

Needs Assessment Report

Ohio's Strategic Prevention Framework – State Incentive Grant (SPF SIG)
HANCOCK COUNTY

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Community Profile

Hancock County has an estimated population of 75,056. The majority of the population is Caucasian (94.7%), with a small African American population (1.8%). Approximately 1.5% of the population identifies as multiracial. A small percentage (4.6%) of the county's population reports being of Hispanic or Latino origin.

English is the predominant language, with 4.7% of residents reporting that another language is spoken at home.

Among residents above 25 years of age, 90.7% have a high school diploma and 24.4% have a Bachelor's degree or higher. The high school graduation rate is above that of the state rate (87.4%). However, the percentage of higher education degrees in the county is similar to that of the state (24.1%).

The median household income (2006-2010) is \$49,070, which is slightly above the state median of \$47,358.

The five year (2006-2010) estimated percentage of the county population below poverty level is 11.4%. This is better than the estimated state percentage (14.2%).

Note: Data sources include the 2011 Census and the 2006-2010 American Community Survey.

Introduction

The community's biggest issue related to substance abuse:

In order to put the misuse of prescription drug abuse into context for Hancock County, the prevalence was calculated using the epidemiologic approach published by the National Substance Abuse and Mental Health Services Administration.

Hancock County (Ohio) has determined that the focus of effort toward developing its Strategic Prevention Framework (SPF Team) will be to address prescription drug misuse among 18-25 year-old young adults. We see evidence in several inter-related areas suggesting that this focus is appropriate.

First, in June 2012, the Hancock County Prescription Drug Abuse Task Force (HCPDATF) surveyed 18-25 year-old young adults in Hancock County asking a variety of questions about substance use and misuse. The HCPDATF received responses from a total of 1,169 individuals¹. Relevant findings include:

- Approximately 6% of 18-25 year-old young adults had misused prescription drugs within the last 30 days.²
- More than 14% of respondents indicated indifference toward the misuse of prescription drugs.

Also, data collected on the national and regional level provides the appropriate context for understanding the local data focused on 18-25 year olds. According to the Ohio Department of Health (2010), unintentional drug overdose is a leading cause of injury-related deaths and nearly half (45%) of fatal unintentional overdoses involved prescription drugs (specifically, prescription opioids). A review of local death statistics provided by the Hancock County Health Department has revealed 10 deaths in 2010 attributed to unintentional drug overdose. Applying guidelines presented in a study conducted by the National Substance Abuse and Mental Health Services Administration (SAMHSA) in 2012, the death statistics from Hancock County imply that, in Hancock County, there are 50 individuals in treatment for misuse of prescription drugs, 160 emergency department visits for misuse of prescription drugs, 650 individuals who misuse prescription drugs, and 4,125 non-medical users of prescription drugs. For these reasons, the SPF Team believes addressing the misuse of prescription drugs among 18-25 year-old young adults is a priority.

Two counties adjacent to Hancock County (Hardin and Crawford) have the highest rates of death attributed to unintentional drug overdose in Ohio. According to the 2012 SAMHSA study, most of the recent increase in overdose deaths can be attributed to the increases in prescription drug misuse. We

¹ Not all items on the survey were relevant to all respondents. Thus N sizes varied for some analyses.

² One question asked specifically about using prescription opioid painkillers *not prescribed to the respondent* in the last 30 days.

feel that the best way to prevent the possible spread of the problems experienced by these neighboring counties is to focus now on preventing any increases in prescription drug misuse.

A description of the population being targeted for SPF SIG project:

Hancock County will target its efforts of the Strategic Prevention Framework toward its 18-25 year-old young adult population. This represents 10.3% (7,687) of the population of Hancock County. The SPF Team believes this is a manageable and appropriate size of population to target.

Sub-target/underserved population(s) chosen for SPF SIG project:

Hancock County will not be implementing the SPF with a sub-target/underserved population.

Description of sub-target/underserved population(s):

N/A

Recent Community Needs Assessments

Total Number of Needs Assessments: Three

Needs Assessment:	Hancock County Community Health Assessment
Year Conducted:	2011
Sponsoring Agency	Blanchard Valley Health Systems/Hancock County ADAMHS Board
Findings Relevant to 18-25 Year Olds:	<ul style="list-style-type: none"> In the adult findings of the Assessment 9% of those who misused medications were under age 30. This was the highest of all the age groups. In youth, 9th-12th graders or 15-18 year olds, 9% reported ever having misused a prescription drug. Four percent (4%) of adults had used medication not prescribed for them or they took more than prescribed to feel good or high and/or more active or alert during the past 6 months. When asked about their frequency of medication misuse in the past six months, 6% of Hancock County adults who used these drugs did so every day and 29% did so less than once per month. Seven percent (7%) of youth misused prescription drug not prescribed for them or took more than prescribed to feel good or get high at some time in their lives, increasing to 13% of those ages 17-18.
Findings Relevant to Community Readiness:	<ul style="list-style-type: none"> N/A

Needs Assessment:	National Survey on Drug Use and Health
Year Conducted:	2010
Sponsoring Agency	Substance Abuse Mental Health Services Administration
Findings Relevant to 18-25 Year Olds:	<ul style="list-style-type: none"> (In a national sample that included those aged 12 and older) 70% of those reporting non-medical use of pain relievers in the past 12 months got them, stole them or bought them from a friend or relative. 17% received them from a doctor, 4% from a drug dealer.
Findings Relevant to Community Readiness:	<ul style="list-style-type: none"> N/A

Needs Assessment:	Ohio Substance Abuse Monitoring Network Report for the Toledo/Northwest Ohio region
Year Conducted:	June 2011-January 2012
Sponsoring Agency	Ohio Department of Alcohol and Drug Addiction Services
Findings Relevant to 18-25 Year Olds:	<ul style="list-style-type: none"> • While the sample was 40 "OSAM" drug users, roughly half of the sample size was 18-25 year olds • As many people reported using Rx opiates (29 people) as alcohol, both being more frequent than marijuana use (20 people) and heroin (16 people). • On a scale of 0-10 (10 being highly available), respondents reported that availability of Rx opiates was a "10" and Rx stimulants was an "8" for individuals under 18 years of age. • Adderall® was the drug of choice for youth age 18-25 citing the need to focus on studying, working or cleaning. Of this group, they reported that they were able to obtain the medication from others who were prescribed it and that everyone in high school knew who to get it from. No one reported having to go to the doctor to fake symptoms. • Prescription drugs are reported as "easy to get" in the Northwest Ohio region. A typical profile emerged from the data. Participants continued to describe the typical profile of a person misusing prescription opioids as "young; 18-25 [years old]; white females; white men. While many participants reportedly began using prescription opioids before age 18, no participant reported knowing about the withdrawal effects from these drugs. Reportedly, when used in combination with other drugs, prescription opioids are most often used in combination with alcohol, marijuana and sedative-hypnotics (benzodiazepines, barbiturates, and muscle relaxants). • Most heroin users reported that first heroin use occurred between 18-19 years of age while reporting that first use of prescription opioids occurred before the age of 18 years when in high school.
Findings Relevant to Community Readiness:	<ul style="list-style-type: none"> • N/A

Community Readiness

Community Readiness Assessment Used:

MIPH Community Readiness Survey

Community Readiness Assessment Conducted:

August 2011-November 2011

A review of the community readiness in the community, with respect to priority substance, found the following:

For **prescription drug abuse** the coalition determined that the community was in the *preparation* stage of community readiness.

Sharing community readiness findings in the community:

The results from both the adult and youth MIPH Community Readiness Survey were emailed to community leaders. These leaders comprise the SPF SIG coalition, the Hancock County Prescription Drug Abuse Task Force and the Community Partnership Council. Each committee discussed the results independently and used the data to become more aware of how Hancock County views the opiate issue.

Use of community readiness findings in strategic planning:

The SPF SIG coalition will use all of the information contained within the assessment throughout the strategic planning process. The coalition will be aware of the resources and challenges the community has as they design a strategic plan to create change.

Suggested strategies for strategic planning:

According to the Community Readiness Survey, Hancock County is in the *preparation* stage. The community knows there's a problem with prescription drugs and supports a solution, but may not be equipped with proper data and tools to solve the problem. According to the MIPH Community Readiness Survey completed in September of 2011, "*community members already perceive an ATOD; what they seem to be lacking, according to these data, is a belief that anything can be done about it. If a sense of empowerment can be increased in this community around these issues, then prevention professionals can utilize the existing awareness of the ATOD problem as well as the norms against permissiveness about the ATOD problem*". During the strategic planning process, the SPF SIG coalition will only aim to move Hancock County through the next stages of *initiation* and *stabilization*. They will focus on sustaining data collection, implementing evidence-based programming, encouraging professional development, as well as advocating for policy expansion and enforcement. This process will strengthen and sustain the resources Hancock County is already using by building upon their past successes. Community members will receive tools to learn about and accept their shared responsibility.

Plans to evaluate strategic plan strategies:

To evaluate the community readiness strategy, the SPF SIG coalition will conduct interviews and feedback sessions with the community leaders. Again, these community leaders are present in the SPF SIG coalition, the Hancock County Prescription Drug Abuse Task Force, and the Community Partnership Council. They will discuss any noticeable shifts in general attitude and behavior from the original community readiness survey.

Individual-Level

Based on the consumption data (30-day use and age of first use) analyzed, these are the community's major concerns surrounding the problem of consumption of the priority substance:

On the local survey, conducted by the ADAMHS Board, approximately 770 individuals responded to an item asking, *"During the past 30 days, on how many days did you use the prescription pain killers Oxycontin, Oxycodone, Hydrocodone or Morphine? We are asking only about the use of these drugs without a prescription from a doctor."* Of the 770 people responding to this question, 6.9% indicated misusing these prescription drugs. This is higher than the national average of 5.0% in 2011 (National Survey on Drug Use and Health).

Additionally, the local survey asked respondents who had misused prescription pain killers to indicate *why* they had first misused these drugs. Between 3% and 4% of the total sample indicated that they had used these drugs to "get high," "reduce anxiety" or "forget about their problems." This indicates a tendency with some in the community toward using these pain medications for things other than pain relief.

Based on the perceptions of disapproval data (attitudes) analyzed, these are the community's major concerns regarding the attitudes surrounding consumption of the priority substance:

The local survey asked directly about misuse of opiate drugs and identified commonly misused prescription drugs within the question.³ Overall, 82.8% of those responding to this item indicated they either disapproved or strongly disapproved of the misuse of these drugs. This high rate of disapproval can be seen as a protective factor in the community.

Based on the perceived risk/harm data analyzed, these are the community's major concerns surrounding the perceived risk/harm of consuming the priority substance:

In the local survey, 93% of the respondents indicated that misuse of drugs, including specific prescription painkillers, posed either a "moderate risk" or a "great risk." This suggests that the prevailing perception in the community is that the misuse of prescription drugs is risky.

³ The question asked about "...opiate drugs such as heroin, Oxycontin or Oxycodone?"

Priority Substance: Prescription Drug Abuse									
Data Available for Target Population									
30 Day Use									
Specific Measure: During the past 30 days, on how many days did you use the prescription pain killers OxyContin, OxyCodone, Hydrocodone or Morphine? We are asking only about the use of these drugs without a prescription from a doctor.									
Does this measure qualify as a NOMs item?					No				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
18-25 Year Old Survey	2012	18-25 year olds in Hancock County	9,000	Convenience	1,169	770	Percent who used in the past 30 days	6.9%	Percent
Age of First Use									
Specific Measure: If applicable, how old were you the first time you used OxyContin, OxyCodone, Hydrocodone or Morphine?									
Does this measure qualify as a NOMs item?					No				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
18-25 Year Old Survey	2012	18-25 year olds in Hancock County	9,000	Convenience	1,169	82	Average age of first use of user	13.6	Mean
Disapproval of Use									
Specific Measure: How do you feel about someone your age using opiate drugs such as heroin, OxyContin or OxyCodone? We are asking only about the use of these drugs without a prescription from a doctor.									
Does this measure qualify as a NOMs item?					No				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
18-25 Year Old Survey	2012	18-25 year olds in Hancock County	9,000	Convenience	1,169	1,107	Percentage reporting 'strongly disapprove' or 'disapprove'	82.8%	Percent
Perceived Risk/Harm of Use									
Specific Measure: How much do people risk harming themselves physically and in other ways when they use opiate drugs such as heroin, OxyContin or OxyCodone? We are asking only about the use of these drugs without a prescription from a doctor.									
Does this measure qualify as a NOMs item?					No				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
18-25 Year Old Survey	2012	18-25 year olds in Hancock County	9,000	Convenience	1,169	1,094	Percentage reporting 'moderate' or 'great risk'	93%	Percent

Interpersonal-Level

Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

- Acceptance
- 18-25 year-old perceptions

Specifically, the data from our local survey strongly suggests that the vast majority of 18-25 year-olds in Hancock have a high level of disapproval of the misuse of prescription pain killers. As noted, our local survey indicated that 74% saw this misuse as “totally unacceptable.”

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

Multigenerational misuse

Plans to collect that data and/or evidence:

This would be done by revising Hancock County’s data collection sources to include this group.

Based on the data gathered on social norms, these are the concerns around social norms that might contribute to priority substance use in the community:

In the survey targeting 18-25 year-old young adults completed by the HCPDATF, respondents were asked about their perception of the social acceptability of the regular misuse of opiate drugs such as heroin, OxyContin, or OxyCodone (OxyContin and OxyCodone are specific prescription drugs). Overall, 74% of the respondents indicated this was “totally unacceptable.” Thus one protective factor in this county is the fact that a strong majority of residents find misuse of prescription drugs to be unacceptable.

The local survey asked respondents for their perceptions of the frequency of misuse of prescription pain killers. Results indicated that 46% thought that the misuse of these drugs by 18-25 year olds was relatively common.

The local survey also asked directly about misuse of opiate drugs and identified commonly misused prescription drugs within the question. A total of 82% of those responding to this item indicated that they disapproved of the misuse of these drugs. Additionally, 74% of the respondents on the local survey indicated that it was “totally unacceptable” for people in their social circle to misuse prescription pain killers. Related data indicated that 76% of respondents saw the misuse of prescription pain killers as representing a “great risk” to the person misusing the drugs. This data indicates the norms in the community are that the misuse of prescription drugs is unacceptable and that a strong majority of people think the misuse of prescription drugs is risky.

Priority Substance	
Prescription Drug Abuse	
Contributing Factors Presenting in Community	
Acceptance Example	Individual opinion and social acceptance
Supporting Evidence	18-25 Year-Old Survey
Rite of Passage Example	No response
Supporting Evidence	No response
Multigenerational Use	Variety of ages turning in medications
Supporting Evidence	Medication Collection Data & OSAM Report
Public Substance Use	No response
Supporting Evidence	No response
18-25 Year-Old Perception	Opinion of risk
Supporting Evidence	18-25 Year-Old Survey
Culturally Acceptable	No response
Supporting Evidence	No response

Factors Related to Social Norms That Contribute to Consumption in Your Community
Factor 1: Acceptance
Whom does this affect/occur with?
18-25 Year Olds
Who allows this?
Peer groups, co-workers, friends, family
When does this occur?
No set time period
Where does this occur?
Homes, schools, community, workplace
How does this occur?
Peer influence and education
Under what conditions is this allowed to happen?
Need for more education and awareness concerning proper use and disposal of medications
Factor 2: Perceptions of Risk
Whom does this affect/occur with?
18-25 year-old population
Who allows this?
Peer groups, co-workers, friends, family, media
When does this occur?
No set time period
Where does this occur?
Homes, schools, community, workplace
How does this occur?
Social influence and education; community perceptions
Under what conditions is this allowed to happen?
Need more education of risks

Community-Level

Retail Factors

Retail Availability: Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

- Local Emergency Room
- Local Pain Clinic
- Local Physicians
- Local Health Clinic, Caughman Clinic

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

- Number of prescriptions written specifically for 18-25 year olds and prescribing physicians

Plans to collect that data and/or evidence:

- The data collection committee will develop a plan to collect local data specific to prescribing patterns for 18-25 year olds from local physicians. The committee will continue to gather data regarding local prescribing patterns via the Ohio Automated Rx Reporting System (OARRS). They will also encourage medical professionals to utilize the OARRS system.

Based on the data gathered on retail availability, what are the concerns around retail availability that might contribute to the misuse of prescription drug by 18-25 year-old Hancock County youth.

There is some concern about the concentration of medical facilities within the county that could be writing prescriptions for the general public.

- There are a total of four (4) urgent care facilities and one (1) pain clinic in Hancock County.
- The urgent care facilities and the pain clinic are concentrated within the city of Findlay.
 - Each of the four urgent care facilities are located on each end of the city of Findlay.
 - Blanchard Valley Hospital Emergency Department is on the south end of Findlay, Physician's Plus is on the north end of Findlay, Walk-In Urgent Care is located on the west end of Findlay, and ProMedica Urgent Care is located on the east end of Findlay.
 - The pain clinic is located at Blanchard Valley Hospital.

Priority Substance	
Prescription Drugs	
Contributing Factors Presenting in Community	
ID Issues	No response
Supporting Evidence	No response
Density	No response
Supporting Evidence	No response
Characteristics	No response
Supporting Evidence	No response
Employees	No response
Supporting Evidence	No response
Product Placement	No response
Supporting Evidence	No response
Potential Sources for Prescription Drugs	ED, Pain Management Clinics, Urgent Care, Physicians, Dentists
Supporting Evidence	Database
Retailers	Pharmacy mail-order, Online Pharmacies
Supporting Evidence	Medication Collection Data
Other	ED, Physicians, etc.
Supporting Evidence	OARRS Data, Medication Collection Data

Factors Related to Retail Availability that Contribute the Most to Availability	
Factor 1: Easy access to prescriptions	
Whom does this affect/occur with?	Users, medical community
Who allows this?	Prescribing agents, medical community
When does this occur?	During visits to medical facilities
Where does this occur?	Medical facilities
How does this occur?	Improper prescription patterns
Under what conditions is this allowed to happen?	Low competency level of prescribing agents, Low policy enforcement
Factor 2: Variety of Rx opioid sources	
Whom does this affect/occur with?	Users, community in general
Who allows this?	Indirectly, the community
When does this occur?	N/A
Where does this occur?	All over the county
How does this occur?	Rx abusers utilize several different sources
Under what conditions is this allowed to happen?	Few restrictions, little communication between sources

Social Availability Factors

Social Availability: Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

Dealer source

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

- Friends/family source
- Citizen source
- Home source

Plans to collect that data and/or evidence:

The data collection committee can gather more data about social availability by surveying those arrested for drug use, possession or trafficking and finding out where they obtained the drug.

Based on the data gathered on social availability, these are the concerns around social availability that might contribute to priority substance use in the community:

Prescription opiates are not only available through a regional retail presence, but are heavily offered through social sources as well. Interstate 75, which runs through Hancock County, creates a chute of illegal drug trafficking from the surrounding counties. In September of 2011, patrolmen found \$131,600 worth of OxyCodone, Xanax and Lortabs in a car, which set a state record for OxyCodone seizures.

Hancock County is located on a major interstate highway and is near other counties heavy with opiate activity. Five of the seven surrounding counties have a prescription opiate per capita consumption rate higher than Hancock County. Directly to the south, Hardin County has a per capita rate of 69.3, topping Hancock's rate of 45.2. One concern would be the high volume of opiate availability in the Northwest Ohio area and the possibility of more opiates entering into Hancock County territory.

The 2011 Monitoring the Future reported that 70% of 12th graders said they were given prescription narcotics by a friend or relative. This number becomes even more critical because during the Hancock county October 2011 medication collection day, 86.7% of the participants were over 45 years old. These results could imply that adults are keeping their medications longer than they have been prescribed or that they are not having automatic refills stopped. Leaving these medications in the home would allow easier access to youth and young adults.

Another trend in opiate acquisition is through senior citizens. A regional drug trend study from the OSAM June 2011-January 2012 Toledo Region report describes an increase in the buying/stealing prescriptions from seniors that were given opiates for real (or even fake) pain visits to the doctor. This may be important; however, more data is needed about social availability in Hancock County.

Priority Substance	
Prescription Drugs	
Contributing Factors Presenting in Community	
18-25 Year olds getting priority substance from...	Unlocked cabinets, improper disposal
Supporting Evidence	Anecdotal Evidence, Medication Collection Data
18-25 year olds attending gatherings with large amounts of the priority substance...	No response
Supporting Evidence	No response
Other	Sharing/selling medications
Supporting Evidence	Anecdotal Evidence
Other	Drug possession arrests, interstate drug trafficking
Supporting Evidence	Arrest/Jail Admissions Data
Other	Stealing/buying medications
Supporting Evidence	OSAM Report

Factors Related to Social Availability that Contribute the Most to Availability
Factor 1: Increase in opiate dealers
Whom does this affect/occur with?
Community in general
Who allows this?
Community in general
When does this occur?
All the time
Where does this occur?
Surrounding counties bring it back to Hancock County
How does this occur?
Opiates are more affordable and available
Under what conditions is this allowed to happen?
High drug trafficking on the interstate, several places to obtain prescription opioids
Factor 2: Acquisition of prescriptions not prescribed to the user
Whom does this affect/occur with?
Friends/family of user, senior citizens, users
Who allows this?
Friends, family, senior citizens, community in general
When does this occur?
Extra pills from a prescription, unlocked medications, sharing/selling/stealing medications
Where does this occur?
Inside homes, outside pharmacies, community in general
How does this occur?
Sharing/selling/stealing medications
Under what conditions is this allowed to happen?
Improper disposal and storage, financial stress to sell extras, ignorance of risk

Promotional Factors

Promotion: Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

N/A

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

N/A

Plans to collect that data and/or evidence:

N/A

Based on the data gathered on promotion, these are the concerns around promotion that might contribute to priority substance use in the community:

N/A

Priority Substance	
Prescription Drugs	
Contributing Factors Presenting in Community	
Local Promotion	N/A
Supporting Evidence	No response
National Promotion	N/A
Supporting Evidence	No response

Factors Related to Promotion that Contribute the Most to Availability	
Factor 1: N/A	
Whom does this affect/occur with?	
No response	
Who allows this?	
No response	
When does this occur?	
No response	
Where does this occur?	
No response	
How does this occur?	
No response	
Under what conditions is this allowed to happen?	
No response	

Organizational-Level

Capacities

Organizations currently implementing prevention strategies for priority substance:

Hancock County ADAMHS Board & Community Partnership, Prescription Drug Abuse Task Force, Family Resource Center, The University of Findlay College of Pharmacy and Health Informatics Department, Findlay City Health Department, Findlay City Police Department, Hancock County Sheriff's Office, Findlay City and Hancock County Schools, Hancock County Agency on Aging, and other local social organizations.

Opportunities for SPF SIG coalition to work with these organizations:

Members of the SPF SIG Coalition are representatives from many of the above organizations/groups. These members serve in a number of capacities from leadership roles to activity volunteering.

Types of prevention strategies currently being implemented for the priority substance in the community:

In 2009 the Hancock County Community Partnership began addressing prescription drug abuse by hosting medication collections. As the issue became an epidemic in Ohio, the Community Partnership made the decision to establish the Hancock County Prescription Drug Abuse Task Force. This Task Force is comprised of over 50 individuals from various community organizations. The Task Force is organized into 5 different committees: Education, Community Awareness, Medication Collection, Health and Legislative. Each of these committees has set priority goals to accomplish some of which include:

- **Medication Collection:** The Medication Collection Committee has been holding collection days since 2009. During the 8 collections held there have been almost 2 million units collected and destroyed. In the fall of 2011, the Committee secured a grant from the Ohio Department of Natural Resources to install two permanent collection boxes, one at Findlay City Police Department and the other at the Hancock County Sheriff's Office. These boxes are being heavily utilized by the Community.
- **Medical Community Trainings:** The Health Committee through the direction of the Senior Vice President of Medical Affairs at Blanchard Valley Hospital (also a member of our Task Force) has conducted and assisted with several presentations to hospital physicians and personnel.
- **Data Collection:** The University of Findlay Health Informatics Department developed a database for collecting, manipulating and reporting 85 pieces of information from 33 community organizations and offices. This information is used for reporting requirements, presentations and grant information.
- **Employment Drug Testing:** The Task Force is working in conjunction with the agency doing pre, post and accident employment drug testing. The committee has developed a letter and brochure that will be sent to each employee explaining substance abuse treatment options.

- Brain Power Challenge Education Program: The Education Committee reviewed and recommended to area schools the use of the Brain Power Challenge Program. Committee members developed and implemented an all-day training for middle school health teachers to explain and demonstrate the program. Committee members also presented the program to all 1st, 3rd and 5th grade teachers. Curriculum was distributed to all of these teachers for their respective grades.
- Community Presentations: The Community Committee developed an awareness presentation that describes the problem of prescription drug addiction, what the Task Force is doing and how community members can help. This presentation has been given to 22 groups, over 930 individuals. The Committee continues to revise the presentation using the data collected.
- High School Athletics: Several of the committees are working to develop an awareness program and brochures to be distributed to the high school athletic community. This information will be distributed to all schools in Findlay and Hancock County.
- Cautionary DVD: The Health Committee has developed and is producing a DVD that will be used primarily in a treatment setting for individuals who are being prescribed narcotics. This production will explain opiates, their effects on the body, signs and symptoms of addiction, safe storage and proper disposal.

Opportunities for the SPF SIG coalition to capitalize on current prevention programming to help support or buttress SPF SIG efforts:

The Hancock County Community Partnership has been in existence since 1990. Because of this long history and the Community Partnerships' credibility in the community, the Task Force has been able to introduce initiatives that have been well received.

Gaps

Gaps in prevention programming for the priority substance:

Prescription drug abuse is a fairly new issue in most communities. Most programming for this target substance specifically for 18-25 year olds has been generalized with other drugs. The Task Force will need to seek out or develop specialized programming for this target substance for 18-25 year olds.

Ways the SPF SIG coalition can fill these gaps:

Currently there is no specifically targeted prevention programming for the 18-25 year-old population in Hancock County. Family Resource Center is a credentialed prevention programming agency and has committed to working with the Task Force to identify or create prevention programming to this population. Recently, the agency hired an individual whose primary responsibility will be to focus on the 18-25 year-old population.

The Task Force is also very aware that connecting with this age group will require technology. Most millennials believe that the cell phone is vital to their everyday existence. They never leave home without their mobile device and everything they do, from getting up in the morning to making appointments, to talking to others and even ordering food, uses technology (Millennial Webinar by Derek Longmeier, Global Insight Consultant). It will be vital to connect with this age group through technology. Programs and interventions will need to be made available through social media as well as other forms of communication.

Policy-Level

Policy issues, based on gathered data that may contribute to consumption of the priority substance within the community:

As expected, most state and local policies are generalized to all ages and all types of substances. The easiest records to examine for this targeted age group are from the institutions of higher education as well as places of employment. Through the policy scan, it has become apparent that 18-25 year olds who misuse and are not in college or are unemployed are not being monitored and protected by policies as much as those who are in college or have a job. Another discovery through the scan is the spike of OVI violations in Hancock County. After 2009, violations fell 18% but then rose drastically by 50% in 2011. The Hancock County Justice Center has noted that the prescription drug admissions have tripled over 2009-2011 (Almost 50 have been 18-25 year olds). Also noted is the Hancock County Admissions involving opiates.

Policy		Number of Infractions (arrests, etc.)			
Policy Level: State, local or IHE	Description	2009	2010	2011	2012
IHE	Brown Mackie College Findlay Drug and Alcohol Policy	0	No Response	No Response	No Response
IHE	Owens Community College Findlay Campus Drug and Alcohol Abuse Prevention and Education Policy	0	No Response	No Response	No Response
IHE	University of Findlay Alcohol and Drug Policy	No Response	2	1	5
State	Ohio Revised Code 4511.19 Operating vehicle under the influence of alcohol or drugs - OVI	163	133	198	No Response
Local	Drug-Free Workplace Policy	2.3% positive	2.1% positive	No Response	No Response
Local	Hancock County Convictions of Trafficking in Drugs	82	98	132	No Response
State	Ohio Revised Code 2961.21-.24 Sentencing Reform (HB 86)	N/A	N/A	N/A	N/A
State	Ohio Revised Code 4729.51 Pill Mill Reform (HB 93)	N/A	N/A	N/A	N/A
Local	Hancock County Convictions of Drug Possession	48	77	88	No Response
Local	Hancock County Justice Center Admissions involving prescription drugs (18-25 year olds)	3	28	16	No Response

Factors Related to Policy Issues That Contribute to Consumption in Your Community
Factor 1: Lack of policy for users unemployed or not in college
Whom does this affect/occur with?
Users unemployed or not in college
Who allows this?
Community in general
When does this occur?
Usually after school
Where does this occur?
In the community
How does this occur?
Unemployment rates, few job placement programs for grads
Under what conditions is this allowed to happen?
Lack of jobs, low qualifications to be in college
Factor 2: Rising number of drugged driving
Whom does this affect/occur with?
Community
Who allows this?
Community in general, individuals
When does this occur?
All the time
Where does this occur?
All over the county
How does this occur?
Increased use of opiates and other drugs, and driving
Under what conditions is this allowed to happen?
Need for education about drugged driving
Factor 3: Rising number of prescription drug related offenses in Hancock County
Whom does this affect/occur with?
Community
Who allows this?
Community in general, individuals
When does this occur?
All the time
Where does this occur?
All over the county
How does this occur?
Increased use of prescription and other drugs
Under what conditions is this allowed to happen?
Need for education of risk, presence of addiction, increasing presence of dealers and users

Cultural Competence

Millennials (Generation Next)

Prevention Programming:

- **These prevention programs are offered to Millennials by the following group(s):**
Local University of Findlay offers social host prevention education program.
- **These programs do not specifically target Millennials, but could potentially reach them or be modified:**
Community-wide prescription drug prevention education efforts as well as a medication collection system provided by the Hancock County Opiate/Prescription Drug Abuse Task Force could be marketed via social media to engage more Millennials using SPF SIG resources.
- **Sources for program information:**
Community & Medication Collection Committees of the Prescription Drug Abuse Task Force

Expertise:

Individuals with Expertise Working with Millennials		
Name	Agency	Contact Information
Kerry Kirk	Findlay Young Professionals	members@findlayyp.com

- **Ways local expertise can be tapped into for the SPF SIG process:**
Findlay Young Professionals is a newly formed group focused on networking, leadership and serving the community. Consisting and led by a number of Millennials, the SPF SIG coalition can use their skills to learn how to market and reach this age group.
- **Sources for expertise information:**
Organizational scan of the community

Gaps:

- **Perceived gaps in prevention programming for Millennials:**

Currently there is no specifically targeted prevention programming for the 18-25 year-old population in Hancock County. Family Resource Center is a credentialed prevention programming agency and has committed to working with the Task Force to identify or create prevention programming to this population. Recently, the agency hired an individual whose primary responsibility will be to focus on the 18-25 year-old population.

The Task Force is also very aware that connecting with this age group will require technology. Most Millennials believe that the cell phone is vital to their everyday existence. They never leave home without their mobile device and everything they do, from getting up in the morning to making appointments, to talking to others and even ordering food, uses technology (Millennial Webinar by Derek Longmeier, Global Insight Consultant). It will be vital to connect with this age group through technology. Programs and interventions will need to be made available through social media as well as other forms of communication.

- **Ways these gaps were identified:**

Activities by the local Prescription Drug Abuse Task Force are the only prevention initiatives and are generalized to include all ages. Correspondence with possible Millennial prevention partners has been unsuccessful up to this point.

- **Ways to close these gaps:**

Continuing efforts to correspond with possible partners to create an educational initiative via social media to engage Millennials in existing Task Force efforts. Use the SPF SIG coalition to create new prescription drug prevention programs just for this population through partnership with Family Resource Center.

Sub-Target/Underserved Population

Hancock County will not be implementing the SPF with a sub-target/underserved population.

Generation Rx

Prevention Programming:

- **These prevention programs are offered to Generation Rx by the following group(s):**
Medication collections, community awareness presentations, opiate abuse educational curriculum: all presented by the Prescription Drug Abuse Task Force.
- **These programs do not specifically target Generation Rx, but could potentially reach them or be modified:**
None
- **Sources for program information:**
Prescription Drug Abuse Task Force

Expertise:

Individuals with Expertise Working with Sub-Target/Underserved Population		
Name	Agency	Contact Information
John Stanovich	University of Findlay College of Pharmacy, Hancock County Prescription Drug Abuse Task Force	stanovich@findlay.edu, Office Location: 300 Davis Street #145 D, Findlay, Telephone: 419-434- 4441

- **Ways local expertise can be tapped into for the SPF SIG process:**
Mr. Stanovich is the current chair of the Hancock County Prescription Drug Abuse Task Force. The SPF SIG coalition can further utilize his skills by inviting him to join the group and their efforts for this grant.
- **Sources for expertise information:**
Personal correspondence, communication with committee chairs & leaders.

Gaps:

- **Perceived gaps in prevention programming for Generation Rx:**
There are no structured prevention programs available targeting Generation Rx.
- **Ways these gaps were identified:**
There are no adult agency providers in Hancock County certified to provide prevention programming for the Generation Rx population.

- **Ways to close these gaps:**

Currently there is no specifically targeted prevention programming for the Generation Rx population in Hancock County. Family Resource Center is a credentialed prevention programming agency and has committed to working with the Task Force to identify or create prevention programming for this population.

Appendix I: National Outcome Measures (NOMS)

National Outcome Measures									
Data Available for Target Population									
30 Day Use									
Specific Measure: During the last 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?									
Does this measure qualify as a NOMs item?					Yes				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
18-25 Year Old Survey	2012	18-25 year olds in Hancock County	9,000	Convenience	1,169	1,016	Percent who used in the past 30 days	48.4%	Percent
Specific Measure: During the last 30 days, on how many days did you use marijuana or hashish?									
Does this measure qualify as a NOMs item?					Yes				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
18-25 Year Old Survey	2012	18-25 year olds in Hancock County	9,000	Convenience	1,169	882	Percent who used in the past 30 days	17.6%	Percent
Specific Measure: Thinking specifically about the past 30 days, including today. During the past 30 days, on how many days did you use any other illegal drug? Response Options: Number of days 0 - 30									
Does this measure qualify as a NOMs item?					Yes				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
18-25 Year Old Survey	2012	18-25 year olds in Hancock County	9,000	Convenience	1,169	732	Percent who used in the past 30 days	6.0%	Percent

Appendix II: Organizational-Level Assessment Tools

Agency Name:	Hancock County Prescription Drug Abuse Task Force		Contact:	Randy Greeno, Joe Rader, Bruce Deppen - Medication Collection Committee Chairpersons
Address:	438 Carnahan Ave., Findlay			
Phone:	419-424-1985	Email:	aaltman@yourpathtohealth.org	
Resource Type:	Program			
Resource Name:	Medication Collection			
Resource Description:	Prescription and over-the-counter medications can be dropped off, along with medication samples, pet medications, vitamins, medicated ointments/lotions, inhalers, liquid medication and narcotics. There is no charge for collecting, and participants don't even have to leave their car.			
Target Population:	Community Members, Medical Facilities			
Causal Factors Targeted:				
Social Availability	X	Community Norms	X	
Retail Availability		Individual Factors	X	
Promotion		Provider Lack of Knowledge		
Criminal Justice/Enforcement		Other		
Risk/Protective Factors Targeted:				
Family	(Risk) Excess medications from the home, (Protective) Educates family about proper disposal and storage			
Community	(Risk) Extra medication samples from medical offices			
School	N/A			
Individual/Peer	(Risk) Availability from friends and family			
Implementing Agency:	Medication Collection Committee of the Task Force & Law Enforcement			
Number Reached Annually:	500			
Duration:	Started in 2009, 3-4 hours on each collection day, 24-hour drop boxes			
Frequency:	Twice a year along with permanent collection boxes that are placed at Police Station and Sheriff's Office year round			
Prevention Strategies Utilized:				
Education	X	Problem Identification and Referral		
Environmental Strategies	X	Information Dissemination		
Alternative Activities		Other		
Community-Based Process				
Type of Implementation Data Collected:				
Attendance	X	Other		
Satisfaction	X			
Evidence-Based:	No			
Agency List Containing the Program:				
NIDA		DOE		
CDC		Drug Strategies		
CSAP		OJJDP		
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:		
Committee review after each collection; surveys done at collection				
Geographical Area Served:	Hancock County			
Culturally Competent:	Yes	If 'yes', describe below:		
Open to all individuals				

Agency Name:	Hancock County Prescription Drug Abuse Task Force	Contact:	Annie Altman
Address:	438 Carnahan Ave., Findlay		
Phone:	419-424-1985	Email:	aaltman@yourpathtohealth.org
Resource Type:	Program		
Resource Name:	Community Awareness Presentations		
Resource Description:	Presentations		
Target Population:	Community		
Causal Factors Targeted:			
Social Availability		Community Norms	X
Retail Availability		Individual Factors	
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement	X	Other	
Risk/Protective Factors Targeted:			
Family	(Risk) Family History of Problem Behavior; Favorable parental attitudes and involvement in problem behavior. (Protective) Bonding and attachment to healthy beliefs; opportunities for pro-social involvement; recognition for pro-social involvement.		
Community	(Risk) Availability of alcohol/other drugs; community laws and norms favorable to drug use, firearms and crime. (Protective) opportunities for pro-social involvement; recognition for pro-social involvement.		
School	(Risk) Academic failure beginning in late elementary school; lack of commitment to school. (Protective) Bonding and school attachment; opportunities and recognition for pro-social involvement		
Individual/Peer	(Risk) Friends who engage in problem behavior; favorable attitudes toward the problem behavior; early initiation of the problem behavior. (Protective) Bonding and attachment to peers with healthy beliefs and clear standards; opportunities for pro-social involvement; increase in social skills.		
Implementing Agency:	Speakers Bureau		
Number Reached Annually:	988		
Duration:	Speakers were trained in Fall of 2010 and began presentations in February of 2011		
Frequency:	When requested		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	
Environmental Strategies		Information Dissemination	X
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	No		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	No	If 'yes', describe below:	
Geographical Area Served:	Hancock County		
Culturally Competent:	No	If 'yes', describe below:	
Program can be changed depending on needs of group requesting presentation			

Agency Name:	Hancock County Prescription Drug Abuse Task Force	Contact:	Annie Altman
Address:	438 Carnahan Ave., Findlay		
Phone:	419-424-1985	Email:	aaltman@yourpathtohealth.org
Resource Type:	Program		
Resource Name:	Brain Challenge		
Resource Description:	No response		
Target Population:	Students in grades 1, 3, 5, middle schoolers and also parents		
Causal Factors Targeted:			
Social Availability		Community Norms	X
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family	(Protective) Education of parents on healthy attitudes and behaviors		
Community	N/A		
School	(Protective) Education to students on healthy attitudes and behaviors, connection to healthy activities		
Individual/Peer	(Protective) Understanding of risks associated with drug use including prescription drugs and how to receive help for self and others		
Implementing Agency:	Teachers		
Number Reached Annually:	Unknown		
Duration:	Throughout the year during classroom sessions		
Frequency:	Classroom Sessions		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other (pre and post testing)	X
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA	X	DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
Classroom quizzes			
Geographical Area Served:	Hancock County Youth		
Culturally Competent:	Yes	If 'yes', describe below:	
Able to change and gear to appropriate audiences			

Agency Name:	Hancock County Prescription Drug Abuse Task Force	Contact:	Barb Wilhelm & Dr. William Kose – Health Committee Chairpersons
Address:	438 Carnahan Avenue, Findlay, OH 45840		
Phone:	419-424-1985	Email:	aaltman@yourpathtohealth.org
Resource Type:	Policy		
Resource Name:	Ohio Emergency and Acute Care Facility Opioids and Other Controlled Substances (OOCs)		
Resource Description:	Prescribing Guidelines provide a policy and procedure for hospitals and emergency care when prescribing any controlled substance. This state wide guide is currently being implemented in the local hospital and urgent care facilities.		
Target Population:	Emergency care providers		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability	X	Individual Factors	X
Promotion		Provider Lack of Knowledge	X
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family	N/A		
Community	(Protective) Prescribing agents education & regulation		
School	N/A		
Individual/Peer	(Risk) Doctor shopping, (Risk) Leftover prescription pills (Protective) Individual user education		
Implementing Agency:	BVHS Emergency Department, Letters of request sent to Excel Urgent Care and ProMedica Urgent Care		
Number Reached Annually:	Unknown		
Duration:	Ongoing		
Frequency:	Ongoing		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	
Environmental Strategies	X	Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance		Other	
Satisfaction			
Evidence-Based:	No		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	No	If 'yes', describe below:	
Geographical Area Served:	State of Ohio		
Culturally Competent:	Yes	If 'yes', describe below:	
Addresses all persons			