



Mentimeter Responses - Addressing SDOH Through Prevention Planning Webinar Great Lakes Prevention Technology Transfer Center - January 2022

The information below includes the responses to the Mentimeter questions that Nicole posed during the webinar, Addressing Social Determinants of Health Through Prevention Planning. These responses are the result of brainstorms and have not been reviewed or approved by the PTTC or Nicole.

Education access & Quality Domain
Responses
Be a bridge between providers and educators
evidence-based curriculum
Being more aware of the technology divide.
Do better assessments of the populations that need resources.
Provide materials in different languages and utilize translators
Reaching out to Boys and Girls clubs in low income area and provide support for prevention services
ACEs or SDOH workshops
Partner with schools to provide evidence-based/informed substance use prevention
I love the idea of consulting regularly with school admin about prevention related issues.
Work closely with head nurses
Look at promising practices.
Policy changes
Evidence-Based
More behavioral health education.
Offer alternative to suspension programs
Reduce stigma about lack of education
Use Readings levels and vocabulary that everyone understands
Reach out to our elected officials to help steer focus on a positive goal focused and well funded
Work with the local health teachers
positive alternative activities
Research more about children and how we can reach them best
We are able to work with youth after school through the after school program.
Mentorship program, parent liaison programs
Curriculum and lessons taught by native speakers to ESL groups in classrooms-
Start with educating the administration
We can attend school board meetings to be aware of conversations that are happening from
Help assess school climate as it relates to wellness.
Neighborhood mentors and tutors made up of a coalition of community members
Partnerships with Schools
Family support
increase mental health services integrated in the school setting to increase access.
I would like to say more homebased services, education and empowering families, the caregivers, understand the needs of children and families, however I do understand Covid does impact how we



Have people from the target community be involved in the development of educational materials
Support parents!
Build relationships with the staff at the schools and community stakeholders
Collaborate with administration on prevention and mental health resources
The organization that I am interning with has a prevention specialist in the local school. Not only is she there if students are in trouble but she provides youth campaign info to give students a place to
Include educators in grant opportunities
i want to join this meeting
By offering connections to resources that can provide information, developmental support, and
Including the students in how information is presented
Expanding high speed internet and making it affordable
provide evidence based substance prevention within schools.
Train teachers in strategies to manage emotional and behavioral challenges that interfere with
Do assessments to really know your community
Work with school counselors
Developing School Age Group Curriculum and implement in school health class and trained
Additional school staff who specialize in support services (social workers, therapists, pathologists,
Having community forums to understand what barriers exist that they can identify.
Seek the community's input. Nothing about them without them.
Utilizing the National CLAS (Culturally and Linguistically Appropriate Services) Standards
evidenced based. More online because our Teachers are stretched because of hurricanes, ice
Ensure that those we are seeking to attract into our educational institutions are part of the
Communication between schools and home, zoom not for everyone
Pull in mentor groups and educate the mentors
involve our youth more
food access - tower gardens
Schools need to provide narcan training to both teachers as well as students.
True collaboration. Where experts help lesson the load for schools.
Address ACES at a young age - educate school personnel on ACES
Collaborations with community partners
reduce embedded stigma in the school community
Know funds provided to districts and make suggestions for how to utilize, ie ESSER funds
Advocating for public school funding not based on the areas tax brackets
Understand the culture you are in.
Connect resources to meet local need
Listen to both educators and families to assist in closing the gaps that exist
My coalition is facilitating a book drive to give each child in grades pre-k through 6th grade a book of their choice. Along with the book they will take home info on the importance of positive childhood
provide mental health screenings and refer to treatment or other support
Be that partner providing assistance in prevention to the schools
Work with grassroots organizations and churches to get the word out.
Provide recommendations around based practices and offering support in application
I feel that for me it is first rebuilding the relationships with schools due to COVID hiatus!
partner with programs during fall, summer and spring break.



Connecting parents to administration working directly with their child
Provide education and advocacy for alternative consequences for getting caught with substances
Consider the way we are distributing the messaging/educational materials - is it really reaching the translation services and community health workers
to help our community complete forms
Seek community input about their needs. Nothing about them without them.
Ask more questions before brining in programs
policy changes=restorative practices
Aces and following through with treatment.
Trauma-Informed Staff
utilizing restorative justice when possible
Work with tribes to become part of the Indian Education Program federal programs so that youth get
Being able to reach children without implicit bias
Support for educators forTrauma caused by their students
Working with your intermediate school district
Using evidence-based programs and practices
Trauma informed schools
Help people to get the federal discounts on computers and broadband.
Bring SUD education into classroom
Culturally driven educational opportunities. Include lessons that students from different cultural
Use community health workers
Include educators and youth... Nothing about us without us
Implement "Handle with Care" program for students that may be going through a tough time after a traumatic event. Work with city social worker or health team to establish this
What if we teach about the more empirical impacts of substance use in science classes?
Creating youth coalitions!
Invite health care workers to meetings and outreach that we do so that they can see what we do and
Not allowing implicit bias to over power our jobs or the people we interact with
Offer training to support staff, assist with connections to enhance skills and services needed.
Curated and vetted lists of gender affirming, LGBTQ+ positive medical providers/ mental health
Food sovereignty
Health Care and Quality Domain
Responses
Training on substance related stigma as it relates to language.
Being more mindful of LGBTQ persons. IE, misgendering and deadnaming trans individuals.
Become a resource for screening. Provide resources and be a bridge for prevention services.
Share more about the work we do and how it connects to healthcare.
Policy: train providers to ask open ended questions not closed questions. Ex: do you smoke? Versus screening questions that may prompt more discussion
Provide peer recovery coaches in healthcare settings
Reach Individual with Non Judgmental Approach
Working to end the perceptions that it is "those people" instead of "our people." Putting the compassion and empathy back into the services we provide, support and promote.



Expanding insurance billing to better include prevention/promotion services to encourage healthcare setting to include those types of providers
Cultural competency training for doctors
don't forget to teach the basic information and don't assume recipients will have the background
Get hospitals to have take back Rx boxes on location
Breaking down the stigma of harm reduction and MAT
make sure screening tools are in place and follow through is done
ACE screenings
Providing Detera bags to Dr offices
While schools have been mentioned, I'm thinking about a community health center (& satellite clinics) located in schools. CHCs offer MH services within the CHC services. Add in SUD screenings, treatments, aim for holistic vision & advertise as such
motivational interviews
Education of healthcare providers, screen tools being implemented by healthcare providers/systems
Incorporate partnership with marginalized groups in your area to ID barriers they face & develop solutions that work for them
Implicit bias trainings for healthcare providers
encourage healthcare providers to co-prescribe naran with ALL opioids
A qualification/certificate process for providers to be affirming demographic populations: LGBTQ+
Make sure that the space is welcoming so folks feel comfortable to express health concerns. That includes things from forms and policies all the way to pictures on the walls.
Bridge the gap between those who are seen negatively through intersectionality lens and have grown resistant to health care because of mistrust
Training on the SAMHSA Strategic Prevention Framework and how to utilize the strategic planning process across the continuum of care
educate healthcare professionals about the need to include prevention education with clients
Training on the National CLAS Standards
Offer trainings for medical staff
cultural competency and implicit bias training
Engage in meetings with these agencies, develop equity meetings with the agencies you work with.
Increasing awareness and education in cultural competency. As a mixed race woman (Native American and Swedish) I have been refused proper care due to stereotypes
Help medicine change and address the disparities of how different diseases may affect different
Cultural Humility Training
Suggest that healthcare services go through a process that centers marginalized voices and looks at what services they provide, how they provide it, their educational and discharge materials, their
Get right in the middle of it all and knock on doors!
Affordable housing is such a national problem. Grants that fund affordable housing coupled with grocery stores, shopping, gardens and green space--livable communities
Clean air park initiatives
Public Artwork
Multigenerational housing, schools and nursing homes in created communities



community gardens, partner with 4-H to do gardening trainings, work with parks and rec to develop paths and outlets for our youth that does not take money to participate in, present life skills trainings in the community in the language they speak.

Photo voice

Help healthcare providers understand the culture and language of the communities/neighborhoods/populations they serve.

Teen Programs

Accessible "mini-gardens" integrated into the neighborhood.

Thinking outside the box, looking at things in a Trauma Informed Lens

Change the language, we are decriminalizing substance use help support that in your community, partner with treatment agencies to reduce barriers and develop true recovery communities.

Work with community partners, food pantry's, meal sites and schools to help develop food services for the community, local community gardens open to everyone. Work with youth to help them develop life skills and work readiness skills.

Neighborhood and Built Environment Domain

Responses

We can actually be present and listen to the needs of those who live there

Quality of Place

Involve community members in their coalitions

safe spaces that support wellness activities

beach/ park clean ups

Partnering with local police departments (ex: DEA drug take back days)

Reduce outlet density (alcohol, tobacco and marijuana retailers)

Alcohol/marijuana compliance checks

restorative justice practices

Making sure food deserts are no more

Consider partnering with neighborhood associations and ask what they need/ what would be helpful.

Drive through wellness checks

art therapy/community art

fund and support community meetings

Community coalitions with true community partnerships

increase Walkability, incorporate walking school buses and use the walking school bus as a time to have intentional conversations

Retailer education

smokefree environments

Going into the community because many of them feel that we do not care

Assess and make people aware of the built environment

More involvement in community events, market fairs, etc

Let the community members lead any initiatives. We should use our position to facilitate and help, not lead or take charge

Public spaces with ease of access to care and social workers.

Host youth coalition events in different communities to promote healthy lifestyle choices and fun

Collaborate with members of the community, provide spaces for events and community programs

Partner with faith based organizations



"farmers market" of providers
identifying communities with lack of parks and green spaces
Partner with other human service organizations whose offices are in those areas.
Educate poorer neighborhood store owners and vendors on how the widespread advertising of tobacco and alcohol in convenience stores lowers the perception of harm
Provide ways to be engage community members in planning services.
Target the number of vape and smoke shops. As well as billboard advertising for vape use.
Limit alcohol / tobacco coupons —companies heavily use these to get individuals to buy
planting trees, building playgrounds, and yes community gardens!
substance free green spaces
More involvement in the local church.
affordable housing
Policies to restrict proximity of alcohol/tobacco outlets from youth organizations and/or family friendly
literature in multiple languages- easy to read
Free public transportation
Investing in community funded recreational events, art walks, libraries, 60 mins, etc.
Revisit the long term plan for the neighborhood and involve local community residents
Youth groups can be made aware thru education and get them engaged.
Collect data on a neighborhood level, including qualitative data. Focus groups with people in neighborhoods that are disproportionately impacted and hear from them what problems exist and
Local coalitions could partner with or attend trainings offered by the National Community
Connect to community centers, drop in centers, and other community programs. Show up at events and provide resources there.
Rx or sharps drop boxes, advocate for lighting in high crime parks, promote crimestoppers or neighborhood groups, compliance checks, festival or advertising assessments, clean indoor air for
Provide healthy alternative activities for Friday/Saturday nights
Become present at neighborhood block organization meetings to hear from the community
Safe Routes to School Initiatives
Decrease police presence in poorer communities
Getting people preparing healthy food together
green space
Outreach and making your presence known in the community. Introducing yourself and the mission you are after in those communities to begin relationships and build trust.
Community coalitions utilizing the Strategic Prevention Framework
Signage on school community buildings that are nicotine free.
Build a youth friendly outdoor hangout space
Access to affordable, fresh food
work with towns and real estate agents
Partner with local police departments to provide bike give-a-ways to children
Organize neighborhood clean-ups
Farmers market would be great but have to make sure people in that community can pay for the food any way that they can without judgement (government assistance)
Photo voice
Farmers and faith based collaboration



Get right in the middle of it all and knock on doors!
Community conversations within neighborhood to bring what the people say they need
Mobile care units with Px services
Clean air park initiatives
Meet people who suffer from sud and oud where they are at. On the streets in those places where this community gathers
our asset map includes state parks, green spaces,
First, you have to try to understand people in that community first before trying to help them
Address family systems issues
Diversion programs
Social worker in the schools/jail/ courts to identify needed services to address root causes of issue. ACES education.
Hope Not Handcuffs Program
Re-entry services
Pay for treatment and recovery services through funding.
Do community events to raise funds



Social and Community Context Domain

Responses

restorative justice

Mentoring

Alternatives to suspension

use social norming campaigns in community

Ease of resource access

Space for social interaction (green spaces)

Partnering with drug courts to promote restorative justice ideas and innovations

Reduce stigma

sub education

Promote the simple protective factor of one caring adult! It takes a village. Additionally, shining the light on other protective factors that support health.

Mentorship of youth with familial patterns of substance use

Advocating for a living wage so parents can be home more (not working more than one job)

Incorporate restorative practices instead of punitive

Help people in jails transition into the community with social activities that might help replace substance free community events

Promoting where information can be accessed, we have a 211 system.

Education that addiction is a disease and not a choice

Work to stop the suspension from school to jail system

Open Forum Groups students and parents

Small settings and developing trust. Keeping our word. Suit up abc show up. Or people look for take away stigma by educating on addiction as illness

include using different ways to educate our youth

Understanding is the first response rather than discipline.

Parent classes: dont call them-dont market them as parent classes

Take a look at <https://www.frameworksinstitute.org/issues/>

Please help parents have conversations with their children regarding the content that they are viewing on popular steaming networks that glorify these lifestyles that we are trying to help them

BIG PROBLEM--and harder to change..... but when people leave the prison system, housing and jobs are nearly impossible to find. We need to change this!!!

Live by the mantra: community-driven and provider-supported

LISTEN - ASK - LISTEN - ASK

Group homes that allow those to find a job as well

Economic Stability Domain

Responses

Equitable pay for prevention specialist

Recovery housing advocacy

The location of affordable/low income housing creates a barrier to services and employment. Perhaps meeting with community planning boards?

Food Pantry

Whole food service in underserved population



Find and nurture local self-help networks
Work with chamber of commerce's to offer prevention or wellness services to companies/businesses
Blessing Box
Better pay for prevention specialists
Host food drives
Group homes that help them get a job
Helping promote thrift stores in local communities
we are an AmeriCorps site
incentive or make PS on the same level as CHES (certified health education specialists).
Work on finding/creating recovery-friendly employers
For the courts, diversion programs that team up with jobs in the area. We can be their advocates
engage funding sources (foundations, businesses, civic groups, etc) in the prevention efforts
BEFORE you need resources
Identify areas for improvement that require volunteer power rather than dollar power.
Get mental health folks talking to people working to address the impact of poverty (our suicide prevention coalition is starting to)
Justice Reform & Expungement of felonies
Increase understanding of prevention and impacts on economics
tie prevention efforts back to return on investments (ROI) and costs to the community
Mental health awareness trainings in workplace
help employers learn about, rather than being scared by, the value of hiring people in recovery
Involve small business in coalition work
2 gen approach... Programs at the workplace with their children
Federal Prevention Workforce will be very beneficial