



SRSLY CHELSEA

COALITION EVALUATION 2008 THRU 2018

Abstract

This report reviews substance use trends among youth in Chelsea, Michigan between 2008 and 2018 and examines the SRSLY Chelsea Coalition's contribution to improvements through analysis of trends in targeted intervening variables.

Report provided by Kori Bissot, KWB Strategies



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EXECUTIVE SUMMARY

SRSLY Chelsea is a coalition serving Chelsea, MI, founded in 2008 by a group of community leaders and concerned citizens. The coalition uses the Strategic Prevention Framework to plan and implement initiatives that engage youth, families, and community stakeholders in working together to prevent youth substance abuse.

The SRSLY coalition utilizes the Strategic Prevention Framework model to plan and implement efforts to reduce youth substance abuse. This framework requires a community to identify intervening variables and local community conditions that influence the use and consequences of youth substance use in that community.

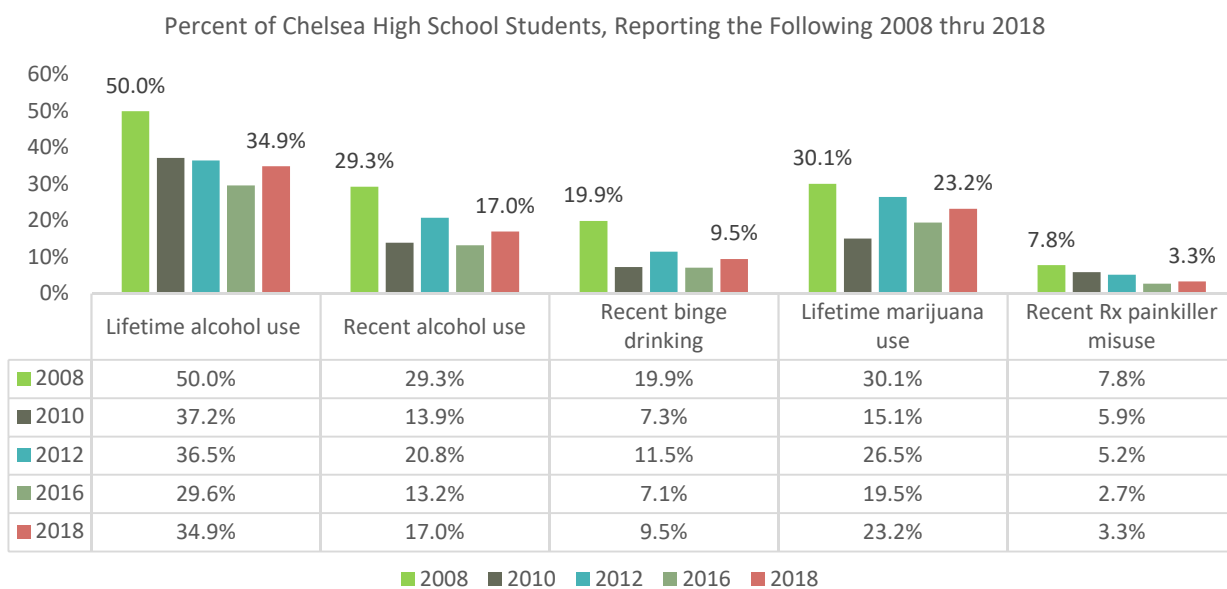
This report examines substance use trends among Chelsea youth and examines the coalition’s contribution to improvements through an understanding and analysis of trends in targeted intervening variables.

Between 2008 and 2018 SRSLY Chelsea implemented targeted efforts to reduce alcohol, marijuana and prescription drug misuse. During this time, use of each targeted drug decreased among Chelsea High School (HS) students, and alcohol use decreased for middle school, (MS) students. Among HS students, the following achievements were noted:

Alcohol: 30%↓ in lifetime use, 42%↓ in recent use (past 30 day), and 52%↓ in recent binge drinking (5+drinks). These reductions were greater than achieved state-wide.

Marijuana: 23%↓ in lifetime use, compared to a 17%↑ state-wide. Recent use remained stable (at 14%) while increasing 32%↑ statewide to 23.7%.

Prescription Drug Misuse: 58%↓ in recent use of painkillers without a prescription. Stimulant misuse remained stable at a low rate of between 3% and 4%.



The following page provides a brief synopsis of efforts targeting each intervening variable and a summary of findings for related data indicators. Unless otherwise noted, changes identified compare 2008 and 2018. When different timeframes are used it is due to changes in data collection.

Reduced Access to Substances: Efforts include alcohol compliance checks, community education on consequences of providing alcohol to minors, registry for parents to commit to providing a safe/substance free environment, promoting tip line to report underage parties, community education on storage and disposal for medications, and increased disposal options.

Findings: Decrease in students reporting it would be easy to get alcohol among (MS 30%↓ & HS 7%↓) and marijuana (MS 55%↓ & HS 8%↓). No data for prescription drugs.

Peer Disapproval of Use and Perceptions of Peer Use: Efforts include increased visibility of non-using peers, youth developed messaging for peers, and providing accurate data to correct the inaccurate belief among teens that most of their peers use substances.

Findings: 42%↓ in HS students reporting it is 'not wrong' for peers to drink alcohol, rates stable for MS students. Between 2008 and 2012, 43%↓ in MS students reporting it's 'not wrong' for peers to use marijuana, rates stable for HS students. Among HS students the rate reporting that most (50%+) of peers drank in past month decreased 8%, while those reporting most had used marijuana increased 33%.

Perception of Risk: Efforts include youth education, community awareness events, information dissemination on risks, and initiatives designed to educate parents and encourage them to communicate risks to their children.

Findings: Rates worsened for alcohol and marijuana among both MS and HS students. Between 2016 and 2018, perception of risk for Rx misuse worsened for MS and remained stable for HS. Students reporting their parents feel it is 'not wrong' for them to drink alcohol improved for MS (56%↓) and HS (44%↓); and worsened for marijuana among HS students.

Opportunities and Recognition for Prosocial Involvement: Efforts include youth leadership opportunities such as the SRSly Youth Steering Committee and Youth Empowerment Solutions (YES) program, youth participation in conferences, youth-led efforts to raise awareness and providing support to younger peers. Recognition efforts include awards, appreciation events, and supporting adults in recognizing and rewarding youth contributions.

Findings: Increase in students reporting they 'do things that make a difference at school' (MS 19%↑ & HS 18%↑) students; and that 'have chances to help decide things at school' improved among MS (26%↑) and HS (57%↑) students. Among MS students there was a 10%↑ in students reporting 'teachers notice when they do a good job and tell them' and that 'teachers praise their hard work'; Among HS students these rates worsened slightly.

Family Opportunities and Recognition for Prosocial Involvement: Efforts include the Guiding Good Choices Program, encouraging families to volunteer together, promoting family participation in fun events and activities hosted by the coalition.

Findings: Students reporting parents include them in decisions improved slightly for both MS and HS. Students reporting parents 'give them lots of chances to do fun things together' improved for MS (14%↑) and HS (12%↑).

Interaction with Prosocial Peers: Efforts include providing fun, substance free activities such as free weekly outdoor movies during summer, parties during peak drinking holidays, and other events for youth with specific interests such as gaming or sports.

Findings: Increase in students reporting at least one close friend who made a commitment to being drug free among both MS (5%↑) and HS (9%↑).

INTRODUCTION

About SRSLY Chelsea:

SRSLY was founded in 2008 by a group of community leaders and concerned citizens. The Chelsea community was struggling with youth substance abuse, despite having introduced a number of programs and interventions. School-based programs were already teaching students about the negative consequences of substance abuse, so SRSLY was developed as a positive compliment to the school programs. As a community coalition, SRSLY could implement community-wide strategies so that parents and other adults could help address the problem.

The SRSLY coalition uses a model of youth and family engagement to partner community organizations and residents in the development and implementation of local solutions to address issues important to youth. Efforts seek to support healthy youth choices that avoid substance abuse. Using the risk and protective factor model, this coalition works to address overarching protective factors that are known to reduce youth substance use, partnered with targeted substance-specific interventions designed to change community norms and reduce access to specific substance.

Between 2010 and 2018 the coalition focused efforts on reducing youth use of alcohol, marijuana and misuse of prescription drugs. During this time, efforts to increase protective factors worked to enhance pro-social opportunities for youth within their family, school, and among their peers. The impact of these efforts does not affect specific substances but rather works to reduce use of all substances.

Methodology and Data Sources:

To examine the coalition's contribution to improvement in youth substance use rates, the researcher compiled a summary of coalition activities between 2008 and 2018 to develop an evaluation logic model representing the coalition's theory of change. This framework provides an analysis of how the coalition's activities and interventions relate to intervening variables which increase or decrease the likelihood of youth substance use in a community. To evaluate the cumulative effect of a coalition's efforts, the evaluator collected information about efforts implemented targeting the prioritized intervening variables risk and protective factors. The purpose of this is to examine whether there were improvements in the issues targeted by efforts in order to assess how those improvements relate to corresponding reductions in youth substance use. (Refer to Attachment A for the evaluation logic model).

It should be noted that it is not possible to control for external factors that would also affect youth substance use rates. These external factors can include such things as additional programs or efforts undertaken in the community that are not a part of the coalition's purview as well as environmental changes such as changing laws and regulation. Throughout the report, external factors have been identified as applicable for those factors of which the evaluator was made aware.

Data used to analyze trends came primarily from the Michigan Profile for Healthy Youth (MIPHY) for the Chelsea School District from 2008 through 2018, collected every other year except for 2014. This data source was selected due to the consistency of collection and large sample size throughout the time period being reviewed. The MIPHY Survey is conducted by the Michigan Department of Education and provides county and district-level reports for middle school (7th grade) and high school (9th and 11th grades). Because state-level data is not provided for the MIPHY, county wide data MIPHY has been used for comparison when applicable. For state-level comparison data the Youth Risk Behavior Survey (YRBS) conducted by the Center for Disease Control was used to provide comparison data for rates in substance

use when comparable data was available. The YRBS surveys high school students in grades 9th through 12th in the year prior to MIPHY collection.

Although the coalition targets initiatives for both middle and high school age ranges, this evaluation relies on high school trends for much of the trend analysis. Middle school (MS) trends are included in tables and discussed within the analysis narrative when appropriate. The focus on high school (HS) students for analysis of outcomes has been done for the following reasons: 1) the sample size for HS is larger making indicators less susceptible to meaningless variation, 2) the rate of MS students reporting risk behaviors is low making small changes representing only a small handful of students cause exaggerated variation in trends, and 3) the long-term impact of efforts targeting middle school students will be reflected in the high school sample as they were middle school students during the time period being reviewed.

Using This Report:

Throughout this report, arrows will identify whether a trend has been increasing or decreasing. If the indicator has moved in the undesired direction the arrow will present in red font, (↑) to easily allow identification of indicators with trends in the wrong direction. If only two years of data is available, the arrow identifying whether it is increasing or decreasing is provided but the amount of change will not be provided due to the instability of trend data using less than three data points.

In addition, throughout the report the following icons have been used to note areas of success or concern:



Data with trends that are showing substantial worsening and should be noted for monitoring in the coming years.



Indicates data showing substantial, continual improvement indicating a potential area of coalition success.

ALCOHOL AND OTHER DRUG USE TRENDS 2008 - 2018

This section provides an overview of substance use trends among middle school (MS) and high school (HS) students for substances targeted for reduction by the SRSly Chelsea Coalition. Data reviewed comes from the Michigan Profile for Healthy Youth (MIPHY) for the Chelsea School District between 2008 and 2018.

Trend Detail:

Table 1

ALCOHOL USE		2008	2010	2012	2016	2018	% Chx
Lifetime use	MS	11.3%	9.2%	2.9%	--	--	--
	HS	50.0%	37.2%	36.5%	29.6%	34.9%	↓30%
Recent use	MS	4.6%	2.8%	1.1%	1.8%	1.9%	↓59%
	HS	29.3%	13.9%	20.8%	13.2%	17.0%	↓42%
Ever been drunk	MS	3.0%	2.2%	0.6%	--	--	--
	HS	37.5%	21.1%	24.9%	15.3%	21.9%	↓42%
Recent binge drinking	MS	3.6%	1.1%	0.6%	0.0%	0.0%	↓100%
	HS	19.9%	7.3%	11.5%	7.1%	9.5%	↓52%
MARIJUANA USE		2008	2010	2012	2016	2018	% Chx
Ever used marijuana	MS	1.5%	1.1%	0.0%	--	--	--
	HS	30.1%	15.1%	26.5%	19.5%	23.2%	↓23%
Used marijuana in past 30 days	MS	0.5%	1.1%	0.0%	0.0%	0.6%	~
	HS	13.6%	7.8%	16.4%	13.6%	13.7%	~
PRESCRIPTION (Rx) DRUG MISUSE (w/out a prescription)		2008	2010	2012	2016	2018	% Chx
Misused a Rx painkiller in past 30 days	MS	--	--	--	1.8%	4.3%	↑
	HS	7.8%	5.9%	5.2%	2.7%	3.3%	↓58%
Rx Stimulant misuse in past 30 days	MS	--	--	--	0.6%	3.6%	↑
	HS	3.3%	3.5%	4.9%	4.1%	3.5%	~
Misused <u>any</u> Rx in past 30 days	MS	--	--	--	2.3%	6.0%	↑
	HS	--	--	--	5.2%	4.9%	↓6%

Analysis of Trends:

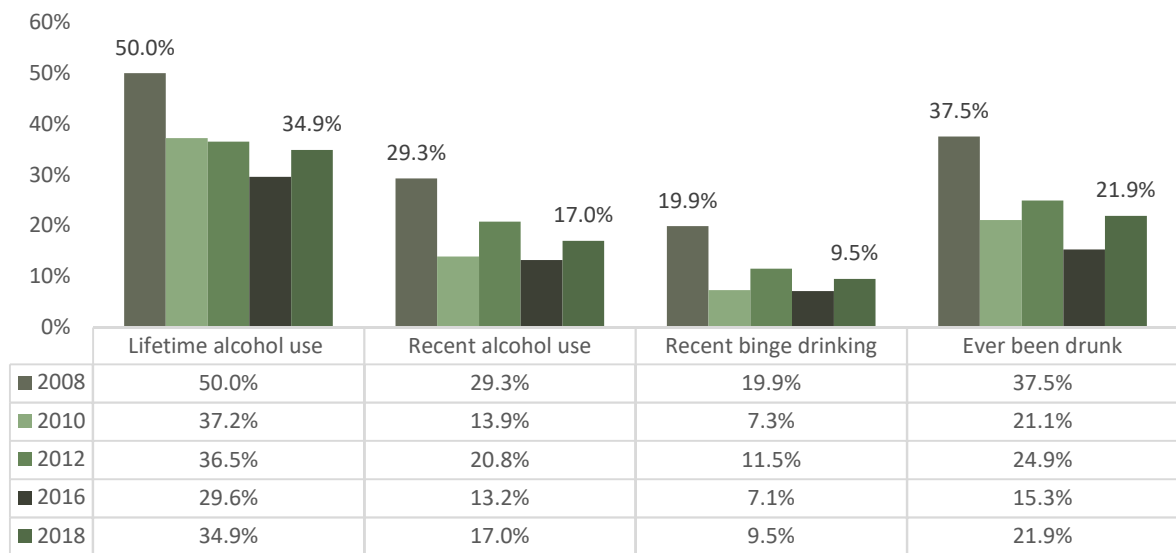
Between 2008 and 2018, SRSly Chelsea implemented targeted efforts to reduce alcohol, marijuana and prescription drug. During this time, use of each targeted drug decreased among High School (HS) students; alcohol use decreased for Middle School (MS) students.



A. ALCOHOL: As shown in Figure 1, rates of youth alcohol use decreased for each indicator continually between 2008 and 2016; with most indicators showing the greatest reductions between 2008 and 2010. For HS students these 2010 decreases were sustained with minor variation due to small increases occurring in 2012 and again in 2018. Among MS students these indicators mostly continued to improve with very low rates maintained, detailed in Table 1.

Figure 1

Alcohol Use Among Chelsea High School Students, 10-Year Trend



Between 2008 and 2018, lifetime alcohol use among HS students decreased 30% (from 50.0% to 34.9%) and recent use of alcohol (past 30 days) decreased 42% (from 29.3% to 17.0%). Although rates have also declined state-wide, Chelsea has achieved greater reductions with Michigan seeing a 10.5% decrease in lifetime use, and a 20.0% reduction in recent use from 2009 to 2017. Rates in Chelsea are also much lower than state rates with 34.9% of Chelsea HS students reporting lifetime use of alcohol compared to 61.6% statewide, and 17.0% reporting current use compared to 29.6% state-wide in 2017.

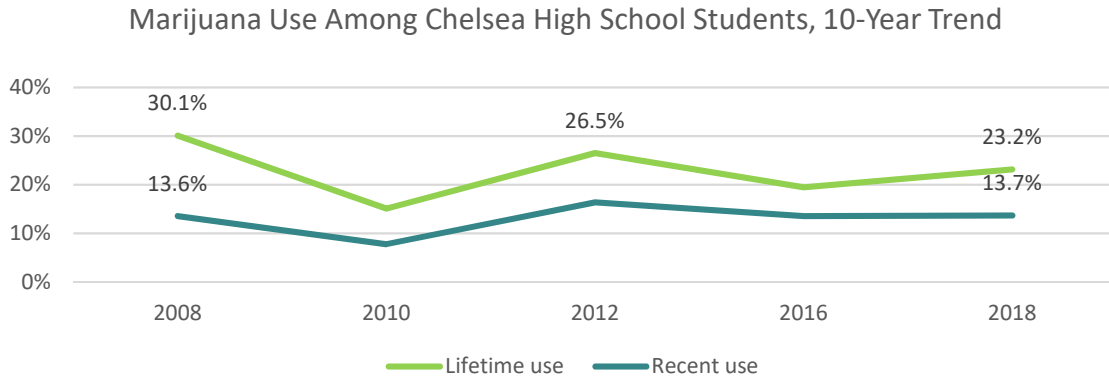
High-risk drinking has also declined among HS students with a 52% decrease in HS students reporting recent binge drinking (from 19.9% to 9.5%), and a lower rate than the state-wide rate of 13.2% in 2017. HS students reporting they have been drunk before the age of 13 has decreased 93% (from 4.5% to 0.3%) between 2008 and 2018. The average age of first alcohol use improved slightly, from 14.6 to 14.9.

Use of alcohol has also decreased among middle school students with a 59% reduction in 7th grade students reporting recent use (from 4.6% to 1.9%) between 2010 and 2018, a 74%

reduction in MS students reporting having ever used alcohol between 2008 and 2012 (from 11.3% to 2.9%), and no MS students reported recent binge drinking in 2018, compared to 3.6% in 2008.

- B. **MARIJUANA:** As shown in Figure 2, between 2008 and 2018, lifetime marijuana use among HS students decreased 23% (from 30.1% to 23.2%) and recent use has remained relatively stable ranging from a low of 7.8% in 2010 to a high of 16.4% in 2012.

Figure 2

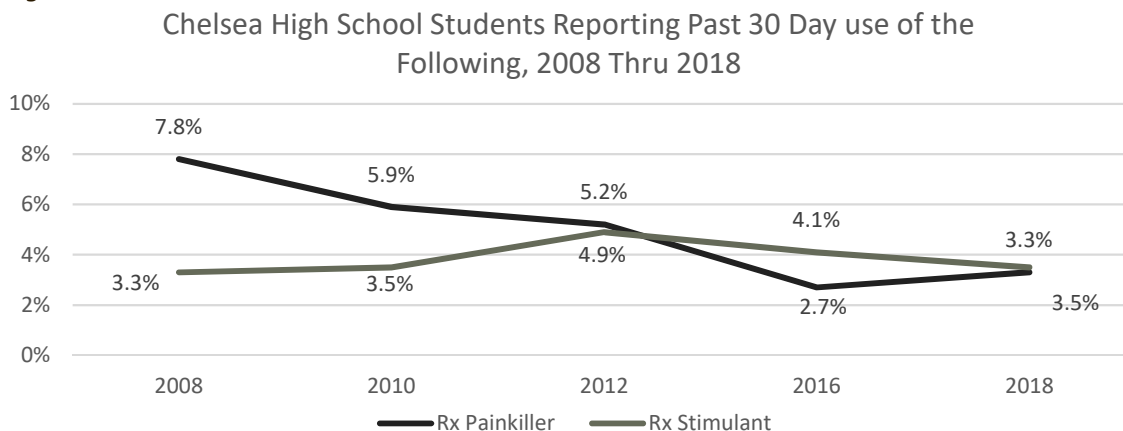


During this time period, marijuana use among MS students remained extremely low with only 1.5% reporting having ever used marijuana in 2008 and decreasing to 0% in 2012; the last year this data was available. Recent use among MS students has remained consistently low at 1% or less.

In light of legislative changes in 2008 that allow the distribution and use of marijuana for medicinal purposes, the trends for marijuana use during this time-period are encouraging. It was anticipated that this change in legislation would result in increased marijuana access to youth and decreased perceptions of risks, leading to an increase in marijuana use. Where Chelsea saw decreasing rates of lifetime use and relatively stable rates of recent marijuana use, state-wide there was a 13.4% increase in lifetime marijuana use (from 36.5% to 41.4%), and a 14.5% increase in recent marijuana use (from 20.7% to 23.7%).

- C. **PRESCRIPTION DRUGS:** As shown in Figure 3, prescription drug misuse decreased for prescription painkillers and remains stable for prescription stimulants.

Figure 3





Between 2008 and 2018 there was a 58% decrease in HS students reporting recent misuse of a painkiller (from 7.8% to 3.3%), while use of a prescription stimulant without a prescription remained relatively stable.

Among MS students, trends are more difficult to summarize due to changes in data collected by the MIPHY. Between 2008 and 2012, MIPHY collected only lifetime use of prescription drugs for MS students. During this period, Chelsea MS students reported relatively stable rates of prescription drug misuse of between 13 and 15% and decreasing rates of prescription stimulant misuse (from 9.5% to 5.5%). Starting in 2016, MIPHY began collecting recent use for these substances from MS students and between 2016 and 2018 rates worsened for each; from 1.8% to 4.3% for painkillers, and 0.6% to 3.6% for stimulants.



Beginning in 2016 a new question was included which asks whether a student has used 'any prescription drug, including a painkiller, in the past 30 days'. With only 2 years of survey data to compare, trends should be used with caution. However, among MS students there was a substantial increase in students reporting misuse of 'any' prescription drug between 2016 and 2018 (from 2.3% to 6.0%). It is recommended that this indicator be monitored in future years to determine whether or not this is a growing problem.

TARGETED INTERVENING VARIABLES, TRENDS 2008 THROUGH 2018

The SRSLY coalition utilizes the Strategic Prevention Framework model to plan and implement efforts to reduce youth substance abuse. This framework requires a community to identify local issues in a community that increase the likelihood of youth initiating substance use. These local issues, referred to as intervening variables, are factors that have been found to influence the use and consequences of youth substance use in the community.

Intervening variables identified and targeted by the SRSLY coalition include risk factors to reduce, as well as protective factors to enhance. This framework provides a theory of change to guide coalition efforts and to allow for evaluation by monitoring changes in data indicators for each intervening variable and an understanding of how changes in these intervening variables relates to changes in youth substance use.ⁱ

For an overview of the SRSLY Coalition's theory of change and a snapshot of interventions that have been implemented between 2008 and 2018 to affect change in the intervening variables, please refer to the logic model provided in Attachment A.

Intervening variables targeted by the SRSLY Chelsea coalition include:

- Reduced Youth Access to Substances
- Increased Perception of Peer Disapproval & Perceptions of Peer Use (Norms)
- Increased Perception of Risk for Substance Use
- Parental Attitudes Toward Substance Use
- Protective factors targeted by the SRSLY Chelsea coalition include:
 - **Interaction with Prosocial Peers:** Young people who associate with peers who engage in prosocial behavior are more protected from engaging in antisocial behavior and substance use.
 - **Family Opportunities for Prosocial Involvement:** Young people who are exposed to more opportunities to participate meaningfully in the responsibilities and activities of the family are less likely to engage in drug use and other problem behaviors.
 - **School Opportunities for Prosocial Involvement:** When young people are given more opportunities to participate meaningfully in important activities at school, they are less likely to engage in drug use and other problem behaviors.
 - **School Rewards for Prosocial Involvement:** When young people are recognized and rewarded for their contributions at school, they are less likely to be involved in substance use and other problem behaviors.

For more detail regarding coalition activities targeting each of these intervening variables, refer to the detailed summary of interventions and activities provided in Attachment B.

I. Risk Factor Analysis

Trend Detail:

Table 2

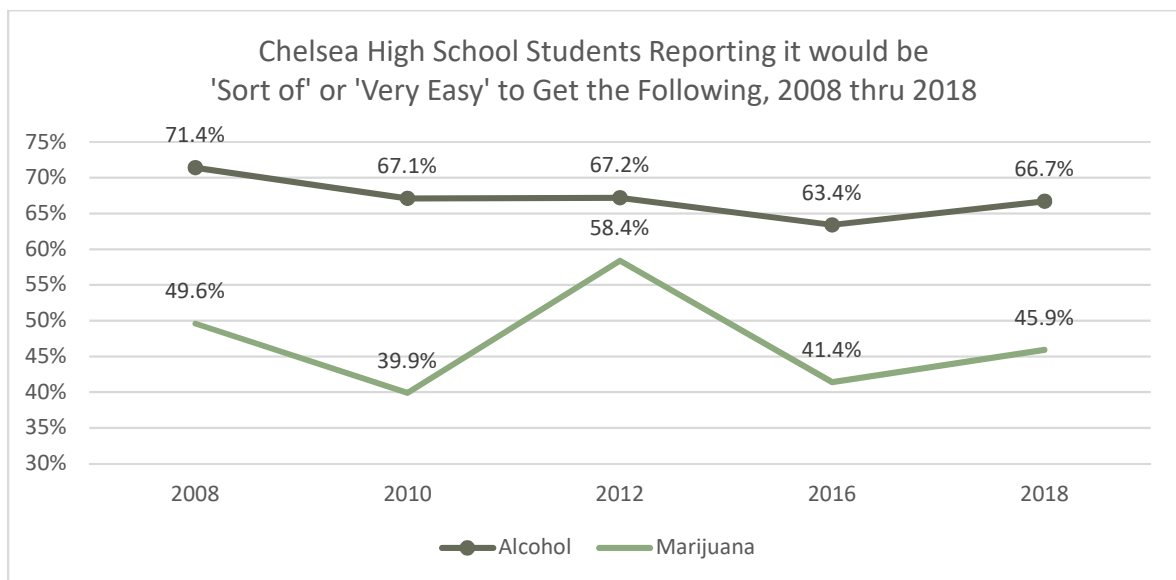
Easy access indicators:		2008	2010	2012	2016	2018	% Chx
Would be sort of/very easy to get alcohol	MS	39.0%	35.4%	32.4%	21.0%	27.4%	↓30%
	HS	71.4%	67.1%	67.2%	63.4%	66.7%	↓7%
Would be sort of/very easy to get marijuana	MS	10.8%	10.2%	6.9%	1.2%	4.9%	↓55%
	HS	49.6%	39.9%	58.4%	41.4%	45.9%	↓ 8%
Disapproval of Peer Use		2008	2010	2012	2016	2018	% Chx
Feel it would be 'not wrong' or 'a little bit wrong' for someone in their grade to have 1-2 drinks nearly everyday	MS	11.2%	6.9%	2.8%	7.6%	12.6%	~
	HS	46.3%	28.9%	33.0%	19.6%	27.1%	↓42%
Feel it would be not wrong/a little bit wrong for someone in their grade to use marijuana	MS	5.1%	5.1%	2.9%	--	--	↓43%
	HS	30.9%	21.6%	30.6%	--	--	~
Peer Disapproval of Use		2008	2010	2012	2016	2018	% Chx
Friends feel it is not wrong/a little bit wrong for them to have 1-2 drinks nearly everyday	MS	--	--	--	3.0%	7.0%	↑
	HS	--	--	--	15.0%	23.0%	↑
Friends feel it is not wrong/a little bit wrong for them to use marijuana	MS	--	--	--	2.4%	5.4%	↑
	HS	--	--	--	32.2%	35.3%	↑
Friends feel it is not wrong/a little bit wrong for them to use a Rx drug w/out a Rx	MS	--	--	--	3.6%	5.5%	↑
	HS	--	--	--	12.1%	10.5%	↓
Norms Favorable to Use Indicators		2008	2010	2012	2016	2018	% Chx
Report that most (50%+) of students in their grade used alcohol in past 30 days	HS	--	36.8%	35.0%	29.8%	33.8%	↓8%
Report that most (50%+) of students in their grade used marijuana in past 30 days	HS	--	21.2%	36.8%	32.2%	28.3%	↑33%
Perception of Risk Indicators:		2008	2010	2012	2016	2018	% Chx
Percent of students who report drinking 1 or 2 drinks nearly every day is no/slight risk	MS	22.0%	18.5%	16.9%	25.4%	38.1%	↑21%
	HS	24.9%	23.6%	23.7%	24.9%	30.3%	↑7%
Percent of students who report drinking 5 or more drinks 1-2x/weekend is no/slight risk	MS	--	--	--	20.1%	24.0%	↑
	HS	--	--	--	14.0%	23.5%	↑
Report regular use of marijuana no/slight risk	MS	12.5%	19.9%	16.3%	24.3%	31.7%	↑154%
	HS	23.8%	22.2%	33.3%	44.0%	52.1%	↑119%
Percent of students who report using a Rx drug w/o a Rx is no/slight risk	MS	--	--	--	14.0%	21.1%	↑
	HS	--	--	--	13.7%	14.7%	↑

Parental Attitudes		2008	2010	2012	2016	2018	% Chx
Report their parents, or other adults in their family, have never discussed expectations around alcohol/other drugs	MS	--	--	--	35.9%	26.0%	↓
	HS	--	--	--	13.5%	17.3%	↑
Report their parents feel it is 'not wrong' or 'a little bit wrong' for them to drink alcohol	MS	4.5%	3.4%	2.3%	1.2%	2.0%	↓56%
	HS	13.5%	12.8%	11.9%	2.9%	7.6%	↓44%
Parents feel it 'not wrong' or 'a little bit wrong' for them to use marijuana	MS	0.5%	1.1%	1.1%	1.2%	1.8%	↑260%
	HS	--	5.1%	6.8%	5.3%	10.1%	↑98%
Parents feel it is 'not wrong' or 'a little bit wrong' for them to use Rx drug w/o Rx	MS	--	--	--	1.2%	4.7%	↑
	HS	--	--	--	3.0%	3.1%	~

Analysis:

A. Reduced Access to Substances: Efforts to reduce youth access to substances targeted alcohol and prescription drugs. Efforts to reduce access to alcohol included compliance checks to reduce retail access, community education about the consequences of providing to minors, and a registry for parents to communicate their commitment to providing a safe/substance free environment to other parents, and promoting the ability to report planned underage parties to law enforcement. To reduce inappropriate access to prescription drugs the coalition provided community education about the importance of appropriate storage and disposal and increased opportunities for residences to dispose of medications.

Figure 4



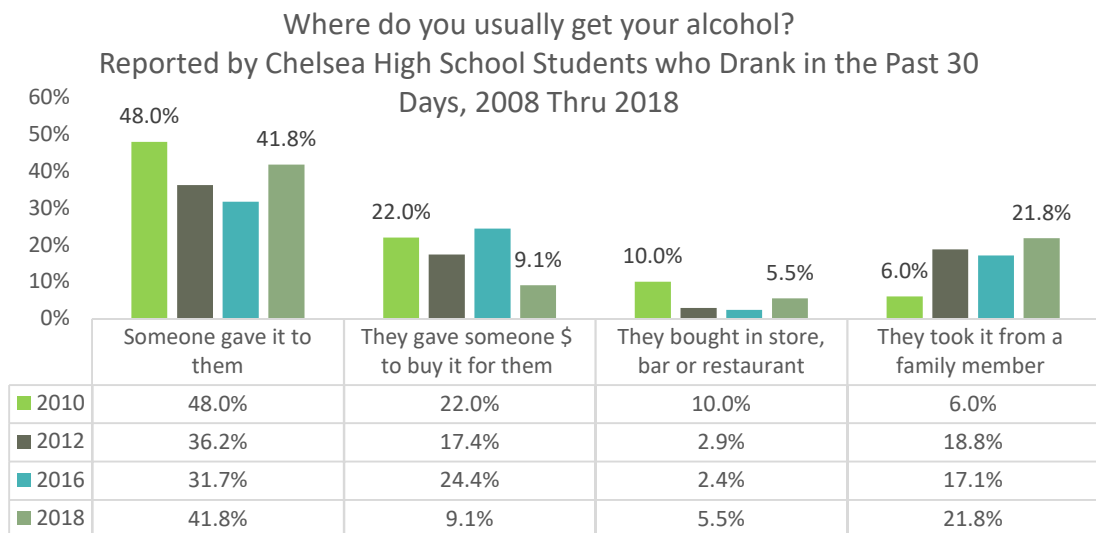
Findings:

- i. **Alcohol:** Between 2008 and 2018, youth reporting that it would be ‘sort of’ or ‘very easy’ to get alcohol decreased 30% for MS students (from 39.0% to 29.7%), and 7% for HS students (from 71.4% to 66.7%).

Efforts to reduce access to alcohol focused on youth getting alcohol from adults who provide or purchase it for them and by purchasing it. As shown in Figure 5, each reported source of access showed improvement between 2010 and 2018 with a 58% decrease in students reporting they gave an adult money to buy for them (from 22% to 9.1%), a 13% decrease in students reporting that they usually get their alcohol by someone ‘giving it to them’ (from 48.0% to 41.8%), and a 45% decrease in students reporting they usually get their alcohol by purchasing it at a store or at a bar or restaurant.

- ⚠️ Corresponding increases in recent drinkers reporting they usually got alcohol by ‘taking it from a family member’ increased from 6.0% to 21.8% and is now the second most reported source of access to alcohol among students in Chelsea.

Figure 5



- ii. **Prescription Drugs:** Efforts to reduce teen access to prescription drugs include the establishment of Big Red Barrel drop-off locations in the community, Drug Take-back days, and educational mailers to parents on teen Rx misuse and the importance of appropriate storage, monitoring and disposal in the home to prevent inappropriate youth access to prescription medications.

MIPHY does not collect data for easy access to prescription drugs. In 2016, a supplemental survey was conducted and found that 43% of Chelsea HS students report it would be easy to get a prescription drug without a prescription. However, more than 870 pounds of medication have been collected as of 2018 indicating that the coalitions efforts to increase proper disposal of medication is likely to be reducing inappropriate access to medications in homes.

B. Peer Disapproval of Use and Perceptions of Peer Use: Efforts to increase peer disapproval worked to increase visibility of non-using peers, youth developed messaging for their peers, and providing accurate data to correct the inaccurate belief that most teens are using substances.

Findings: Trends in peer disapproval are challenging to interpret due to changing data indicators collected by the MIPHY survey. Original data indicators collected information about whether students felt it was ‘wrong’ for their peers to use substances. Beginning in 2016, MIPHY questions changed to ask about whether students felt their friends feel it would be wrong.



- i. **Disapproval of Peer Use:** For the original indicator, between 2008 and 2018, HS students reporting it would be ‘not wrong’ or ‘only a little bit wrong’ for someone in their grade to drink one or two drinks nearly every day improved 42% (from 43.3% to 27.1%). Between 2008 and 2016, the rate of MS students reporting the same improved slightly (from 11.2% to 7.6%) but increased in 2018 to a high of 12.6%.

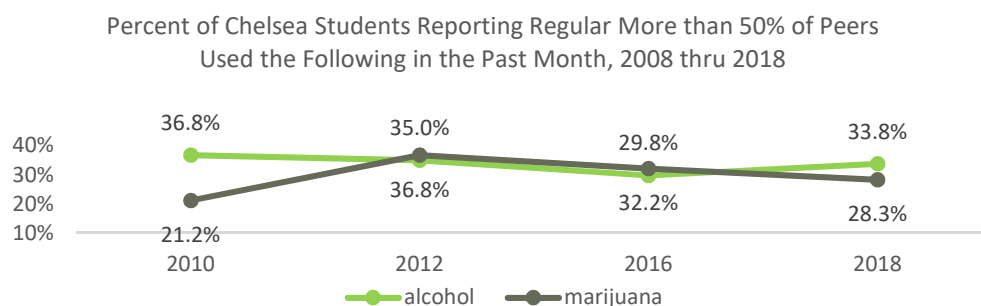
For marijuana between 2008 and 2012 MS students reporting it was ‘not wrong’ for someone in their grade to use marijuana, improved (from 5.1% to 2.9%), and rates among HS students remained stable at 31%. MIPHY discontinued collection of this indicator after 2012 for marijuana and is not available for prescription drug misuse.



- ii. **Peer Disapproval of Use:** Beginning in 2016, new indicators collected whether students report their friends would feel it is ‘wrong’ for them to use these substances. In 2016, a very low rate of MS students report that their friends would feel it is ‘not wrong’ for them to use alcohol, marijuana or prescription drugs, worsening slightly for each indicator in 2018. Among HS students rates worsened for alcohol use (from 15% to 23%), marijuana (32.2% to 35.3%) and prescription drugs (2.4% to 5.4%).

- iii. **Perceptions of Peer Use:** Between 2010 and 2018, the rate of HS students inaccurately reporting that more than half of their peers had drunk in the past month improved through 2016 and worsened slightly in 2018. Overall there was an 8% decrease in students reporting this inaccurate belief (from 36.8% to 33.8%). For marijuana during this time period, HS students became more likely to report that most of their peers had used marijuana with a substantial increase between 2010 and 2012 and then decreasing continually between 2012 and 2018. Given that efforts to pass recreational marijuana legislation in the state of Michigan were active during this time frame the decrease between 2012 and 2018 appear to indicate successful efforts to offset these norms for marijuana.

Figure 6

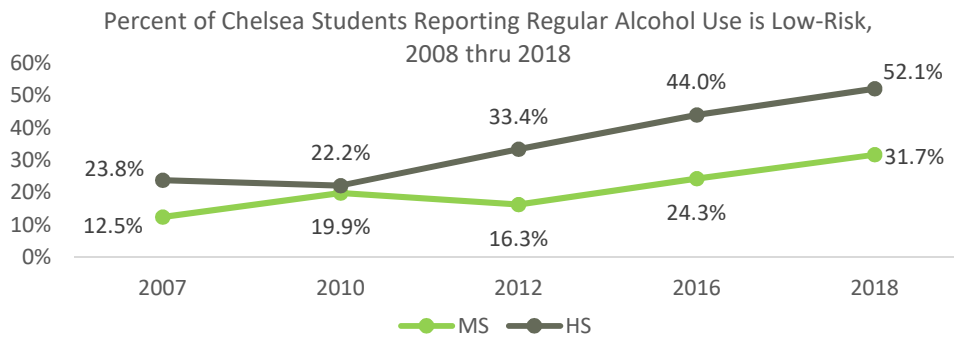


C. Perception of Risk: Efforts to increase youth perception of the risks and consequences of using substances include education for youth on the risks of use and community awareness events and information dissemination to raise awareness of the negative impact of youth substance use. Efforts targeting parental attitudes toward use would also positively impact perceptions of risk.

Findings: Since 2012, there has been an increase in students reporting that alcohol, marijuana and prescription drug misuse are low-risk for both MS and HS students.

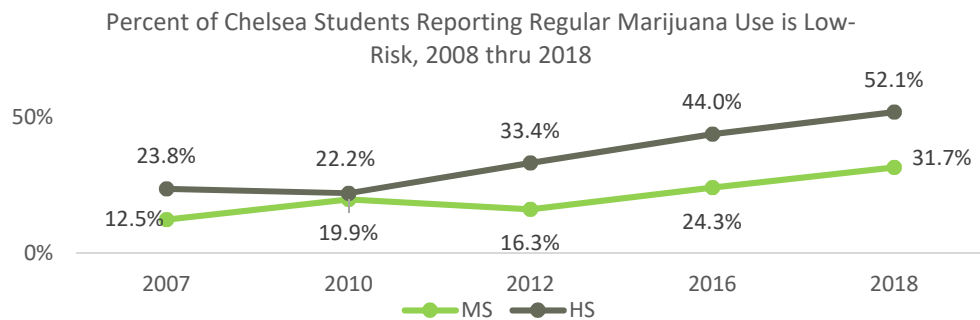
- ⚠ i. **Alcohol:** Among MS students the percent report that drinking alcohol regularly is ‘low-risk’ improved continually between 2008 and 2012 (from 22.0% to 16.9%) and then increased steadily through 2018 to a high of 38.1%. Among HS students the rate remained relatively stable through 2016 and then increased to a high of 30.3% in 2018. In 2016, MIPHY began collecting perception of risk for binge drinking and students reporting binge drinking is low-risk worsened in 2018 for both MS and HS.

Figure 7



- ⚠ ii. **Marijuana:** Between 2008 and 2018, the percent of students reporting that smoking marijuana regularly is low-risk worsened among MS students (from 12.5% to 31.7%) and among HS students (from 23.8% to 52.1%). The decrease in perception of risk were mirrored at the county level.

Figure 8

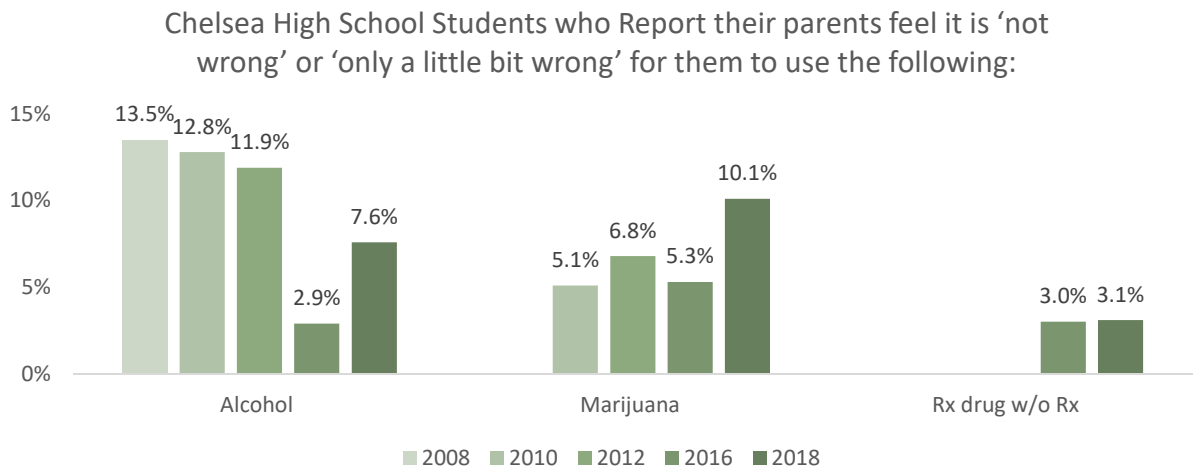


- ⚠ iii. **Prescription Drug Misuse:** Data for perception of risk was not collected prior to 2016 making assessment of impact difficult. Between 2016 and 2018, the percent of MS students reporting that use of a prescription drug without a prescription was ‘low-risk’ worsened (from 14.0% to 21.1%). Among HS students this rate remained relatively stable at 14%.

D. Parental Attitudes: Efforts to improve parental attitudes strived to educate parents on youth substance use and provide guidance on how to talk to their kids about the risks.

Findings: Overall high school student beliefs regarding their parents’ attitudes toward alcohol showed improvement while marijuana and prescription drug misuse remained relatively stable. Among MS students, the percent reporting their parents feel it is ‘not wrong’ for them to use these drugs remains very low, with rates worsening in 2018. (See Figure 9 for HS)

Figure 9



- i. **Alcohol:** Very few students report their parents feel it is ‘not wrong’ or ‘only a little bit wrong’ for them to drink alcohol; improving among MS students (from 4.5% to 2.0%) and decreasing 44% among HS students (from 13.5% to 7.6%).
- ⚠ ii. **Marijuana:** Chelsea MS students consistently report that their parents feel it is ‘wrong’ for them to use marijuana with less than 2% reporting their parents feel it is ‘not wrong’ in any given year. Among HS students, few students report their parents feel it is ‘not wrong’ but the rate doubled between 2016 and 2018 (from 5.3% to 10.1%) indicating that this should be monitored in the coming years.
- iii. **Prescription Drug Misuse:** This data indicator was added in 2016 and a very low rate of MS or HS students report that their parents would feel it is ‘not wrong’ for them to use a prescription drug without a prescription. Rates worsened for MS students between 2016 and 2018 (from 1.2% to 4.7%) and remained stable for HS students at 3%.
- iv. **Parental Communication about Drugs:** A new measure added in 2016 asked students whether a parent or other adult in their family had ever discussed their expectations around alcohol and other drugs. Between 2016 and 2018, the rate of MS students reporting that their parents had never done so improved for MS students (from 35.9% to 26.0%) and worsened slightly for HS students (from 13.5% to 17.3%).

II. Protective Factors

Trend Detail:

Table 3

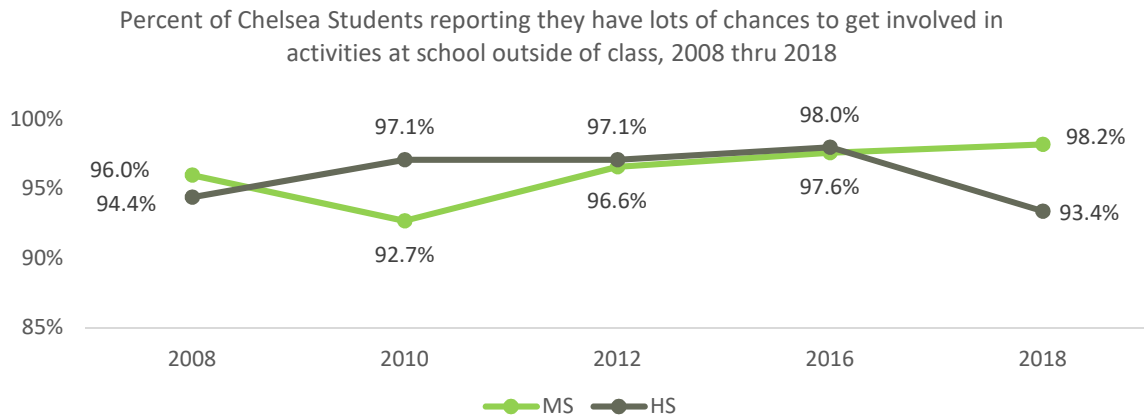
School Opportunities and Recognition for Prosocial Involvement		2008	2010	2012	2016	2018	% Chx
Do things that make a difference at school	MS	37.7%	41.6%	39.7%	49.1%	44.8%	↑ 19%
	HS	30.8%	32.3%	40.2%	37.6%	36.4%	↑ 18%
There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class	MS	96.0%	92.7%	96.6%	97.6%	98.2%	↑ 2%
	HS	94.4%	97.1%	97.1%	98.0%	93.4%	~
Teachers notice/tell good job	MS	65.3%	57.6%	62.1%	75.6%	70.7%	↑ 10%
	HS	67.3%	62.8%	67.5%	67.3%	61.5%	↓ 9%
Teachers praise hard work	MS	46.7%	44.8%	40.5%	56.9%	57.0%	↑ 10%
	HS	52.8%	49.6%	52.0%	53.9%	49.6%	↓ 1%
Family Opportunities and Recognition for Prosocial Involvement		2008	2010	2012	2016	2018	% Chx
Parents include kids in decisions	MS	69.9%	70.3%	68.0%	74.7%	72.7%	↑ 4%
	HS	64.1%	65.4%	73.2%	69.1%	68.1%	↑ 6%
Parents give chances fun things	MS	78.4%	83.0%	78.4%	85.8%	89.1%	↑ 14%
	HS	72.2%	71.4%	78.7%	79.3%	80.8%	↑ 12%
Parents notice/tell good job	MS	78.5%	82.7%	75.9%	79.3%	81.8%	↑ 4%
	HS	82.0%	87.1%	75.7%	72.7%	69.9%	↓ 15%
Parents say they are proud	MS	74.0%	80.8%	74.4%	76.9%	80.7%	↑ 9%
	HS	67.9%	67.7%	73.4%	67.4%	63.7%	↓ 6%
Interaction with Prosocial peers:		2008	2010	2012	2016	2018	% Chx
At least one close friend made a commitment to be drug-free	MS	83.0%	79.5%	86.8%	81.6%	87.0%	↑ 5%
	HS	--	83.9%	78.3%	78.2%	91.5%	↑ 9%
At least one close friend participated in clubs/ organizations or activities at school	MS	94.3%	93.2%	92.0%	95.2%	96.9%	↑ 3%
	HS	92.5%	95.5%	95.1%	93.9%	91.5%	~

A. Opportunities and Recognition for Prosocial Involvement: Efforts to improve prosocial involvement include: providing youth leadership opportunities, including the SRSLY Youth Steering Committee taking active leadership roles and implementing projects, the Youth Empowerment Solutions (YES) program to provide MS students with training and an opportunity to develop community change projects, supporting youth participation in conferences and trainings, and youth-led efforts to raise awareness of youth substance use in the community and to provide support to younger peers. Efforts to increase recognition for youth working to make a difference include coalition awards and appreciation events for volunteers going above and beyond and supporting adults in the school in community to identify and provide encouragement for youth.

Although these are not school-led initiatives they are coordinated closely with the school and many occur within the school. Because of this, school-connection, data related to prosocial opportunities at school have been used for analysis.

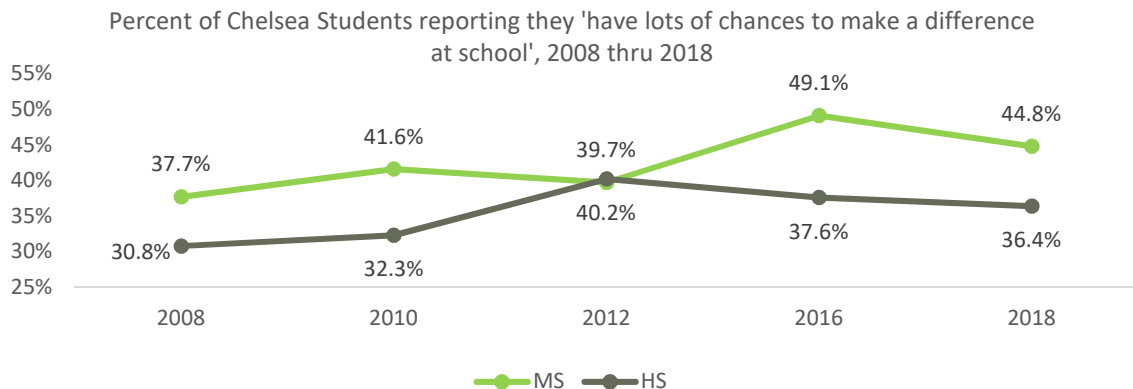
Findings: As shown in Figure 10, the rate of students who report lots of chances to get involved outside of class remained consistently high for both MS and HS with more than 9 out of every 10 students report having lots of chances.

Figure 10



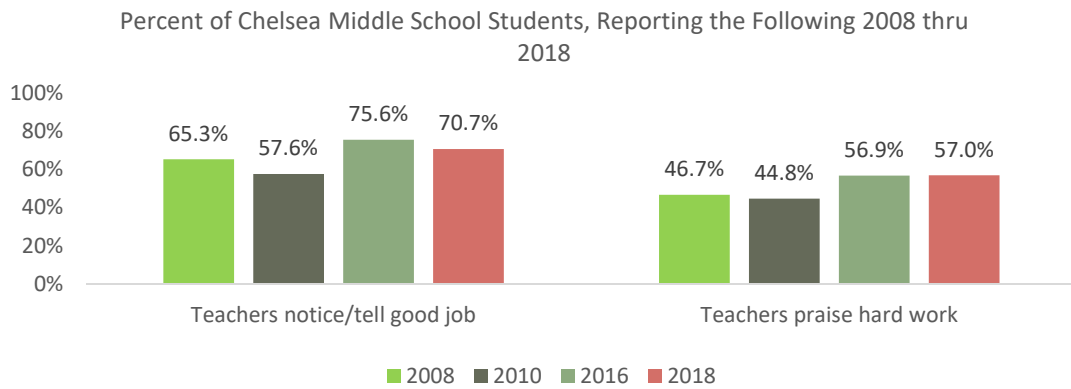
As shown in figure 11, the rate of students reporting they have 'lots of chances to make a difference at school improved for MS (19%↑) and for HS (18%↑).

Figure 11



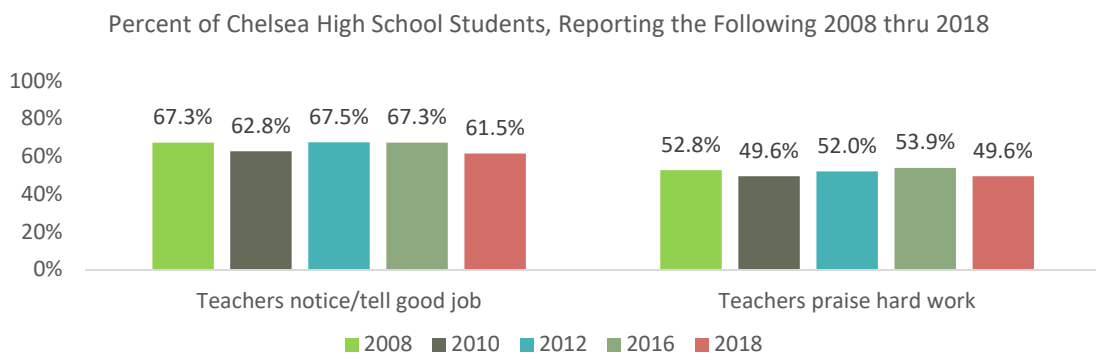
As shown in figure 12, among MS students there was a 22% increase in students reporting that ‘teachers praise hard work, and an 8% improvement in students reporting that teachers notice when they’re doing a good job and tell them.

Figure 12



As shown in figure 13, among HS students, students these indicators worsened slightly.

Figure 13



B. Family Opportunities and Recognition for Prosocial Involvement: Efforts to improve prosocial opportunities in the family include The Guiding Good Choices Program to support parents of MS children to enhance positive interactions, as well as encouraging families to volunteer together and to participate in fun events and activities hosted by the coalition.

Findings: Among middle school students, the rate of students reporting they are given lots of chances to do fun things with their parents increased 13.6% (from 78.4% to 89.1%). The rate of MS students reporting that their parents include them in decisions affecting them improved slightly to a high of 72.7%. (Figures 14 and 15)

Among high school students, there was a 12% increase in students saying they are given lots of chances to do fun things with their family (from 79.9% to 89.1%), and a 6% increase in reporting that parents include them in decisions affecting them. (Figures 14 and 15)

Figure 14

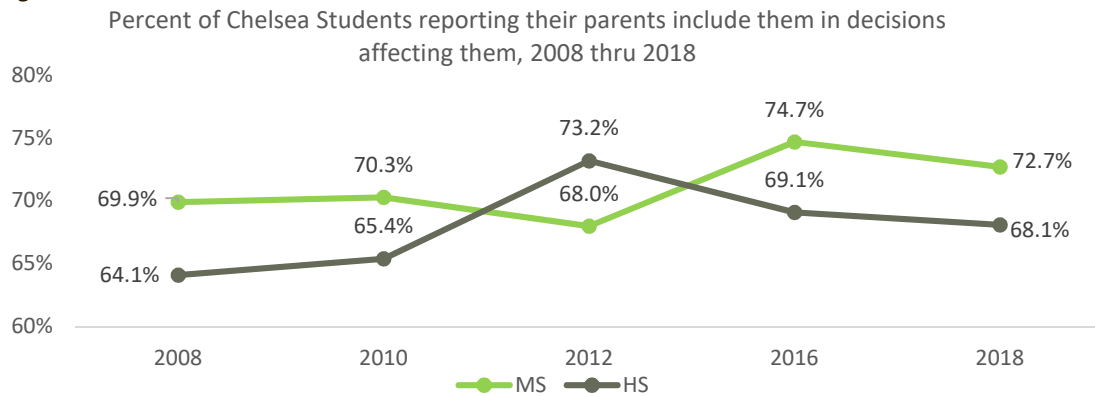
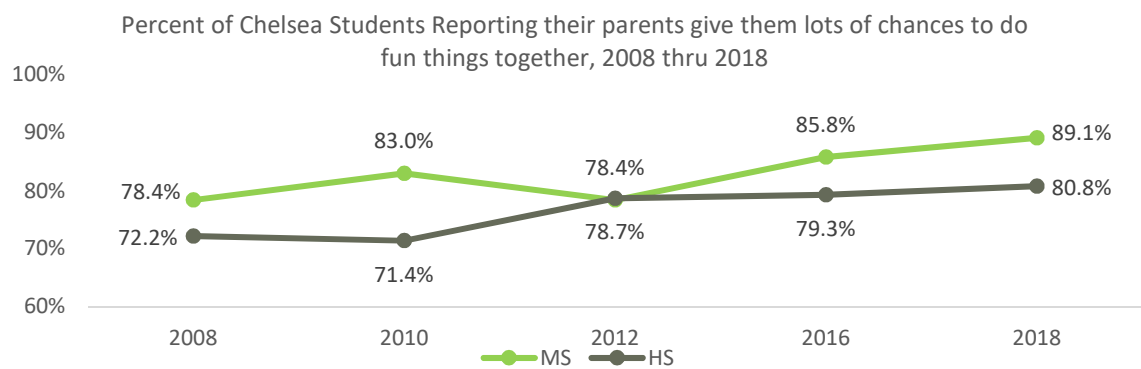


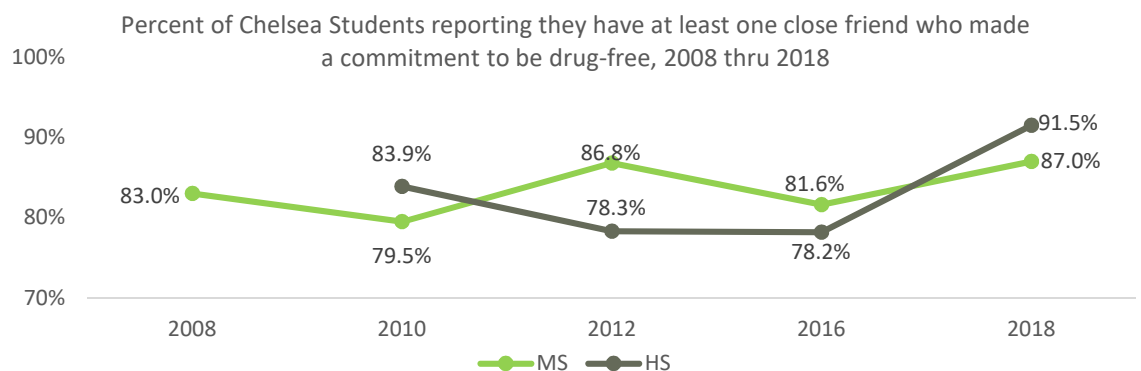
Figure 15



C. Interaction with Prosocial Peers: Efforts to increase youth interaction with positive peers include: providing fun, substance free activities such as free weekly outdoor movies during the summer, parties during peak drinking holidays, and other events for youth with specific interests such as gaming or sports.

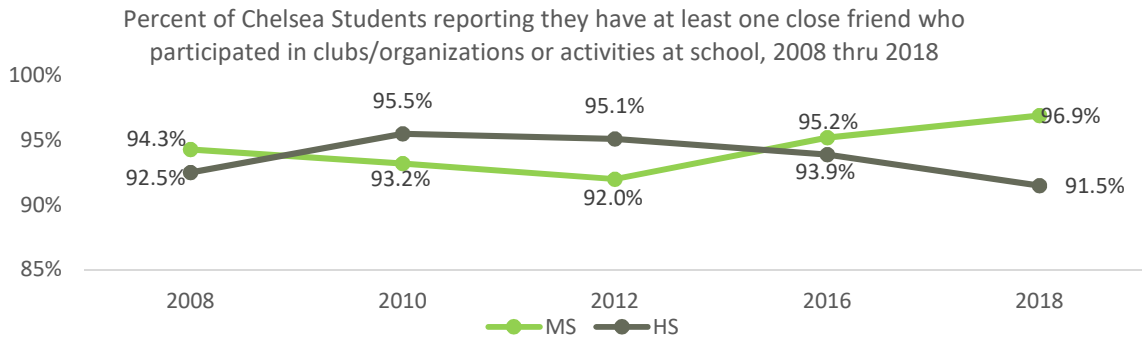
Findings: Students reporting they have at least one close friend who has made a commitment to be drug-free improved 4.8% for MS (from 83% to 87.8%) and 9.1% for HS (from 83.9% to 91.5%).

Figure 15



In addition, students reporting that they have at least one close friend who participated in clubs, organizations or activities at school remained high for both MS and HS (Figure 16).

Figure 16



In addition to the indicators detailed above, the following indicators provide information about bullying. This issue can provide insight into the climate within a school and frequency of negative peer interaction. Between 2008 and 2018, Chelsea achieved substantial improvement in each of these questions indicating a decrease in negative peer interaction among both middle and high school students.

Table 4

Percent of students that report the following in the past year:		2008	2010	2012	2016	2018	Change
Seen students get kids pushed, hit, kicked, or punched	MS	91.0%	93.9%	76.5%	51.2%	50.9%	↓44%
	HS	94.5%	77.9%	68.4%	41.8%	46.3%	↓51%
Heard students get called mean names or get "put down"	MS	98.5%	98.9%	92.7%	66.9%	68.9%	↓30%
	HS	98.0%	93.9%	90.1%	70.9%	66.3%	↓32%
Seen students wreck or damage other students' things	MS	79.9%	77.8%	46.1%	23.2%	40.1%	↓50%
	HS	65.7%	64.2%	50.1%	23.1%	28.2%	↓57%
Read e-mail or website messages that spread rumors about other students	MS	34.5%	36.7%	20.6%	13.2%	16.7%	↓52%
	HS	33.0%	37.6%	32.1%	23.0%	20.6%	↓38%
Heard rumors or lies being spread about other students	MS	96.0%	91.1%	83.8%	78.7%	73.9%	↓23%
	HS	95.8%	90.6%	91.3%	80.6%	72.6%	↓24%
Seen students left out of activities or games on purpose	MS	83.9%	82.3%	62.9%	58.6%	59.0%	↓30%
	HS	72.4%	69.4%	67.2%	52.9%	46.7%	↓36%
Heard students threaten to hurt other students	MS	78.5%	81.5%	49.7%	31.4%	31.7%	↓60%
	HS	82.5%	67.7%	59.8%	37.9%	39.1%	↓53%
Read e-mail or website messages that contained threats to other students	MS	14.5%	16.1%	8.5%	3.7%	12.5%	↓14%
	HS	16.9%	12.3%	18.2%	9.9%	11.2%	↓34%

OTHER DRUG USE TRENDS TO INFORM FUTURE PRIORITIES

The SRSLY coalition utilizes the Strategic Prevention Framework model to plan and implement efforts to reduce youth substance abuse.

Table 5 provides a summary of trends in HS students reporting use of other drugs not targeted for specific action by the coalition. These trends are provided to assist the coalition in identifying emerging areas that may require targeted intervention. Data for middle school students have not been included because rates are extremely low.

Trend Detail:

Table 5

Illicit Drug Use, HS Students	2008	2010	2012	2016	2018	MI
Recent inhalant use	1.8%	1.1%	2.6%	0.6%	1.9%	--
Recent club drug use	2.3%	0.8%	1.3%	0.9%	1.1%	--
Recent methamphetamine use	1.0%	0.3%	0.3%	0.3%	0.8%	--
Recent cocaine use	1.5%	0.5%	0.3%	0.3%	0.8%	--
Recent heroin use	1.0%	0.0%	0.3%	0.3%	0.3%	--
Recent steroid use	1.0%	0.0%	1.3%	0.0%	0.0%	--
TOBACCO USE, HS Students	2008	2010	2012	2016	2018	MI
Recent e-cig use	--	--	--	14.2%	27.9%	14.8%
Recent use cigarettes	--	4.2%	3.8%	3.5%	2.2%	2.5%
Recent smokeless use	--	3.4%	3.8%	1.2%	1.6%	6.3%
Recent cigar use	--	4.2%	10.3%	3.2%	3.4%	9.2%

Analysis of Trends: Among high school students, rates of reported illicit drug use are very low with less than 2% of students reporting recent use of any illicit drug collected on the MIPHY survey. In addition, only one-in-seven (14.6%) HS students report being sold or offered an illegal drug on school property during the past year, compared to one-in-four (26.0%) statewide.

Rate of cigarette smoking is very low among Chelsea youth with only 2.2% of HS students reporting smoking in the past month, compared to 10.5% statewide and no students reported frequent smoking. Rates of smokeless tobacco use are also very low with 1.6% of HS students reporting recent use compared to 6.3% statewide. Rates of cigar use are similarly low with 3.4% reporting recent use compared to 9.2% statewide.



Beginning in 2016, the MIPHY began collecting information about use of electronic vaping products and the data shows an alarming trend with rates doubling between 2016 and 2018 (from 14.2% to 27.9%) are almost double the state-wide rate of 14.8% in 2017.

CONCLUSIONS

Between 2008 and 2018 the SRSly Chelsea coalition implemented an array of interventions targeting multiple issues in the community that research has shown can influence rates of youth substance use.

Substance Use Trends: During this time period the coalition saw substantial reductions in youth substance use, including:

Alcohol Use: 30%↓ in lifetime use, 42%↓ in recent use (past 30 day), and 52%↓ in recent binge drinking (5+drinks). These reductions were greater than achieved state-wide.

Marijuana Use: 23%↓ in lifetime use, compared to a 17%↑ state-wide. Recent use remained stable (at 14%) while increasing 32%↑ statewide to 23.7%.

Prescription Drugs Misuse: 58%↓ in recent use of painkillers without a prescription. Stimulant misuse remained stable at a low rate of between 3% and 4%.

Intervening Variables: Indications that the coalition's efforts have likely contributed to these improvements are documented by improvements in the following community issues targeted with intervention. Unless otherwise specified improvements reflect 2008 through 2018:

Reduced Access to Substances: Decrease in students reporting it would be easy to get alcohol among MS (30%↓) and HS (7%↓).

Peer Disapproval of Use: 42%↓ in HS students reporting it is 'not wrong' for peers to drink alcohol. Between 2008 and 2012, 43%↓ in MS students reporting it's 'not wrong' for peers to use marijuana; rates stable for HS compared to increases county-wide.

Perceptions of Peer Use: 8%↓ in HS students reporting the misperception that most (50%+) of their peers drank alcohol in past month (2010 to 2018)

Opportunities and Recognition for Prosocial Involvement: Increase in students reporting they 'do things that make a difference at school' (MS 19%↑ & HS 18%↑); and that 'have chances to help decide things at school' (MS 26%↑ and HS 57%↑). Among MS students there was a 10%↑ in students reporting 'teachers notice when they do a good job and tell them' and that 'teachers praise their hard work'.

Family Opportunities and Recognition for Prosocial Involvement: Increase in students reporting parents 'give them lots of chances to do fun things together' (MS 14%↑ and HS 12%↑). Students reporting parents include them in decisions improved slightly for both MS and HS.

Interaction with Prosocial Peers: Increase in students reporting at least one close friend who made a commitment to being drug free among both MS (5%↑) and HS (9%↑).

Future Priorities: Issues that the coalition should consider for enhanced efforts in the coming year were noted throughout the report. The following two issues were especially concerning:

Electronic vaping use: Beginning in 2016, the MIPHY began collecting recent use of electronic vaping products and the data shows an alarming trend with rates doubling between 2016 and 2018 (from 14.2% to 27.9%) and almost double the state-wide rate of 14.8%.

Perception of Risk: Students reporting that alcohol and marijuana are low-risk worsened for both MS and HS students. New data for risk of prescription drug misuse began in 2016 and a substantial increase in students reporting misuse as low-risk was noted in 2018.

Attachment A

SRSLY Chelsea, Evaluation Logic Model Overview, 2008 to 2018

Problem	Intervening Variable	Contributing Condition	Interventions Conducted	Short-Term Outcomes	Intermediate Outcomes	Long-Term Outcomes
<p>Among Chelsea HS students in 2008:</p> <p>Alcohol: 50% reported lifetime & 29.3% reported recent use.</p> <p>Marijuana: 30.1% reported lifetime & 13.6% reported recent use.</p> <p>Rx: 7.8% reported recent misuse of a Rx painkiller.</p>	<p>Easy Access: Among Chelsea HS students in 2008, 79.4% reported easy access to alcohol & 49.6% to marijuana.</p>	<p><u>Social Hosting:</u> In 2010, HS students who drank recently report they usually got their alcohol by someone 'giving it to them' (48%), followed by 'giving money to an adult to buy it for them'(22%)</p>	<ol style="list-style-type: none"> <u>Project Sticker Shock</u> (2009-2018) to raise awareness of consequences of providing alcohol to minors. <u>SRSLY-Safe Homes registry</u> (2009 thru 2018) Families sign up to be a have their name listed on this page and are offered a Safe Home sign to put in their yards to notify other parents that they will not allow alcohol or other drug use at their home. <u>Pre-Prom Newspaper Article Series</u> (2012) about safe teen parties in weeks leading up to the prom. <u>Promote Tip Line</u> (2017) to anonymously report use of alcohol by youth. 	<p>13% ↓in HS students reporting they usually get their alcohol by someone 'giving it to them' (from 48.0% to 41.8%) among HS students that drank in past month</p>	<p>Between 2008 and 2018 the % of students reporting it would be easy to get alcohol decreased:</p> <ul style="list-style-type: none"> • 39.7% for MS (from 39.0% to 29.7%) • 6.6% for HS (from 71.4% to 66.7%) 	<p>Between 2008 and 2018:</p> <p>Alcohol:</p> <ul style="list-style-type: none"> • 30%↓ HS lifetime alcohol use • 42%↓ HS Recent alcohol use <p>Marijuana:</p> <ul style="list-style-type: none"> • 23%↓ HS lifetime use • Recent use stable at ~ 14%, while ↑15% statewide <p>Rx Misuse:</p> <ul style="list-style-type: none"> • 58%↓ HS recent misuse of Rx painkiller
		<p><u>Retail access</u> In 2010, 10% of HS who drank usually got by buying at a store or a bar or restaurant.</p>	<ol style="list-style-type: none"> <u>Responsible Server Training</u> (2013, 2014 and 2017) <u>Compliance Checks</u> (2014, 2015, and 2016) by law enforcement w/ recognition for retailers that pass. 	<p>↓45% in HS students who drank that usually buy at a store or bar/restaurant (from 10% to 5.5%)</p>		
		<p><u>Rx Disposal:</u> People do not dispose of their prescription medication.</p>	<ol style="list-style-type: none"> <u>Big Red Barrel</u> (2012- 2018) to provide a permanent drop off location for residents to dispose of unused medication. <u>Drug Take Back Days</u> (2017, 2018 and 2019): hosts a Drug Take Back Day on National Drug Take Back Day 2x/year. <u>Educational Mailer</u> (2017): sent to parents in school district on youth Rx drug use-how parents can prevent 	<p>Disposal in Chelsea has collected 870+ pounds meds as of 2018</p>		

Problem	Intervening Variable	Contributing Condition	Interventions Conducted	Short-Term Outcomes	Intermediate Outcomes	Long-Term Outcomes
	<u>Peer Disapproval:</u> In 2008 too many HS students report they feel it's 'not wrong' for peers to use alcohol (46%) & marijuana (31%)	<u>Perception peer use:</u> In 2010, too many HS students report most (50%+) of peers used alcohol (37%) and marijuana (21%) in past 30 days.	<p>10. Positive Social Norm Campaign (2018 and 2019 to educate that most youth are not using</p> <p>11. <u>What's Your Anti-Drug? Contest (2009 thru 2017)</u> for students in grade 5-8 and dissemination of youth-developed anti-drug posters, poems, videos, and stories</p> <p>12. <u>Chelsea City Council (2014):</u> The YSC presented to the City Council on youth marijuana use in Chelsea; Encouraged council to ban drug paraphernalia.</p>	<p>HS students reporting that 50%+ of their peers used in the past 30 days:</p> <p>8%↓for alcohol (from 37% to 34%)</p> <p>Worsened for marijuana (from 21% to 28%)</p>	<p>HS report it would be 'not wrong' for peer to use</p> <p>↓42% for alcohol (46% to 27%)</p> <p>No change for marijuana between 2008 and 2012</p>	
	<u>Perception of Risk:</u> In 2008 too many students report low risk for alcohol use (MS 24%, HS 25%), marijuana use (MS 13%, HS 24%), and in 2016 for Rx misuse (MS 14%, HS 14%).	Youth don't understand legal or physical <u>consequences</u> of youth use. (focus groups)	<p>13. <u>Tip Line (2017):</u> Chelsea city police utilize an anonymous tip line that individuals may call to report use of alcohol by youth. Marketing was completed to promote the tip line.</p> <p>14. <u>Camp Gabika (2017):</u> educates campers on the consequences of youth substance use</p> <p>15. <u>Bag n' Tag (2009 thru 2011):</u> Info distributed through pharmacies, doctors, dentists, churches & local businesses on Rx and OTC risks</p> <p>16. <u>Medical Marijuana: the good, the bad, the ugly?: (2011)</u> Expert panel discussion w/ 70+ attendees</p> <p>17. <u>Public Service Announcements (2015 & 2018):</u> on harmful effects of youth marijuana use.</p>	Trend data not available	Students reporting low-risk for alcohol use worsened among MS (22% to 38%) and HS (25% to 30%), for marijuana among MS (from 13% to 32%) and HS (from 24% to 52%). Between 2016 and 2018 Rx misuse also worsened.	
		Parental attitudes: too many HS students report parents feel it is 'not wrong' for them to use alcohol (15% '08) and marijuana (5% '10)	<p>18. <u>Community Education on Marijuana (2013-2014):</u> mailed brochure to 5,000+ homes; Resulted in 30 parents attended panel discussion</p> <p>19. <u>Vaping 101 (2017-2019):</u> Educate parents and their MS/HS children on how to ID vaping paraphernalia, how compares to tobacco, how effects youth, & how start a conversation</p> <p>20. <u>Drugs 101 (2011 thru 2018):</u> educate parents and their MS children on how to id drug paraphernalia, how drugs effect youth and how to start a conversation</p>	<p>HS students reporting their parents feel it's 'not wrong' for them to use alcohol improved 44% (14% to 8%) and worsened for marijuana (from 5% to 10%).</p>		

Problem	Intervening Variable	Contributing Condition	Interventions Conducted	Short-Term Outcomes	Intermediate Outcomes	Long-Term Outcomes
	Youth need pro-social opportunities to make a difference in their home, school and among their peers	Youth require leadership opportunities to make a difference in their school and community	21. <u>Youth Steering Committee</u> : provides youth-leadership opportunities; including, website development, planning/hosting Youth-Only Events, Duct Tape Fashion Shows, etc. 22. <u>Youth Empowerment Solutions (YES) (2009-2017)</u> : to help MS students develop skills and plan community change projects 23. <u>Community Photovoice (2010)</u> : project to generate discussion and raise awareness of issues related to substance abuse. 24. <u>Presentations (2008-2019)</u> : Youth develop and provide education to various community organizations regarding youth substance use 25. <u>Conferences</u> : Youth attend various leadership building conferences.	Students reporting they have lots of chances in school to get involved remain high for MS (98%) and HS (94%)	Students reporting they 'do things that make a difference at school' increased 19% for MS (38% to 45%) and 18% for HS (31% to 36%) Students reporting, they 'have lots of chances to help decide things at school' increased 36% for MS (42% to 53%) and 57% for HS (36% to 56%).	
		Recognition for pro-social youth contributions- youth don't feel that adults in the community recognize or reward them for good work	26. <u>Buttons Campaign (2010)</u> : for adults to recognize kids for doing something positive. 27. <u>Volunteer Appreciation Party (2010 -2019)</u> : celebration for volunteer contributions. 28. <u>Kudos and CTZN of Month awards (2008-2019)</u> : to recognize members for volunteering	10%↑ in MS reporting 'teachers notice when they do a good job and tell them' (65% to 73%) and teachers 'praise their hard work' (47% to 57%). HS rates declined slightly		
		Young people w/opportunities to participate meaningfully in their family are less likely to use substances	29. <u>Guiding Good Choices (2009 thru 2013)</u> : A family skills-training for parents and their MS children to enhance increase positive parent-child interactions.	Students reporting parents include them in decisions ↑4%for MS (70% to 73%) & ↑6% for HS (64% to 68%), & parents give chances to do fun things ↑14% for MS (78% to 89%) & ↑12% for HS (72% to 81%)		

Problem	Intervening Variable	Contributing Condition	Interventions Conducted	Short-Term Outcomes	Intermediate Outcomes	Long-Term Outcomes
	<p><u>Interaction with prosocial peers</u>: In 2010 20% of MS & 16% of HS students reported not having even 1 close friend committed to to being drug-free.</p>	<p>Youth need fun, drug free opportunities to build positive peer relationships with drug-free peers.</p>	<p>30. <u>SRSLY Cinema (2010 thru 2018)</u>: Free outdoor movies weekly during the summer. SRSLY PSAs shown before each movie.</p> <p>31. <u>St. Patrick’s Day Party (2010 thru 2014)</u>: Annual party for 7th grade and up.</p> <p>32. <u>Gaga Ball Tournament (2016 and 2017)</u></p> <p>33. <u>New Year’s Eve Party (2009 thru 2018)</u>: to contradict the belief that this holiday can’t be celebrated without alcohol</p> <p>1. <u>SRSLY Minecraft Server Building Camp (2016 thru 2018)</u>: partner with library to teach a Minecraft server building camp</p> <p>2. <u>SRSLY Great Tailgate Party (2016)</u>: to celebrate receiving 2nd DFC grant.</p> <p>3. <u>Kick Off Rally (2008-2019)</u>: SRSLY attend a home football game at Chelsea and promotes awareness of services to community members.</p> <p>4. <u>SRSLY Week (2008 thru 2019)</u>: SRSLY visits elementary school, middle school, and high school and plays fun interactive games with students; provides awareness about services offered.</p> <p>5. <u>Halloween Party (2010)</u>: The Manchester Voices youth coalition invited youth members of SRSLY to attend.</p>	<p>Students reporting they have at least one close friend who participated in clubs/organizations or activities remain high at 97% for MS and 92% for HS.</p>	<p>37%↓ in MS (20.5%-13%) and 47% ↓ (16.1%-8.5%_ in HS students reporting they don’t have at least one close friend committed to being drug-free</p>	

**SRSLY Chelsea Coalition,
Summary of Interventions and Activities, 2008 through 2010**

Intervening Variables	Interventions and Activities
<p>Reduce Access to Substances</p>	<p>Reduce adult provision of alcohol to minors (social hosting):</p> <ol style="list-style-type: none"> 1. <u>Project Sticker Shock (2009-2018):</u> Project Sticker Shock is a semi-annual community awareness campaign designed to educate adults who might purchase alcohol and illegally provide it to minors. The project unites youth, business owners, parents and law enforcement in a partnership striving for a common goal: to reduce underage drinking. 2. <u>SRSLY-Safe Homes (2009 thru 2018):</u> A “SRSLY Safe Home” is a home in which the family has committed to providing a safe and substance-free environment for their children and for any other youth who spend time there. Youth and adults can be confident that minors under the age of 21 will not be offered or allowed to use drugs or alcohol while they are in these families’ homes. Families who sign up to be a Safe Home have their name listed on this page and are offered a Safe Home sign to put in their yards, especially during pre-homecoming and prom. In 2009, 88 families had agreed to be ‘safe homes’. In 2018, 286 families were on the list. 3. <u>Pre-Prom Newspaper Article Series (2012):</u> <i>The Chelsea Standard</i> featured a three-part series of articles about safe teen parties in the weeks leading up to the CHS prom. The first was written by a law enforcement official on state laws against adults allowing minors to consume drugs or alcohol. The second was written by a Chelsea parent about their experiences hosting fun, substance-free parties for their teenagers. The final article was written by a 10th grade student and YSC member and included many quotes from other CHS students about their preference for attending substance-free parties, and what they do for fun. 4. <u>Promote Tip Line (2007):</u> A public awareness campaign was designed to promote the Chelsea Police Department's anonymous tip line so that the community can help report underage drinking parties when they hear of them being planned. Tip line posters and magnets are still available for distribution. <p>Reduce retail access to alcohol:</p> <ol style="list-style-type: none"> 5. <u>Responsible Server Training (2013, 2014 and 2017):</u> RST is a skills-based training program designed to prevent intoxication, underage drinking, and drunk driving. The training helps businesses with liquor licenses to become compliant with Michigan regulations. 6. 7. <u>Compliance Checks (2014, 2015, and 2016):</u> Law enforcement conducted compliance checks to assess whether local businesses were serving to individuals under 21 for

	<p>alcohol and under 18 for tobacco. Those that passed received a gold star and were published in a press release.</p> <p>Increase proper storage and disposal of prescription drugs to prevent diversion:</p> <p>8. <u>Big Red Barrel (2012 thru 2018)</u>: The Big Red Barrel allows people to drop off unused or unwanted medications in a secure location, where it is transported by law enforcement and disposed of in an EPA-approved manner. More than 870 pounds of medication have been safely disposed of at the Chelsea Police Department’s location as of 2018.</p> <p>9. <u>Drug Take Back Day (2017, 2018 and 2019)</u>: St. Joe Mercy Chelsea hosts a Drug Take Back Day on National Drug Take Back Day twice per year. This is an opportunity for individuals to bring any unused medications to be safely disposed of.</p> <p>10. <u>Educational Mailer (2017)</u>: An educational mailer was sent out to parents within the school district zip code regarding prescription drug use in youth and how to prevent it. Approximately 2000 were reached.</p>
<p>Peer Disapproval & Perception of Peer Use</p>	<p>Correct inaccurately high perceptions of peer use:</p> <p>11. <u>Positive Social Norm Campaign (2018 and 2019)</u>: Most people think that youth are using within a community. The positive social norm campaign works to bust that myth and to educate that most youth are not using and are making healthy choices. Posters were developed and posted throughout the schools and community. A billboard was created. Fun Food Friday is done with a PSN stat that accompanies with the food. SRSLY partnered with English 10 class and had PSN PSAs created. Other promotional items have been utilized at community events and an educational mailer was sent to approximately 2000 families.</p> <p>12. <u>What’s Your Anti-Drug? Contest (2009 thru 2017)</u>: Every year during National Red Ribbon Week at the end of October, SRSLY asks Chelsea students to think about the things in their lives that help them stay drug-free. An “anti-drug” can be anything – something you do for fun, someone you care about, a goal you are working toward, or knowledge of how drugs hurt your body, mind, and life. Using any form of media, students answer the question “What’s Your Anti-Drug?”</p> <p>The Anti-Drug Media Contest spreads the message that youth in Chelsea have many positive activities and influences in their lives that help them stay away from drugs and alcohol. Their anti-drug posters, poems, videos, and stories tell the community that they have way too many good things going for them to use substances. SRSLY holds this contest for students in 5th-8th grades.</p> <p>13. <u>Chelsea City Council (2014)</u>: The YSC presented to the Chelsea City Council to educate the council on the prevalence of youth marijuana use in Chelsea, and how that use is connected to perceived community norms. They encouraged the city council to consider a ban on drug paraphernalia.</p>

<p>Low Perception of Risk</p>	<p>Raise awareness of the physical and legal consequences of youth substance use:</p> <p>14. <u>Tip Line (2017)</u>: Chelsea city police utilize an anonymous tip line that individuals may call to report use of alcohol by youth. Marketing was completed to promote the tip line.</p> <p>15. <u>Camp Gabika (2017)</u>: A weekly activity with the students participating in Chelsea School District's Camp Gabika day camp. SRSLY educates campers on the consequences of youth substance use and leads fun activities.</p> <p>16. <u>Bag n' Tag (2009 thru 2011)</u>: Bag n' Tag is an awareness campaign to prevent prescription and over the counter drug abuse distributes informational brochures, fliers and business cards on prescription drug abuse. All four pharmacies in Chelsea agreed to participate. CVS helped create a poster for SRSLY to use at events such as the fair and school open houses. In 2011, 2,000 copies were distributed to pharmacies, doctor and dentist offices, the library, churches and local businesses in Chelsea. Healthcare providers, business leaders, parents and youth have all given positive feedback about the brochure.</p> <p>17. <u>Medical Marijuana: the good, the bad, the ugly?</u>: In 2011, SRSLY and the Chelsea District Library co-hosted this expert panel discussion on at the Washington St. Education Center. More than 70 people attended, including approximately 10 high school students. The panel included three physicians, and one state police officer. Each talked about the science and policies behind medical marijuana, including the lack of strong evidence showing medical benefits and the difficulty of enforcing the current medical marijuana law as it is written, and answered audience questions.</p> <p>18. <u>Public Service Announcements (2015 and 2018)</u>: Public service announcements were created regarding the harmful effects of youth use of marijuana.</p>
<p>Parental Attitudes:</p>	<p>Provide info and education to parents to increase their communication with their children regarding the risks of substance use:</p> <p>19. <u>Community Education: Marijuana (2013 and 2014)</u>: The SRSLY coalition mailed an educational brochure to more than 5,000 homes in the Chelsea School District as part of its effort to educate the community about marijuana. Following the mailing, thirty people (mostly parents) attended a panel discussion on marijuana. They discussed the myths addressed in the brochure, and got questions answered by medical professionals.</p> <p>20. <u>Vaping 101 (2017 thru 2019)</u>: A family educational program for parents and their middle through high school-aged children. This program teaches parents and youth about how to identify vaping paraphernalia, how vaping compares to and differs from tobacco use, how vaping effects youth and how to start a conversation about vaping.</p> <p>21. <u>Drugs 101 (2011 thru 2018)</u>: A family educational program for parents and their middle through high school aged children. This program teaches parents and youth about how to identify drug paraphernalia, how drugs effect youth and how to start a conversation with youth about drug use and to prevent drug use.</p>

<p>Prosocial Opportunities</p>	<p>Provide Youth Leadership Opportunities:</p> <p>22. <u>SRSLY Youth Steering Committee (YSC) (2008 thru 2018):</u> The YSC provides an important opportunity for Chelsea youth to get involved and made a difference in their community. Some of their initiatives include:</p> <ul style="list-style-type: none"> • <u>Website (2013):</u> A new website was built with WordPress so that SRSLY staff members can update the website directly with pictures, downloads, and text. Youth members were involved in all stages of website development and testing. • <u>Youth-Only Event (2010 and 2011):</u> In 2010, fifth through tenth grade students received an invitation to the Youth-Only meeting. The YSC planned and lead the youth-only meeting, including small-group discussion, games, and prizes. Discussion topics were “What are the biggest problems kids your age in Chelsea face today?” and “What can we do to prevent kids from making destructive decisions?” Feedback was positive, with most kids saying they plan to attend another SRSLY event “because it’s fun.” • <u>Duct Tape Fashion Show (2013 thru 2015):</u> This event was created and planned by YSC members of the coalition beginning in 2013. More than 40 youth entered the show, pre-school through 8th grade, in three categories: clothing, accessories, and art/sculpture. The Beach Middle School cafeteria was full, with an estimated 200 youth and adults there to watch the show. Members of the YSC helped everything run smoothly, decorating beforehand, working the music and curtain, getting models and designers organized, counting ballots, and helping clean up afterwards. A local salon donated hair and make-up services for the models. <p>In 2014, Fourteen students participated in the competition with 100 people in attendance. In 2015, The third annual DTFS took place in February 2015 and due to dwindling participation, the event was discontinued for future years.</p> <ul style="list-style-type: none"> • <u>Walk the Line (2010):</u> SRSLY had a team in the Chelsea Relay for Life. They wanted to raise awareness about drunk driving and bring attention to SRSLY. More than 30 coalition members volunteered for the SRSLY Relay for Life team. <p>23. <u>Youth Empowerment Solutions (YES) (2009 thru 2017):</u> The Youth Empowerment Solutions Program (or “YES”) is designed to help middle school students develop the knowledge and skills they need to plan and lead community change projects in Chelsea. SRSLY believes that the best way to make positive changes in the community and reduce destructive behaviors like underage drinking and drug use, is to let youth take the lead. The YES Program prepares them to do just that.</p> <p>Some of the programs that youth have come up with over the years include:</p> <ul style="list-style-type: none"> • "SRSLY Day", an opportunity for a group of Beach Middle School students to teach 5th grade students about SRSLY and the dangers of substance use, by using fun games and activities. • "Tipping the Line", a public awareness campaign to promote the Chelsea Police Department's anonymous tip line so that the community can help report underage
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drinking parties when they hear of them being planned. Tip line posters and magnets are still available for distribution.

- Supporting the Chelsea Kids Triathlon.
- Supporting a local animal rescue shelter.
- Operation Active – An afternoon of fitness and fun as Beach Middle School students are invited to participate in active sports, relays, and games with healthy snacks to stay energized.
- Donations for Mott Children’s Hospital – The group held several small fundraisers to raise money for kids who are receiving treatment at C.S. Mott Children’s Hospital in Ann Arbor.
- Steps to Change – The group developed a public service announcement that can be shared within Chelsea to prevent substance use.
- Runnin’ Pink – The group partnered with the Chelsea Area Fire Authority to have a 5K run during Paint the Town Pink, that benefitted Chelsea Community Hospital’s Cancer Center.
- Complete Streets – Students collected signatures to raise support for a complete streets initiative, a policy that would ensure future road work in Chelsea would include pedestrian and bicycle safety considerations. They presented their proposal to the Chelsea City Council.

24. Community Photovoice (2010): The goal of this project was to generate discussion and raise awareness of issues related to substance abuse in Chelsea and increase community participation in coalition activities. Ten photographers submitted twenty-five pictures and descriptions for this youth-led project. Pictures were printed as 8 x 10’s and matted by Pictures Plus in Ann Arbor with a significant discount. The gallery event at CCA drew 31 people. Pictures were displayed at SRSLY events, in schools and local businesses.

25. Presentations (2008-2019): Provided education to various community organizations regarding local data and substance use in youth.

26. Conferences: Youth are invited to attend various leadership building conferences including CADCA in February in Washington D.C. where youth meet with state representatives, Youth to Youth, and other various conferences throughout the state.

Recognition for Prosocial Contributions:

27. Buttons Campaign (2010): A “buttons” project was developed in response to survey data showing youth don’t feel that adults in the community recognize or reward them for good work. Buttons are a way for adults to recognize kids for doing something positive. Kids can keep buttons or turn them in for prizes when they have collected a certain number.

28. Volunteer Appreciation Party (2010 thru 2019): Annual party to celebrate all of the hard work that volunteers have provided throughout the year.

	<p>29. <u>Awards including:</u></p> <ul style="list-style-type: none"> • <u>Kudos (2008 thru 2019):</u> Members receive kudos (recognition at meeting) and a sucker for participating and volunteering during the last month. • <u>CTZN of the Month (2008 thru 2019):</u> One member that has gone above and beyond in the last month is recognized as the CTZN of the Month. CTZN's receive a T-shirt and certificate. <p>Prosocial Opportunities in the Family:</p> <p>30. <u>Guiding Good Choices (2009 thru 2013):</u> A family skills-training program for parents and their middle-school aged children. The program is based on the social development model and its primary objectives are to enhance protective parent-child interactions and to reduce child risk for early substance use initiation.</p> <p>Parents enjoy this skill-based program and agree that their children’s health and safety are worth the ten-hour time investment. During lively, interactive workshops, parents learn practical skills to help them strengthen their relationship with their children, and help kids avoid drug use and other problems.</p>
<p>Interaction with Positive Peers</p>	<p>Provide Fun Activities and Events:</p> <p>31. <u>SRSLY Cinema (2010 thru 2018):</u> In conjunction with Sounds and Sights on Thursday nights in downtown Chelsea, SRSLY offers free outdoor movies starting at dusk during the summer. SRSLY public service announcements are shown before each movie, along with recognition of sponsors. Movies are projected onto a screen on the back of the McKinley building behind the Clocktower Complex. Lawn seating is available (blankets or chairs are recommended). Popcorn and concessions are sold under the gazebo.</p> <p>32. <u>St. Patrick’s Day Party (2010 thru 2014):</u> Party for everyone 7th grade and up. Music, food, games, prizes, and an excuse to hang with your friends until 9pm on a school night. Free for everyone who wears something green. \$5 for everyone else.</p> <p>33. <u>Gaga Ball Tournament (2016 and 2017):</u> The game is a simpler version of dodgeball, but every person is for themselves. The game is played in an octagon structure and goes by fast.</p> <p>34. <u>New Year’s Eve Party (2009 thru 2018):</u> The SRSLY regional New Year’s Eve Party contradicts the conventional wisdom that this holiday can’t be celebrated without alcohol. All of the SRSLY communities come together to throw a big party at Beach Middle School in Chelsea. Youth can enjoy video games, sports in the gym, swimming, arts & crafts, cookie decorating, the photo booth, and free pizza! The night ends with team games and a countdown to the new year. In 2010, more than 400 people attended. In 2018, the number of participants exceeded 525.</p> <p>35.</p> <p>36. <u>SRSLY Minecraft Server Building Camp (2016 thru 2018):</u> In 2016, SRSLY collaborated with the Chelsea District Library to contract Gamestart School of Ann Arbor to teach a Minecraft server building camp at the library. The class capacity of 25 students was met within 4 days of registration and a waiting list of 16 students was kept. Students learned how to build a server, test plugins, use the plugins to edit the server, and create their own characters and mini-games. Only a third of the students who</p>

	<p>participated had already volunteered with SRSLY. The program was successful in recruiting new and younger SRSLY members while also providing an opportunity for students to apply critical thinking skills and participate in a project about which they are proud.</p> <p>37. <u>SRSLY Great Tailgate Party (2016)</u>: In celebration of SRSLY receiving their second DFC grant, the coalition hosted a tailgate party. Approximately 30 people attended, and verbal feedback was positive.</p> <p>38. <u>Kick Off Rally (2008-2019)</u>: SRSLY attend a home football game at Chelsea and promotes awareness of services to community members.</p> <p>39. <u>SRSLY Week (2008 thru 2019)</u>: SRSLY visits the elementary school, middle school, and high school and plays fun interactive games with students provides awareness about services offered.</p> <p>40. <u>Halloween Party (2010)</u>: The Manchester Voices youth coalition invited members of SRSLY to attend their Halloween Party for middle and high school students on October 30th. Three SRSLY members attended the party. YSC members agreed we will invite Manchester Voices members to our New Year’s Eve and St. Patrick’s Day parties.</p>
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ⁱ Strategic Prevention Framework. Guide to Assessment, Planning, & Evaluation, 2015, Prepared by Hornby, edited by SAMHS Feb 2015, retrieved from <https://www.maine.gov/.../SPF%20Guide%20to%20Assessment%20FINAL.docx>