Greetings from WESTERN MASSACHUSETTS
The Communities That Care Coalition’s vision is that Franklin County and the North Quabbin Region be a place where young people are able to reach their full potential and thrive with ongoing and coordinated support from schools, families, and the community.

The Communities That Care Coalition’s mission is to bring together schools, families, youth, and the community to promote protective factors, reduce risk factors, prevent substance use and other risky behaviors, and increase healthy eating and active living to improve young people’s ability to reach their full potential and thrive.
New Focus on Health Equity

In the first image, it is assumed that everyone will benefit from the same supports. They are being treated equally.

In the second image, individuals are given different supports to make it possible for them to have equal access to the game. They are being treated equitably.

In the third image, all three can see the game without any supports or accommodations because the cause of the inequity was addressed. The systemic barrier has been removed.
The goal...
Healthy behaviors
for all children and youth

Start with...
Healthy beliefs & clear standards
...in families, schools, communities and peer groups

Build...
Bonding
■ Attachment  ■ Commitment
...to families, schools, communities and peer groups

By providing...
Opportunities
Skills
Recognition
...in families, schools, communities and peer groups

And by nurturing...
Individual characteristics
## Communities That Care

### Risk Factors

<table>
<thead>
<tr>
<th>Community</th>
<th>Substance Abuse</th>
<th>Delinquency</th>
<th>Teen Pregnancy</th>
<th>School Drop-Out</th>
<th>Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability of drugs</td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability of firearms</td>
<td></td>
<td>●</td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community laws and norms favorable toward drug use, firearms, and crime</td>
<td></td>
<td>●</td>
<td>●</td>
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<td>●</td>
</tr>
<tr>
<td>Media portrayals of violence</td>
<td></td>
<td>●</td>
<td></td>
<td>●</td>
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<tr>
<td>Transitions and mobility</td>
<td>●</td>
<td>●</td>
<td>●</td>
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<td>●</td>
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<tr>
<td>Low neighborhood attachment and community disorganization</td>
<td>●</td>
<td>●</td>
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<tr>
<td>Extreme economic deprivation</td>
<td>●</td>
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</tbody>
</table>

### Family

<table>
<thead>
<tr>
<th>Family</th>
<th>Substance Abuse</th>
<th>Delinquency</th>
<th>Teen Pregnancy</th>
<th>School Drop-Out</th>
<th>Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family history of the problem behavior</td>
<td>●</td>
<td>●</td>
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<tr>
<td>Family management problems</td>
<td>●</td>
<td>●</td>
<td>●</td>
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<tr>
<td>Family conflict</td>
<td>●</td>
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<tr>
<td>Favorable parental attitudes and involvement in the problem behavior</td>
<td>●</td>
<td>●</td>
<td>●</td>
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</tbody>
</table>

### School

<table>
<thead>
<tr>
<th>School</th>
<th>Substance Abuse</th>
<th>Delinquency</th>
<th>Teen Pregnancy</th>
<th>School Drop-Out</th>
<th>Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic failure beginning in late elementary school</td>
<td>●</td>
<td>●</td>
<td>●</td>
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<tr>
<td>Lack of commitment to school</td>
<td>●</td>
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</tbody>
</table>

### Peer and Individual

<table>
<thead>
<tr>
<th>Peer and Individual</th>
<th>Substance Abuse</th>
<th>Delinquency</th>
<th>Teen Pregnancy</th>
<th>School Drop-Out</th>
<th>Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early and persistent antisocial behavior</td>
<td>●</td>
<td>●</td>
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<tr>
<td>Rebelliousness</td>
<td>●</td>
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<td>●</td>
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<tr>
<td>Friends who engage in the problem behavior</td>
<td>●</td>
<td>●</td>
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<tr>
<td>Gang involvement</td>
<td>●</td>
<td>●</td>
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<tr>
<td>Favorable attitudes toward the problem behavior</td>
<td>●</td>
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<tr>
<td>Early initiation of the problem behavior</td>
<td>●</td>
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<td>●</td>
</tr>
<tr>
<td>Constitutional factors</td>
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<td>●</td>
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</tbody>
</table>
Prioritized Risk Factors

• Community Laws and Norms Favorable to Substance Use

• Parental Attitudes Favorable to Substance Use

• Family Management Problems

• Perceived Risk of Harm from Substance Use
Communities That Care Coalition Organizational Chart

Franklin County & North Quabbin Communities, including:
- Human Services
- Youth Services
- Schools
- Higher Education
- Municipal and State Government
- Municipal and State Services
- Law Enforcement
- District Attorney
- Court System
- Hospital
- Health Care
- Mental Health
- Public Health
- Substance Abuse Prevention
- Businesses
- Economic Development
- Media
- Faith-Based Organizations
- the Recovery Community
- Parents
- Youth
- Community Members

Host: Community Action

Coordinating Council
Comprised of key leaders from many different sectors of the community; functions as governing body and assists in networking

Host: Partnership for Youth

Regional School Health Task Force

Policy and Practice Change Workgroup

Youth Involvement Initiative

Mass in Motion Steering Committee

Parent Education Workgroup

The Coordinating Council & workgroups meet approximately monthly.
The Full Coalition (all workgroups, the Coordinating Council and any interested community members) meets twice annually.
The Youth Involvement Initiative is currently under development.
Data for Decision Making

Annual Regional Teen Health Survey (all 9 public middle and high school districts in our region)

Most local teens are choosing NOT to use!
- 7 out of 10 don’t drink
- 8 out of 10 don’t use marijuana
- 9 out of 10 don’t smoke cigarettes
- 9 out of 10 don’t misuse prescription drugs
Communities that Care
Our Plan for Youth Substance Use Prevention

Implement these strategies...
- Provide education on effects of substances on developing brain and local policy implications (including Physiology of Addiction video)
- Conduct alcohol compliance checks, coordinate with tobacco, paraphernalia and other checks
- Provide alcohol beverage server training
- Promote Rx drug drop boxes and Take-Back Days
- Strengthen partnership with Recover Project & work to become a sober-friendly community

Build a strong youth involvement component to CTC
- Identify and connect existing youth groups throughout the region
- Provide training and leadership development
- Lead social norms marketing and social marketing campaigns
- Lead youth advocacy for municipal policies that support substance use prevention, healthy eating and active living

Conduct the annual Teen Health Survey
- Support evidence-based prevention education (LifeSkills for all MS students)
- Support Screening, Brief Intervention & Referral to Treatment (SBIRT for all HS students)
- Support best practices in school policies relating to student substance use
- Support the work of the other CTC workgroups

Support and promote evidence-based parent education programs
- Promote the importance of family dinners & family connection
- Provide positive, educational, evidence-based messaging for parents

...to address these risk factors...
- Decrease laws and norms favorable to drug and alcohol use
- Decrease low perception of harm from drug use
- Decrease parental attitudes favorable to drug and alcohol use
- Decrease family management problems

...in order to change these behaviors.
- Decrease youth alcohol use and binge drinking
- Decrease youth cigarette use and vaping
- Decrease youth marijuana use
- Decrease youth misuse of prescription drugs

Improvements in physical & mental health, youth violence, risky sexual behavior, school success and overall healthy youth development and health equity.
Regional School Health Task Force

Conduct the annual Teen Health Survey

Support evidence-based substance use prevention education (LifeSkills curriculum for all middle school students)

Support screening, brief intervention, and referral to treatment (SBIRT for all high school students)

Support best practices in school policies relating to student substance use

Support the work of the other CTC Workgroups

Efforts to improve school climate and increase school connectedness

Evidence-based suicide prevention programs (LIFELINES and SOS)

Evidence-based violence prevention programs (Second Step and Steps to Respect)

School gardens

School to work opportunities

Safe Routes to School

Smart cafeterias

Physical activity during school day

Community use of public spaces for physical activity

Mindfulness, meditation, yoga and stress reduction for students

Settings to strengthen school-home-community connections

Access to healthy local foods in schools

Health education

Workplace wellness

Farm to school

Parent networks

Advisories

Responsive Classroom

Peer mentoring

Narcan in school nurses’ offices

Social marketing and social norms marketing campaigns in Schools

Social justice work

Restorative practices

Training Active Bystanders

Peer Mediation
8th grade current substance use

Alcohol

Marijuana

Cigarettes

Prescription drugs

FC/NQ PNA. Data for original 5 districts.
Collective Impact is the commitment of a group of important actors from different sectors to a common agenda for solving a specific social problem.

Traditional Approaches Are Not Solving Our Toughest – Often Complex – Challenges

- Funders select **individual grantees**
- Organizations **work separately** and compete
- **Evaluation** attempts to **isolate** a particular organization’s impact
- Large scale change is assumed to depend on **scaling organizations**
- Corporate and government sectors are often **disconnected** from foundations and nonprofits
Imagine a Different Approach – Multiple Players Working Together to Solve Complex Issues

Collective Impact

- Understand that social problems – and their solutions – arise from **interaction of many organizations within larger system**
- **Cross-sector alignment** with government, nonprofit, philanthropic and corporate sectors as partners
- **Organizations actively coordinating** their action and sharing lessons learned
- All working toward the **same goal and measuring the same things**
Communities that Care Embodies the Five Conditions for Collective Impact

- Common Agenda
- Shared Measurement
- Mutually Reinforcing Activities
- Continuous Communication
- Backbone Organizations
Our Approach

Changes in policies, systems, and the environment

evidence-based strategies → decrease local risk factors → increase local protective factors → behavior change
The “Communities That Care” Coalition Has a Set Structure Including 2 Co-Backbone Organizations, a Coordinating Council and Working Groups

Franklin County / North Quabbin Community*

Co-Backbone: Community Action  
Co-Backbone: Partnership for Youth/FRCOG

Coordinating Council

Policy and Practice Change Workgroup  
Parent Education Workgroup  
Mass in Motion Steering Committee

Regional School Health Task Force

Workgroups and Coordinating Council meet monthly while the full coalition (workgroups, coordinating council, and community) meets twice annually

*Source: FSG Casework: Franklin County: Communities that Care (CTC), 2011
Cascading Levels of Collaboration Simultaneously Produce Breadth and Depth of Impact That Combine to Amplify Impact

Depth of Impact through Vertical Alignment

- Cross-sector leaders formulate a common agenda
- The core strategy then translates into key program initiatives, each with a set of workgroups
- Workgroups carry out work at the ground-level while maintaining a common focus and set of objectives

Breadth of Impact through Horizontal Coordination

- Backbones guide working groups in creating aligned and coordinated action across multiple organizations
- Groups tackle many different dimensions of a complex social problem at once
- Multi-dimensional approach amplifies impact across sectors / geographies

Adoption Beyond the Central Scope of Impact

- As working groups engage with outside organizations and share progress, the circle of alignment grows
- External stakeholders adopt new practices aligned with the effort

An initiative’s impact can reverberate throughout the system through its adoption by external stakeholders

Source: Channeling Change: Making Collective Impact Work, 2012; FSG Interviews
Current Workgroups

Coordinating Council

- Parent Education Workgroup
- Regional School Health Task Force
- Policy and Practice Change Workgroup
- Mass in Motion Steering Committee
Communities That Care’s Backbone Function

- Guide Vision and Strategy
- Establish Shared Measurement Practices
- Support Aligned Activities
- Mobilize Funding
- Build Public Will
- Advance Policy

_Tension between coordinating and maintaining accountability, while staying behind the scenes to establish collective ownership_
Collective Impact Efforts Were Leveraged by Gathering Funding from Multiple Sources

Since 2002, CTC has mobilized nearly $5 Million in funding from various sources

Source: Communities that Care Coalition: Community Action Plan 2010; FSG Interview and Analysis
Communities that Care

COALITION

of Franklin County and the North Quabbin

Rachel Stoler
Community Health Program Manager
Partnership for Youth Co-coordinator

Corey Sanderson
Minister, Second Congregational Church
Interfaith Council of Franklin County