THE SPF AND ENVIRONMENTAL STRATEGIES

Let's take a look at the elements of the Strategic Prevention Framework (SPF) and how each relates to environmental approaches. No "cookie cutter" response to environmental strategies exists. You cannot select a "model" program and hope it will work in your community. You must do your homework—study your community, know the people, the neighborhoods and, yes, the local context. Then your coalition can craft environmental strategies tailored to your community characteristics.

CADCA utilizes the SPF to assist community coalitions in developing the infrastructure needed for community-based, public health approaches that can lead to effective and sustainable reductions in alcohol, tobacco and other drug (ATOD) use and abuse. The elements shown Figure 3, at right, include:

- **Assessment.** Collect data to define problems, resources, and readiness within a geographic area to address needs and gaps.
- **Capacity.** Mobilize and/or build capacity within a geographic area to address needs.
- Planning. Develop a comprehensive strategic approach that includes policies, programs, and practices creating a logical, data-driven plan to address problems identified in the assessment.
- **Implementation.** Implement evidence-based prevention strategies, programs, policies and practices.
- **Evaluation.** Measure the impact of the SPF and the implementation of strategies, programs, policies and practices.

The elements of **sustainability** and **cultural competence**—central to community-based approaches—are shown in the center of the graphic indicating ttheir importance to each of the other elements.

The environmental strategies approach recognizes that risks associated with substance use are, in part, a function of the interplay between the environments where an individual uses and the substances he/she uses (agent). In the environmental approach, place matters. We recognize that managing the availability of alcohol and other drugs in specific environments impacts the substances individuals choose and the amount they use. These decisions determine the level of risk individuals and communities experience. The ability to shape individual's behavior by structuring what is expected or permitted in specific environments can reduce alcohol- and other drug-related problems.

Seven methods that can bring about community change have been adopted as a useful framework by CADCA's Institute. Each of these strategies represents a key element to build and maintain a healthy community. In the planning process, utilize all seven strategies to be as

comprehensive as possible to achieve population-level change. When focusing on implementation of environmental strategies, consider the types of information, skill-building and support activities necessary to move your interventions forward. You will see that the strategies overlap and reinforce each other.

The first three strategies—provide information, enhance skills and provide support—assist in educating the public, raising awareness and helping individuals make healthy choices. Generally they affect small numbers of individuals and are too weak to impact the community at large. These strategies often are necessary if you are working in a community where denial of and limited knowledge about the current problem is prevalent. But, they can provide initial information necessary to bring a community together around an issue.

Since the first three of the seven strategies focus on impacting individuals, they have obvious limitations and probably will not, by themselves, achieve measurable change in substance abuse rates in your community. However, the last four strategies are environmental in nature and when utilized in a multi-strategy plan can form the basis of a comprehensive approach along with the first three.

Seven strategies to affect community change

1. Provide information—Educational presentations, workshops or seminars, and data or media presentations (e.g., public service announcements, brochures, billboard campaigns, community meetings, town halls, forums, web-based communication).
2. Enhance skills—Workshops, seminars or activities designed to increase the skills of participants, members and staff (e.g., training, technical assistance, distance learning, strategic planning retreats, parenting classes, model programs in schools).
3. Provide support—Creating opportunities to support people to participate in activities that reduce risk or enhance protection (e.g., providing alternative activities, mentoring, referrals for services, support groups, youth clubs, parenting groups, Alcoholics or Narcotics Anonymous).
4. Enhance access/reduce barriers**—Improving systems and processes to increase the ease, ability and opportunity to utilize systems and services (e.g., access to treatment, childcare, transportation, housing, education, special needs, cultural and language sensitivity).
5. Change consequences (incentives/disincentives)—Increasing or decreasing the probability of a specific behavior that reduces risk or enhances protection by altering the consequences for performing that behavior (e.g., increasing public recognition for deserved behavior, individual and business rewards, taxes, citations, fines, revocations/loss of privileges).
6. Change physical design—Changing the physical design or structure of the environment to reduce risk or enhance protection (e.g., parks, landscapes, signage, lighting, outlet density).
7. Modify/change policies—Formal change in written procedures, by-laws, proclamations, rules or laws with written documentation and/or voting procedures (e.g., workplace initiatives, law enforcement procedures and practices, public policy actions, systems change within government, communities and organizations).

** Note: This strategy also can be utilized when it is turned around to reducing access/enhancing barriers. When community coalitions establish barriers to underage drinking or other illegal drug use, they decrease its accessibility. Prevention science tells us that when more resources (money, time, etc.) are required to obtain illegal substances, use declines. When many states began to mandate the placement of pseudoephedrine-based products behind the pharmacy counter, communities experienced a significant decrease in local clandestine methamphetamine labs. Barriers were put into place that led to a decrease in the accessibility of the precursor materials for meth production.

The list of strategies were distilled by the University of Kansas Work Group on Health Promotion and Community Development—a World Health Organization Collaborating Centre. Research cited in selection of the strategies is documented in the Resources and Research section of the CADCA website, www.cadca.org. The Institute uses this list by permission of the University.