

Campus & Community Coalition Partnership Recommendations

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Addiction
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Executive Summary

As students return to campuses after the COVID-19 pandemic, substance use among college-aged individuals is once again on the rise.¹ National data highlights an increase in annual and weekly cannabis consumption, alongside increased weekly alcohol intake among this demographic.^{2 3} North Carolina's colleges and universities are witnessing this firsthand, expressing worry over student alcohol, cannabis, and vape usage. Despite active involvement in state-level prevention initiatives and campus programs, a recent statewide needs assessment conducted by members of the Addiction Professionals of North Carolina (APNC) indicates persistent challenges hindering the effective implementation and success of prevention and recovery efforts on NC campuses.

In November 2021, as a response to these challenges, APNC extended an opportunity for North Carolina campuses and community agencies to partake in a Train the Trainer program focused on Bridging Prevention and Recovery (BPR), developed by SAFE Project. This program aimed to equip substance use disorder prevention and recovery professionals with essential collaborative skills to implement and sustain joint projects addressing the lingering impacts of the COVID-19 pandemic. During the execution of BPR in North Carolina, attendees were paired together and tasked with establishing new relationships with one another while simultaneously collaborating to bridge prevention and recovery in their communities through coalition building. Through this, key challenges surfaced, highlighting opportunities for growth and improvement. Among these were the need for more robust post-training implementation plans, clearer pathways forward, and enhanced resources and capacity for independent task management.

Despite feeling unprepared to implement BPR at this stage, community partners expressed a shared commitment to fostering collaborative endeavors within their communities and on college campuses, with the intended purpose of bridging prevention and recovery efforts in the future and overcoming challenges experienced with the initial implementation of BPR. In response to the implementation challenges and community comments, APNC

1 Substance Abuse and Mental Health Services Administration. (2023). Key substance use and mental health indicators in the United States: Results from the 2022 National Survey on Drug Use and Health (HHS Publication No. PEP23-07-01-006, NSDUH Series H-58). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. <https://www.samhsa.gov/data/report/2022-nsduh-annual-national-report>

2 Schulenberg, J. E., Patrick, M. E., Johnston, L. D., O'Malley, P. M., Bachman, J. G., & Miech, R. A. (2021). Monitoring the Future national survey results on drug use, 1975–2020: Volume II, College students and adults ages 19–60. Ann Arbor: Institute for Social Research, The University of Michigan. Available at <http://monitoringthefuture.org/pubs.html#monographs>

3 American College Health Association. American College Health Association-National College Health Assessment III: Undergraduate Student Reference Group Data Report Spring 2022. Silver Spring, MD: American College Health Association; 2022.

sought guidance from the Substance Abuse and Mental Health Services Administration (SAMHSA) as well as the International Town and Gown Association (ITGA), a global non-profit association dedicated to college campuses and community interests. Work from these organizations emphasizes community engagement as a crucial aspect of providing alcohol and other drug (AOD) services.

In further pursuit of understanding why community partners struggled to execute BPR as originally intended, APNC conducted interviews with integral stakeholders from two of North Carolina's community and coalition partnerships who have found success in their collaborative substance use related work together. These interviews explored the successes and challenges encountered by community coalitions and college campus representatives as they collaborate to address the prevention and recovery gaps within their communities. The aim was to gain a comprehensive understanding of how different types of partnerships could effectively mitigate the challenges experienced by communities when implementing BPR initiatives while also enhancing prevention and recovery-related outcomes in their communities and on their campuses. From these interviews, as well as best practices outlined by SAMHSA and ITGA, eight recommendations were created to help guide already established community coalitions and campus partners in their collaborative efforts, ensuring that resources are optimally utilized, voices are heard, and prevention and recovery capacities are strengthened across the board.

The Issue

As students return to campuses in the wake of the COVID-19 pandemic, substance use rates among college-age students are once again on the rise.¹ Collegiate-specific research confirms these trends, with the 2020 Monitoring the Future survey finding that annual and daily usage of cannabis amongst college students has been on the rise since 2017.² Data from the most recent American College Health Association's National College Health Assessment (ACHA NCHA) conducted in 2022 shows that of the college students who reported drinking in their lifetime (71%), nearly 39% reported drinking weekly for the past three months.³ North Carolina colleges and universities have become aware of similar trends on their campuses, expressing concern specifically around students' alcohol, cannabis, and vape use. In response to these concerns, North Carolina colleges and universities have actively engaged in state-level prevention initiatives and campus-specific programs to address student substance use and mitigate associated physical, social, and behavioral health issues. While certain programs have demonstrated success across North Carolina campuses, many prevention initiatives continue to encounter challenges that hinder the effective implementation and success of prevention and recovery efforts. These challenges became apparent through a statewide needs assessment executed by team members of Addiction Professionals of North Carolina (APNC).⁴

In November of 2021, as a response to challenges faced by campuses, APNC offered local North Carolina communities the opportunity to participate in a Train the Trainer program on Bridging Prevention and Recovery (BPR) as created by SAFE Project. BPR partners were thoughtfully selected, introducing one individual from the community and one from a local community campus. The teams included one prevention professional and one recovery professional, with the intention of closing the gap between prevention and recovery efforts on and off campuses, and building capacity within their communities. BPR works to break down the silos experienced by those working in prevention and recovery, offering a framework and model for how communities can work together to build their capacity, resources, and support to strengthen prevention and recovery programs and improve outcomes. Assessments derived from the training indicated that the training had strengthened the participants' understanding of integrating prevention and recovery initiatives. Participants also reported feeling as though they could successfully implement BPR practices in their communities.

However, post-training evaluations determined that participants had encountered difficulties in applying the framework within their respective communities with one

⁴ Addiction Professionals of North Carolina (2022). State of North Carolina's behavioral health workforce: Survey results. <https://www.apnc.org/wp-content/uploads/2022/04/APNC-Behavioral-Health-Frontline-Workforce-Survey.pdf>

participant saying that the “implementation plan for after the training was unclear.” Another participant noted that in the future they would like a “clearer path forward” after the training, a sentiment that was shared amongst several participants. A third participant shared that limited staff reduced their capacity, making it difficult to “focus solely on what the training wanted [them] to accomplish.” Despite the challenges impeding successful implementation, participants still conveyed a collective desire to persist in collaborative efforts between the communities and campuses aimed at bridging prevention and recovery work, believing that these relationships would benefit their communities. To better understand how to support communities and college partners in overcoming their stated implementation challenges, APNC reviewed the literature and conducted interviews with key community stakeholders to assess and discern best practices for future substance use prevention and recovery programming.

The Literature

Common themes quickly emerged from the research, with one of the most prevalent being to emphasize community engagement as a key to planning and implementing prevention and recovery services. Research conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA) supports this, noting community engagement is a “critical factor that influences the equitable scale-up of [evidence-based practices] and subsequently contributes to improvements in population health”⁵, in turn creating sustainable prevention and recovery services. The research further emphasizes that community engagement is often best facilitated through the use of a community coalition or advisory board, hosting stakeholders from diverse sectors of the community.⁵

This SAMHSA research prompted a more in-depth evaluation of campus and community coalitions and their potential impact on implementing AOD programming. Recognizing college campuses as integral components of the communities they reside in, often characterized as the town and gown relationship, it becomes imperative for the community and campus to cultivate this relationship. In doing so, they build their respective capacities to implement successful and sustainable programming. The International Town and Gown Association (ITGA) underscores the significance of nurturing this connection.⁶ Scott Gavazzi’s research extends the analogy of the town and gown relationship to that of a marriage, asserting that a harmonious partnership, marked by mutual high effort and high comfort, represents the ideal and most productive collaboration between the campus and community.⁷

Interviews conducted by APNC with integral stakeholders in two North Carolina communities highlighted the benefits of the harmonious town and gown relationship. In an interview with a representative from the Watauga Substance Abuse Prevention Coalition (WSAP) conducted on October 27th, 2023, they noted that “partnership makes the coalition more sustainable” and that their partnership with Appalachian State University affords them opportunities to engage in youth and young adult substance use prevention in ways they wouldn’t have been able to otherwise. During a separate interview conducted on October 27th, 2023, AOD faculty at Appalachian State University were asked about the impact of WSAP on their prevention efforts. AOD faculty responded that “being involved

⁵ Substance Abuse and Mental Health Services Administration (SAMHSA). *Community Engagement: An Essential Component of an Effective and Equitable Substance Use Prevention System*. SAMHSA Publication No. PEP22-06-01-005. Rockville, MD: National Mental Health and Substance Use Policy Laboratory. Substance Abuse and Mental Health Services Administration, 2022

⁶ International Town and Gown Association. (2023). ITGA core competencies. Core Competencies. <https://www.itga.org/index.php/about/core-competencies>

⁷ James M. Shaeffer, Sr. (2017). *The optimal town-gown marriage: Taking campus-community outreach and engagement to the next level*. *Journal of Higher Education Outreach and Engagement*. <https://openjournals.libs.uga.edu/jheoe/article/view/1321>

with them has been very educational and helped to grow our team's prevention efforts and knowledge" while also providing the school with additional perspectives on substance use related issues. This organic partnership, which takes a public health approach, has provided the campus and community with resources, education, and direct prevention programming that both organizations acknowledge would have been challenging to achieve on their own.

Similarly, UNC Chapel Hill and the Orange County Campus and Community Coalition have worked together to help reduce issues and harm related to alcohol use both on campus and in their community. An interview conducted on October 30th, 2023 with a staff representative from the Campus and Community Coalition conveyed that their coalition also takes a public health approach to alcohol-related programming, which in part led them to their partnership with UNC Chapel Hill. This partnership has helped the coalition maintain buy-in from the community and bring local experts from the campus to the coalition that help put into practice efforts that are tailored to their community and campus populations. Their success can be seen in data from their collaborative efforts which shows that college-age alcohol consumption on and off campuses is on average decreasing, while preventive measures such as party registration and alcohol education have increased.⁸ The coalition and campus also view success in their partnerships themselves, stating that the local expertise "brings people, knowledge, and time to the table" that helps them tailor programming to better fit their community.

Through interviews conducted with these coalitions, as well as input from other professionals in the field, APNC gained valuable insight into the challenges, successes, and best practices for the implementation of these partnerships and how they could be utilized in other North Carolina communities. These campus and community partnerships have fostered their relationships through the work of the already established coalitions, embodying the town-and-gown relationship, and effectively overcoming implementation barriers faced by other community members when using the BPR framework. This evidence, as well as post-BPR evaluations showing a readiness among participants to improve their town and gown relationships, suggests that community coalition and campus partnerships can be effective in bridging prevention and recovery efforts and building community capacity.

8 The Campus and Community Coalition. (2023). CCC Scorecard 2023. Clear Impact. <https://embed.clear-impact.com/Scorecard/Embed/82237> and Substance Use Policy Laboratory. Substance Abuse and Mental Health Services Administration, 2022.

Recommendations

Drawing upon common themes from coalition interviews, best practices outlined by SAMHSA⁹ and ITGA⁶, and foundational principles of coalition building,^{9 10 11} the following eight recommendations were formulated to guide the engagement of community partners and facilitate the successful collaboration of already established community coalitions and new or existing campus prevention and recovery professionals.

1. Current coalition leaders and campus prevention and recovery staff should prioritize building and strengthening their relationships with one another.
 - a. Relationships should be built during and outside of coalition meetings.
 - i. Ideas for relationship building can include but are not limited to:
 1. Phone Calls
 2. Informal Meetings
 3. Emailing
 4. Zoom Meetings
 - b. During these conversations, coalition members and campus representatives should discuss their strengths, the resources they are able to provide for prevention efforts, and barriers they anticipate facing in their efforts moving forward.
 - c. Those in leadership positions in both the town and on the campus are encouraged to show support of the campus community relationship by way of a letter of support for their collaborative efforts.
 - i. Leadership positions may include but are not limited to:
 1. Governor or Mayor
 2. Police Chief
 3. Dean of Students
 4. College President
2. The coalition should be diverse in nature, including stakeholders from multiple different arenas and cultural backgrounds.
 - a. The coalition should make a conscious effort to acknowledge, assess, and incorporate diversity, equity, inclusivity, belonging, and accessibility in their

9 Great Lakes Current. (2023, October 27). A Focus on Coalition Best Practices [Video]. Youtube. https://www.youtube.com/watch?v=ytD3_EPmwzs

10 Great Lakes Current. (2023, July 27). Working Together: Understanding How Community Coalitions Can Partner with College Campus Prevention [Video]. Youtube. <https://www.youtube.com/watch?v=AfoYKdFtn1c>

11 Prevention Technology Transfer Center Network. <https://pttcnetwork.org/centers/northeast-caribbean-pttc/product/coalitions-post-covid-cultivating-community-support>

planning and practices.

- b. Important stakeholders for a campus-community coalition may include but are not limited to:
 - i. University and community prevention or recovery specialists
 - ii. Law enforcement agencies
 - iii. Town Managers
 - iv. Student Affairs
 - v. University police
 - vi. Health Departments
 - vii. Greek Life
 - viii. Restaurant Owners
 - ix. City Councils
 - x. Students
 - xi. Professors
 - xii. Individuals with Lived Experience
 - c. Stakeholders are encouraged to be actively involved in the coalition. Active participation may look like but is not limited to:
 - i. Attending meetings
 - ii. Voicing opinions
 - iii. Offering resources
 - iv. Working on task forces
 - v. Contributing to coalition agendas
 - vi. Sharing the work of the coalition
3. The coalition should create a common language in order to reduce confusion when partnering on substance use efforts across sectors.
- a. This language should:
 - i. Avoid acronyms or provide each coalition member with definitions of commonly used acronyms.
 - ii. Define often interpretable terms (example: short-term or long-term)
 - 1. These definitions should be recorded for coalition members to reference.
 - iii. Be inclusive and culturally sensitive, with a focus on person-centered and destigmatizing language.
 - 1. An example of how to use person-centered language can be found [here](#).
 - iv. Be used by the entirety of the coalition and utilized in the creation of substance use related missions, values, and goals.
 - 1. Examples of how to create common language can be found [here](#).
 - 2. See Recommendation 4 below for more information.
4. The coalition as a whole should create a clear substance use-relevant mission statement, as well as a set of values and goals based on the community and campus rela-

tionship that shares the common language identified in Recommendation 3.

- a. These statements should:
 - i. Consider the wellbeing of both the community and the campus.
 - ii. Work to integrate on and off campus policies.
 - iii. Consider the social, emotional, behavioral, and physical risk and protective factors associated with substance use.
 - b. Coalition goals should consider current prevention and recovery efforts being produced in their communities and work to combine efforts rather than duplicate them.
 - c. The coalition should create an action plan or logic model that outlines:
 - i. The roles and responsibilities of each coalition member.
 - ii. The short and long term outcomes the coalition hopes to achieve.
 - iii. Identified prevention efforts that the coalition would like to implement or continue implementing.
 - iv. The resources the coalition already has and the resources they will need to meet their goals.
 - v. The steps the coalition will take to achieve their goals.
5. The coalition should approach their prevention and recovery efforts using a Public Health approach as suggested by [The Surgeon General's Report: Facing Addiction in America](#).
- a. The coalition should consider how substance use in their communities and on their campuses is a result of intersecting factors.
 - i. The coalition must understand how these intersecting factors may adversely affect certain populations.
 - ii. The coalition should make it a priority to understand the risk and protective factors faced by the students in their community.
 - b. The coalition should utilize evidence-based practices when implementing programming in their communities.
 - i. This programming may be universal, selective, or indicated, depending on the needs of their community.
6. The coalition should meet consistently to discuss ongoing projects, review roles and responsibilities, and the impact that their efforts are having on the community and the campus.
- a. Full coalition meetings should be held at least once a quarter. For new coalitions, it is encouraged to have monthly meetings until well established.
 - b. Meetings should be held at routine intervals and frequencies so that coalition members can plan for future meetings.
 - i. If possible, poll your coalition members to identify the best days and times for the group to meet.

Example: If Tuesdays from 3:00 PM to 4:00 PM is a time available for

the majority of coalition members, set your coalition meeting for the same Tuesday of each month at 3:00 PM.

- c. Options for both in-person and virtual meetings should be available to make meetings accessible for all members.
 - i. If possible, host meetings in central locations that are easily accessible by all group members.
 - ii. Appoint a notekeeper so that members who are unable to attend the meeting can review what was discussed and to help guide future meetings.
 - iii. If virtual, with the consent of present coalition members, record the meetings so that it can be watched at a later time for members who were unable to attend.
- d. Meetings should encourage active and ongoing participation. This may accomplished by:
 - i. Providing continuing education opportunities
 - ii. Bringing relevant speakers to the meetings
 - iii. Offering seminars or workshops
 - iv. Providing coalition members the opportunity to present their work
 - v. Offering refreshments
 - vi. Offering time to network
- e. If the coalition has subcommittees, these committees should host their own meetings as well as attend the larger coalition meetings.
 - i. Stakeholders should be placed in subcommittees based on their strengths and passions.
 - ii. Align the work of subcommittees with the members' working positions.
- f. Provide an agenda ahead of meetings so that members can prepare appropriately.
 - i. Agendas may also be used by members to justify their participation in the coalition with their leadership team.
 - ii. Provide the option for members to list any questions or concerns they may have on the agenda to be discussed.

- 7. The coalition should collectively determine how to evaluate the partnership between the town and the campus. The coalition may accomplish this by doing the following:
 - a. Determining and documenting what success looks like for their community. This may include but is not limited to:
 - i. Data-driven results
 - 1. Examples: Lower rates of drinking reported on campus, fewer accidents involving a driver under the influence, and fewer noise complaints in off-campus housing neighborhoods.
 - 2. [Results-Based Accountability](#): A data-driven decision-making process that puts a focus on the end results and works backward to help organizations identify the performance measures they must

- achieve to create community-wide impact.
 - ii. Number of community partnerships
 - iii. Community and/or campus reaction to events
 - iv. Student engagement in programming
 - b. Identifying how they will measure success within their coalition.
 - i. Stakeholders' efforts, both individually and collaboratively, should be celebrated.
 - 1. This celebration will look different depending on your stakeholders and what they are comfortable with. Celebration could include but is not limited to:
 - a. Recognition in the newsletter
 - b. Recognition at a meeting
 - c. Personal recognition between coalition president and member
 - c. Clearly outlining steps for addressing challenges or barriers within the coalition before implementing the group's action plan.
 - d. Regularly disseminate updates on prevention efforts during group meetings, providing ample time for discussing the successes and challenges faced by the coalition.
8. The coalition should encourage student involvement in their coalition efforts through the following steps:
- a. Working closely with the Public Health and Social Work departments on campus.
 - i. From these departments, students interested in or conducting research in substance use prevention can be identified.
 - ii. The coalition, with permission from the campus, may ask these students to help them identify substance use trends on campus. This may be accomplished through but is not limited to:
 - 1. Environmental observations conducted on and off campus
 - 2. Environmental or density mapping
 - 3. Focus groups or surveys
 - 4. Related substance use research
 - b. Providing internship opportunities for students interested in learning more about the substance use field and prevention.
 - c. Facilitating a youth-led subcommittee.

When community coalitions, campus prevention, and recovery staff collaborate, they can effectively bridge prevention and recovery efforts in their communities, mitigating collective struggles and enhancing substance use related outcomes in their communities and on their campuses. Looking ahead, North Carolina communities should prioritize relationship building within their communities, focusing on already existing coalitions and the impact that new AOD-related relationships can have on building lasting substance

Conclusion

use prevention and recovery programming in their communities. When all stakeholders' voices, representation, and contributions are acknowledged and valued, efficient and inclusive work can be accomplished. By partnering with campus prevention and recovery professionals specifically, existing coalitions can build their workforce and enhance diversity, while at the same time, campuses can build their capacity and secure new resources.

By utilizing the recommendations provided in this report, coalition and campus stakeholders will lay the groundwork for thriving relationships that will have a significant impact in their communities and on their campuses. It is the hope that from this groundwork, community coalitions and campus partners will continue to support and work with one another, creating clear paths forward and building their collective capacity for equitable and sustainable substance use work in their communities.

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