

## STATE PREVENTION SYSTEM

### Structure and Organization

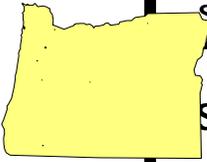
Oregon's Office of Alcohol and Drug Abuse Programs (OADAP) is located in the office of the Director of the Department of Human Resources. Alcohol, tobacco, and other drug (ATOD) services are contracted primarily through 34 county governments, with some prevention funding provided to regional or statewide prevention providers that are non-profit organizations or public entities. Each county, or group of counties, acts as a local or regional planning unit. The county provides ATOD services by awarding funds to the local county mental health system and contracting with private not-for-profit organizations. A performance-based contracting process is maintained, which requires county-funded provider agencies and the State to negotiate specific outcomes or contract conditions that may be necessary for contract compliance.

The State of Oregon utilizes a risk/protective factor-based framework of prevention. Individual counties and communities are asked to identify those risk and protective factors of greatest relevance within their respective service areas. They subsequently formulate strategies and identify programs that are most likely to impact these risk and protective factors.

The State's prevention strategies are based on those defined by the Center for Substance Abuse Prevention (CSAP). OADAP manages the Oregon Prevention Resource Center (OPRC), a center providing informational resources, training, and technical assistance/consultation; the Resource Center utilizes OADAP staff and external consultants and trainers. These services are delivered to community coalitions, schools, local agencies, and interested individuals. OADAP also disseminates prevention knowledge to communities even more directly through a statewide prevention system – comprised of professionals and volunteers – and utilizes its funded local agencies and other community-based organizations.

Two major types of services have traditionally been provided with Block Grant funds for Prevention:

- Services to youth and families, either within the context of the school environment or through community-based programs.
- Services directed at building local prevention coalitions, most typically the Oregon Together! Coalitions which were begun by OADAP and continue to be supported by the Office.



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**STATE PREVENTION INVENTORY – OREGON PROFILE**

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## Organizational Chart



\* Advisory council, whose members are Governor-appointed. No budgetary oversight of OADAP is provided by this council.

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## STATE PREVENTION INVENTORY - OREGON PROFILE

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### FUNDING AND RESOURCES

Year (FFY)	State Funding	SAPT Funding	20% Set-aside
1993	\$4,600	\$11,210,572	\$2,363,297
1994	48,277	12,550,659	2,512,033
1995	27,664	13,144,267	3,113,059

#### Allocation of Funds

CSAP Strategy	FFY 1993	FFY 1994	FFY 1995
Information Dissemination	\$234,820	\$249,913	\$309,707
Education	384,251	408,951	506,796
Alternatives	85,389	90,878	112,621
Problem Identification and Referral	960,627	977,389	1,211,238
Environmental	170,778	181,756	225,243
Community-based Process	298,862	318,073	394,175
Other*	228,570	285,073	353,279

\*Expenditures in the "Other" category included Resource Development activities and Synar Amendment compliance.

Resource Spending	FFY 1993	FFY 1994	FFY 1995
Planning, Coordination, and Needs Assessment	\$166,225	\$206,583	\$111,187
Quality Assurance	0	0	0
Training (post-employment)	0	0	0
Education (pre-employment)	21,698	26,966	14,514
Program Development	40,647	50,516	27,189
Research and Evaluation	0	0	0
Information Systems	0	0	0

#### Substate entities receiving set-aside funds for prevention service delivery

- 36 county-level contracts
- 70 community-based organizations
- 4 regional/state-level providers

#### Average amount of grant/contract:

- FFY 1993 - \$66,710
- FFY 1994 - \$83,106
- FFY 1995 - \$50,224

#### Per-capita 20% set-aside spending (population):

- FFY 1993 - \$0.70
- FFY 1994 - \$0.88
- FFY 1995 - \$0.84

#### Staff/Volunteers designated and supported by set-aside funding and level:

- FFY 1993 -
  - State: 4.5 FTE/2 Volunteers
  - Regional: 2 FTE/0 Volunteers
  - Local: 47 FTE/312 Volunteers\*
- FFY 1994 -
  - State: 4.5 FTE/1.5 Volunteers
  - Regional: 2 FTE/0 Volunteers
  - Local: 47.5 FTE/441 Volunteers\*
- FFY 1995 -
  - State: 6.0 FTE/2 Volunteers
  - Regional: 3.5 FTE/0 Volunteers
  - Local: 48.5 FTE/693 Volunteers\*

\*Volunteers with community coalitions.

### STATE CONTACT

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## PROGRAMS AND SERVICES

### Definition of Prevention:

In Oregon, prevention is defined as “a program of planned activities designed to inhibit or delay the onset of alcohol, tobacco, and other drug (ATOD) use, and thereby prevent alcohol, tobacco, or other drug-related problems and/or dependency.”

OADAP's mission statement is: “To assist Oregonians to prevent or overcome the harmful effects of substance abuse and to increase the taxpayers’ investment in services to those experiencing the harmful effects of substance abuse.” Twelve major goals for the agency are articulated; of these, five directly relate to prevention activities, including prevention, early intervention, program evaluation, staff competency and training, and increasing public awareness of drug and alcohol issues.

### Does the State have prevention plan?

Yes, the *Prevention/Early Intervention Implementation Plan: Guidelines 1995-97*.

- Enrolled members of the Oregon Health Plan

### Target populations for prevention services:

- Young people with identified risk factors
- Elderly
- Adolescents
- Children of alcohol and drug abusers
- Women of child-bearing age and pregnant women

### Total Number served:

- FFY 1993 – 188,102\*
- FFY 1994 – 196,399
- FFY 1995 – 201,546

\*Many consumers of prevention/early intervention services are multiple users, especially in the Problem ID/Referral strategy area.

### Programs funded:

Type	Number of Programs/Number Served*			Programs+
	FFY 1993	FFY 1994	FFY 1995	
Community mobilization	39**	49**	54**	Communities That Care; county- and community-based programs (these include community awards banquets and Celebrate Families picnics); Southeast Portland Together program; Lane County Partnership
Information dissemination	27	33	32	OR Prevention Resource Center

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Type	Number of Programs/Number Served*			Programs+
	FFY 1993	FFY 1994	FFY 1995	
Education	34	30	30	State Prevention Conference; family management programs; Smoke-Free Class 2000; parenting workshops; Marion County Health Department's Annual Adolescent Health Center; Oregon Teen Leadership in Prevention Institute
Problem identification and referral	20	21	24	Anger, hostility, and aggression trainings; Touchstone Program (Portland); student assistance programs
Alternatives	14	13	16	Mainstream Youth Programs (Portland); Southeast Portland Together project; (youth mentoring); Beaverton Together
Environmental	20	28	30	Salem-Keizer Together; other similar community coalitions

\*The data reflect the number of programs, except where indicated. Data by number of consumers served by strategy area were not available from the State.

\*\*Number of Community Boards, or identified coalitions.

+Most county-based programs provide all or most of the strategies noted. Over time, an increasing number have been evolving to encompass *environmental* and *life skills education* programs.

## DATA COLLECTION ACTIVITIES

### Results currently available on prevention programs funded by the 20% set-aside (including needs assessments and data collection):

Oregon relies on performance-based contracting in its prevention delivery system for local providers. Local contractors are accountable for measurement in four outcome areas:

- Impact/process – Outlines the amount of services to be delivered.
- Educational – An example is the risk factor of "academic failure," which can be measured by examining standardized school achievement scores.
- Attitudinal – Risk factors include "favorable attitudes toward ATOD use," "lack of commitment to school," "feelings of connectedness to the family/school/community," and "parental attitudes toward problem behavior(s)." These can be measured both "pre-" and "post-".
- Behavioral – Risk factors include "early conduct problems" and "antisocial behavior in early adolescence."

Before any funding is awarded for prevention/early intervention programs, proposals must be submitted and approved which include clear objectives in the above four areas. The "process" area outlines the amount of services to be delivered, e.g., how many clients will be served, the

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amount of services to be delivered, how many hours are to be delivered in each service area, and how many staff hours will be devoted to each strategy.

In each of the remaining three areas, applicants are required to designate specific outcomes which are expected to result from the products/services to be provided, as outlined in the "process" area. Applicants are to focus on risk and protective factors that are most appropriate to the needs of their community.

OADAP is responsible for conducting needs assessments to determine prevention needs. Activities undertaken to accomplish this include county-level planning, which requires local needs assessments, and – on a statewide basis – use of the Oregon Public School Drug Use Survey conducted by the Prevention Resource Center.\*

In terms of data collection, Oregon subscribes to a risk-focused prevention model.\*\*

\*Additionally, statewide population estimates based on indicators of risk factors are being expanded through CSAP-funded needs assessments currently underway in Oregon.

\*\* OADAP has utilized its CSAP funds to identify a set of risk indicators and to collect the corresponding data at the county level.

## SUPPORT SERVICES

### **Training and Technical Assistance:**

At present, there are no requirements for prevention professionals regarding ongoing training or staff development. The present administrative rules pertain entirely to the program directors, and their background/experience in ATOD programs. Other prevention trainings are generally delivered to both the Oregon Together! coalitions and the local prevention providers, based on the needs identified at either the State or local level.

### **Certification Activities:**

The State of Oregon has just recently instituted a prevention certification system, utilizing International Certification Reciprocity Consortium (ICRC) standardized formats and processes. This process is currently under the direction of the Addiction Counselor Certification Board, based in Oregon. Ultimately, the State will require certification for professionals working in State-funded programs.