

Rhode Island Regional Prevention Task Force Coalitions: A Guide to the Community Needs Assessment

JSI

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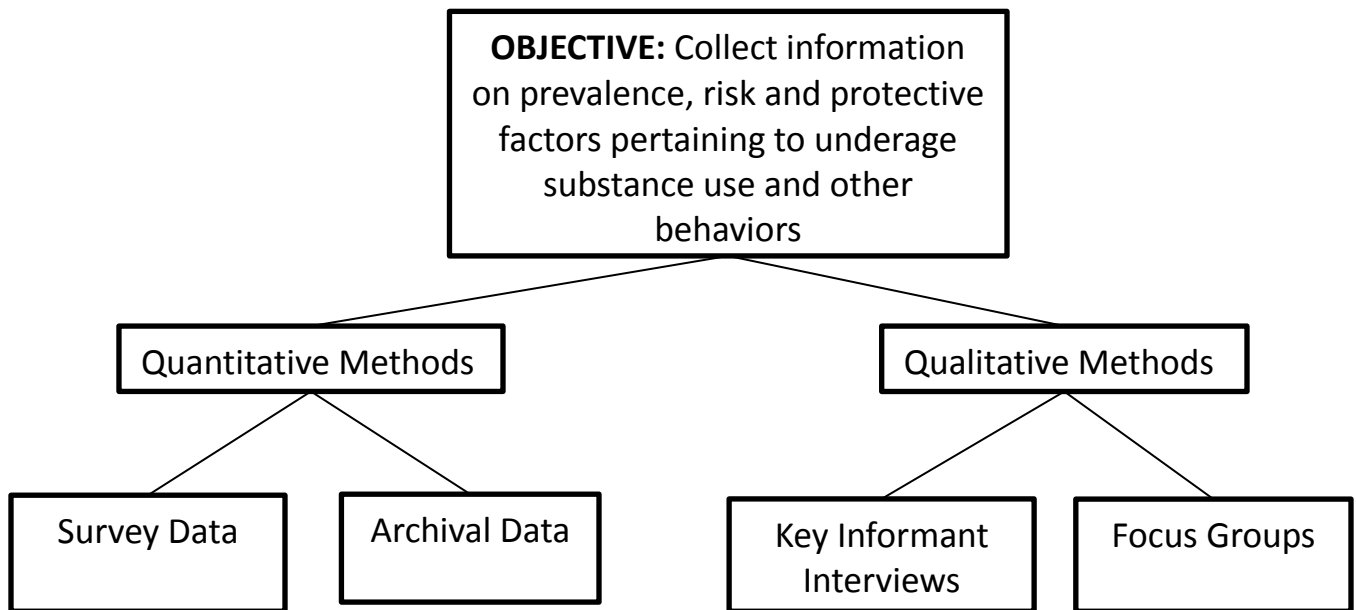
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Overview and Purpose

Regional Prevention Task Force (RPTF) Coalitions, funded by the RI Department of Behavioral Health, Developmental Disabilities and Hospitals (BHDDH) under the Rhode Island Substance Abuse Prevention Act (RISAPA), are required to conduct an assessment of population needs related to RI's risk factors and behaviors for priority problems. This needs assessment guide provides tools and resources for communities as they undertake this process. The guide itself is divided into two (2) sections: quantitative data sources for the priority problem; and, qualitative data sources for the same.

Diagram 1

Rhode Island Regional Prevention Task Force Coalitions Community Needs Assessment



General Instructions

The needs assessment process is designed to increase the understanding of who is impacted by the problem, how the priority problem is manifesting in the community, and what conditions within the community are contributing to the problem behavior (risk or protective factors). This process will be informed by both quantitative data sources (survey and archival data) and qualitative data sources (key informant surveys and focus groups).

Known sources of quantitative data are listed in Section 1 of this guide. A checklist is provided to assist you in identifying possible quantitative data sources. Not all data listed will be available to you. Please collect as many as you can to develop as deep an understanding of the problem behavior as possible. In any case where data is unavailable, the level of burden associated with acquiring the data is excessive, or suggested analyses don't seem pertinent to your community, no further action is required. A prioritization tool to assist you in organizing and analyzing needs assessment data is provided.

Communities will be required to use additional qualitative data collection methods including the use of key informant surveys and focus groups to gain an understanding of the factors related to substance use in their communities. This guide provides a set of qualitative data collection tools and protocols for use by RI Regional Prevention Task Force Coalition providers. These qualitative data collection tools and related resources are listed in Section 2 of this guide.

The key informant surveys for the multiple sectors listed are required although substitution of key informants closely aligned with the recommended sectors may be permitted based on the culture or context of the community. Coalition members with the requisite skills can conduct the key informant surveys. Communities can identify other, additional sectors or stakeholders to include in the key informant survey.

Two focus groups must be conducted if the target population is youth; one comprised of youth and one of parents. Coalitions are recommended to utilize a person who is experienced in conducting focus groups. If you have a coalition member with this experience, consider having them perform this task. Additional focus groups may be conducted to increase understanding of specific cultural perspectives or to increase the depth or breadth of responses. Whenever possible, focus groups that involve members of the target population should be conducted.

Tips and tools for data analysis are provided as it will be necessary to identify the specific conditions and risk or protective factors that impact your community's problem. It is likely

that more than one condition or risk or protective factor exists within your community and you will need to prioritize them.

General Demographic Survey

The following is a set of standard demographic survey questions that can be used to assess your community in conjunction with the other priority problem data collection tools in this document.

A. Demographics

1. Population

Total population of city/town (circle one)

Don't know/unavailable

2. Race breakdown (by %)

White

African American

Asian

Native American

Other

Don't know/unavailable

3. Ethnic breakdown (by %)

Hispanic/Latino

Other relevant cultural groups (e.g. Cape Verdeans)

Other

Don't know/unavailable

4. Age Ranges (by %)

Under 18 year old youth

Under 5 years old

5 to 17 years old

Under 21

18 to 24 years old

25 to 44 years old

45 to 64 years old

65 years old and over

Don't know/unavailable

Source: <https://www.census.gov/quickfacts/table/PST045216/44> - select city/town for demographic data; Also

<http://www.rikidscount.org/DataPublications/CommunitySnapshots.aspx>

Section 1A

ALCOHOL USE QUANTITATIVE DATA SOURCES

ARCHIVAL AND SURVEY DATA SOURCES

FOR ALCOHOL USE:

A COMMUNITY DATA CHECKLIST

The following is a list of possible data sources related to alcohol use and associated consequences. The more information gathered, the more comprehensive the needs assessment. **However, if the data is unavailable or difficult to obtain, indicate that fact and move on to other questions or sources.** Incorporate this data as part of the strategic plan. Distribute the checklist to members of the coalition/organization or key members of the community and request their assistance. Links to data sources, where available, are provided at the end of the category.

A. Highway safety data

1. Drinking and driving

Number of underage DWI/DUI arrests _____

Number of underage DWI/DUI convictions _____

% of total DWI/DUI arrests _____

% of total DWI/DUI convictions _____

Don't know/unavailable _____

Source: <http://risp.ri.gov/documents/UCR/2015.pdf> - DUI (UCR Code 90D); other years' data available; also Police departments and courts for conviction rates

2. Motor vehicle crashes with alcohol involvement

Number of alcohol -related crashes _____

Number of crashes involving youth _____

% of total crashes _____

Don't know/unavailable _____

Source: Police departments, state highway safety agencies

3. Motor vehicle alcohol-related injuries and mortality

Number of alcohol -related injuries _____

% of total motor vehicle injuries _____

Don't know/unavailable _____

Source: Police departments, state highway safety agencies, hospital emergency rooms, FARS mortality data

B. Liquor Law Violations

Liquor law violations, which may be referred to by another name, indicate any acts committed by an underage youth or an adult in violation of the state's and/or locality's liquor laws and regulations.

Citations for underage attempts to purchase _____

Citations for underage purchase _____

Citations for underage possession _____

Citations for underage consumption _____

Citations for underage possession or use of a fake ID _____

Citations for adult purchase for and/or providing alcohol to a minor _____

Citations for overserving _____

Don't know/unavailable _____

Source: Police departments

C. Alcohol Sales

Includes retail liquor establishments, restaurants, bars or any other licensed alcohol venue that sells alcohol to a minor.

Number of retail outlets _____

Source: town/city clerk or licensing board

Number of sales to minors _____

Number of license suspensions for sales to minors _____

Number of license revocations for sales to minors _____

Don't know/unavailable _____

Source: Police departments also Alcohol Purchase Survey to be provided by BHDDH.

D. School Data

Number of alcohol-related suspensions, expulsions and other events _____

Number of alcohol-related incidents of vandalism and campus disruptions _____

Students past 30 day alcohol use _____

Student report of using alcohol at school _____

Don't know/unavailable _____

Source: Rhode Island Prevention Resource Center <http://www.riprc.org/community-profiles/> -

select community from list; also School administrators

E. Criminal Justice Data

Number of parties to which police were called due to underage drinking _____

Citations for disorderly conduct involving alcohol _____

Don't know/unavailable _____

Source: Police departments

Underage alcohol involvement in cases involving vandalism, property damage, rape, robbery, assault, murder, etc. _____

Don't know/unavailable _____

Source: Courts, juvenile services, police departments, or hospitals

F. Injuries and Deaths Involving Alcohol (except those involving motor vehicles)

Underage youth alcohol-related emergency room admissions/EMS data _____
Adult alcohol-related emergency room admissions/EMS data _____
Don't know/unavailable _____

Source: Hospital emergency rooms, volunteer fire departments, rescue runs

G. Alcohol Treatment

Number of beds available _____
Number of beds filled _____
Number of beds for pregnant women _____
Number of beds filled by pregnant women _____
Number of beds for underage youth _____
Number of beds filled by underage youth _____
Number of alcohol-related admissions _____
Waiting list for admission or other indication of need _____
Don't know/unavailable _____

Source: To be provided by BHDDH; Rhode Island Prevention Resource Center

<http://www.riprc.org/community-profiles/>

H. Prevention Initiatives

Number of parent programs _____
Number of alcohol-free programs and activities for youth _____
Number of substance abuse prevention organizations _____
Number of youth substance abuse prevention organizations (SADD etc.) _____
Number of responsible beverage server trainings _____
Don't know/unavailable _____

Source: School systems, state substance abuse prevention agencies

I. Risk or Protection Factors

Youth behavioral risk survey is available _____
Youth behavior and attitude toward alcohol use survey is available _____
Adult behavioral risk survey is available _____

Source: Rhode Island Student Survey, BRFSS (state level data only)

ALCOHOL USE MARKET SURVEY OR COMMUNITY WIDE ADULT QUESTIONNAIRE (Optional)

1. What was your age on your last birthday?

_____ < 14	_____ 21-29	_____ 50-59
_____ 15-17	_____ 30-39	_____ 60+
_____ 18-20	_____ 40-49	_____ No response

2. What is your sex?

_____ Male _____ Female

3. What is your race/ethnicity?

_____ Asian	_____ Hispanic	_____ Other
_____ White	_____ African-American	_____ Refused

4. What is your household income?

_____ <\$5,000	_____ \$40,000-\$49,999	_____ \$100,000 +
_____ \$5,000-\$19,999	_____ \$50,000-\$59,999	
_____ \$20,000-\$39,999	_____ \$60,000-\$99,999	

5. Where do you live?

_____ Name of city/town

6. If you are a parent, what is your child or children's age(s)?

_____ <14	_____ 21+
_____ 15-17	_____ None
_____ 18-20	

7. The current legal drinking age in the U.S. is age 21. Do you think...

_____ This is the right age	_____ Do not know
_____ The age should be lowered to 18	_____ No response

8. Do you think alcohol use by minors is a...

_____ Serious problem	_____ Minor problem	_____ Do not know
_____ Somewhat serious	_____ Not a problem	

9. Do you know youth under the age of 21 who use alcohol?

_____ Yes _____ No

10. Do you know someone with an alcohol problem?

_____ Yes _____ No

10A. If the response to question 10 was "Yes," what is their relationship to you?

_____ Relative	_____ Both
_____ Non-relative	_____ No response

11. Do you know someone who has been killed or injured in a drunk driving crash?

_____ Yes _____ No

12. Do you know someone who has been arrested for drunk or impaired driving?

_____ Yes _____ No

13. Do you know of parents or adults who permit youths under the age of 21 to consume alcohol in their homes?

_____ Yes _____ No _____ Do not know

14. Do you know if your child(ren) has consumed alcohol in the last 30 days?

_____ Yes

_____ No

15. Do you talk to your child(ren) about alcohol?

_____ Yes

_____ No

16. Which of these is the primary source where minors under the age of 21 obtain alcohol?

_____ Parent's home

_____ Grocery/Convenience store

_____ Liquor store

_____ Friends

_____ Bar/Restaurant

_____ Other

17. Under what circumstances is it acceptable for an adult to provide alcohol to minors under age 21?

_____ Holidays

_____ Never

_____ Other

_____ Special occasions

_____ At meals

18. What forms of advertising do you think influence alcohol use among minors under age 21?

_____ Television

_____ Music

_____ Bus signs

_____ Magazines

_____ Billboards

-

19. Does your school have an alcohol policy?

_____ Yes

_____ No

_____ Do not know

20. If you were aware of a minor under the age of 21 who was consuming alcohol, what would you do?

_____ Talk with parents of minor

_____ Contact school officials

_____ Speak to minor who was drinking

_____ Do nothing

_____ Talk to friends of minor

_____ Other

21. What do you think prevents society from eliminating alcohol use among minors under age 21?

_____ Acceptance by society

_____ Lack of education/school

_____ Parental attitude

_____ Lack of enforcement

_____ Peer pressure

_____ Other

_____ Alcohol advertising

22. Are there resources available in your community that address alcohol use among minors under age 21?

_____ Yes

_____ No

22A. If the response to question 22 was "Yes," then what resources are available?

_____ Community-based prev. programs

_____ Law enforcement

_____ School-based prevention programs

_____ Parent groups

_____ Alcohol server/seller training _____ Student/youth groups
_____ Other

23. Would you favor new and/or stiffer penalties for...

_____ Parents who serve alcohol to minors under the age of 21?
_____ Peers over 21 who purchase alcohol for youth under the age of 21?
_____ Bars/restaurants/liquor stores that sell to minors under age 21?

24. Do you favor driver's license suspension or revocation for minors under age 21 who violate underage drinking laws?

_____ Yes _____ No _____ Do not know

25. What government agencies should be involved in solving this problem?

_____ Youth service agencies _____ Police departments
_____ Health & human service agencies _____ Courts
_____ School systems _____ Other

26. Select the possible solution(s) that would be effective to combat underage drinking in your community?

_____ Tag beer kegs with ID of purchaser
_____ 800-number for citizens to report stores that sell to minors
_____ Server/seller training programs for places that sell alcohol
_____ A public awareness campaign

27. Do you think excessive drinking in your community is a...

_____ Serious problem _____ Minor problem _____ Do not know
_____ Somewhat serious _____ Not a problem

29. Are there programs in your community that address the issue excessive drinking? (Please specify)

Section 1b

MARIJUANA USE QUANTITATIVE DATA SOURCES

ARCHIVAL AND SURVEY DATA SOURCES

FOR MARIJUANA USE:

COMMUNITY DATA CHECKLIST

The following is a list of possible data sources related to marijuana use. The more information gathered, the more comprehensive the needs assessment. **However, if the data is unavailable or difficult to obtain, indicate that fact and move on to other questions.** Incorporate this data as part of the strategic plan. Distribute the checklist to members of the coalition/organization or key members of the community and request their assistance. Links to data sources, where available, are provided at the end of the category.

A. Highway safety data

1. Impaired driving (marijuana involved)

Number of OUI arrests

Youth arrests

Number of OUI convictions

Youth convictions

% of total OUI arrests

% of total OUI convictions

Don't know/unavailable

Source: Police departments, state highway safety agencies, courts

2. Motor vehicle crashes with marijuana involvement

Number of marijuana -related crashes

Number of crashes involving youth

% of total crashes

Don't know/unavailable

Source: Police departments, state highway safety agencies

3. Motor vehicle marijuana-related injuries and mortality

Number of marijuana -related injuries

% of total motor vehicle injuries

Don't know/unavailable

Source: Police departments, state highway safety agencies, hospital emergency rooms, FARS mortality data

B. State Law Violations

Law violations, which may be referred to by another name, indicate any acts committed by an underage youth or an adult in violation of the state's laws and regulations.

Citations for possession of marijuana _____
Arrests for possession with intent to deliver _____
Don't know/unavailable _____
Source: Police departments, courts

C. School Data

Number of marijuana-related suspensions, expulsions and other events _____
Number of marijuana-related incidents of vandalism and campus disruptions _____
Marijuana use in the past 30 days _____
Don't know/unavailable _____
Source: School administrations; Rhode Island Prevention Resource Center
<http://www.riprc.org/community-profiles/> - scroll down and select community

D. Criminal Justice Data

Number of parties to which police were called because of youth marijuana use _____
Don't know/unavailable _____
Source: Police departments

E. Injuries and Deaths Involving Marijuana (except those involving motor vehicles)

Marijuana-related emergency department admissions _____
Youth marijuana-related ED admissions _____
Marijuana-related poisoning _____
Don't know/unavailable _____
Source: Hospital emergency rooms, EMS data; preventoverdoseri.org

F. Drug Treatment

Number of beds available, all ages _____
Number of beds filled, all ages _____
Number of beds available, pregnant women _____
Number of beds filled, pregnant women _____
Number of beds for underage youth _____
Number of beds filled by underage youth _____
Number of marijuana-related admissions _____
Waiting list for admission or other indication of need _____
Don't know/unavailable _____
Source: To be provided by BHDDH; Rhode Island Prevention Resource Center
<http://www.riprc.org/community-profiles/> - scroll down and select community

G. Prevention Initiatives

Number of parent programs _____
Number of substance-free programs and activities for youth _____
Number of substance abuse prevention organizations _____
Don't know/unavailable _____

Source: School systems, state substance abuse prevention agencies

H. Youth

Youth behavioral risk survey is available

Youth behavior and attitude toward marijuana use survey is available

Adult behavioral risk survey is available

Source: Rhode Island Student Survey, [BRFSS](#) (for state level data only, search "RI")

YOUTH MARIJUANA USE MARKET SURVEY OR COMMUNITY WIDE
ADULT QUESTIONNAIRE (Optional)

1. What was your age on your last birthday?

_____ < 14	_____ 21-29	_____ 50-59
_____ 15-17	_____ 30-39	_____ 60+
_____ 18-20	_____ 40-49	_____ No response

2. What is your sex?

_____ Male _____ Female

3. What is your race/ethnicity?

_____ Asian	_____ Hispanic	_____ Other
_____ White	_____ African-American	_____ Refused

4. What is your household income?

_____ <\$5,000	_____ \$40,000-\$49,999	_____ \$100,000 +
_____ \$5,000-\$19,999	_____ \$50,000-\$59,999	
_____ \$20,000-\$39,999	_____ \$60,000-\$99,999	

5. Where do you live?

_____ Name of city/town

6. If you are a parent, what is your child or children's age(s)?

_____ <14	_____ 21+
_____ 15-17	_____ None
_____ 18-20	

7. Do you think marijuana use by minors is a...

_____ Serious problem	_____ Minor problem	_____ Do not know
_____ Somewhat serious	_____ Not a problem	

8. Do you know youth under the age of 18 who use marijuana?

_____ Yes _____ No

9. Do you know someone with a marijuana problem?

_____ Yes _____ No

9A. If the response to question 10 was "Yes," what is their relationship to you?

_____ Relative	_____ Both
_____ Non-relative	_____ No response

10. Do you know someone who has been killed or injured in a crash where marijuana was involved?

_____ Yes _____ No

11. Do you know someone who has been arrested for impaired driving after using marijuana?

_____ Yes _____ No

12. Do you know of parents or adults who permit youths under the age of 18 to use marijuana in their homes?

_____ Yes _____ No _____ Do not know

13. Do you know if your child(ren) has consumed marijuana in the last 30 days?

_____ Yes _____ No

14. Do you talk to your child(ren) about marijuana use?

_____ Yes _____ No

15. Does your school have a marijuana policy?

_____ Yes _____ No _____ Do not know

16. If you were aware of a minor under the age of 18 who was using marijuana, what would you do?

_____ Talk with parents of minor	_____ Contact school officials
_____ Speak to minor who was using	_____ Do nothing
_____ Talk to friends of minor	_____ Other

17. What do you think prevents society from eliminating marijuana use among minors under age 18?

_____ Acceptance by society	_____ Lack of education/school
_____ Parental attitude	_____ Lack of enforcement
_____ Peer pressure	_____ Other
_____ Advertising	

18. Are there resources available in your community that address marijuana use among minors under age 18?

_____ Yes _____ No

18A. If the response to question 22 was "Yes," then what resources are available?

_____ Community-based prevention programs	_____ Law enforcement
_____ School-based prevention programs	_____ Parent groups
_____ Student/youth groups	_____ Other

19. Would you favor new and/or stiffer penalties for...

_____ Parents who provide marijuana to youth?

_____ Peers over 21 who provide marijuana for youth?

_____ Adults (non-parents) who permit use of marijuana by youth in their home?

20. Do you favor driver's license suspension or revocation for minors under age 18 who violate state laws related to impaired driving due marijuana use?

_____ Yes _____ No _____ Do not know

21. What government agencies should be involved in solving this problem?

_____ Youth service agencies

_____ Police departments

_____ Health & human service agencies

_____ Courts

_____ School systems

_____ Other

22. Are there programs in your community that address the issue of youth marijuana use?
(Please specify)

Section 1c

TOBACCO USE QUANTITATIVE DATA SOURCES

ARCHIVAL AND SURVEY DATA SOURCES

FOR TOBACCO USE:

COMMUNITY DATA CHECKLIST

The following is a list of possible data sources related to tobacco use. The more information gathered, the more comprehensive the needs assessment. **However, if the data is unavailable or difficult to obtain, indicate that fact and move on to other questions.** Incorporate this data as part of the strategic plan. Distribute the checklist to members of the coalition/organization or key members of the community and request their assistance. Links to data sources, where available, are provided at the end of the category.

A. State Law Violations

Law violations, which may be referred to by another name, indicate any acts committed by an underage youth or an adult in violation of the state's laws and regulations.

Citations for selling to underage youth _____

Youth report of obtaining tobacco products _____

Other ordinance violations (indoor smoking, distance from doorway, etc.) _____

Don't know/unavailable _____

Source: Rhode Island Student Survey questions 24, 31; police departments; courts

B. School Data

Disciplinary action for smoking or using tobacco products at school _____

Students who report having smoked at school _____

Cigarette use in the past 30 days _____

Don't know/unavailable _____

Source: Rhode Island Student Survey question 32; School administrators, Rhode Island Prevention Resource Center <http://www.riprc.org/community-profiles/> - scroll down and select community

C. Tobacco Cessation

Number local programs to help quit _____

Participation in programs to help quit _____

Number of youth who have attempted to quit _____

Number of adults who have attempted to quit _____

Source: Rhode Island Student Survey question 33; BHDDH, [BRFSS](#) (for state level data only, search "RI")

D. Prevention Initiatives

Number of parent programs _____

Number of tobacco-free programs and activities for youth _____

Number of smoking/tobacco prevention organizations _____

Don't know/unavailable

Source: School systems, state substance abuse prevention agencies

E. Sales & Taxation

Local sales of cigarettes, electronic cigarettes, smokeless tobacco, etc.

Average prices of various tobacco products

Average tax on cigarettes

Average tax on tobacco products other than cigarettes

Source: Sales data, local stores

E. Reported Use, Risk and Protective Factors

Youth behavioral risk survey is available

Youth behavior and attitude toward tobacco use survey is available

Adult behavioral risk survey is available

Adult behavior and attitude toward tobacco use survey is available

Current cigarette use among students

Current cigarette use among adults

Current cigar use among students

Current cigar use among adults

Current smokeless tobacco use among students

Current smokeless tobacco use among adults

Current electronic cigarette use among students for tobacco

Current electronic cigarette use among adults

Source: Rhode Island Student Survey, [BRFSS](#) (for state level data only, search "RI")

F. Injuries Tobacco or Electronic Nicotine Delivery

Nicotine over-dose or poisoning

TOBACCO USE MARKET SURVEY OR COMMUNITY WIDE ADULT
QUESTIONNAIRE (Optional)

1. What was your age on your last birthday?

_____ < 14	_____ 21-29	_____ 50-59
_____ 15-17	_____ 30-39	_____ 60+
_____ 18-20	_____ 40-49	_____ No response

2. What is your sex?

_____ Male _____ Female

3. What is your race/ethnicity?

_____ Asian	_____ Hispanic	_____ Other
_____ White	_____ African-American	_____ Refused

4. What is your household income?

_____ <\$5,000	_____ \$40,000-\$49,999	_____ \$100,000 +
_____ \$5,000-\$19,999	_____ \$50,000-\$59,999	
_____ \$20,000-\$39,999	_____ \$60,000-\$99,999	

5. Where do you live?

_____ Name of city/town

6. If you are a parent, what is your child or children's age(s)?

_____ <14	_____ 21+
_____ 15-17	_____ None
_____ 18-20	

7. Do you think tobacco use by minors is a...

_____ Serious problem	_____ Minor problem	_____ Do not know
_____ Somewhat serious	_____ Not a problem	

8. Do you know youth under the age of 18 who use tobacco?

_____ Yes _____ No

9. Do you know of parents or adults who permit youths under the age of 18 to use tobacco products in their homes?

_____ Yes _____ No _____ Do not know

10. Do you know if your child(ren) has smoked or used tobacco products in the last 30 days?

_____ Yes _____ No

11. Do you talk to your child(ren) about tobacco use?

_____ Yes _____ No

12. Does your school have a tobacco policy?

_____ Yes _____ No _____ Do not know

13. If you were aware of a minor under the age of 18 who was using smoking or using tobacco products, what would you do?

_____ Talk with parents of minor	_____ Contact school officials
_____ Speak to minor who was using	_____ Do nothing
_____ Talk to friends of minor	_____ Other

14. What do you think prevents society from eliminating tobacco use among minors under age 18?

_____ Acceptance by society	_____ Lack of education/school
_____ Parental attitude	_____ Lack of enforcement
_____ Peer pressure	_____ Other
_____ Advertising	

15. Are there resources available in your community that address tobacco use among minors under age 18?

_____ Yes _____ No

15A. If the response to question 22 was "Yes," then what resources are available?

_____ Community-based prevention programs	_____ Law enforcement
_____ School-based prevention programs	_____ Parent groups
_____ Student/youth groups	_____ Other

16. Would you favor new and/or stiffer penalties for...

_____ Parents who provide tobacco products to youth?

_____ Peers over 21 who provide tobacco products for youth?

_____ Adults (non-parents) who permit use of tobacco products by youth in their home?

17. What government agencies should be involved in solving this problem?

_____ Youth service agencies	_____ Police departments
_____ Health & human service agencies	_____ Courts
_____ School systems	_____ Other

18. Are there programs in your community that address the issue of youth tobacco use? (Please specify)

Section 1d

NON-MEDICAL PRESCRIPTION DRUG USE QUANTITATIVE DATA SOURCES

ARCHIVAL AND SURVEY DATA SOURCES FOR NON-MEDICAL PRESCRIPTION DRUG

USE:

COMMUNITY DATA CHECKLIST

The following is a list of possible data sources related to non-medical prescription drug use. The more information gathered, the more comprehensive the needs assessment. **However, if the data is unavailable or difficult to obtain, indicate that fact and move on to other questions.** Incorporate this data as part of the strategic plan. Distribute the checklist to members of the coalition/organization or key members of the community and request their assistance. Links to data sources, where available, are provided at the end of the category.

A. Highway safety data

1. Impaired driving (prescription drug involved)

Number of OUI arrests

Youth arrests

Number of OUI convictions

Youth convictions

% of total OUI arrests

% of total OUI convictions

Don't know/unavailable

Source: Police departments, state highway safety agencies, courts

2. Motor vehicle crashes with prescription drug involvement

Number of drug-related crashes

% of total crashes

Don't know/unavailable

Source: Police departments, state highway safety agencies

3. Motor vehicle drug-related injuries and mortality

Number of drug-related injuries

% of total motor vehicle injuries

Don't know/unavailable

Source: Police departments, state highway safety agencies, hospital emergency rooms

B. State Law Violations

Law violations, which may be referred to by another name, indicate any acts committed by an underage youth or an adult in violation of the state's laws and regulations.

Citations for possession of illicit prescription drugs _____

Arrests for possession with intent to deliver _____

Information on how youth obtained illicit prescription drugs _____

Don't know/unavailable _____

Source: *Rhode Island Student Survey; Police departments, courts*

C. School Data

Number of drug-related suspensions, expulsions and other events _____

Number of drug-related incidents of vandalism and campus disruptions _____

Number of students reporting having misused prescription drugs _____

Don't know/unavailable _____

Source: *Rhode Island Student Survey; Rhode Island Prevention Resource Center*

<http://www.riprc.org/community-profiles/> - scroll down and select community

D. Criminal Justice Data

Number of parties to which police were called because of youth drug use _____

Citations and arrests for narcotic possession _____

Drug drop off box usage _____

Don't know/unavailable _____

Source: *Police departments*

E. Injuries and Deaths (except those involving motor vehicles)

Number of prescription drug-related emergency room admissions _____

Number of overdoses _____

Don't know/unavailable _____

Source: *Hospital emergency rooms, EMS data*

F. Drug Treatment

Number of beds available, all ages _____

Number of beds filled, all ages _____

Number of beds available, pregnant women _____

Number of beds filled, pregnant women _____

Number of beds for underage youth _____

Number of beds filled by underage youth _____

Number of prescription drug-related admissions _____

Waiting list for admission or other indication of need _____

Don't know/unavailable _____

Source: *To be provided by BHDDH; Rhode Island Prevention Resource Center*

<http://www.riprc.org/community-profiles/> - scroll down and select community

G. Prevention Initiatives

Number of parent programs	_____
Number of substance-free programs and activities for youth	_____
Number of substance abuse prevention organizations	_____
Don't know/unavailable	_____

Source: School systems, state substance abuse prevention agencies

H. Youth

Youth behavioral risk survey is available	_____
Youth behavior and attitude toward prescription drug use survey available	_____

Source: Survey Works, Health & Wellness Survey (current or former Drug Free Communities only), Rhode Island Student Survey, [BRFSS](#) (for state level data only, search "RI")

NON-MEDICAL PRESCRIPTION DRUG USE MARKET SURVEY OR
COMMUNITY WIDE ADULT QUESTIONNAIRE (Optional)

1. What was your age on your last birthday?

_____ < 14	_____ 21-29	_____ 50-59
_____ 15-17	_____ 30-39	_____ 60+
_____ 18-20	_____ 40-49	_____ No response

2. What is your sex?

_____ Male _____ Female

3. What is your race/ethnicity?

_____ Asian	_____ Hispanic	_____ Other
_____ White	_____ African-American	_____ Refused

4. What is your household income?

_____ <\$5,000	_____ \$40,000-\$49,999	_____ \$100,000 +
_____ \$5,000-\$19,999	_____ \$50,000-\$59,999	
_____ \$20,000-\$39,999	_____ \$60,000-\$99,999	

5. Where do you live?

_____ Name of city/town

6. If you are a parent, what is your child or children's age(s)?

_____ <14	_____ 21+
_____ 15-17	_____ None
_____ 18-20	

7. Do you think prescription drug use by minors is a...

_____ Serious problem	_____ Minor problem	_____ Do not know
_____ Somewhat serious	_____ Not a problem	

8. Do you know youth under the age of 18 who use prescription drugs?

_____ Yes _____ No

9. Do you know someone with a prescription drug problem?

_____ Yes _____ No

9A. If the response to question 10 was "Yes," what is their relationship to you?

_____ Relative	_____ Both
_____ Non-relative	_____ No response

10. Do you know someone who has been killed or injured in a crash where prescription drug use was involved?

_____ Yes _____ No

11. Do you know someone who has been arrested for impaired driving after using prescription drugs?

_____ Yes _____ No

12. Do you know of parents or adults who permit youths under the age of 18 to use prescription drugs in their homes?

_____ Yes _____ No _____ Do not know

13. Do you know if your child(ren) has abused prescription drugs in the last 30 days?

_____ Yes _____ No

14. Do you talk to your child(ren) about prescription drug use?

_____ Yes _____ No

15. Does your school have a prescription drug policy?

_____ Yes _____ No _____ Do not know

16. If you were aware of a minor under the age of 18 who was using prescription drugs, what would you do?

_____ Talk with parents of minor	_____ Contact school officials
_____ Speak to minor who was using	_____ Do nothing
_____ Talk to friends of minor	_____ Other

17. What do you think prevents society from eliminating prescription drug use among minors under age 18?

_____ Acceptance by society	_____ Lack of education/school
_____ Parental attitude	_____ Lack of enforcement
_____ Peer pressure	_____ Other
_____ Advertising	

18. Are there resources available in your community that address prescription drug use among minors under age 18?

_____ Yes _____ No

18A. If the response to question 22 was "Yes," then what resources are available?

_____ Community-based prevention programs	_____ Law enforcement
_____ School-based prevention programs	_____ Parent groups
_____ Student/youth groups	_____ Other

19. Would you favor new and/or stiffer penalties for...

_____ Parents who provide prescription drugs to youth?

_____ Peers over 21 who provide prescription drugs to youth?

_____ Adults (non-parents) who permit use of prescription drugs by youth in their home?

20. Do you favor driver's license suspension or revocation for minors under age 18 who violate state laws related to impaired driving due prescription drug use?

_____ Yes _____ No _____ Do not know

21. What government agencies should be involved in solving this problem?

_____ Youth service agencies

_____ Police departments

_____ Health & human service agencies

_____ Courts

_____ School systems

_____ Other

1. Are there programs in your community that address the issue of youth prescription drug use? (Please specify)

Section 1e

OPIATE USE QUANTITATIVE DATA SOURCES

ARCHIVAL AND SURVEY DATA SOURCES

FOR OPIATE USE:

COMMUNITY DATA CHECKLIST

The following is a list of possible data sources related to illicit opiate use. The more information gathered, the more comprehensive the needs assessment. **However, if the data is unavailable or difficult to obtain, indicate that fact and move on to other questions.** Incorporate this data as part of the strategic plan. Distribute the checklist to members of the coalition/organization or key members of the community and request their assistance. Links to data sources, where available, are provided at the end of the category.

A. Highway safety data

1. Impaired driving (opiate involved)

Number of OUI arrests

Youth arrests

Number of underage OUI convictions

Youth convictions

% of total OUI arrests

% of total OUI convictions

Don't know/unavailable

Source: Police departments, state highway safety agencies, courts

2. Motor vehicle crashes with opiate involvement

Number of opiate -related crashes

% of total crashes

Don't know/unavailable

Source: Police departments, state highway safety agencies

3. Motor vehicle opiate-related injuries and mortality

Number of opiate -related injuries

% of total motor vehicle injuries

Don't know/unavailable

Source: Police departments, state highway safety agencies, hospital emergency rooms, FARS mortality data <https://www.nhtsa.gov/research-data/fatality-analysis-reporting-system-fars>

B. State Law Violations

Law violations, which may be referred to by another name, indicate any acts committed by an underage youth or an adult in violation of the state's laws and regulations.

Citations for possession of opiates

Arrests for possession with intent to deliver

Information on how youth obtained opiates if applicable _____
Don't know/unavailable _____
Source: Police departments, courts

C. School Data

Number of opiate-related suspensions, expulsions and other events _____
Number of opiate-related incidents of vandalism and campus disruptions _____
Number of students who report using opiates _____
Don't know/unavailable _____
Source: Rhode Island Student Survey; Rhode Island Prevention Resource Center
<http://www.riprc.org/community-profiles/> - scroll down and select community

D. Criminal Justice Data

Number of parties to which police were called because of opiate abuse _____
Drug drop-off box usage _____
Don't know/unavailable _____
Source: Police departments

E. Injuries and Deaths Involving opiates (except those involving motor vehicles)

Opiate-related emergency room admissions _____
Non-fatal overdoses _____
Fatal overdoses _____
Fentanyl overdoses _____
Youth overdose rate _____
Overdoses which were reversed by naloxone _____
Don't know/unavailable _____
Source: EMS data, RIDOH <http://www.health.ri.gov/data/drugoverdoses/>; Hospital emergency rooms; Rhode Island Prevention Resource Center <http://www.riprc.org/community-profiles/> - scroll down and select community; Prevent Overdose RI <http://preventoverdoseri.org>; RIDOH <http://www.health.ri.gov/data/drugoverdoses/>

F. Drug Treatment

Number of beds available, all ages _____
Number of beds filled, all ages _____
Number of beds available, pregnant women _____
Number of beds filled, pregnant women _____
Number of beds for underage youth _____
Number of beds filled by underage youth _____
Number of opiate-related admissions _____
Waiting list for admission or other indication of need _____
Naloxone availability in the community _____
Naloxone distributed _____
Don't know/unavailable _____

Source: Prevent Overdose RI <http://preventoverdoseri.org/naloxone-data/>; RIDOH <http://www.health.ri.gov/data/drugoverdoses/>; BHDDH; Rhode Island Prevention Resource Center <http://www.riprc.org/community-profiles/> - scroll down and select community

G. Prevention Initiatives

Number of parent programs	_____
Number of substance-free programs and activities for youth	_____
Number of substance abuse prevention organizations	_____
Don't know/unavailable	_____
<i>Source: School systems, state substance abuse prevention agencies</i>	

H. Youth

Youth behavioral risk survey is available	_____
<i>Source: Survey Works, Health & Wellness Survey (current or former Drug Free Communities only), Rhode Island Student Survey</i>	

Section 1f

DEPRESSION QUANTITATIVE DATA SOURCES

ARCHIVAL AND SURVEY DATA SOURCES

FOR DEPRESSION:

COMMUNITY DATA CHECKLIST

The following is a list of possible data sources related to depression. The more information gathered, the more comprehensive the needs assessment. **However, if the data is unavailable or difficult to obtain, indicate that fact and move on to other questions.** Incorporate this data as part of the strategic plan. Distribute the checklist to members of the coalition/organization or key members of the community and request their assistance. Links to data sources, where available, are provided at the end of the category.

A. School Data

1. Safety

Number of students reporting feeling safe at school

Number of students reporting feeling safe going to and from school

Number of students feeling safe at home

Number of students reporting having brought a weapon to school

Number of students who stayed home because they felt unsafe

Source: Rhode Island Student Survey; School Administrators

2. Bullying

Student report of spreading rumors or lies

Student report of cyber-bullying or using social media for harassment

Student report of having been made fun of at school

Student report of having been a victim of bullying

Student report of having been threatened with a weapon

Student report of having been in a physical fight

Number of students who have been disciplined for bullying

Don't know/unavailable

Source: School administrators; Rhode Island Student Survey; Rhode Island Prevention Resource Center <http://www.riprc.org/community-profiles/> - scroll down and select community

3. Mental health

Student report of having felt very sad or hopeless

Student report of having felt very grouchy or irritable

Student report of sleep changes or appetite changes

Student report of missing class due to mood issues (feeling down, depressed, or hopeless)

Student report of self-harm

Student report of contemplating or attempting suicide _____

Student visits to nurses, counselors, or others for guidance _____

Adult report of feeling down, depressed, or hopeless _____

Adult report of having little interest or pleasure in doing things _____

Adult report of having ever been told they have an anxiety or depressive disorder by a doctor _____

Source: Rhode Island Student Survey, [BRFSS](#) (for state level data only, search “RI”)

B. Suicidal Ideation and Self-harm

Hospitalizations or ED visits for self-harm _____

Hospitalizations or ED visits for suicide attempts _____

Don’t know/unavailable _____

Source: Police departments, hospital and emergency rooms

C. Treatment

Number of beds available, all ages _____

Number of beds filled, all ages _____

Number of beds available, pregnant women _____

Number of beds filled, pregnant women _____

Number of beds available, postpartum women _____

Number of beds filled, postpartum women _____

Number of beds for underage youth _____

Number of beds filled by underage youth _____

Number of depression-related admissions _____

Waiting list for admission or other indication of need _____

Don’t know/unavailable _____

Source: To be provided by BHDDH; Rhode Island Prevention Resource Center
<http://www.riprc.org/community-profiles/> - scroll down and select community

D. Prevention Initiatives

Number of parent programs _____

Number of bullying prevention organizations _____

Number of depression awareness programs _____

Don’t know/unavailable _____

Source: School systems, state agencies

E. Survey Data

Youth behavioral risk survey is available _____

Adult behavioral risk survey is available _____

Source: Survey Works, Health & Wellness Survey (current or former Drug Free Communities only), Rhode Island Student Survey, [BRFSS](#) (for state level data only, search “RI”)

Section 1g

SUICIDE QUANTITATIVE DATA SOURCES

ARCHIVAL AND SURVEY DATA SOURCES

FOR SUICIDE:

COMMUNITY DATA CHECKLIST

The following is a list of possible data sources related to suicide. The more information gathered, the more comprehensive the needs assessment. **However, if the data is unavailable or difficult to obtain, indicate that fact and move on to other questions.** Incorporate this data as part of the strategic plan. Distribute the checklist to members of the coalition/organization or key members of the community and request their assistance. Links to data sources, where available, are provided at the end of the category.

A. School Data

Number of school incidents relating to suicide or attempts _____
Number of students seeking care from counselors _____
Number of students contemplating suicide _____
Number of students who made a suicide plan _____
Don't know/unavailable _____

Source: *Rhode Island Student Survey page 6; School administrators; Rhode Island Prevention Resource Center* <http://www.riprc.org/community-profiles/> - scroll down and select community

B. Injuries and Deaths

Youth suicide-related emergency room admissions/EMS data _____
Did an attempt result in injury, poisoning, or overdose _____
Don't know/unavailable _____

Source: *Rhode Island Student Survey page 6; RI Violent Death Reporting System; Hospital emergency rooms*

C. Mental Health Treatment

Number of beds available, all ages _____
Number of beds filled, all ages _____
Number of beds for underage youth _____
Number of beds filled by underage youth _____
Number of suicide-related admissions _____
Waiting list for admission or other indication of need _____
Don't know/unavailable _____

Source: *To be provided by BHDDH*

D. Prevention Initiatives

Number of programs targeting parents _____

Number of prevention organizations

Don't know/unavailable

Source: School systems

E. Survey Data

Youth risk behavior survey is available

Adult risk behavior survey is available

Don't know/unavailable

Source: Rhode Island Student Survey, [BRFSS](#) (for state level data only, search "RI")

Section 2

QUALITATIVE DATA SOURCES

KEY INFORMANT INTERVIEWS

- ❖ The key informant interview has a very specific purpose. It involves identifying different member of your community who are especially knowledgeable about a topic (who we call “key informants”), and asking them questions about their experiences working or living within a community. You will want to do 8-10 key informant interviews across the region and seek out people with more than average knowledge to interview. These interviews are usually conducted face to face with your informants, using either an outside interviewer specifically hired to conduct the interviews, or by a member (or members) of your organization. The length of these interviews can vary, and will depend on the number of questions you decide to ask.
- ❖ There are several factors to consider in deciding who will conduct the interviews including:
 - Time – Interviews will need to be scheduled, conducted, written up, and analyzed. Preparation and follow-up activities can easily take up to twice the time of the interview itself.
 - Skills – The interviewer must possess specific skills such as the capacity to listen well, ability to write and take accurate notes, good memory, be comfortable meeting new people, attention to detail, and strong communication skills.
 - Consistency – It is best to have one or two people conduct interviews so that knowledge and experience about how best to frame questions is built up. A limited number of interviewers greatly facilitates identification of themes since one or two people have heard all of the information.
 - Cultural Competency – Interviewers should be individuals who key informants relate to. This could mean the interviewer shares attributes with the key informant (e.g. race/ethnicity, gender, age, etc.) or the interviewer is particularly familiar with the culture of the key informant.
- ❖ Coalition members with the right skill set can be recruited to conduct the key informant interviews. This will help with sustainability of this skill.
 - Consider use of the Coalition Member/Leader Survey from Coalitions Work <http://coalitionswork.com/wp-content/uploads/SKILLS-INVENTORY-WORKSHEET.pdf> to identify members whose self-report of above average skills related to compiling or analyzing situations or data, interviewing, interpreting and writing/editing (or better yet a combination of all of these) may make them particularly suited for the task.
 - Consider partnering two coalition members, one with above average skills for interviewing and writing/editing with one whose skills are interpreting and analyzing data, for the key informant interview team.

- ❖ There are five types of key informant groups for who will provide rich information on underage substance use and misuse and other behavioral health challenges. It is not necessary to interview every position described, as these may vary from community to community: focus on representation of the group overall and the individual key informant's connection to or familiarity the youth in the community. If the key informant group doesn't exist in your community, you may substitute another that you deem knowledgeable about youth in your community.

Required key informant groups for RI Regional Prevention Coalition Providers

- Community Leaders/Public and Elected Officials (town managers, city/town solicitor, department directors (especially recreation department), town council and school committee)
- Law Enforcement (e.g. community policing officer, school resource officer, juvenile officer, patrol)
- School Based Personnel (school nurse, student assistance counselors, coaches/athletic directors, teachers or staff youth trust and confide in)
- Medical/Healthcare /Treatment Specialists (therapists, local counseling agency, pediatricians, nurses, emergency room physicians)
- Youth focused workers (Boys and Girls Club, YMCA/YWCA, sports coaches, truancy or juvenile hearing board members, community social workers)

Optional (but recommended)

- Local Business Leaders
- Faith Leaders

Key Informant Interview Analysis and Reporting

- ❖ Each interview should be recorded and thorough notes documenting the content of the interview should be written up within 24 hours of conducting the interview.
- ❖ Special notice should be given to direct quotes that are particularly effective at conveying a description or experience.
- ❖ After conducting several interviews, you will begin analyzing your results. This process involves comparing and contrasting what informants told you. Overall you will be looking for common themes among the informants. You will also look for key differences in responses across informants.
- ❖ After all key informant interviews and analyses are completed you should write a report of the findings which should include:
 - 1) An explanation of why you conducted the research
 - 2) Who you interviewed (e.g. provider, educator, etc.) and how many interviews you conducted over what period of time (see the list template in the appendix).
 - 3) Describe the general focus of your questions (the actual questions used should be included).

- 4) Describe the themes that emerged including use of unattributed quotes.
- 5) Describe your conclusions—the big take-away messages.

FOCUS GROUPS

- ❖ A focus group is a small group of 6 to 10 people led through an open discussion by a skilled moderator. The group needs to be large enough to generate rich discussion but not so large that some participants are left out. It is recommended that you use a moderator/facilitator who has done prior focus groups, and preferably with youth and parents, however this is not a requirement.
- ❖ The focus group moderator nurtures disclosure in an open and spontaneous format. The moderator's goal is to generate a maximum number of different ideas and opinions from as many different people in the time allotted.
- ❖ The ideal amount of time to set aside for a focus group is anywhere from 45 to 90 minutes. Beyond that most groups are not productive and it becomes an imposition on participant time.
- ❖ A focus group on underage risk behaviors/priority problems should be conducted for each of the following populations:
RI Regional Prevention Coalition required
 - Parents (2: separate middle school and high school parent groups)
 - Students (minimum of 2: one for girls and one for boys; also arrayed along cohort lines with a particular focus on 7-8th grade in Middle School, and/or 9-10th grades in high school)RI Regional Prevention Coalition optional but recommended
 - Any specific youth groups determined to be at high risk for substance use
 - Any culturally-specific groups who are highly prevalent in the community
- ❖ In an ideal focus group, all the participants are very comfortable with each other but none of them know each other. Homogeneity is key to maximizing disclosure among focus group participants. Consider the following in establishing selection criteria for individual groups (e.g. youth or parents):
 - Gender – will both men and women feel comfortable discussing the topic in a mixed gender group?
 - Cliques – How influential might three cheerleaders be in a group of high school peers?
- ❖ Over-invite the number of participants to the focus group, expecting a no-show rate of 10 to 20 percent. You will never want a group of more than 10 participants.
- ❖ Offer an incentive. A monetary incentive of \$25 per participant is probably the minimum you should consider. Other incentive ideas include coupons, gift certificates, or an opportunity to win a big-ticket item at a drawing conducted at the focus group.

- ❖ Arrange for a comfortable room in a convenient location with ample parking. The room should have a door for privacy and table and chairs to seat a circle of up to 12 people. Many public agencies (e.g. churches, libraries, etc.) have free rooms available.
- ❖ Focus groups participants can be recruited in any one of a number of ways. Some of the best include:
 - Nomination – Key individuals nominate people they think would make good participants. Nominees are familiar with the topic, known for their ability to respectfully share their opinions, and willing to volunteer about 2 hours of their time.
 - Random selection – If participants will come from a large but defined group (e.g. an entire high school) with many eager participants, names can be randomly drawn until the desired number of verified participants is achieved.
 - All members of the same group – Sometimes an already existing group serves as an ideal pool from which to invite participants (e.g. PTO, after-school club, etc.).
 - Volunteers – When selection criteria are broad, participants can be recruited with flyers (e.g. grocery stores, community centers, high schools, places of worship, etc.) and newspaper ads.
- ❖ Ideally, the focus group is conducted by a team consisting of a moderator and assistant moderator. The moderator facilitates the discussion; the assistant takes notes and runs the tape recorder. The ideal focus group moderator has the following traits:
 - Can listen attentively with sensitivity and empathy
 - Is able to listen and think at the same time
 - Believes that all group participants have something to offer no matter what their education, experience, or background
 - Has adequate knowledge of the topic
 - Can keep personal views and ego out of the facilitation
 - Is someone the group can relate to--shares attributes with the focus group participants (e.g. race/ethnicity, gender, etc.) or the interviewer is particularly familiar with the culture of the group participants.
 - Can appropriately manage challenging group dynamics
- ❖ The assistant moderator must be able to do the following:
 - Run a tape recorder during the session (please note that use of a tape recorder with youth may not be permitted; consider multiple note takers in lieu of taping)
 - Take notes in case the recorder fails
 - Note/record body language or other subtle but relevant clues
 - Allow the moderator to do all the talking during the group
- ❖ It may be important to collect demographic information from participants if age, gender, or other attributes are important for correlation with focus group findings. Design a short half page form that requires no more than two or three minutes to complete. Administer it before the focus group begins. Questions to consider include:

- Age
- Gender
- Grade in school
- School attended
- Occupation

- ❖ After consent and any relevant demographic information have been collected, commence with the focus group introduction. The introduction should include the following:

WELCOME

Thanks for agreeing to be part of the focus group. We appreciate your willingness to participate.

INTRODUCTION

Moderator; assistant moderator

PURPOSE OF FOCUS GROUP

We have been asked by _____ to conduct the focus groups. The reason we are having these focus groups is to find out _____. We need your input and want you to share your honest and open thoughts with us.

GROUND RULES

1. We want you to do the talking. We would like everyone to participate. I may call on you if I have not heard from you in a while.
2. There are no right or wrong answers. Every person's experiences and opinions are important. Speak up whether you agree or disagree. We want to hear a wide range of opinions.
3. What is said in this room stays here. We want folks to feel comfortable sharing when sensitive issues come up.
4. We will be recording the group. We want to capture everything you have to say. We don't identify anyone by name in our report. You will remain anonymous.

Focus Group Analysis and Reporting

Even though RI Regional Prevention Coalition providers are required to use an experienced focus group moderator or facilitator, it is still important that the task force and coalition members have an understanding of how the focus group analysis and reporting is done. The following is a guide to focus group analysis and reporting. Your focus group moderator or facilitator may use a different template or format to organize and report results but should generally follow the steps described below.

- ❖ **STEP 1: TRANSCRIBE** - After each focus group, transcribe the tape and insert notes as needed. Clean up transcripts by stripping off nonessential words. Assign each participant comment a separate line on the page. Label each line with a participant ID number (e.g. 1, 2, 3 . . .).
- ❖ **STEP 2: COMPILE** – After transcription, themes can be identified using different colored highlighters (ideally, 5-6 different colors). Highlight recurrent themes to make compilation and analysis easier. Create a data base in Excel or enter into a table format. Here are some guidelines to help.

Each line should be entered into an Excel data base (or a table if no one is proficient in Excel):

- 1) Use a separate spreadsheet for each focus group
 - 2) Within each spreadsheet, use one sheet per question
 - 3) Label three columns (Coding, Participant ID, and Responses)
 - 4) Fill in Participant ID and Responses for each question (coding will be done in analysis)
- ❖ **STEP 3: ANALYZE** – Once all comments have been entered, look for common categories or themes across responses for each question. It is ideal to have several people participate in this process. Once consensus has been achieved regarding the best categories for organizing the data, assign a number or letter for each category—assign the number/letter of the category that best fits each entry on the sheet in the “coding” column. Repeat this process for each question in each focus group. See a sample table next page.

Sample Analysis Table

FOCUS GROUP 1: YOUTH		
QUESTION 3: What are the main reasons you think kids drink alcohol?		
Category Code	Participant ID	Responses
B	4	"Some kids are just bored"
A	3	"Usually they are just trying to be cool"
C	1	"They might feel sad or depressed"
A	4	"Everyone does it"
B	2	"It's fun"
C	6	"they want to escape their problems"
A	5	"want to fit in"
D	4	"their parents are okay with it"
B	2	"It feels good"

*Analysts determined coding categories: A – Peer influence, B – Enhancement, C – Coping, D – Parental influence

NOTE: the 'sort' function in Excel can be used to group entries by category. If some entries seem inconsistent for their category, consider re-categorizing or adding another category. It may also be apparent that one or more categories can be collapsed.

- ❖ **STEP 4: SYNTHESIZE** – Identify category heading titles. Write a short paragraph summarizing findings for each category, possibly noting similarities and differences across groups. Add powerful quotes to each section.

Section 2A

ALCOHOL USE QUALITATIVE DATA SOURCES

KEY INFORMANT INTERVIEW QUESTIONS

Questions for Youth Serving Groups

Alcohol

1. Do you think underage drinking/excessive alcohol use is a serious problem in this community?
Probe: Why? Why not?
2. Do you know youth in this community under the age of 21 who use alcohol?
3. *“Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids under 21 who are more likely to drink alcohol in this community?
4. Do you know of parents or adults in this community who permit youth under the age of 21 to consume alcohol in their homes?
5. Where do you think minors under age 21 in this community obtain alcohol?
6. Under what circumstances is it acceptable for an adult to provide alcohol to minors under age 21?
7. What forms of media or advertising do you think influence alcohol use among minors under age 21 in this community?
8. If you were aware of a minor under the age of 21 who was consuming alcohol, what would you do?
9. What resources are available in your community to address alcohol use among minors under age 21?

Questions for Law Enforcement

Alcohol

1. Do you think underage drinking is a serious problem in this community? Excessive drinking?
Probe: Enforcing laws regarding sales of alcohol to minors? Enforcing laws regarding adults supplying alcohol to minors? Enforcing laws regarding overserving patrons?

2. What specific measures are being taken in this community to enforce laws against underage drinking? Excessive drinking? Conducting party patrols? Other measures?
3. How effective do you think those measures are at enforcing laws against underage drinking? Excessive drinking? What would help make them more effective?
4. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids or adults who are more likely to drink alcohol in this in this community?
5. What is your opinion about the legal consequences of underage drinking? Excessive drinking? Driving under the influence?
6. Do you think judges and the juvenile justice system are doing a good job with respect to underage drinking violations?
Probe: If yes, why? If no, why not?
7. Based on your view of this community, how acceptable is it for minors to drink alcohol?
8. Do you think judges and the courts are doing a good job with respect to DUI violations?
9. Where do you think people under the age of 21 in this community get alcohol? Over the age of 21?
10. Where do you think people under the age of 21 in this community drink alcohol? Over the age of 21?

Questions for School Based Personnel/Educators

Alcohol

1. Do you think underage drinking is a serious problem in this community?
Probe: Why? Why not?

2. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to drink alcohol in this community?
3. Does your school have an alcohol policy? If yes, is it enforced?
4. Is alcohol education part of the school’s curriculum? If yes, is it effective?
5. Does your school sponsor extra-curricular activities to prevent underage drinking?
6. Do you think parents understand the seriousness of the underage drinking problem?
7. What role do you think teachers and counselors can play in reducing underage drinking?
8. What is the most effective way to keep underage youth from drinking alcohol?
9. Does your school have a mechanism in place for identifying and assisting students who may have an alcohol problem?

Questions for Community Leaders, Public and Elected Officials

Alcohol

1. Do you think underage drinking is a serious problem in this community?
Probe: Why? Why not?
2. Do you think there are sufficient laws to reduce underage drinking?
Probe: If yes, what are the most effective laws? If no, what additional laws need to be passed to reduce underage drinking?
3. Do you think the public is aware of current underage drinking laws and regulations?
4. How would you improve underage drinking legislation in this state?
5. What is the role of public and elected officials in reducing underage drinking?
6. How would you improve local laws policies or procedures related to underage drinking?

Questions for Medical, Health, and Prevention/Treatment Specialists

Alcohol

1. Do you think underage drinking is a serious problem in this community? Excessive drinking?
Probe: Why? Why not?
2. What are the barriers, if any, to reducing underage drinking or excessive drinking in this community?
3. How do you screen people for underage or excessive drinking?
4. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations who are more likely to drink excessively in this community?
5. What is the role of health professionals in reducing underage drinking? Excessive drinking?
6. What can be done to solve the problems of underage drinking and excessive drinking in this community?

Optional: Questions for Business Leaders

Alcohol

1. Do you think underage drinking is a serious problem in this community?
Probe: Why? Why not?
2. Do you think there are sufficient laws to reduce underage drinking? Probe: If yes, what are the most effective laws? If no, what additional laws need to be passed to reduce underage drinking?
3. Do you think local businesses are aware of current underage drinking laws and regulations?
4. What is the role of local business officials in reducing underage drinking?

5. How would you improve local laws, policies or procedures related to underage drinking?

Optional: Questions for Faith Leaders

Alcohol

1. Do you think underage drinking is a serious problem in this community?
Probe: Why? Why not?
2. What are the main reasons you think kids in this community drink alcohol?
3. What role can the church play in reducing underage drinking?
4. Do you think parents understand the seriousness of the underage drinking problem?
5. What is the most effective way to keep underage youth from drinking alcohol?
6. What resources are available in your community to address alcohol use among minors under age 21?

YOUTH FOCUS GROUP QUESTIONS

ALCOHOL

Social Norms

Is underage drinking a serious problem in (name of the community)?

Probe: If yes, why? If no, why not?

Do all youth engage in underage drinking or is it just a few?

Probe: What percentage of students at your school do you think drink alcohol?

How old are most kids when they started drinking alcohol?

How often do you believe kids drink alcohol?

What are the main reasons you think kids drink alcohol?

A health disparity is a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.

Are there certain sub-populations of kids who are more likely to drink alcohol in this community?

Perceptions of Harm

What are the potential consequences of underage drinking?

Do you think underage drinking is harmful? If so, how or why?

What do you think should happen to a kid is caught drinking alcohol?

Parental Monitoring

How do parents feel about their kids drinking alcohol?

If kids in your community drink alcohol, how likely do you think it would be that people it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

Access/Availability

How do most kids get alcohol?

How easy would it be for people your age to get alcohol from those sources?

Where do kids go when they want to drink alcohol?

Outreach/Programs

What existing programs/services are in place to help students avoid drinking alcohol?

Are you aware of local resources that can help students with alcohol-related problems?

What's happening in schools to educate students about alcohol?

How effective do you think our community is at enforcing laws against underage drinking?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from drinking alcohol?

PARENT FOCUS GROUP QUESTIONS

ALCOHOL

Social Norms

Is underage drinking a serious problem in (name of the community)?

Probe: If yes, why? If no, why not?

Do all youth engage in underage drinking or is it just a few?

Probe: What percentage of students do you think drink alcohol?

How often do you believe kids drink alcohol?

What are the main reasons you think kids drink?

A health disparity is a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.

Are there certain sub-populations of kids who are more likely to drink alcohol in this community?

Perceptions of Harm

What are the potential consequences of underage drinking?

Do you think underage drinking is harmful? If so, how?

What do you think should happen to a kid who is caught drinking alcohol?

Parental Monitoring

How do parents feel about their kids drinking alcohol?

How do you feel about minors under the age of 21 drinking at home? When a parent is present?

If kids in your community drink alcohol, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

How much do you feel your influence affects whether or not you child(ren) drink one or more alcoholic beverages?

How much do you feel your influence affects whether your child(ren) drink 5 or more drinks of alcohol on one occasion (within a few hours)

Access/Availability

How do most kids in your community get alcohol?

How easy would it be for kids to get alcohol from those sources?

Where do kids go when they want to drink alcohol?

Outreach/Programs

Are you aware of local resources that can help students with alcohol-related problems?

What's happening in the community to educate parents about underage drinking?

How effective do you think our community is at enforcing laws against underage drinking?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from drinking alcohol?

Section 2b

MARIJUANA USE QUALITATIVE DATA SOURCES

KEY INFORMANT INTERVIEW QUESTIONS

Questions for Youth Serving Groups

Marijuana Questions

1. Do you think marijuana use is a serious problem in this community?
Probe: Why? Why not?
2. Do you think use among youth in particular is a problem?
3. Do you know youth in this community who use marijuana?
4. *“Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations who are more likely to use marijuana in this community?
Who?
5. Do you know parents or adults in this in this community who permit youth to use marijuana in their homes?
6. Where do you think people in this community obtain marijuana?
7. What are your thoughts on how laws and regulations surrounding marijuana use are enforced in your area?
8. What forms of media do you think influence marijuana use among minors in this community?
9. If you were aware of a minor who was using marijuana, what would you do?
10. What resources are available in your community that addresses youth marijuana use?

Questions for Law Enforcement

Marijuana

1. Do you think marijuana use is a serious problem in this community?

2. What specific measures are being taken in this community to enforce laws against marijuana use?
Probe: Enforcing possession laws? Enforcing laws regarding adults supplying minors with marijuana?
3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations who are more likely to smoke marijuana community? Do you think certain populations are more adversely affected by marijuana use or laws surrounding it?
4. How effective do you think those measures are at enforcing laws against marijuana use? What would help make them more effective?
5. What do you think about the legal consequences of marijuana use?
Probe: do you think there are alternative deterrents?
6. Do you think judges and the juvenile justice system are doing a good job with respect to youth marijuana violations?
Probe: If yes, why? If no, why?
7. Based on your view of this community, how acceptable is youth marijuana use?
8. Where do you think youth in this community get marijuana?
9. Where do you think youth in this community use marijuana?

Questions for School Based Personnel/Educators

Marijuana

1. Do you think marijuana use is a serious problem in this community?
Probe: Why? Why not?
2. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*

Are there certain sub-populations who are more likely to use marijuana in this community?
Do you think certain populations are more adversely affected by marijuana use or laws surrounding it?

3. Does your school have a marijuana policy? If yes, is it enforced?
4. Is marijuana education part of the school's curriculum? If yes, is it effective?
5. Does your school sponsor extra-curricular activities to prevent marijuana use?
6. Do you think parents understand the of the youth marijuana problem?
7. What role do you think teachers and counselors can play in reducing youth marijuana use?
8. What is the most effective way to keep youth from using marijuana?
9. Does your school have a mechanism in place for identifying and assisting students who may have problems with marijuana?

Questions for Community Leaders, Public and Elected Officials

Marijuana

1. Do you think marijuana use is a serious problem in this community?
Probe: Why? Why not?
2. Do you think there are sufficient laws to reduce marijuana use?
Probe: What are the most effective laws? Are there other alternatives you can think of to reduce marijuana use in your community?
3. Do you think the public is aware of current marijuana laws and regulations?
4. How would you improve marijuana legislation in this state?
5. What is the role of public and elected officials in reducing marijuana use?
6. How would you improve local laws, policies or procedures related to marijuana use?

Questions for Medical/Health/Treatment Specialists

Marijuana

1. Do you think marijuana use is a serious problem in this community?
Probe: Why? Why not?
2. What are the barriers, if any, to reducing marijuana use in this community?
3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations who are more likely to use marijuana in this community? Do you think certain populations are more adversely affected by marijuana use or laws surrounding it?
4. What is the role of health professionals in reducing marijuana use? Prevention specialists? Treatment personnel?
5. Do you think the general public understands the marijuana problem in this community?
6. What can be done to solve the youth marijuana problem in this community?

Optional: Questions for Business Leaders

Marijuana

1. Do you think marijuana use is a serious problem in this community?
Probe: Why? Why not?
2. Do you think there are sufficient laws to reduce youth marijuana use?
Probe: If yes, what are the most effective laws? Are there alternative ways to reduce marijuana use?
3. Do you think local businesses are aware of current marijuana laws and regulations?
4. What is the role of local business officials in reducing marijuana use?
5. How would you improve local laws, policies or procedures related to marijuana use?

Optional: Questions for Faith Leaders

Marijuana

1. Do you think marijuana use is a serious problem in this community?
Probe: Why? Why not?
2. What are the main reasons people in this community smoke marijuana?
3. What role can the church play in reducing marijuana use?
4. What is the most effective way to keep youth from using marijuana?
6. What resources are available in your community to address marijuana use?

YOUTH FOCUS GROUP QUESTIONS

MARIJUANA

Is youth marijuana use a serious problem in of the community (name of the community)?

Probe: If yes, why? If no, why?

Do all youth use marijuana or it is just a few?

Probe: What percentage of students at your school do you think use marijuana?

How old are most kids when they started smoking marijuana?

How often do you believe kids smoke marijuana?

What are the main reasons you think kids use marijuana?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to smoke marijuana in this community?

Perceptions of Harm

What are the potential consequences of marijuana use?

Do you think marijuana use is harmful? If so, how and why?

What do you think should happen to a kid who is caught smoking marijuana?

Parental Monitoring

How do parents feel about their kids smoking marijuana?

If kids in your community smoke marijuana, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

How much do feel your influence affects whether or not your child(ren) use marijuana?

Do you know of parents and/or other adults, e.g. other family members or friends, who are using marijuana in their homes and/or property and/or in areas where youth frequent?

Probe: Do you know if the adults are using marijuana in front of youth or where youth can observe marijuana use? Do know if the parents and/or other adults are using marijuana with youth?

Access/Availability

How do most kids get marijuana?

How easy would it be for people your age to get marijuana from those sources?

Where do kids go when they want to smoke marijuana?

Outreach/Programs

What existing programs/services are in place to help students smoking marijuana?

Are you aware of local resources that can help students with marijuana-related problems?

What's happening in schools to educate students about marijuana?

How effective do you think our community is at enforcing laws against youth marijuana use?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from smoking marijuana?

PARENT FOCUS GROUP QUESTIONS

MARIJUANA

Social Norms

Is youth marijuana use a serious problem in (name of the community)?

Probe: If yes, why? If no, why?

Do all youth use marijuana or it is just a few? Probe: What percentage of students do you think smoke marijuana?

How often do you believe kids smoke marijuana?

What are the main reasons you think kids smoke marijuana?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to smoke marijuana in this community?

Perceptions of Harm

What are the potential consequences of marijuana use?

Do you think marijuana use is harmful? If so, how?

What do you think should happen to a kid who is caught smoking marijuana?

Parental Monitoring

How do parents feel about their kids smoking marijuana?

If kids in your community smoke marijuana, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

Access/Availability

How do most kids in your community get marijuana?

How easy would it be for kids to get marijuana from those sources?

Where do kids go when they want to smoke marijuana?

Outreach/Programs

RI Regional Prevention Task Force Coalitions: A Guide to the Community Needs Assessment - Page

Are you aware of local resources that can help students with marijuana-related problems?

What's happening in the community to educate parents about youth marijuana use?

How effective do you think our community is at enforcing laws against youth marijuana use?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from smoking marijuana?

Section 2c

TOBACCO USE QUALITATIVE DATA SOURCES

KEY INFORMANT INTERVIEW QUESTIONS

Questions for Youth Serving Groups

Tobacco Use Questions

1. Do you think tobacco use is a serious problem in this community?
 - a. Probe: Why? Why not?
2. Do you know youth in this community who smoke or chew tobacco?
3. *“Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*

Are there certain sub-populations who are more likely to use tobacco products in this community?
4. Do you know parents or adults in this in this community who permit youth to use tobacco products in their homes?
5. Where do you think minors in this community obtain tobacco products?
6. How are people in your community consuming tobacco products?

Probe: Cigarettes? Dip? Vapes/electronic cigarettes or ENDS? How about youth in particular?
7. Under what circumstances is it acceptable for an adult to provide tobacco products to minors?
8. What forms of media do you think influence tobacco product use in this community?
9. If you were aware of a minor who was using tobacco products, what would you do?
10. What resources are available in your community that address tobacco use?

Questions for Law Enforcement

Tobacco Use

1. Do you think tobacco use is a serious problem in this community?

2. What specific measures are being taken in this community to enforce laws against youth tobacco use?
Probe: Enforcing sales laws?
3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations who are more likely to smoke or use tobacco or ENDS in your community?
4. How are people in your community consuming tobacco products?
Probe: Cigarettes? Dip? Vapes/electronic cigarettes/ENDS? How about youth in particular?
5. Do you think the legal consequences for youth tobacco purchases are sufficient? Are other regulations sufficient?
6. Based on your view of this community, how acceptable is tobacco use?
7. Where do you think youth in this community get tobacco products?

Questions for School Based Personnel/Educators

Tobacco Use

1. Do you think youth tobacco use is a serious problem in this community?
Probe: Why? Why not?
2. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kid who are more likely to use tobacco products in this community?
3. How are youth in your community consuming tobacco products?
Probe: Cigarettes? Dip? Vapes/electronic cigarettes/ENDS?

4. Does your school have a tobacco policy? If yes, is it enforced?
5. Is tobacco education part of the school's curriculum? If yes, is it effective?
6. Does your school sponsor extra-curricular activities to prevent the use of tobacco products?
7. Do you think parents understand the youth tobacco problem?
8. Do many youth have parents or other family members that smoke at home?
9. What role do you think teachers and counselors can play in reducing youth tobacco use?
10. What is the most effective way to keep youth from using tobacco products?
11. Does your school have a mechanism in place for identifying and assisting students who may be using tobacco products?

Questions for Community Leaders, Public and Elected Officials

Tobacco Use

1. Do you think tobacco use is a serious problem in this community?
Probe: Why? Why not?
2. Do you think there are sufficient laws to reduce tobacco use?
Probe: If yes, what are the most effective laws? Are there alternatives to reduce tobacco use?
3. What is the role of public and elected officials in reducing youth tobacco use?
4. How would you improve local laws, policies or procedures related to youth tobacco use?

Questions for Medical/Health/Treatment Specialists

Tobacco Use

1. Do you think youth tobacco use is a serious problem in this community?
Probe: Why? Why not?
2. What are the barriers, if any, to reducing tobacco use in this community?

3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*

Are there certain sub-populations who are more likely to use tobacco products in this community?

4. How are people in your community consuming tobacco products?
Probe: Cigarettes? Dip? Vapes/electronic cigarettes/ENDS? How about youth in particular?
5. What is the role of health professionals in reducing tobacco use? Prevention specialists? Treatment personnel?
6. Do you think the general public understands the tobacco problem in this community?
7. What can be done to solve the tobacco problem in this community?

Optional: Questions for Business Leaders

Tobacco Use

1. Do you think tobacco use is a serious problem in this community?
Probe: Why? Why not?
2. Do you think there are sufficient laws to reduce tobacco use?
Probe: If yes, what are the most effective laws? What are some alternatives?
3. How are people in your community consuming tobacco products?
Probe: Cigarettes? Dip? Vapes/electronic cigarettes/ENDS?
4. Do you think local businesses are aware of current youth tobacco laws and regulations?
5. What is the role of local business officials in reducing tobacco use?
6. How would you improve local laws, policies or procedures related to tobacco use?

Optional: Questions for Faith Leaders

Tobacco Use

1. Do you think tobacco use is a serious problem in this community?
Probe: Why? Why not?
2. How are people in your community consuming tobacco products?
Probe: Cigarettes? Dip? Vapes/electronic cigarettes/ENDS? How about youth in particular?
3. What role can religious groups play in reducing tobacco use?
4. What is the most effective way to keep people from using tobacco products?
5. What resources are available in your community to address tobacco use?

YOUTH FOCUS GROUP QUESTIONS

Youth Tobacco Use

Is youth tobacco use a serious problem in of the community (name of the community)?
Probe: If yes, why? If no, why?

Do all youth use tobacco products or it is just a few?
Probe: What percentage of students at your school do you think smoke cigarettes?

How old are most kids when they started smoking or using tobacco?

How often do you believe kids use tobacco products?

What are the main reasons you think kids use tobacco products?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to use tobacco in this community?

Perceptions of Harm

What are the potential consequences of tobacco use?

Do you think tobacco is harmful? If so, how and why?

What do you think should happen to a kid who is caught smoking or using tobacco products?

Parental Monitoring

How do parents feel about their kids smoking or using tobacco products?

If kids in your community smoke or use tobacco products, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

Access/Availability

How do most kids get tobacco products?

How easy would it be for people your age to get tobacco from those sources?

Where do kids go when they want to smoke or use tobacco products?

Outreach/Programs

What existing programs/services are in place to help students smoking or using tobacco products?

Are you aware of local resources that can help students with tobacco-related problems?

What's happening in schools to educate students about tobacco?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from smoking or using tobacco products?

PARENT FOCUS GROUP QUESTIONS

Tobacco Use

Social Norms

Is youth tobacco use a serious problem in (name of the community)?

Probe: If yes, why? If no, why?

Do all youth use tobacco products or it is just a few? Probe: What percentage of youth do you think smoke or use tobacco products?

How often do you believe kids smoke or use tobacco products?

What are the main reasons you think kids smoke or use tobacco products?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to smoke or use tobacco products in this community?

Perceptions of Harm

What are the potential consequences of tobacco use?

Do you think tobacco use is harmful? If so, how?

What do you think should happen to a kid who is caught smoking?

Parental Monitoring

How do parents feel about their kids smoking?

If kids in your community smoke or use other tobacco products, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

How much do you feel your influence affects whether or not your child(ren) smoke? What about electronic cigarettes, like NJOY or blu?

Access/Availability

How do most kids in your community get tobacco products?

How easy would it be for kids to get tobacco products from those sources?

Where do kids go when they want to smoke?

Outreach/Programs

Are you aware of local resources that can help students with tobacco-related problems?

What's happening in the community to educate parents about youth tobacco use?

How effective do you think our community is at enforcing laws against youth purchase of tobacco products?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from smoking?

Section 2d

NON-MEDICAL PRESCRIPTION DRUG USE QUALITATIVE DATA SOURCES

KEY INFORMANT INTERVIEW QUESTIONS

Questions for Youth Serving Groups

Non-medical Prescription Drug Use

1. Do you think prescription drug use among is a serious problem in this community?
Probe: Why? Why not?
2. Do you know youth in this community who abuse prescription drugs?
3. What types of prescription drugs do you think youth are abusing?
4. *“Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to abuse prescription drugs in this community? Do you think certain populations are more adversely affected by drug use or laws surrounding it?
5. Do you know parents or adults in this in this community who permit youth to use prescription drugs in their homes recreationally?
6. Where do you think minors in this community obtain prescription drugs?
7. If you were aware of a minor who was using prescription drugs, what would you do?
8. What resources are available in your community that address youth prescription drug use?

Questions for Law Enforcement

Non-medical Prescription Drug Use

1. Do you think prescription drug use is a serious problem in this community?
2. What specific measures are being taken in this community to enforce laws against prescription drug use?
Probe: Enforcing possession laws? Prescription laws? Enforcing laws regarding adults supplying minors with prescription drugs?

3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations who are more likely to use prescription drugs in your community? Do you think certain populations are more adversely affected by drug use or laws surrounding it?
4. How effective do you think those measures are at enforcing laws against youth prescription drug use? Are there alternatives that could be more effective?
5. What types of prescription drugs do you think youth are abusing or using recreationally?
6. Do you think the legal consequences for youth prescription drug use are a sufficient deterrent? Are there alternative ways to reduce drug abuse in the community?
7. Do you think judges and the juvenile justice system are doing a good job with respect to prescription drug violations?
Probe: If yes, why? If no, why?
8. Based on your view of this community, how acceptable is illicit prescription drug use?
9. Where do you think youth in this community get prescription drugs?

Questions for School Based Personnel/Educators

Non-medical Prescription Drug Use

2. Do you think youth prescription drug abuse is a serious problem in this community?
Probe: Why? Why not?
3. What types of prescription drugs do you think youth are abusing?
4. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to use prescription drugs in this community? Do you think certain populations are more adversely affected by drug use or laws surrounding it?

5. Does your school have a prescription drug policy? If yes, is it enforced?
6. Is drug education part of the school's curriculum? If yes, is it effective?
7. Does your school sponsor extra-curricular activities to prevent illicit drug abuse?
8. What role do you think teachers and counselors can play in reducing youth prescription drug use?
9. What is the most effective way to keep youth from abusing prescription drugs?
10. Does your school have a mechanism in place for identifying and assisting students who may have problems with prescription drugs?

Questions for Community Leaders, Public and Elected Officials

Non-medical Prescription Drug Use

1. Do you think prescription drug abuse is a serious problem in this community?
Probe: Why? Why not?
2. What types of prescription drugs do you think people are abusing?
3. Do you think there are sufficient laws to reduce prescription drug abuse?
Probe: If yes, what are the most effective laws? Are there alternatives that could be more effective?
4. Do you think the public is aware of current prescription drug laws and regulations?
5. What is the role of public and elected officials in reducing prescription drug use?
6. How would you improve local laws, policies or procedures related to prescription drug use?

Questions for Medical/Health/Treatment Specialists

Non-medical Prescription Drug Use

1. Do you think prescription drug abuse is a serious problem in this community?
Probe: Why? Why not?

2. What are the barriers, if any, to reducing prescription drug abuse in this community?
3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations who are more likely to use prescription drugs in this community? Do you think certain populations are more adversely affected by drug use or laws surrounding it?
4. What types of prescription drugs do you think people are abusing or using recreationally?
5. What is the role of health professionals in reducing prescription drug abuse? Prevention specialists? Treatment personnel?
6. What can be done to solve the prescription drug problem in this community?

Optional: Questions for Business Leaders

Non-medical Prescription Drug Use

1. Do you think prescription drug abuse is a serious problem in this community?
Probe: Why? Why not?
2. What types of prescription drugs do you think people are abusing?
3. Do you think there are sufficient laws to reduce youth prescription drug abuse?
Probe: If yes, what are the most effective laws? Are there alternatives to reduce the abuse of prescription drugs?
4. Do you think local businesses are aware of current prescription drug laws and regulations?
5. How would you improve local laws, policies or procedures related to youth prescription drug abuse?

Optional: Questions for Faith Leaders

Non-medical Prescription Drug Use

1. Do you think prescription drug abuse is a serious problem in this community?
Probe: Why? Why not?
2. What are the main reasons people in this community use prescription drugs?
3. What role can religious organizations play in reducing prescription drug abuse?
4. What is the most effective way to keep youth from using prescription drugs?
5. What resources are available in your community to address prescription drug use?

YOUTH FOCUS GROUP QUESTIONS

Non-medical Prescription Drug Use

Is youth prescription drug abuse a serious problem in of the community (name of the community)?

Probe: If yes, why? If no, why?

Do all youth use prescription drugs or it is just a few?

Probe: What percentage of students at your school do you think use prescription drugs?

How old are most kids when they started using prescription drugs?

How often do you believe kids use prescription drugs?

What are the main reasons you think kids use prescription drugs?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to use prescription drugs in this community?

Perceptions of Harm

What are the potential consequences of prescription drug use?

Do you think prescription drug use is harmful? If so, how and why?

What do you think should happen to a kid who is caught using prescription drug?

Parental Monitoring

How do parents feel about their kids using prescription drug?

If kids in your community use prescription drugs, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

Access/Availability

How do most kids get prescription drugs?

How easy would it be for people your age to get prescription drugs from those sources?

Where do kids go when they want to use prescription drugs?

Outreach/Programs

What existing programs/services are in place to help students using prescription drugs?

Are you aware of local resources that can help students with prescription drug-related problems?

What's happening in schools to educate students about prescription drugs?

How effective do you think our community is at enforcing laws against youth prescription drug use?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from using prescription drugs?

PARENT FOCUS GROUP QUESTIONS

Non-medical Prescription Drug Use

Social Norms

Is youth prescription drug abuse a serious problem in (name of the community)?

Probe: If yes, why? If no, why?

Do all youth use prescription drugs or it is just a few? Probe: What percentage of students do you think use prescription drug?

How often do you believe kids use prescription drugs?

What are the main reasons you think kids use prescription drugs?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to use prescription drugs in this community?

Perceptions of Harm

What are the potential consequences of prescription drug use?

Do you think prescription drug use is harmful? If so, how?

What do you think should happen to a kid who is caught using prescription drugs?

Parental Monitoring

How do parents feel about their kids using prescription drugs?

If kids in your community use prescription drugs, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

How much do you feel your influence affects whether your kids use prescription drugs not prescribed to them? Over the counter medications?

Access/Availability

How do most kids in your community get prescription drugs?

How easy would it be for kids to get prescription drugs from those sources?

Where do kids go when they want to use prescription drugs?

Outreach/Programs

Are you aware of local resources that can help students with prescription drug-related problems?

What's happening in the community to educate parents about youth prescription drug use?

How effective do you think our community is at enforcing laws against youth prescription drug use?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from using prescription drugs?

Section 2e

OPIATE USE QUALITATIVE DATA SOURCES

KEY INFORMANT INTERVIEW QUESTIONS

Questions for Youth Serving Groups

Opiate Questions

1. Do you think opiate use is a serious problem in this community?
Probe: Why? Why not?
2. Do you know youth in this community who use opiates?
3. *“Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to use opiates in this community? Do you think certain populations are more adversely affected by drug use or laws surrounding it?
4. Where do you think minors in this community obtain opiates?
5. What type of opiates are youth using?
Probe: Street drugs like heroin? Prescription medications?
6. What forms of media do you think influence opiate drug use among minors in this community?
7. If you were aware of a minor who was using opiates, what would you do?
8. What resources are available in your community that addresses youth opiate and drug use?
9. Does your community have a drug deposit box at a police station or other location?

Questions for Law Enforcement

Opiate Use

1. Do you think opiate abuse is a serious problem in this community?
2. What specific measures are being taken in this community to enforce laws against opiate use?

Probe: Enforcing possession laws? Enforcing laws regarding adults supplying minors with opiates? Prescription laws?

3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*

Are there certain sub-populations who are more likely to use opiates in the community? Do you think certain populations are more adversely affected by drug use or laws surrounding it?

4. What type of opiates are people using?

Probe: Street drugs like heroin? Prescription medications?

5. How effective do you think measures are at enforcing laws against youth opiate use? What would help make them more effective?

6. Do you think the legal consequences for opiate abuse are sufficient? Are there alternatives that would be effective in reducing use?

7. Do you think judges and the juvenile justice system are doing a good job with respect to opiate use?

Probe: If yes, why? If no, why?

8. Based on your view of this community, how acceptable is opiate abuse?

9. Where do you people in this community get opiates?

10. Does your community have a drug deposit box at a police station or other location?

Questions for School Based Personnel/Educators

Opiate Use

1. Do you think youth opiate use is a serious problem in this community?

Probe: Why? Why not?

2. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*

Are there certain sub-populations of kids who are more likely to use opiates in this

community? Do you think certain populations are more adversely affected by drug use or laws surrounding it?

3. What type of opiates are youth using?
Probe: Street drugs like heroin? Prescription medications?
4. Does your school have an opiate or drug policy? If yes, is it enforced?
5. Is opiate education part of the school's curriculum? If yes, is it effective?
6. Does your school sponsor extra-curricular activities to prevent opiate use?
7. Do you think parents understand the extent of youth opiate use?
8. What role do you think teachers and counselors can play in reducing youth opiate or drug use?
9. What is the most effective way to keep youth from using opiates?
10. Does your school have a mechanism in place for identifying and assisting students who may have problems with opiates?

Questions for Community Leaders, Public and Elected Officials

Opiate Use

1. Do you think opiate abuse is a serious problem in this community?
Probe: Why? Why not?
2. What type of opiates are people using?
Probe: Street drugs like heroin? Prescription medications?
3. Do you think there are sufficient laws to reduce youth opiate use?
Probe: If yes, what are the most effective laws? If no, what additional laws need to be passed to reduce youth opiate use?
4. Do you think the public is aware of current opiate laws and regulations?
5. How would you improve opiate legislation in this state?
6. What is the role of public and elected officials in reducing opiate abuse?
7. How would you improve local laws, policies or procedures related to opiate use?

8. Does your community have a drug deposit box at a police station or other location?

Questions for Medical/Health/Treatment Specialists

Opiate Use

1. Do you think youth opiate use is a serious problem in this community?
Probe: Why? Why not?
2. What type of opiates are people using?
Probe: Street drugs like heroin? Prescription medications?
3. What are the barriers, if any, to reducing opiate abuse in this community?
4. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations who are more likely to use opiates in this community?
Do you think certain populations are more adversely affected by drug use or laws surrounding it?
5. What is the role of health professionals in reducing opiate misuse? Prevention specialists? Treatment personnel?
6. Do you think the general public understands the opiate problem in this community?
7. What can be done to solve the opiate problem in this community?

Optional: Questions for Business Leaders

Opiate Use

1. Do you think opiate abuse is a serious problem in this community?
Probe: Why? Why not?
2. What type of opiates are people using?
Probe: Street drugs like heroin? Prescription medications?
3. Do you think there are sufficient laws to reduce youth opiate use?
Probe: If yes, what are the most effective laws? Are there alternatives that would be effective in reducing opiate abuse?

4. What is the role of local business officials in reducing youth opiate use?
5. How would you improve local laws, policies or procedures related to opiate use?
6. Does your community have a drug deposit box at a police station or other location?

Optional: Questions for Faith Leaders

Opiate Use

1. Do you think opiate use is a serious problem in this community?
Probe: Why? Why not?
2. What type of opiates are people using?
Probe: Street drugs like heroin? Prescription medications?
3. What are the main reasons people in this community use opiates?
4. What role can religious organizations play in reducing opiate abuse?
5. What resources are available in your community to address opiate abuse?

YOUTH FOCUS GROUP QUESTIONS

Youth Opiate Use

Is youth opiate use a serious problem in the community of (name of the community)?
Probe: If yes, why? If no, why?

Do all youth use opiates or it is just a few?
Probe: What percentage of students at your school do you think use opiates?

How old are most kids when they started using opiates?

How often do you believe kids use opiates?

What are the main reasons you think kids use opiates?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to use opiates in this community?

Perceptions of Harm

What are the potential consequences of opiate use?

Do you think opiate use is harmful? If so, how and why?

What do you think should happen to a kid who is caught using opiates? Why?

Parental Monitoring

How do parents feel about their kids using opiates?

If kids in your community use opiates, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

Do parents secure lock up opiates in their homes?

Probe: do the use lock boxes? Keep it out of reach etc. do parents safely dispose of extra medication/unused medication.

Access/Availability

How do most kids get opiates?

How easy would it be for people your age to get opiates from those sources?

Where do kids go when they want to use opiates?

Outreach/Programs

What existing programs/services are in place to help students who use opiates?

Are you aware of local resources that can help students with opiate problems?

What’s happening in schools to educate students about opiates?

How effective do you think our community is at enforcing laws against youth opiate use?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from using opiates?

PARENT FOCUS GROUP QUESTIONS

Youth Opiate Use

Social Norms

Is youth opiate use a serious problem in (name of the community)?

Probe: If yes, why? If no, why?

Do all youth use opiates or it is just a few? Probe: What percentage of students do you think use opiates?

How often do you believe kids use opiates?

What are the main reasons you think kids use opiates?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to use opiates in this community?

Perceptions of Harm

What are the potential consequences of opiate use?

Do you think opiate use is harmful? If so, how?

What do you think should happen to a kid who is caught using opiates?

Parental Monitoring

How do parents feel about their kids using opiates?

If kids in your community use opiates, how likely do you think it would be that people would find out?

Probe: Parents? Family members? Police? Teachers?

Do parents secure lock up opiates in their homes?

Probe: do the use lock boxes? Keep it out of reach etc. do parents safely dispose of extra medication/unused medication.

How much do you feel your influence affects whether or not your kids use heroin or other opiates?

Access/Availability

How do most kids in your community get opiates?

How easy would it be for kids to get opiates from those sources?

Where do kids go when they want to use opiates ?

Outreach/Programs

Are you aware of local resources that can help students with opiate-related problems?

What's happening in the community to educate parents about youth opiate use?

How effective do you think our community is at enforcing laws against youth opiate use?

What ideas/strategies could the Substance Abuse Prevention Coalition try to keep students from using opiates?

Section 2f

DEPRESSION QUALITATIVE DATA SOURCES

KEY INFORMANT INTERVIEW QUESTIONS

Questions for Youth Serving Groups **Depression**

1. Do you think depression is a serious problem in this community?
Probe: Why? Why not?
2. Do you know youth in this community who are dealing with issues of depression?
3. *“Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to feel sad, hopeless, or depressed?
4. When a young person is feeling sad, hopeless, or depressed, who are they most likely to reach out to first in the community?
5. Why is it sometimes difficult for youth to reach out to adults or others when they are suffering from depression?
6. If you were aware of a minor who was showing signs of depression what would you do?
7. Is self-harm an issue with youth in the community?
8. Is bullying a problem in this community?
Probe: What type of bullying? In school? Outside of class? Online?
9. Are there initiatives in your community to fight bullying?
10. What resources are available in your community that addresses youth suicide?

Questions for Law Enforcement **Depression**

1. Do you think depression is a serious problem in this community?

2. *"Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion."*
Are there certain sub-populations of kids who are more likely to contemplate or attempt suicide community?
3. When a young person is feeling sad, hopeless, or depressed, who are they most likely to reach out to first in the community?
4. Why is it sometimes difficult for youth to reach out to adults or others when they are suffering from depression?
5. Is self-harm an issue with youth in the community?
6. Is bullying a problem in this community?
Probe: What type of bullying? In school? Outside of class? Online?
7. What does your community do to address bullying?
8. If you were aware of a minor who was showing signs of depression, what would you do?

Questions for School Based Personnel/Educators

Depression

1. Do you think depression is a serious problem in this community?
Probe: Why? Why not?
2. *"Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion."*
Are there certain sub-populations of kids who are more likely suffer from depression in this community?
3. When a young person is feeling sad, hopeless, or depressed, who are they most likely to reach out to first in the community?
4. Why is it sometimes difficult for youth to reach out to adults or others when they are suffering from depression?
5. If you were aware of a minor who was showing signs of depression, what would you do?

6. Is self-harm an issue with students?
7. Is bullying a problem in your school?
Probe: What type of bullying? In school? Outside of class? Online?
8. Is education about depression a part of the school's curriculum? If yes, is it effective?
9. Does your school sponsor extra-curricular activities to prevent bullying?
10. What is the most effective way to prevent bullying?
11. What is parental perception of the youth depression? Of bullying?
12. What role do you think teachers and counselors can play in identifying and addressing depression among students?
13. Does your school have a mechanism in place for identifying and assisting students who may be showing signs of depression?

Questions for Community Leaders, Public and Elected Officials

Depression

1. Do you think depression is a serious problem in this community?
Probe: Why? Why not?
2. When a young person is feeling sad, hopeless, or depressed, who are they most likely to reach out to first in the community?
3. Why is it sometimes difficult for youth to reach out to adults or others when they are showing signs of depression?
4. If you were aware of a minor who was using showing signs of depression, what would you do?
5. Is self-harm an issue with youth in the community?
6. Is bullying a problem in this community?
Probe: What type of bullying? In school? Outside of class? Online?
7. What does your community do to address bullying?

8. What resources are available in your community that address depression among youth?
9. What is the role of public and elected officials in maintaining youth mental health?

Questions for Medical/Health/Treatment Specialists

Depression

1. Do you think depression is a serious problem in this community?
Probe: Why? Why not?
2. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to feel depressed in this community?
3. When a young person is feeling sad, hopeless, or depressed, who are they most likely to reach out to first in the community?
4. Why is it sometimes difficult for youth to reach out to adults or others when they are feeling depressed?
5. If you were aware of a minor who was using feeling depressed, what would you do?
6. What resources are available in your community that addresses youth mental health?
What about bullying?
7. What is the role of health professionals in reducing depression among youth?
Prevention specialists? Treatment personnel?
8. What can be done to reduce depression among youth in this community?

Optional: Questions for Business Leaders

Depression

1. Do you think depression is a serious problem in this community?
Probe: Why? Why not?

2. When a young person is feeling sad, hopeless, or depressed, who are they most likely to reach out to first in the community?
3. If you were aware of a minor who was feeling depressed, what would you do?
4. What resources are available in your community that addresses youth depression?
5. What is the role of local business officials in reducing bullying?

Optional: Questions for Faith Leaders

Depression

1. Do you think depression is a serious problem in this community?
Probe: Why? Why not?
2. When a young person is feeling sad, hopeless, or depressed, who are they most likely to reach out to first in the community?
3. Why is it sometimes difficult for youth to reach out to adults or others when they are feeling depressed?
4. If you were aware of a minor who was using feeling depressed, what would you do?
5. What resources are available in your community that address depression among youth?
6. What role can religious organizations play in preserving youth mental health?
7. Do you think parents understand the seriousness of depression among youth?
8. Is self-harm an issue with youth in the community?
9. Is bullying a problem in this community?
Probe: What type of bullying? In school? Outside of class? Online?
10. What resources are available in your community to address youth mental health?

YOUTH FOCUS GROUP QUESTIONS

Depression

Is depression a serious problem in the community (name of the community)?

Probe: If yes, why? If no, why?

Is there a certain age group where kids are more likely to feel depressed?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to feel depressed?

Perceptions of Harm

What are some factors that influence depression among youth?

What are some of the consequences of depression if it is not recognized and addressed?

Is self-harm among youth a problem in your community?

Is bullying a problem in your community?

Probe: How does it happen? At school? Online?

If someone told you that they were feeling depressed what would you do?

Probe: Would you tell someone? Keep it a secret? Why?

What should be done if someone was feeling depressed? Or considering hurting themselves?

Parental Monitoring

Do you think parents are likely to be aware if their child was feeling depressed?

If someone in your community was depressed, how likely would it be for someone to find out?

Probe: Parents? Family members? Teachers?

Are there things parents can do to prevent bullying?

Access/Availability

How common do you think it is for youth to feel sad, hopeless, or depressed?

How common do you think it is for kids to suffer from depression?

How common is bullying?

Probe: what type?

Outreach/Programs

What existing programs/services are in place to help students who might be feeling depressed?

What's happening in schools to educate students about depression?

What's happening in schools to address bullying?

How effective do you think our community is at reaching out to youth who may be struggling with these problems?

What ideas/strategies could the Substance Abuse Prevention Coalition try to preserve mental health among young people?

PARENT FOCUS GROUP QUESTIONS

Depression

Is depression a serious problem in the community (name of the community)?

Probe: If yes, why? If no, why?

Is there a certain age group where kids are more likely to feel depressed?

"Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion."

Are there certain sub-populations of kids who are more likely to feel depressed?

Perceptions of Harm

What are some factors that influence depression among youth?

What are some of the consequences of depression if it is not recognized and addressed?

Is self-harm among youth a problem in your community?

Is bullying a problem in your community?

Probe: How does it happen? At school? Online?

If someone told you that they were feeling depressed what would you do?

Probe: Would you tell someone? Keep it a secret? Why?

What should be done if someone was feeling depressed? Or considering hurting themselves?

Parental Monitoring

Do you think parents are likely to be aware if their child was feeling depressed?

If someone in your community was depressed, how likely would it be for someone to find out?

Probe: Parents? Family members? Teachers?

Are there things parents can do to prevent bullying?

Access/Availability

How common do you think it is for youth to feel sad, hopeless, or depressed?

How common do you think it is for kids to suffer from depression?

How common is bullying?

Probe: what type?

Outreach/Programs

What existing programs/services are in place to help students who might be feeling depressed?

What's happening in schools to educate students about depression?

What's happening in schools to address bullying?

How effective do you think our community is at reaching out to youth who may be struggling with these problems?

What ideas/strategies could the Substance Abuse Prevention Coalition try to preserve mental health among young people?

Section 2g

SUICIDE QUALITATIVE DATA SOURCES

KEY INFORMANT INTERVIEW QUESTIONS

Questions for Youth Serving Groups **Suicide**

1. Do you think suicide is a serious problem in this community?
Probe: Why? Why not?
2. Do you know youth in this community who have thought about or attempted suicide?
3. What are some of the reasons that youth contemplate suicide in your community?
4. *“Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to contemplate or attempt suicide in this community?
5. When a young person is feeling sad, hopeless, or thinking about suicide, who are they most likely to reach out to first in the community?
6. Why is it sometimes difficult for youth to reach out to adults or others when they are thinking about suicide?
7. If you were aware of a minor who was using considering suicide, what would you do?
8. Is this something that youth discuss among themselves?
9. What resources are available in your community that addresses youth suicide?

Questions for Law Enforcement **Suicide**

1. Do you think youth suicide is a serious problem in this community?
2. What are some of the reasons that youth contemplate suicide in your community?
3. What specific measures are being taken in this community to prevent youth suicide?

4. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*

Are there certain sub-populations of kids who are more likely to contemplate or attempt suicide community?

5. When a young person is feeling sad, hopeless, or thinking about suicide, who are they most likely to reach out to first in the community?
6. Why is it sometimes difficult for youth to reach out to adults or others when they are thinking about suicide?
7. If you were aware of a minor who was using considering suicide, what would you do?
8. Is this something that youth discuss among themselves?

Questions for School Based Personnel/Educators Suicide

1. Do you think youth suicide is a serious problem in this community?
Probe: Why? Why not?
2. What are some of the reasons that youth contemplate suicide in your community?
3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to contemplate or attempt suicide in this community?
4. When a young person is feeling sad, hopeless, or thinking about suicide, who are they most likely to reach out to first in the community?
5. Why is it sometimes difficult for youth to reach out to adults or others when they are thinking about suicide?
6. If you were aware of a minor who was using considering suicide, what would you do?
7. Is this something that youth discuss among themselves?

8. What resources are available in your community that addresses youth suicide?
9. Is education about suicide a part of the school's curriculum? If yes, is it effective?
10. Does your school sponsor extra-curricular activities to prevent bullying?
11. What is parental perception of the youth suicide problem? Of bullying?
12. What role do you think teachers and counselors can play in reducing youth suicide?
13. What is the most effective way to keep youth contemplating suicide?
14. Does your school have a mechanism in place for identifying and assisting students who may have problems bullying?
15. Does your school have a mechanism in place for identifying and assisting students who may be at risk for contemplating suicide?

Questions for Community Leaders, Public and Elected Officials Suicide

1. Do you think youth suicide is a serious problem in this community?
Probe: Why? Why not?
2. What are some of the reasons that youth contemplate suicide in your community?
3. When a young person is feeling sad, hopeless, or thinking about suicide, who are they most likely to reach out to first in the community?
4. Why is it sometimes difficult for youth to reach out to adults or others when they are thinking about suicide?
5. If you were aware of a minor who was using considering suicide, what would you do?
6. Is this something that youth discuss among themselves?
7. What resources are available in your community that addresses youth suicide?
8. What is the role of public and elected officials in reducing youth suicide?

Questions for Medical/Health/Treatment Specialists

Suicide

1. Do you think youth suicide is a serious problem in this community?
Probe: Why? Why not?
2. What are some of the reasons that youth contemplate suicide in your community?
3. *“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”*
Are there certain sub-populations of kids who are more likely to contemplate or attempt suicide in this community?
4. When a young person is feeling sad, hopeless, or thinking about suicide, who are they most likely to reach out to first in the community?
5. Why is it sometimes difficult for youth to reach out to adults or others when they are thinking about suicide?
6. If you were aware of a minor who was using considering suicide, what would you do?
7. What resources are available in your community that addresses youth suicide?
8. What is the role of health professionals in reducing youth suicide? Prevention specialists? Treatment personnel?
9. Do you think the general public understands the youth suicide problem in this community?
10. What can be done to reduce youth suicide in this community?

Optional: Questions for Business Leaders

Suicide

1. Do you think youth suicide is a serious problem in this community?
Probe: Why? Why not?
2. What are some of the reasons that youth contemplate suicide in your community?

3. When a young person is feeling sad, hopeless, or thinking about suicide, who are they most likely to reach out to first in the community?
4. If you were aware of a minor who was using considering suicide, what would you do?
5. What resources are available in your community that addresses youth suicide?
6. What is the role of local business officials in reducing youth suicide?

Optional: Questions for Faith Leaders Suicide

1. Do you think youth suicide is a serious problem in this community?
Probe: Why? Why not?
2. What are some of the reasons that youth contemplate suicide in your community?
3. When a young person is feeling sad, hopeless, or thinking about suicide, who are they most likely to reach out to first in the community?
4. Why is it sometimes difficult for youth to reach out to adults or others when they are thinking about suicide?
5. If you were aware of a minor who was using considering suicide, what would you do?
6. Is this something that youth discuss among themselves?
7. What resources are available in your community that addresses youth suicide?
8. What role can religious organizations play in reducing youth suicide?
9. Do you think parents understand the seriousness of the youth suicide problem?
10. What is the most effective way to prevent youth suicide?
11. What resources are available in your community to address youth suicide?

YOUTH FOCUS GROUP QUESTIONS

Suicide

Is youth suicide a serious problem in of the community (name of the community)?

Probe: If yes, why? If no, why?

How old are most kids who are thinking about hurting themselves?

What are some of the reasons that youth contemplate suicide in your community?

“Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

Are there certain sub-populations of kids who are more likely to contemplate or attempt suicide in this community?

Perceptions of Harm

What do you think are some reasons that youth would contemplate suicide?

If someone told you that they were thinking about hurting themselves what would you do?

Probe: Would you tell someone? Keep it a secret? Why?

What should be done if someone was considering suicide?

Parental Monitoring

Do you think parents are likely to be aware if their child was contemplating suicide?

If someone in your community was considering suicide, how likely would it be for someone to find out?

Probe: Parents? Family members? Teachers?

Access/Availability

How common do you think it is for youth to have thoughts about suicide?

How common do you think it is for kids to attempt suicide?

Outreach/Programs

What existing programs/services are in place to help students who might be contemplating suicide?

Are you aware of local resources that can help students who may be having thoughts about suicide?

What's happening in schools to educate students about suicide and depression?

How effective do you think our community is at reaching out to youth who may be struggling with these issues?

What ideas/strategies could the Substance Abuse Prevention Coalition try to prevent suicide among young people?

PARENT FOCUS GROUP QUESTIONS

Suicide

Is youth suicide a serious problem in of the community (name of the community)?

Probe: If yes, why? If no, why?

How old are most kids who are thinking about hurting themselves?

What are some of the reasons that youth contemplate suicide in your community?

"Health disparities adversely affect groups based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion."

Are there certain sub-populations of kids who are more likely to contemplate or attempt suicide in this community?

Perceptions of Harm

What do you think are some reasons that youth would contemplate suicide?

If someone told you that they were thinking about hurting themselves what would you do?

Probe: Would you tell someone? Keep it a secret? Why?

What should be done if someone was considering suicide?

Parental Monitoring

Do you think parents are likely to be aware if their child was contemplating suicide?

If someone in your community was considering suicide, how likely would it be for someone to find out?

Probe: Parents? Family members? Teachers?

Access/Availability

How common do you think it is for youth to have thoughts about suicide?

How common do you think it is for kids to attempt suicide?

Outreach/Programs

What existing programs/services are in place to help students who might be contemplating suicide?

Are you aware of local resources that can help students who may be having thoughts about suicide?

What's happening in schools to educate students about suicide and depression?

How effective do you think our community is at reaching out to youth who may be struggling with these issues?

What ideas/strategies could the Substance Abuse Prevention Coalition try to prevent suicide among young people?

PULLING IT ALL TOGETHER - PRIORITIZATION

Now you have some quantitative data from surveys and qualitative data from key informants and focus groups. Maybe you have more than you wanted and have to figure out how to prioritize needs. What's the next step?

Here are some suggestions for ways of analyzing and comparing the data to help you to prioritize:

Trends

Is any of the quantitative data, especially for risk or protective factors, available for multiple years? For example can you look across multiple years of data to see if things are getting worse, staying the same, or getting better?

Magnitude

Does any of the data suggest that the contribution of one risk or protective factor to the problem behavior is much bigger than another (for example, either the quantitative or the qualitative data suggest that a low perception of risk or harm exists for BOTH youth and adults).

Benchmarks or Comparisons

Is any of the quantitative data available at the state or sub-state level (county or municipal) so that your community's rates might be compared with the state, county or a comparable community?

Relation to Other Behavioral Health Conditions or Outcomes

Is the risk or protective factor related to or shared with other behavioral health conditions or social issues? If that factor were targeted by the community, might there be other benefits such as decrease in youth suicide attempts or increased academic achievement? A

brief synthesis of shared behavioral health risk and protective factors is contained in an easy to read matrix entitled “Risk and Protective Factors for Mental, Emotional and Behavioral Disorders Across the Lifecycle” from National Resource Council and Institute of Medicine. (2009) *Preventing mental, emotional, and behavioral disorders among young people: Progress and possibilities*. Washington, DC: The National Academies Press. This document is available on the password protected section of RIPRC.org web site.

Group Comparisons/Sub-Populations and Health Disparities

Are any data available that might help describe impacts across groups or sub-populations who may be vulnerable to health disparities (e.g., variations based on age, gender, race, ethnicity, socio-economic status, geography, sexual orientation, gender identity or disability status)? For example, is access and availability of alcohol more prevalent in a specific urban neighborhood than another; are there gender differences in use patterns or with respect to risk or protective factors?

Triangulation or Congruence of Quantitative and Qualitative Data Sources

Do the themes or responses from key informant surveys or focus groups confirm or support the quantitative data? Does any of the qualitative data shed additional insight into why the problem exists or who experiences it?

Changeability

Is one condition, risk or protective factor more changeable than another? Does the community have the necessary resources and readiness to address the risk or protective factor? Can the change be measured within the funding period?

Importance

How much is the risk factor contributing to the problem? How strong is the evidence that points to it in quantitative or qualitative data? How strong is the research about its' association with the problem?

RI Regional Prevention Coalition Prioritization Tool

Purpose: This tool is designed to assist RISAPA providers in prioritizing priority problems and risk or protective factors. Communities must explain how the priority problem was selected and which factors were considered in prioritization in their strategic plan.

FIGURE 1



This tool will take you through the following types of analyses to assist you with each type of prioritization (e.g., consequences, consumption, and risk or protective factors):

- Magnitude
- Trend
- Benchmarking/Comparisons
- Group Comparisons/Sub-Populations and Health Disparities
- Relation to Other Behavioral Health Conditions or Outcomes
- Changeability & Importance

The **consequence** prioritization addresses questions related to the type or severity of the priority problem; **consumption** tells us who, what, when and where is affected by the priority problem; and **risk or protective factors** describes why the consumption is happening. Different types of analyses are applied to each as some are more or less applicable to a given circumstance or prioritization exercise. Both quantitative and qualitative data collected are included in this tool. Please note that YOU MAY NOT BE ABLE TO COMPLETE ALL ANALYSES since the data may not be available and SOME COMPARISONS WILL NOT BE APPLICABLE to your community. If either of these circumstances apply simply select N/A and move on. You need do NOTHING further.

This tool contains fillable fields and check boxes. You may choose from different possible categories and add your own entries in the fillable fields.

CONSEQUENCE PRIORITIZATION

We will begin by looking at the consequence or problems associated with the priority problem in your community. The following analyses are important in determining the types of possible problems or consequences associated with the priority problem. This may prompt you to examine a particular consumption pattern contributing to the problem or consequence and whether a related risk or protective factor must be addressed to reduce the consumption and associated consequence. See Figure 1, prior page.

For example, if there are numerous school suspensions for substance related use, it will become important to understand who is using, where they're using (on school grounds, at the bus stop, in a car with a driving student, at home) as the risk or protective factor related to the consumption may differ depending on the condition or circumstance, and, the strategy or intervention to address it will need to be tailored to it.

Identifying possible consequences or problems associated with substance use becomes important in identifying the potential partners, collaborators or stakeholders within the community to assist in efforts to address the problem. It is also instructive as part of the process of identifying needed resources or activities to increase readiness of key stakeholders to implement interventions.

It is also possible that no particular consequence will emerge as more important than another. If this is the case, select not applicable (N/A) at the end.

PRIORITY PROBLEM: [Click here to enter text.](#)

Note: The priority problem identified by the state is noted at Table 1 on page 3. In some cases you may have two and can elect to select one for needs assessment.

MAGNITUDE/CONSEQUENCES

This analysis explores or examines negative outcomes commonly associated with substance use or other priority problems. For the purpose of this analysis, we are combining the results of the qualitative data collection with archival or survey data. The time frame to examine would be most recent year available for any quantitative data. It would be a single point in time. For the purpose of this analysis, **frequently** would be that the consequence or problem was mentioned by half or more of the participants; **moderately** would be less than half but more than one quarter; **infrequently** would be less than one quarter and include not being mentioned at all. A response of “**yes**” to “Supported by Quantitative Data” means there was quantitative data available that supported for findings from the qualitative data. “**No or N/A**” means that quantitative data is unavailable or the analysis is not applicable to your community.

CONSEQUENCE	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Traffic Safety					
arrests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
convictions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law violations					
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Related					
School suspensions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other school incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Injuries/ER/EMS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Need for Treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Negative Health Outcomes					
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other themes re: Consequences					

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TREND/CONSEQUENCE

Trend analysis looks at the problem over time. You must have at least two data points to compare in order to conduct a trend analysis. A response of **increasing** suggests that your community's rates are increasing over time (at least two sequential data points or with the majority of years increasing); **same** means it's reasonably close to the sequential data point(s); **decreasing** means your rates are decreasing over time (at least two sequential data points or with the majority of years decreasing); and, **N/A** means that either the data is unavailable, analysis is not applicable or you are otherwise unable to make any comparison.

YEARS OF DATA or DATA POINTS REVIEWED: Click here to enter text.

If different data categories contain different data points, please note that in the notes section below each category.

CONSEQUENCES				
	Increasing	Same	Decreasing	N/A
Traffic Safety				
arrests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
convictions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on traffic safety data:</i> Click here to enter text.				
Law violations				
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on law violation data:</i> Click here to enter text.				
School Related				
School Suspensions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other school incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on school related data:</i> Click here to enter text.				
Injuries/ER/EMS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on injury data:</i> Click here to enter text.				
Treatment Admissions				

Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notes on data: Click here to enter text.				

BENCHMARKING or COMPARISON/CONSEQUENCE

A response of **higher** suggests that your community's rates are higher than your comparator (state or community); **same** means it's reasonably close to the comparator; **lower** means your rates are less than the comparator; and, **N/A** means that either the data is unavailable, analysis is not applicable or you are otherwise unable to make any comparison. Please note below whether you are comparing the rates to state overall or a comparable community.

SOURCE OF COMPARISON: Click here to enter text.

CONSEQUENCES				
	Higher	Same	Lower	N/A
Traffic Safety				
arrests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
convictions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law violations				
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Suspensions				
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other school incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Injuries/ER/EMS				
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treatment Admissions				
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GROUP COMPARISONS/SUB-POPULATIONS and HEALTH DISPARITIES

Are there different types of consequences experienced across sub-populations, especially those vulnerable to health disparities based on results from your qualitative data collection?[Click here to enter text.](#)

QUALITATIVE DATA COLLECTION RESULTS

[Click here to enter text.](#)

Did any themes related to the consequences associated with use of the priority problem come out in either the key informant surveys or in the focus groups with youth and adults?

[Click here to enter text.](#)

CONSUMPTION PRIORITIZATION

The following set of analyses informing prioritization are designed to address questions regarding the magnitude of the behaviors or way in which the substance is being consumed, by whom, where and when. This is important because a full understanding of consumption patterns is needed in order to identify the associated risk or protective factors.

MAGNITUDE/CONSUMPTION

This analysis explores or examines consumption patterns associated with the priority problem. For the purpose of this analysis, we are combining the results of the qualitative data collection with archival or survey data. For the purpose of this analysis, **frequently** would be that the consumption pattern was mentioned by half or more of the participants; **moderately** would be less than half but more than one quarter; **infrequently** would be less than one quarter and include not being mentioned at all. A response of “**yes**” to “Supported by Quantitative Data” means data existed to support findings from the qualitative data collection. “**No or N/A**” captures a lack of available data or inapplicability of analysis.

CONSUMPTION	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Driving after substance use					
DUI/OUI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30 Day Prevalence Data					
Use of substance described as high	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevalence of negative behavior or symptom (unhealthy eating, depression, etc.) described as high	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Related Magnitude/Consumption					
Students skipping class due to being drunk or high past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student under the influence at school in past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student smoking at school in the past	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

year					
Bullying issues at school in the past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students visiting counselors, teachers, other school officials for issues relating to depression or other mood disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students having difficulty eating healthy foods at school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students having difficulty finding time for physical activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RISAPA Priority Problem as Primary Admission					
Perceived treatment need/primary substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TREND/CONSUMPTION

YEARS OF DATA or DATA POINTS REVIEWED: Click here to enter text.

*If different data categories contain different data points, please note that in the notes section below each category. Please note that some of this trend data can be found in the **Community Profile** developed by the State Epidemiology and Outcomes Workgroup. These are available at RIPRC.org.*

(See additional instructions for categorizing responses in the consequences section).

CONSUMPTION				
	Increasing	Same	Decreasing	N/A
Driving after substance use				
DUIs/OUI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on data:</i> Click here to enter text.				
30 Day Prevalence Data				
Past 30 day use of substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevalence of negative behavior or symptom (unhealthy eating, depression, etc.) described as high	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on data:</i> Click here to enter text.				
School Related Consumption				
Students skipping class due to being drunk or high past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student under the influence at school in past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student smoking at school in the past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bullying issues at school in the past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students visiting counselors, teachers, other school officials for issues relating to depression or other mood disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students having difficulty eating healthy foods at school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students having difficulty finding time for physical activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on data:</i> Click here to enter text.				
RISAPA Priority Problem as Primary Admission				
Priority Substance as Primary Substance at time of Treatment Admission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Admission due to mental health concern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on data:</i> Click here to enter text.				

BENCHMARKING or COMPARISON/CONSUMPTION

A response of **higher** suggests that your community's rates are higher than your comparator (state or community); **same** means it's reasonably close to the comparator; **lower** means your rates are less than the comparator; and, **N/A** means that either the data is unavailable, analysis is not applicable or you are otherwise unable to make any comparison.

SOURCE OF COMPARISON: Click here to enter text.

CONSUMPTION				
	Higher	Same	Lower	N/A
Driving after substance use				

DUIs/OUI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30 Day Prevalence Data				
Past 30 day use of substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevalence of negative behavior or symptom (unhealthy eating, depression, etc.) described as high	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Related Consumption				
Students skipping class due to being drunk or high past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student under the influence at school in past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student smoking at school in the past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bullying issues at school in the past year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students visiting counselors, teachers, other school officials for issues relating to depression or other mood disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students having difficulty eating healthy foods at school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students having difficulty finding time for physical activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.				
Priority Problem as Primary Admission				
Priority Substance as Primary Substance at time of Treatment Admission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Admission due to mental health concern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GROUP COMPARISONS/SUB-POPULATIONS and HEALTH DISPARITIES

Are there any differences in magnitude/consumption patterns among sub-populations especially those vulnerable to health disparities? [Click here to enter text.](#)

QUALITATIVE DATA COLLECTION RESULTS

Did any themes related to the how, when and who consumes the substance or is affected by the magnitude of the problem come out in either the key informant surveys or in the focus groups with youth and adults? [Click here to enter text.](#)

Does the qualitative data support the quantitative data collection or provide additional detail that should be considered in prioritizing the consumption pattern or magnitude to be addressed? [Click here to enter text.](#)

RISK OR PROTECTIVE FACTOR PRIORITIZATION

MAGNITUDE/ RISK OR PROTECTIVE FACTORS

This analysis explores or examines risk or protective factors associated with substance use or other health-related problem being assessed. For the purpose of this analysis, we are combining the results of the qualitative data collection with archival or survey data. A response of **frequently** would be that the risk or protective factor was mentioned by half or more of the participants; **moderately** would be less than half but more than one quarter; **infrequently** would be less than one quarter and include not being mentioned at all. A response of **yes** to “Supported by Quantitative Data” means there was data existed related to the risk or protective factor being experienced or strongly influences conditions in the community. **No or N/A** captures unavailability of data, an absence of indication that the risk or protective factor is a strong influencer of conditions in the community, or that the analysis is not applicable to your community.

There are additional spaces for other themes that emerged. Use for additional evidence based risk or protective factors (available on the password protected section of the RIPRC.org site).

UNDERAGE DRINKING

MAGNITUDE Risk or Protective Factor	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Low perception of risk or harm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ineffective family management or parental monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth Access Commercial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth Access Social	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other comments from qualitative data collection: [Click here to enter text.](#)

YOUTH MARIJUANA USE

MAGNITUDE Risk or Protective Factor	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Low perception of risk or harm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ineffective family management or parental monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perceived peer approval or actual peer use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Norms Supporting Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other comments from qualitative data collection: [Click here to enter text.](#)

YOUTH TOBACCO USE

MAGNITUDE Risk or Protective Factor	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Low perception of risk or harm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ineffective family management or parental monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perceived peer approval or actual peer use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Norms Supporting Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth access (retail/commercial; social/non-commercial)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other comments from qualitative data collection: [Click here to enter text.](#)

YOUTH PRESCRIPTION DRUG USE

MAGNITUDE Risk or Protective Factor	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Low perception of risk or harm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ineffective family management or parental monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perceived peer approval or actual peer use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Norms Supporting Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability at home or in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other comments from qualitative data collection: [Click here to enter text.](#)

YOUTH OPIATE USE

MAGNITUDE Risk or Protective Factor	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Low perception of risk or harm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ineffective family management or parental monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perceived peer approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

or actual peer use					
Community Norms Supporting Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability (pills at home, no disposal, sales on the street etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other comments from qualitative data collection: [Click here to enter text.](#)

YOUTH DEPRESSION

MAGNITUDE Risk or Protective Factor	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Low perception of risk or harm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of parental or family support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of support within the community or at school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bullying at school, online, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inability to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

talk to teachers, counselors, other adults					
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other comments from qualitative data collection: [Click here to enter text.](#)

YOUTH SUICIDE

MAGNITUDE Risk or Protective Factor	Mentioned During Key Informant Surveys or Focus Groups			Supported by Quantitative Data?	
	Frequently	Moderately	Infrequently or not at all	Yes	No or N/A
Lack of parental or family support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of social support within the community or at school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inability to talk to teachers, counselors, other adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inability to talk to peers, a “hush hush” topic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

enter text.					
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other comments from qualitative data collection: [Click here to enter text.](#)

GROUP COMPARISONS/SUB-POPULATIONS and HEALTH DISPARITIES

Are there any differences in risk or protective factors experienced among sub-populations especially those vulnerable to health disparities? [Click here to enter text.](#)

RISK OR PROTECTIVE FACTORS - QUALITATIVE DATA COLLECTION RESULTS- Other considerations

Did any themes related to the risk or protective factors related to the substance or health factor come out in either the key informant surveys or in the focus groups with youth and adults? [Click here to enter text.](#)

Does the qualitative data support the quantitative data collection or provide additional detail that should be considered in prioritizing the risk or protective factors to be addressed? [Click here to enter text.](#)

TREND/ RISK OR PROTECTIVE FACTORS

YEARS OF DATA or DATA POINTS REVIEWED: [Click here to enter text.](#)

If different data categories contain different data points, please note that in the notes section below each category. Please note that the specific items contained in this table are derived from Survey works and specific items and location of the items are described in “Rhode Island RI Regional Prevention Coalitions: A Guide to the Community Needs Assessment” available on the password protected section of RIPRC.org web site.

(See additional instructions for categorizing responses in the consequences section).

RISK OR PROTECTIVE FACTORS				
	Increasing	Same	Decreasing	N/A
Parental Monitoring				
Student report of parent caring about grades	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student report of parent asks about subjects studied	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent report of talking with child about school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on data:</i> Click here to enter text.				
School Climate and School Norms/Behavioral Health				
Teacher report of teaching life and social skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teacher report of use of guidance counselor as resource to guide students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teacher report of working with counselor or health staff to help students obtain health or social services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Notes on data:</i> Click here to enter text.				

BENCHMARKING or COMPARISON/ RISK OR PROTECTIVE FACTORS

A response of higher suggests that your community's rates are higher than your comparator (state or community); same means it's reasonably close to the comparator; lower means your rates are less than the comparator; and, N/A means that either the data is unavailable, analysis is not applicable or you are otherwise unable to make any comparison.

SOURCE OF COMPARISON: [Click here to enter text.](#)

RISK OR PROTECTIVE FACTORS				
	Higher	Same	Lower	N/A
Parental Monitoring				
Student report of parent caring about grades	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student report of parent asks about subjects studied	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent report of talking with child about school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Climate and School Norms/Behavioral Health				
Teacher report of school climate related to helping students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teacher report of working with counselor or health staff to help students obtain health or social services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teacher report of identifying and referring students in need of health and social services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RELATION TO OTHER BEHAVIORAL HEALTH CONDITIONS OR OUTCOMES/ RISK OR PROTECTIVE FACTORS

The following analysis investigates whether a particular risk or protective factor is associated with other behavioral health conditions or outcomes. Please refer specifically to the matrix document entitled “Risk and Protective Factors for Mental, Emotional and Behavioral Disorders Across the Lifecycle” from National Resource Council and Institute of Medicine. (2009) *Preventing mental, emotional, and behavioral disorders among young people: Progress and possibilities*. Washington, DC: The National Academies Press. This document is available on the password protected section of RIPRC.org web site.

Please note that the terminology and titles associated with the various risk and protective factors may vary by discipline or disorder and may not be phrased in exactly the same way. Look for similarities rather than mirrored titles or definitions. If the risk or protective factor was IDENTIFIED during: quantitative or qualitative data collection, analyses of magnitude, trend or benchmarking AND is also associated with another behavioral health condition or disorder CHECK the box. The N/A category applies if the risk or protective factor did NOT emerge as an issue during the needs assessment; fell out during the course of analyses for magnitude, trend or benchmarking; or data is unavailable.

SHARED RISK OR PROTECTIVE FACTORS – OTHER BEHAVIORAL HEALTH CONDITIONS (from IOM Document)					
	Depression	Anxiety	Shizo- phrenia	Conduct Disorder	N/A
Individual Behaviors					
Underage drinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth use of marijuana	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other substance use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bullying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Healthy eating and exercise habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parental Monitoring/Family Management					
Ineffective family management or parental monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effective family management techniques and parental monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent communication about school and grades	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Favorable attitudes towards substance use by parents (family norm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SHARED RISK OR PROTECTIVE FACTORS – Continued					
	Depression	Anxiety	Shizo- phrenia	Conduct Disorder	N/A
Peer Use/Peer Influence					
Perceived peer approval or actual peer use of substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Healthy peer relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.					
Academics and School Climate					
Positive school climate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effective classroom management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to turn to authority figures					
Low school bonding or engagement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Norms					
Community norms supporting substance use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community is safe and supportive of youth					
Positive community norms (non-use)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RISK and PROTECTIVE FACTORS /CHANGEABILITY AND IMPORTANCE

For each risk or protective factor identified during needs assessment, enter the risk or protective factors reviewed into the applicable boxes using the following definitions:

- Importance: How much is the risk or protective factor contributing to or buffering against the problem?
- Changeability: Does the community have the necessary resources and readiness to address the risk or protective factor within a three year time frame?

CHANGEABILITY

High

Low

High

IMPORTANCE

Low

Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.

FINAL PRIORITIZATION

Please use the fillable fields to briefly summarize major findings from the various analyses contained in the tool. If circumstances arise such that no specific consequence or consumption pattern emerges, you may enter N/A (not applicable). However, you **MUST CHOOSE** a priority risk or protective factor.

CONSEQUENCES

After reviewing magnitude, trend and benchmarking, did any particular consequence emerge as the priority? [Click here to enter text.](#) If NO, skip to consumption section.

Is the consequence or problem amenable to change (e.g., is the related consumption pattern and associated risk protective factors changeable, especially the risk protective factors)? [Click here to enter text.](#)

Did findings from key informant surveys or focus groups suggest that the community overall or key stakeholders/leaders say this as a big problem? [Click here to enter text.](#)

If no, to changeability and community concern, consider a different consequence.

ENTER FINAL CONSEQUENCE HERE: [Click here to enter text.](#)

CONSUMPTION PATTERN

After reviewing magnitude, trend and benchmarking, which consumption pattern (if any) emerged as the priority? [Click here to enter text.](#)

Who is consuming or most effected (age, gender, race/ethnicity, other demographic factors)? [Click here to enter text.](#)

What are they consuming or effected by?[Click here to enter text.](#)

Where are they consuming or being impacted? [Click here to enter text.](#)

When are they consuming or being impacted? [Click here to enter text.](#)

Are there any group or sub-population differences in consumption patterns? If so, describe here: [Click here to enter text.](#)

ENTER FINAL CONSUMPTION PATTERN HERE: [Click here to enter text.](#)

RISK OR PROTECTIVE FACTORS

After reviewing magnitude, trend and benchmarking, relation to other behavioral health conditions or disorders, and changeability/importance which risk or protective factor(s) emerged as the priority? [Click here to enter text.](#)

Are there any group or sub-population differences in the way risk or protective factors are experienced? [Click here to enter text.](#)

Do you have the resources needed if you have chosen more than one risk or protective factor? [Click here to enter text.](#)

- If so, describe how you plan to further assess needed resources? [Click here to enter text.](#)

REFERENCES

“Guidelines for Conducting a Focus Group.” Office of Assessment. Duke Trinity College of Arts & Sciences. 2005 Eliot & Associates.

http://assessment.aas.duke.edu/documents/How_to_Conduct_a_Focus_Group.pdf

Getting the Lay of the Land on Health: A Guide for Using Interviews to Gather Information (Key Informant Interviews). The Access Project 1999.

<http://www.accessproject.org/downloads/final%20document.pdf>

“Community how to guides on underage drinking prevention.” The National Association of Governor’s Highway Safety Representatives. National Highway Traffic Safety Administration.

http://www.nhtsa.gov/people/injury/alcohol/community%20guides%20html/Guides_index.html

UCLA Center for Health Policy Research: Performing a Community-Based Assessment

<http://healthpolicy.ucla.edu/programs/health-data/trainings/Pages/community-assessment.aspx>

The Community Tool Box. Work Group for Community Health and Development at the University of Kansas.

<http://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/develop-a-plan/main>

US Department of Health & Human Services, Administration for Children & Families. Compassion Capital Fund/Strengthening Communities Fund Tools Conducting a Community Assessment. <http://www.acf.hhs.gov/programs/ocs/resource/conducting-a-community-assessment-1#needsandassets>

Appendices & Templates

RI Regional Prevention Coalitions - Key Informant Interview Planning Tool

[illegible]

Sample Focus Group Synthesis Table

(format is optional)

Example. You can create one table each for each of discrete focus group questions (e.g., one table each for each of questions posed to the focus group).

FOCUS GROUP 1: YOUTH		
QUESTION 3: What are the main reasons you think kids drink alcohol?		
Category Code	Participant ID	Responses
B	4	"Some kids are just bored"
A	3	"Usually they are just trying to be cool"
C	1	"They might feel sad or depressed"
A	4	"Everyone does it"
B	2	"It's fun"
C	6	"they want to escape their problems"
A	5	"want to fit in"
D	4	"their parents are okay with it"
B	2	"It feels good"

*Analysts determined coding categories: A – Peer influence, B – Enhancement, C – Coping, D – Parental influence

Risk or Protective Factor Changeability and Importance

CHANGEABILITY

High

Low

High

IMPORTANCE

Low

Importance: How much is the risk or protective factor contributing to or buffering against the problem?

Changeability: Does the community have the necessary resources and readiness to address the risk or protective factor?