

- 3) Describe the contractor's plan to ensure the selected strategies are implemented according to the research-based standards of effectiveness.

Evaluation:

Describe the contractor's plan to fulfill local-level and national cross-site evaluation requirements. Discuss, based on your program logic model, what you expect to change. Discuss what you are expected to track and how you plan to do the tracking.

Cross-Cutting Components:

- 1) Describe your plan to include cultural competence in the SPF steps of your project.
- 2) Describe how you plan to address sustainability of your SPF efforts.

Epidemiological Profile - Guidelines

Regional profiles should be created for the entire region as described below. County profiles for the PFS grant (if applicable) should be either in a separate section within the regional profile or in a separate document. PFS county profiles only have to include data related to prescription drug misuse.

Include the following components in the regional epidemiological profile if possible. Incorporate any supplemental data. Use tables and/or graphs along with narrative to describe the main points in the tables or graphs.

- 1) Regional Epidemiological Outcomes/Community Data Workgroup (REOW/CDW)
 - Membership/Partnerships (name, agency/organization, role – refer to example Appendix 2)
- 2) Regional/Community Overview & Demographics
 - Describe regional overview and demographics then describe individual county demographics (refer to example Appendix 3)
 - Population (race, ethnicity, age, gender)
 - Education (high school drop-out, graduated high school, college degree)
 - Income distribution (median household income, poverty)
 - Other (teen pregnancy rate, crime rate, etc)
- 3) Substance Abuse Consumption & Consequences Table
 - Refer to Appendix 4
- 4) Alcohol Consumption & Consequences
Consumption
 - Current Use
 - Binge
 - Heavy/Chronic Use
 - Women of Childbearing Age
 - Riding w/Drinking Driver
 - Drinking and Driving

Consequences

- Violent Crimes
- Juvenile Arrests
- Adult Arrests
- Alcohol Crash Mortality
- Chronic Liver Disease Deaths
- Suicide
- Alcohol-related Birth Rate
- Alcohol Treatment Admissions

5) Non-Medical Prescription Consumption & Consequences

Consumption

- Lifetime Use
- Current Use

Consequences

- Property Crime
- Opioid Analgesic Deaths
- Prescription Drug Treatment Admissions

6) Illicit Drug Consumption & Consequences

Consumption

- Lifetime Use (Marijuana, Methamphetamine, Inhalants)
- Current Use (Marijuana, Methamphetamine, Inhalants)

Consequences

- Property Crime
- Drug Poisoning Deaths
- Marijuana Treatment Admissions
- Methamphetamine Treatment Admissions

7) Data Gaps & Limitations

- Describe gaps & limitations

8) Summary of Findings

- Summarize overall epidemiological findings

9) Glossary

- Provided (make necessary additions/deletions refer to Appendix 5)

10) Data Sources/Citations

- Provided (make necessary additions/deletions to provided List refer to Appendix 6)

11) Other

Appendix 3: Demographics Template

Category	County	County	County	Region
Population 2010				
Population 2005				
Population of female in 2010				
White Persons in 2010				
Black Persons in 2010				
AI/AN persons 2010				
Asian Persons 2010				
Persons reporting 2 or more races 2010				
Persons of Hispanic or Latino origin 2010				
High School Graduates age 25+ in 2010				
Bachelor's degree or higher age 25+ 2010				
Persons below poverty level 2010				

Source: (add appropriate Census data source such as Census 2010, 2014 Population Estimates, etc.)

*This table is provided for an example; revise as necessary.



Appendix 4: Substance Consumption & Consequence Table

Construct	Alcohol	Prescription Drugs	Illicit Drugs
Consequence	Violent Crime Adult Arrests Alcohol Crash Mortality Chronic Liver Disease Suicide Treatment	Treatment	Property Crime Treatment Deaths: Opioid Analgesic Drug Poisoning
Consumption	30-Day (Youth & Adult) Binge (Youth & Adult) Chronic/Heavy (Adult) Lifetime (Youth) Women Childbearing Age: Chronic/Heavy Binge Rode with Drinking Driver Drove after Drinking	Non-medical 30-Day	Current (30-Day): Marijuana Methamphetamine Inhalant Lifetime: Marijuana Methamphetamine Inhalant

*This table is provided for an example; revise as necessary.

Appendix 5: Glossary

Abuse • A respondent was defined with abuse of a substance if he or she met one or more of the four criteria for abuse included in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) (American Psychiatric Association [APA], 1994) and did not meet the definition for dependence for that substance. Additional criteria for alcohol and marijuana abuse are that if respondents reported a specific number of days that they used these drugs in the past 12 months, they must have used these drugs on six or more days in that period. These questions have been included in the survey since 2000.

Alcohol Use • Measures of use of alcohol in the respondent's lifetime, the past year, and the past month

Binge Use of Alcohol • Binge use of alcohol was defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days.

Blood Alcohol Concentration (BAC) is the concentration of alcohol in blood and is used to define intoxication and provides a rough measure of impairment.

Cirrhosis • Result of chronic liver disease that causes scarring of the liver and liver dysfunction. This often has many complications, including accumulation of fluid in the abdomen, bleeding disorders, increased pressure in the blood vessels, and confusion or a change in the level of consciousness.

Current Use • Any reported use of a specific drug in the past 30 days.

Dependence • A respondent was defined with dependence on illicit drugs or alcohol if he or she met three out of seven dependence criteria (for substances that included questions to measure a withdrawal criterion) or three out of six criteria (for substances that did not include withdrawal questions) for that substance, based on criteria included in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) (APA, 1994). Additional criteria for alcohol and marijuana dependence since 2000 are that if respondents reported a specific number of days that they used these drugs in the past 12 months, they must have used these drugs on six or more days in that period.

Driving Under the Influence • Respondents were asked whether in the past 12 months they had driven a vehicle while under the influence of alcohol and illegal drugs used together, alcohol only, or illegal drugs only.

Drugs Other Than Marijuana These drugs include cocaine (including crack), inhalants, hallucinogens (including phencyclidine [PCP], lysergic acid diethylamide [LSD], and Ecstasy [MDMA]), heroin, or prescription-type psychotherapeutics used nonmedically, which include stimulants, sedatives, tranquilizers, and pain relievers. This measure includes marijuana users who used any of the above drugs in addition to using marijuana, as well as users of those drugs who have not used marijuana.

Fetal Alcohol Syndrome (FAS) The manifestation of specific growth, mental, and physical birth defects associated with the mother's high levels of alcohol use during pregnancy.

Hallucinogen Use • Measures of use of hallucinogens in the respondent's lifetime, the past year, and the past month.

Heavy Use of Alcohol • Heavy use of alcohol was defined as drinking five or more drinks on the same occasion (i.e., at the same time or within a couple of hours of each other) on five or more days in the past 30 days. Heavy alcohol users also were defined as binge users of alcohol.

Heroin Use • Measures of use of heroin in the respondent's lifetime, the past year, and the past month

Incidence • Substance use incidence refers to the use of a substance for the first time (new use). Incidence estimates are based on questions about age at first use of substances, year and month of first use for recent initiates, the respondent's date of birth, and the interview date.

Infant Mortality Rate • Number of deaths for one year of age and under per 1,000 population

Inhalant Use • Measures of use of inhalants in the respondent's lifetime, the past year, and the past month

Lifetime Use • Lifetime use indicates use of a specific drug at least once in the respondent's lifetime. This measure includes respondents who also reported last using the drug in the past 30 days or past 12 months.

Marijuana Use • Measures of use of marijuana in the respondent's lifetime, the past year, and the past month

Methamphetamine Use • Measures of use of methamphetamine (also known as crank, crystal, ice, or speed), Desoxyn®, or Methedrine® in the respondent's lifetime, the past year, and the past month.

Need for Alcohol Use Treatment Respondents were classified as needing treatment for an alcohol use problem if they met at least one of three criteria during the past year: (1) dependence on alcohol; (2) abuse of alcohol; or (3) received treatment for an alcohol use problem at a specialty facility (i.e., drug and alcohol rehabilitation facilities [inpatient or outpatient], hospitals [inpatient only], and mental health centers).

Need for Illicit Drug or Alcohol Use Treatment • Respondents were classified as needing treatment for an illicit drug or alcohol use problem if they met at least one of three criteria during the past year: (1) dependence on illicit drugs or alcohol; (2) abuse of illicit drugs or alcohol; or (3) received treatment for an illicit drug or alcohol use problem at a specialty facility (i.e., drug and alcohol rehabilitation facilities [inpatient or outpatient], hospitals [inpatient only], and mental health centers).

Need for Illicit Drug Use Treatment • Respondents were classified as needing treatment for an illicit drug use problem if they met at least one of three criteria during the past year: (1) dependence on illicit drugs; (2) abuse of illicit drugs; or (3) received treatment for an illicit drug use problem at a specialty facility (i.e., drug/alcohol rehabilitation facilities [inpatient /outpatient], hospitals [inpatient], mental health centers).

Non-medical Use of Prescription Drugs • Using drugs that were not prescribed to you by a doctor, or using drugs in a manner not intended by the prescribing clinician (e.g., to get high). Nonmedical use does not include taking prescription medications as directed by a health practitioner or the use of over-the-counter medications.

Other Drugs · Illicit drugs include marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including phencyclidine [PCP], lysergic acid diethylamide [LSD], and Ecstasy [MDMA]), heroin, or prescription-type psychotherapeutics used nonmedically, which include stimulants, sedatives, tranquilizers, and pain relievers. Illicit drug use refers to use of any of these drugs.

Past Month Use · This measure indicates use of a specific drug in the 30 days prior to the interview. Respondents who indicated past month use of a specific drug also were classified as lifetime and past year users.

Past Year Use · This measure indicates use of a specific drug in the 12 months prior to the interview. This definition includes those respondents who used the drug in the 30 days prior to the interview. Respondents who indicated past year use of a specific drug also were classified as lifetime users.

Prevalence · Prevalence is a general term used to describe the estimates for lifetime, past year, and past month substance use, dependence or abuse, or other behaviors of interest within a given period (e.g., the past 12 months).

Prior Year Marijuana Use · A respondent was defined as engaging in prior year marijuana use if he or she used marijuana or hashish 12 to 23 months prior to the interview date.

Psychoactive Drugs · Psychotherapeutic drugs are generally prescription medications that also can be used illicitly to “get high” or for other effects. These include pain relievers, sedatives, stimulants, tranquilizers.

Psychotherapeutic Drugs · Psychotherapeutic drugs are prescription-type medications with legitimate medical uses as pain relievers, tranquilizers, stimulants, and sedatives.

Treatment for a Substance Use Problem · Respondents were asked if they had received treatment for illicit drug use, alcohol use, or both illicit drug and alcohol use in the past 12 months in any of the following locations: a hospital overnight as an inpatient, a residential drug or alcohol rehabilitation facility where they stayed overnight, a drug or alcohol rehabilitation facility as an outpatient, a mental health facility as an outpatient, an emergency room, a private doctor’s office, prison or jail, a self-help group or some other place.

Appendix 6: Data Sources/Citations

Behavioral Risk Factor Surveillance Survey (BRFSS) · Established in 1984 by the Centers for Disease Control and Prevention (CDC), the Behavioral Risk Factor Surveillance System (BRFSS) is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. For many states, the BRFSS is the only available source of timely, accurate data on health-related behaviors. Oklahoma has participated in BRFSS since 1995. **Bureau of Justice** · The Bureau of Justice Statistics was first established on December 27, 1979 under the Justice Systems Improvement Act of 1979. The Bureau of Justice Statistics (BJS) is a component of the Office of Justice Programs in the U.S. Department of Justice.

National Survey on Drug Use and Health (NSDUH) · The National Survey on Drug Use and Health (NSDUH) provides annual data on drug use in the United States. The NSDUH is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), an agency of the U.S. Public Health Service and a part of the Department of Health and Human Services (DHHS). The survey provides yearly national and state level estimates of alcohol, tobacco, illicit drug, and non-medical prescription drug use.

Oklahoma Bureau of Narcotics and Dangerous Drugs (OBN) · The Oklahoma State Bureau of Narcotics and Dangerous Drugs Control is a law enforcement agency with a goal of minimizing the abuse of controlled substances through law enforcement measures directed primarily at drug trafficking, illicit drug manufacturing, and major suppliers of illicit drugs.

Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) · The ODMHSAS was established in 1953 and continues to evolve to meet the needs of all Oklahomans. Collaborating with leaders from multiple state agencies, advocacy organizations, consumers and family members, providers, community leaders and elected officials, the way has been paved for meaningful mental health and substance abuse services transformation in Oklahoma. The ODMHSAS is responsible for providing services to Oklahomans who are affected by mental illness and substance abuse.

Oklahoma Prevention Needs Assessment Survey (OPNA) · The Oklahoma Prevention Needs Assessment is a paper/pencil survey administered in opposite years of the YRBS in schools to 6th, 8th, 10th and 12th grade students. The survey is designed to assess students' involvement in a specific set of problem behaviors, as well as their exposure to a set of scientifically validated risk and protective factors.

Oklahoma State Bureau of Investigation (OSBI) · The Oklahoma State Bureau of Investigation Uniform Crime Reporting (UCR) Program is part of a nationwide, cooperative statistical effort administered by the Federal Bureau of Investigation. The UCR Program was conceived, developed and implemented to serve law enforcement as a tool for operational and administrative purposes.

Oklahoma State Department of Health (OSDH) · The OSDH is a department of the government of Oklahoma responsible for protecting the health of all Oklahomans and providing other essential human services and through its system of local health services delivery, is responsible for protecting and improving the public's health status through strategies that focus on prevention.

Oklahoma Tax Commission · Since 1931, the Oklahoma Tax Commission has held the responsibility of the collection and administration of taxes, licenses and fees that impact every Oklahoman. Under the direction of the state legislature, the Tax Commission manages not only the collection of taxes and fees, but also the distribution and apportionment of revenues to various state funds. The

collected revenues fuel such state projects as education, transportation, recreation, social welfare and a myriad of other services.

Oklahoma Violent Death Reporting System (OKVDRS) • Data for OKVDRS are collected from death certificates, medical examiner reports, police reports, supplemental homicide reports and crime labs. Standardized methodology and coding are used to collect the data and enter into a database that is housed at the Oklahoma State Department of Health (OSDH). The OSDH partners with the Oklahoma State Bureau of Investigation and the Oklahoma Medical Examiner's Office to collect the data.

Pregnancy Risk Assessment Monitoring System • The Pregnancy Risk Assessment Monitoring System (PRAMS) is surveillance project of the Centers for Disease Control and Prevention (CDC) and state health departments. PRAMS collects state-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy. Oklahoma has participated in PRAMS since 1998.

Substance Abuse and Mental Health Services Administration (SAMHSA) • The Substance Abuse and Mental Health Services Administration (SAMHSA), part of the U.S. Department of Health and Human Services (HHS), focuses attention, programs and funding on promoting a life in the community with jobs, homes and meaningful relationships with family and friends for people with or at risk for mental or substance use disorders. The Agency is achieving that vision through an action-oriented, measurable mission of building resilience and facilitating recovery.

The Uniform Crime Report (UCR) The UCR was conceived, developed, and implemented by law enforcement for the express purpose of serving as a tool for operational and administrative purposes. Under the auspices of the International Association of Chiefs of Police, the UCR Program was developed in 1930. Prior to that date, no comprehensive system of crime information on a national scale existed. The Oklahoma State Bureau of Investigation assumed the statewide administration of the UCR Program on September 1, 1973.

United States Census Bureau The Census Bureau serves as the leading source of quality data about the nation's people and economy. The bureau of the Commerce Department, responsible for taking the census, provides demographic information and analyses about the population of the United States.

Youth Risk Factor Behavioral Survey (YRBS) • The Youth Risk Behavior Surveillance System (YRBSS) monitors six categories of priority health-risk behaviors among youth and young adults, including behaviors that contribute to unintentional injuries and violence; tobacco use; alcohol and other drug use; sexual behaviors that contribute to unintended pregnancy and sexually transmitted diseases (STDs), including human immunodeficiency virus (HIV) infections; unhealthy dietary behaviors; and physical inactivity. YRBSS includes a national school-based survey conducted by CDC and state and local school-based surveys conducted by state and local education and health agencies. Oklahoma has participated in the YRBS since 2003.