



www.npcresearch.com

**An Evaluation of Oregon's State
Incentive Cooperative Agreement:
Systems Outcomes and Processes
Following Two Years of
Implementation**

***Final Report
Executive Summary***

Submitted to

Barbara Groves
Office of Alcohol and Drug Abuse Programs
500 Summer Street NE, 3rd Floor
Salem, OR 97310-1012

Submitted by

Beth L. Green, Ph.D.
Scott Burrus, M.A.
Teresa Young, B. A.
Michael Finigan, Ph.D.
NPC Research, Inc.
5200 SW Macadam Ave., Suite 420
Portland, Oregon 97201
(503) 243-2436
fax (503) 243-2454
e-mail: green@npcresearch.com

February 2001

Executive Summary

A. Project Summary

Oregon's State Incentive Cooperative Agreement¹ (SICA) project was funded in October 1997 by the federal Center for Substance Abuse Prevention (CSAP). The goal of the SICA project was to reduce the use of alcohol, tobacco, and other drugs (ATOD) among youth by improving the state and local systems for implementing prevention services. Both federal and local stakeholders acknowledged that such systems change would take time, and that it would be difficult to see measurable change in terms of individual (student-level) ATOD use within the 3-year time span of the project. Prior research has documented that systems change, while an effective long-term approach to addressing difficult social problems, is a slow process, often occurring over a period of many years (Kusserow, 1991)². Therefore, a major focus of the evaluation was to document the extent to which Oregon was effectively using SICA funds to put into place those systems changes that would be expected to influence ATOD use in the long term.

This evaluation report describes these systems changes after two years of SICA implementation. Specifically, the SICA project targeted four areas of systems change that were highlighted in the evaluation:

1. Improving the extent of coordinated *planning* among agencies involved in preventing ATOD among youth;
2. Improving the extent of coordinated *programming* among agencies involved in preventing ATOD among youth;
3. Increasing the use of research-based, "best practices" prevention programs;
4. Increasing the availability of resources (including funding, staffing, and expertise) for prevention.

Oregon's SICA project focused on implementing these systems changes within and between *state agencies* and *local (county and tribal) agencies and stakeholders*. At the state level, the primary mechanisms for systems change included (1) formation of the SICA Advisory Board, which served both to provide guidance to the project and to act as a forum for interagency dialog and communication; and (2) coordination activities on the part of the project director and other SICA project staff, who acted as liaisons to various other interagency efforts focused on preventing ATOD use. At the local level, the SICA project provided funds of up to \$50,000 per year to each county/tribe. The majority of these funds were used to hire prevention coordinators who were responsible for implementing the SICA project at the local level. Prevention coordinators facilitated

¹ Known nationally as the State Incentive Grant, or "SIG"

² Kusserow, R. (1991). *Services integration: A twenty-year retrospective*. Washington, D.C.: U.S. Department of Health and Human Services, Office of the Inspector General.

coordination between local agency and community groups, conducted trainings, represented the needs of ATOD prevention during community planning activities, and (in some cases) directly provided and implemented prevention programming. Counties or tribes that were able to demonstrate that the role of the SICA coordinator was being filled without the SICA funds were also able to spend SICA dollars directly on prevention program development or expansion.

B. Evaluation Methods & Findings

B1. Evaluation Methods

The results presented in this report are based on a mixed-method design including annual interviews with key state and local agency representatives, bi-annual interviews with county prevention coordinators, surveys of SICA Advisory Board members, and analysis of key prevention documents, such as county AOD plans, Juvenile Crime Plans, and SICA coordinator monthly reports. Multiple sources of data were used in order to ensure that the evaluation captured the diverse approaches to and understanding of systems change, and to strengthen the rigor of the evaluation. The design focused on understanding change at both the state and local levels. At the local level, a purposive sample of 11 counties and 3 tribes was selected to ensure adequate representation of the state's diverse geographic, urban/rural, and demographic characteristics.

B2. State-Level System Change Outcomes

Overall, it appears that SICA has had some significant positive outcomes in terms of systems changes occurring at the state level. In particular, after two years of SICA implementation, state agencies appear to be:

- Interacting more frequently with each other.
- Engaging in more prevention-related activities.
- Engaging in more collaborative activities (e.g., joint training, planning, etc.).
- More knowledgeable about each other's prevention-related activities.
- Working together to facilitate joint planning processes at the county level.
- Working together to support the use of research-based "best practices" programs.

These successes can be attributed to a variety of factors, some of which can be linked directly to SICA's implementation, including:

- A relatively strong history of collaboration between state agencies, and strong leadership to support this work.
- Relatively high levels of "buy-in" from key state agency stakeholders as to the importance of both coordination and research-based best practices.
- Enhanced opportunities to share information and work to clarify SICA goals provided by the Advisory Board meetings.

- Concurrent policy initiatives, in particular the Governor’s Juvenile Crime Prevention Plan (JCP) and Senate Bill 555 (SB555), that supported increased coordination of programming and planning.
- Efforts by SICA program staff to advocate and facilitate coordination between state agencies and, especially, to support coordination between these concurrent policy initiatives.

Challenges still remaining for statewide systems change include:

- Continued role clarification and communication between state agencies about multiple prevention and coordination efforts.
- Continued challenges related to multiple concurrent planning and reporting requirements.
- Continued challenges to build shared definitions of key concepts such as “prevention” and “best practices.”
- Continued struggles between agencies over resources and resource allocation.

B2. County and Tribal Level Systems Change Outcomes

Within the sample of 11 counties and 3 tribes, there were significant, positive improvements in the extent and quality of coordinated planning and programming, as well as enhancements in the use of research-based practice and resources for prevention. The evaluation found that after two years of implementation:

- Nearly 50% of respondents across the state indicated significant, positive improvements in the coordination of planning and programming efforts in their county or tribe.
- There were substantial increases in the number of both formal and informal interagency agreements in place.
- Agencies were more likely to have added new prevention programs, or to have changed or expanded existing prevention programs.
- Key agency mission statements and activities focused more on prevention.
- Nearly a third of respondents across the state indicated a significant, positive improvement in knowledge and use of research-based programs in their counties.
- Agencies were engaged in more leveraging and coordinating of funds.
- Agencies were involved in more joint staff training.

Outcomes were influenced by both the county context and by the characteristics and roles of the SICA coordinator. In particular, counties that had more positive outcomes tended to:

- Have more experienced and knowledgeable coordinators who were able to advocate for SICA’s goals and create high levels of buy-in from key agency stakeholders and from elected officials.

- Have coordinators who were more engaged in advocacy, grant writing, planning, and technical assistance, rather than direct service delivery.
- Have less turnover in their SICA coordinator position
- Have a strong collaborative base established prior to the start of the SICA grant, and in particular, to have key agency stakeholders who had positive attitudes about engaging in coordinated planning and in the importance of research-based “best practices.”
- Be mixed urban/rural counties, rather than exclusively rural.
- Be more focused on enhancing coordination, including using most or all of their SICA funding for coordination and having the SICA coordinator be involved in fewer program implementation efforts.

Challenges remaining at the local level mirror those for the statewide systems, mentioned above. Additionally, some counties face challenges related to:

- Lack of support for the SICA coordinator’s work from key agency directors, elected officials, and other key stakeholders.
- Over-extending the SICA coordinator’s duties, placing too many and/or too diverse a set of responsibilities on the coordinator.
- Hiring coordinators without needed experience in prevention, and especially, coordination and planning experience.
- Continued lack of clarity about roles for key agencies and stakeholders.

B3. Summary of Outcomes

The SICA project appears to have had considerable success, at both the state and county levels, at increasing coordination around planning and programming, and to a somewhat lesser extent, enhancing resources and research-based programs. Systems changes related to resources and research-based programs may be more likely to occur slowly, as stakeholders continue to work together to do coordinated programming and planning, provided that there is adequate buy-in to the notion that research-based programs are important.

At both the state and county level, improvements were integrally linked to the JCP efforts and to SB555. These two initiatives, combined with the SICA project, led to documented changes in the nature and quality of interactions between and among key state and county agencies. Further, both state and county agencies reported an increase in key collaborative activities and shifts towards a more prevention-oriented mission. These systems changes, if maintained, have the potential to provide a solid foundation for a stronger, more coordinated, and higher quality system of prevention programs, and ultimately, to reductions in ATOD use among Oregon’s youth.

C. Recommendations and “Lessons Learned”

As SICA moves into its third year of implementation, several “lessons learned” from this evaluation may help to support its continued success.

1. First, it is apparent that **clarification of roles and clear expectations** were a key to success at both the state and local levels. To the extent that agency directors, SICA coordinators, and elected officials were unclear about SICA’s goals and their role in helping to reach those goals, SICA was generally less successful. It will be important for SICA project staff at the state and federal level, as well as SICA coordinators locally, to continue to articulate SICA’s goals carefully and to have a clear understanding of what is expected of them in terms of supporting those goals. To the extent that state-level project staff can more clearly articulate their expectations about what coordinators should be doing in terms of supporting research-based practices and resources enhancement, greater gains might be seen in those areas.
2. Second, the state will need to continue to work to **model collaboration and coordination** at the state level by ensuring that planning and reporting requirements are streamlined and coordinated. Additional work to ensure good coordination of concurrent policy initiatives, such as JCP and SB555, will be critical to maintaining systems changes. Efforts may also be needed to more fully integrate the work of tobacco coordinators with the work of the SICA coordinators at the local level.
3. Third, having individuals at both the state and local levels who continue to **advocate** for enhanced coordination, increased resources for prevention, and for implementation of best-practices programs is clearly important to SICA’s continued success. Such individuals also played an important role in keeping SICA and ATOD prevention “at the table” during various planning initiatives.
4. Fourth, it may be important to **support SICA coordinators to focus their efforts** in a few key areas. More successful counties tended to be those in which resources were dedicated to coordination, rather than used for both coordination and programming. Successful counties also had coordinators who spent less time providing services and who were involved in relatively fewer committees. This could imply that having a single role (coordination and advocacy for research-based programs) rather than balancing multiple roles, committee work, and other activities is important to supporting SICA outcomes.

Finally, it will be important at both the state and local levels for key stakeholders to be able to creatively **work through issues related to “turf” and resource allocation**, and to continue to work toward shared understanding of such central issues as the meaning of “prevention,” who should or can be the target of prevention efforts, and how various prevention efforts can find the common ground necessary for truly integrated, non-duplicative prevention systems for youth.