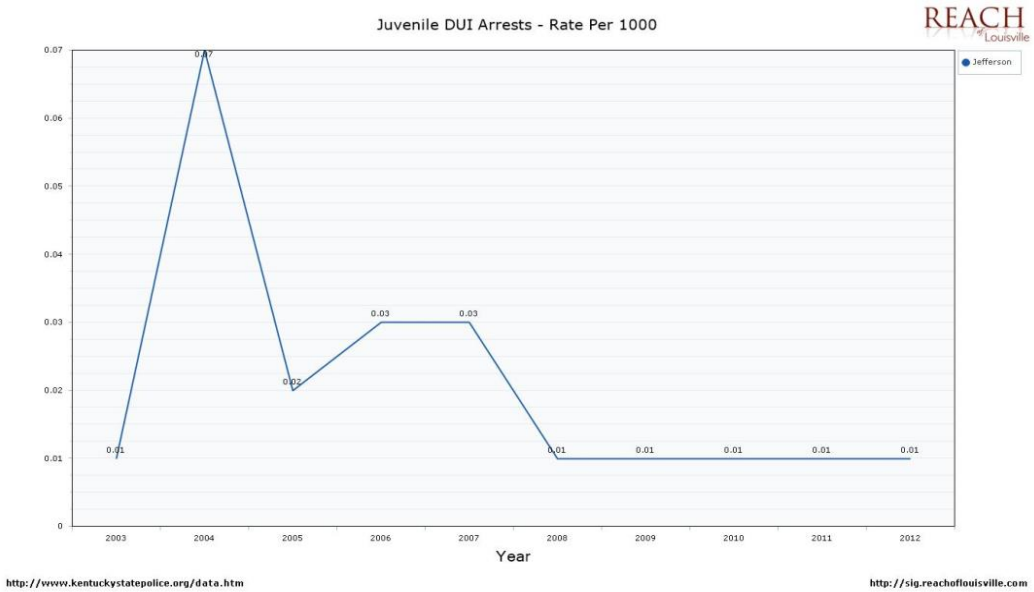
Perceived risk of alcohol, tobacco, marijuana, and prescription drugs decreased from 2010 through 2013. Nearly half of the students residing in Portland do not feel using marijuana is a moderate or great risk. It is apparent from the data that youth perception of peer disapproval of alcohol, tobacco and marijuana use is low. It is apparent that youth in the Portland neighborhood hold normative beliefs that encourage the use of alcohol, tobacco and marijuana, and this is likely true in the neighboring Shawnee neighborhood as well. The alcohol and other drug related arrest rate of persons under age 18 (per 100,000 persons) in Louisville, Kentucky comprised nearly 12% of the total juvenile arrests from 2009-2010.

	2009	**2010**	**2009-2010**
Coverage Indicator	0.99	0.99	
Total Arrests	4108	3902	8010
Drug abuse violations	463	351	814
Driving under influence	16	15	31
Liquor laws	26	26	52
Drunkenness	28	32	60
Total ATOD related	533	424	957
% of Total arrests	12.97	10.87	11.95

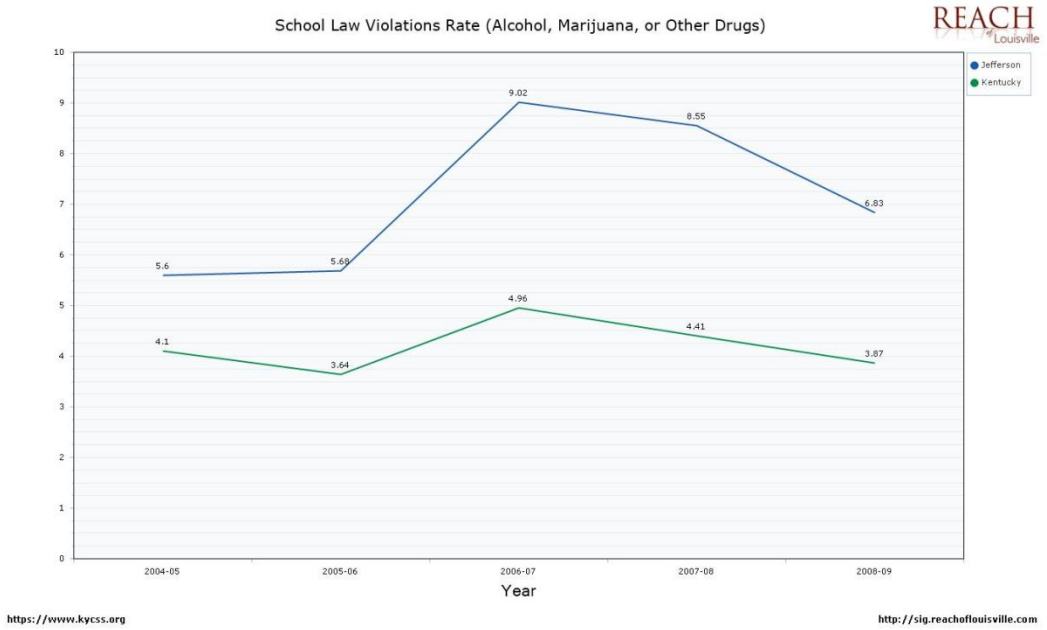
Data clearly shows that access to alcohol, tobacco, and other drugs continues to be an issue within the region. The Kentucky Alcohol and Beverage Control (ABC) agency conduct Synar compliance checks for businesses in Jefferson County that sell alcohol to minors. As the graph below shows, on average, 3.12% of the businesses inspected have a violation within a year (2006-2013). There appears to be a downward overall trend in sales of alcohol to minors; however, there are still a limited number of compliance checks that are done within the area, which increases the variability of the results. We believe the data may be underestimated.

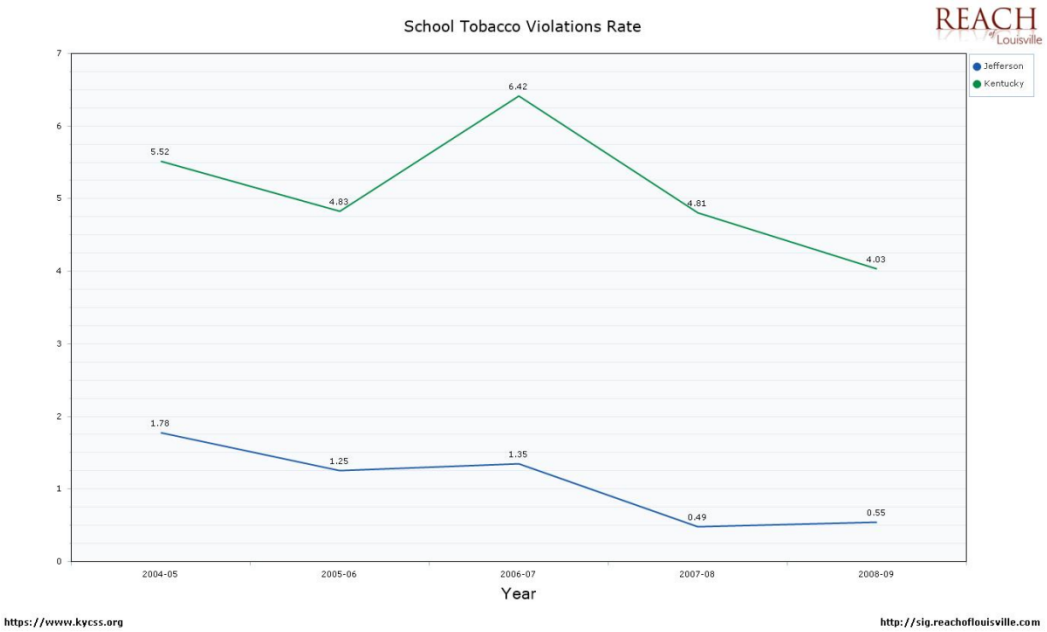


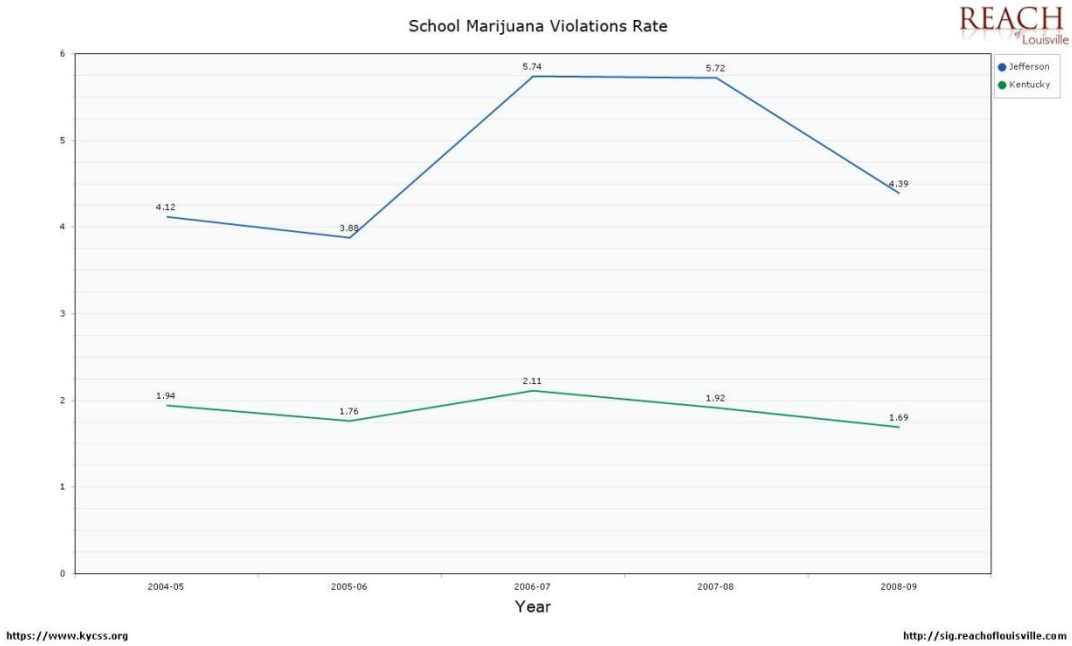
Below is a trend graph of the juvenile DUI's in Jefferson County. Shawnee NTYC has begun to work with local law enforcement and the regional prevention center to do high visibility enforcement and compliance checks. We hope that our efforts will continue to aide in the downward trend of sales to minors.

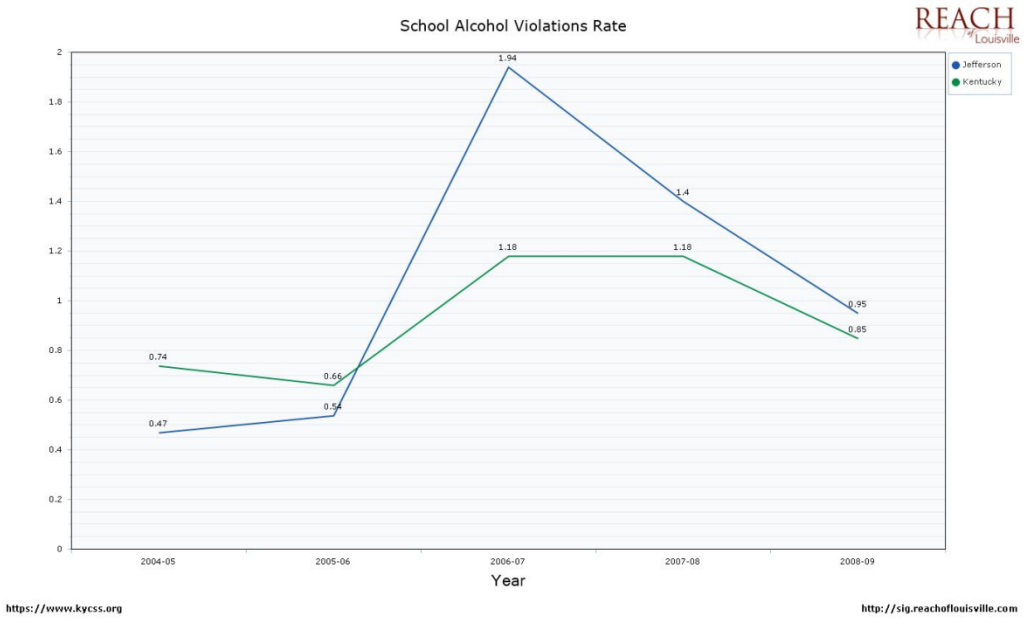


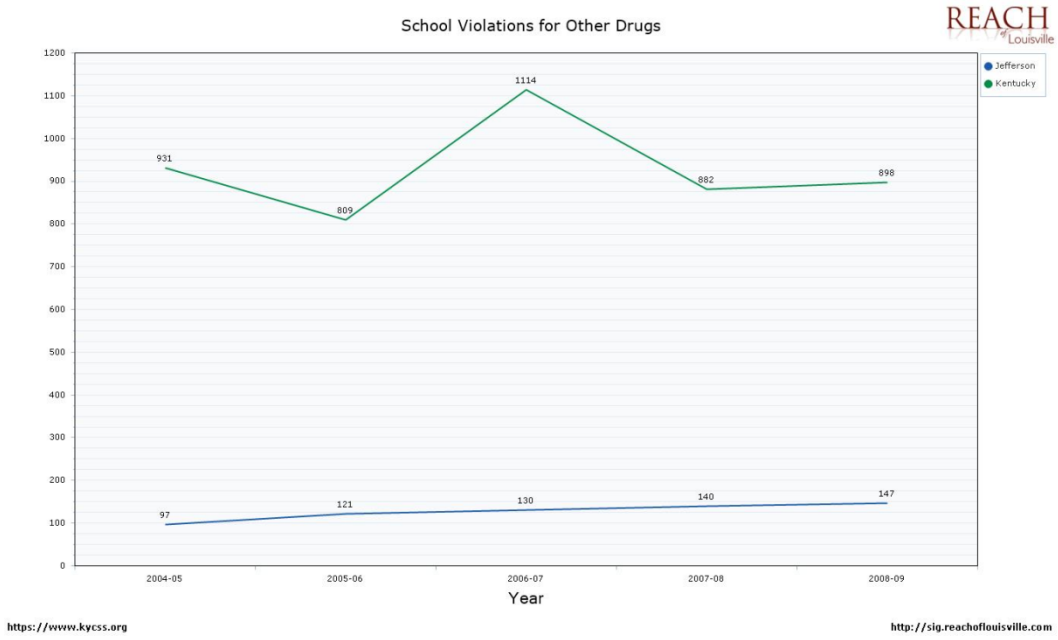
School Enrollment and Attendance are both strongly associated to health, success, and student achievement. The data below demonstrates the School Law and Board Violations in Jefferson County were due to Tobacco, Alcohol, Marijuana, or Other Drugs from 2004/05 through 2008/09 school years compared to the state of Kentucky. Jefferson County has a higher rate per 1,000 compared to Kentucky for school law violations for alcohol, marijuana, and all drugs combined.


School Law Violations Rate (Alcohol, Marijuana, or Other Drugs)
REACH of Louisville
Jefferson
Kentucky
10
9
8
7
6
5
4
3
2
1
0
5.6
5.68
9.02
8.55
6.83
4.1
3.64
4.96
4.41
3.87
2004-05
2005-06
2006-07
2007-08
2008-09
Year
https://www.kycss.org
http://sig.reachoflouisville.com


School Tobacco Violations Rate
REACH of Louisville
Jefferson
Kentucky
7
6
5
4
3
2
1
0
5.52
4.83
6.42
4.81
4.03
1.78
1.25
1.35
0.49
0.55
2004-05
2005-06
2006-07
2007-08
2008-09
Year
https://www.kycss.org
http://sig.reachoflouisville.com

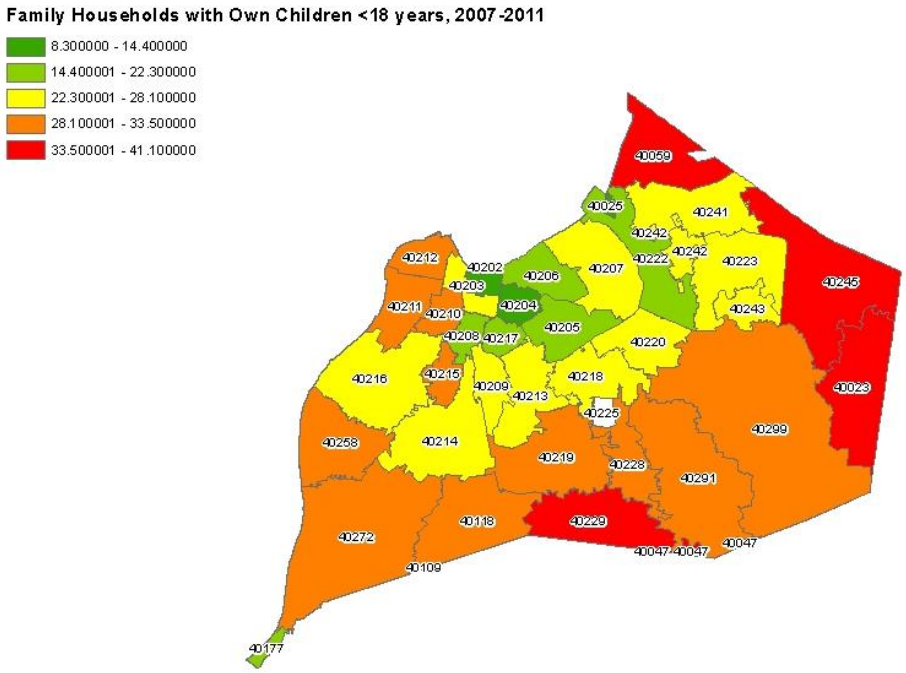

School Marijuana Violations Rate
REACH of Louisville
Jefferson
Kentucky
6
5
4
3
2
1
0
4.12
3.88
5.74
5.72
4.39
1.94
1.76
2.11
1.92
1.69
2004-05
2005-06
2006-07
2007-08
2008-09
Year
https://www.kycss.org
http://sig.reachoflouisville.com

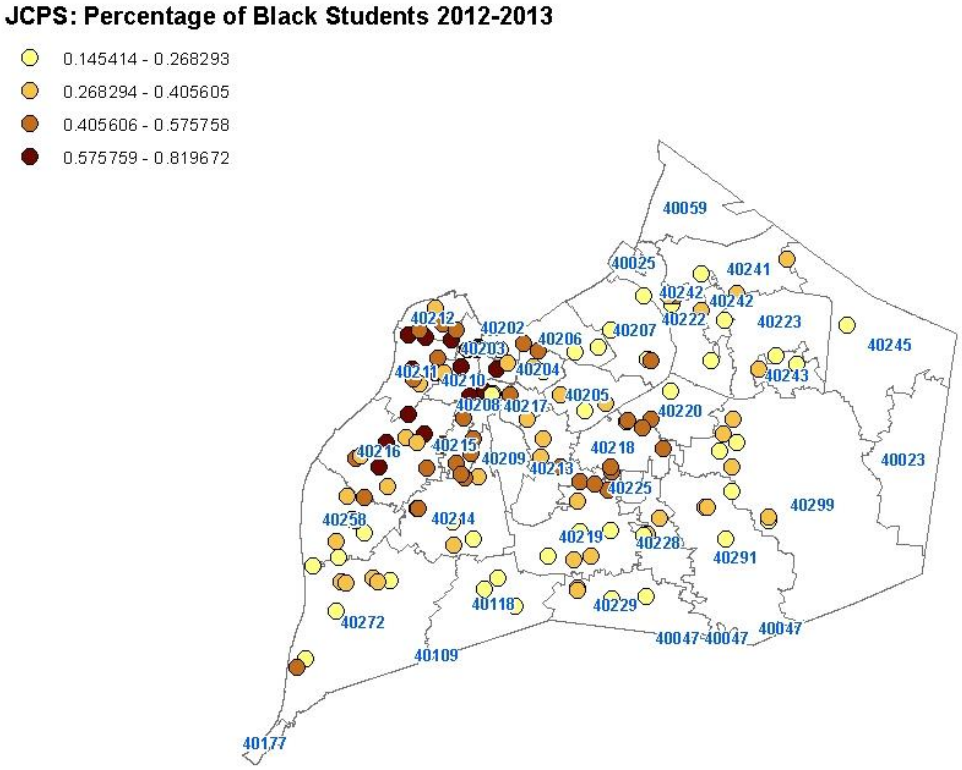

School Alcohol Violations Rate
REACH of Louisville
Jefferson
Kentucky
2
1.8
1.6
1.4
1.2
1
0.8
0.6
0.4
0.2
0
1.94
1.4
1.18
1.18
0.95
0.85
0.74
0.66
0.54
0.47
2004-05
2005-06
2006-07
2007-08
2008-09
Year
https://www.kycss.org
http://sig.reachoflouisville.com



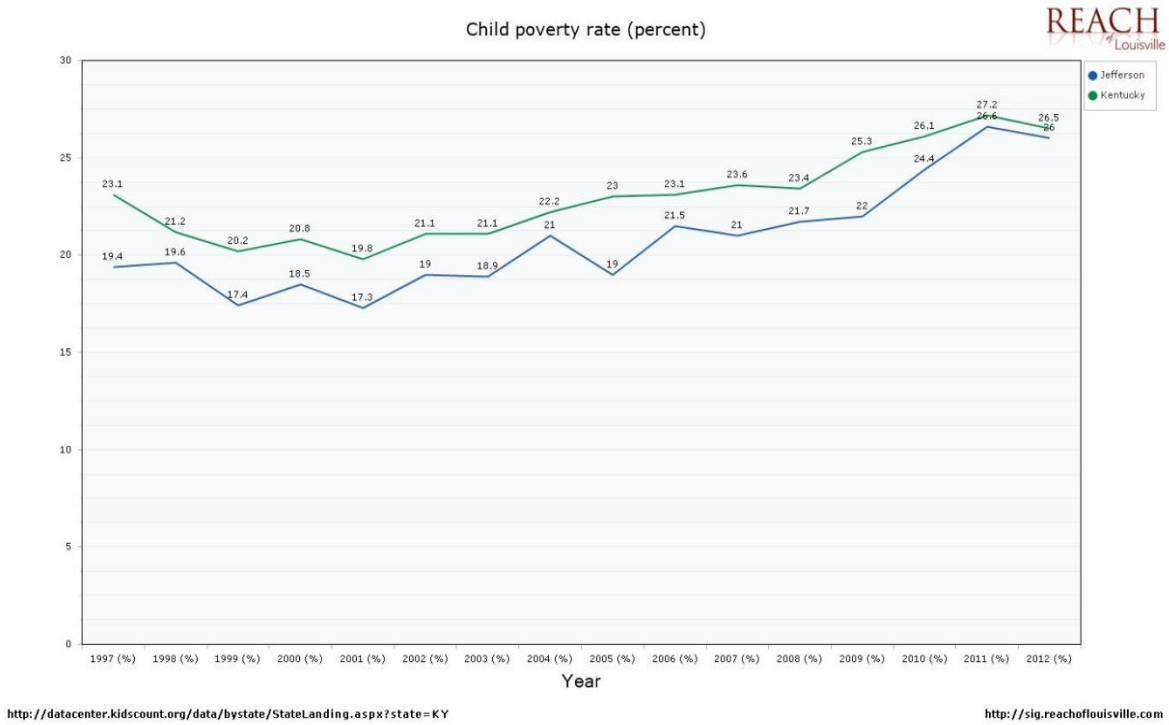
As the above mentioned data indicates, there are various risk factors that are present in the Shawnee neighborhood. Those include low perception of youth disapproval, high youth perception of substance use by peers, low youth perception of risk of harm, ease of availability and economic and social deprivation – especially for single mothers and grandparents raising grandchildren. As the data clearly indicates, alcohol, tobacco, and marijuana are the drugs of choice for youth in west Louisville, but, the Shawnee NTYC suggests that there are other contributing factors and social determinants that further put our youth at risk.

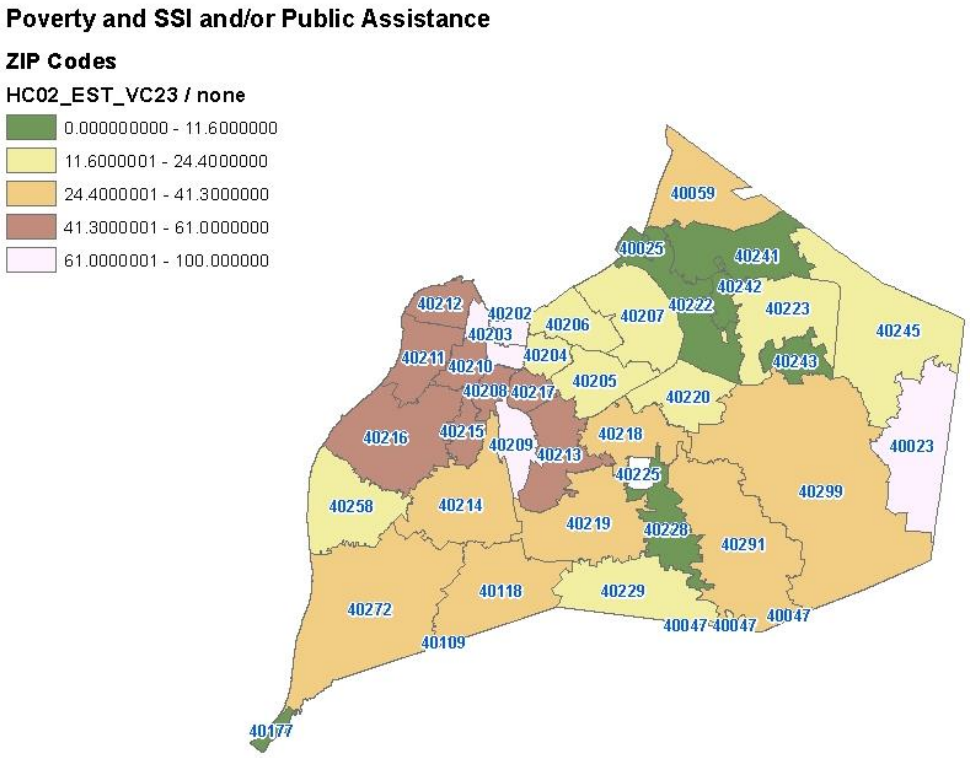
As shown in the map below, the Shawnee neighborhood has a high rate of families with children under age 18. The map proceeding that shows that this neighborhood also has a high proportion of minority children, particularly African American children, when compared to the rest of the county. The west end of Louisville continues to be outside of the diversity index suggested by the district.





The child poverty rate in Jefferson County and Kentucky are high and trending upward. The Shawnee neighborhood and the western part of Louisville have the highest rate of childhood poverty and families on SSI and public assistance.


Child poverty rate (percent)
REACH of Louisville
Jefferson
Kentucky
30
25
20
15
10
5
0
23.1
21.2
20.2
20.8
19.8
21.1
21.1
22.2
23
23.1
23.6
23.4
25.3
26.1
27.2
26.6
26.5
26
19.4
19.6
17.4
18.5
17.3
19
18.9
21
19
21.5
21
21.7
22
24.4
1997 (%)
1998 (%)
1999 (%)
2000 (%)
2001 (%)
2002 (%)
2003 (%)
2004 (%)
2005 (%)
2006 (%)
2007 (%)
2008 (%)
2009 (%)
2010 (%)
2011 (%)
2012 (%)
Year
http://datacenter.kidscount.org/data/bystate/StateLanding.aspx?state=KY
http://sig.reachoflouisville.com


Poverty and SSI and/or Public Assistance
ZIP Codes
HC02_EST_VC23 / none
0.000000000 - 11.6000000
11.6000001 - 24.4000000
24.4000001 - 41.3000000
41.3000001 - 61.0000000
61.0000001 - 100.000000
40059
40025
40241
40242
40222
40223
40245
40212
40202
40203
40206
40207
40243
40211
40210
40204
40205
40208
40217
40220
40216
40215
40209
40213
40218
40225
40023
40299
40258
40214
40219
40228
40291
40118
40229
40272
40047
40047
40047
40109
40177

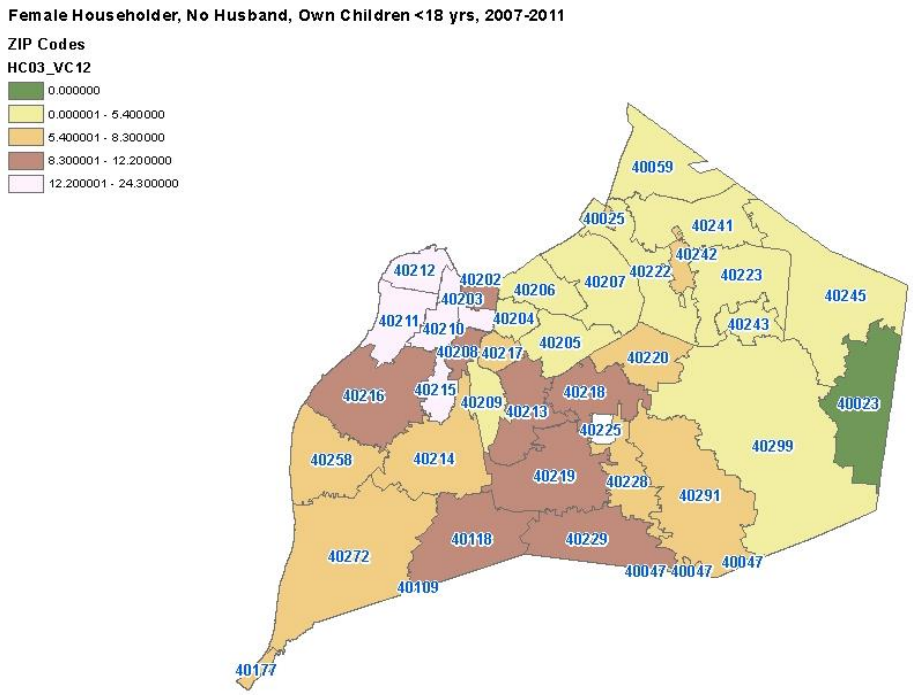
Data also shows that African American children in our community have a higher rate of school suspensions than are equitable by the percentage of representation in the district, and lower rates of college or career readiness when compared to other high schools within JCPS.

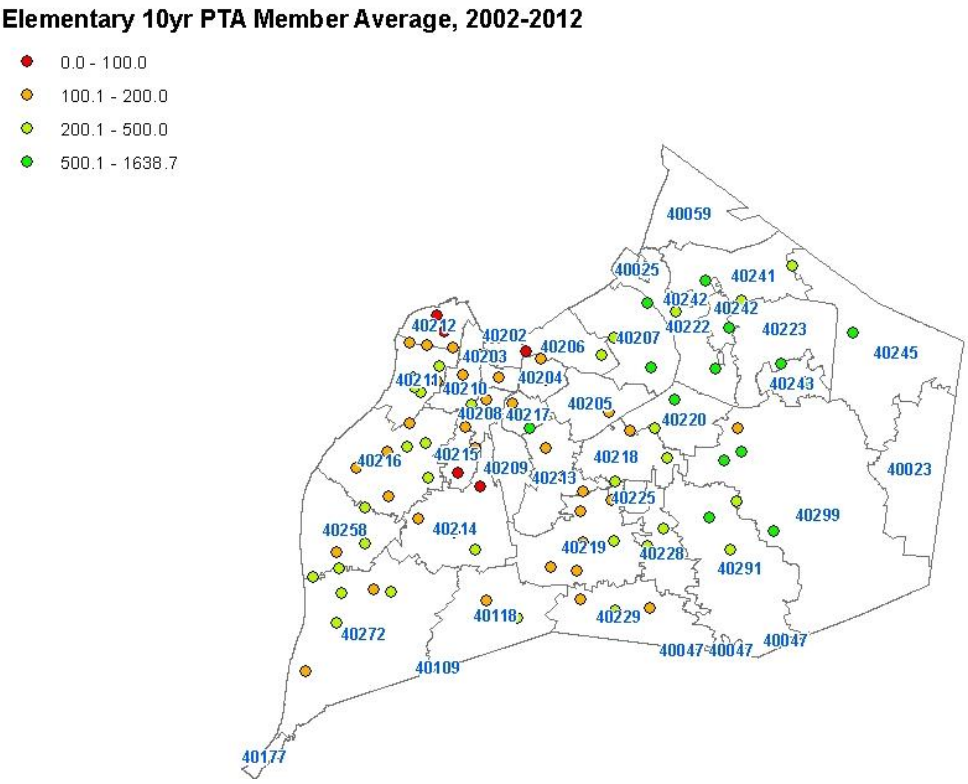
College or Career Readiness of JCPS High School Graduates, 2011

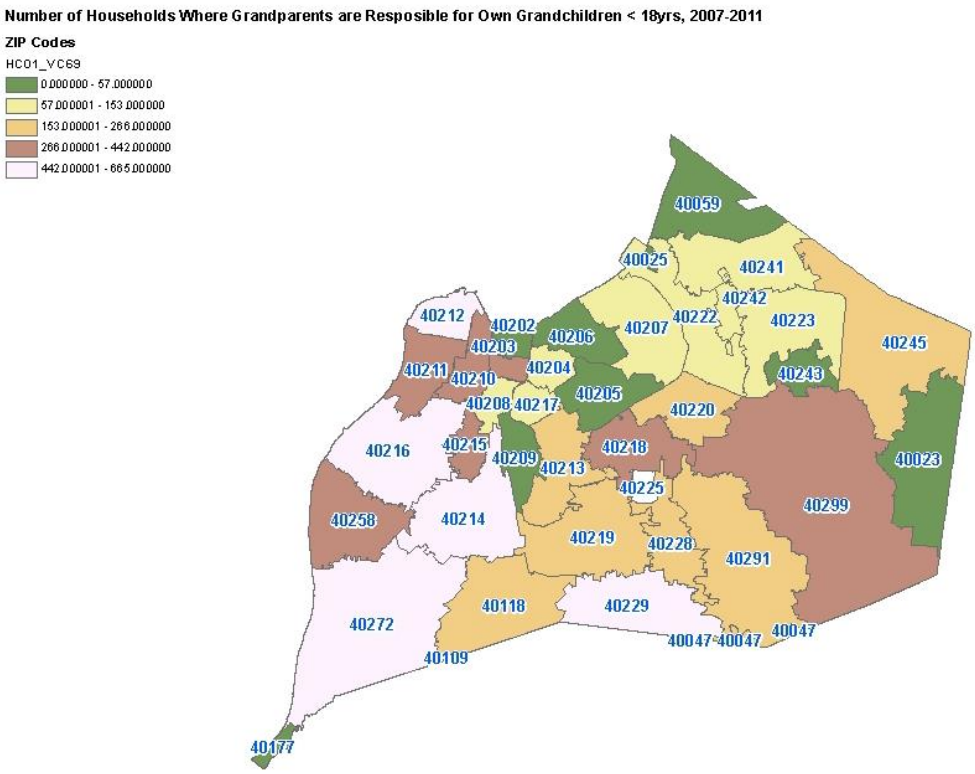
High School	N of Graduates	% College/Career Ready
Atherton	214	40
Ballard	342	52
Brown School	38	39
Butler	350	40
Central	190	16
Doss	181	10
Dupont Manual	449	81
Eastern	357	55
Fairdale	198	20
Fern Creek	291	31
Iroquois	178	11
Jeffersontown	197	16
Louisville Male	395	59
Moore	139	18
Pleasure Ridge Park	396	29
Seneca	302	31
Shawnee	82	6
Southern	223	13
Valley	167	4
Western	188	11

Courier-Journal, September 28, 2011; 55K Data Dashboard, http://www.55000degrees.com/dashboard.php. as referenced by "The State of Black America in Metro Louisville", Dr. J. Blaine Hudson

Other social determinants that are risk factors for our children include a higher rate of female-led households with no husband and with children less than age 18 years. Also as an indicator of parental involvement, there are less PTA memberships for schools within our community and a higher rate of grandparents raising grandchildren under 18 years, indicators of less parental involvement.


Female Householder, No Husband, Own Children <18 yrs, 2007-2011
ZIP Codes
HC03_VC12
0.000000
0.000001 - 5.400000
5.400001 - 8.300000
8.300001 - 12.200000
12.200001 - 24.300000
40059
40025
40241
40242
40222
40223
40245
40212
40202
40203
40206
40207
40211
40210
40204
40243
40208
40217
40205
40220
40216
40215
40209
40213
40218
40023
40225
40299
40258
40214
40219
40228
40291
40118
40229
40272
40047
40047
40047
40109
40177


Elementary 10yr PTA Member Average, 2002-2012
0.0 - 100.0
100.1 - 200.0
200.1 - 500.0
500.1 - 1638.7
40059
40025
40241
40242
40242
40222
40223
40245
40212
40202
40206
40207
40203
40211
40210
40204
40243
40208
40217
40205
40220
40216
40215
40209
40213
40218
40023
40225
40299
40258
40214
40219
40228
40291
40118
40229
40272
40047
40047
40047
40109
40177



It is important when preventing and reducing youth substance use and abuse to address the social context and work towards environmental strategies, particularly the factors that increase protective factors and reduce risk factors for substance abuse. The Shawnee neighborhood has higher rates of chronic diseases and co-morbidities as well. Research shows that if we address the disparities that affect our neighborhood, we will have greater success in addressing and improving the health problems of the entire county. Addressing substance use in the Shawnee neighborhood will have the greatest impact towards reducing substance abuse in Kentuckiana.

4. 12-MONTH COALITION ACTION PLAN

DFC Goal One: <u>Increase community collaboration</u> to enhance the prevention coalition's impact on youth substance abuse.

Objective 1: By 11/15/14 complete 100% of tasks related to formalizing coalition structure and operations.

Strategy : Provide support to coalition capacity building efforts

Activity	Who is responsible?	By When?
Hire/contract project personnel and set up office space, acquire needed start-up supplies.	Coalition	11/15/2014
Set up financial and program record keeping policies and procedures for DFC grant funds.	Coalition	11/15/2014

Establish project Work Groups and recruit new members	Coalition, Project Dir.	Dec 31, 2014
Familiarize youth and adult coalition members and partner organizations with the Action Plan, develop detailed tasks and timeline for implementation. Identify committee commitments and responsibilities for operationalizing the Action Plan using the Strategic Prevention Framework.	Executive Committee, Coalition Work Groups.	Dec 31, 2014
Conduct train the trainer event for Mendez Foundation "Too Good for Drugs & Violence" Curriculum.	Executive Committee, Project Director	Sept. 29, 2015

Objective 2: By 9/29/15, increase youth participation in coalition strategies by 10%.

Strategy: Implement a broad range of youth-directed and youth-focused leadership development and prevention activities designed to increase youth participation, policy development, and provide information, provide support, enhance skills and change access/barriers,

Activity	**Who is responsible?**	**By When?**
Formalize structure of youth coalition, recruiting new members, elect leadership positions, establish meeting schedule.	Project Coordinator, youth and adults	Nov 1, 2014
Change access/barriers by creating a plan for recruitment and retention of youth members.	Project Coordinator, youth and adults	By 1/1/2015
Change access/barriers to promote youth participation in Coalition strategies by providing bus tickets, refreshments and/or other small incentives.	Project Coordinator and community partners	By 9/29/2015
Provide information and recruit youth members by implementing youth-led focus groups and awareness sessions in youth-serving organizations.	Project Coordinator, Youth Sector Rep, JCPS, and coalition.	Oct, Nov, Dec 2014
Provide information by developing press releases and conducting a marketing campaign to inform youth and community of consequences of youth substance abuse and recruit participation.	Project Coordinator, Youth Sector Rep, youth members and youth advocates	Oct, Nov, Dec 2014
Enhance skills by engaging youth in planning and implementing activities in the Action Plan, as well as health equity seminars and workshops to discuss risk and protective factors for youth substance abuse, social norms campaign, policy advocacy and other determinants.	Project Coordinator, Youth Sector Rep, and Health Dept. Center for Health Equity.	Jan, Feb, Mar 2015
Enhance skills for collaboration by providing conflict resolution training for youth and leaders.	Project Coordinator, youth, Peace Educ.	Mar, 2015
Provide support by creating opportunities for youth participants to share knowledge and skills throughout Louisville Metro to promote efforts and engage with local officials in policy	Project Coordinator, Coalition Members and	09/29/2015

development/ change recommendations.		
Create employment opportunities for youth leaders to work with local officials and other community-based organizations to address social disparities within the neighborhood that promote youth substance use/abuse.	Projector Coordinator, Coalition Membership	09/29/2015
Collaboratively with University Law Enforcement, train youth in CPTED strategies to address access to substance.	Projector Coordinator, UofL Police Dept, State ABC	09/29/2015

Objective 3: By 9/29/2015 achieve a 10% increase in participation among adult coalition members, community partner organizations, and parents/caregivers in coalition work related to assessment, capacity building, planning, implementation, and evaluation.

Strategy: Increase capacity of member, parents/caregivers and community partner organizations to collaborate with the coalition and engage in community action to reduce and prevent youth substance abuse by providing information, enhancing skills and reducing barriers.

Activity	**Who is responsible?**	**By When?**
Reduce barriers to promote adult participation in Coalition strategies providing bus tickets, refreshments and/or other small incentives.	Project Coordinator and community partners	By 9/29/2015
Reduce barriers by creating a plan for annual recruitment and retention of partner organizations and parent members.	Project Coordinator, youth and adult coalition members	By 1/1/2015
Provide information and encourage coalition involvement by hosting partner organization and parents/caregivers in educational and awareness activities.	Project Coordinator, coalition members and partners	Ongoing, through 9/29/2015
Enhance skills by implementing neighborhood-based health equity institutes to educate youth, parents, grandparents and community about social causes to poor health and substance abuse and develop positive social change strategies.	Project Coordinator, coalition members and Center for Health Equity	Ongoing, through 9/29/2015
Host parents/caregivers in family-focused educational and awareness activities to encourage involvement.	Project Coordinator and community partners	09/29/2015
Annually administer parent social norms survey throughout the community. Create performing arts activities to engage parents and youth in social norms campaign surrounding alcohol use: create updated social norms messages for social marketing throughout the community.	Project Coordinator, Membership, and Shawnee Youth Advocates	09/29/2015
Produce family policy, social norms, and prevention information calendars with youth substance abuse prevention PhotoVoice projects.	Project Coordinator, membership, youth	09/29/2015
Utilize performing arts as a tool to awareness campaigns within schools and/or community youth	Project Coordinator, JCPS and Seven	06/30/2015

groups as part of regularly scheduled parent involvement activities.	Counties Services	

DFC Goal 2: <u>Reduce youth substance use</u> among youth in the coalition's target area.

Objective 1: By 9/29/2015, change the following data indicators among youth ages 12-18 in the coalition's target area. (Baseline data: 2014 JCPS Safe and Drug Free Schools survey).

- ***reduce past 30-day use of alcohol by 5%***
- ***increase youth perception of parent disapproval of youth alcohol use by 8%***
- ***increase youth perception of moderate or great harm/risk from alcohol use by 5%***

Strategy: Change community norms and consequences related to the provision of alcohol to underage youth by social sources.

Activity	Who is responsible?	By When?
Identify community partners, including media, parents, law enforcement and retailers, to participate in the Parents Who Host campaign.	Coordinator, coalition, collaborating partners, youth.	11/15/2014
Develop Social Host work group, elect chair, set meeting schedule, and discuss desired outcomes and methods.	Coordinator, coalition, collaborating partners, youth.	12/15/2014
Develop communications/media plan to publicize campaign and gain additional community partners.	Social Host work group, Coordinator, coalition, collaborating partners, youth.	01/31/2015
Implement campaign, collect evaluation data, access outcomes and adjust efforts as needed to maximize impact, as measured by school survey data identified in the stated objective. Report outcomes and lessons learned to coalition and community.	Evaluators, coalition, collaborating partners, youth.	09/29/2015
Implement ATLAS and ATHENA for sports groups. Implement PERFORMANCE programs for youth in the community.	Coordinator, coalition, faith-based partners, schools or youth groups	09/29/2015

Strategy: Change community norms and consequences related to the sale of alcohol to underage youth by retailers.

Activity	Who is responsible?	By When?
Conduct retailer training and education. Increase the use of shoulder-tap retailer enforcement checks related to alcohol sales to youth. Publicize campaign prior to checks.	Coordinator, coalition, law enforcement, youth and other collaborating partners.	05/31/2015

Coordinate compliance checks and shoulder tap operations with local and state Alcoholic Beverage Control offices. Recruit and train youth to work with officers as investigative aids.	Coordinator, coalition, law enforcement, youth and other collaborating partners.	06/30/2015
Conduct checks, collect and report data to coalition and community. Through media outlets and partners, acknowledge stores that are not cited for alcohol sales to minors violations during compliance checks. Evaluate outcomes.	Coordinator, coalition, law enforcement, youth and other collaborating partners.	07/31/2015
Engage licensed local establishments by educating them on the regulations prohibiting sales of alcohol to minors to reduce access.	Project Coordinator and Membership	09/29/2015

Strategy: Change physical design and policy by supporting state or local laws to reduce alcohol outlet density, and/or hours of sale, and/or advertising density. Increase disincentives for youth alcohol use by supporting increased local and state taxes on alcohol sales.

Activity	Who is responsible?	By When?
Identify community partners, including local and state lawmakers, youth-serving organizations, parents, youth and others who support reducing alcohol outlet density, increasing taxes, and identifying other strategies to change policy, disincentives and other related factors.	Coordinator, coalition, collaborating partners, youth.	11/30/2014
Form a Policy work group. Use the "Healthy Alcohol Marketplace" materials to train members and stimulate action planning. Report outcomes to coalition and community.	Coordinator, coalition, collaborating partners, youth.	12/15/2014
Support passage of mandatory alcoholic beverage server training for retailers/employees in Jefferson County, Kentucky and state-wide.	Policy work group, Coordinator, coalition, collaborating partners, youth	01/31/2015
Develop position statements on local issues, develop communications/media plan to publicize and engage other partners.	Policy work group, Coordinator, collaborating partners	01/31/2015
Monitor national, state and local issues/actions related to alcohol policy, determine and implement responses.	Policy work group, Coordinator, collaborating partners	Ongoing through 9/29/2015
Evaluate campaign successes and opportunities, adjust action plan as needed, report outcomes to coalition and community.	Coalition, Policy work group, Coordinator, collaborating partners	09/29/2015

Conduct a community scan to analyze environmental risk factors of alcohol advertisements	Project Coordinator, membership, Shawnee Youth Advocates, members	09/29/2015
Monitor new alcohol license requests and work to prevent new licenses in oversaturated areas. Work on ordinance for no licenses in oversaturated areas	Project Coordinator, Membership	09/29/2015
Work to adopt Responsible Beverage Server Training (RBS) for businesses with alcohol licenses.	Project Coordinator, Officers, and Membership	09/29/2015

Strategy: Change access/ barriers and provide support by enhancing youth access to and participation in evidence-based prevention projects, youth leadership programs and alternative activities.

Activity	Who is responsible?	By When?
Create a youth/adult Social Norms work group to develop and implement a community-wide social norms campaign related to youth alcohol use.	Coordinator, coalition, collaborating partners, youth.	01/31/2015
Ensure youth access to information and materials needed to participate in the Reel Action youth video contest on underage drinking prevention.	Coordinator, coalition, collaborating partners, youth.	03/31/2015
Implement Project Alert curriculum in target area's middle schools among 7th and 8th grade students.	Coordinator, coalition, schools, partners, youth	05/31/2015

Objective 2: By 9/29/2015, change the following data indicators among youth ages 12-18 in the coalition's target area. (Baseline data: 2014 JCPS Safe and Drug Free Schools survey).

- ***reduce past 30-day use of marijuana by 6%***
- ***increase youth perception of parent disapproval of youth marijuana use by 10%***
- ***increase youth perception of moderate or great harm/risk from marijuana use by* 6%**

Strategy: Provide information and support for changing community norms supporting youth marijuana use; enhance access to services, evidence- based prevention programming and youth development programs.

Activity	Who is responsible?	By When?
Create a youth/adult Social Norms work group to develop and implement a community-wide social norms campaign related to youth marijuana use.	Coordinator, coalition, collaborating partners, youth	01/31/2015

Implement Project Alert curriculum in target area's middle schools among 7th and 8th grade students.	Coordinator, coalition, schools, partners, youth	05/30/2015
Implement ATLAS for sports groups. Implement PERFORMANCE programs for youth in the community.	Coordinator, coalition, faith-based partners, schools or youth groups	09/29/2015
Provide workshops for parents, grandparents and community to raise awareness of the dangers of marijuana.	Project Coordinator, membership, prevention specialist, and school personnel	09/29/2015

Strategy: Advocate against legislative efforts to legalize marijuana as medicine in Kentucky.

Activity	Who is responsible?	By When?
Form a Policy work group to develop a detailed action plan to engage community partners in advocating against legalized marijuana in any form. Develop position statement and supporting evidence against marijuana as medicine. Implement advocacy campaign. Report outcomes to coalition and community	Coordinator, coalition, collaborating partners, youth.	01/31/2015

Objective 3: By 9/29/2015, change the following data indicators among youth ages 12-18 in the coalition's target area. (Baseline data: 2014 JCPS Safe and Drug Free Schools survey).

- ***reduce past 30-day use of tobacco by 5%***
- ***increase youth perception of parent disapproval of youth tobacco use by 8%***
- ***increase youth perception of moderate or great harm/risk from tobacco use by 5%***

Strategy: Change community norms and consequences related to the sale of tobacco to underage youth by retailers. Increase barriers to youth access to tobacco.

Activity	Who is responsible?	By When?
Conduct retailer training and education. Increase the use of shoulder-tap retailer enforcement checks related tobacco sales to youth. Publicize campaign prior to checks.	Coordinator, coalition, law enforcement, youth and other collaborating partners.	05/31/2015
Recruit and train youth to work with officers as investigative aids.	Coordinator, coalition, law enforcement, youth and other collaborating partners.	06/30/2015
Conduct checks, collect and report data to coalition and community. Recognize retailers who do not sell tobacco to youth during checks. Evaluate outcomes.	Coordinator, coalition, law enforcement, youth and other collaborating partners.	07/31/2015

Engage local establishments by educating them on the regulations prohibiting sales of tobacco to minors to reduce access.	Project Coordinator and Membership	09/29/2015
Conduct a community scan to analyze environmental risk factors of tobacco advertisements	Project Coordinator, membership, Shawnee Youth Advocates, members	09/29/2015

Strategy: Change access/ barriers and provide support by enhancing youth access to and participation in evidence-based prevention projects, youth leadership programs and alternative activities.

Activity	Who is responsible?	By When?
Create a youth/adult Social Norms work group to develop and implement a community-wide social norms campaign related to youth tobacco use.	Coordinator, coalition, collaborating partners, youth.	01/31/2015

MONITOR AND EVALUATION EFFECTIVENSS OF ACTION PLAN

5. How will staff and the coalition members monitor and evaluate the effectiveness of the 12 Month Coalition Action Plan?

Engagement in the Shawnee Neighborhood Transformation Youth Coalition was based on the ability to impact the neighborhood utilizing proven methods and activities. The Shawnee NT Youth Coalition has been tasked with monitoring program activities. Effectiveness and impact will be measured using pre- and post-survey data from participants for each activity.

We understand the importance of data-driven decisions to guide the coalition actions; therefore, we collect qualitative and quantitative data and conduct secondary analysis of existing sources. Youth Advocates together with other Coalition members will work to engage youth from within the community utilizing the comprehensive JCPS Safe and Drug Free Schools Survey tool to gauge community's perception of substance use/abuse among youth; these surveys will be conducted annually to measure contribution of activities to impact youth and change perceptions and to decrease the rate of youth's substance use. We will also use this data to assess the four core measures. Community survey data will also be collected twice annually to address data that is of importance to the coalition, but not collected by the school system.

Data collected from the following sources will be compared to community-based data:

- Kentucky Alcohol Beverage Control (ABC) – compliance checks for alcohol and tobacco
- Jefferson County Public Schools Safe and Drug Free Schools Survey – rate of use and perceptions of peer and parental disapproval
- Louisville Metro Police Department – arrest data
- Shawnee Youth Advocates Focus Groups – rate of use and access
- Seven Counties Services – regional/state data on alcohol, tobacco and other drugs
- Parent Social Norms survey

Annually, the program evaluator will provide the coalition a presentation of the data, important trends, and an assessment of our progress toward our Action Plan objectives. The presentation

will be shared with the coalition Executive Board, staff, and membership. Strategies and activities will then be adjusted to make sure that the new Action Plan is more effective at reaching objectives and overarching goals. The progress of the coalition towards reaching its goals will be communicated to the coalition and community through media, at meetings, and through print publications such as advertisements and neighborhood newsletters. We will also count on the 12 Sector representatives to not only carry the message of the coalitions work to their respective sectors, but also to disseminate progress reports as needed.

We will request data from our partnering agencies and those mentioned above in the spring of 2015. This data will be used to evaluate and refine our action plan and 5-year strategic plan. Data will be compared to baseline data collected in previous years and end results will be analyzed by the Evaluators. The committee will look for emerging trends, and positive and negative impacts to youth substance abuse. Recommendations for program or policy development based on evaluation findings will be reported to the membership. Findings will be considered in the Strategic Planning Framework process to make adjustments for effective prevention strategies, interventions and emerging trends in the action plan and the 5-year logic models.

Information and results will be compiled and distributed among membership and partnering organizations. Data result will be used in community presentations to highlight such aspects as age of onset, perceived parental disapproval, perception of youth risk and 30 day past use. Data will help assess for the problem in this county and results will be used to reinforce the fact that a difference can be made through strategic planning and comprehensive environmental strategies. Use of the media will also be incorporated to spread normative message and encourage parental participation in their children's lives. Our belief is that through use of the data we can show results, engage the community to join the coalition, or to participate in community events that are developed to strengthen and enhance protective factors for the youth. Once engaged, knowledge will be enhanced, protective factors increase, risk factors decrease and eventually these new behaviors will become the norm for the community.

Process evaluation will be made through monthly meeting surveys, trainings, board development and through a leadership survey. The community survey also captures data pertaining to relationship with law enforcement, visibility and recognition of the coalition, perception of use of youth and perception and safety in the community. Board development will help leadership develop and enhance skills for decision making and coalition guidance. The leadership survey will help the coalition gauge how effective the coalition is and what the leadership and commitment is amongst the group. Through enhancing and developing the membership and board, the group will be in a better position to recruit and maintain membership and to engage and motivate volunteers in community projects. The coalition will also be better able to make decisions and move the coalition forward using the Strategic Prevention Framework and engaging the community in environmental strategies that will change community norms in the Shawnee neighborhood. Through these efforts, the group will be able to continue its mission of "working to create a safe and healthy environment through comprehensive prevention services and reducing substance abuse among Shawnee youth and families."