



Holmes County Partnerships for Success Strategic Action Identification Report



EXECUTIVE SUMMARY

In 1998, Ohio was one of five states chosen to participate in the Office of Juvenile Justice and Delinquency Prevention's Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders Initiative. The PfS Model evolved from this initiative. Since 1998 the PfS Model has been monitored, evaluated and changed in order to become a successful operation system by which Ohio counties may evaluate their commitment to families and youth.

Holmes County Family and Children First Council (HCFCFC) (Appendix A) is a diverse partnership of organizations and individuals committed to improving the well-being of children and families in Holmes County. However, a community without critical protective factors and strong developmental assets faces ongoing challenges to meet the most serious needs of its children and adolescents. Throughout an examination of current programming and funding allocations, Council members repeatedly ask, "With all of our successes, what have we missed? How can we best allocate our resources to ensure a better return on our investment in the children and families of Holmes County?"

In 2006, Holmes County was one of six counties selected to receive a Partnerships for Success (PfS) grant. Holmes County Partnerships for Success (Appendix B) is a holistic and strategic approach to building capacity within our county to prevent and respond effectively to child and adolescent problem behaviors while promoting positive youth development. PfS is based upon guiding principles gleaned from research on the effective prevention and reduction of youth problem behaviors and the promotion of positive youth development. These guiding principles are:

- 1) Involve and Engage the Entire Community in identifying and implementing strategic actions to promote positive youth development.
- 2) Balance a Holistic Continuum of Approaches that include primary prevention programs, early intervention programs, and systems of care to meet the needs of children and youth in the community.
- 3) Make Data-Informed Decisions that continually address the priorities and concerns of the community in relationship to program planning, implementation, and evaluation.

The Partnerships for Success Model is built on the concept of cooperation and collaboration of community members, agencies, and businesses. It is an operating system that offers tools and procedures for identifying and prioritizing critical community issues and managing the investment of resources to address those issues. This initiative helps counties to mobilize around issues relating to families and children, use data strategically to develop evidence-based action plans to improve our county's overall well-



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being, and implement these plans with a commitment to evaluating their impact and sustaining their presence. PfS planning is comprised of three basic activities:

- 1) Needs Assessment
- 2) Resource Assessment
- 3) Strategic Action Identification

The Holmes County Partnerships for Success Initiative completed the planning year of a two year Partnerships for Success (PfS) process. Through extensive mobilization of key community members, data collection and resource analysis, the development of a data informed Strategic Plan was achieved. The Strategic Plan for Holmes County will include the development of a Community Prevention Coalition and the development of a social marketing plan to address decreasing family and community norms tolerant of substance abuse. The completion of the planning year and the development of the final Strategic Plan were possible through the guidance of the Partnerships for Success Academy, Holmes County Family & Children First Council, and the use of the Partnerships for Success (PfS) Model.



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The Planning Process

Holmes County Family & Children First Coordinator established a Core Team (Appendix B) comprised of four key community members and a coordinator. The Core Team's goal was to oversee and coordinate the Partnerships for Success process. This process would include three key components to be completed during the first year: 1) Needs Assessment, 2) Resource Assessment, and 3) Strategic Action Identification. Over the past twelve months, Holmes County Partnerships for Success has developed three workgroups whose goals were to use specific tools and procedures to successfully complete each of these three key components.

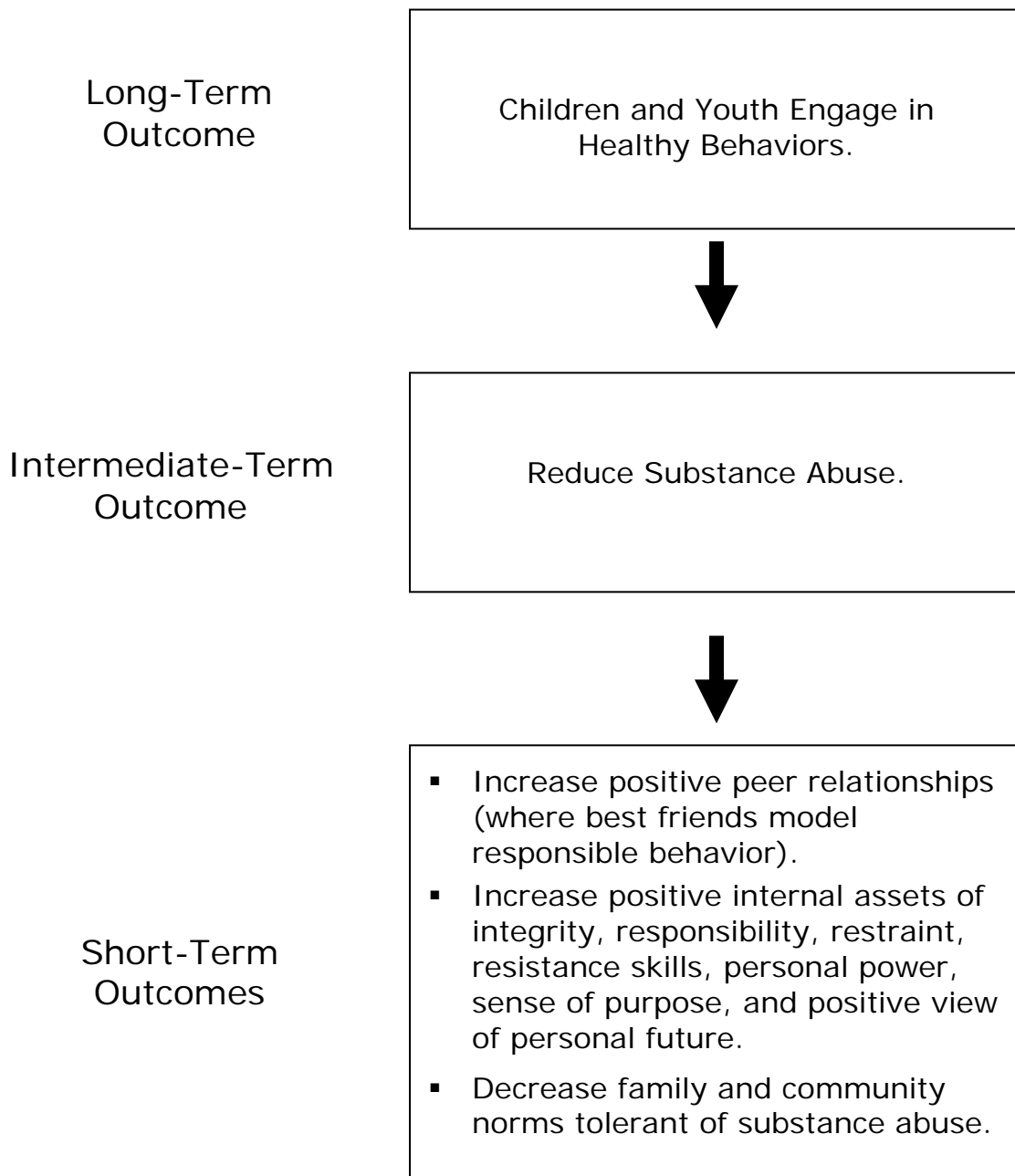
The **Needs Assessment Workgroup** begins the process by the collection of local, state, and federal data concerning youth. An analysis of the data is done to assess the primary concerns of the county. This analysis is done by exploring the Six Commitments to Child Well-being listed in House Bill 289 and the indicators for each of the commitments. The concerns, attitudes, and beliefs of the community can be assessed in several ways. (Example: focus groups/community surveys) After the collection and analysis to the data is completed a Logic Chain is created with the Long-term outcome, Intermediate outcome and Short-term outcomes. The Logic Chain (Page 4) is instrumental in maintaining the county's focus on the areas within that county to promote positive change for children/youth, families and community.

The Holmes County PFS Needs Assessment Workgroup collected and analyzed data from local, state and national sources, administered a community survey, and identified the Long-term, Intermediate-term and Short-term Outcomes specific to the needs of Holmes County. The Long-term Outcome of "Children and Youth Engage in Healthy Behaviors" was found to have the highest priority for preventing youth problem behaviors and promoting positive youth development in Holmes County. "Reduce Substance Abuse" was ranked as the highest priority intermediate-term outcome that would result in more youth engaging in healthy behaviors. The Workgroup reviewed the data, analyzed the indicators listed under risk factors, protective factors and assets known to reduce substance abuse and worked cooperatively to agree on short-term outcomes which fit Holmes County's unique population. The three short-term outcomes are as follows:

- Increase positive peer relationships (where best friends model responsible behavior).
- Increase positive internal assets of integrity, responsibility, restraint, resistance skills, personal power, sense of purpose, and positive view of personal future.
- Decrease family and community norms tolerant of substance abuse.



HOLMES COUNTY LOGIC CHAIN





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The **Resource Assessment Workgroup** took the Short-term outcomes determined by the Needs Assessment Workgroup and identified the programs, activities, and services which addressed these outcomes. The goal of the Workgroup was to create a Master Resource List of programs, activities, and services which would be instrumental in performing a Gap Analysis and identifying the gaps in services provided to Holmes County.

The Holmes County PfS Resource Assessment Workgroup moved the process forward by identifying and profiling 89 local programs, activities, and services. It was determined by the workgroup member whether each of the programs, activities, and services directly or indirectly addressed one or more of the short-term outcomes prioritized by the Needs Assessment Workgroup. From the 89 profiles a Master Community Resource List was created and passed on to the Strategic Action Identification Workgroup.

The **Strategic Action Identification Workgroup** completes the final stage of the planning year of Partnerships for Success. Members of this Workgroup analyzed the information from The Master Resource List and the Logic Chain of the Needs Assessment Workgroup to produce a gap analysis and develop a data-informed strategic plan which will be put in place during the second year of PfS, Implementation Year. The Strategic Plan recommended by the SAIW is to establish the Holmes County Prevention Coalition and address the Short-term Outcome, decreasing family and community norms tolerant of substance abuse by a social marketing campaign. An anticipated outcome of the PfS initiative is that multiple agencies across Holmes County, in addition to Family and Children First Council, will utilize this strategic approach into the future to monitor, evaluate, and amend strategies that will truly make a difference in the lives of local children and families.

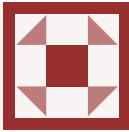
The Holmes County PfS Strategic Action Identification Workgroup was able to analyze the program profiles to determine existing gaps in services as related to the desired outcomes. The SAIW members identified the primary gap as being in programs, activities, and services which address the short-term outcome: Decreasing family and community norms tolerant of substance abuse. Several workgroup members observed that it is difficult to address this short-term outcome in programming primarily focus on youth but must address community norms of adults/parents.

The Workgroup researched programming to address this gap and identified four program or social marketing campaigns:

- Communities Mobilizing for Change on Alcohol
- Project Northland
- Guiding Good Choices



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- Most of us

The SAI Workgroup completed in-depth research on each of the programs and explored the development of a County Prevention Coalition. Through a discussion of feasibility, sustainability, and capacity building, the SAIW agreed the development of a County Prevention Coalition would allow Holmes County to address many prevention issues addressing the Short-term Outcomes for all populations in the future. The SAIW recommended to the HCFCFC to develop The Holmes County Prevention Coalition and develop a social marketing campaign to address decreasing family and community norms tolerant of substance abuse.

THE NEEDS ASSESSMENT PROCESS:

The Needs Assessment workgroup (Appendix C) undertook the daunting task of collecting and assessing relevant data to prioritize the long-term, intermediate-term, and short-term needs of Holmes County children and families. Consistent with House Bill 289, the Needs Assessment process began with data collection focused around Ohio's Six Commitments to Child Well-being. These Commitments represent potential long-term outcomes.

- Commitment 1 - Expectant Parents and Newborns Thrive
- Commitment 2 - Infants and Toddlers Thrive
- Commitment 3 - Children Are Ready for School
- Commitment 4 - Children and Youth Succeed in School
- Commitment 5 - Children and Youth Engage in Healthy Behaviors
- Commitment 6 - Youth Successfully Transition into Adulthood

Step 1A: Objective Data Collection

Workgroup members reviewed the list of indicators for each Commitment to determine 1) what local data might exist, 2) which agencies and individuals would be able to provide it, and 3) which workgroup member would collect the data. State and national data was collected for only those indicators where local data also existed. Data was then submitted with a completed Indicator Profile (see Appendix D for a sample) to better enable the organization and analysis of this data. Data was grouped by the applicable Commitment.

Step 1B: Subjective Data Collection

Simultaneous to this data collection effort, a sub-group of workgroup members prepared a Community Survey (Appendix E) to gather the input of Holmes County residents. Respondents were asked to prioritize the six Commitments to Child Well-Being/long-term outcomes and rank the most important issues and concerns within each Commitment. Surveys were completed by over 1,000 residents of various ages, backgrounds, and cultures.

Step 2: Prioritization of Commitments to Child Well-Being/Long-Term Outcomes

Workgroup members individually completed an assessment of the data associated with each of the six Commitments/long-term outcomes to determine:

- General trends in the data over time;
- How local data compares to state and national data;



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- How accurately the data portrays what is actually occurring locally; and
- Additional data that would be helpful in assessing the community's status.

Based upon this assessment, each individual developed a score for each Commitment/long-term outcome using four criteria:

1. The number of people who experience the need associated with the Commitment;
2. The severity of the need (i.e. life-threatening) associated with the Commitment;
3. Whether meaningful action related to the Commitment is best taken by a community collaboration; and
4. Whether there are feasible actions that can be taken locally to address the Commitment.

Workgroup members discussed their rankings and the results of the Community Survey to reach consensus on the ranking of the six Commitments to Child Well-Being/Long-Term Outcomes.

Step 3: Prioritization of Indicators/Intermediate-Term Outcomes

Repeating the assessment process described above, workgroup members analyzed the indicators/intermediate-term outcomes associated with the highest-priority Commitment to Child Well-being. The workgroup worked together to develop a score for each indicator/intermediate-term outcome. The workgroup reached consensus by comparing its rankings to community members' rankings of the indicators/intermediate-term outcomes.

Step 4: Prioritization of Risk Factors, Protective Factors, and Assets/Short-Term Outcomes

Finally, using tools provided by the PfS Academy, the workgroup analyzed the risk factors, protective factors, and developmental assets associated with the indicator/intermediate-term outcome of highest priority. Workgroup members prioritized the risk factors, protective factors, and assets individually and as a group to reach consensus on the selection of three short-term outcomes. The subjective data obtained through the Community Survey was also considered during this analysis.

Next Step: Transition into Resource Assessment

The conclusions of the Needs Assessment workgroup form the basis of the Resource Assessment process. The Resource Assessment workgroup will collect and analyze data about local programs and resources that impact the three short-term outcomes identified by the Needs Assessment workgroup.



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RESULTS:

Through the balanced analysis of local residents' issues and concerns and local, state, and national data, the Holmes County Needs Assessment workgroup prioritized the six Commitments to Child Well-Being/long-term outcomes in the following order:

- Priority#1 Children and Youth Engage in Healthy Behaviors.
- Priority #2 Youth Successfully Transition into Adulthood.
- Priority #3 Children and Youth Succeed in School.
- Priority #4 Children Are Ready for School.
- Priority #5 Infants and Toddlers Thrive.
- Priority #6 Expectant Parents and Newborns Thrive.

Through a similar process, indicators/intermediate-term outcomes associated with "Children and Youth Engage in Healthy Behaviors" were ranked in the following order:

- Priority #1 Percent of youth who use alcohol
- Priority #2 Percent of court-involved children and youth
- Priority #3 (tie) Percent of youth who use drugs or other illegal substances
Percent of youth who use tobacco
- Priority #4 (tie) Percent of youth with substance abuse problems and percent of those who receive needed treatment
Young adult (ages 15-24) suicide rate
Number of sexually-abused children
Treatment rate per 1,000 children under age 18 for Serious Emotional Disturbances (SED)
Treatment rate per 1,000 adults age 18 and older for Serious Mental Diseases (SMD)
Number of days in the past 30 days that adults age 18 and older felt sad, blue, or depressed
Percent of high school graduates who continue their education
- Priority #5 Percent of adults age 18 and older who drank five or more drinks on one or more occasions in the past month



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Recognizing that many of the behaviors that result in children and youth becoming involved with the court system (#2 indicator) involve the use of alcohol or other substances, the workgroup determined that the indicators ranking highest were all associated with substance abuse. In addition, many of the other behaviors or conditions considered (e.g. committing suicide, feeling blue or depressed, being sexually abused, and not pursuing higher education) also have direct links to substance abuse, so the workgroup selected "Reduce Substance Abuse" as the most important Intermediate-Term Outcome.

Finally, the workgroup narrowed the list of short-term outcomes (i.e. risk factors, protective factors, and developmental assets) associated with Substance Abuse to five and ranked them in the following order:

- Priority #1 (tie) Increase positive peer relationships (where best friends model responsible behavior).
Increase positive internal assets of integrity, responsibility, restraint, resistance skills, personal power, sense of purpose, and positive view of personal future.
Decrease family and community norms tolerant of substance abuse.
- Priority #2 Increase positive adult relationships (where youth receive support from three or more non-parent adults and/or have adequate adult monitoring and supervision).
- Priority #3 Increase the number of friends who do not engage in substance abuse.

The ranking of the six Commitments to Child Well-Being varied slightly among age groups. All segments of the Holmes County community participated in the survey, but 313 of the respondents were age 18 and younger, which the NA Workgroup believed accounted for that group ranking "Youth Successfully Transition into Adulthood" as the greatest concern. These respondents were approaching the end of their high school, or Amish school, experience and were most likely to be focusing on their new adult role. "Children and Youth Choose Healthy Behaviors" was a first choice among other age groups and ranked second by respondents age 18 and younger. In addition, there was little national, state or local data available to rank the indicators related to "Youth Successfully Transition into Adulthood", while there was data related to "Children and Youth Choose Healthy Behaviors" that confirmed this commitment as a top priority.



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Data from the West Holmes Middle School All-Stars program revealed that:

- 3.9% of West Holmes middle school students in grades 6 and 7 reported marijuana use within the past 30 days.
- 6.4% of West Holmes middle school students in grades 6 and 7 reported inhalant use within the past 30 days.
- On the All Stars pre-test, 10.6% of 7th graders reported cigarette usage in the previous 30 days. On the post-test, 10.1% of 7th graders reported cigarette usage in the previous 30 days. On the All Stars pre-test, 0.6% of 6th graders and 16% of 7th graders reported smokeless tobacco usage in the previous 30 days.
- 15.2% of West Holmes middle school students in grades 6 and 7 reported alcohol use within the past 30 days. In addition, 5.7% of West Holmes middle school students in grades 6 and 7 reported being drunk within the past 30 days.
- Additional data from Holmes County Juvenile Court (2002-2005) demonstrates that the greatest number of charges were for speeding, failure to control, seat belt violations, underage consumption, petty theft and criminal damaging.

The NA Workgroup discussed prioritization of each outcome by balancing available data with community survey input. Consensual conversations resulted in the final prioritization of each outcome.

The PFS Academy recommends the selection of 3-4 short-term outcomes. Therefore, the Needs Assessment workgroup chose three short-term outcomes as its benchmarks for making a difference in the lives of Holmes County children and youth:

- Increase positive peer relationships (where best friends model responsible behavior).
- Increase positive internal assets of integrity, responsibility, restraint, resistance skills, personal power, sense of purpose, and positive view of personal future.
- Decrease family and community norms tolerant of substance abuse.



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THE RESOURCE ASSESSMENT PROCESS:

The Resource Assessment Workgroup (RAW) (Appendix F), whose membership included community members and agency and organizational representatives (Appendix B) embarked on the next task of the PfS process, which was the evaluation of Holmes County's programs, services and activities that fit with the Logic Chain (page 2). These programs, services and activities will then be organized and made available to the Strategic Action Identification Workgroup.

Step 1 Adapting the "Profiling Community Resources" (PCR) Tool

The Resource Assessment Workgroup reviewed the process of Partnerships for Success and how the task they were about to embark upon fits into the process. The Resource Assessment Workgroup Charter was reviewed and accepted. The RAW began the process by exploring the PCR tool and making the adaptation necessary for the tool to fit Holmes County. It was realized that this process could be endless, and an agreement was made to approve the PCR tool by consensus. The workgroup members agreed the PCR tool (Appendix G) was to be made available in electronic form.

Step 2 Identifying Programs, Services and Activities

The workgroup members identified the programs, services and activities which fit the Logic Chain. As the list of resources was being developed, the workgroup struggled with the two issues:

- Does the program, service, or activity address the entire Logic Chain?
- Does the program, service, or activity have a direct (or strong) or indirect (weak) connection to the identified outcomes?

The RAW decided to include all programs, services and activities that address any aspect of the Logic Chain in a direct or indirect manner.

Step 3 Identifying Individuals to Collect Programs, Services, and Activities

The workgroup members identified the programs, services, and activities and divided the task of collecting profiles. The outreach efforts included person-to-person contacts through telephone calls, email, personal visits, and letter. (Appendix H) Workgroup members discussed and agreed that a brochure would be requested when available. The workgroup chairperson was identified as the recipient of completed PCR tools.



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Step 4 Data Collection

The workgroup members had the option of using the PfS Academy data base or an on-line survey program for data collection and analysis. The workgroup discussed and agreed to use SurveyMonkey.com for this purpose. The PCR tool was put on the web site and the link was sent to all workgroup members and appropriate reporters in order to initiate data collection. A paper copy of the PCR tool was also made available.

The workgroup members collected data necessary to complete the resource assessment process. During this data collection the programs, services and activities were reviewed and evaluated. Additional resources were then identified and profiled.

Step 5 Data Analysis

The workgroup members reviewed the results available through SurveyMonkey.com. The workgroup determined that results would be presented in the following formats:

- Demographics
- Outcomes in the Logic Chain
- Indirect or Direct connection to Logic Chain
- Continuum of Care
- Evidence of Effectiveness

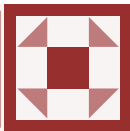
RESULTS:

The Resource Assessment Workgroup was gratified by the submission of 88 profiles. The profiles were completed by a variety of sources including schools, churches, community groups, and public and private agencies. Reporters were not limited to one response so that they could best describe their program, service, or activity. Therefore, percentages may exceed 100%. A Master Resource Collection List (Appendix I) was developed to view all of the results from the PCR tool. This Master List was helpful in developing the results for this report and will continue to be helpful as the PfS process continues.

Most of the data represented was obtained directly from SurveyMonkey.com. Therefore, the numbers of the figures may not be in sequential order as this instrument would not provide Figures for some questions. This will be noted in the Recommendation portion of this report.



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The PCR tool enabled the RAW to collect data from each of the programs as to how their curriculums address the issues represented on the Logic Chain (Page 3). This information will be useful for the Strategic Action Identification Workgroup for further analysis.

Connection to Logic Chain

85.2% of the programs response addressed the Long-term Outcome, Children and youth choose healthy behaviors, 54.5% of the programs response address the Intermediate-term Outcome, Reduce substance abuse, 64.8% addressed the Short-term Outcome, Increase positive peer relationships (where best friends model responsible behavior), 86.4% addressed the Short-term Outcome, Increase positive internal assets of integrity, responsibility, restraint, resistance skills, personal power, sense of purpose, and positive view of personal future, and 44.3% addressed the Short-term Outcome Decrease family and community norms tolerant of substance abuse.

Continuum of Care

The Master Resource List identified programs/activities relationship to the continuum of care including, Prevention: service/program/activity is designed for all eligible participants and is provided before any major problems are identified, Early Intervention, service/program/activity is designed fro participants who have been identified as having problems but before those problems become entrenched and Systems of Care, service/program/activity is designed for participants who have serious and chronic problems. 78.4% of the programs profiled were identified as prevention, 42% were identified as early intervention, and 18.2% were identified as systems of care.

SHORT-TERM OUTCOMES:

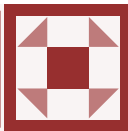
INCREASE POSITIVE PEER RELATIONSHIPS (WHERE BEST FRIENDS MODEL RESPONSIBLE BEHAVIOR)

TOTAL= 58 PROGRAMS

Prevention	38	65.5%
Prevention/Early Intervention	10	17.2%
Early Intervention/Systems of Care	4	6.8%
Early Intervention	2	3.4%
Prevention/Early Intervention/ Systems of Care	3	5.1%



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INCREASE POSITIVE INTERNAL ASSETS OF INTEGRITY,
RESPONSIBILITY, RESTRAINT, RESISTANCE SKILLS, PERSONAL
POWER, SENSE OF PURPOSE, AND POSITIVE VIEW OF PERSONAL
FUTURE
PROGRAMS

TOTAL= 76

Prevention	44	57.9%
Prevention/Early Intervention	12	15.8%
Early Intervention/Systems of Care	9	11.8%
Early Intervention	5	6.6%
Prevention/Systems of Care	1	1.3%
Prevention/Early Intervention/ Systems of Care	4	5.3%

DECREASE FAMILY AND COMMUNITY NORMS TOLERANT OF
SUBSTANCE ABUSE
TOTAL= 39 PROGRAMS

Prevention	18	46.2%
Prevention/ Early Intervention	8	20.5%
Early Intervention/Systems of Care	8	20.5%
Early Intervention	3	7.7%
Prevention/Early Intervention/ Systems of Care	2	5.1%

It can be seen by the above charts that the highest percentage of programs provided which fit each of the Short-term Outcomes are prevention programs. The smallest total of programs, activities, and services provided fit the Risk factor of decreasing family and community norms tolerant of substance abuse.

Evidence of Effectiveness

Services/programs/activities were asked to indicate how the service/program/activity is evaluated. 80.7% use anecdotal reports, 56.8% use literature documenting, 42% use local documenting participant satisfaction with the program, 31.8% use local data documenting change in knowledge, attitude, or behavior, 27.3% use evidenced-based approach as documented by literature/experts, and 13.6% stated they use other.



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THE STRATEGIC ACTION IDENTIFICATION PROCESS:

The Strategic Action Identification Workgroup (SAIW) (Appendix J), whose membership included community members, agency and organizational representatives, and member of the business community (Appendix B) embarked on the next task of the PfS process. This task included the prioritization of the findings of the Needs Assessment Workgroup and the Resource Assessment Workgroup, gap analysis of these findings, and to make recommendations for a Strategic Plan for Holmes County to Holmes County Family & Children First Council.

Step 1 Gap Analysis

The Strategic Action Identification Workgroup reviewed the process of PfS and how the task they were about to embark upon fits into the process. The Strategic Action Identification Charter (Appendix K) was reviewed and accepted. The SAIW reviewed the finding of the NAW and the RAW as to how they related to the task of the SAIW. This review included the Long-term Outcome, Children and Youth Engage in Healthy Behaviors. It was pointed out to the SAIW that the scope of this outcome is very large but due to the findings of the NAW, this scope was narrowed to the Intermediate-term Outcome of Reducing Substance Abuse. The Master Resource List from the RAW was reviewed and discussed. Several gaps were identified and two of the Short-term Outcomes were prioritized:

- Increase positive peer relationships (where best friends model responsible behavior)
- Decrease family and community norms tolerant of substance abuse

Step 2 Finalize gaps and gather strategies

The SAIW used the Gap Analysis Worksheet (Appendix L) to further discuss the Short-term Outcomes and the data available from the NAW and the RAW. The SAIW members observed that the lowest percentage of programs addressed the Short-term Outcome, decreasing family and community norms tolerant of substance abuse. Through the gap analysis and the valuable knowledge of Workgroup members there was an agreement to focus primarily on this Short-term Outcome. The Workgroup members agreed to research programs or services addressing this Short-term Outcome for the next step in the process.

Step 3 Presentation of strategies/programs

The SAIW discussed the possible delivery site of programming and it was agreed that the schools have been over used in the past. The workgroup decided by consensus. The focus will be programming which delivers



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“service” throughout the community in a wide variety of settings (e.g. places of employment, churches, general community settings accessed by adults) Adults living in the community would become the target audience since adults are the primary source of community norms and have the ability to influence the norms of youth. The Workgroup agreed to explore social marketing campaigns as an approach. Social norms theory appeared to be the most applicable theoretical basis for the focus of addressing community norms. Social norms theory is based upon the premise that all communities, even those labeled “at risk,” have largely protective and healthy social norms. However, these positive, healthy norms are frequently misperceived (e.g. people tend to overestimate the amount of negative or unhealthy behavior and to underestimate the amount of positive, healthy behaviors occurring in their community). Since many people tend to match their attitudes and behaviors to what they perceive as the norm in their community, this contributes to increased unhealthy behavior. Reducing misperceptions by feeding back information about the actual, healthy norms of the peer group results in more people choosing healthy behaviors. This approach has been used successfully in several fields as well as alcohol abuse prevention. Social marketing (the use of marketing techniques and methods to promote the adoption of a desirable behavior) is often used to promote the healthy normative message to target audiences.

Workgroup member presented the programs researched. From the list of programs, four were chosen for further research:

- Communities Mobilizing for Change on Alcohol
- Project Northland
- Guiding Good Choices
- Most of us

Each group members agreed to become acquainted with these programs.

Step 4 Analyze strategies

The SAIW embarked on analyzing the programs and a discussion on social marketing. Several of the Workgroup members presented their evaluation of the four programs. Through a discussion of programming and systems of evaluation, it became evident that the inability to reach an agreement on how to move forward was generated from the lack of a clear direction for the future. The Workgroup members agreed to do more research and develop the Strategic Action Plan at the next meeting.

Step 5 Reaching consensus

The SAIW was able to use a publication to give direction to their discussion. The publication, **Start Talking Before They Start Drinking, A Family Guide** gave the workgroup a focus to develop a strategy involving empowering parents/adults and how much of an influence they have on



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youth. A group member presented a beginning structure and summary for the Strategic Plan Recommendations. The Workgroup agreed to review these recommendations and to meet in order to finalize at the next meeting.

Step 6 Finalization of recommendations

The SAIW reviewed, discussed and finalized the recommendations to be presented at the Holmes County Family & Children First Council.

Holmes County Family & Children First Council Partnerships for Success

STRATEGIC ACTION IDENTIFICATION RECOMMENDATIONS

Prioritized Short-term Outcome:

Reduce Family and Community Norms Tolerant of Substance Abuse

Recommended Strategies to implement the prioritized short term outcome under the direction of Holmes County Family and Children First Council

1. **Develop a community prevention coalition that is:**
 - (A) **Diverse in membership**
 - (B) **That will develop and implement a long-term plan for reducing substance abuse in Holmes County**

Suggested Activities and Timeline:

- Work with Drug-free Action Alliance to identify model community prevention coalitions in Ohio to mentor Holmes County in our efforts. Timeline: July-October 2007
- Develop a plan and structure for the coalition, with an eye toward continuity and sustainability. Timeline: July-October 2007
- Network with local organizations to establish a diverse community coalition. Timeline: July 2007-January 2008
- Develop a multi-year strategic plan for meeting the identified short term, intermediate, and long term outcomes. Timeline: January-April 2008
- Begin implementation of the strategic plan. Timeline: April-June 2008

2. **Initiate a social marketing campaign that focuses on changing family and community norms tolerant of substance abuse.**

Suggested Activities and Timeline:



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- Investigate and select an experienced social marketing consultant to mentor Holmes County in the development and implementation of a social marketing campaign. Timeline: To be completed by June 2008
- Learn as much as possible about local Amish and non-Amish parenting behaviors and perceptions associated with substance use through evidence based research methodologies. Timeline: To be completed by May 2008
- Evaluate the impact of the initial social marketing campaign through a process evaluation to determine if the message reached the target audience. Timeline: To be completed by June 2008

3. Continue the activities of the Holmes County Community Prevention Coalition and social marketing campaign in 2009 and beyond. Monitor, evaluate, and amend strategies as needed.

6-01-07

Step 7 Developing Action Steps for the Future

The SAIW was able to begin to develop action steps for the future progress of the Holmes County Prevention Coalition through the completion of the worksheet, Presenting Strategic Plan Recommendations (Appendix M). The development of the worksheets allowed the SAIW to focus on the connections between the Long-term Outcome, the Intermediate-term Outcome, and the Short-term Outcome and the chosen strategies of a county-wide coalition and a social marketing plan. It became evident to the SAIW that the chosen strategies addressed the entire Logic Chain (page 4).



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APPENDICES:

Appendix A: Holmes County Family and Children First Council Member Agencies

Appendix B: Holmes County Partnerships for Success Organizational Chart

Appendix C: Needs Assessment Workgroup and Contributors

Appendix D: Holmes County Indicator Profile

Appendix E: Holmes County Community Survey

Appendix F: Resource Assessment Workgroup

Appendix G: Holmes County Profiling Community Resources Tool (PCR)

Appendix H: Letter to Holmes County Community of Churches

Appendix I: Master Resource List

Appendix J: Strategic Action Identification Workgroup

Appendix K: Strategic Action Identification Charter

Appendix L: Gap Analysis Worksheet

Appendix M: Presenting Strategic Plan Recommendations



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APPENDIX A:

Holmes County Family and Children First Council Member Agencies

- Big Brothers Big Sisters of East Central Ohio
- East Holmes Local Schools
- Every Woman's House
- Family Representatives: Peggy Conn, Judy Winegar, Lisa Chmielewski
- Head Start
- Help Me Grow
- Holmes County Board of MRDD
- Holmes County Commissioners
- Holmes County Department of Job and Family Services
- Holmes County Health District
- Holmes County Juvenile Court
- Mental Health and Recovery Board of Wayne and Holmes Counties
- Ohio Department of Youth Services
- Ohio State University Extension
- The Counseling Center of Wayne and Holmes Counties
- Tri-County Educational Service Center
- Village of Millersburg
- West Holmes Local Schools
- Your Human Resource Center

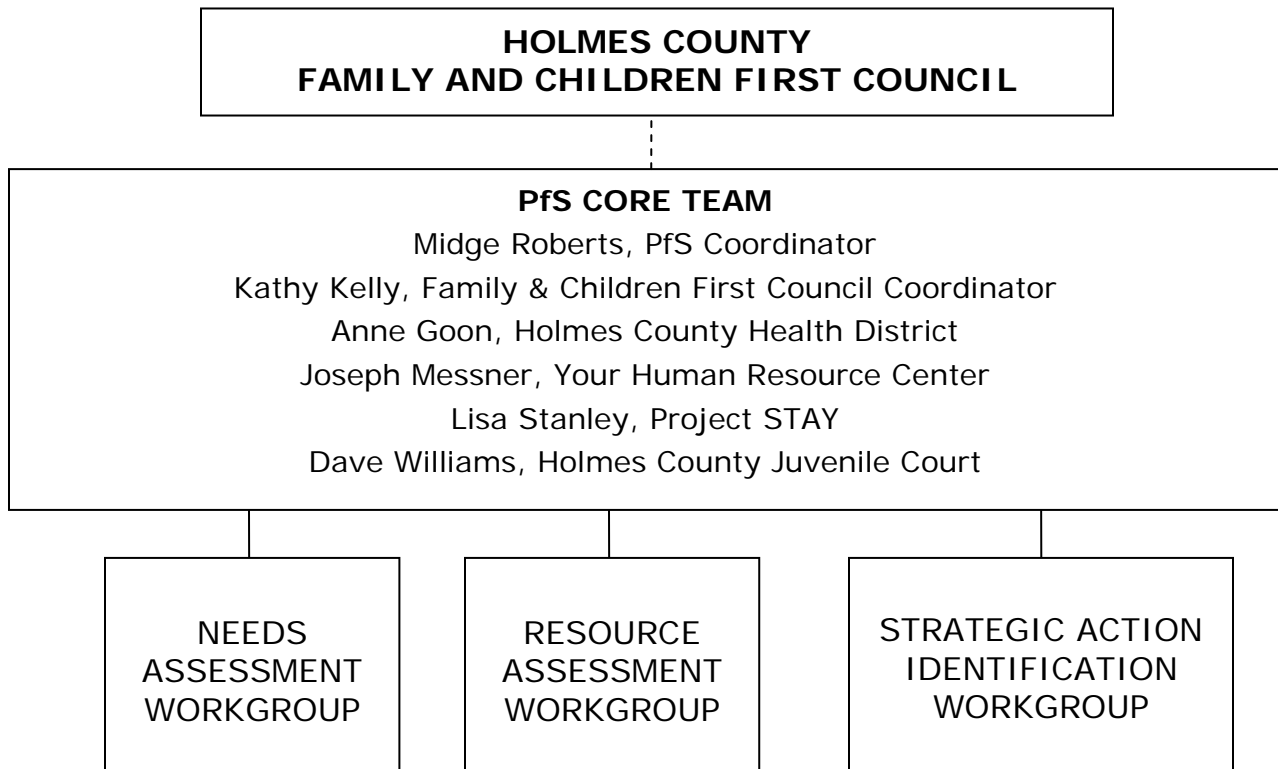


Holmes County Partnerships for Success Strategic Action Identification Report



APPENDIX B:

HOLMES COUNTY PARTNERSHIPS FOR SUCCESS ORGANIZATIONAL CHART





Holmes County Partnerships for Success Strategic Action Identification Report



APPENDIX C:

NEEDS ASSESSMENT WORKGROUP AND CONTRIBUTORS

Workgroup Members

- Vaughn Anderson, Holmes County Health District
- Anne Goon, chairperson, Holmes County Health District
- Kathy Kelly, Council Coordinator, Holmes County Family and Children First
- Joseph Messner, Your Human Resource Center
- Midge Roberts, PfS Coordinator, Your Human Resource Center
- Lisa Stanley, Project STAY
- Amy Stauffer-McNutt, Big Brothers Big Sisters of East Central Ohio
- Dave Williams, Holmes County Juvenile Court
- Sally Zimmerman, Every Woman's House

Data Contributors

- Rita Aufrance, West Holmes Local Schools
- Stephanie Geib, Holmes County Department of Job and Family Services
- Richard Haun, Holmes County Sheriff's Office
- Chrystal Hummel-Mizer, University of Akron-Wayne College, Holmes County Higher Education Center
- Debbie Jewell, Holmes County Department of Job and Family Services
- Lori Kaser, Holmes County Department of Job and Family Services
- Tammy McGinnis, Kno-Ho-Co Ashland Community Action Head Start
- Eric Parker, Holmes County GIS
- Robert Smedley, Mental Health and Recovery Board of Wayne & Holmes Counties
- Charity Thompson, Southeast Local Schools
- Ruth Weaver, East Holmes Local Schools

Valuable contributions were also made by the individuals who distributed the Community Surveys and the community members that shared their priorities and concerns with the Partnerships for Success Needs Assessment workgroup.



Holmes County Partnerships for Success Strategic Action Identification Report



APPENDIX D: HOLMES COUNTY INDICATOR PROFILE

Indicator Profile

CHILD WELLBEING COMMITMENT: EXPECTANT PARENTS AND NEWBORNS THRIVE
INDICATOR MEASURED: Percent of expectant mothers who receive adequate prenatal care.
YEAR(S): 2000-2002

SOURCE OF DATA:
 Ohio Department of Health Vital Statistics; National Center for Health Statistics, Centers for Disease Control and Prevention; The Office on Women's Health, U.S. Dept of Health and Human Services
Agency/Organization: <http://dwarehouse.odh.ohio.gov/datawarehousev2.htm>;
<http://www.cdc.gov/nchs/births.htm>
Publication/Website: Quick Health Data Online: <http://www.healthstatus2010.com/owh/index.html>

FORMAT OF DATA: (What formats is the data available in?)
 Printed report only
 Computer file (Excel spreadsheet, Word table, or Access database)
 Computer file with some individual identifiers (address, census tract, township) that can be used for mapping

INDICATOR LEVEL: (i.e. the population from whom the data were originally collected)
 National State
 County
 Neighborhood/School/Township: _____

REPORTER:
 Official Parent/Caretaker
 Youth-Self Teacher

FINDINGS: **Holmes County ranks the worst in the entire state for early initiation of prenatal care, with less than 50% of our expectant mothers starting prenatal care during the first 3 months of pregnancy. It is commonly assumed that this is due to Amish mothers not seeking early prenatal care if this is their 3rd, 4th, 5th, etc. pregnancy, but we haven't been able to yet confirm this assumption.**

	2000	2001	2002
Holmes County			
First-trimester care	445	390	423
Live births (care known)	919	823	868
First-trimester care percent	48.4%	47.4%	48.7%
Ohio			
First-trimester care percent	86.7%	87.3%	87.8%
United States			
First-trimester care percent	83.2%	83.4%	83.7%

NOTES: First-trimester care percent is the number of live births for which mothers began prenatal care in the first trimester as a percent of all live births for which it is known when the mothers began prenatal care.

Submitted By: Anne Goon **Date:** 11/27/06



Holmes County Partnerships for Success Strategic Action Identification Report



APPENIX E: HOLMES COUNTY COMMUNITY SURVEY

PRIORITIES AND CONCERNS OF HOLMES COUNTY RESIDENTS

Partnerships for Success is a local effort to better identify and address the needs of Holmes County families. The Holmes County Family and Children First Council, made up of many agencies that serve children and families, will use your input to prioritize how local dollars should be used to help children and families succeed.

ALL RESPONSES TO THIS SURVEY ARE CONFIDENTIAL.

Below, six age groups are identified. Below each, a list of issues or concerns for those groups are presented. In each age group, please identify the issue that you think is the most important with a 1, the issue that is next most important with a 2, and the third most important with a 3. Do not identify more than three in each age group.

Expectant parents and newborns

- | | |
|---|---|
| <input type="checkbox"/> Lack of medical care | <input type="checkbox"/> Lack of health insurance |
| <input type="checkbox"/> Tobacco use (in family) | <input type="checkbox"/> Improper baby care |
| <input type="checkbox"/> Alcohol and drug use (in family) | <input type="checkbox"/> Poor mental health (in family) |
| <input type="checkbox"/> Poverty | |
| <input type="checkbox"/> Anything else? _____ | |

Infants and toddlers

- | | |
|--|---|
| <input type="checkbox"/> Abuse and neglect | <input type="checkbox"/> Poor learning environment |
| <input type="checkbox"/> Developmental delays | <input type="checkbox"/> Up to date childhood shots |
| <input type="checkbox"/> Lack of good child care | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Anything else? _____ | |

Children are ready for school

- | | |
|---|---|
| <input type="checkbox"/> Lack of preschools | <input type="checkbox"/> Lack of vision, hearing and dental screening |
| <input type="checkbox"/> Not ready to attend kindergarten | <input type="checkbox"/> Exposure to crime and/or violence |
| <input type="checkbox"/> Abuse or neglect | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Lack of good child care | |
| <input type="checkbox"/> Anything else? _____ | |

Children and youth succeed in school

- | | |
|--|--|
| <input type="checkbox"/> Lack of health insurance | <input type="checkbox"/> Expressing violent behavior |
| <input type="checkbox"/> Doing poorly in school | <input type="checkbox"/> Learning and/or physical disabilities |
| <input type="checkbox"/> Lack of good after-school programming | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Lack of parental involvement and/or supervision | |
| <input type="checkbox"/> Anything else? _____ | |

CONTINUE ON THE BACK



Holmes County Partnerships for Success Strategic Action Identification Report



Children and youth choose healthy behaviors

- | | |
|---|---|
| <input type="checkbox"/> Not eating healthy foods | <input type="checkbox"/> Unsafe car/driving practices |
| <input type="checkbox"/> Tobacco use | <input type="checkbox"/> Alcohol and other drug use |
| <input type="checkbox"/> Teenagers having babies | <input type="checkbox"/> Youth thinking of suicide |
| <input type="checkbox"/> Lack of positive adult role models | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Lack of positive after-school activities | |
| <input type="checkbox"/> Anything else? _____ | |

Youth Move into Adulthood

- | | |
|---|---|
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> Homelessness and/or runaway |
| <input type="checkbox"/> Not completing high school or GED | <input type="checkbox"/> Committing crimes |
| <input type="checkbox"/> Not prepared to enter a career | <input type="checkbox"/> Thinking of suicide/hopelessness |
| <input type="checkbox"/> Access to further education/training | |
| <input type="checkbox"/> Anything else? _____ | |

CHECK THE GROUP THAT CONCERNS YOU THE MOST!

- Expectant parents and Newborns
- Infants and toddlers
- Children are ready for school
- Children and youth succeed in school
- Children and youth choose healthy behaviors
- Youth move into adulthood

Please tell us more about you:

1. Your age: Under 18 18-25 26-35 36-45 46-55
 56-65 66+
2. Your gender: Male Female
3. Highest grade of school you completed:
 - 8th grade or less Some High School High school diploma/GED
 - Associate's degree Technical degree
 - Bachelor's degree Master's degree
 - Professional degree
4. Your family status:
 - No children under the age of 18 live in my home.
 - One or more children under the age of 18 live in my home.
5. Township where you live:

<input type="checkbox"/> Berlin	<input type="checkbox"/> Clark	<input type="checkbox"/> Hardy	<input type="checkbox"/> Killbuck
<input type="checkbox"/> Knox	<input type="checkbox"/> Mechanic	<input type="checkbox"/> Monroe	<input type="checkbox"/> Paint
<input type="checkbox"/> Prairie	<input type="checkbox"/> Richland	<input type="checkbox"/> Ripley	<input type="checkbox"/> Salt Creek
<input type="checkbox"/> Walnut Creek	<input type="checkbox"/> Washington		
6. Your family's yearly income before taxes:
 - Less than \$24,999
 - \$25,000-\$49,999
 - \$50,000-\$99,999
 - More than \$100,000

**THANK YOU
FOR PARTICIPATING IN THE HOLMES COUNTY
PARTNERSHIPS FOR SUCCESS COMMUNITY SURVEY!**



Holmes County Partnerships for Success Strategic Action Identification Report



APPENDIX F: RESOURCE ASSESSMENT WORKGROUP

Workgroup Members

- Susan Burnett, The Counseling Center of Wayne and Holmes Counties
- Anne Goon, Holmes County Health District
- Megan Goon, Data Entry Specialist, Community Member
- Craig Hershberger, East Holmes Local School District
- Matt Johnson, East Holmes Local School District
- Kathy Kelly, Council Coordinator, Chairperson, Holmes County Family and Children First
- Dan Kirtlan, Nashville Church of Christ
- Jan Lemon, Community Member
- Joseph Messner, Your Human Resource Center
- Scott Pringle, East Holmes Local School District
- Arlene Radden, Holmes County District Public Library
- Midge Roberts, PfS Coordinator, Chairperson, Your Human Resource Center
- Kate Shumaker, OSU Extension
- Lisa Stanley, Project STAY
- Joy Stitzlein, The Counseling Center of Wayne and Holmes Counties
- Jessica Vitagliano, Big Brothers Big Sisters of East Central Ohio
- Dave Williams, Holmes County Juvenile Court
- Judy Winegar, Community Member
- Marlyce Yoder, West Holmes Local School District



Holmes County Partnerships for Success Strategic Action Identification Report



APPENDIX G:

HOLMES COUNTY PROFILING COMMUNITY RESOURCE TOOL (PCR)

HOLMES COUNTY PFS RESOURCE ASSESSMENT WORKGROUP Profiling Community Resources Tool (PCR Tool)

Instructions: Answer the following questions for each service/program/activity you identified in your community resource assessment. Document all services provided, including those that your own agency may provide. Complete a separate PCR Tool Form for each service/program/activity.

1. Reporter: Who is reporting this information?
--

Name: _____ Date completed: _____

Which of the following best describes you?

- _____ Resource Assessment Workgroup Member
- _____ Program Personnel
- _____ Other, please describe _____

Email: _____ Phone Number: _____

2. Program Name and Contact Information
--

Program Name: _____

Agency Name: _____

Address: _____

Website: _____ Phone Number: _____

Agency Email: _____

Program Description: _____

Attach a brochure if one is available.



Holmes County Partnerships for Success Strategic Action Identification Report



3. Geographic Location: Specify the county(ies), township(s), school district(s), and neighborhood(s) served by the program/activity.

County:

- | | | |
|---------------------------------|----------------------------------|-------------------------------------|
| <input type="checkbox"/> Holmes | <input type="checkbox"/> Ashland | <input type="checkbox"/> Coshocton |
| <input type="checkbox"/> Knox | <input type="checkbox"/> Stark | <input type="checkbox"/> Tuscarawas |
| <input type="checkbox"/> Wayne | | |

School District:

- | | |
|--|--|
| <input type="checkbox"/> East Holmes Local | <input type="checkbox"/> West Holmes Local |
| <input type="checkbox"/> Southeast | <input type="checkbox"/> Parochial/Amish |
| <input type="checkbox"/> Loudonville | <input type="checkbox"/> Ashland/West Holmes Career Center |
| <input type="checkbox"/> Home Schooled | <input type="checkbox"/> Buckeye Career Center |

Townships:

- | | | | |
|---------------------------------------|-------------------------------------|---------------------------------|-------------------------------------|
| <input type="checkbox"/> Berlin | <input type="checkbox"/> Clark | <input type="checkbox"/> Hardy | <input type="checkbox"/> Killbuck |
| <input type="checkbox"/> Knox | <input type="checkbox"/> Mechanic | <input type="checkbox"/> Monroe | <input type="checkbox"/> Paint |
| <input type="checkbox"/> Prairie | <input type="checkbox"/> Richland | <input type="checkbox"/> Ripley | <input type="checkbox"/> Salt Creek |
| <input type="checkbox"/> Walnut Creek | <input type="checkbox"/> Washington | | |

Villages:

- | | | | | |
|--------------------------------------|------------------------------------|--------------------------------------|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> Baltic | <input type="checkbox"/> Berlin | <input type="checkbox"/> Big Prairie | <input type="checkbox"/> Charm | <input type="checkbox"/> Glenmont |
| <input type="checkbox"/> Holmesville | <input type="checkbox"/> Killbuck | <input type="checkbox"/> Lakeville | <input type="checkbox"/> Loudonville | |
| <input type="checkbox"/> Millersburg | <input type="checkbox"/> Mt. Hope | <input type="checkbox"/> Nashville | <input type="checkbox"/> Sugar Creek | <input type="checkbox"/> Walnut |
| <input type="checkbox"/> Creek | <input type="checkbox"/> Winesburg | <input type="checkbox"/> Other _____ | | |

4. Delivery Site: Specify the type of delivery site where the program/activity takes place.

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> School | <input type="checkbox"/> Agency |
| <input type="checkbox"/> Church | <input type="checkbox"/> Community Center |
| <input type="checkbox"/> Other: _____ | |

5. Outcome(s): Specify the primary objective(s)/goal(s) program/activity is designed to effect.

- Children and Youth Choose Healthy Behaviors

- Reduce Substance Abuse

- Increase positive peer relationships (where best friends model responsible behavior)

- Increase positive internal assets of integrity, responsibility, restraint, resistance skills, personal power, sense of purpose, and positive view of personal future.

- Decrease family and community norms tolerant of substance abuse



Holmes County Partnerships for Success Strategic Action Identification Report



6. Type of Prevention/Intervention: What type of program/activity is this? Check below.

Prevention. This program/activity is designed for all eligible participants and is provided before any major problems are identified.

Early Intervention. This program/activity is designed for participants who have been identified as having problems but before those problems become entrenched.

Systems of Care. This program/activity is designed for participants who have serious and chronic problems.

7. Evidence of Effectiveness: What type of information is being used to suggest that this program/activity is effective? Check all that apply.

Anecdotal reports from participants and staff.

Literature documenting a sound underlying principle. (No hard data but based on principles that have been proven effective)

Local data documenting participant satisfaction with the program.

Local data documenting change in knowledge, attitude, or behavior.

Evidence-based approach as documented by literature/experts.

Other, please describe _____

8. Participant Characteristics: Describe the following characteristics of the total population this program/activity served in the previous year. Check all that apply.

Gender:

Male

Female

Age:

Pre-Kindergarten Kindergarten Elementary School

Middle School High School Over 18

Race or Ethnicity:

African American

Asian

Hispanic

Caucasian

Other or of Mixed Race

Amish



Holmes County Partnerships for Success Strategic Action Identification Report



APPENDIX H:

LETTER TO HOLMES COUNTY COMMUNITY OF CHURCHES

March 5, 2006

Greetings in the name of the Lord!

I am writing to you concerning what I believe to be an excellent opportunity for those of us in the faith based community to touch individual lives and influence the community we live in.

I have recently had the opportunity to participate in an initiative called Partnerships for Success (PfS). Holmes County is one of six Counties in the state of Ohio to be selected to participate in PfS. Very simply, the purpose and goal of PfS is to explore, identify and prioritize needs within a community, research and identify resources that can address the needs, and develop a strategic action plan to utilize, enhance and add to existing resources.

Through the use of surveys and collaboration of community leaders and programs, **“helping youth to choose healthy behaviors”** has been identified as the focus of PfS here in Holmes County. To me, this is an exciting opportunity! As Christians and Church Leaders we have a lot to offer in helping everyone, especially youth, make spiritually, emotionally, mentally and physically healthy choices. Not only do we know this, but many of the agencies that function here in Holmes County recognize it as well. The recent inclusion of the faith based initiatives on a variety of levels has set the stage for us to be involved as never before. Now is the time for us to respond.

Enclosed you will find a PfS PCR tool. This is the tool PfS is using to identify programs in our community that are **“helping youth to choose healthy behaviors”**. Many of these programs will be agency and community based. Examples include the Department of Job and Family Services, Your Human Resource Center, 4-H and Scouting. Because so many of our churches have Youth Groups, Mentoring Programs and other things that impact youth, it is important that we be included. From the things we teach to positive peer support, we do impact lives.

Please help PfS to identify and include what you and your church are doing to help influence the youth of our community. We would ask that you complete a separate copy of the PCR Tool for each program you offer. Because PfS has to work within time deadlines set by the State, we ask that you return these forms in the enclosed envelope by Monday, March 19, 2007.

I hope you share my enthusiasm and having a spiritual component included in the Holmes County effort to help youth make health choices.

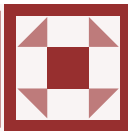
God bless!

Dan Kirtlan
Nashville Church of Christ

"... being confident of this, that He who began a good work in you will carry it on to completion..." Phil.1:6



Holmes County Partnerships for Success Strategic Action Identification Report

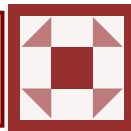


APPENDIX I: MASTER RESOURCE LIST

Agency/School/ Church/Etc.	Long-Term Outcome: Choose Healthy Behaviors	Intermediate- Term Outcome: Reduce Substance Abuse	Short-Term Outcome: Responsible Best Friends	Short-Term Outcome: Internal Assets	Short-Term Outcome: Community Norms	Direct Connection with Outcomes	Indirect Connection with Outcomes	Continu Care: P=Preve E= Early Intervent S=System Care
New Grounds Cafe			X	X			X	P, E
Holmes County Health District- Safe Communities	X	X		X	X	X		P, E
Holmes County Health District- Safe Communities	X	X			X	X		P
Holmes County Health District		X				X		E
Millersburg Ministerial Association	X	X	X	X	X		X	P
Skyview Ranch	X		X	X			X	P
West Holmes Chaplain of the Day	X	X	X	X	X		X	P, E
Lighthouse Christian Fellowship	X	X	X	X	X		X	P
Nashville Church of Christ	X	X	X	X			X	P
Nashville Church of Christ	X	X	X	X			X	P, E
Nashville Church of Christ	X		X	X			X	P
Holmes County College Access Program							X	E
Holmes County Sheriff's Office	X	X	X	X	X	X		P, E
Rotary Club of Millersburg	X		X	X			X	P



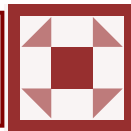
Holmes County Partnerships for Success Strategic Action Identification Report



Holmes County Juvenile Court	X	X	X	X	X	X		P,E
Your Human Resource Center	X	X	X	X	X	X		E,S
Nashville Church of Christ			X				X	P
Holmes County District Public Library	X		X	X			X	P
Holmes County Juvenile Court	X	X	X	X	X	X		P,E
Holmes County Juvenile Court	X	X	X	X	X	X		E,S
Young Explorers/West Holmes	X						X	P
Young Explorers/West Holmes	X			X			X	P
Tri-County Educational Service Center	X		X	X			X	P
West Holmes Local Schools	X	X	X	X	X		X	P
West Holmes Local Schools	X			X			X	P
West Holmes Local Schools	X		X	X			X	P
West Holmes Local Schools				X			X	P
West Holmes Local Schools	X		X				X	P
West Holmes Local Schools/21 st Century			X	X			X	P,E
West Holmes Local Schools	X	X	X	X			X	P
Your Human Resource Center	X	X			X	X		E
Your Human Resource Center-Amish Tobacco Outreach Project	X	X	X	X	X	X		P
West Holmes Middle School/Your Human Resource Center	X		X	X		X		E
The Counseling Center	X		X	X	X		X	E,S



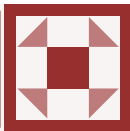
Holmes County Partnerships for Success Strategic Action Identification Report



The Counseling Center				X			X	P, E
The Counseling Center	X	X		X		X		E
Al-Anon International	X	X	X	X	X	X		P, E
Al-Anon International	X	X	X	X	X	X		P, E
Holmes County Health District	X	X	X	X			X	P
Holmes County Chamber of Commerce		X			X		X	P
Holmes County Health District-Safe Communities	X	X			X	X		P, E
Holmes County Health District	X	X	X	X	X	X		P, E
Holmes County Health District	X	X			X	X		P, E
Buckeye Boy Scout Council, Inc.	X	X	X	X			X	P
Your Human Resource Center	X	X	X	X	X	X		P
East Holmes Schools- Hiland High & Middle Schools	X	X	X	X	X	X		P
East Holmes Schools- Hiland High & Middle Schools	X	X	X	X	X	X		P
Heritage Trails Girl Scout Council, Inc	X	X	X	X	X		X	P
East Holmes Schools- Hiland High & Middle Schools	X	X	X	X	X		X	P
East Holmes Schools- Hiland High & Middle Schools	X	X	X	X	X		X	P
East Holmes Schools- Hiland High School	X	X	X	X	X		X	P
East Holmes Schools- Hiland Middle School	X	X	X	X	X		X	P
East Holmes Schools- Hiland High School	X	X	X	X	X		X	P
Wayne County Sheriff's Office	X	X	X	X		X		P



Holmes County Partnerships for Success Strategic Action Identification Report



Southeast Local Schools- Holmesville Elementary	X	X	X	X	X	X		P
Southeast Local Schools- Holmesville Elementary	X		X	X			X	P
Project STAY	X	X	X	X		X		P, E, S
Project STAY	X	X	X	X		X		P, E, S
Walnut Creek Mennonite Church	X		X	X			X	P
Community Bible Church	X			X			X	P
Holmes County Health District	X	X			X	X		E, S
Millersburg Baptist Church	X		X	X			X	P
Holmes County Health District	X	X			X	X		E, S
Your Human Resource Center	X	X		X	X	X		E, S
Your Human Resource Center		X		X	X	X		E, S
Your Human Resource Center	X			X	X	X		E
Killbuck Savings Bank	X			X			X	P
East Holmes Local Schools	X		X	X			X	P
Your Human Resource Center	X	X	X	X	X	X		P
East Holmes Local Schools	X		X	X			X	P
East Holmes Local Schools	X			X			X	P
University of Akron- Wayne College				X			X	P
Lighthouse Christian Fellowship	X						X	P
Your Human Resource Center	X	X		X		X		E
Holmes County District Public Library	X		X	X			X	P



Holmes County Partnerships for Success Strategic Action Identification Report



The Counseling Center	X	X	X	X	X	X		E
Tri-County Educational Service Center	X		X	X	X		X	P
Holmes County Elementary School	X		X	X			X	P
Ohio State University Extension				X				P
Akron Area Intergroup	X	X	X	X	X	X		E,S
Big Brothers Big Sisters of East Central Ohio	X		X	X			X	P,E
West Holmes Middle School	X		X	X			X	P
West Holmes High School	X	X	X	X			X	P
Every Woman's House	X			X			X	P,S
Every Woman's House	X			X			X	E,S
Every Woman's House				X			X	E,S
Every Woman's House				X			X	E,S
Every Woman's House	X			X			X	P,E



Holmes County Partnerships for Success Strategic Action Identification Report



APPENDIX J:

STRATEGIC ACTION IDENTIFICATION WORKGROUP

Workgroup Members

- Bob Boss, chairperson, Ohio Legacy Bank
- Anne Goon, Holmes County Health District
- Lisa Haberbush, Wayne/Holmes Counseling Center
- Chrystal Hummel-Mizer, University of Akron- Wayne College, Holmes County Higher Education Center
- Kathy Kelly, Council Coordinator, Holmes County Family and Children First
- Joseph Messner, Your Human Resource Center
- Kris Perone, West Holmes Local School District
- Scott Pringle, East Holmes Local School District
- Midge Roberts, PfS Coordinator, Your Human Resource Center
- Robert Smedley, Mental Health and Recovery Board of Wayne & Holmes Counties
- Dave Williams, Holmes County Juvenile Court



APPENDIX K:

STRATEGIC ACTION IDENTIFICATION WORKGROUP CHARTER

**HOLMES COUNTY
PARTNERSHIPS for SUCCESS
Strategic Action Identification Workgroup Charter**

HOLMES COUNTY FAMILY AND CHILDREN FIRST COUNCIL VISION:

Holmes County's children and families will be safe, healthy, and stable.

HOLMES COUNTY FAMILY AND CHILDREN FIRST COUNCIL MISSION:

The Holmes County Family and Children First Council is a network of organizations and individuals that promotes safe, healthy, and stable children and families.

This is accomplished by communication and facilitating services coordination, setting service priorities and sharing organizational resources.

The Strategic Action Identification Workgroup Purpose:

Review gaps between community needs and resources, research potential strategies, identify strategies that will impact prioritized outcomes, draft PfS recommendations, and draft the PfS Strategic Plan.

Background:

The PfS Needs Assessment Workgroup identified three short-term outcomes:

- Increase positive peer relationships (where best friends model responsible behavior)
- Increase positive internal assets of integrity, responsibility, restraint, resistance skills, personal power, sense of purpose, and positive view of personal future.
- Decrease family and community norms tolerant of substance Abuse.

The PfS Resource Assessment Workgroup created a Master Resource Profile List for Holmes County. The Master Resource Profile List included 89 programs, services and activities in the community. This Master Resource Profile List will provide a basis for the gap analysis of the Strategic Action Identification Workgroup. The gaps in services which are identified will provide direction for research and to identify a strategy(ies) that will be incorporated into the Holmes County's Strategic Plan.



Holmes County Partnerships for Success Strategic Action Identification Report



Parameters:

Holmes County Family and Children First Council approved the PfS budget which funds Strategic Action Identification Workgroup Kick-off, regular workgroup meetings, and the printing of the Strategic Action Identification Report. A final presentation of the workgroup's findings will be made to the Holmes County Family and Children First Council.

The Strategic Action Identification Workgroup has the authority to:

To meet, conduct a gap analysis, research potential strategies, and present recommendations to The Holmes County Family and Children First Council under the oversight of the PfS Core Team.

The Strategic Action Identification Workgroup is expected to provide the following products:

To identify service gaps of programs, services and activities, research potential strategies that address the outcomes identified in the Logic Chain, prioritize these strategies, and develop recommendations to fill the identified gaps. The Holmes County Strategic Plan will be approved by Holmes County Family and Children First Council. Once approved, a draft of the PfS Recommendations worksheet and Strategic Plan will be written.

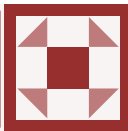
Meeting frequency and duration: Locations for meetings will be indicated after the date of the meeting. The day of the week and the time remains consistent, Thursday from 1:00 pm – 3:00 pm.

The Strategic Action Identification Workgroup will meet on the following dates:

- **April 26, 2007 (Kick-Off)**
Holmes County HCDJFS, Conference Rooms A & B
Develop an understanding of the PfS process and the Strategic Action process
Begin to discuss gap analysis
- **May 3, 2007**
Ohio Legacy Bank 225 North Clay Street, Millersburg
Conduct a gap analysis
Develop plan for gathering data on potential strategies
- **May 10, 2007**
Ohio Legacy Bank 225 North Clay Street, Millersburg
Discuss potential strategies
Narrow down potential strategies and prioritize
Collect additional information
- **May 17, 2007**
Ohio Legacy Bank 225 North Clay Street, Millersburg
Review additional information
Prioritize Evidence and Feasibility
- **May 24, 2007**
Ohio Legacy Bank 225 North Clay Street, Millersburg



Holmes County Partnerships for Success Strategic Action Identification Report



Make decision about strategy(ies) to implement
Document information about strategy and the outcomes
addressed

- **May 31, 2007**
Ohio Legacy Bank 225 North Clay Street, Millersburg
Review and finalize recommendations
- **June 1, 2007**
To be announced
Present Strategic Action Identification Recommendations to Holmes
County Family and Children First Council

Workgroup Membership

Name	Role	Contact Information
Kathy Kelly	HCFCFC Coordinator	kellyk01@odjfs.state.oh.us
Midge Roberts	PfS Coordinator	midgroberts@earthlink.net
Anne Goon	Core Team Member	agoon@holmeshealth.org
Joe Messner	Core Team Member	yhrcjoe@earthlink.net
Lisa Stanley	Core Team Member	STANLL@odjfs.state.oh.us
Dave Williams	Core Team Member	dwilliams@co.holmes.oh.us
Bob Boss	President, Ohio Legacy Bank, SAI Chair	bboss@ohiolegacybank.com
Laurel Etwiler	Kno Ho Co Ashland CAC	lcheckelsky@neo,rr.com
Lisa Haberbusch	The Counseling Center of Wayne/Holmes	lisahaberbusch@hotmail.com
Chrystal Hummel-Mizer	Wayne College- HCHEC	Chummel@uakron.edu
Matt Johnson	East Holmes Local Schools	EHLM_Johnson@tccsa.net
Kris Perone	West Holmes Local Schools	Whol_pipes@tccsa.net
Robert Smedley	Mental Health & Recovery Board of Wayne/Holmes Counties	robsmed@whmhrb.org



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5-3-07

Facilitator: _____ **Scribe** _____

Approved: _____ **Approved:** _____
(FCFC Chair) (FCFC Director/Coordinator)



APPENDIX L:

**Holmes County Partnerships for Success
Strategic Action Identification
Gap Analysis**

Instructions: Use the following template to analyze gaps in service as they relate to the prioritized outcomes. First, write the short-term outcomes prioritized by PfS Needs Assessment in the space provided. Then, summarize the needs assessment and resource assessment data that relates to each individual short-term outcome. The workgroup should discuss and analyze the data by outcome in order to identify the most significant gaps in service.

Short-Term Outcome: Increase positive peer relationships (where best friends model responsible behavior)

Needs Assessment Data:

The Community Survey listed concerns over Substance Abuse in the Top 10. The Needs Assessment Workgroup discussed the Protective Factors listed under the targeted impacts compared these with the Community Survey results. The group then individually ranked those targeted impacts listed under Reduce Substance Abuse and collectively made a decision.

Resource Assessment Data:

64.8% of the programs profiled address this protective factor
78.4% of the programs profiled address prevention
15.9% of the programs profiled address prevention and early intervention (9 direct/5indirect)
55.7% of the programs profiled are delivered in the schools

Short-Term Outcome: Increase positive internal assets of integrity, responsibility, restraint, resistance skills, personal power, sense of purpose, and positive view of personal future

Needs Assessment Data:

The Community Survey listed concerns over Substance Abuse in the Top 10. The Needs Assessment Workgroup discussed the 40 Developmental Assets compared these with the Community Survey results. The group then individually ranked those targeted impacts listed under Reduce Substance Abuse and collectively made a decision.

Resource Assessment Data:

86.4% of the programs profiled address these Internal Assets



Holmes County Partnerships for Success Strategic Action Identification Report



78.4% of the programs profiled address prevention
 15.9% of the programs profiled address prevention and early intervention (9 direct/5indirect)
 55.7% of the programs profiled are delivered in the schools

Short-Term Outcome: Decrease family and community norms tolerant of substance abuse

Needs Assessment Data:

The Community Survey listed concerns over Substance Abuse in the Top 10. The Needs Assessment Workgroup discussed the Risk Factors listed under the targeted impacts compared these with the Community Survey results. The group then individually ranked those targeted impacts listed under Reduce Substance Abuse and collectively made a decision.

Resource Assessment Data:

44.3% of the programs profiled address this Risk Factor
 78.4% of the programs profiled address prevention
 15.9% of the programs profiled address prevention and early intervention (9 direct/5indirect)
 55.7% of the programs profiled are delivered in the schools

Prioritized Gaps	
Short-Term Outcome	Ranking
Increase positive peer relationships (where best friends model responsible behavior)	2
Increase positive internal assets of integrity, responsibility, restraint, resistance skills, personal power, sense of purpose, and positive view of personal future.	3
Decrease family and community norms tolerant of substance abuse	1



Holmes County Partnerships for Success Strategic Action Identification Report



APPENDIX M:

Holmes County Partnerships for Success Strategic Action Identification Presenting Strategic Plan Recommendations

Instructions: This worksheet should be completed collectively by the Strategic Action Identification Workgroup. One worksheet should be completed for each preferred strategy.

Strategy: Develop a community prevention coalition

Long-Term Outcome: Children and Youth Engage in Healthy Behaviors

- Success Measure(s):
- (1) Percentage of respondents who report using alcohol, tobacco, and marijuana at least **ONCE** in the past 30 days.
 - (2) **Average** age that respondents report first trying alcohol, tobacco, and marijuana.
 - (3) Percentage of respondents who report **REGULAR USE** of alcohol, tobacco, and marijuana has **moderate risk** or **great risk**. (as defined by Drug-Free Communities Core Measures)
 - (4) Percentage of respondents who report their parents feel **REGULAR USE** of alcohol is **wrong** or **very wrong**.
Percentage of respondents who report their parents feel **ANY** use of cigarettes or marijuana is **wrong** or **very wrong**.

Instrument/Source(s): Countywide Prevention Coalition

Intermediate-Term Outcome: Reducing substance abuse

Success Measure: (1) Results of County-wide Survey Grades 4, 6, 8

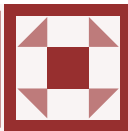
Instrument/Source: Countywide Prevention Coalition

Short-Term Outcome: Change family and community norms tolerant of Substance abuse

- Success Measure:
- (1) Percentage of respondents who report using alcohol, tobacco, and marijuana at least **ONCE** in the past 30 days.
 - (2) **Average** age that respondents report first trying alcohol, tobacco, and marijuana.
 - (3) Percentage of respondents who report **REGULAR**



Holmes County Partnerships for Success Strategic Action Identification Report



USE of alcohol, tobacco, and marijuana has **moderate risk** or **great risk**. (as defined by Drug-Free Communities Core Measures)

(4) Percentage of respondents who report their parents feel **REGULAR USE** of alcohol is **wrong** or **very wrong**.

Percentage of respondents who report their parents feel **ANY** use of cigarettes or marijuana is **wrong** or **very wrong**.

(5) Increase parents/adults understanding of the influence they have on children/youth as evidenced by County-wide Survey

Instrument/Source: Countywide Prevention Coalition

Strategy: Holmes County Prevention Coalition

Evidence-Base: _____ Evidence-based Program
 _____ Promising Program
 ___x___ Innovative Program

Evidence Source: Drug-Free Action Alliance, SPCA/Statewide Prevention Coalition Association, CADCA/Community Anti-Drug Coalitions of America

Preliminary Action Steps to Prepare for Implementation

Action Step	Individual Responsible	Due Date
Work with Drug-Free Alliance to identify model community prevention coalitions in Ohio to mentor Holmes County in our efforts	PfS Implementation Workgroup	July-October 2007
Develop a plan and structure for the coalition, with an eye toward continuity and sustainability	Holmes County Prevention Coalition Steering Committee	July-October 2007
Network with local organizations to establish a diverse community coalition	Holmes County Prevention Coalition Steering Committee	July 2007-January 2008
Develop a multi-year strategic plan for meeting the identified short-term, intermediate-term and long-term outcomes.	Holmes County Prevention Coalition	January-April 2008
Begin implementation of the strategic plan	Holmes County Prevention Coalition	April-June 2008



Holmes County Partnerships for Success Strategic Action Identification Report



Holmes County Partnerships for Success Strategic Action Identification Presenting Strategic Plan Recommendations

Instructions: This worksheet should be completed collectively by the Strategic Action Identification Workgroup. One worksheet should be completed for each preferred strategy.

Strategy: Initiate a social marketing campaign that focus on changing family and community norms tolerant of substance abuse

Long-Term Outcome: Children and Youth Engage in Healthy Behaviors

- Success Measure(s):
- (1) Percentage of respondents who report using alcohol, tobacco, and marijuana at least **ONCE** in the past 30 days.
 - (2) **Average** age that respondents report first trying alcohol, tobacco, and marijuana.
 - (3) Percentage of respondents who report **REGULAR USE** of alcohol, tobacco, and marijuana has **moderate risk** or **great risk**. (as defined by Drug-Free Communities Core Measures)
 - (4) Percentage of respondents who report their parents feel **REGULAR USE** of alcohol is **wrong** or **very wrong**.
Percentage of respondents who report their parents feel **ANY** use of cigarettes or marijuana is **wrong** or **very wrong**.

Instrument/Source(s): Social Marketing Campaign

Intermediate-Term Outcome: Reducing substance abuse

Success Measure: (1) Results of County-wide Survey Grades 4, 6, 8

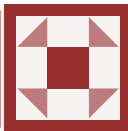
Instrument/Source: Social Marketing Campaign

Short-Term Outcome: Decrease family and community norms tolerant of Substance abuse

- Success Measure:
- (1) Percentage of respondents who report using alcohol, tobacco, and marijuana at least **ONCE** in the past 30 days.
 - (2) **Average** age that respondents report first trying alcohol, tobacco, and marijuana.
 - (3) Percentage of respondents who report **REGULAR**



Holmes County Partnerships for Success Strategic Action Identification Report



USE of alcohol, tobacco, and marijuana has **moderate risk** or **great risk**. (as defined by Drug-Free Communities Core Measures)

(4) Percentage of respondents who report their parents feel **REGULAR USE** of alcohol is **wrong** or **very wrong**.

Percentage of respondents who report their parents feel **ANY** use of cigarettes or marijuana is **wrong** or **very wrong**.

(5) Increase parents/adults understanding of the influence they have on children/youth

Instrument/Source: Social Marketing Campaign

Strategy: Social Marketing Campaign

Evidence-Base: _____ Evidence-based Program

_____ Promising Program

 x Innovative Program

Evidence Source: Ohio State University, University of Akron, Most of us, Actuality, Local Organizations (Graphic Publications, Holmes County Public Library)

Preliminary Action Steps to Prepare for Implementation

Action Step	Individual Responsible	Due Date
Investigate and select an experienced social marketing consultant to mentor Holmes County in the development and implementation of a campaign	PfS Implementation Workgroup/Holmes County Prevention Coalition	Completed by June 2007
Learn as much as possible about the local Amish and non-Amish parenting behaviors and perceptions associated with substance abuse	Social Marketing Campaign Committee/Holmes County Prevention Coalition	May 2008
Evaluate the impact of the initial social marketing campaign through a process evaluation to determine if the message reached the target audience	Social Marketing Campaign Committee/Holmes County Prevention Coalition	June 2008
To continue the activities of the social marketing campaign through monitoring, evaluating and amending the strategy	Social Marketing Campaign Committee/Holmes County Prevention Coalition	June 2008 - 2009