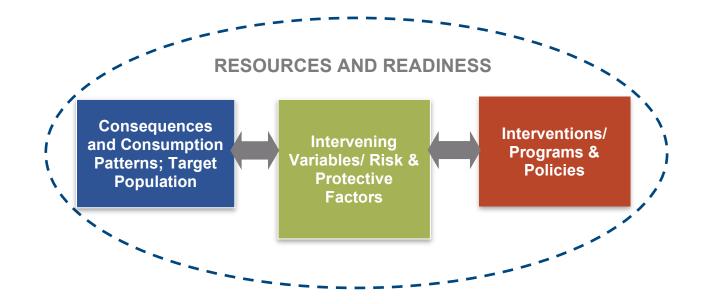


## **Checklist for Identifying Data Gaps**

Conducting a strong needs assessment is the foundation for developing a successful prevention plan. However, no needs assessment is ever complete. To identify gaps and strengthen on-going data collection for your needs assessment, the Prevention Technology Transfer Center (PTTC) Data-Informed Decisions Working Group has designed this checklist. The checklist is organized by the six (6) core data areas of the Strategic Planning Framework: consequences, consumption, target populations, intervening variables (i.e. risk and protective factors), prevention resources, and community readiness. Data should be as local as possible, but include data from neighboring counties, state, regional, or national data for comparison purposes. For help on addressing your identified data gaps, <u>contact your PTTC</u> for training and technical assistance.

This checklist is divided into several sections. The first section covers *consequences, consumption patterns, and target populations* to help you prioritize problem(s) and the population most affected. We recommend prioritizing only one or two problems to make the most out of your resources and increase your chances of making meaningful reductions in that problem. The second section includes *intervening variables, prevention resources and infrastructure, and community readiness* (see Figure 1). For more information, please view the webinar recording, <u>Completing the Data Puzzle: Identifying Data Gaps</u>.



## Section 1: Consequences, Consumption Patterns, and Target Population

In this section, suggestions for data indicators are provided along with potential data sources to consider. You can check off which data indicators you already have to get a sense of where you have gaps. The data source column offers suggestions for secondary data sources to obtain data for each indicator. You do not need to collect data from every data source listed; these are intended to be examples of what to look for when a gap is identified. The notes column is for you to write specific notes, questions, or comments to help track and plan to address data gaps.

A. Consequences. Data that show the harm and other costs of substance misuse				
Data Indicators	Data Sources	Notes		
Academic Conseque	nces			
Poor Academic Performance	<ul> <li>Local School Districts</li> <li>State Departments of Education</li> <li>The Bureau of Indian Education</li> <li>Tribal Colleges</li> <li>Tribal Departments of Education</li> </ul>			
Graduation records	<ul> <li>Local school districts</li> <li>State Department of Education</li> <li>The Bureau of Indian Education</li> <li>Tribal Colleges</li> <li>Tribal Departments of Education</li> </ul>			
Truancy and dropout	<ul> <li>Local school districts</li> <li>State Departments of Education</li> <li>The Bureau of Indian Education</li> <li>Tribal Colleges</li> <li>Tribal Departments of Education</li> </ul>			
Health Consequenc	es			
Teen Pregnancy	<ul> <li>Census</li> <li>State Uniform Crime Report (UCR)</li> <li>(CDC) County Level Teen Pregnancy Data</li> <li>National Vital Statistics System (NVSS)</li> <li>Indian Health Services Regional Differences, Trends and Women Focus Reports</li> <li>Tribal Epidemiology Centers</li> <li>Indian Health Service Units</li> <li>Tribal Health Departments</li> <li>County Health Rankings and Roadmaps</li> </ul>			
Risky Sexual Behavior	<ul> <li>Youth Risk Behavior Survey (YRBS)</li> <li>Tribal Epidemiology Centers</li> </ul>			

Data Indicators	Data Sources	Notes	
Liver disease	<ul> <li>Indian Health Service Units</li> <li>Tribal Health Departments</li> <li>County Health Rankings and Roadmaps</li> <li>Local Healthcare System</li> <li>CDC WONDER</li> </ul>		
(fatal and nonfatal)	<ul> <li>National Vital Statistics System (NVSS)</li> <li>Medical Examiner</li> <li>Indian Health Services Regional Differences and Trends Reports</li> <li>Tribal Epidemiology Centers</li> <li>Indian Health Service Units</li> <li>County Health Rankings and Roadmaps</li> </ul>		
Cancer (fatal and nonfatal)	<ul> <li>Local Healthcare System</li> <li>CDC WONDER</li> <li>National Vital Statistics System (NVSS)</li> <li>Medical Examiner</li> <li>Indian Health Services Regional Differences Reports</li> <li>Tribal Epidemiology Centers</li> <li>Local Health Departments</li> <li>Indian Health Service Units</li> <li>County Health Rankings and Roadmaps</li> </ul>		
Overdose Deaths	<ul> <li>Emergency Department</li> <li>Overdose Mapping</li> <li>CDC WONDER</li> <li>National Vital Statistics System (NVSS)</li> <li>Medical Examiner</li> <li>Tribal Epidemiology Centers</li> <li>Local Health Departments</li> <li>Indian Health Service Units</li> <li>Tribal Health Departments</li> <li>Tribal Departments of Public Safety</li> </ul>		
<ul> <li>Other Chronic health problems</li> <li>Local Health Care System</li> <li>CDC WONDER</li> <li>National Vital Statistics System (NVSS)</li> <li>Medical Examiner</li> <li>Indian Health Services Regional Differences, Focus, Injuries and Trends Reports</li> </ul>			

Data Indicators	Data Sources	Notes	
<ul> <li>Tribal Epidemiology Centers</li> <li>Indian Health Service Units</li> <li>Tribal Health Departments</li> </ul>			
Crime			
<ul> <li>Car accidents (fatal and non- fatal)</li> <li>Local law enforcement</li> <li>First-Responder Call Data</li> <li>National Highway Traffic Safety Administration State Data System Reports</li> <li>Indian Health Services Trends and Injury Reports</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Departments of Public Safety</li> <li>Bureau of Indian Affairs/Indian Highway Safety Program</li> <li>Fatal Analysis Reporting System (FARS)</li> </ul>			
Property damage	<ul> <li>Local Law Enforcement</li> <li>Local Security Companies</li> <li>Tribal Housing Authorities</li> </ul>		
Domestic violence	<ul> <li>Local Law Enforcement, First-Responder Call Data</li> <li>Tribal Departments of Public Safety</li> <li>Indian Health Services Injuries and Women's Focus Reports</li> <li>Bureau of Justice</li> <li>National Violence Survey Against Women</li> <li>National Institute of Justice</li> <li>CDC – National Intimate Partner and Sexual Violence Survey</li> </ul>		
<ul> <li>University/College s Crimes</li> <li>University Crime Reports</li> <li>Tribal Colleges Safety Reports</li> </ul>			
Juvenile Arrest Data	<ul> <li>Local Law Enforcement</li> <li>Tribal Departments of Public Safety</li> <li>Tribal Epidemiology Centers</li> </ul>		
<ul> <li>Driving While</li> <li>Intoxicated,</li> <li>Driving Under the</li> </ul>	<ul> <li>Local law enforcement, First-responder call data</li> <li>Tribal Departments of Public Safety</li> <li>Indian Health Service Units</li> </ul>		

Data Indicators	Data Sources	Notes			
Influence of either alcohol or other drugs					
Sexual Assault	<ul> <li>State Crime Reports</li> <li>National Violence Survey Against Women</li> <li>National Institute of Justice</li> <li>CDC – National Intimate Partner and Sexual Violence Survey</li> <li>Bureau of Justice – National Crime Victimization Survey</li> </ul>				
Other Crime	<ul> <li>Uniform Crime Reporting</li> <li>County Health Rankings and Roadmaps</li> <li>Bureau of Justice – National Crime Victimization Survey</li> </ul>				
Additional Consec	quences				
Unemployment	<ul> <li>State Employment and Labor Department</li> <li>County Health Rankings and Roadmaps</li> </ul>				
Homelessness	<ul> <li>U.S. Department of Housing and Urban Development</li> <li>U.S. Department of Education</li> <li>Hope Center for College, Community and Justice Tribal Colleges and Universities Survey</li> <li>Minnesota Reservation Homeless Study</li> <li>State Homeless Point in Time Counts</li> <li>National Health Care for the Homeless Council</li> </ul>				
<ul> <li>Divorce</li> <li>Census</li> <li>County Government</li> </ul>					
B. Consumption P	B. Consumption Pattern Data				
Data Indicator	Data Sources	Notes			
Types of substances used (e.g., alcohol,	<ul> <li>Youth Risk Behavior Survey (YRBS), School Survey</li> </ul>				

Data Indicators	Data Sources	Notes
marijuana, prescription opioids, illicit opioids)	tion (NSDUH) illicit • Core Alcohol and Drug Survey (CADS)	
Frequency of use (e.g., past 30-day use, lifetime use, daily use)	<ul> <li>Youth Risk Behavior Survey (YRBS), School Survey</li> <li>National Survey on Drug Use and Health (NSDUH)</li> <li>Core Alcohol and Drug Survey (CADS)</li> <li>College Alcohol Survey (CAS)</li> <li>Drug Abuse Warning Network (DAWN)</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Health Boards</li> </ul>	
Quantity consumed (e.g., number of drinks consumed)	<ul> <li>Youth Risk Behavior Survey (YRBS), School Survey</li> <li>National Survey on Drug Use and Health (NSDUH)</li> <li>Core Alcohol and Drug Survey (CADS)</li> <li>College Alcohol Survey (CAS)</li> <li>Drug Abuse Warning Network (DAWN)</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Health Departments</li> <li>Tribal Health Boards</li> </ul>	
<ul> <li>Method used (e.g., smoke, vape, edible, inject)</li> </ul>	<ul> <li>Youth Risk Behavior Survey (YRBS), School Survey, National Survey on Drug Use and Health (NSDUH)</li> <li>Tribal Health Departments</li> <li>Tribal Epidemiology Centers</li> </ul>	

Data Indicators Data Sources		Notes
<ul> <li>Age of initiation of use</li> <li>Youth Risk Behavior Survey (YRBS), School Survey</li> <li>National Survey on Drug Use and Health (NSDUH)</li> <li>Core Alcohol and Drug Survey (CADS)</li> <li>College Alcohol Survey (CAS)</li> <li>Drug Abuse Warning Network (DAWN)</li> <li>Tribal Health Departments</li> <li>Tribal Epidemiology Centers</li> </ul>		
Timing of use (holidays, events)	<ul> <li>Local law enforcement arrest data</li> <li>Hospital data</li> <li>Alcohol/marijuana sales tax data</li> <li>Tribal Health Departments</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Departments of Public Safety</li> </ul>	
C. Population Data		
Data Indicators	Data Sources	Notes
☐ Age	<ul> <li>United States Census Bureau</li> <li>Survey data</li> <li>Tribal Enrollment Data</li> <li>Indian Health Services</li> </ul>	
Gender	<ul> <li>United States Census Bureau</li> <li>Survey data</li> <li>Tribal Enrollment Data</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Health Boards</li> <li>Indian Health Services</li> </ul>	
Sexual orientation	<ul> <li>United States Census Bureau</li> <li>Youth Risk Behavior Survey</li> <li>Behavioral Risk Factor Survey</li> </ul>	
Race/ethnicity	<ul> <li>United States Census Bureau</li> <li>Survey data</li> <li>Tribal Enrollment Data</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Health Boards</li> <li>Indian Health Services</li> </ul>	

Data Indicators	Data Sources	Notes	
Military/veterans	<ul> <li>United States Census</li> <li>Local military office</li> <li>National Survey on Drug Use and Health (NSDUH)</li> <li>Tribal Enrollment Data</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Health Boards</li> <li>Indian Health Services</li> </ul>	lealth	
Urban/rural	<ul> <li>United States Census Bureau</li> <li>USDA Rural-Urban Continuum Codes</li> <li>Tribal Enrollment Data</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Health Boards</li> <li>Indian Health Services</li> </ul>		
Disability status	<ul> <li>United States Census Bureau</li> <li>Tribal Enrollment Data</li> <li>Tribal Epidemiology Centers</li> <li>Tribal Health Boards</li> <li>Indian Health Services</li> </ul>		
Educational attainment	<ul> <li>United States Census Bureau</li> <li>American Indian Higher Education Consortium</li> <li>Bureau of Indian Education</li> <li>Tribal Departments of Education</li> </ul>		

## Section 2: Intervening Variables, Resources, and Readiness

After you've identified your priorities and focus population, identifying the factors driving those problems and the resources and readiness to address them follow. This section helps identify data indicators for evidence-based intervening variables, as well as assessing resources and community readiness. Definitions are provided for clarity, as sometimes specific terminology can vary. Potential data sources are intended as suggestions for how to collect data for each intervening variable. The notes column is available to include questions, comments, or other notes related to each indicator.

Note: These tables present some of the key risk and protective factors related to adolescent and young adult substance initiation and misuse, but they are not exhaustive. If examining risk or protective factors not included in this table, be sure there is adequate research supporting the connection between the factor and substance misuse consequences or consumption patterns. The majority of risk/protective factors and definitions are excerpted from <u>Chapter 3: Prevention Programs and Policies in the Surgeon General's Report on Alcohol, Drugs, and Health</u>.<sup>1</sup> Complete citations are found in this report. Additional factors are from the <u>Wyoming Prevention Depot's Environmental Strategies Tool</u><sup>2</sup>; references for these factors are found on this website.

## A. Intervening Variables.

Factors that precede and increase (risk) or decrease (protective) the likelihood of one misusing a specific substance.

Risk Factor	Definition	Potential Data Sources	Notes
Early initiation of substance use <sup>1</sup>	Engaging in alcohol or drug use at a young age. <sup>1</sup>	<ul><li>Youth Risk Behavior Survey (YRBS)</li><li>Other school surveys</li></ul>	
Early and persistent problem behavior <sup>1</sup>	Emotional distress, aggressiveness, and "difficult" temperaments in adolescents <sup>1</sup> .	<ul> <li>Communities That Care (CTC) Youth Survey</li> <li>Local school data</li> <li>Other youth/school survey</li> </ul>	
Rebelliousness <sup>1</sup>	High tolerance for deviance and rebellious activities. <sup>1</sup>	<ul><li>CTC Youth Survey</li><li>Other youth/school survey</li></ul>	

Risk Factor	Definition	Potential Data Sources	Notes
Favorable attitudes toward substance use <sup>1</sup>	Positive feelings towards alcohol or drug use, low perception of risk. <sup>1</sup>	<ul> <li>CTC Youth Survey</li> <li>YRBS</li> <li>Other youth/school survey</li> <li>Youth focus groups</li> </ul>	
Peer substance use <sup>1</sup>	Friends and peers who engage in alcohol or drug use. <sup>1</sup>	<ul><li>CTC Youth Survey</li><li>Other youth/school survey</li><li>Youth focus groups</li></ul>	
Perception of peer disapproval	Belief that peers disapprove of alcohol or drug use	<ul><li>YRBS</li><li>Other youth/school survey</li><li>Youth focus groups</li></ul>	
Perception of availability/ ease of access	Belief that obtaining alcohol or other drugs is easy, or that they are highly available.	<ul><li>YRBS</li><li>Other youth/school survey</li><li>Youth focus groups</li></ul>	
Social access/ availability	Ability to obtain alcohol or drugs from family, friends, or other acquaintances, with or without their knowledge	<ul><li>YRBS</li><li>Other youth/school survey</li><li>Youth focus groups</li></ul>	
Family management problems	Inadequate management practices, including unclear expectations for children's behavior, inadequate supervision, and monitoring of	<ul><li>CTC Youth Survey</li><li>Other youth/school survey</li><li>Parent surveys</li></ul>	

Risk Factor	Definition	Potential Data Sources	Notes
(monitoring, rewards, etc) <sup>1</sup>	children, and excessively severe, harsh, or inconsistent punishment. <sup>1</sup>		
□ Family conflict <sup>1</sup>	Conflict between parents or between parents and children, including abuse or neglect. <sup>1</sup>	<ul><li>YRBS ACEs Module</li><li>Other youth/school survey</li></ul>	
Favorable parental attitudes <sup>1</sup>	Parental attitudes that are favorable to drug use and parental approval of drinking and drug use. <sup>1</sup>	<ul> <li>CTC Youth Survey</li> <li>YRBS</li> <li>Other youth/school survey</li> <li>Youth focus groups</li> <li>Parent surveys</li> </ul>	
Family history of substance misuse <sup>1</sup>	Persistent, progressive, and generalized substance use, misuse, and use disorders by family members. <sup>1</sup>	<ul> <li>YRBS ACEs Module</li> <li>Other youth/school survey</li> <li>Parent surveys</li> </ul>	
Academic failure beginning in late elementary school <sup>1</sup>	Poor grades in school. <sup>1</sup>	<ul> <li>Local school data</li> <li>Other youth/school survey</li> </ul>	
Lack of commitment to school <sup>1</sup>	When a young person no longer considers the role of the student as meaningful and rewarding, or lacks investment or commitment to school. <sup>1</sup>	<ul><li>CTC Youth Survey</li><li>Other youth/school survey</li><li>Youth focus groups</li></ul>	

Risk Factor	Definition	Potential Data Sources	Notes
Low cost of alcohol/ economic availability <sup>2</sup>	Low alcohol sales tax, happy hour specials, other price discounting. <sup>2</sup>	<ul><li>Local/state taxation rates</li><li>Environmental scans</li><li>Community mapping</li></ul>	
High retail availability of substances <sup>2</sup>	High number of alcohol outlets in a defined geographical area or per a sector of the population. <sup>2</sup>	<ul> <li>State Prescription Drug Monitoring Programs (for prescription drugs)</li> <li>Automated Reports and Consolidated Ordering System (ARCOS) (for prescription drugs)</li> <li>Synar Amendment Reports (Tobacco Data)</li> <li>STOP Act State Reports (Alcohol data)</li> <li>Environmental scans</li> <li>Photovoice</li> <li>Community mapping</li> </ul>	
Community laws and norms favorable to substance use <sup>1</sup>	Community reinforcement of norms suggesting alcohol and drug use is acceptable for youth, including low tax rates on alcohol or tobacco or community beer tasting events. <sup>1</sup>	<ul> <li>CTC Youth survey</li> <li>Other youth or school survey</li> <li>Youth focus groups</li> <li>Laws/policy/regulations analysis</li> </ul>	
Low enforcement of public policies, laws, and regulations <sup>2</sup>	Surveillance of substance sales at retail outlets, issuing penalties and fines for violations, community policing of local ordinances, and providing incentives for upholding substance-related policies. <sup>2</sup>	<ul> <li>Review of Policy/law/ regulations related to enforcement</li> <li>Key informant interviews with law enforcement and other key leaders</li> </ul>	

Risk Factor	Definition	Potential Data Sources	Notes
Exposure to alcohol and other drugs on social media	Exposure to alcohol and other drugs on social media through posts and/or advertising. Current data sources are limited and require expertise.	<u>Using tweets to identify substance use</u> <u>trends</u>	
Exposure to advertising and marketing <sup>2</sup>	Increased consumer exposure to a product through advertisements in traditional media, discounts, and/or event sponsorship. <sup>2</sup>	<ul> <li>Environmental scans</li> <li>Photovoice</li> <li>Community mapping</li> <li>Youth focus groups</li> </ul>	
Low neighborhood attachment <sup>1</sup>	Low level of bonding to the neighborhood. <sup>1</sup>	<ul><li>CTC Youth survey</li><li>Other youth or school survey</li><li>Youth focus groups</li></ul>	
Community disorganization <sup>1</sup>	Living in neighborhoods with high population density, lack of natural surveillance of public places, physical deterioration, and high rates of adult crime. <sup>1</sup>	<ul> <li>CTC Youth survey</li> <li>Other youth or school survey</li> <li>Observation</li> <li>Photovoice</li> <li>Environmental scans</li> <li>Youth focus groups</li> </ul>	
Low socioeconomic status <sup>1</sup>	A parent's low socioeconomic status, as measured through a combination of education, income, and occupation. <sup>1</sup>	<ul> <li>State Employment and Labor Agency (unemployment)</li> <li>School district or State Department of Education (free/reduced lunch)</li> <li>State Department of Human Services (AFDC/TANF recipients, Food Stamp recipients)</li> </ul>	

Risk Factor	Definition	Potential Data Sources	Notes
Transitions and mobility <sup>1</sup>	Communities with high rates of mobility within or between communities. <sup>1</sup>	<ul><li>CTC Youth survey</li><li>Other youth/school survey</li></ul>	
<ul> <li>High rates of Unemployment/ Underemployment</li> </ul>	High rates of joblessness among specific groups or communities due to low education attainment, lack of job opportunities, rurality of the communities, discrimination, and low income	<ul> <li>State Employment and Labor Agency</li> <li>U.S. Bureau of Labor Statistics</li> <li>National Tribal Behavioral Health Agenda</li> <li>US Department of the Interior-Indian Affairs – Population and Labor Force reports</li> </ul>	
Low school completion rates	High dropout rates, low achievement and graduation rates among specific groups or communities	<ul> <li>The Bureau of Indian Education</li> <li>National Center for Educational Statistics</li> <li>Local School Districts</li> <li>State Departments of Education</li> <li>Tribal Colleges</li> <li>Tribal Departments of Education</li> </ul>	
Historical and intergenerational trauma	Cumulative, multigenerational, collective experience of emotional and psychological injury in communities and in descendants (Brave Heart 2003, 2012) <u>https://store.samhsa.gov/sites/d</u> <u>efault/files/d7/priv/sma14-</u> <u>4866.pdf</u> . *This is critical information for selecting culturally sensitive	<ul> <li>Administration for Children and Families <u>https://www.acf.hhs.gov/trauma-</u> <u>toolkit/trauma-concept</u></li> <li>SAMHSA Treatment Improvement Protocol 61 Behavioral Health Services for Al/AN <u>https://store.samhsa.gov/sites/default/file</u> <u>s/d7/priv/tip_61_aian_full_document_020</u> <u>419_0.pdf</u></li> </ul>	

Risk Factor	Definition	Potential Data Sources	Notes
	interventions, but direct data sources are limited. Resources provided describe the risk factor.	<ul> <li>National Tribal Behavioral Health Agenda file:///Users/mac/Downloads/pep16-ntbh- agenda-3.pdf</li> <li>Georgetown University Center for Child and Human Development https://gucchdtacenter.georgetown.edu/T raumalnformedCare/</li> <li>2014 Taskforce on American Indian And Alaska Native Children Exposed to Violence https://www.justice.gov/sites/default/files/ defendingchildhood/pages/attachments/2 015/03/23/ending_violence_so_children_ can_thrive.pdf</li> <li>National Center on Substance Abuse and Child Welfare – Tribal Families and Trauma Exposure https://ncsacw.samhsa.gov/resources/tra uma/tribal-families-and-trauma- exposure.aspx</li> <li>Indian Health service Trauma Informed Care https://www.ihs.gov/teleeducation/webina r-archives/traumainformedcare/</li> <li>Indian Child Trauma Center http://www.icctc.org/index.asp</li> <li>New Mexico CARES Health Disparities Center https://hsc.unm.edu/programs/nmcaresh d/docs/story_heart.pdf</li> <li>The National Child Traumatic Stress Network</li> </ul>	

Risk Factor	Definition	Potential Data Sources	Notes
		https://www.nctsn.org/resources/racial- injustice-and-trauma-african-americans- us-nctsn-position-statement	
Loss of culture, language, spirituality, and traditional values	When communities are exposed to geographic displacement and implementation of policies aimed at eliminating traditional social organization and values, language, culture, and spirituality	<ul> <li>National Tribal Behavioral Health Agenda file:///Users/mac/Downloads/pep16-ntbh- agenda-3.pdf</li> <li>National Center on Substance Abuse and Child Welfare – Tribal Families and Trauma Exposure <u>https://ncsacw.samhsa.gov/resources/tra</u> <u>uma/tribal-families-and-trauma- exposure.aspx</u></li> <li>Indian Health service Trauma Informed Care <u>https://www.ihs.gov/teleeducation/webina</u> <u>r-archives/traumainformedcare/</u></li> </ul>	
Unmet Development Needs of Children	Young children in some communities disproportionately experiencing long term physical and psychological health outcomes because of high rates of poverty, and intergenerational effects of historical trauma on their families (e.g., Native Children are inordinately represented in the foster care system	<ul> <li>County Health Rankings and Roadmaps</li> <li>Tribal Epidemiology Centers</li> <li>National Tribal Behavioral Health Agenda</li> <li>Tribal Health Boards</li> <li>US Census Bureau</li> </ul>	

Risk Factor	Definition	Potential Data Sources	Notes
Rural and Geographic Regions	Remote, small, sparsely populated communities that may lack jobs, economic opportunities, and access to other services like healthcare (e.g., American Indian reservations)	<ul> <li>First Nations Development Institute <u>https://www.usetinc.org/wp-</u> <u>content/uploads/bvenuti/WWS/2017/May</u> <u>%202017/May%208/Twice%20Invisible%</u> <u>20-%20Research%20Note.pdf</u></li> <li>Housing Assistance Council</li> <li>Indian Health Service</li> <li>Tribal Epidemiology Centers</li> </ul>	
Lack of Access to Preventive Care	Pervasive disparities and disparate gaps in access to prevention services, health care access and service utilization within communities	<ul> <li>Indian Health Services</li> <li>Tribal Epidemiology Centers</li> <li>Indian Health Service Units</li> <li>Tribal Health Boards</li> <li>National Tribal Behavioral Health Agenda</li> </ul>	

Protective Factor	Definition	Data Source	Notes
Social, emotional, behavioral, cognitive, and moral competence <sup>1</sup>	Interpersonal skills that help youth integrate feelings, thinking, and actions to achieve specific social and interpersonal goals. <sup>1</sup>	<ul><li>CTC Youth Survey</li><li>Other youth/ school survey</li></ul>	

Protective Factor	Definition	Data Source	Notes
☐ Self-efficacy <sup>1</sup>	An individual's belief that they can modify, control, or abstain from substance use. <sup>1</sup>	Other youth/ school survey	
☐ Spirituality <sup>1</sup>	Belief in a higher being, or involvement in spiritual practices or religious activities. <sup>1</sup>	<ul><li>CTC Youth Survey</li><li>Other youth/ school survey</li></ul>	
☐ Resiliency <sup>1</sup>	An individual's capacity for adapting to change and stressful events in healthy and flexible ways. <sup>1</sup>	<ul><li>CTC Youth Survey</li><li>Other youth/ school survey</li></ul>	
Opportunities for positive social involvement <sup>1</sup>	Developmentally appropriate opportunities to be meaningfully involved with the family, school, or community. <sup>1</sup>	<ul> <li>CTC Youth Survey</li> <li>Other youth/ school survey</li> <li>Youth focus groups</li> </ul>	
Recognition for positive behavior <sup>1</sup>	Parents, teachers, peers, and community members providing recognition for effort and accomplishments to motivate individuals to engage in positive behaviors in the future. <sup>1</sup>	<ul> <li>CTC Youth Survey</li> <li>Other youth/ school survey</li> <li>Youth focus groups</li> </ul>	
☐ Bonding <sup>1</sup>	Attachment and commitment to, and positive communication with, family, schools, and communities. <sup>1</sup>	<ul> <li>CTC Youth Survey</li> <li>Other youth/ school survey</li> <li>Youth focus groups</li> </ul>	

Protective Factor	Definition	Data Source	Notes
Marriage or committed relationship <sup>1</sup>	Married or living with a partner in a committed relationship who does not misuse alcohol or drugs. <sup>1</sup>	<ul> <li>CTC Youth Survey</li> <li>YRBS ACEs Module</li> <li>Other youth/ school survey</li> </ul>	
Healthy beliefs and standards for behavior <sup>1</sup>	Family, school, and community norms that communicate clear and consistent expectations about not misusing alcohol and drugs. <sup>1</sup>	<ul> <li>CTC Youth Survey</li> <li>Other youth/ school survey</li> <li>Youth focus groups</li> </ul>	
Indigenous language traditions and cultural maintenance	Maintenance and transfer of traditional social organization and values, language, culture, spirituality	<ul> <li>Other youth/ school survey</li> <li>Focus groups or talking circles</li> <li>Key informant interviews</li> </ul>	

Resource Type	Definition	Data Source	Notes
□ Human	<ul> <li>People who can assist with prevention in some way:</li> <li>Staff with appropriate credentials and experience</li> <li>Consultants/experts with specialized knowledge on key prevention aspects</li> <li>Stakeholders (e.g., coalition members)</li> <li>Members of the target population(s)</li> <li>Local champions</li> <li>Volunteers from the general community</li> </ul>	<ul> <li>Staff review of credentials and competencies</li> <li>List of consultants/ experts and their specialized knowledge</li> <li>Roster of coalition or other similar group's membership with agency affiliation sector representation</li> <li>List of additional stakeholders and agency affiliation/sector representation</li> </ul>	
☐ Fiscal	<ul> <li>The money that communities can bring to prevention efforts, as well as other things that cost money but can often be obtained for free or that can be donated by partners. Examples:</li> <li>Grants, donations, other funding</li> <li>Computer hardware and software</li> <li>Meeting space, food, photocopying</li> <li>Promotion, advertising</li> </ul>	<ul> <li>Fiscal review of all forms of money, duration of funding availability, etc.</li> <li>Inventory of computer equipment and software</li> <li>Inventory of materials and supplies</li> <li>Inventory of partners who can provide other needed resources (meeting space, food, etc.)</li> </ul>	
Organizational	<ul> <li>The structures within an organization that are deeply connected to a community's substance abuse prevention goals</li> <li>Coalition or similar group formalized</li> </ul>	<ul> <li>Review of organizational vision, mission statement, by-laws, and policies (including aspects related to cultural competency)</li> <li>Analysis of key systems and infrastructure</li> </ul>	

Resource Type	Definition	Data Source	Notes
Resource Type	<ul> <li>Definition</li> <li>Up-to-date vision and mission</li> <li>Clear by-laws and other organizational policies and procedures</li> <li>Organizational policies and practices are culturally competent</li> <li>Clear systems and infrastructure, including data systems</li> <li>A clear and designated leadership position</li> <li>Clear and up-to-date job descriptions</li> <li>Clear prevention plan and logic model, updated every</li> </ul>	<ul> <li>Data Source</li> <li>Review of MOUs, MOAs, other formal agreements</li> <li>List of potential TTA sources (including the PTTCs)</li> </ul>	Notes
<ul> <li>Other existing efforts to address</li> </ul>	<ul> <li>logic model, updated every 3-5 years</li> <li>Annual reports are produced and disseminated in various formats to relevant audiences</li> <li>Various MOUs/MOAs and other formalized agreements in place and up-to-date, as needed</li> <li>Access to ongoing training and technical assistance (TTA)</li> <li>Other programs, practices, and policies in place to address the problem</li> </ul>	<ul> <li>Community forums, networking, environmental scans, community mapping</li> </ul>	
the problem			

Some tools and resources to consider when assessing resources and assets: • C. Community Re	<ul> <li>Prevention Institute <u>Readiness Self-Assessment Tool</u> allows groups to evaluate their organizational capacity to engage in environmental/policy change</li> <li>Georgetown's National Center for Cultural Competence has <u>self- and organizational cultural competence assessments</u> to improve the cultural competence of staff and the organization</li> </ul>		
Readiness	Definition	Data Source	Notes
Community Readiness	The degree to which a community is ready to accept that a substance misuse problem exists and to take action to address the problem	<ul> <li>Key Informant Interviews (the <u>Tri-Ethnic</u> <u>Center for Prevention Research's</u> <u>Community Readiness Model</u> is suggested based on its strong research base and success across many different populations)</li> <li>Focus Groups</li> <li>Town Halls</li> </ul>	

This document was created by SAMHSA's Prevention Technology Transfer Center Network Data-Informed Decisions Workgroup. Contributing Network Workgroup members represented the New England, Northeast and Caribbean, Central East, South Southwest, Pacific Southwest, and the National American Indian and Alaska Native Prevention Technology Transfer Centers.

This work is supported by grant 5H79SP081006 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

