

Virginia Partnerships for Success 2017-18 Qualitative Report

Successes and Challenges as reported from Virginia communities

Methods

To better understand how Partnership for Success (PFS) funds have positively impacted Virginia communities, the Department of Behavioral Health and Developmental Services (DBHDS) worked with their PFS evaluator, the OMNI Institute (OMNI) to conduct a qualitative study of PFS prevention efforts. OMNI conducted key informant interviews with ten PFS staff members who have an in-depth understanding of how strategies are being implemented as well as how they are impacting community members, partner organizations and/or the community at large. Staff members were asked a structured set of questions to facilitate a discussion around PFS successes and challenges. Staff members were asked to reflect on the most recent fiscal year, but some responses may reflect efforts from prior fiscal years. Interviews were coded and analyzed to identify major themes using NVIVO qualitative software.

Successful Strategies in Virginia

Participants were asked to describe which of their PFS strategies were implemented most successfully. The most commonly mentioned strategies are described below.

Most Common Strategies

Opioid Availability Reduction



Participants described large quantities of prescription drugs collected through community drug drop boxes, as well as widespread distribution of drug deactivation packets. Many shared that the promotion of safe storage and disposal sites has increased utilization.

Media Campaigns



Participants shared that media campaigns, including use of social media, TV ads, and PSAs, helped increase community awareness and readiness surrounding the opioid epidemic. Other successful media efforts include resource guides and posters in medical settings.

REVIVE! Naloxone Trainings



Participants mentioned that community members and organizations are actively requesting more REVIVE! Trainings. Community members are interested in increasing Narcan availability in their communities, which has prompted PFS staff to schedule additional trainings.

Other Strategies Mentioned

Health Fair



One participant shared that community partners collaborated in a multi-agency health fair to provide free resources and a REVIVE! Training in a high risk community.

Jail Literacy Program



One participant mentioned a reading program for inmates and their families. Recordings of parents reading children's books were delivered to families. This effort is in collaboration with the local regional jail and local library systems.

Opioid Summit



A summit for the community to learn about local substance use prevention initiatives was also mentioned. The participant described engaging breakout sessions and keynote speakers.

Legislative Roundtables



One participant mentioned meeting with elected officials to raise awareness of substance use and discuss current prevention efforts in the community.

Impact on Communities, Coalitions and CSB's

Participants were asked about the positive outcomes and impact they have seen in their communities as a result of implementing PFS strategies. Below are four key areas where participants described positive impact.

1

Community partnerships have aided in successful PFS strategies. Participants mentioned a variety of partnerships with coalitions, law enforcement, the medical community, and local organizations. These partnerships have helped communities collaborate and increase the reach of prevention efforts, *“PFS has afforded us the opportunity to go to various tables where our strategies align, and with funding we were able to engage people.”* One participant shared law enforcement officials are carrying Narcan along with fire and EMS. Another participant shared their local library helped distribute resource cards.

2

There is an increasing awareness and knowledge on the opioid epidemic. The majority of participants discussed that through the implementation of PFS strategies, they have seen a shift in how communities view substance use disorders. In addition, coalition and community members have an increased awareness of how the opioid epidemic is affecting their communities. One participant shared, *“there’s been [a] greater awareness of the fact that addiction is a disease, not a moral failing, and not a shortcoming of character.”* REVIVE! Trainings and community drug drop boxes have also helped increase awareness and education about substance use prevention.

3

Community members are engaged in PFS strategies. Participants shared different examples of how communities are engaging in PFS strategies. Hospitals/clinics are sharing resources (e.g. posters, brochures) created by PFS in their medical offices. Community members show high attendance at PFS events as well as consistent community engagement on their social media platforms. Participants also mentioned that input from youth and young adults has been helpful in strengthening media campaigns.

4

Capacity building involves dedicated workgroups, partnerships, and training. Many participants shared the importance of having dedicated workgroups such as coalitions and/or sub-committees to focus on capacity building efforts. The collaboration among stakeholders was highlighted as a way to share resources and implement successful strategies. Participants shared that staff members have the opportunity to attend conferences and training under PFS funding, which has strengthened their implementation of strategies.

Discussing the rewards of implementing strategies: “The community just coming out too, the sheer amounts of people who are genuinely interested in what's going on in their community and wanting to do something about it. I think is just rewarding.”



Partnership in action with local law enforcement during a Drug Take Back event sponsored by Blue Ridge CSB.

Leveraging Partnerships

One of the key themes that emerged from the interviews was the importance of partnerships in the success of PFS prevention efforts. Commonly mentioned partners are listed in the table below.

Medical Community <i>Hospitals, practitioners, pharmacists</i>	Faith Community <i>Churches, faith leaders</i>
Law Enforcement <i>Local police departments</i>	Health Department <i>Local public health officials</i>
Fire Departments and Paramedics <i>First responders, emergency personnel</i>	Libraries <i>Library leadership/staff</i>
Criminal Justice <i>Prison or jail leadership/staff</i>	Community Organizations <i>Family support, behavioral health, youth</i>
Youth Groups <i>School groups, faith groups, youth councils</i>	Realtors <i>Realtor professionals hosting open houses</i>
Elected Officials <i>City councils, county commissioners</i>	Media Organizations <i>Marketing firms, radio and television stations</i>

“The community buy in [is important in successful implementation]. I mean it does take a village to make this thing better. **If we're going to turn it around it's going to take all of us**, because in one way or another it affects all of us in some way.”

Recognition in the Community

Participants were asked to describe if and how their work has been recognized in the community. Below are descriptions of the ways in which CSBs and their staff have been recognized in their communities for their impactful work and excellence.



Awards earned by PFS communities include those focused on **community engagement, community service,** and a **marketing and messaging** award.



PFS grantees are increasingly being seen as **local experts,** contacted due to their **knowledge, experience and connection** to their localities. This has led to new collaborations and partners, and being invited to “new tables.”

“I feel like we are respected in the community, and I think we're **seen as leaders** in this effort in the community.”

“I think everybody's attitude has changed because this was...the only epidemic that I can think of... because I've been doing this for almost 20 years, **that really affect every age group, every walk of life, every income level, every race.**”

Challenges

Participants were asked to describe challenges they encountered when implementing PFS strategies. Common challenges are described below.

- **Lack of Resources.** Staffing, funding and a lack of local data resources were the most frequently mentioned challenges.
 - *“...Staff capacity is always an issue. There's just high turnover.”*
- **Low Community Engagement.** Readiness within the community was discussed, as well as keeping coalition members active and engaged in the work.
 - *“Trying to get people to hear what you say. People aren't always ready. Or think it pertains to them...”*
- **Developing Partnerships.** Engaging specific stakeholder groups can be challenging, as is dealing with different interests among stakeholders.
- **Competing Priorities.** Large geographic areas with differing needs and multiple coalitions within the same catchment area were mentioned as providing unique challenges.
- **Grant requirements.** Navigating multiple funding streams with different data and reporting requirements can be difficult.
- Participants also mentioned challenges with **Data Entry Systems** and coordinating **Event Logistics**.

Advice and Lessons Learned

Participants were asked to reflect on lessons learned over the past several years of PFS efforts and to describe what advice they would share with future grantees.



Partnerships & Relationships. Participants said that future grantees should utilize existing partnerships, while also being strategic in seeking out new relationships at new tables to achieve common goals.



Planning. Participants suggested that future grantees should start to plan early, use data to inform plans, and be flexible in planning to adapt to change.



Appropriate Strategies. Participants emphasized the importance of selecting the right strategy for the community and population that will be effective on a community-wide scale.



Coalition. Participants explained that it is vital to ensure that a strong coalition is in place as a backbone, and that coalition members' skills are being utilized effectively.



Strong leadership and increasing knowledge through trainings were also mentioned by participants as important to ensure success.

“I think what I've learned so far...is that this is a process. **This is a very complex problem that we're facing**, and there are no easy answers. There's no silver bullet or magic wand to make it better overnight. I think at the end of the day it requires a shift in our culture.”

“I think being out and **visible in the community** is super important. You can't sit in an office all day.”

For more information about the PFS grant or prevention efforts in Virginia, contact Gail Taylor, Director, Office of Behavioral Health Wellness: gail.taylor@dbhds.virginia.gov or Erima Fobbs, PFS Project Manager, Collective Health Impact, LLC: EFobbs@collectivehealthimpact.com