

**NORTHWEST
VERMONT
REGIONAL
PREVENTION
NETWORK**

PREVENTION CENTER OF EXCELLENCE

STRATEGIC PLAN 2021 – 2026

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**United Way of
Northwest Vermont**

EXECUTIVE SUMMARY

THE OPPORTUNITY

In 2018, individuals from several organizations focused on substance use prevention asked United Way of Northwest Vermont to apply for a State Opioid Response grant from the Department of Health's Division of Alcohol and Drug Abuse Programs (ADAP). This funding supported the production of a five-year strategic plan and the development of a network that will support regional efforts across all levels of the Vermont Prevention Model.

The plan aims to unify the region around a holistic and comprehensive approach to preventing substance misuse among youth.

In 2020, as part of ADAP's priority to establish Prevention Centers of Excellence in regions across the state, United Way was granted funds to develop the plan to create and launch a network and funds to subgrant to community partners to support prevention programs and services.

THE LEAD

United Way was uniquely positioned to facilitate and launch this effort for several reasons:



Reducing substance misuse is one of five priorities identified by United Way's community assessment in 2016 to guide future investments. Yet, United Way does not directly provide or engage in prevention strategies and acts as a neutral convener.



Over the past two decades, United Way has successfully transformed from an aggregator and distributor of funds to one that actively engages in longer-term projects to create lasting impact by addressing the complex problems identified by our communities.



In 2016, United Ways of Chittenden and Franklin/Grand Isle Counties merged to form United Way of Northwest Vermont – a regional entity with multi-sector partners.



United Way has policies, procedures, and systems in place to make grants and to accept and meet requirements of public, private, and governmental funding sources.

EXECUTIVE SUMMARY

THE APPROACH

Activities throughout the planning process were designed and implemented by an Internal Planning Team within United Way with guidance and input from an Advisory Group of community partners.

A strategic planning process identified and brought together individuals and groups that ultimately will be responsible for or impacted by gains and changes over the five years of the plan. To that end, focus groups and interviews were completed during January – June with individuals who fell into one or more of the following categories: youth and young adults, providers, funders, policymakers, and other community leaders. Questions included:

- 1 What most concerns you about current conditions?**
- 2 What would you most like to see change?**
- 3 What would need to be done to support the desired changes?**
- 4 How could a network help, how should it operate, and where should it start?**

In July and August, workgroups reviewed focus group summaries, added clarifications as needed, proposed guiding principles for the network and foundational criteria for setting priorities and making decisions. This combined input from more than 100 people shaped and defined the themes and strategies that became the foundation of the strategic plan.

THE RESULTS

The community engagement and planning process resulted in a five-year strategic plan. The underlying themes from community input drive the strategies, which frame operations and governance. Operations and governance inform the budget.

Four categories of underlying themes emerged from the community conversations.

CARE & CONCERNS

that the network can address: disparities, equity, cultural norms, access, usage, and impact.

NEEDS

that the network can fill: data, communications, and sustainability.

VALUES

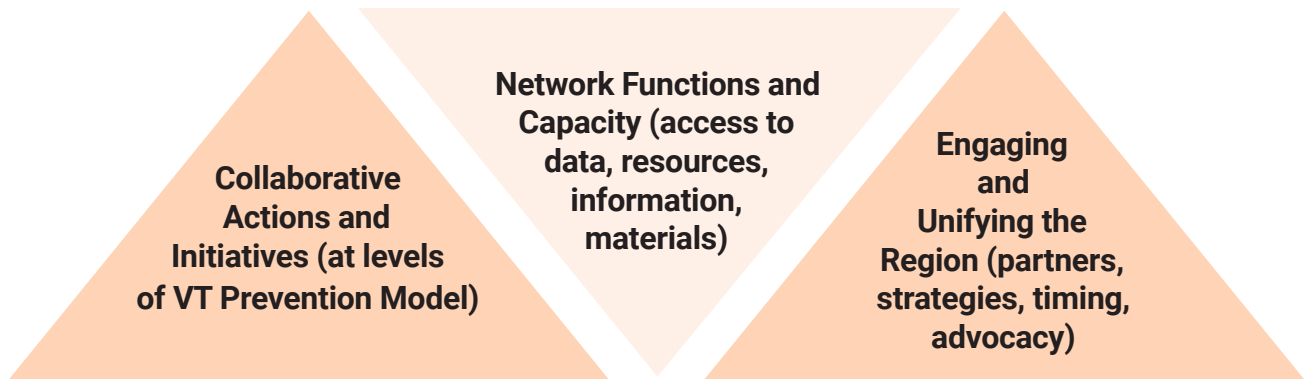
to drive the network's focus and approach: engage the whole community, youth voice, data-driven.

ASPIRATIONS

for what a network can achieve: systems and connections, collaboration and resources, best practices, new thinking and innovation, and demonstrating value.

EXECUTIVE SUMMARY

Three categories of activities translate these themes into actions



Using principles and aspirations shared in the development process, an operational structure was created to support what the community most wanted – the capacity to support action.

Events to wrap up the planning process and preview the plan will take place in September and October 2021. Plans to launch the network in November will be complete by early October 2021.

REGIONAL PROFILE

DEMOGRAPHICS AND GEOGRAPHY

The Prevention Center of Excellence network will serve Northwest Vermont — an area comprised of Chittenden, Franklin, and Grand Isle Counties. These three counties have a combined population of over 218,000 - nearly 35% of Vermont's total population.

Over 22% of the region's population is comprised of youth between 10 – 25

with variations among counties (Chittenden 25%, Franklin 17%, and Grand Isle 15%).

Although populations vary by county, Chittenden and Franklin Counties have recognized urban hubs or cores, all three counties have rural areas, and all three counties benefit from bordering Lake Champlain. Grand Isle is the smallest county in size and population, comprised of four towns on islands and one town located at the end of a peninsula that extends south from Canada. Given its size and geography, Grand Isle does not have any high schools; high school students attend schools outside the county. There is significant overlap in labor, professional, and service markets of the three counties.

SUBSTANCE USE AMONG YOUTH AND YOUNG ADULTS

Although Vermont ranks high on national indicators of health and well-being, this reputation masks a more complicated reality around substance use that impacts the health and well-being of our youth and negatively impacts their options. And although Vermont has made great strides in addressing substance use and misuse among both youth and the general population, Vermont still ranks statistically higher than the New England states and the nation in the use of alcohol and marijuana.¹

The most currently available data from the National Survey on Drug Use and Health (2018-2019) reveals the percentage of Vermonters from different age groups reporting past month use of alcohol and marijuana, as compared to the U.S.

A review of information about usage, risk, and protective factors reveals promising trends and data regarding subpopulations of youth and young adults who need to be better understood and addressed.

¹ Quantitative data cited in this section are from publicly accessible data reports which summarize data collected by national, state, and/or other research entities (e.g., Youth Risk Behavior Survey collected by the Vermont Department of Health). As with any data source, there are limitations on how these data are collected and reported, and how well they represent the populations that are identified within the reports. The Strategic Planning process included review of data as well as direct conversation with community members and service providers whenever possible to understand how issues related to substance misuse impact them directly.

REGIONAL PROFILE

OVERALL PICTURE OF SUBSTANCE USE

At first glance, these rates of substance use for grades 9 – 12 look reasonably positive.

In many categories, youth are comparable with statewide rates. In nearly a quarter of the categories, youth in Northwest Vermont report lower rates of substance use than Vermont youth overall.

But rates of use among subpopulations of youth are more troubling.

Within Vermont, a county-level review of the most recent information from the 2019 Vermont Youth Risk Behavior Survey about substance use and risk and protective factors adds more detail. These data reveal an overall picture that shows some promising trends as well as some data about subpopulations of youth and young adults that need to be better understood and addressed.²

Percent of each age group reporting past 30-day alcohol use in Vermont and the U.S.

AGE RANGE	VERMONT	U.S.
All Youth 12+	60.9%	50.9%
Youth 12-17	13.6	9.2
Youth 12-20 (underage)	31.7	18.7

Percent of each age group reporting past 30-day marijuana use in Vermont and the U.S.

AGES	VERMONT	U.S.
12-17	19.7%	10.8%
18-25	12.8	7.0
26 +	39.0	22.5
Overall	17.1	9.4

PERCENT OF STUDENTS IN GRADES 9 – 12 REPORTING SUBSTANCE USE IN CHITTENDEN, FRANKLIN, AND GRAND ISLE COUNTIES

Substance	Chittenden County	Franklin County	Grand Isle County	Vermont
Past 30-day alcohol use	29%	34%	27%	31%
Past 30-day binge drinking	13%	17%	12%	15%
Past 30-day marijuana use	26%	23%	26%	27%
Past 30-day cigarette use	4%	7%	4%	7%
Past 30-day EVP use	23%	29%	19%	26%
Past 30-day prescription drug misuse	4%	4%	Too few to report	5%

Sources: Vermont Youth Risk Behavior Survey: [Chittenden \(2019\)](#) [Franklin \(2019\)](#) [Grand Isle \(2019\)](#)

Statistical Comparison with Vermont:

Better
Same
Worse

Table created by Amy Livingston, Pacific Institute for Research and Evaluation (PIRE), for use in strategic planning focus groups.

² Descriptive terms for subpopulations of youth are based on self-report using survey response options.

REGIONAL PROFILE

In Chittenden County

White, Non-Hispanic youth have higher past 30-day use rates for alcohol, marijuana, and electronic vapor products (EVP) and have a higher rate of binge drinking.

LGBTQ+ youth have higher past 30-day use rates of cigarettes.

Students of color and LGBTQ+ youth have higher past 30-day rates of prescription drug misuse.

In Franklin County

LGBTQ+ youth have higher past 30-day use rates of marijuana.

Students of color and LGBTQ+ youth have higher past 30-day use rates of cigarettes.

LGBTQ+ youth have higher past 30-day rates of prescription drug misuse.

Note: Sample sizes in Grand Isle County are too small to be broken down by subpopulations.

Regarding the prevalence of marijuana use in the region in the past 30 days, there were no statistically significant differences between the counties and the state. However, it is worth noting that of the youth who used marijuana in the past 30 days, nearly half of them in Chittenden County report using it on 20+ days. In Franklin County, more than half of the youth who used marijuana reported 20+ days of use.

More recent survey data (collected in 2020 – 2021) indicate Vermont youth are reporting increased use of marijuana during COVID-19 (see References page for links to survey results).

REGIONAL PROFILE

THE OVERALL PICTURE OF RISK AND PROTECTIVE FACTORS

Effective substance use prevention for youth and young adults focuses on building protective factors and reducing or mitigating risk factors at the individual, peer, family, and community levels.

PERCENT OF STUDENTS IN GRADES 9 – 12 REPORTING RISK AND PROTECTIVE FACTORS FOR SUBSTANCE USE, IN CHITTENDEN, FRANKLIN, AND GRAND ISLE COUNTIES

Risk/Protective Factor	Chittenden County	Franklin County	Grand Isle County	Vermont
Think people greatly risk harming themselves binge drinking	43%	34%	34%	39%
Think people greatly risk harming themselves by using marijuana regularly	24%	22%	26%	23%
Felt sad or hopeless in the past year	28%	33%	35%	31%
Have at least one teacher or other adult in their school that they can talk to if they have a problem	79%	78%	76%	78%
Feel like they matter to people in their community	66%	54%	55%	58%

Statistical Comparison with Vermont:

Better
Same
Worse

Sources: Vermont Youth Risk Behavior Survey: [Chittenden \(2019\)](#) [Franklin \(2019\)](#) [Grand Isle \(2019\)](#)

11

Table created by Amy Livingston, Pacific Institute for Research and Evaluation (PIRE), for use in strategic planning focus groups.

These data reflect several areas where rates of risk or protective factors for youth within individual counties were better or worse than statewide rates. But perhaps more informative again are rates of these same factors by subpopulations of youth.

Risk and protective factors in Chittenden County, as compared to Statewide results:

- 1 White, Non-Hispanic and Heterosexual/Cisgender youth** were less likely to report thinking people greatly risk harming themselves by binge drinking.
- 2 White, Non-Hispanic and LGBTQ+ youth** were less likely to report thinking people greatly risk harming themselves by using marijuana.
- 3 Students of Color and LGBTQ+ youth** were more likely to report feeling sad or hopeless in the past year, less likely to have at least one adult at school they could talk to, and less likely to feel they matter to people in their community.

REGIONAL PROFILE

Risk and protective factors in Franklin County:

1

LGBTQ+ youth were less likely to think people greatly risk harming themselves using marijuana, more likely to report feeling sad or hopeless in the past year, and less likely to feel they matter to people in their community.

2

Students of Color and LGBTQ+ youth were less likely to report having at least one adult they could talk with at school.

PREVENTION INFRASTRUCTURE AND RESOURCES

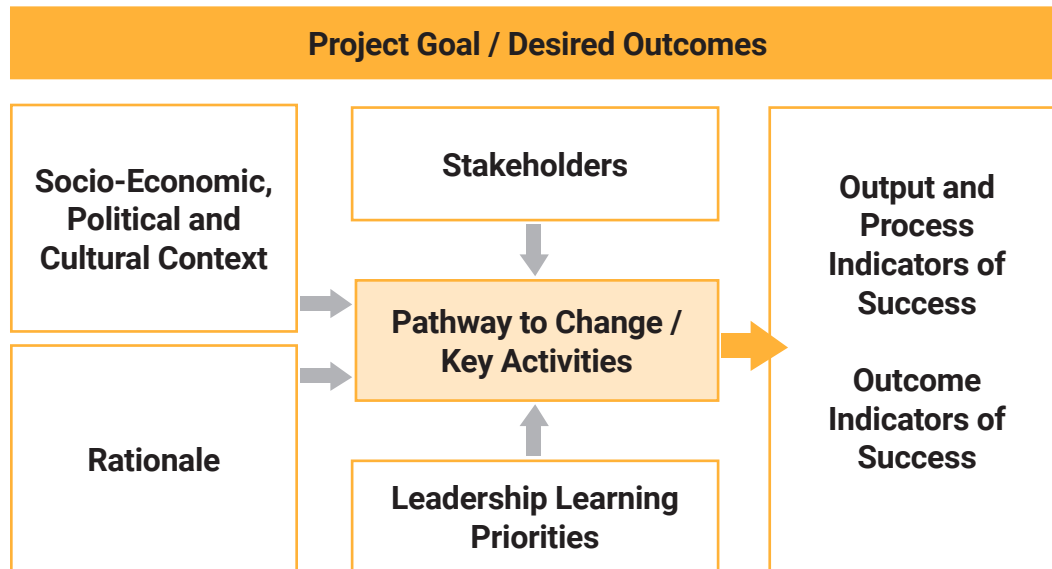
One of the challenges for the network will be to identify and quantify the resources and assets available in the region that do, can, or could provide or support prevention efforts. Although it will expand over time, the network will begin this work using information that became available in 2020 through the *Vermont Prevention Inventory Report* completed by the Pacific Institute for Research and Evaluation (PIRE) for the Department of Health's Division of Alcohol and Drug Abuse Programs (see References page for a link to report).

The *Vermont Prevention Inventory Report* provides information about organizations that key community leaders identified as prevention-focused. This information was compiled, and a survey was sent to every organization on the list. The network will begin updating and expanding a regional inventory with details from the initial responders to the survey in this region.

The strategic planning process identified individuals and organizations with critical resources, assets, and capacity to support youth and young adults. Not all such individuals or organizations currently define themselves as focused on substance use prevention — but they are vital to the health and well-being of youth and young adults. Connecting with these groups and organizations and exploring ways their respective roles could become mutually reinforcing will be a priority for the network.

STRATEGIC PLANNING FRAMEWORK

The Big Picture framework was developed for, and with support from, the Center for Disease Control and Prevention (CDC). It was one of the tools introduced and used in a year-long leadership development fellowship that focused on bringing together teams of leaders from multiple sectors to actively engage their communities to improve population health and achieve health equity. Given the nature and results of the strategic planning process led by United Way, the Big Picture planning template affords a straightforward way to ground the work that has been done and the work that is yet to be done.



THE BIG PICTURE

See the complete and full version on the next page.

DESIRED OUTCOME

Youth and young adults receive the supports and opportunities they need to gain and maintain optimal health and well-being.

PROJECT GOAL

Develop a strategic plan for the launch and development of a network that supports regional efforts so all youth and young adults in Vermont's Northwest Region have equitable access to a responsive, comprehensive, coordinated, and mutually reinforcing system of substance misuse prevention strategies and the region is unified around a holistic approach across all levels of the Vermont Prevention Model.

KEY THEMES

Comprehensive; regional scope; community-driven and based; youth voice; effective, efficient, and impactful; resourced, accountable, and sustainable.

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SOCIO-ECONOMIC, POLITICAL & CULTURAL CONTEXT

- Vermont rates for marijuana and alcohol use among highest in the nation
- Rising use of electronic vaping devices
- Disparate outcomes for sub-populations of youth
- Youth do not have equitable access to programs and services
- Current funding practices do not support sustainability or innovation
- Widespread cultural acceptance of substance use
- Plan to establish retail markets for marijuana
- ADAP efforts to establish regional Prevention Centers of Excellence
- Vermont Act 82

RATIONALE

- Increased urgency to mitigate negative consequences of substance use
- Increasing concerns about disparities
- Expressed need to understand gaps, overlaps and duplications
- Unmet data and evaluation needs
- Desire to make system more directly driven and informed by youth
- Rich history of efforts to work more collaboratively
- Regional benefits of coordinated strategies at all levels of the Vermont Prevention Model

STAKEHOLDERS *(those who have a role to play in the well-being of youth and the prevention of substance misuse)*

Youth and their families, youth/family-serving organizations, schools, businesses/employers, government at all levels, funders (public and private), civic and social organizations, faith-based and cultural organizations, law enforcement, judiciary, colleges, medical and mental health providers, and social service providers.

PATHWAY TO CHANGE / KEY ACTIVITIES

- Create shared vision
- Engage community in developing a plan to achieve the vision
- Design network with adequate capacity and organizational structure to support implementation of the plan
- Develop recommendations about establishing robust data platform
- Collect relevant and requested data
- Establish performance measures for network

LEADERSHIP LEARNING PRIORITIES

- Increase individual and organizations skills, capacity and habits of looking at issues from a systems level (using a socio-ecological approach) to gain full support and engagement of partners.
- Utilize community-based leadership skills to move the community from the current state of agreement on the high-level goals to a state of alignment of resources to improve outcomes for youth and young adults.

OUTPUT AND PROCESS INDICATORS OF SUCCESS

- Community developed strategic plan is completed by September 30, 2021
- Series of launch events are planned for October and November
- Strategic planning process is complete
- Sources of funds to support network backbone for at least first year are identified or secured
- Planning products and processes are documented
- Youth and their families, youth/family-serving organizations, schools, businesses/employers, government at all levels, funders (public and private), civic and social organizations, faith-based and cultural organizations, law enforcement, judiciary, colleges, medical and mental health providers, and social service providers.

OUTCOME INDICATORS OF SUCCESS

By end of Network Year 1

Working together, individuals from multiple sectors:

- Share data and concerns about current conditions
- Identify strengths, challenges, and opportunities within current system
- Identify leverage points for changes to improve outcomes and impact
- Develop over-arching principles and guidelines about how the network should operate and make decisions

BACKGROUND AND APPROACH

In late fall of 2020, the Vermont Department of Health's Division of Alcohol and Drug Abuse Programs (ADAP) awarded a grant to United Way of Northwest Vermont. The purpose was to convene and facilitate a community process to develop a five-year strategic plan for a regional prevention network. The creation of this network would leverage nearly a decade of investment in building and strengthening community-based programs, partnerships, and coalitions focused on prevention of substance misuse. This "Prevention Center of Excellence" will work to ensure that:

- 1 All youth and young adults in Vermont's Northwest Region have equitable access to a responsive, comprehensive, coordinated, and mutually reinforcing system of prevention programs and services, and
- 2 The region unifies around a holistic and comprehensive approach to actions across all levels of the Vermont Prevention Model.

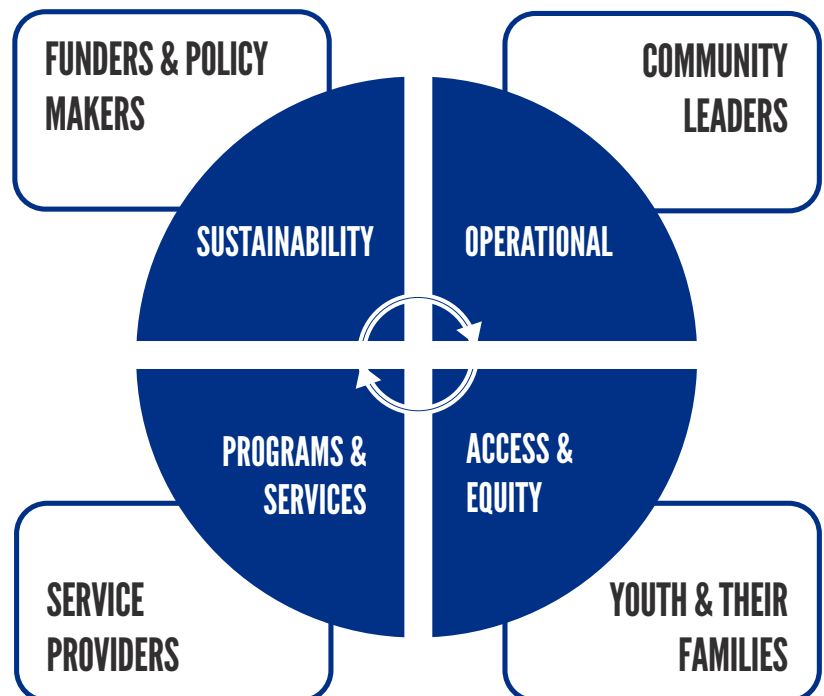
These goals served throughout the planning process as the organizing purpose. When the network is officially launched and is able to do so, a formal mission statement can be developed and adopted. Until then, the organizing purpose that was the foundation of the planning effort can serve as a unifying statement.

CO-CREATION OF A STRATEGIC PLAN

The design for the strategic planning process focused on how best to listen to and create interaction among the people that will be responsible for – and impacted by – prevention strategies in our region.

Interaction among and between the groups in the outer boxes was vital in creating a credible and actionable strategic plan. Feedback among and between these groups around the topics identified in the center circle will be critical after the network launch to fulfill its purpose.

The first phase of the strategic planning process took the community's pulse by gathering input from a wide range of perspectives. In February 2021, all Northwest Vermont organizations identified in the 2020 Vermont Prevention Inventory were invited to participate in provider



BACKGROUND AND APPROACH

focus groups along with leaders and staff from youth-serving organizations, and student assistance professionals from local school districts. Focus groups were also conducted with youth and young adults, funders, policymakers, and other community leaders.

The groups reviewed data about current conditions and were asked to share their: 1) reactions to the data, 2) thoughts about how a network might better meet the needs of youth and increase capacity across the region, and 3) aspirations for the future.

Between February and September of 2021, the Internal Planning Team conducted the following engagement activities (with assistance and feedback from the 9-member Advisory Group).

By the end of August 2021, this process had yielded the critical themes and actions that comprise the strategic plan's core.

13 FOCUS GROUPS

(86 participants)

11 IN-DEPTH INTERVIEWS

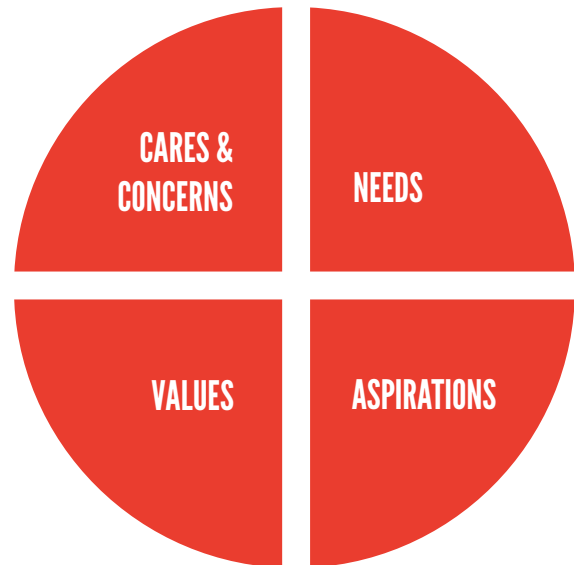
NINE WORKGROUP SESSIONS

to hone and focus the
information gathered

THEMES AND ACTION AREAS

CRITICAL THEMES

Focus groups generated themes and aspirations that fell into four main categories.



CARES AND CONCERNS

Disparities – Specific subpopulations of youth and young adults have rates either higher or lower than the state average in substance use and presence of protective and risk factors.

Equity – Equity issues were defined broadly and included ease of access geographically, barriers to participation (including timing, transportation, cost), and whether opportunities appropriately consider racial, cultural, demographic, sexual orientation, and gender identity differences. Participants expressed concerns about a need to know more about who is or is not using resources currently and why, and how different subpopulations are treated by educational, law enforcement, and judiciary systems.

Cultural Norms – Many participants talked about the dissonance between attitudes about substance use in the broader population (particularly alcohol and marijuana) and youth-focused education, messaging, and programs that focus on delaying and preventing substance use. This dissonance is fueled by a growing substance retail economy and research that shows the influence that quantity, proximity, and marketing of substances have on youth decision-making. The most prominent example is the effort to move forward retail sales of marijuana in Vermont. Youth spoke more explicitly about the confusion caused by important adults in their lives (e.g., parents, coaches, and others who say or act like substance use is okay or it does not bother them).

Youth also expressed their belief that there is an expectation they will transition from high school to post-secondary education and that this bias has resulted in many of the supports they need to be tied to educational systems and institutions. If they follow this expected path, there are lots of supports and ways to gain “life skills.” If not, gaining necessary skills and supports is often unclear and difficult.

THEMES AND ACTION AREAS

Usage, Access, and Impacts – These themes were primarily raised in the youth focus groups. Youth were surprised that Vermont ranked among the states with the highest rates of substance use. The rates seemed inconsistent with either their experience or image of Vermont, their communities, or small states.

Individuals in several groups pointed out that although they were surprised by the rate of alcohol use, they were not surprised by the rates of marijuana use. Younger teens tended to talk more about vaping and tobacco use.

When youth were asked what they thought contributed to higher substance use, the most common responses were:

Youth receive messages that substance use is normal and okay.

Substance use is a way to deal with stress, disappointment, trauma or assault, boredom, loneliness, hopelessness, and mental health issues.

A desire for status and connection with peers or groups.

Lack of organized and accessible activities where they live.

In terms of access, there was little discussion about how easy or difficult it is to get access to alcohol. However, when groups talked about marijuana, they generally agreed that gaining access it was not difficult.

Most participants were aware of and spoke about the health impacts of substance use in both the near term and the longer term. They also talked about how it could negatively impact social interactions. Groups comprised of older teens also discussed the increased risk of violent or aggressive behavior, vulnerability to being taken advantage of, and sexual assault.

THEMES AND ACTION AREAS

NEEDS

Data – Every focus group had concerns about the availability and usefulness of data. Among the most common concerns were:

- Lack of, or lack of access to, current, timely, and emerging data.
- Existing data under-represents substance use and information about protective and risk factors among subpopulations of youth.
- Lack of data to help us better understand who is doing well and why.
- Interest in enriching data by including life stories and experiences.
- Racial, cultural, or institutional biases in the nature and sources of data.

Communication – this theme had a different meaning across the focus groups:

- Youth discussed communication in terms of having better ways to learn about what opportunities, activities, and resources are available to them, especially those that promote or emphasize peer-to-peer connection.
- Providers discussed having better and more timely access to information needed to do their work better and help the work be less time-consuming and/or more impactful.
- Funders, policymakers, and other community leaders talked about the most efficient and appropriate ways to get and give information across various sectors and the region.

Important note: One common concern crossed all the focus groups – how best to communicate with and across different interest groups (e.g., youth communicating with adults, providers, and funders communicating with each other).

Sustainability – All groups discussed sustainability as including a level of surety and continuity.

- Youth wanted predictable, consistent access to supports and opportunities to transition into independent young adults. They felt these supports and opportunities should not be tied primarily to institutions – especially education.
- Other focus groups expressed the need for: adequate, consistent, and appropriate funding for community-based programs, services, and supports to youth and their families; sustained efforts at all levels of the Vermont Prevention model; and ongoing support for the network in providing shared services and capacity to the community.

THEMES AND ACTION AREAS

VALUES

Amplifying Youth Voice – All groups pointed to the importance of including youth directly in developing solutions and making decisions about programs and services offered to them, and compensating them fairly for their contributions. Increased efforts are also needed to support youth engagement with their peers more broadly across the region.

ASPIRATIONS

Systems and Connections – Creating an environment where youth and young adults get the support they need to gain and maintain their optimal well-being is not the sole responsibility of a network established primarily to address substance misuse prevention; other systems and networks play key roles. Discussions focused on three aspects of systems:

- Connecting and leveraging the resources of existing prevention systems.
- Identifying and building relationships with organizations that are not currently listed in the *Vermont Prevention Inventory* but are crucial to meeting the needs of youth and young adults.
- Engaging, including, and supporting family and social systems that help shape youth attitudes, beliefs, and behaviors around substance use.

Collaboration and Resources – Discussions about improving efficiency and outcomes resonated across all the provider focus groups, often through the lens of what they would like a network to support, or change they would like to see over the next five years. Highlights would include:

- Coordinating and aligning programs and services,
- “No wrong door” entry and referral practices,
- Cross-promoting programs,
- Shared training and knowledge building, and
- Understanding everyone’s role enough to break down silos and reduce duplication.

Best Practices, New Thinking, and Innovation – Interest and commitment to being data-driven or informed and promoting evidence-based and best practices ran across many of the interviews and focus groups. Participants also noted that as important as this was to develop strategies and tactics, it did not mean that the network and partners should avoid “new thinking” but rather find ways to include and embrace innovation.

THEMES AND ACTION AREAS

Value – To fulfill both its intent and promise, the network must be able to demonstrate its value in three ways:

- 1 Improving outcomes for individuals and families.
- 2 Directing needed and requested support to network partners.
- 3 Making a unique contribution to the effectiveness, efficiency, and appropriateness of how the region strategically aligns and coordinates its resources and efforts across all levels of the Vermont Prevention Model.

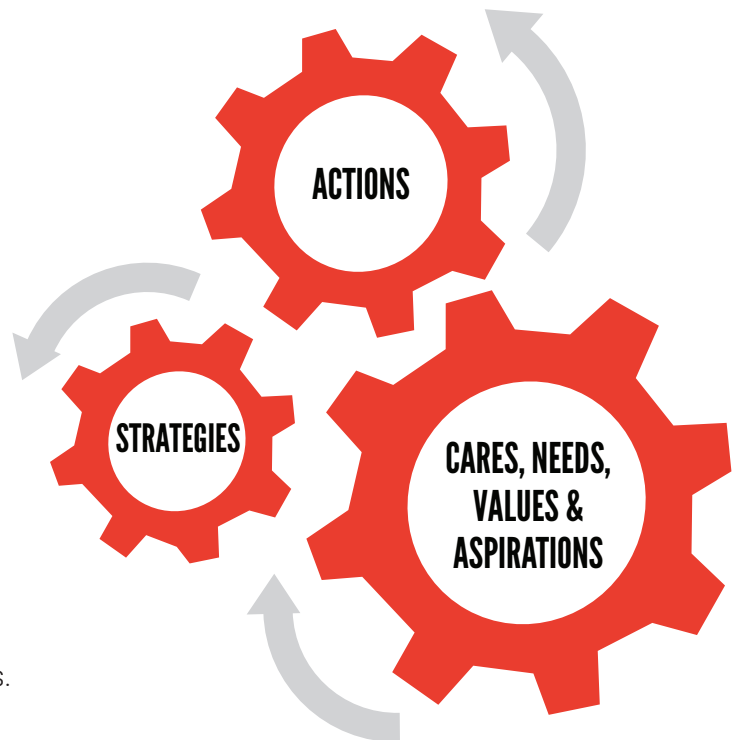
STRATEGY DEVELOPMENT

Workgroups used focus group summaries to generate actions in five categories:

1. Outreach and Engagement
2. Communication
3. Convene, Facilitate, and Support
4. Data and Evaluation
5. Resources and Capacity Building

Outreach and Engagement

- Plan actions and activities that will establish the network as an accessible regional table that convenes around prevention.
- Clarify relationships between networks, coalitions, collaborations, and initiatives at the local, regional and statewide levels.
- Develop and implement strategies to align a vision that supports prevention across the region.
- Increase, diversify, and strengthen the number and backgrounds of individuals and organizations willing and able to support prevention.
- Provide capacity and support for community groups.



THEMES AND ACTION AREAS

Communication

- Act as a collective voice to add volume and strength to unified messages around prevention issues and concerns.
- Connect, integrate, and time efforts across the Prevention Model to maximize impact.
- Create and emphasize language that speaks to root causes rather than the consequences they have caused for individuals (e.g., not talking about “kids with problems”).
- Develop clear messages about how individuals can support youth and substance misuse prevention.
- Develop clear messages about how and what communities can do to support youth – messages that can reach the region geographically and across sectors. Promote a broader sense of responsibility – not blame - through partnership and connection.

Convene, Facilitate, and Support

- Prepare for the retail cannabis market – assess resources and readiness, share key findings, identify resources available to communities and organizations, connect with individuals and organizations already working on the issue, and clarify how to best leverage available assets and resources.
- Emphasize policy generation and increase focus on policy and systems. Develop and leverage connections with bodies and individuals who make policy decisions at every level.
- Focus on the “third space” (places where youth spend time other than school and home) – availability, access, etc. – programs, services, facilities, peer-to-peer opportunities. “Every child should have somewhere to go,” in keeping with the Icelandic model of prevention (see References Section).
- Actively engage youth in shaping and making decisions about programs, supports, and investments that affect them – “nothing for me without me.”

Data and Evaluation

- Create systems to gather, maintain and make accessible timely data and information to:
 - inform new or existing collaborative efforts,

THEMES AND ACTION AREAS

- provide a regional portfolio of activities and opportunities both as a resource and to continuously assess capacity and identify gaps and emergent or changing trends,
- provide easy access to relevant tools, materials, resources, and training opportunities,
- provide audience-specific navigation to meet the needs of diverse users,
- track data about region-level efforts and results, and
- highlight local efforts.
- Develop and maintain a shared scorecard for prevention efforts.
- Create profiles of all relevant and available data sources and a master list of the data communities say they need to remain relevant and strategic around their prevention efforts. Use these data to develop a framework to address data equity concerns and prioritize and fill gaps around data needs.
- Develop ways to measure and communicate the value of the network – and perhaps “prevention” in general.
- Develop, maintain, and communicate with great transparency the results and outcomes of individual and group efforts.

Resources and Capacity Building

- Define expectations, roles, and responsibilities among and between partners to ensure efforts around common goals are mutually reinforcing, efficient, appropriate, and impactful.
- Convene and support conversations about change in how partners work together, including when to diversify and when to specialize, when to work independently and when to work with others, and how to work smarter, not harder.
- Seek understanding of interests and pressure points for partners and address areas of need as appropriate.
- Provide needed and appropriate organizational and systems supports to partners (i.e., look for financial and program overlaps, support joint development efforts, provide job descriptions, etc.).
- Identify and connect with other networks, coalitions, organizations, and partners who have a role to play in supporting the well-being of youth and young adults to explore ways to be, or stay, mutually reinforcing.

THEMES AND ACTION AREAS

- Identify and partner with statewide organizations to address every level of the Vermont Prevention Model, using the same language and ensuring strategies and tactics are appropriate to their purposes.
- Engage with smaller organizations and community efforts and explore ways to be supportive and work together.
- Develop and support efforts that focus on the built environment and infrastructure of communities and its role in the health and well-being of youth and young adults.
- Address pandemic recovery as it relates to substance use prevention.
- Shine a spotlight on the need for an integrated, comprehensive funding strategy for prevention activities that can provide surety and continuity for communities and providers – including a state-level funding strategy that is stable, adequate, and not so dependent on the types of federal funds available.
- Develop strategies with funders to modify practices to meet current conditions better, align with the region's needs, and provide access equitably to a variety of local partners.
- Identify resources available for communities and organizations to address concerns and anticipated impacts on youth from retail sales of cannabis.
- Develop and maintain enough structure that the network is something partners look forward to being part of, not something to wonder about or ignore.

TIMELINE

SEQUENCING ACTIONS ON A TIMELINE

The strategic timeline was built to leverage five practices:

- 1 **Affording urgency to opportunities and threats**
- 2 **Respecting the growth phases of collaboration development**
- 3 **Continually demonstrating its value**
- 4 **Remaining driven by its members**
- 5 **Practicing good project management techniques**

The timeline is organized and sequenced in three categories:

Collaborative Actions & Initiatives (at levels of VT Prevention Model)

Functions & Capacity (access to data, resources, information, materials)

Engaging & Unifying the Region (partners, strategies, timing, advocacy)

	Collaborative Actions	Functions & Capacity	Engaging & Unifying the Region
2021 - 2022 Launch & Build Connections	Amplify Youth Voice. Prepare for the retail cannabis market. Increase or better focus capacity and capability to influence or generate policy. Address pandemic recovery as it relates to substance use prevention.	Build and populate a data platform. Develop and maintain a scorecard for the network. Develop a monitoring process to track progress on elements of the strategic plan. Explore grant-making options.	Facilitate, convene, or support workgroups to implement the strategic plan. Design and implement structured, meaningful events for multiple audiences. Connect with existing and potential partner agencies and organizations. Clarify relationships among and between other networks, coalitions, collaborations, and initiatives at the local, regional, and statewide levels in order to support and leverage one another.

TIMELINE

	Collaborative Actions	Functions & Capacity	Engaging & Unifying the Region
2022- 2023 Transition, Growth, and Alignment	Develop a framework to address disparities through an equity lens. Focus on "third space" – availability, access, etc. Develop an integrated, comprehensive funding strategy for prevention activities. Create and emphasize prevention language that speaks to root causes. Implement new activities and initiatives.	Develop a framework to address data equity concerns. Develop and maintain a shared scorecard for prevention efforts. Support grant-making process. Develop ways to measure the value of prevention.	Convene a workgroup to design a long-term governance structure for the network. Propose shared measures and universal feedback processes to ensure consistency of data. Develop a mission statement for the network. Develop strategies with funders to modify practices on both sides of the funding relationship. Actively engage in grant-making.
2023 - 2024 Adjust, Stabilize, and Leverage	(Begin to) pilot and evaluate needed systems-level changes identified in prior years. Explore ways to better coordinate and align programming – and how that might change how partners work. Implement new activities and initiatives.	Conduct key partner interviews and surveys about the network's efficiency, effectiveness, appropriateness, and value. Evaluate the network's relationship with its fiscal agent. Evaluate the value of the network.	Actively engage in grant-making. Launch permanent governance structure.
2024 - 2025 Responsive Sustainability	Scale or replicate promising pilots. Implement new activities and initiatives.	Conduct surveys and compile data as needed to support the strategic planning process.	Design a process to prepare a new five-year strategic plan.
2025 - 2026 Evaluate and Create the Next Five-Year Strategic Plan	Continue earlier actions and initiatives as needed and appropriate. Conduct a region-wide process to create a new five-year plan. Implement new activities and initiatives.	Support strategic planning process. Evaluate network governance, operating, staffing, and relationship with the fiscal agent and make recommendations for changes.	Implement recommended changes for operations, staffing, and relationship with a fiscal agent.

Note: Every year, there will be activities that comprise a continuous effort, activities that require several years to be fully developed and implemented, and perhaps some one-time efforts. A status report on all initiatives should be prepared and reviewed annually to carry the appropriate action and capacity into the following year.

GOVERNANCE & OPERATIONS

The following recommendations about how the network should operate and be governed are based on community input from the planning process, best practices and learnings from other local network development, and the nature of the network's primary function.

Three separate workgroups recommended values and principles the network should use during the planning process to guide its actions and decision-making.

OVERARCHING PRINCIPLES

- 1 Engage the whole community
- 2 Keep youth at the center
- 3 Stay data-driven and informed
- 4 Maintain focus on equity
- 5 Use appropriate metrics to measure the impact
- 6 Allocate resources fairly and as informed by shared priorities
- 7 Advance the shared vision
- 8 Build on strengths and prior achievements
- 9 Elevate the field and science of prevention

BEST PRACTICES OR CHARACTERISTICS OF THE NETWORK FUNCTION

Informal enough to build trust and encourage engagement.

Formal enough to carry out the work defined in the strategic plan.

Develop and maintain enough structure that the network is something partners look forward to being part of, not something partners wonder about or ignore.

Key state agencies and departments need to be on board and have broad representation from various sectors across the region.

Youth must be included on some kind of steering committee – and compensated for their time.

Balance of power on the committee, with appropriate representation.

GOVERNANCE & OPERATIONS

The network in development in Northwest Vermont focuses on connecting, strengthening, and aligning many strategies and efforts that support the health and well-being of youth and young adults through a comprehensive substance misuse prevention model. The efforts are twofold. First, it will connect many people and organizations in ways they are not yet connected. And second,

the network will also provide an organizing structure and capacity to support multiple, independent organizations, networks, coalitions, and individuals, and will help align and leverage their efforts for greater impact.

In this process, the network will find ways to effectively provide services needed by many in an efficient, effective, and accessible manner and maintain the balance of efforts among three key elements that must be in place to move the community's shared vision forward.

GOVERNANCE & OPERATIONS

Prevention Center for Excellence

NORTHWEST VERMONT REGIONAL PREVENTION NETWORK

COMMON AGENDA

Northwest Vermont Regional Prevention Network supports community efforts to ensure that all youth and young adults have equitable access to a responsive, comprehensive, coordinated, and mutually reinforcing system of prevention programs and activities, and that the region is unified around a holistic approach across all levels of the Vermont Prevention Model.



KEY ELEMENTS

**Easily accessible, affordable
and responsive**

(services, programs, and activities)

**Efficient, effective
and impactful**

(strategies and tactics)

**Accountable, adequately
resourced and sustainable**

(operating and governance structures)



GOALS

A formalized process to secure, amplify, and use youth voice to drive or influence efforts.

Universal feedback processes.

Appropriate youth compensation options.

Shared measures and priorities

Shared meetings and monitoring.

Integrated, coordinated, and aligned scheduling and programming.

Mutually reinforcing activities that extend to all levels of Vermont Prevention Model.

Responsible monitoring and oversight.

Operational MOUs.

Multi-year funding agreements.

An overarching strategic plan with timely reviews and revisions as needed.

Appropriate core capacity and infrastructure supports.

GOVERNANCE & OPERATIONS

Given what people want this network to do, how they want to see conditions change, and what would keep them engaged, it is clear that the operating structure that best represents the needs and will of the community must be defined and realized over time. And the effectiveness of any operational structure will require early, sufficient, and continued **backbone capacity**. Core backbone functions include: advancing shared vision and strategy; establishing shared measurement; aligning activities and resources; mobilizing resources and funding; and building engagement and public will (*Tamarack Institute*, see References Section).

A phased approach to network operations would include several distinct phases:

PHASE I: LAUNCH AND TRANSITION (DURATION 12 – 18 MONTHS)

United Way's Internal Planning Team began recruiting individuals in August 2021 to help launch the network. During the wrap-up of focus groups and workgroups, the planning team started talking to people about their continued interests and how they could stay engaged. At the end of September, all individuals who provided input to the plan received a thank-you letter that included a summary of the planning activities, highlights of the Strategic Plan's Year 1 priorities, next steps for launching the network, and an invitation to stay engaged in whatever ways are meaningful and of interest to them.

In September, additional meetings were held with other individuals and groups across the region to review the plan and explore ways to get involved or stay informed. The combination of these efforts should help solidify a core group of partners interested in the work and the launch of the network. Plans are underway to host the first meeting of the Regional Prevention Network in November. Part forum and part working sessions, this meeting will formally begin the work on the strategies outlined in the plan.

After the launch, some combination of regular meeting times, network updates, topic-specific events, and other strategies outlined should build both momentum and the numbers of individuals aware of the network's existence and who have decided to engage with it at some level. All meetings, updates, and events will be open to all, with dates communicated widely.

The network will launch with adequate backbone capacity to support the early implementation of the strategic plan and all the actions and efforts identified on the first-year timeline. Toward the end of the first year, the backbone will conduct a survey, prepare a report card, and summarize how and when the entire network or workgroups made decisions. The network will use this information to help decide their need and readiness to develop a more formal, permanent governance structure, or if current operations should be continued or adjusted.

GOVERNANCE & OPERATIONS

PHASE II: FORMING AND FORMALIZING (DURATION 12 – 18 MONTHS)

When appropriate, and with support from or through the backbone, a workgroup of individuals actively engaged with the network will propose a permanent governance structure, mission, and charter for consideration at an open network meeting. With agreement on the network structure and mission, a transition plan and timeline will be completed.

PHASE III: SUSTAINING (ONGOING)

Transition to a permanent governance structure is made, with on-going evaluation and adjustments as needed and appropriate.

EVALUATION

The Regional Prevention Network will need to track and evaluate its performance each year to assess the progress, status, and impact of the network (see framework below). These measures can be shared with partners and communities as part of a network scorecard that will be developed during Year 1.

After Year 1, the network will develop a separate set of performance measures for assessing the outcomes and impact of specific prevention efforts and of the collective prevention strategies implemented by and through the network. Those measures for assessing performance of prevention work across the region are not included in the Framework below.

The Evaluation Framework for assessing the progress, status, and impact of the Regional Prevention Network each year includes:

- 1** A Network Logic Model demonstrating the overall theory of change by mapping inputs (in terms of the resources needed for the network functions) as well as network activities, outputs, and outcomes.
- 2** A set of recommended performance measures for the Regional Prevention Network to assess performance and progress. The measures are organized within the Results Based Accountability™ framework (see References) and will track the quantity and quality of the network activities (*How much are we doing?* and *How well are we doing the work?*), and the impact of the work (*Is anyone better off?*). This list is not comprehensive but can serve as a starting point for network self-assessment.

LOGIC MODEL ELEMENTS	INPUTS Resources to do the work	ACTIVITIES The work being done	OUTPUTS Direct products of the work	OUTCOMES Beneficial impacts of the work
Performance Measure Categories		How well are we doing it?	How much are we doing?	Is anyone better off?

NETWORK LOGIC MODEL

Prevention Center of Excellence: Northwest VT Regional Prevention Network

INPUTS	ACTIVITIES	OUTPUTS	OUTCOMES
Resources to do the work	The work being done	Direct products of the work	Beneficial impacts of the work
PARTICIPANTS <ul style="list-style-type: none"> Prevention partners Youth/Young adults Representatives from additional sectors identified by Community Anti-Drug Coalitions of America (CADCA) PARTNERSHIPS <ul style="list-style-type: none"> ADAP/VDH Other PCEs Regional or statewide networks VT Substance Misuse Prevention Oversight and Advisory Council Funders FUNDING <ul style="list-style-type: none"> For network functions/operations For the network to use to support its prevention work/strategies BACKBONE <ul style="list-style-type: none"> Fiscal agent Staff Space Technology Materials Communication expertise and tools Contact list TOOLS <ul style="list-style-type: none"> Strategic Plan Logic Model VT Prevention Model Strategic Prevention Framework (SAMHSA) 	CONVENE & FACILITATE <ul style="list-style-type: none"> Convene network meetings, steering committee, and working committees Organize activities around a strategic plan that is updated and replaced as needed Engage youth and young adults in network and prevention strategies Align strategies and collaborative projects for primary and secondary prevention at each level of the VT Prevention Model Identify and implement (and/or support) strategies to reduce inequities, barriers, disparities Fund prevention and intervention strategies OUTREACH & ENGAGEMENT <ul style="list-style-type: none"> Community outreach & education Convene community conversations Connect to regional and statewide partners COMMUNICATIONS <ul style="list-style-type: none"> Design and implement communications/media plan to educate the community Promote and expand the field of prevention DATA & EVALUATION <ul style="list-style-type: none"> Review regional data Evaluate prevention systems and strategies Establish feedback loops with partners, youth/young adults, community members Maintain scorecard Compile and share data RESOURCES & CAPACITY <ul style="list-style-type: none"> Host information and resources Coordinate training and technical assistance as needed Set priorities Identify best practices* ADDITIONAL BACKBONE FUNCTIONS <ul style="list-style-type: none"> Budget management Grant reporting Identifying funding opportunities Coordinate regional and/or collaborative grant applications Work with ADAP and others to ensure sustained funding (for network backbone and for prevention work) 	# OF PARTNERS ENGAGED IN NETWORK <ul style="list-style-type: none"> # of youth and young adults participating in network # of youth and young adults providing input to the network # of regional and statewide partners connected to the network # OF CONVENINGS: <ul style="list-style-type: none"> Steering Committee Working committees Public # ACTIONS OR STRATEGIES TO REDUCE INEQUITIES, BARRIERS, DISPARITIES <ul style="list-style-type: none"> implemented or adjusted collaboratively funded through the network # of feedback loops established \$\$ INVESTED IN PREVENTION THROUGH/BY THE NETWORK <ul style="list-style-type: none"> # grants # communications # recipients DELIVERABLES (CREATED OR UPDATED): <ul style="list-style-type: none"> Network Hub: info, data, resources, materials Network and Regional Scorecard Updated Network Plan (including structure and governance) 	INITIAL OUTCOMES <i>What happens within the network</i> <ul style="list-style-type: none"> All parties have access to resources they want and need (data, referral, information, connection) Partners connect to each other and work together Partners develop shared understanding about conditions, strengths, challenges, opportunities Partners identify leverage points for change to improve outcomes and impact Partners develop relationships and trust INTERMEDIATE OUTCOMES <i>What happens in community because of network</i> <ul style="list-style-type: none"> Community readiness and capacity for primary and secondary substance misuse prevention Use of evidence-based and promising strategies Scope, scale, and efficiency of prevention strategies Youth and young adults inform/influence prevention strategies Programs, services, and resources are accessible, inclusive, and appropriate Youth and young adults access resources and activities that are meaningful to them Providers, youth, families, and other community members have knowledge and understanding of prevention strategies and efforts in region and state Regional partners have collective voice for advocacy Network partners (internal and external) see the value of prevention work and the network itself. Stability of funding and network infrastructure (and therefore of investment and strategies) LONGER-TERM OUTCOMES <i>What happens for youth and young adults</i> <ul style="list-style-type: none"> Youth & Young Adults have optimal health and well-being, including: <ul style="list-style-type: none"> » Increased protective factors » Reduced substance misuse » Engagement and direction » Feeling valued by the community

RECOMMENDED MEASURES

Prevention Center of Excellence: Northwest VT Regional Prevention Network

HOW WELL IS THE NETWORK WORKING? Assessing the quality of ACTIVITIES	HOW IS THE NETWORK DOING? Assessing quantity of OUTPUTS	IS ANYONE BETTER OFF? HOW SO? Assessing the network OUTCOMES
<p>Representation of network participants (e.g., sector representation or stakeholder groups and characteristics recommended by CADCA, see References).</p> <p>Network participant feedback</p> <p>Accessibility and appropriateness of network functions (e.g., meetings, events)</p>	<p># of partners engaged in network</p> <p># of youth and young adults participating in network</p> <p># of youth and young adults providing input to the network</p> <p># of regional and statewide partners connected to the network</p> <p># of convenings:</p> <ul style="list-style-type: none"> • Steering Committee • Working committees • Public 	<p>INITIAL OUTCOMES <i>What happens within the network</i></p> <ul style="list-style-type: none"> • Network participant feedback <p>INTERMEDIATE OUTCOMES <i>What happens in community because of network</i></p> <ul style="list-style-type: none"> • Network partner feedback • Youth and family feedback • Scope and scale of prevention strategies across the VT Prevention Model • Adequacy and stability of funding for network infrastructure • Resources shifted upstream (from crisis to prevention efforts) <p>LONGER-TERM OUTCOMES <i>What happens for youth and young adults</i></p> <ul style="list-style-type: none"> • Indicators of Youth & Young Adults health and well-being (overall and by subpopulations): • Rates of protective factors • Rates of substance misuse • Youth reports of feeling valued by community

BUDGET

The proposed budget for the first five years of the Regional Prevention Network is designed to support the implementation and development of an active, collaborative, inclusive network of partners across the region of Northwest Vermont.

The budget reflects anticipated expenses for the network to achieve the work outlined in the 5 Year Strategic Plan. The budget for Year 1 has highest costs due to greater need for backbone structure and support as the network is launched and begins work; this includes the need for continued strategic planning as well as building the network website and data platform (which are priorities for Year 1). The capacity and resources needed for some areas of the work may not be easily quantified at this point but will become clearer as the plan is implemented.

PREVENTION CENTER OF EXCELLENCE: NORTHWEST VERMONT REGIONAL PREVENTION NETWORK

NETWORK EXPENSES	2021-2022 YEAR 1	2022-2023 YEAR 2	2023-2024 YEAR 3	2024-2025 YEAR 4	2025-2026 YEAR 5
Backbone Capacity					
Network Convening & Facilitation	20,750	20,750	18,675	16,808	15,127
Action Teams Support & Facilitation	15,800	17,380	19,118	21,030	23,133
Outreach & Engagement	12,500	5,000	3,500	3,850	3,850
Communications	8,000	8,800	9,680	10,648	11,713
Grant Making	7,000	7,210	7,426	7,649	7,879
Grants Management & Reporting	5,000	5,500	6,050	6,655	7,321
Personnel Fringe	20,715	19,392	19,335	19,992	20,706
Contracts					
Consultants	37,300	10,000	12,000	12,200	20,300
Website Development & Maintenance	5,000	2,000	2,200	2,420	4,662
Marketing	3,000	3,300	3,630	3,993	4,392
Operating Expenses					
Website Hosting	300	330	563	399	639
Materials & Supplies	500	550	605	666	732
Local Travel	500	700	770	847	932
Events	2,000	2,200	2,420	2,662	2,928
Training	1,000	1,100	1,410	1,351	1,686
Youth & Volunteer Stipends	6,000	6,600	7,260	7,986	8,785
Network Initiatives & Projects	20,000	25,000	27,500	30,250	33,275
Overhead	16,535	13,581	14,214	14,941	16,806
Total	181,900	149,393	156,356	164,346	184,865

BUDGET NOTES

As of September 30, 2021:

- Budget for Year 1 exceeds currently committed funding for Year 1; the network will need to secure additional funds to support the full scope of work.
- Backbone staffing requirements may decrease in Year 2 or 3 as the network establishes structure, governance, and leadership.
- Budget assumes 10% increase each year for most expenses to account for COLA, other increased costs, and/or expanded work.
- Budget does not include funds that will be granted out through the network (but does include costs of the grant-making process).
- Budget does not include funds that network participants receive from other sources to support prevention work (although it does include funds that can be used for collaborative action and initiatives among network partners).

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PARTNERS FROM ADAP & PREVENTION CENTERS OF EXCELLENCE

Lori Uerz, Vermont Department of Health
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Amanda Froeschle, Vermont Department of Health
Melanie Sheehan, Mt. Ascutney Hospital, Mt. Ascutney Prevention Partnership
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Crystal Lampman, Franklin County Caring Communities
Holly Morehouse, Vermont Afterschool
Melanie Needle, Chittenden County Regional Planning Commission
Mariah Flynn Sanderson, Burlington Partnership for a Healthy Community

YOUTH FOCUS GROUPS AND/OR WORKGROUP SESSIONS

29 youth and young adults participated (without having to provide their full names)

Several youth-focused organizations cohosted focus groups and invited youth and young adults to participate, including:

- Spectrum (special thanks to Christina Brown at the Drop-In Center)
- King Street Center (special thanks to Joe Ruggles)
- USCRI Vermont (US Committee for Refugee and Immigrants) (special thanks to Phub Lama)

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PARTICIPANTS IN PROVIDER FOCUS GROUP AND/OR WORKGROUP SESSIONS

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Heather Bedell, Champlain Valley School District
Amanda Biggs, Building Bright Futures
Beverly Boget, Let's Grow Kids
Marisa Bolognese, Prevention Works!VT
Amy Brewer, NMC Franklin Grand Isle Tobacco Prevention Coalition
Chad Butt, Mentor VT
Lynn Camara, Champlain Valley School District
Ruth D'Angelo, Howard Center
Heather Danis, Vermont Department of Health
Kimberley Diamond, Big Brothers Big Sisters of Vermont
Courtney Farrell, Lund
Amanda Froeschle, Vermont Department of Health
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Christy Gallese, Burlington Afterschool Director
Jess Graff, CVOEO Franklin Grand Isle Community Action
Justin Graham, RISE VT Chittenden Count
Heather Getty, Northwestern Counseling and Support Services
Michael Hill, Jr., University of Vermont
Justin Hoy, Essex CHIPS
Linda Johnson, Prevent Child Abuse Vermont
Susannah Kerest, King Street Center
Sarah Kleinman, University of Vermont Extension/PROSPER
Emily Klofft, Northwest Regional Planning Commission
Jon Kuypers, Greater Burlington YMCA
Crystal Lampman, Franklin County Caring Communities
Cam Lauf, Turning Point of Chittenden County
James Lockridge, Big Heavy World
Sara Mabley, Mount Mansfield Unified Union School District
Krista Marzewski, Turning Point of Chittenden County
Matt Meunier, Champlain Valley School District
Heather Moore, Franklin Northeast Supervisory Union
Tony Moulton, Champlain Valley School District, Connecting Youth
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Melanie Needle, Chittenden County Regional Planning Commission
Steve Ness, Prevent Child Abuse Vermont
Ryan Nest, Burlington School District
Kate Nugent, Winooski Partnership for Prevention
Katherine O'Day, Youth in Transition
Ashlie Olio, Maple Run Unified School District
Susanne Parent, Our Community Cares
Eliza Pickard, Greater Burlington YMCA
Liese Reagan, Grand Isle Mentoring
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Suzanne Skaflestad, Winooski Afterschool Director
Denise Smith, NMC Blueprint
Vicky Smith, King Street Center
Jill Strube, Big Brothers Big Sisters of Vermont
Jessica Summer, Milton Community Youth Coalition
Kayla Tatro, DREAM, Inc.
Amy Wenger, Franklin County Home Health

PARTICIPANTS IN INTERVIEWS AND/OR FOCUS GROUP WITH FUNDERS, POLICY MAKERS, AND COMMUNITY LEADERS

Erin Armstrong, UVM Medical Center Community Health Improvement
Charlie Baker, Chittenden County Regional Planning Commission
Jane Helmstetter, Vermont Agency of Human Services
Mark Hughes, Racial Justice Alliance
Ellen Kane, Vermont Catholic Community Foundation and Fanny Allen Foundation
Steve Leffler, University of Vermont Health Network
Mark Levine, Vermont Department of Health
Marielle Matthews, City of Burlington
Susie Posner-Jones, UVM Medical Center Foundation
Kristin Prior, Vermont Agency of Human Services
Sarah Waring, Vermont Community Foundation

THE STRATEGIC PLANNING PROCESS WAS DESIGNED AND FACILITATED BY UNITED WAY'S INTERNAL PLANNING TEAM

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Amy Carmola, United Way of Northwest Vermont
Amy Livingston, Pacific Institute for Research and Evaluation (PIRE)
Kim Gleason, Northwest Regional Planning Commission
Sawyer Zundel, Champlain College

REFERENCES

The following references include sources and materials that informed the Strategic Planning process and/or can inform the future work of the Regional Prevention Network.

STRATEGIC PLANNING PROCESS MATERIALS & SUMMARIES

These documents were created for use during the Strategic Planning process and will be shared in future as part of a public platform for the Regional Prevention Network. In the meantime, United Way can provide electronic copies upon request.

- Overview of Strategic Planning Process
- Focus Group Facilitator Slides
- Focus Group Summaries
 - » Providers
 - » Youth & Young Adults
 - » Funders, Policy Makers, and Community Leaders
- Lessons Learned from Strategic Planning Process

VERMONT DEPARTMENT OF HEALTH RESOURCES

Vermont Department of Health Division of Alcohol & Drug Abuse Programs (ADAP)

www.healthvermont.gov/alcohol-drugs

2020 Vermont Prevention Inventory Report

www.healthvermont.gov/sites/default/files/documents/pdf/ADAP_Vermont-Prevention-Inventory-Report-2020.pdf

Vermont Prevention Model

www.healthvermont.gov/alcohol-drug-abuse/programs-services/how-prevention-works

Data briefs, reports, or other publications on alcohol and drug use topics, including heroin and opioids, marijuana, and overall substance use in Vermont.

www.healthvermont.gov/alcohol-drugs/reports/data-and-reports

Vermont Department of Health data and reports, including the Youth Risk Behavior Survey (YRBS), the Behavioral Risk Factor Surveillance System (BRFSS), the College Health Survey, and School Health Profiles

www.healthvermont.gov/stats/surveys

Data on substance use trends in Vermont during COVID-19 emergency including young adult substance use, alcohol sales, controlled substance dispensing, naloxone distribution, overdoses, and treatment utilization

www.healthvermont.gov/sites/default/files/documents/pdf/ADAPSubstanceUseDuringCOVIDQ1.pdf

REFERENCES

ADDITIONAL DATA SOURCES

PACE Vermont (Policy and Communications Evaluation) is a research and evaluation partnership between the Vermont Department of Health and the University of Vermont Center on Behavior & Health. Survey results from 2020 – 2021 include youth and young adult self-reports of substance use during COVID-19.

www.pacevt.org

NATIONAL GUIDES

Guide to SAMHSA's Strategic Prevention Framework

www.samhsa.gov/sites/default/files/20190620-samhsa-strategic-prevention-framework-guide.pdf

CADCA Planning Guide

www.cadca.org/resources/planning-primer-developing-theory-change-logic-models-and-strategic-and-action-plans

Information about the Icelandic Model of Prevention

planetyouth.org

journals.sagepub.com/doi/full/10.1177/1524839919849032

RESULTS BASED ACCOUNTABILITY™

Fiscal Policy Studies Institute

resultsaccountability.com

raguide.org

GUIDANCE FOR BACKBONE FUNCTIONS

Backbone Starter Guide, Tamarack Institute

www.tamarackcommunity.ca/latest/bringing-collective-impact-backbones-into-focus

Backbone Starter Guide, Collective Impact Forum

collectiveimpactforum.org/sites/default/files/Backbone%20Starter%20Guide.pdf

Guidebook for Building Regional Networks for Urban Sustainability 2.0, Plastrik & Parzen, Urban Sustainability Directors Network and Innovation Network for Communities

www.usdn.org/uploads/cms/documents/usdn-regional-network-development-guidebook.pdf

Governing by Network, Goldsmith & Eggers, Innovations in American Government, Brookings Institution Press

www.brookings.edu/wp-content/uploads/2016/07/governingbynetwork_chapter.pdf



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