

**21 Reasons (formerly the Portland CMCA Coalition) &  
One Maine One Portland Coalition**

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# **2010 Substance Abuse Prevention Plan PORTLAND, MAINE**

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# Preventing Youth Substance Abuse in Portland: A PLAN FOR ACTION

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## INTRODUCTION

Youth substance abuse in Portland is a problem with devastating consequences for youth, their families, and the city as a whole—including violence, crime, and academic failure. In the spring of 2006, two community groups, the 21 Reasons Coalition (formerly Portland CMCA) and the One Maine One Portland Coalition, came together to develop a plan to address these issues. The plan was created using data from surveys and public meetings with participation from more than 700 community members, including nearly 400 youth, 400 parents, and 100 local groups, as well as national and statewide information about what works and what doesn't.

This report summarizes the priorities for action that will guide the efforts of our two coalitions during the next few years. Our goal is to reduce youth substance abuse rates 20% by 2010, with a focus on the #1 drug of choice among Portland youth: alcohol, followed by the #2 and #3 most used drugs: marijuana and tobacco. To achieve success, we need your help. Please join us!

## RESULTS FROM OUR COMMUNITY ASSESSMENT

According to the Maine Youth Drug and Alcohol Use Survey (MYDAUS), Portland has higher rates of youth substance abuse than the state. One out of five Portland 8<sup>th</sup> graders consume alcohol at least once a month. By junior year, half of our students are drinking on a regular basis. Binge drinking (defined as 5+ drinks in a row) is also alarmingly common, with more than one-third of juniors and seniors reporting bingeing in the previous two weeks. Meanwhile, 38% of seniors report using marijuana during the past month, and 29% of seniors report using tobacco during the past month (2004 MYDAUS). There are much smaller numbers of Portland youth reporting use of other drugs. However, in Portland as

**GOAL: To reduce by 20% the percent of Portland students in grades 6-12 reporting use in Maine Youth Drug & Alcohol Use Survey (MYDAUS):**

	<i>2004 Baseline</i>	<i>2010 Target</i>
Alcohol-30 day use	36%	29%
Alcohol-2 weeks binge	20%	16%
Marijuana-30 day use	20%	16%
Cigarette-30 day use	15%	12%

The following is an excerpt from the Maine Office of Substance Abuse (OSA) March 2006 State Strategic Plan Selection of Priority Intervening Factors:

As a result of the data analysis and consultation of the research, an initial set of priority intervening factors has been identified. ...

- Enforcement and the perception of enforcement (likelihood of being caught for violation of underage drinking laws)
- Ease of access to alcohol and the perception of ease of access to alcohol (how easy alcohol is to get)
- Parental attitudes and the perception of parental attitudes (parents think underage drinking is "very wrong")
- Parental monitoring and the perception of parental monitoring (likelihood of being caught by parents if used alcohol without permission)
- Social benefits of drinking and the perception of social benefits (likelihood that one would be seen as "cool" if started drinking)
- Adult attitudes in the community, and the perception of adult attitudes in community (adults in the community think underage drinking is wrong)

While all of these intervening factors focus on underage drinking specifically, the PARP analysis described above actually revealed that the same factors tend also to be related to youth marijuana and prescription drug use, two other consumption patterns identified by the epidemiological analysis as priorities for Maine's strategic plan.

across the state, the great majority of youth who report any other drug use (whether it's marijuana, tobacco, prescription pills, psychedelics, cocaine/crack, MDMA/ecstasy, inhalants, stimulants, heroin, or other illegal drugs.) also report using alcohol. Indeed, alcohol is the common denominator for most of our youth substance abuse problem. And when alcohol use goes down, so does other substance abuse.

To assess our community's ability to prevent youth substance abuse, we used a combination of the Risk and Protective Factor Framework used by the Maine's Office of Substance Abuse (OSA), and the "Priority Intervening Factors" identified by OSA's Strategic Plan. We collected information from community members via multiple sources: 1) A city-wide opinion survey, conducted with the participation of 705 people, including 380 youth, and results from a public action forum held on April 26, with input from 50 community members. 2) Portland data from the Maine Youth Drug & Alcohol Use Survey (MYDAUS); and 3) Portland CMCA's random phone survey of 380 Portland parents, conducted in 2006 by Strategic Marketing Services.

Our findings were clear: Our young people are not receiving strong enough messages or support from adults to make healthy decisions.

- On an individual and family level, many parents don't feel empowered to deal with the issue of substance abuse. Parents confess they do not have the appropriate knowledge or skills to effectively prevent their teens from using alcohol or other substances. We need more resources and programs for parents, and we need them to be supportive and accessible to all cultures. Even though our community has many wonderful opportunities for teens, we need to do a better job connecting youth with peer groups where substance abuse is not the norm, where they can interact with their parents in a positive way, and where they can explore their interests through positive activities.
- On a community level, we need to create an environment that doesn't promote underage drinking and substance abuse. Underage drinking is seen as a cultural norm, an inevitable "rite of passage." Few adults understand the true impacts of alcohol on young people. Alcohol advertising is reaching too many young audiences. Alcohol is too easily available and accessible to youth, both through retail and social sources. In many cases, adults are buying alcohol for minors and hosting underage drinking parties. In addition, not enough people believe they would get caught for breaking the law.

#### THE SOLUTION: 2 LEVELS OF ACTION

Based on the results of the community assessment, OMOP and 21 Reasons created citizen-led task forces to develop work plans with priorities for action on two important levels:

- **LEVEL 1: HEALTHY YOUTH & FAMILIES**  
Work on this level is led by OMOP. Priorities include increasing opportunities for youth involvement and leadership in positive activities; increasing resources and collaboration for parent education and skill-building in an environment that is supportive and accessible to all cultures; and providing more programs that involve parents and youth together.  
⇒ For more information or to become involved, please contact Amanda Edgar, Community Health Promotion Specialist: [AEDGAR@portlandmaine.gov](mailto:AEDGAR@portlandmaine.gov); (207) 756-8053.

- **LEVEL 2: A HEALTHY COMMUNITY ENVIRONMENT**  
Work on this level is led by 21 Reasons. Priorities include reducing alcohol availability & accessibility to youth; strengthening community norms, especially adult attitudes, to support alcohol-free expectations for underage youth; and strengthening enforcement of underage drinking, furnishing, and hosting laws.
- ⇒ For more information or to become involved, please contact Erica Schmitz, Coalition Coordinator; [eschmitz@mcd.org](mailto:eschmitz@mcd.org); (207) 773-7737.

PLEASE JOIN OUR EFFORTS!

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**ONE MAINE ONE PORTLAND: *Supporting Healthy Youth & Families***

Action Plan Strategy: PARENT INVOLVEMENT

Risk Factors	The Problem...	But Why?	Strategies	Outcomes: Short-Term Mid-year 2007	Outcomes: Intermediate (2008-10)
<ul style="list-style-type: none"> <li>▪ <b>Parental attitudes favorable to substance abuse</b> (See OSA “Top 6 Priority” list)</li> <li>▪ <b>Parental monitoring &amp; the perceived likelihood of being caught</b> (See OSA “Top 6 Priority” list)</li> </ul>	<ol style="list-style-type: none"> <li>1. Parents self-identify lack of knowledge dealing with substance abuse</li> <li>2. Parents self-identify lack of communication/conflict resolution skills</li> <li>3. Parents use alcohol/substances</li> <li>4. Parent disengagement / apathy</li> </ol>	<p>Parents are:</p> <ol style="list-style-type: none"> <li>a. Overworked/overwhelmed &amp; inundated with messages of alcohol/substance use as the norm</li> <li>b. Fearing failure; anxious about applying practical skills to ‘real life’ situations</li> <li>c. Not being reached due to cultural &amp; language barriers</li> </ol>	<ol style="list-style-type: none"> <li>i. Keep parents involved &amp; supported; support programs that develop skill-building based on their needs</li> <li>ii. Collaborate with other providers; create awareness around existing programs</li> <li>iii. Highlight programs/events that involve both youth <u>and</u> parents</li> </ol>	<p>*Identify and support a program that reaches out to parents of all cultures; create awareness of the resources available to address &amp; reduce substance abuse</p> <p>*Identify an event/program for parents &amp; teens to attend together</p>	<p>As measured by 2008 over 2004 MYDAUS, <b>increase by 20% the proportion of students who report...</b></p> <p>*...their parents say it is “very wrong” to use alcohol and drugs</p> <p>*...they believe they will get caught using alcohol and drugs</p>

**ONE MAINE ONE PORTLAND: *Supporting Healthy Youth & Families***

**Action Plan Strategy: –YOUTH INVOLVEMENT**

Risk Factors	Problems	Reasons	Strategies	Outcomes: Short-term (by 2007)	Outcomes: Intermediate (by 2008)
<p>Attitudes Favorable towards anti-social behavior</p>	<p>1) Too few opportunities for youth involvement                  2) Attitudes Favorable Towards Substance Use                  3) Peer Influence/Peer Approval *</p>	<p>1.(a).Not enough funding                  b. Lack of sense of neighborhood and belonging                  c. Not enough programs to engage youth and stimulate their interests</p> <p>2. (a) Peer Pressure                  b. poor adult role-modeling, incl. family history of addiction                  c. lack of awareness</p> <p>3. (a) low self-esteem                  b. lack of knowledge of strengths &amp; skills                  c. thinking that you can't have fun or feel uninhibited w/o using                  d. wanting to fit in, belong, feel cool</p>	<p>1. Groups – support, talk                  2. Youth-led activities                  3. Physical space for youth                  4. Community service activities                  5. Provision of family services (through identification)                  6. Provide rights of passage (positive)                  7. Annual Youth Leadership activity or summit (eventually include adults).                  8. Evidence-based programs for youth and parents</p>	<p>1. Identify possible funding sources for various strategies                  2. Raise awareness through distribution of OMOP and CMCA plans to decision makers and the public – legislators, neighborhood assoc., PHA &amp; Peer Leaders, City Council, PTO's, schools, etc.                  3. Influence and encourage program planning with service providers                  4. Connect with county-wide strategic plan                  5. Include Immigrant and Refugee populations in coalition and planning                  6. Maintain connection through quarterly e-mail newsletter</p>	<p>As measured by 2008 over 2004 MYDAUS, decrease prevalence rates of previous 30-day use of alcohol, marijuana and tobacco by 10%</p>

## 21 REASONS: *Building a Healthy Community Environment*

### Action Plan Strategy: **CHANGE COMMUNITY NORMS**

Risk factors	But Why?	Strategies	Process Outcomes: Short-term (2007)	Outcomes: Intermediate (by 2008)
<p><b>Parental attitudes that favor use.</b> By 12<sup>th</sup> grade, nearly 20% of Portland students believe that their parents would think that it is “not wrong at all” or only “a little bit wrong” for them to drink alcohol regularly.</p> <p><b>Community norms that favor use.</b> By 12<sup>th</sup> grade, only two-thirds of Portland students believe that most adults in their community think that it is “wrong” or “very wrong” for kids their age to drink alcohol.</p>	<p>Parents often aren’t sure how to set clear messages against using alcohol, and some don’t see the need. Some feel powerless against the media messages. Many accept drinking as a “rite of passage.” Many believe that it’s “safer” to allow kids to drink at home and not risk drinking &amp; driving. There is insufficient knowledge of links between drinking and damaged brain development, sexual assault, violence, depression etc.</p> <p>New Americans are vulnerable to the message that alcohol and drug use is the “norm” through the media messages they receive. Our programs don’t have enough involvement &amp; partnership with immigrant communities.</p> <p>Alcohol advertising is everywhere; Alcohol marketing/ sponsorships at sports and family events normalizes use. We have a lack of policy controls on advertising and marketing of alcohol.</p>	<p>Strengthen community norms against underage drinking and drug use:</p> <ol style="list-style-type: none"> <li>1. Parent Outreach &amp; Media Campaign</li> <li>2. Ongoing outreach and partnership with community stakeholders, including racial and ethnic minority communities and businesses.</li> <li>3. Policy changes to limit alcohol sponsorships and marketing that reaches youth.</li> </ol>	<ul style="list-style-type: none"> <li>• Convene Community Norms Action Team to guide efforts, with at least 6 members representing five different stakeholder groups.</li> <li>• Develop at least one television PSA, one radio PSA, and one print PSA.</li> <li>• Implement media campaign with participation of at least one television station, one radio station, and one newspaper.</li> <li>• Hold a Town Meeting on Underage Drinking, receive declaration of Youth Alcohol Prevention Month (April) from Council and hold community activities with participation of multiple stakeholder groups.</li> <li>• Develop and guide implementation of at least one city ordinance change involving reduction of advertising/marketing in Portland.</li> </ul>	<p>As measured by MYDAUS, increase by 20% the proportion of Portland students who report:</p> <ul style="list-style-type: none"> <li>• Adults in their community think it is “wrong” or “very wrong” for kids their age to drink.</li> <li>• Their parents think it is “wrong” or “very wrong” for kids their age to drink.</li> <li>• “Strongly agree” with the statement, “My family has clear rules about alcohol and drug abuse.”</li> </ul> <p>As measured by Parent Phone Survey, increase by 20% the percentage of parents who answer....</p> <ul style="list-style-type: none"> <li>• “As a parent, I feel that I have the ability to influence my teen’s choices about alcohol”</li> <li>• “NO” to the question, “Are there any circumstances under which you would allow your teen’s friends to drink in your home?”</li> <li>• “Strongly Disagree” with the statement, “My job isn’t to prevent them from drinking. Rather it’s to teach them to drink responsibly.”</li> </ul>

## 21 REASONS: *Building a Healthy Community Environment*

### Action Plan Strategy: –REDUCE ALCOHOL ACCESS

risk Factors	But Why?	Strategies	Outcomes: Short-term (by <u>2007</u> )	Outcomes: Inter mediate (by <u>2008</u> )
<p><b>Alcohol, tobacco and other drugs are too easily accessible.</b></p> <p><b>Too many teens report that alcohol is easy to get.</b> 27% of Portland middle school students report that alcohol is easy to get. By high school, 69% of students report that alcohol is easy to get (MYDAUS 2004, Portland).</p>	<p><u>RETAIL ACCESS:</u></p> <ul style="list-style-type: none"> <li>Alcohol placement makes it too easy to steal from stores--Store security isn't enough.</li> <li>Some clerks/servers don't check ID.</li> </ul> <p><u>SOCIAL ACCESS:</u></p> <p>Some adults—including some parents—buy alcohol for minors &amp; host underage drinking parties. Many don't know the true dangers/harms; have misperceptions about what is "safe"; don't know laws or penalties; or think they won't get caught/punished.</p> <p>Many parents are not monitoring their home alcohol supply. (Just don't realize the need)</p> <p><u>MARKETING/PRODUCT DESIGN:</u></p> <p>New products on the market are promoting underage drinking: Alcopops, "energy" beers, &amp; even non-alcoholic drinks like Red Bull (mixer)</p> <p><u>LOW PRICES:</u></p> <p>Low prices make alcohol accessible to youth</p>	<p>Advocate for state-level policy change to place alcohol in separate/less conspicuous, monitored part of store w/ separate register. (at same time: business policy change--recruit big chains to sign on)</p> <p>Advocate for local-level change through collaboration with business partners. Develop relationships, work together to improve security &amp; product placement &amp; clerk checking of IDs. Work with insurance companies to provide incentives for Clerk training/Server training .</p> <p>Continue Sticker Shock in partnership with stores to increase awareness of furnishing laws &amp; penalties.</p> <p><b>* NOTE: Additional strategies to reduce access are being implemented by our Enforcement Action Team and our Community Norms Action Team.</b></p>	<p>1:1 meetings with all of Portland's state legislators. With at least 2 signing on to support CMCA goals.</p> <p>1:1 meetings with executives of at least 3 big chain stores.</p> <p>At least 30 businesses conduct Sticker Shock.</p> <p>At least 15 businesses sign on to partnership, which will include: monitoring alcohol product placement, marketing placement, clerk/server training.</p>	<p>As measured by 2008 over 2004 MYDAUS, increase by 20% the proportion of students who report that alcohol is "hard" or "very hard" to get.</p>



## 21 REASONS: *Building a Healthy Community Environment*

### Action Plan Strategy: –STRENGTHEN ENFORCEMENT

Risk factors	But Why?	STRATEGIES	Outcomes: Short-term (by <u>2007</u> )	Outcomes: Intermediate (by <u>2008</u> )
<p><b>A large majority of teens believe that they would not get caught drinking by police.</b></p> <p><b>Too many teens report that alcohol is easy to get.</b></p>	<p>Many officers don't realize the importance of enforcing underage drinking, furnishing, and hosting laws. Many officers are faced with other priorities.</p> <p>There is a lack of resources for consistent enforcement.</p> <p>Many feel there is a lack of community support for enforcement.</p> <p>Many officers think "nothing happens" with UD cases</p> <p>Adopting an official departmental policy for dealing with these cases is not an option.</p> <p>Need more enforcement tools – e.g. posted no trespassing signs &amp; no late-night parking signs @ popular spots like cemetery, schools.</p>	<p>Continue training/outreach for officers regarding importance of UD enforcement.</p> <p>Continue \$ for overtime details. Explore other avenues to increase resources for UD enforcement.</p> <p>Continue PR/media strategies to increase public awareness &amp; support. In addition, continue ongoing relationship building, 1:1 meetings to build support &amp; awareness around importance of enforcement</p> <p>Develop diversion program based on research recommendations, and increase communication to officers regarding results.</p> <p>Explore non-policy strategies for PD leadership to communicate expectations and priorities to officers around this issue.</p> <p>Get signs posted.</p>	<p>As measured by data from PD &amp; DA's office:</p> <p>Increase to <u>12</u> the number of police citations for adults who furnish alcohol to minors or host underage drinking parties, over 3 in 2004. (<b>Reduce ACCESS</b>)</p> <p>Increase to <u>100</u> the number of Portland Police citations for youth in possession of alcohol, over 12 in 2004.</p> <p>Increase to <u>15</u> the number of Portland Police citations for youth in possession of marijuana, over 10 in 2004.</p>	<p>As measured by MYDAUS:</p> <p>Increase by 20% the proportion of Portland students who report that they would be likely to be caught by police if they drank alcohol in their neighborhood.</p> <p>Increase by 20% the proportion of Portland students who report that they would be likely to be caught by police if they used marijuana in their neighborhood.</p> <p>Decrease by 20% the proportion of Portland students who report alcohol is easy or very easy to get.</p> <p>Decrease by 20% the proportion of Portland students who report marijuana is easy or very easy to get.</p>



**Portland CMCA Coalition (Communities Mobilizing for Change on Alcohol) &  
One Maine One Portland Coalition**

# **NEEDS & RESOURCE ASSESSMENT**

*for Portland's 2010 Substance Abuse  
Prevention Plan*

Prepared by:

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## I. Introduction

Under a new federal grant from SAMHSA (Substance Abuse and Mental Health Services Administration), two Portland coalitions are working together to develop a 5-year, community-wide Substance Abuse Prevention Strategic Plan for the City of Portland:

- **PORTLAND CMCA** (Communities Mobilizing for Change on Alcohol) is a coalition of individuals and organizations working together to build a healthy community environment with policies, enforcement & community norms for the drug-free development of our youth. Portland CMCA is a project of Medical Care Development, and is the recipient of SAMHSA's Drug-free Communities Coalition grant. Projects are guided by a Steering Committee made up of community members, and supported by a broad base of community volunteers.
- **ONE MAINE ONE PORTLAND** is a coalition housed at the City of Portland Public Health Division, Health and Human Services Department. The group's original mission statement is: "To reduce illegal tobacco and alcohol use among 12-to-17-year-old individuals in Portland by providing clear, consistent and effective messages and resources to Portland's children, teenagers, parents and families." OMOP is funded by Maine's Office of Substance Abuse.

This report was created as a step toward designing the Strategic Plan. It integrates results from several sources:

- A city-wide opinion survey, conducted with the participation of 705 people, including 380 youth, and results from a public action forum held on April 26, with input from 50 community members.
- Portland data from the Maine Youth Drug & Alcohol Use Survey (MYDAUS 2004).
- The Maine Office of Substance Abuse (OSA) Priority Intervening Factors.
- Portland CMCA's random phone survey of 380 Portland parents, conducted in 2006 by Strategic Marketing Services.

The report is organized according to the *Risk and Protective Factor Framework* used by SAMHSA and Maine's Office of Substance Abuse. According to the National Institute on Drug Abuse, "Research over the past two decades has tried to determine how drug abuse begins and how it progresses. Risk factors can increase a person's chances for drug abuse, while protective factors can reduce the risk." (<http://www.drugabuse.gov/prevention/risk.html>)

We hope that this paper, while serving the process of creating the Strategic Plan, may also be considered a resource document itself.

## II. Sources/Methodology

### ***Portland Prevention Survey and Public Action Forum***

A qualitative, six-question survey was designed by steering committee members of the OMOP and CMCA Coalitions. The aim of the survey was to gather public opinion in order for the 2010 Strategic Plan to be firmly grounded in the issues of most concern to community members. A copy of the survey is included in Appendix C.

A coordinator was hired to manage the process, and an intern from the University of Southern Maine's Nursing Program assisted in dissemination and tabulation of the surveys. The survey was open to the community from January 31 to March 31, 2006 and available on paper or online through SurveyMonkey.com. Copies of the survey were placed in waiting rooms and notices placed in local newspapers. Presentations were given at group meetings. When needed, the survey was conducted orally rather than in written form.

Because of the qualitative nature of the survey, we did not attempt to get statistical sampling. Criteria for survey participation were living, working, volunteering, or attending school in Portland. There was no age limit; participants self-identified as "youth" or "adult." The target audience included a broad spectrum of subgroups. Leaders of organizations were contacted and requested to distribute the survey to their staff and clientele. Outreach was conducted to businesses, elders, faith-based communities, city and state government, the gay/lesbian/bisexual/transsexual/questioning community, health organizations, neighborhood associations, non-native English speakers, nonprofits, parent organizations, police and community policing, schools, and youth-serving organizations. **A list of our nearly 100 participating groups is attached in Appendix D.**

In addition, we partnered with Portland's diverse refugee and immigrant communities to conduct the survey in native languages. We conducted a presentation and sent invitations to all members of the Refugee and Immigrant Mental Health Collaborative, and partnered with Portland's Minority Health Program, including its Latino and Somali health outreach workers. We held forums in Arabic, Acholi, Nuer, and Spanish and translated the survey into Spanish for broad distribution.

We received 705 responses, 380 of which were from youth. Survey results were analyzed and presented at a community public action forum on April 26, 2006, with the participation of 50 community members. Participants broke into three focus groups to brainstorm priorities and next steps: Community/Environment, Family/Parent and Individual/Peer. Discussion results are included in Appendix G.

### ***Maine Youth Drug and Alcohol Use Survey***

From <http://www.maine.gov/dhhs/bds/osa/data/mydaus/index.htm>: The Maine Youth Drug and Alcohol Use Survey (MYDAUS) is administered by the Maine Office of Substance Abuse, Department of Health and Human Services. Its purpose is to assess the use of Alcohol, Tobacco and Other Drug (ATOD) and related anti-social behaviors among Maine students in grades 6 through 12. One of the strengths of the MYDAUS is that it also can be used to evaluate both positive and negative interactions with peers, family members, and influences in the school and community, which affect the potential for substance use and associated antisocial behaviors. The MYDAUS is generally offered every two years. The most recent MYDAUS was administered in February 2006. Public schools with students in any of grades 6 through 12 may participate in the MYDAUS. Private, non-sectarian schools with 60% or more publicly funded students are also eligible.

### ***OSA's 2006 Priority Intervening Factors***

The following is an excerpt from the Maine Office of Substance Abuse (OSA) March 2006 State Strategic Plan Selection of Priority Intervening Factors (Appendix A):

As a result of the data analysis and consultation of the research, an initial set of priority intervening factors has been identified. ...

- Enforcement and the perception of enforcement (likelihood of being caught for violation of underage drinking laws)
- Ease of access to alcohol and the perception of ease of access to alcohol (how easy alcohol is to get)
- Parental attitudes and the perception of parental attitudes (parents think underage drinking is “very wrong”)
- Parental monitoring and the perception of parental monitoring (likelihood of being caught by parents if used alcohol without permission)
- Social benefits of drinking and the perception of social benefits (likelihood that one would be seen as “cool” if started drinking)
- Adult attitudes in the community, and the perception of adult attitudes in community (adults in the community think underage drinking is wrong).

While all of these intervening factors focus on underage drinking specifically, the PARP analysis described above actually revealed that the same factors tend also to be related to youth marijuana and prescription drug use, two other consumption patterns identified by the epidemiological analysis as priorities for Maine's strategic plan.

### ***Portland Parent Survey***

Portland CMCA's Portland Parent Survey was conducted by Strategic Marketing and Analysis in February 2006. The random phone survey was conducted with 380 parents of teenagers in Portland, with sample statistics of  $\pm 5.03\%$  at the 95% confidence level. The survey is modeled after the Maine Office of Substance Abuse statewide parent survey, and provides baseline data regarding parenting practices and attitudes around alcohol. A copy of the survey questions and frequencies for each question are attached in **Appendix F**.

### **III. Results**

#### **A. Youth Substance Abuse Rates**

#### **B. Risk and Protective Factors**

This section of the needs assessment has been divided into three sections:

##### **1. Community/Environment Domain**

Availability/Access  
Enforcement: Real & Perceived  
Community & Adult Norms & Attitudes

##### **2. Family/Parent Domain**

Parental Attitudes  
Family Management & Parental Monitoring

##### **3. Individual/Peer Domain**

Opportunities for Youth Involvement  
Attitudes Toward Use  
Peer Influence & Approval

The major themes culled from survey results are aligned with the Maine Office of Substance Abuse goals and priorities, the Maine Youth Drug and Alcohol Survey (2004), a random phone survey of 380 Portland parents (2006), and the results of our April 2006 community public action forum.



## A. Youth Substance Abuse Rates

Youth substance abuse rates in Portland are above the state average. Youth substance abuse data is collected through the Maine Youth Drug and Alcohol Use Survey (MYDAUS), administered by the Maine Office of Substance Abuse in schools across the state. The drug of choice among Portland youth is alcohol, followed by marijuana and cigarettes. There are high rates of use for all three substances. All data in this section is from the 2004 MYDAUS student survey unless noted otherwise.

### Age First Used Marijuana, Cigarettes, and Alcohol—Grades 11 and 12

Portland Public Schools	Never	Age 14 or above	Age under 14
Alcohol- (>1-2 sips)	23.9	51.6	24.5
Marijuana	45.3	40.5	14.2
Cigarettes	50.0	25.0	25.0

Margin of Error: 1.1% Note: Weighted data. All numbers represent percent of students.

Past 30-day alcohol use among Portland students is above the state average in every grade. In addition, the proportional jump in use is higher in the earlier grades.

### Previous 30-Day Use of Alcohol - Local vs. State Average by Grade

	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12
Portland	8.7	15.0	24.5	40.2	42.8	50.6	56.9
State Avg.	6.7	12.1	22.4	32.5	40.3	45.2	49.2

Margin of Error: 1.1% Note: Weighted data. All numbers represent percent of students.

Although binge drinking among Portland students is lower than the state average among 7<sup>th</sup> graders (2.7%), by the 8<sup>th</sup> grade, binge drinking among Portland students quadruples to 12.5%. Between 8<sup>th</sup> and 12<sup>th</sup> grades, binge drinking among Portland students is higher than the state average in every grade, reaching a high of 36.6% by the 12<sup>th</sup> grade.

### Binge Drinking During the Past 2 Weeks *Portland vs. State Average by Grade*

	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12
Portland	2.3	2.7	12.5	20.8	24.0	33.4	36.6
State Average	2.2	4.3	9.2	15.8	21.7	26.3	29.0

Margin of Error: 1.1% Note: Weighted data. All numbers represent percent of students.

Marijuana use among Portland students is above the State in grades 8 through 12. The gap between Portland rates and the State Average grows with each year. Cigarette use, on the other hand, follows a less clear pattern, higher in some years, lower in others.

**Previous 30-day Marijuana Use** *Portland vs. State Average by Grade*

	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12
Portland	1.6	3.4	9.8	17.1	25.7	32.4	37.9
State Average	1.4	3.4	7.9	15.6	22.5	25.8	26.8

Margin of Error: 1.1% Note: Weighted data. All numbers represent percent of students.

**Previous 30-day Cigarette Use** *Portland vs. State Average by Grade*

	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11	Grade 12
Portland	4.3	3.3	13.1	16.5	15.5	16.6	28.9
State Average	3.1	5.9	10.8	15.6	19.2	22.2	24.8

Margin of Error: 1.1% Note: Weighted data. All numbers represent percent of students.

**Correlation between Alcohol and Other Drug Use:**

Analysis of county-wide MYDAUS data for students in grades 6-12 shows a high correlation between alcohol and other drug use:

- **Very strong association between 30-day alcohol and marijuana use** (gamma =.913)
- **Very strong association between 30-day alcohol and cigarette use** (gamma=.856); and
- **Strong association between 30-day alcohol and other drug use** (gamma=.806) – includes psychedelics, cocaine/crack, MDMA (ecstasy), inhalants, stimulants, heroin, prescription drugs not prescribed for the student by a physician, and "other illegal drugs".

**B. Risk & Protective Factors**

**1. Community/Environment Domain**

- Of 6,290 Prevention Survey answers, 28% (1,764) mentioned community/environment topics as an important focus for substance abuse prevention.
- Of these, one quarter mentioned policy change as a priority for action.

<p><b>AVAILABILITY/ACCESS</b> (real &amp; perceived):  <i>The degree to which youth think it is easy for them to get alcohol, cigarettes, and illicit drugs.</i></p>	
<b>OSA Top 6?</b>	Yes: Ease of access to alcohol and the perception of ease of access to alcohol (how easy alcohol is to get)
<b>2004 MYDAUS</b>	27% of Portland middle school students report that alcohol is easy to get. By high school, 69% of students report that alcohol is easy to get. (2004 MYDAUS)
<b>Portland Prevention Survey</b>	16% of survey answers regarding the Portland community/environment identified the need to limit youth access to alcohol and other drugs.
<b>Public Forum</b>	<p>Participants felt that alcohol is too easily accessible because adults buy it for minors, share their ID's and leave their alcohol in sight of the children. Alcohol is sold almost everywhere, is marketed everywhere and is targeted at youth. Top strategy priorities identified at the forum included:</p> <ul style="list-style-type: none"> <li>• <b>Move location of alcohol in stores—away or in a separate section</b></li> <li>• <b>Stricter enforcement</b></li> <li>• <b>Let adults know the consequences (they are severe!)</b></li> <li>• <b>Increase store security</b></li> </ul>

**ACTIVITIES/PROGRESS SO FAR:**

- Project Sticker Shock has been coordinated by Portland CMCA at least once per year since 2003 with the participation of 50 retailers and several youth organizations, including PROP Peer Leaders, Boys & Girls Club, Students Against Destructive Decisions, and TREK. Stickers are placed on alcohol multipacks, and are bright orange with the message: “Providing alcohol to minors is ILLEGAL: Fines are up to \$2000 and/or a year in jail.”
- Enforcement strategies: Since Portland CMCA began in Portland, the number of summons for adults furnishing alcohol to a minor has more than tripled. Efforts are underway to continue increasing enforcement of furnishing & hosting laws.
- Policy strategies: This spring, Portland CMCA participated in a successful local ordinance change to limit alcohol outlet density by reducing the number of overlay liquor licenses available in the Old Port. In addition, the Portland CMCA Coordinator was appointed to one of seven spots on the Mayor’s Old Port Night Life Task Force, to develop policy recommendations for increasing public safety in the city’s entertainment district.
- Media strategies: Portland CMCA’s public relations and media advocacy work is ongoing, with partners including the DA’s office (increasing awareness that furnishing cases are prosecuted), and the Portland PD and Sheriff’s Office (increasing awareness that furnishing laws are enforced). Portland CMCA’s 2006 parent media campaign PSA’s and community outreach also worked to increase adult awareness of the costs of furnishing alcohol to minors.

<p><b>ENFORCEMENT</b> (real &amp; perceived)</p> <p><i>The degree to which youth believe kids in their neighborhood would be caught by the police if they smoked marijuana, drank alcohol, or carried a handgun.</i></p>	
<b>OSA Top 6 Priority?</b>	Yes: Enforcement and the perception of enforcement (likelihood of being caught for violation of underage drinking laws)
<b>2004 MYDAUS</b>	Even among 8th graders, 72% believe they would not be caught by police if they drank alcohol in their neighborhood. By 11th grade, more than 90% of teens believe they would not get caught drinking by police (MYDAUS 2004, Portland).
<b>Portland Prevention Survey</b>	16% of survey answers regarding the Portland community/environment identified enforcement and police presence as priorities for substance abuse prevention.
<b>Public Forum</b>	<p>Participants felt that community does not support underage drinking enforcement. There are other priorities (“hard-core” drugs) and the public does not see the connection to violence and other crimes. Vendors are not asking for ID often enough and with the Bureau of Liquor Enforcement gone, stores and bars are more relaxed about checking. There is a lack of enforcement for already existing law, a lack of sufficient funding and resources for enforcement, and the current laws make enforcement difficult. Top priorities for action included:</p> <ul style="list-style-type: none"> <li>• <b>Increase communication &amp; positive relationships between law enforcement &amp; parents/community</b></li> <li>• <b>Increase consistency of enforcement &amp; police ownership and involvement in solution</b></li> </ul>

**ACTIVITIES/PROGRESS SO FAR:**

Since Portland CMCA began in Portland, the number of citations for minors in possession of alcohol has been multiplied by more than six times, and the number of summons for adults furnishing alcohol to a minor has more than tripled. Portland PD also is conducting overtime details patrols this spring to watch for underage drinking parties in conjunction with springtime graduation and prom activities. Work is currently underway to develop a pilot court diversion program for first time juvenile offenders of alcohol possession.

**COMMUNITY AND ADULT NORMS AND ATTITUDES:**

*The extent to which youth feel adults in the neighborhood would think it's wrong for kids to smoke cigarettes, use marijuana, or drink alcohol.*

<b>OSA Top 6 Priority?</b>	Yes: Adult attitudes in the community, and the perception of adult attitudes in community (adults in the community think underage drinking is wrong.
<b>2004 MYDAUS</b>	In 8th grade, less than two-thirds of teens (62%) believe that adults in their neighborhood think it is "very wrong" for kids their age to drink alcohol. Among 10th graders, less than half (46%) believe adults think it's "very wrong" for them to drink. By 12th grade, only a third (34%) believe adults think it's "very wrong" (MYDAUS 2004, Portland).
<b>Portland Prevention Survey</b>	One-quarter of survey answers regarding the Portland community/environment identified the need for increased community engagement and prioritization of youth substance abuse prevention.
<b>Public Forum</b>	<p>The culture promotes use of alcohol through marketing/sponsorships at sports/family events, because it is seen as safe (At least it's "only" alcohol), because parents will sponsor parties, it is advertised in the media and seen as a "rite of passage." We need to model the behavior we would like to see. Youth respond to the messages they hear—intentional or not/positive or negative. Top priorities identified at the forum included:</p> <ul style="list-style-type: none"> <li>• Stop alcohol sponsorship of local sports teams &amp; family events</li> <li>• Change public mindset about alcohol &amp; underage drinking</li> </ul>

**ACTIVITIES/PROGRESS SO FAR:**

This year's Portland CMCA media campaign theme is "Please, take a stand: No alcohol until they're 21," and included public service announcements, print materials, radio spots, and earned media coverage. The primary target audience is parents of teenagers. The campaign also included a series of community forums held in native languages for Portland's diverse refugee and immigrant populations. The campaign launched as part of April Alcohol Awareness Month, including a variety of events—a City Council Resolution, press conferences by local agencies, and various youth-led projects, with our March 29 Underage Drinking Town Hall Meeting as the kick-off.

## 2. Family/Parent Domain

- Of the 6,290 Prevention Survey answers, 12% (725) described family/parent topics as an important focus for substance abuse prevention

<p><b>FAMILY/PARENT ATTITUDES</b> (real &amp; perceived):  <i>The degree to which respondents report their parents would feel it is wrong if they (the respondents) drink liquor, smoke marijuana, or smoke cigarettes.</i></p>	
<b>OSA Top 6 Priority?</b>	Yes: Parental attitudes and the perception of parental attitudes (parents think underage drinking is “very wrong”)
<b>Portland Parent Survey &amp; 2004 MYDAUS</b>	Less than 40% of Portland parents believe they have the ability to influence their teen's choices about alcohol (Random Phone Survey of 380 Portland parents, 2006). Only 23% of Portland parents “Strongly Disagree” with the statement, “My job isn’t to prevent them from drinking. Rather it’s to teach them to drink responsibly.” Nearly 28% of Portland parents report that there are circumstances under which they would allow their teen's friends to drink in their home (Random Phone Survey of 380 parents, 2006). ...These numbers are reflected in our student survey data. In 8th grade, 80% of teens report that their parents think it would be "very wrong" for them to drink alcohol. By 10th grade, this number drops to 67%. By 12th grade, only half of teens believe their parents think it is "very wrong" for them to drink alcohol (MYDAUS 2004, Portland).
<b>Portland Prevention Survey</b>	22% of survey answers regarding the Family/Parent domain identified family attitude and the need for parent support and training as priorities for substance abuse prevention.
<b>Public Forum</b>	Inappropriate modeling by parents and a lack of communication between parents and youth are factors that put youth at risk. Priorities include: <ul style="list-style-type: none"> <li><b>Create opportunities for teens/parents to do things together</b></li> <li><b>Increase a parent network, Parent support groups/network</b></li> <li><b>A positive, multilingual, multi-approach parent education on communication, brain development &amp; discipline</b></li> </ul>

## FAMILY MANAGEMENT/PARENTAL MONITORING:

*The extent to which respondents report that their parents would catch them if they drank liquor, carried a handgun, or skipped school, as well as the extent to which respondents report that there are clear family rules, that parents know the whereabouts of their children, that there are rules about alcohol and drug use, and that parents monitor homework completion.*

<b>Perceived Likelihood of Being Caught by Parents</b>	
<b>OSA Top 6 Priority?</b>	Yes: Parental monitoring and the perception of parental monitoring (likelihood of being caught by parents if used alcohol without permission)
<b>Portland Parent Survey &amp; 2004 MYDAUS</b>	When asked, "What actions, if any, do you regularly take to prevent your child from drinking alcohol?" only 28% of Portland parents said they ask their teens if there is going to be alcohol at a party. Less than 24% of Portland parents said they call to see if parents will be at a teen party (Random Phone Survey of 380 Portland parents, 2006). These numbers are reflected in our student survey data. In 8th grade, more than one third of teens believe that if they drank alcohol, they would NOT be caught by their parents. By 9th grade, more than half believe they would not get caught. By 12th grade, more than three-quarters of teens believe they would not be caught (MYDAUS 2004, Portland).
<b>Portland Prevention Survey</b>	Over two-thirds of survey answers regarding the Family/Parent domain identified family involvement and monitoring as priorities for preventing underage substance abuse.
<b>Public Forum</b>	Parents need support and to not be isolated in the difficult job of monitoring teens and setting limits. Priorities include: <ul style="list-style-type: none"> <li>• <b>Education of specific skills/Positive approach</b></li> <li>• <b>A positive, multilingual, multi-approach parent education on communication, brain development &amp; discipline</b></li> <li>• <b>Increase law enforcement/parent network</b></li> </ul>

### ACTIVITIES/PROGRESS SO FAR:

Parent programs and activities currently offered in Portland are listed in **Appendices H and K**.

### 3. Individual/Peer Domain

- Of the 6,290 responses to the survey, nearly half (47%) mentioned individual/peer topics as an important focus for substance abuse prevention.

<b>OPPORTUNITIES FOR YOUTH INVOLVEMENT</b> <i>Perceived opportunities to engage in pro-social activities in the community and to engage with adults</i>	
<b>OSA Top 6 Priority?</b>	No
<b>2004 MYDAUS</b>	According to local MYDAUS data, only slightly more than half of Portland 6 <sup>th</sup> graders (56%) have the protective factors of “Community opportunities for positive involvement.” In 8 <sup>th</sup> grade, this number drops to 47%. Among high schoolers, between 48%-49% of students have this protective factor.
<b>Portland Prevention Survey</b>	37% (1,133) of responses in the Individual/Peer domain identified activities and community centers as priorities for substance abuse prevention.
<b>Public Forum</b>	<p>While no one solution will work for all youth, some changes that could be made are: broaden eligibility &amp; accessibility for existing programs; focus on engagement of all youth, all adults, community in programs/alternative activities; create weekend, daytime &amp; evening activities for broadest participation; and address the lack of opportunities for teens/parents to do things together. Priorities included:</p> <ul style="list-style-type: none"> <li>• Expand program/prevention activities to include daytime, weekend &amp; evening times (not just after school) to engage broadest membership/participation</li> <li>• Shake up the cultural norms/community expectations about who is responsible for youth success...it takes a village</li> <li>• Focus on engagement of all youth, all adults, community in programs/alternative activities</li> </ul>



<b>ATTITUDES FAVORABLE TO DRUG USE</b>	
<b>OSA Top 6 Priority?</b>	No
<b>2004 MYDAUS</b>	According to local MYDAUS data, one-quarter (24%) of 6 <sup>th</sup> graders have the risk factor of “Favorable attitudes toward drug use.” By 10 <sup>th</sup> grade, this number rises to 44%. By 12 <sup>th</sup> grade, 46% of students have the risk factor of favorable attitudes toward drug use.
<b>Portland Prevention Survey</b>	17% of survey answers regarding the Individual/Peer domain identified the need for education and awareness as priorities for substance abuse prevention.
<b>Public Forum</b>	We need to understand why teens use. There is a lack of knowledge of the true effects of using alcohol, drugs and tobacco. Priorities included: <ul style="list-style-type: none"> <li>• <b>Help people/youth get to core issue of why they use/the process doesn’t just address behavior but the root cause</b></li> <li>• <b>Actively exercise our positive influence over/with youth rather than withdrawing own support</b></li> </ul>

<b>PEER INFLUENCE/PEER APPROVAL</b>	
<i>The extent to which respondents feel they would be considered cool if they smoked cigarettes, drank, smoked marijuana, or carried a handgun.</i>	
<b>OSA Top 6 Priority?</b>	Yes: Social benefits of drinking and the perception of social benefits (likelihood that one would be seen as “cool” if started drinking)
<b>2004 MYDAUS</b>	By 7th grade one out of four teens believes s/he could be seen as "more cool" if they drank alcohol. By 9th grade, 60% of teens report this perception of social benefit from drinking. By 12th grade, more than 70% of teens are linking alcohol with "coolness" (MYDAUS 2004, Cumberland County).
<b>Portland Prevention Survey</b>	One-quarter of the survey answers in the Individual/Peer domain identified peer influence as a key issue for substance abuse prevention.
<b>Public Forum</b>	Peer pressure influences behavior— both positive & negative. Peer pressure is related to inclusion and we all seek belonging. There are pervasive negative messages about youth and youth culture even though everyone is subject to influence. External influence motivates peer/youth-influencing behavior. A positive is that social norms are flexible/changing.

**ACTIVITIES/PROGRESS SO FAR:**

Youth programs and activities currently offered in Portland are listed in **Appendices H, I, and J.**

#### IV. Conclusions/Recommendations/Priorities

The results of both the survey and the community public action forum echo research in the field of substance abuse prevention of the themes that promote prevention and resiliency.

	OSA Top 6 Priority	Prevention Survey Priority	Public Forum Priority
<b>Reduce Availability/Access</b>	✓	✓	✓
<b>Increase Enforcement and Police Presence</b>	✓	✓	✓
<b>Strengthen Community Norms and Adult Attitudes</b>	✓	✓	✓
<b>Increase Parent Monitoring and Family Involvement</b>	✓	✓	✓
<b>Strengthen Parent Attitudes</b>	✓	✓	✓
<b>Create more Alternative Activities and Community Centers</b>		✓	✓
<b>Increase Positive Peer Influence</b>	✓	✓	

In May 2006, OMOP (One Maine, One Portland) and Portland CMCA (Communities Mobilizing for Change on Alcohol) both opened their regular monthly meeting to invite the creation and support of citizen-led task forces. These task forces, based on community priorities identified through the Needs & Resource Assessment process, met throughout the summer of 2006 to accomplish the following tasks:

- A. Review Needs & Resource Assessment
  - Review what we're doing so far (activities & progress)
- B. Conduct SWOC Analysis (Strengths, Weaknesses, Opportunities, Challenges/Threats) in their identified priority area.
- C. Complete Logic Model for Change
  - Select priorities to address.
  - Select measurable outcomes—including short-term (2007) and intermediate-term (2008), and long-term (2010).
  - Select strategies to achieve those outcomes.
- D. Develop a work plan/timeline for the next year.

The task forces then presented results to their respective Coalitions (Portland CMCA for the community/environment domain, and OMOP for the individual/peer and family/parent domains) for review and approval. In fall of 2006, the plans were integrated into a comprehensive Portland Substance Abuse Prevention Plan, approved and adopted by both Coalitions. The Plan will be a working document, flexible and adaptable to changing community conditions, reviewed, and revised on an annual basis according to evaluation data.

## Appendix A: State Strategic Plan Selection of Priority Intervening Factors

### Excerpt from draft Strategic Prevention Framework-State Incentive Grant (SPF-SIG) March 2006

Prevention strategies aimed at underage drinking/substance use can be divided into two major approaches, the individual and the environmental approach. Prevention strategies directed at individuals are usually based on an assumption that substance abuse is the result of individual factors (rebelliousness, family history, low academic achievement, favorable attitude towards substance use & anti-social behavior, etc.) whereas an environmental approach takes into account the fact that individuals do not become involved with substances solely on the basis of personal characteristics. Rather, they are influenced by a complex set of factors in the shared environment, such as the rules and regulations of the social institutions to which people belong, the norms of the communities in which they live, the mass media messages to which they are exposed, and the accessibility of alcohol, tobacco, and illicit drugs. Because substance abuse is viewed as a product of the overall system, effective prevention requires making appropriate modifications to the community/environment at large<sup>1</sup>.

Environmental strategies focus on changing the underlying contextual processes that contribute to substance use, and have the potential to impact greater numbers of persons and produce sustainable results at lower costs. Thus, environmental strategies are “population-based” – meaning they target an entire population rather than certain individuals in particular. Compared to individually focused prevention (which seeks to reduce individual risk by intervening and creating change with one or more identified individuals), strategies focused on the environment have the potential to reduce collective risk at the population level<sup>2</sup>.

Individual strategies can either be universal (applied to everyone in the population), or they can focus more on “selective” or “indicated” strategies, meaning that they target individuals or subpopulation groups who can be identified as being at increased risk for substance abuse. Selective and indicated strategies are particularly complex because they require both identifying the right strategies to achieve the desired changes and implementing those strategies in a way that specifically reaches the individuals at greatest risk. However, when the right strategies reach the right individuals, the potential change in the highest-risk individuals can lead to substantial reductions in problems and lower costs to society. Since the environment impacts these highest-risk individuals as well as the entire population, environmental changes may also be necessary to ensure that individual changes can be sustained in the long term.

A truly comprehensive approach combines both types of strategies to get the best results; given the limited resources typically available for prevention it can be difficult to fully implement such a comprehensive approach. However, this state plan proposes to use the limited resources strategically in order to combine both types of approaches and to identify the most cost-effective balance possible.

In order to find the best balance of cost effective, data-driven, sustainable prevention strategies, Maine is building a comprehensive approach with a predominant focus initially on environmental strategies. Maine is utilizing evidence from the available national research and

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<sup>1</sup> Holder, H.D., 1999.

<sup>2</sup> Ibid.

applying these research findings to its own substance abuse survey data. The first phase of implementation will focus on environmental strategies primarily, because the research and data have both indicated clear and specific priorities in this area. Further in-depth analysis will continue during 2006, in order to identify the priorities for individual strategies. A later targeted implementation phase beginning in 2007 will then add identified individual-level priority strategies and integrate them with the environmental work (additional environmental priorities may also be added based on additional analysis).

The Maine Youth Drug and Alcohol Use Survey (MYDAUS) follows a social-developmental model of risk and protective factors built by Hawkins and Catalano's Social Development Research Group (SDRG). Research has identified numerous and interrelated factors that increase or decrease the probability of alcohol, tobacco, and other drug use and related problems among youth. These risk and protective factors are found in multiple domains, including the school, the individual and his/her peer group, community, and family<sup>3</sup>. The risk factors are characteristics of school, community, and family environments, and characteristics of students and their peer groups that are known to predict increased likelihood of drug use, delinquency, and violent behaviors among youth<sup>4</sup>. The research also identified certain protective factors that appear to help mediate the effect of the risk factors.

*Methods:* Maine's SPF-SIG epidemiologist conducted initial exploratory analysis of MYDAUS 2004 high school data to examine the relationship between the various risk and protective factor items on the MYDAUS survey and likelihood of substance consumption behavior (alcohol, marijuana, and prescription drugs were used as indicators, based on needs assessment findings showing these three to be the most common). To keep this analysis simple and focused, the unadjusted<sup>5</sup> population-attributable risk percent (PARP = hypothesized percent of substance users reduced in the population if the exposure is eliminated) was calculated for each risk and protective factor item. These intervening factors were then ranked from high to low based on PARP and the environmental factors having most effect on the likelihood of substance use were identified. Maine's hypothesized underage drinking prevention mechanism of change model is shown in Figure 4-1.

The factors selected through this process are also backed by extensive research nationally. For example, parents have been shown to be a very important external influence on adolescents' development and behavior, including alcohol use<sup>6</sup>. Moreover, research has indicated that the potentially negative influence of peer attitudes and behaviors (which also had a high PARP in the exploratory analysis) can be ameliorated through positive adolescent-parent relationships, parental monitoring, and parental involvement<sup>7</sup>.

Research has also shown the importance of community factors in underage drinking and other substance use. The extent to which alcohol consumption and underage drinking are considered to be the norm and are accepted within a given community contributes to underage alcohol consumption. Underage drinking is less prevalent in communities in which youth are more strictly monitored and where there is stronger underage drinking enforcement and policing of

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<sup>3</sup> Hawkins et al., 1992; Kandel et al., 1986; Newcomb & Felix-Oriz, 1992.

<sup>4</sup> Hawkins, Catalano & Miller, 1992; Hawkins, Arthur & Catalano, 1995; Brewer, Hawkins, Catalano & Neckerman, 1995; Lipsey & Derson, 1998.

<sup>5</sup> PARP was not adjusted for the demographics or other correlated factors. It was assumed that the environmental factors considered here were independent of each other, although in actuality there is some correlation among them.

<sup>6</sup> Halpern-Felsher & Biehl, 2003.

<sup>7</sup> Parke & Ladd, 1992.

vendors who sell alcohol to youth.<sup>8</sup> Recent research on advertising has also linked exposure to alcohol advertising with underage drinking.<sup>9</sup> While this research was considered groundbreaking due to its definitive conclusions, anecdotally both youth and preventionists have been pointing out for years the ways in which exposure to alcohol advertising can impact an individual's perception of the social benefits of alcohol use.

As a result of the data analysis and consultation of the research, an initial set of priority intervening factors has been identified. However, this list represents only the first of several sets of intervening factors that will be the targets of Maine's SPF SIG-funded work (others will follow, as additional analysis is completed). Initially, Maine has targeted the following priority intervening factors for funding in "Phase II" of the SPF-SIG work, during which the primary focus will be on environmental strategies to reduce underage drinking:<sup>10</sup>

- Enforcement and the perception of enforcement (likelihood of being caught for violation of underage drinking laws)
- Ease of access to alcohol and the perception of ease of access to alcohol (how easy alcohol is to get)
- Parental attitudes and the perception of parental attitudes (parents think underage drinking is "very wrong")
- Parental monitoring and the perception of parental monitoring (likelihood of being caught by parents if used alcohol without permission)
- Social benefits of drinking and the perception of social benefits (likelihood that one would be seen as "cool" if started drinking)
- Adult attitudes in the community, and the perception of adult attitudes in community (adults in the community think underage drinking is wrong)

While all of these intervening factors focus on underage drinking specifically, the PARP analysis described above actually revealed that the same factors tend also to be related to youth marijuana and prescription drug use, two other consumption patterns identified by the epidemiological analysis as priorities for Maine's strategic plan. In the case of some of these factors, the relevant MYDAUS questions name only alcohol (i.e. "how likely is it that you would be caught by your parents if you used alcohol without their permission"), whereas in other cases the intervening factor is measured for its connection to both alcohol and marijuana (i.e., "how easy would it be for you to get some alcohol if you wanted to" and "how easy would it be for you to get some marijuana if you wanted to"). However, while none of the MYDAUS questions about these intervening factors have been asked in a way that applies specifically to prescription drugs, all of them were correlated with prescription drug use as well as alcohol and marijuana use, indicating substantial connections across the various intervening factors and the various substances.

In order to get the work on SPF Step 4 (implementation) started based on what the epidemiological analysis has already indicated for clear priorities, Phase II of Maine's SPF SIG work will focus somewhat narrowly on these priority intervening factors as they relate specifically to underage drinking. However, the next wave of analysis will assist us in expanding our list of priority intervening factors for Phase III. We expect to identify additional priorities for which implementation steps can be designed to lead to outcomes related to other substances (particularly marijuana and prescription drugs), young adults (age 18-25), and other subpopulations identified as high-need or high-risk.

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<sup>8</sup> Ibid.

<sup>9</sup> Synder, 2006.

<sup>10</sup> Phase I focuses on capacity building and infrastructure development, Steps 1, 2, and 3 of the SPF framework.

## **Appendix B: Substance Abuse and Mental Health Services Administration (SAMHSA) Strategic Prevention Framework**

From March, 2006 State of Maine Department of Health and Human Services Office of Substance Abuse RFP: 206080 “Strategic Planning and Environmental Programming for Substance Abuse Prevention.”

The Strategic Prevention Framework (SPF) is grounded in the public health approach and based on six key principles. State Initiative Grant (SIG) grantees are required to base their projects on these six principles:

1. Prevention is an ordered set of steps along a continuum to promote individual, family, and community health, prevent mental and behavioral disorders, support resilience and recovery, and prevent relapse. Prevention activities range from deterring diseases and behaviors that contribute to them, to delaying the onset of disease and mitigating the severity of symptoms, to reducing the related problems in communities. This concept is based on the Institute of Medicine model that recognizes the importance of a whole spectrum of interventions.
2. Prevention is prevention is prevention. That is, the common components of prevention for the individual, family, or community within a public health model are the same—whether the focus is on preventing or reducing the effects of cancer, cardiovascular disease, diabetes, substance abuse or mental illness.
3. Common risk and protective factors exist for many substance abuse and mental health problems. Good prevention focuses on these common risk factors that can be altered. For example, family conflict, low school readiness, and poor social skills increase the risk for conduct disorders and depression, which in turn increase the risk for adolescent substance abuse, delinquency, and violence. Protective factors such as strong family bonds, social skills, opportunities for school success, and involvement in community activities can foster resilience and mitigate the influence of risk factors. Risk and protective factors exist in the individual, the family, the community, and the broader environment.
4. Resilience is built by developing assets in individuals, families, and communities through evidence-based health promotion and prevention strategies. For example, youth who have relationships with caring adults, good schools, and safe communities develop optimism, good problem-solving skills, and other assets that enable them to rebound from adversity and go on with life with a sense of mastery, competence, and hope.
5. Systems of prevention services work better than service silos. Working together, researchers and communities have produced a number of highly effective prevention strategies and programs. Implementing these strategies within a broader system of services increases the likelihood of successful, sustained prevention activities.
6. Baseline data, common assessment tools, and outcomes shared across service systems can promote accountability and effectiveness of prevention efforts. A Strategic Prevention Framework can facilitate Federal agencies, States, and communities to identify common needs and risk factors, adopt assessment tools to measure and track results, and target outcomes to be achieved. A data-driven strategic approach, adopted across service systems at the Federal, State, community, and service delivery levels, maximizes the chances of future success and achieving positive outcomes.

**Appendix C: Qualitative Public Opinion Survey (January 31 – March 31, 2006)**

***Imagine a Portland where young people grow up healthy, safe and free from alcohol, tobacco, and other drugs ...What do you see?***

1. Are you a youth or an adult?       Youth                       Adult

Think about your Portland neighborhood: the community where you live, work, or go to school. What are the top 3 things that are helping to keep youth healthy, safe and free from alcohol, tobacco, and other drugs?

1:

2:

3:

Think about the teens and pre-teens who live here. What are the top 3 issues that Portland youth are dealing with when it comes to alcohol, tobacco, and other drugs?

1:

2:

3:

What do you think it would take to solve these issues? (Use back of paper if needed)

1:

2:

3:

What are the some things that might get in the way of making it happen?

1:

2:

3:

If you could change one thing in your neighborhood or community to make it safer and better for youth, what would it be? (Use back of paper if needed)

*This project is a joint effort between the Portland CMCA Coalition (Communities Mobilizing for Change on Alcohol) and the OMOP Coalition (One Maine One Portland). All youth, adults, and organizations in Portland are invited to join our efforts. That includes you! If you are interested, please write your information below or contact us at 773-7737 or [cmca@mcd.org](mailto:cmca@mcd.org).*

✂-----

*Yes! I am interested in helping to make Portland safer and better for youth! (please print clearly)*

Name: \_\_\_\_\_

Contact information: \_\_\_\_\_

Phone

Email

Address \_\_\_\_\_

## Appendix D: Portland Prevention Survey Invited Participant List & Methodology

Portland Communities Mobilizing for Change on Alcohol & One Maine One Portland 2006 Youth & Substance Abuse Prevention Survey Outreach List & Methodology	
75 State Street	Peak's Island Neighborhood Association
100 State Street	People's Free Space
Alcohol Retailers	People's Regional Opportunity Program
AME Zion Church	Portland High chapter of Students Against Drunk Driving
Back Cove Neighborhood Association	Portland Housing Authority
Bar Owners Association/Downtown District	Portland Partnerships
Bayside Neighborhood Association	Portland Police Department Tactical Enforcement Unit
Blunt Radio	Portland Press Herald
CAP Quality Care	Portland Public Schools
Co-occurring Collaborative of Southern Maine	Portland Rotary
Centro Latino	Portland West Community Center
Chamber of Commerce	PPS Multicultural Department
Children's Center in Portland	PPS Social Workers meeting
City Council Members	Preble Street Homeless Shelter
City Hall	PROP Peer Leaders Program
City Manager	PROP/Spiral Art's Parkside Arts Program
City Mayor	PROP's Foster Grandparent Program
City Staff	Public Health Department Minority Health Program Staff
Clark Memorial United Methodist Church	Reconnecting Youth
Community Policing	Riverton Neighborhood Association
Council of Churches in Portland	Sacred Heart Church
Cultivating Communities	School Committee
Day One Transitional Housing	School-Based Health Centers
Deering Center Neighborhood Association	Senator Collins
District Attorney's Office	Senator Snow
District Nurses Meeting	Southern Maine Association on Aging
East Deering Neighborhood Association	St. Luke's Cathedral
Greater Portland Neighborhood Coalition	St. Patrick's
Guiding Good Choices (Lincoln Middle School)	Stroudwater Neighborhood Association
Healthy Portland	Sudanese-Acholi Focus Group
Healthy School Food Parent Group	Sudanese-Arabic Focus Group
Jewish Community Alliance	Sudanese-Nuer Focus Group
Juvenile Community Corrections Officers, Maine Dept of Corrections	The Atrium
Latino Focus Group	TREK (Tobacco Resistance Education Kits)
Libbytown Neighborhood Association	United Way
Maine People's Alliance	University Neighborhood Org.
Maine Youth Action Network	University of Southern Maine
Munjoy Hill Neighborhood Association	West End Neighborhood Association
Nason's Corner Neighborhood Association	Western Promenade Neighborhood Association
Needle Exchange	Woodfords-Oakdale Neighborhood Association
North Deering Neighborhood Association	YMCA
Outright	Youth Alternatives
Overdose Prevention Project	Youth Build
Parkside Neighborhood Association	Youth Task Force
Parkside Neighborhood Center	Youthink
Respondents: Youth: 270 (38%), Adult 435 (62%) = 705 Total	If response was illegible, it was placed in No Answer If response contained > one answer, first one was used



## Appendix E: Summary of Prevention Survey Results

<b>Portland CMCA &amp; OMOP 2006 Youth &amp; Substance Abuse Prevention Survey Top 10 Responses</b>					
<b>1. Youth or Adult?</b>					
<input type="checkbox"/> Youth	270	38.3%			
<input type="checkbox"/> Adult	435	61.7%	Total Responses: 705		
<b>2. What are the top 3 things that are helping to keep youth healthy, safe and free from alcohol, tobacco, and other drugs?</b>					
Alternative activities	458	27.6%			
Family/parent involvement	344	20.8%			
Positive peer influence/friends	121	7.3%			
School	116	7.0%			
Law enforcement/police presence	112	6.8%			
Education/awareness	102	6.2%			
Caring adults	100	6.0%			
Personal decision/commitment	94	5.7%			
Positive environment	64	3.9%			
Religion/church groups	30	1.8%			
<b>5. What are the some things that might get in the way of making it happen?</b>					
		Lack of adult involvement/community involvement		279	24%
		Lack of resources		240	21%
		Attitude amongst teens		120	10%
		Lack of parent involvement/family support		106	9%
		Current government system		57	5%
		Lack of law enforcement/limited police involvement		45	4%
		Current economic system		41	4%
		Availability/access		31	3%
		Negative environment		29	2%
		Lack of time		24	2%
<b>3. What are the top 3 issues that Portland youth are dealing with when it comes to alcohol, tobacco, and other drugs?</b>					
Peer influence	479	31%			
Availability/exposure/access	195	13%			
Personal reasons for using	140	9%			
Impacts of substance abuse	132	9%			
Lack of alternative activities, boredom	127	8%			
Lack of parent involvement	99	6%			
Parents or family members that use/poor role models	76	5%			
Lack of education/ knowledge	45	3%			
Alcohol	44	3%			
Cigarettes	38	2%			
<b>6. If you could change one thing in your neighborhood or community to make it safer and better for youth, what would it be?</b>					
		Community activities/centers		220	39%
		Change environmental conditions		78	14%
		Change attitudes amongst adults/community involvement		44	8%
		Law enforcement/police presence		43	8%
		Better educational programs/awareness		25	4%
		Don't change anything		23	4%
		More parent/family involvement		20	4%
		Role Models/Volunteering/ Mentoring		16	3%
		Youth engagement/ empowerment programs		14	2%
		Limit availability		13	2%
<b>4. What do you think it would take to solve these issues?</b>					
Alternative activities/prevention programs	273	20%			
Education/awareness	210	15%			
Parent involvement	145	10%			
Strengthen/review policy	81	6%			
Community-level engagement/commitment	80	6%			
Law enforcement/police presence	73	5%			
Caring adults/leaders/role models/mentors	70	5%			
Services/support for youth with higher risk	56	4%			
Personal decision/commitment	56	4%			
Parent education/support	53	4%			

## Appendix F: Portland Parent Survey (February 2006)

# Frequencies for each question

### AGGREGATE

PCT (NUM)  
=====

**QUESTION #1. [C1] Do you, or does anyone in your immediate family, work a market research, advertising, or media firm?**

(N= 380)

YES (Terminate)	0.000	( 0)
NO (Continue)	100.000	(380)

**QUESTION #2. [C2] For the purposes of this survey, we are interested in speaking with parents who have a child who is in 8th to 12th grade in Portland. Do you have a child or children in any of these grades living in your household?**

(N= 380)

YES (Continue)	100.000	(380)
NO (Terminate)	0.000	( 0)

**QUESTION #3. [1A] What is the AGE of this child?**

(N= 380)

12 years old	2.368	( 9)
13 years old	10.000	( 38)
14 years old	22.632	( 86)
15 years old	19.474	( 74)
16 years old	22.895	( 87)
17 years old	12.105	( 46)
18 years old	8.684	( 33)
19 years old	1.842	( 7)

**QUESTION #4. [1B] What GRADE does this child attend (must be in Grade 8 through 12)?**

(N= 380)

8th Grade	32.895	(125)
9th Grade	16.053	( 61)
10th Grade	21.316	( 81)
11th Grade	13.947	( 53)
12th Grade	15.263	( 58)
Not in school	0.526	( 2)

**QUESTION #5. [1C] What is the GENDER of this child?**

(N= 380)

Male	41.579	(158)
Female	58.421	(222)

**QUESTION #6. [2] What actions, if any, do you regularly take to prevent your child from drinking alcohol?**

(N= 380) (some gave more than one answer)

Talk to my child about the dangers	38.421	(146)
Call to see if parents will be a party	23.684	( 90)
Ask if alcohol is going to be at a party	27.895	(106)
Not allow to attend event with alcohol	18.421	( 70)
Count bottles of alcohol in the home	2.895	( 11)
Mark bottles of alcohol in the home	2.895	( 11)
Lock liquor cabinet, make inaccessible	6.316	( 24)
Ask neighbors to check when parents away	1.842	( 7)
Do not leave child home alone overnight	12.895	( 49)
Other (see list)	20.263	( 77)
Don't know	20.000	( 76)
None	3.158	( 12)

**AGGREGATE**

**PCT**                    **(NUM)**  
**=====**                    **=====**

**QUESTION #7. [2] OTHER responses to Question #6 [2] - 77 TOTAL (some gave more than one answer)**

Keep track of him/her	4.211	( 16)
Set high expectations/Set rules	3.947	( 15)
He/she is out of my control	2.895	( 11)
Talk with/educate	2.368	( 9)
We keep/drink no alcohol at home	1.316	( 5)
Various	5.526	( 21)

**QUESTION #8. [3] Which of the following two statements most closely reflects your point of view on teenage drinking?**

(N= 380)

Inevitable that teens will try alcohol	40.526	(154)
I have ability to influence choices	39.474	(150)
Don't know	20.000	( 76)

**QUESTION #9. [4] Is it ever okay for your teen to drink alcohol?**

(N= 380)

YES (skip to Q12)	26.842	(102)
NO (continue with Q10)	73.158	(278)

**QUESTION #10. [4a] What are your primary reasons why you don't want your teen to drink alcohol?**

(N= 278)

It's illegal/teen might get in trouble	57.554	(160)
Teen might drink to excess/is addictive	7.194	( 20)
Your teen might drink and drive	31.655	( 88)
Your teen's brain development affected	0.719	( 2)
Unwanted or unprotected sexual behavior	11.151	( 31)
Could lead to depression or suicide	0.719	( 2)
Could lose a scholarship or opportunity	5.396	( 15)
Your teen's grades might slip	3.957	( 11)
Your teen might move on to other drugs	11.151	( 31)
Your teen is too young to drink	32.374	( 90)
Teen has family history of alcoholism	3.597	( 10)
Other (see list)	7.194	( 20)
Don't know	5.396	( 15)

**QUESTION #11. [4a] OTHER responses to Question #10 [4a] - 20 TOTAL**

Grow up too fast/Poor choices/Illegal	2.518	( 7)
Driving/Drunk driving	1.079	( 3)
Religious reasons	0.719	( 2)
Other	2.878	( 8)

**QUESTION #12. [5] Under what circumstances do you allow your teen to drink alcohol? ?**

(N= 102)

A very special family occasion, wedding	41.176	( 42)
A less formal family occasion, dinner	18.627	( 19)
On the weekend at your house	16.667	( 17)
On the weekend at someone else's house	4.902	( 5)
Weekend at someone else's house,QUALIFIED	29.412	( 30)
Any location or occasion	0.000	( 0)
Any location or occasion, QUALIFIED	20.588	( 21)
Other (see list)	12.745	( 13)
Don't know	14.706	( 15)

**AGGREGATE**

**PCT**                      **(NUM)**  
 =====                      =====

**QUESTION #13. [5] OTHER responses from Question #12 [5] - 13 TOTAL**

We allow it/tolerate it	8.823	( 9)
We can't/won't control it anyway	2.941	( 3)
Old enough to fight, old enough to drink	0.980	( 1)

**QUESTION #14. [6] Are there any circumstances under which you would allow your teen's friends to drink in your home?**

(N= 380)

YES (continue with Q15 & Q16)	14.737	( 56)
NO (skip to Q16)	72.105	(274)
Don't know (ask Q15 & Q16)	13.158	( 50)

**QUESTION #15. [6a] Under what circumstances would you allow your teen's friends to drink in your home?**

(N= 106)

At my home/where I can supervise	24.528	( 26)
Not driving/I have the keys	15.094	( 16)
At a celebration/event/gathering	6.604	( 7)
Only with other parent's permission	2.830	( 3)
Other answer	8.491	( 9)
Don't know/Unsure	42.453	( 45)

**QUESTION #16. [6b] What are your primary reasons for NOT allowing your teen's friends to drink in your home?**

(N= 380)

Its illegal	23.158	( 88)
Various answers	16.053	( 61)
He/she is too young	12.895	( 49)
Its wrong/I disapprove/not appropriate	11.842	( 45)
Sets a bad example/sends wrong message	6.842	( 26)
Won't take the responsibility	3.947	( 15)
As a parent, I could get into trouble	1.316	( 5)
Don't know/Unsure	17.105	( 65)
No answer	10.000	( 38)

**QUESTION #17. [7a] I sometimes feel helpless when it comes to preventing my teen from drinking alcohol.**

(N= 380)

DISAGREE Strongly	21.579	( 82)
DISAGREE Somewhat	11.579	( 44)
AGREE Somewhat	31.579	(120)
AGREE Strongly	19.737	( 75)
Don't Know/Unsure	15.526	( 59)
DISAGREE	33.158	(126)
AGREE	51.316	(195)
Undecided	15.526	( 59)

**QUESTION #18. [7b] I feel that it is very important for parents to try everything possible to prevent their teens from drinking alcohol.**

(N= 380)

DISAGREE Strongly	5.000	( 19)
DISAGREE Somewhat	6.316	( 24)
AGREE Somewhat	31.842	(121)
AGREE Strongly	50.526	(192)
Don't Know/Unsure	6.316	( 24)
DISAGREE	11.316	( 43)
AGREE	82.368	(313)
Undecided	6.316	( 24)

**AGGREGATE**

**PCT                    (NUM)**  
**=====                =====**

**QUESTION #19. [7c] Most people who drink turn out OK. My teen will be OK if he/she tries it too.**

(N= 380)

DISAGREE Strongly	8.421	( 32)
DISAGREE Somewhat	12.895	( 49)
AGREE Somewhat	41.842	(159)
AGREE Strongly	7.632	( 29)
Don't Know/Unsure	29.211	(111)
DISAGREE	21.316	( 81)
AGREE	49.474	(188)
Undecided	29.211	(111)

**QUESTION #20. [7d] My job isn't to prevent them from drinking. Rather it's to teach them to drink responsibly.**

(N= 380)

DISAGREE Strongly	23.421	( 89)
DISAGREE Somewhat	8.684	( 33)
AGREE Somewhat	31.053	(118)
AGREE Strongly	11.842	( 45)
Don't Know/Unsure	25.000	( 95)
DISAGREE	32.105	(122)
AGREE	42.895	(163)
Undecided	25.000	( 95)

**QUESTION #21. [8] Have you seen or heard any local television or radio advertising this year regarding teenage drinking in Portland?**

(N= 380)

YES (continue with Q22)	3.684	( 14)
NO (skip to Q24)	96.316	(366)

**QUESTION #22. [8a] (If you saw a TV ad) What was the core message of the advertisement?**

(N= 14)

Drinking and driving	42.857	( 6)
Addiction/abuse/danger	50.000	( 7)
Don't remember	7.143	( 1)

**QUESTION #23. [8a] What specific actions, if any, have you taken or will you take as a result of this advertising?**

(N= 14)

Nothing else	57.143	( 8)
Don't know	21.419	( 3)
Various answers	21.419	( 3)

**QUESTION #24. [10] What agencies, organizations, or coalitions are you aware of in Portland that deal with underage drinking and related issues?**

(N= 380)

Mothers Against Drunk Driving (MADD)	25.789	( 98)
Super Coalition	1.842	( 7)
Faces and Voices	1.579	( 6)
Church programs	0.789	( 3)
DARE	0.789	( 3)
ADAPT	0.789	( 3)
Alcoholics Anonymous (AA, Al-Anon)	0.526	( 2)
Maine Parent's Coalition	0.526	( 2)
Girl Scouts	0.526	( 2)
School programs	0.526	( 2)
Various others mentioned once	2.105	( 8)
Don't know/Know of none	55.263	(210)
No Answer	8.947	( 34)

**QUESTION #25. Into which of the following categories does your age fall?**

(N= 380)

18-24	0.263	( 1)
25-34	21.579	( 82)
35-44	50.263	(191)
45-54	22.368	( 85)
55-64	3.684	( 14)
65 or older	0.263	( 1)

Refused 1.579 ( 6)

**QUESTION #26. What is the highest grade of education you have completed?**

(N= 380)

Less than high school graduate	0.263	( 1)
High school graduate	44.737	(170)
Vocational/Trade school	10.526	( 40)
Some college/Two year college graduate	17.895	( 68)
Four year college graduate	17.368	( 66)
Post-graduate work	5.000	( 19)
Refused	4.211	( 16)

**QUESTION #27. For tabulation purposes only, please tell me which of the following income categories includes your total household income in 2005 before taxes? Just stop me when I read the correct category:**

(N= 380)

Less than \$15,000	1.579	( 6)
\$15,000 to \$24,999	14.737	( 56)
\$25,000 to \$34,999	24.474	( 93)
\$35,000 to \$44,999	9.211	( 35)
\$45,000 to \$54,999	5.526	( 21)
\$55,000 or \$64,999	3.947	( 15)
\$65,000 or more	11.579	( 44)
Refused	28.947	(110)

**QUESTION #28. Call duration statistics for 380 interviews:**

Number of completed interviews: 380

Maximum completion time: 14 minutes

Minimum completion time: 1.50 minutes

Average completion time: 4.14 minutes

Median completion time: 4 minutes

Standard Deviation: 1.60 minutes

SAMPLE STATISTICS: ±5.03% at the 95% confidence level

## **Appendix G: Results and Future Strategies Community Public Action Forum**

**April 26, 2006**  
**Community Public Action Forum**  
***“What Can We Do?”***  
**Top 5 from Each Theme**

### **Community/Environment**

1. **“Move location of alcohol in stores AWAY/in a separate section of the store”**
2. “Stop alcohol sponsorship of local sports teams & family events”
3. “Change public mindset about alcohol & underage drinking”
4. “Increase communication & positive relationships between law enforcement & parents/community”
5. “Increase consistency of enforcement & police ownership/involvement in solution”

### **Parent Involvement/Monitoring**

1. **“Create opportunities for teens/parents to do things together”**
2. “A positive, multilingual, multi-approach parent education on communication, brain development & discipline”
3. “Increase a parent network” “Parent support groups/network”
4. “Education of specific skills/Positive approach”
5. “Increase law enforcement/parent network”

### **Individual/Peer**

1. **“Expand program/prevention activities to include daytime, weekend & evening times (not just after school) to engage broadest membership/participation”**
2. “Shake up the cultural norms/community expectations about who is responsible for youth success...it takes a village”
3. “Help people/youth get to core issue of why they use/the process doesn’t just address behavior but the root cause”
4. “Focus on engagement of all youth, all adults, community in programs/alternative activities”
5. “Actively exercise our positive influence over/with youth rather than withdrawing own support”

## **Appendix H: List of Model Programs Currently in Use in Portland**

**Across Ages** A school- and community-based drug prevention program of the People's Regional Opportunity Program (PROP) for youth 9 to 13 years, that seeks to strengthen the bonds between adults and youth and provide opportunities for positive community involvement. The unique and highly effective feature is the pairing of older adult mentors (age 55 and above) with young adolescents, specifically youth making the transition to middle school. The program employs mentoring, community service, social competence training, and family activities to build youths' sense of personal responsibility for self and community.

**Communities Mobilizing for Change on Alcohol** A community-organizing program, housed at Medical Care Development, is designed to reduce young adults' access to alcohol by changing community policies and practices. Initiated in 1991, CMCA has proven that effectively limiting the access to alcohol to people under the legal drinking age not only directly reduces teen drinking, but also communicates a clear message to the community that underage drinking is inappropriate and unacceptable.

**Guiding Good Choices** A drug prevention program housed at the City of Portland Public Health Department that seeks to give parents the skills they need to help reduce their children's risk for using alcohol and other drugs. The goal of the Guiding Good Choices program is to prevent substance abuse among teens by teaching parents effective family management and communication skills before their children enter adolescence.

**Leadership and Resiliency Program** A program of the People's Regional Opportunity Program (PROP) that strives to support high school students who are identified as having exposure to high risk factors by addressing their behaviors and attitudes that originate from family or community influences.

**Project Toward No Drug Abuse** An interactive school-based program designed to help high school youth, 14 to 19 years of age, resist substance use. It teaches participants increased coping and self-control skills by making them aware of misleading information that facilitates drug use. The program motivates them not to use drugs; to develop skills that help them bond to lower-risk environments; to appreciate the physical consequences that drug use may have on their own lives; to become aware of cessation strategies; and to develop decisionmaking skills to make a commitment to not use drugs.

**Reconnecting Youth** A school-based program for youth in grades 9 to 12 (14 to 18 years of age) at risk for school dropout and exhibit multiple behavior problems. It uses a partnership model involving peers, school personnel, and parents to deliver interventions that address decreased drug involvement, increased school performance, and decreased emotional distress.

**Second Step Program** A classroom-based social skills program for preschool through junior high students (4 to 14 years old). It is designed to reduce impulsive, high-risk, and aggressive behaviors and increase children's social-emotional competence and other protective factors. Group discussion, modeling, coaching, and practice are used to increase students' social competence, risk assessment, decision making ability, self-regulation, and positive goal-setting.



## **Appendix I: Portland Public Spaces**

### **City of Portland Community Centers**

- Adams Before/After Care
- Hall Before/After Care
- Longfellow Before/After Care
- Peaks Island Community Center
- Presumpscot Before/After Care
- Riverton Community Center
- Clifford Before/After Care
- Harry E. Cummings Center
- Lyseth Before/After Care
- Peaks Island Before/After Care
- Reiche Community Center

### **Other Centers**

- Parkside Neighborhood Center
- St. Lawrence Arts and Community Center

### **Portland Playgrounds**

- Adams School on Moody Street
- Bayside on Fox Street and Clark Street
- Clifford School
- Dougherty Field on Douglass Street
- Hall School
- Longfellow School
- McIntyre on Taylor Street
- Nathan Clifford,
- Peaks Island School
- Pleasant Street
- Reiche School
- Tate/Tyng Streets
- Baxter School on Ocean Avenue
- Cliff Island
- Deering Oaks
- Great Diamond Island
- Jack School
- Lyseth School on Auburn Street
- Munjoy South
- Payson Park
- Peppermint Park on Smith Street
- Presumpscot School
- Riverton School
- Wills on the Eastern Prom

### **Portland Public Parks**

- Back Cove Trail
- East End Beach
- Eastern Prom Trail
- Western Promenade
- Deering Oaks Park
- Eastern Promenade
- Fessenden Park
- 

### **Swimming Pools**

- Douglass Pool
- Riverton Pool
- YWCA
- Reiche Pool
- YMCA
-

## **Appendix J: Youth Serving Programs & Activities**

**A Company of Girls** An after-school collaborative theater arts program that works with approximately 40 adolescent girls from ethnically and culturally diverse backgrounds to increase their critical life and social skills, enhance their communication skills and build stronger self-image and self-worth.

**Alliance for Transportation Bike Shop Program** Uses the bicycle and bicycling to teach children from low-income families personal responsibility and respect for property and connects them with other youth cyclists.

**AmeriCorps** A federally funded program that offers 10-month service positions with nonprofit agencies in exchange for a small stipend and education award.

### **Big Brothers Big Sisters of Southern Maine Mentor Program**

Works with children ages 6 - 17, primarily through supported one-to-one relationships with caring adults who assist them as they grow to become mature, responsible adults.

**Boy Scouts** Youth leadership program for boys.

**Boys & Girls Club of Portland** Activities for ages 6-18 years-old including computer club, arts & culture club, reading club, cooking & Gardening, gym, pool, and games.

**The Center for Cultural Exchange** Offering a variety of after-school activities.

**The Center for Grieving Children** Committed to providing loving support to grieving children, teens, families and the community through peer support, outreach, and education.

### **The City of Portland**

- Parks & Recreation Creating and providing quality recreation, swimming and leisure experiences through people, parks, programs and services.
- Summer Children's Concert Series at Deering Oaks Park
- Youth Advisory Council Reports to the City Council and advocates for issues relevant to Portland youth.

**Community Counseling Center** Offering programs and services to youth with serious emotional and behavioral issues to empower youth to succeed in school, at home, at work, and in the community.

**Day One Prevention/Natural Helpers Program** Provides training and support to a network of trusted students within school settings so that they may help their peers through factual information and support.

**First Friday Artwalk** Free gallery, jewelry and other viewings at various locations in Portland.

**The Forum Skatepark** Includes an eight-foot half-pipe with a seven and eight foot walls.

**Girl Scouts** Youth leadership program for girls.

**Longfellow Books** Free story hours on Saturdays.

**Maine College of Art** Youth art classes and programming.

**MainelyKids.com and MaineToday.com** Both offer online youth-oriented events calendars

**National Association for the Advancement of Colored People (NAACP) Youth Council**  
Offers youth leadership development opportunities through events and meetings.

**Peak's Island Children's Workshop** Provides full-time and part-time year round care to children aged 3-6.

**People's Free Space** Offers a variety of multilevel programming for youth and adults.

**People's Regional Opportunity Program (PROP) PNC**

- Child and Family Services Provides nurturing care, developmentally appropriate educational activities, and a full meal program to preschool and school-aged children from families with low-income in 17 centers throughout Cumberland County.
- The Parkside Neighborhood Center Offers a variety of multilevel programming for youth and adults.
- Peer Leader/Youth Resiliency Program Promotes positive role modeling among at-risk youth to combat the cycle of poverty and the influence of substance abuse, adolescent pregnancy, and school dropout.

**Portland Children's Museum** Features a wide variety of interactive exhibits and activities for children and families.

**Portland Museum of Art**

- Artrek Every summer the Museum offers art camp for more than 300 children ages six through 15. Grouped by age, consecutive classes of 20 children each run for five week-long sessions in the summer. (An abridged, drop-in version of Artrek called Boredom Busters is also held during school vacation weeks in February and April.) Artrek brings children to the Museum to view works in the galleries and to make art with local and visiting artists and teachers based on what they see and learn in the galleries. Their work is then displayed in the Museum in a mini-exhibition for their friends and families to view.
- Community Studio Hosts one-day workshops, drop-in hours, after-school programs and multi-week courses for children and adults in a well-equipped, vibrant setting designed to nurture creativity.
- Family Festivals School vacation weeks are programmed with activities and gallery games that let families learn together and see our exhibitions and collections in new ways. The Tuesday morning Art Squad Jr. lets parents and our youngest visitors see the Museum together before making their own masterwork in our community studio.
- Field Trip Activities Extends traditional school tours with a post-tour artmaking program. to allow children to express their responses to the exhibitions while the inspiration is still recent and clear.
- You Artists' Studio In collaboration with local organizations including the YMCA and PROP, each session begins with a gallery visit, followed by art making in the Community Studio. At the close of the six-to-eight week sessions, the children's artwork is exhibited in the Museum

with an opening celebration to bring parents and families into the Museum.

**Portland Pirates Youth Hockey** Offers youth hockey programming for ages 5-15.

**Portland Public Library** Offers programming, after-school homework help, story hours and more.

**Portland Public School Programs** Offer a variety of after-school and team-sport activities to school attendees.

**Portland Sea Dogs** Offers free baseball tickets to children age 5 and under and occasional free tickets for older children for various events.

**Portland West** Offers a variety of multilevel programming for youth and adults.

**Preble Street Teen Center** A drop-in program for homeless, runaway and at-risk adolescents that provides meals, drop-in center, employment services, casework and advocacy.

**RippleEffect** Promoting youth development through learning adventures in living classrooms.

**The Root Cellar** Various activities and homework help available for youth ages 6 and higher and those living on Munjoy Hill and Kennedy Park.

**Students Teaching Other People (STOP Troupe)** Brings middle and high school students, police officers, and other community members to provide education on issues such as under age drinking, bullying, diversity, peer pressure and decision-making.

**Summer Champs** A collaborative project between the Libra Foundation and United Way of Greater Portland to provides \$1000 in scholarships for students in grades 3-6 in the Portland Public Schools to attend up to three Maine summer camps of their choice.

**University of Maine Cooperative Extension 4H** A youth organization providing activities designed to develop leadership skills by participating in community service projects and a variety of classes.

#### **University of Southern Maine**

- Blunt Youth Radio Project Youth receive training free of charge as they learn to produce a weekly, public affairs radio show on WMPG-FM, the community radio station of the University of Southern Maine.
- Maine Legislative Youth Advisory Council Through the Muskie School of Public Service, the program offers high school students the opportunity to organize an annual Seminar in August regarding leadership, government and the Maine Legislature for youth council members and legislators, six meetings annually of Youth Legislative Council, and two statewide public hearings on youth issues.
- Southworth Planetarium Star shows
- Summer Youth Program For aspiring thespians, musicians, and choral singers.

- USM/Bank of America Youth Ensembles Portland Youth Wind Ensemble, Portland Youth Symphony Orchestra and Chorale, Portland Youth Junior Orchestra and Portland Young People's String Consort.

### **YMCA**

- Youth, Teens and Family Program Provides learning activities to school-age children including open gym, homework help, art studio, mentoring, weight lifting, swimming, community service and sports.
- Youth-at-Promise A weekly after-school group for 4<sup>th</sup> and 5<sup>th</sup> graders offering team building, service projects, non-competitive games, hiking, swimming, arts and crafts and includes a week-long residential summer camping experience, an adventure-based counseling approach.

### **YWCA**

- Street Program A licensed mental health treatment project that provides counseling and education to male and female adolescents in collaboration with Preble Street Resource Center and providing educational programming through the Street Academy.
- Northern Chi for Adults & Kids Martial arts training, including fitness, health, personal development, stress management, self confidence and self defense.
- Tumble Kidz Challenges small to school-age children with all aspects of athletics (balance, eye-hand coordination, flexibility, strength and ball, etc.) with a special emphasis on gymnastics to develop self confidence while fostering body awareness, good body management and physical, mental and emotional fitness.

**Yes! To Youth** Basketball programming for grades 4-12.

**Youth Alternatives Substance Abuse Program** Provides outpatient substance abuse treatment for youth and families, including individual, group and co-occurring disorders treatment.

**Youth and Family Outreach Teen Adventure Program** Provides outdoor, experiential challenge activities to teach independent living skills for homeless and at-risk adolescents ages 12-15.

**Youth News & Entertainment Television (YNETV)** is a youth driven television Production Company. YNETV is recognized as one of the leading producers of youth programs created by youth for youth in the United States.

**Youthink** A social change grantmaking and civic action youth board through Kids Consortium.

## Appendix K: Programs for Parents

Service Name	Description	Location	Program	Agency
<a href="#">22 Park Avenue</a>	Transitional program for up to two years, access to community integration services, support groups, educational resources, vocational resources, independent living and life skills programming, parenting groups, substance awareness and relapse prevent ...	Cumberland County	<a href="#">YWCA Greater Portland</a>	<a href="#">YWCA Greater Portland</a>
<a href="#">ABBA. A Women's Resource Center</a>	Immediate result pregnancy tests, support groups, parenting skill classes, maternity/baby clothing and supplies, post-abortion counseling, healthy relationships counseling, peer, group, and individual counseling.	Cumberland County	<a href="#">ABBA. A Women's Resource Center</a>	<a href="#">ABBA. A Women's Resource Center</a>
<a href="#">Adult Children of Alcoholics Support Group</a>	Support group to help adult children of alcoholic parents.	Cumberland County	<a href="#">Southern Maine Adult Children of Alcoholics</a>	<a href="#">Southern Maine Adult Children of Alcoholics</a>
<a href="#">Adult Children of Alcoholics (Women) Support Group</a>	Support group to help adult children of alcoholic parents.	Cumberland County	<a href="#">Southern Maine Adult Children of Alcoholics</a>	<a href="#">Southern Maine Adult Children of Alcoholics</a>
<a href="#">Alateen</a>	Support and information for children of alcoholics; Mon meeting.	Cumberland County	<a href="#">Al-Anon (Maine)</a>	<a href="#">Al-Anon (Maine)</a>
<a href="#">Ballard House</a>	Birth center, nurse and midwife care, lending library, classes and seminars on pregnancy, birth, and parenting.	Cumberland County	<a href="#">Ballard House</a>	<a href="#">Ballard House</a>
<a href="#">Big Brothers Big Sisters of Southern Maine</a>	Positive influence in the lives of young people focusing on prevention through professionally supported one-to-one relationships with volunteers.	Cumberland County	<a href="#">Big Brothers Big Sisters of Southern Maine</a>	<a href="#">Big Brothers Big Sisters of Southern Maine</a>
<a href="#">CareNet Of Mid-Coast Maine</a>	Pregnancy testing and options to those who are pregnant; community referrals and resources, medical care, adoption, pre-natal and parenting classes.	Cumberland County	<a href="#">CareNet Of Mid-Coast Maine</a>	<a href="#">CareNet Of Mid-Coast Maine</a>
<a href="#">Child Care Connections Child Care Resource Development Center</a>	Free child care referrals, consumer information/education on evaluating child care, resources on parenting issues, technical assistance and training for child care providers, subsidy/voucher programs.	Cumberland County	<a href="#">Child Care Connections</a>	<a href="#">Child Care Connections</a>
<a href="#">Child Care Resource Hotline</a>	Referral list, information on choosing quality child care, financial assistance, parenting seminars.	Cumberland County	<a href="#">Child Care Connections</a>	<a href="#">Child Care Connections</a>
<a href="#">Children's Advocacy Council</a>	Awareness building and professional training around child abuse and neglect prevention, advocate for child centered, family focused policies in government, parenting education that	Cumberland County	<a href="#">Advocacy and Prevention</a>	<a href="#">Youth Alternatives</a>

	ensures parents have access to the resources necessary to care for th ...			
<a href="#">Community-Based Program</a>	Professionally supported one-to-one relationships with volunteers focusing on prevention; youth take part in community based activities with their adult volunteer.	Cumberland County	<a href="#">Big Brothers Big Sisters of Southern Maine</a>	<a href="#">Big Brothers Big Sisters of Southern Maine</a>
<a href="#">Community Counseling Center</a>	Mental health and family services, behavioral health, counseling, education, and prevention services.	Cumberland County	<a href="#">Community Counseling Center</a>	<a href="#">Community Counseling Center</a>
<a href="#">Cumberland County Extension Office</a>	Sixteen offices (one for each county) throughout the state and access to a nationwide educational network as a part of the United States Department of Agriculture (USDA). Educational programs and publications in family life education (nutrition, foo ...	Cumberland County	<a href="#">University of Southern Maine</a>	<a href="#">University of Southern Maine</a>
<a href="#">Day One</a>	Adolescent substance abuse prevention, intervention, treatment, and aftercare.	Cumberland County	<a href="#">Day One</a>	<a href="#">Day One</a>
<a href="#">Deaf Counseling Services</a>	Outpatient mental health services, individual counseling, couples/marriage counseling, family counseling, group counseling, child and adult case management, direct communication with ASL fluent clinicians, Baby Sign classes, deaf Dialectical Behavior ...	Cumberland County	<a href="#">Community Counseling Center</a>	<a href="#">Community Counseling Center</a>
<a href="#">Education and Training</a>	Train youth serving professionals around issues of sexual health and adolescent development; direct outreach and education with teens in schools and community based settings; curriculum development; education and support for parents.	Cumberland County	<a href="#">Planned Parenthood of Northern New England</a>	<a href="#">Planned Parenthood of Northern New England</a>
<a href="#">Education for Living</a>	Community education, support groups, Baby Sign group, parenting education classes; provide opportunities to help participants better understand and anticipate the normal patterns and stresses of individual, family, and parent/child relationships thro ...	Cumberland County	<a href="#">Community Counseling Center</a>	<a href="#">Community Counseling Center</a>
<a href="#">Even Start Family Literacy</a>	English for Speakers of Other Languages (ESOL), early childhood education, parenting support, parent/child educational activities.	Cumberland County	<a href="#">Portland West</a>	<a href="#">Portland West</a>
<a href="#">Facts of Life Line</a>	Toll free, confidential, prerecorded sexual health information with 84 messages in English and Spanish; key messages in Somali, Arabic, Bosnian, Vietnamese, and French.	Cumberland County	<a href="#">Planned Parenthood of Northern New England</a>	<a href="#">Planned Parenthood of Northern New England</a>
<a href="#">Family Intervention Response and Support Team</a>	Intensive home and office based treatment services, Dialectical Behavioral Therapy (DBT) parenting program, parenting skills classes, children's adventure group, and children's social skills group.	Cumberland County	<a href="#">Community Counseling Center</a>	<a href="#">Community Counseling Center</a>

<a href="#">Family Mediation</a>	Mediation for any groups of people who impact children including but not limited to divorce conflict, parent-child conflict, neighborhood conflict, group conflict.	Cumberland County	<a href="#">Community and Prevention Services</a>	<a href="#">Youth Alternatives</a>
<a href="#">Family Outreach Services (Cumberland County)</a>	Intensive 13 week treatment program to build on family's strengths and resources to develop positive and effective parenting skills, improve communication techniques and more effective conflict resolution methods.	Cumberland County	<a href="#">Community and Prevention Services</a>	<a href="#">Youth Alternatives</a>
<a href="#">Family Preservation</a>	Family-centered, home-based counseling and support to prevent the need for out-of-home placements.	Cumberland County	<a href="#">Casey Family Services</a>	<a href="#">Casey Family Services</a>
<a href="#">Family Support Program</a>	In home assistance to help with issues related to discipline, emotional nurturing, housing, drug abuse, and physical and sexual abuse.	Cumberland County	<a href="#">Outpatient Services</a>	<a href="#">Day One</a>
<a href="#">Family Visitation Program</a>	Safe environment for family visits, ensuring that only authorized persons attend family visitation, supervise, observe, and assess the parent/child interaction during family visitation.	Cumberland County	<a href="#">Kidspeace of New England (South Portland)</a>	<a href="#">Kidspeace of New England</a>
<a href="#">Father's Support Group</a>	Support group focusing on issues regarding visitation rights, custody issues, parenting skills.	Cumberland County	<a href="#">Cumberland County YMCA</a>	<a href="#">Cumberland County YMCA</a>
<a href="#">Foster Grandparent Program</a>	Volunteers provide one-to-one guidance for children with learning disabilities, children requiring assistance in academic subjects, and children in need of individual attention, nurturing, and support.	Cumberland County	<a href="#">PROP Seniors</a>	<a href="#">PROP</a>
<a href="#">Greater Portland Mothers' and Dads' Support Group</a>	Children play in age-appropriate supervised rooms.	Cumberland County	<a href="#">Greater Portland Mothers' and Dads' Group</a>	<a href="#">Greater Portland Mothers' and Dads' Group</a>
<a href="#">Homeless Family Shelter</a>	Temporary, emergency housing; housing counselors assist in locating and retaining subsidized, transitional and permanent housing; support services include assistance locating affordable permanent housing, life skills training, parenting education, inf ...	Cumberland County	<a href="#">Health and Human Services Department, Social Services Division</a>	<a href="#">City of Portland</a>
<a href="#">KidsCulture 1st Saturday Playshops</a>	Interactive cultural immersion workshops for parents and children in world music and dance, storytelling, arts and crafts, cooking, and more taught by visiting guest artists.	Cumberland County	<a href="#">Youth and Education</a>	<a href="#">Center for Cultural Exchange</a>
<a href="#">Kids First Center</a>	Co-parenting classes, workshops, conferences, continuing education, lending library, referrals to lawyers and therapists, community outreach, domestic abuse support programs.	Cumberland County	<a href="#">Kids First Center</a>	<a href="#">Kids First Center</a>
<a href="#">Kids First</a>	Addresses issues specifically related to	Cumberland	<a href="#">Kids First Center</a>	<a href="#">Kids First</a>



<a href="#">Program for Women</a>	dealing effectively with emotional, physical, and verbal abuse, financial exploitation, harassment, and safety planning.	County		<a href="#">Center</a>
<a href="#">Maine Kids-Kin Support Group (Portland)</a>	Opportunity to meet grandparents, aunts, and uncles who are raising grandchildren, nieces and nephews or working towards that goal.	Cumberland County	<a href="#">Families and Children Together</a>	<a href="#">Families and Children Together</a>
<a href="#">Mainly Parents</a>	Parent education and support for prevention of substance and child abuse.	Cumberland County	<a href="#">Prevention and Intervention Services</a>	<a href="#">Day One</a>
<a href="#">MY CHOICE India Street Housing Program</a>	Project based section 8 housing; case management to assist with self-sufficiency in areas of parenting education, employment and life skills with a maximum two year stay; individual advocacy and social support.	Cumberland County	<a href="#">MY CHOICE</a>	<a href="#">MAPS (Maine Adoption Placement Service)</a>
<a href="#">MY CHOICE Residential Services</a>	Transitional housing, case management, housing advocacy, prenatal and parenting education and support, wellness and life skills training.	Cumberland County	<a href="#">MY CHOICE</a>	<a href="#">MAPS (Maine Adoption Placement Service)</a>
<a href="#">Next Step</a>	Four week session meets in small groups facilitated by mental health professionals to share experiences, setbacks, and successes.	Cumberland County	<a href="#">Kids First Center</a>	<a href="#">Kids First Center</a>
<a href="#">Northeast Occupational Exchange (Portland)</a>	Therapy, psychological evaluation, psychiatric consultation, in-home support, supported employment, after school program, parent training services, day treatment, dual diagnosis program, substance abuse counseling, violence prevention and treatment, ...	Cumberland County	<a href="#">Northeast Occupational Exchange</a>	<a href="#">Northeast Occupational Exchange</a>
<a href="#">Parent Effectiveness in Resolving Conflict with Teens</a>	6 week class 2 hours per week addresses the many changes and difficulties concerned parents face as their adolescents move through often turbulent teen years.	Cumberland County	<a href="#">Advocacy and Prevention</a>	<a href="#">Youth Alternatives</a>
<a href="#">Parents, Families and Friends of Lesbians and Gays</a>	Support, advocacy, education.		<a href="#">Parents, Families and Friends of Lesbians and Gays</a>	<a href="#">Parents, Families and Friends of Lesbians and Gays</a>
<a href="#">Parents, Families and Friends of Lesbians and Gays Support Group</a>	Promotes the health and well being of gay, lesbian, bisexual, and transgendered persons and their families and friends through support, education, advocacy - to end discrimination and secure equal civil rights.	Cumberland County	<a href="#">Parents, Families and Friends of Lesbians and Gays</a>	<a href="#">Parents, Families and Friends of Lesbians and Gays</a>
<a href="#">Parents Helping Parents Support Group</a>	Education/Support group for parents with mental health challenges. Topics include discipline, stress management, self-care for parents building self esteem, good mental health and family communication.	Cumberland County	<a href="#">Sweetser</a>	<a href="#">Sweetser</a>

<a href="#">Parents' Support Group</a>	Offer parents of children with substance abuse issues a forum to talk with each other and a trained therapist to explore possible solutions.	Cumberland County	<a href="#">Day One</a>	<a href="#">Day One</a>
<a href="#">PFLAG Portland</a>	Support, advocacy, education.	Cumberland County	<a href="#">Parents, Families and Friends of Lesbians and Gays</a>	<a href="#">Parents, Families and Friends of Lesbians and Gays</a>
<a href="#">PROP</a>	Assistance through child development programs, case management, temporary housing, food commodities, convertible and booster child safety seats.	Cumberland County	<a href="#">PROP</a>	<a href="#">PROP</a>
<a href="#">Public School Counseling</a>	Individual, family, and group counseling, parent support/training, crisis intervention and consultation, collaboration with school staff.	Cumberland County	<a href="#">Outpatient Services</a>	<a href="#">Spurwink</a>
<a href="#">Refugee and Immigrant Case Management</a>	Connect families to community supports, help families understand and work with the school system, advocacy, parenting and family support.	Cumberland County	<a href="#">Community Counseling Center</a>	<a href="#">Community Counseling Center</a>
<a href="#">School-Based Program</a>	School-based mentoring program provides positive influence in the lives of young people focusing on prevention through supervised one-to-one and group activities with volunteers.	Cumberland County	<a href="#">Big Brothers Big Sisters of Southern Maine</a>	<a href="#">Big Brothers Big Sisters of Southern Maine</a>
<a href="#">Separation, Divorce and Dads Support Group</a>	Safe environment where divorced or separated fathers can discuss difficult issues including coping with loss, understanding children's developing needs, and co-parenting concerns.	Cumberland County	<a href="#">Kids First Center</a>	<a href="#">Kids First Center</a>
<a href="#">Separation, Divorce and Moms Support Group</a>	For women experiencing the impact of divorce or separation on their families.	Cumberland County	<a href="#">Kids First Center</a>	<a href="#">Kids First Center</a>
<a href="#">Strong Families Support Group</a>	A support and education group for young parents with a child involved with the Department of Health and Human Services. Learn, discuss, and receive support concerning what has happened to you. This is a 10- week class.	Cumberland County	<a href="#">YWCA Greater Portland</a>	<a href="#">YWCA Greater Portland</a>
<a href="#">Supported Families Program</a>	Counseling, individualized treatment, in-home support staff, in-home treatment, and reunification.	Cumberland County	<a href="#">Kidspace of New England (South Portland)</a>	<a href="#">Kidspace of New England</a>
<a href="#">Survivors of a Completed Suicide of a Loved One Support group</a>	Support group for parents and/or other survivors of suicide victims; lending library available.	Cumberland County	<a href="#">Maine Medical Center</a>	<a href="#">Maine Medical Center</a>
<a href="#">Technical</a>	Assistance to schools on developing substance abuse policy and curricula; training in adolescent development,	Cumberland County	<a href="#">Prevention and Intervention Services</a>	<a href="#">Day One</a>

<a href="#">Assistance</a>	and signs and symptoms of substance abuse; testimonials by recovering teens; awareness programs for middle and high school students; parent ...			
<a href="#">The Parenting Place</a>	Prenatal and parenting education and support, case management, health care, mental health and substance abuse treatment services.	Cumberland County	<a href="#">YWCA Greater Portland</a>	<a href="#">YWCA Greater Portland</a>
<a href="#">Treatment Foster Care</a>	Specially trained foster parents provide children with treatment and support necessary to address their identified needs; ongoing intensive therapeutic support strives for a smooth transition to home, adoption or the best alternative placement; staff ...	Cumberland County	<a href="#">Residential Services</a>	<a href="#">Youth Alternatives</a>
<a href="#">Young Parent Program</a>	Support and education for women, children, and their families, case management, drop in meals, health care, mental health and substance abuse treatment, prenatal and parenting education and support, parenting and stages development classes, socialization ...	Cumberland County	<a href="#">YWCA Greater Portland</a>	<a href="#">YWCA Greater Portland</a>
<a href="#">Youth Alternatives</a>	Children's Advocacy Council, family intervention services, family mediation, family outreach services, healthy families partnership, homeless youth services, intensive supervision services, multidimensional treatment foster care, parenting education, ...	Cumberland County	<a href="#">Youth Alternatives</a>	<a href="#">Youth Alternatives</a>