

Written Testimony of Jennifer L. Husmann, Project Coordinator,
Iowa Alliance of Coalitions for Change (AC4C)

Before Senator Grassley, Drug Caucus Field Hearing

Fighting for Iowans: Examining Drug Control, Prevention, and Treatment Efforts

October 14, 2021, 10 a.m.

U.S. District Court, Northern District of Iowa
111 Seventh Avenue SE
Cedar Rapids, Iowa.

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Senator Grassley, thank you for the opportunity to testify before you today on behalf of the Iowa Alliance of Coalitions for Change (AC4C) and it's more than 30 county or community prevention coalitions, member prevention agencies, and state partners representing a wide variety of sectors across the state. AC4C's mission is unifying Iowans to reduce youth and adult substance misuse on a state and community level.

Thank you for your amazing leadership in being the main sponsor of both the Drug Free Community (DFC) Support Program and the CARA - Enhancement Grant to prevention coalitions.

I have had the privilege of being AC4C's project coordinator for the past 2 years, but I have been involved with AC4C since its inception in 2005, and been a part of its leadership for the past decade. I started working for the Area Substance Abuse Council in Jones County in 2004, working on a comprehensive effort to reduce underage drinking and other youth drug use, with my focus being the community response. I still work part of my time with the Jones County Safe and Healthy Youth Coalition. We finished our ten years of DFC funding in 2019 and are finishing the CARA funding in December. AC4C is in its 7th year of DFC funding, powerfully uniting its members to work together on statewide issues and also sharing successful local strategies with each other.

During this time I have seen firsthand the impact of community coalitions, especially those funded by the Office of National Drug Control Policy's Drug-Free Communities (DFC) program, in reducing population rates of youth substance use, in communities throughout the state. The coalitions, agencies and partners across Iowa that are a part of AC4C play an important role in helping Iowans prevent and reduce substance misuse. More emphasis and funding needs to be focused on stopping the pipeline to addiction by preventing substance misuse before it ever starts.

It is important to note that there is no one silver bullet in addressing youth substance use. Rather, this is a very complex issue requiring that multiple strategies be implemented simultaneously, throughout every sector of society that has a role in both causing the problem as well as in helping to ensure adequate solutions.

Prevention Coalitions and Substance Use Prevention

In order to effectively address substance abuse, prevention is key. Preventing or delaying the use of harmful and addictive substances, is the single most critical tool in stopping the pathway to addiction and overdose. Primary prevention, to stop substance use before it ever starts, is also the most cost-effective way to deal with the addiction issues facing our nation. Research shows that for each dollar invested in prevention, between \$2 and \$20 in treatment and other health costs can be saved.¹ Unfortunately, substance use prevention has historically been under resourced and

¹ Swisher, J.D., Scherer, J. and Yin, R.K. The Journal of Primary Prevention. "Cost-Benefit Estimates in Prevention Research." 25:2, October 2004.

underutilized in combatting drug issues, including the current opioid epidemic, with almost all of the emphasis and funding being directed towards downstream approaches that deal with the problem after it has already reached crisis proportions. DFC coalitions are a compelling example of how communities are working to target issues related to youth substance use, strengthening comprehensive local responses to prevent and address the issue.

The DFC program has been able to achieve significant reductions in youth substance misuse both nationally and in Iowa through the implementation of a comprehensive model for community change. This model helps communities identify the root causes of their substance use issues. It then takes them through a strategic process to plan, implement and evaluate data driven, multi-sector, coordinated responses to address their specific alcohol, nicotine and other drug problems. These local responses are specifically tailored to reduce access and availability of substances, raise awareness, change community norms and policies and, as a result, reduce population levels of substance misuse.

The DFC program has been instrumental in helping Iowa communities address substance use issues. DFC coalitions must have significant community-wide involvement to reduce youth substance use through twelve required sectors.

- Schools,
- Law enforcement,
- Youth,
- Parents,
- Business,
- Media,
- Youth serving organizations,
- Faith-based organizations,
- Health care providers,
- Civic and volunteer organizations,
- State, local or tribal agencies, and
- Other organizations involved in reducing substance use.

A national evaluation of the Drug-Free Communities (DFC) program, conducted by ICF International, found that DFC coalitions have achieved significant reductions in youth substance misuse across all substances that were targeted, including alcohol, tobacco, marijuana and prescription drug use.²

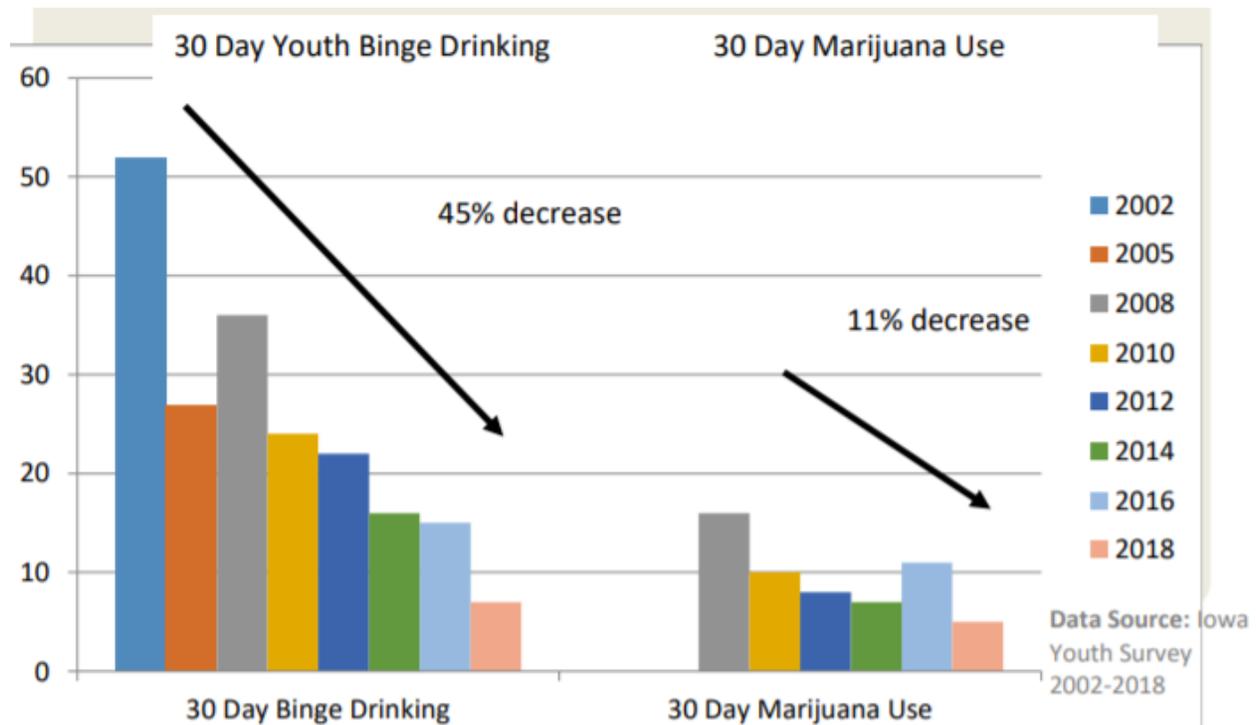
It is when all these sectors are working together on a unified community strategy that mobilizes efforts across both supply and demand reduction that major population level reductions in substance misuse are likely to occur.

² Office of National Drug Control Policy. (2019 June). Drug-Free Communities Support Program national evaluation: 2018 national evaluation end-of-year report.

The DFC program is structured to ensure effectiveness, outcomes and sustainability. It requires a community to demonstrate local commitment before becoming eligible to receive federal funds. This includes active participation from at least 12 sectors for a minimum of six months before a community can be eligible to apply. All grantees are also required to provide a dollar-for-dollar match (cash or in-kind) in non-federal funds, up to the maximum grant amount of \$125,000 per year. The required emphasis on local data collection, community buy-in and participation among multiple sectors is central to DFC coalitions' success.

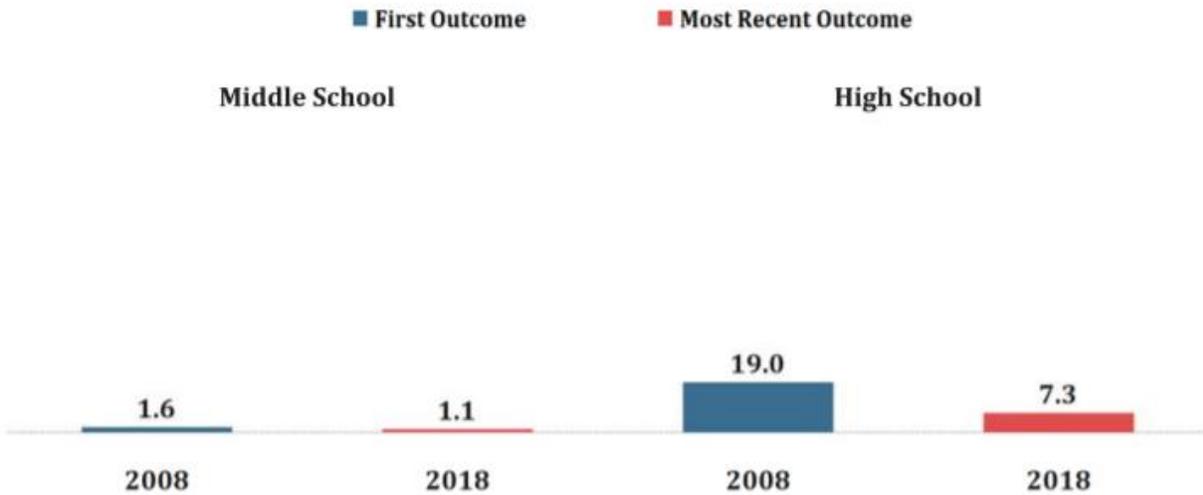
Three examples of successful coalitions in Iowa:

In response to tragedies, the Jones County school districts came together in 2004 to focus on underage drinking. At that time, the Iowa Youth Survey (IYS) data showed 52% of the county's 11th grade students reporting binge drinking in the past month. After implementing evidence-based programs and continuing community coalition work with the support of the DFC grant, by 2018, the number of 11th graders reporting binge drinking had decreased from 52% to 7%. In 2008, through the DFC program, the **Jones County Safe and Healthy Youth Coalition** expanded its focus beyond alcohol to include tobacco, marijuana and prescription drugs. Each of these drugs decreased over the 10 years of DFC funding. According to the IYS, marijuana use decreased from 16% to 5% for 11th grade youth. The DFC data from 2008 to 2018, shows 30 day use of tobacco decreased from 19% to 7.3%, and prescription drug misuse decreased from 6% to 3.3%. Jones County saw reductions also in all four drugs with the 6th and 8th graders as well.





Change in Past 30-Day Prevalence of Use by Grade Level: **Tobacco**

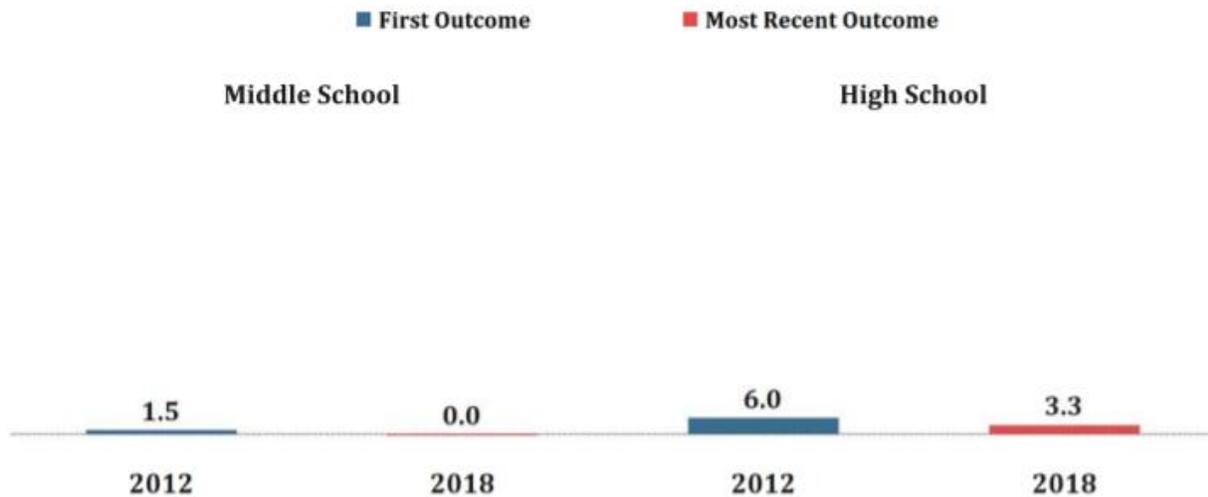


The percentage of middle school youth reporting past 30-day use of tobacco **Decreased** at a rate of **-31.3%** from **1.6%** in **2008** to **1.1%** in **2018**.

The percentage of high school youth reporting past 30-day use of tobacco **Decreased** at a rate of **-61.6%** from **19.0%** in **2008** to **7.3%** in **2018**.



Change in Past 30-Day Prevalence of Use by Grade Level: **Prescription Drugs**



The percentage of middle school youth reporting past 30-day use of prescription drugs **Decreased** at a rate of **-100%** from **1.5%** in **2012** to **0.0%** in **2018**.

The percentage of high school youth reporting past 30-day use of prescription drugs **Decreased** at a rate of **-45%** from **6.0%** in **2012** to **3.3%** in **2018**.

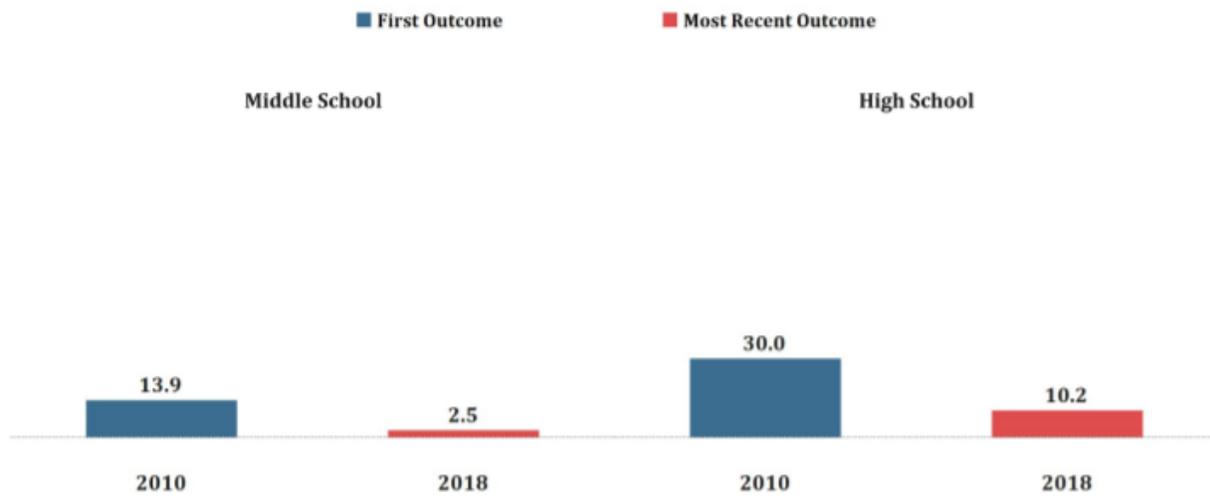
Jones County's coalition was the first and only coalition in Iowa to receive the first round of the CARA Enhancement grant, in 2018 at \$50,000/year for 3 years to focus on youth methamphetamine use and prescription drug misuse. Each coalition can choose to focus on youth methamphetamine or opioid use, as well as all must focus on prescription drug misuse prevention. Jones County implemented a wide variety of strategies to reduce youth methamphetamine use. Jones County is finishing the work on getting each of their local pharmacies to accept disposal of unused and unwanted controlled prescription drugs. They promoted Screening and Brief Intervention and Referral to Treatment through the local hospital and clinic, and they conducted two Safety Checkpoints educating drivers and deterring the transportation of drugs through our communities. They also sought out additional funding to pilot a drug diversion program in the county, referring lower level crimes to treatment rather than jails or prison.

Jones County is not alone with this tremendously successful data, I'd like to highlight two other Iowa coalitions who have also seen incredible decreases with these same four drugs used by

youth. The **Benton County “Above the Influence” Coalition** is just ending their 10 year cycle of DFC funding. They saw middle school and high school past 30 day use of alcohol decrease significantly. Highlighting their 11th grade DFC data, from 2010 to 2018, their underage drinking rates decreased from 30% to 10.2%, tobacco use declined from 23% to 6.8%, marijuana use went down from 10% to 5.1%, and prescription drug misuse decreased from 4% to 1.1%.



Change in Past 30-Day Prevalence of Use by Grade Level: **Alcohol**

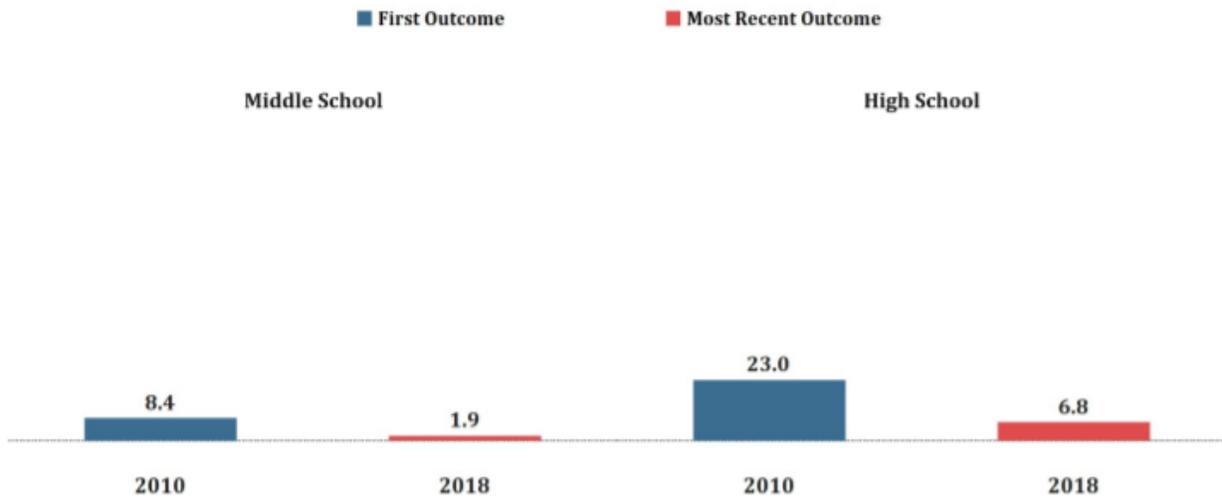


The percentage of middle school youth reporting past 30-day use of alcohol **Decreased** at a rate of **-82.0%** from **13.9%** in **2010** to **2.5%** in **2018**.

The percentage of high school youth reporting past 30-day use of alcohol **Decreased** at a rate of **-66.0%** from **30.0%** in **2010** to **10.2%** in **2018**.



Change in Past 30-Day Prevalence of Use by Grade Level: **Tobacco**

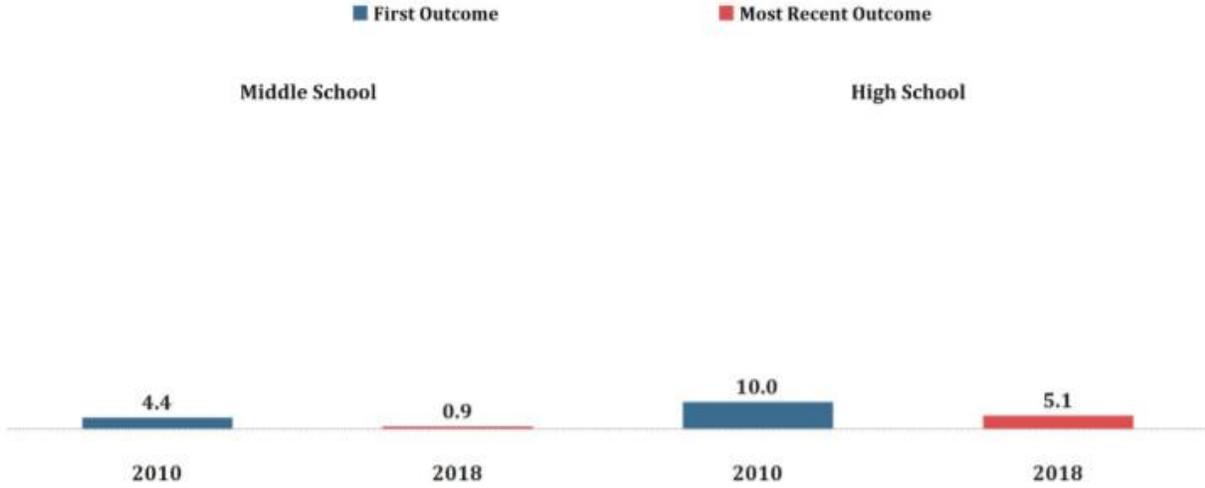


The percentage of middle school youth reporting past 30-day use of tobacco **Decreased** at a rate of **-77.4%** from **8.4%** in **2010** to **1.9%** in **2018**.

The percentage of high school youth reporting past 30-day use of tobacco **Decreased** at a rate of **-70.4%** from **23.0%** in **2010** to **6.8%** in **2018**.



Change in Past 30-Day Prevalence of Use by Grade Level: **Marijuana**

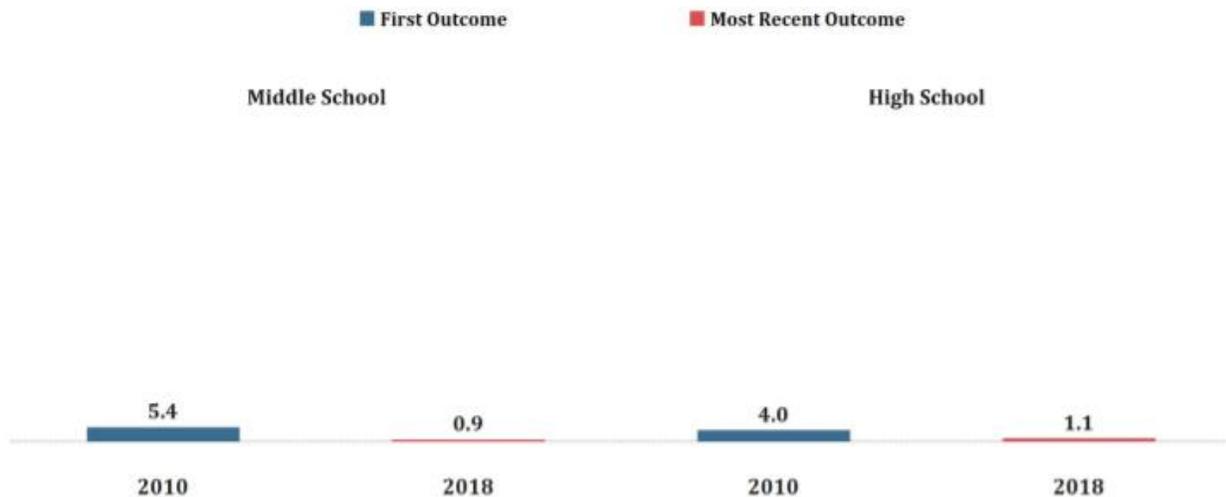


The percentage of middle school youth reporting past 30-day use of marijuana **Decreased** at a rate of **-79.5%** from **4.4%** in **2010** to **0.9%** in **2018**.

The percentage of high school youth reporting past 30-day use of marijuana **Decreased** at a rate of **-49%** from **10.0%** in **2010** to **5.1%** in **2018**.



Change in Past 30-Day Prevalence of Use by Grade Level: **Prescription Rx**



The percentage of middle school youth reporting past 30-day misuse of prescription drugs **Decreased** at a rate of **-83.2%** from **5.4%** in **2010** to **0.9%** in **2018**.

The percentage of high school youth reporting past 30-day misuse of prescription drugs **Decreased** at a rate of **-72.5%** from **4.0%** in **2010** to **1.1%** in **2018**.

As they finish up their DFC funding, the Benton County Coalition is working on the marijuana issue through education on legalization and changes that are happening with the marijuana industry and products. Their main priority during this year is to educate community leaders on proactive steps they can take to protect their communities in preparation for possible legalization. As part of their strategies, they are working with mental health professionals and organizations to educate on the connection between mental health and substance use. Along with getting the word out to their communities on resources available to them and lessening the stigma that surrounds mental health, especially in smaller communities.

Recently they held a community event to address the impact social media is having on their youth, working with counselors in their school district.

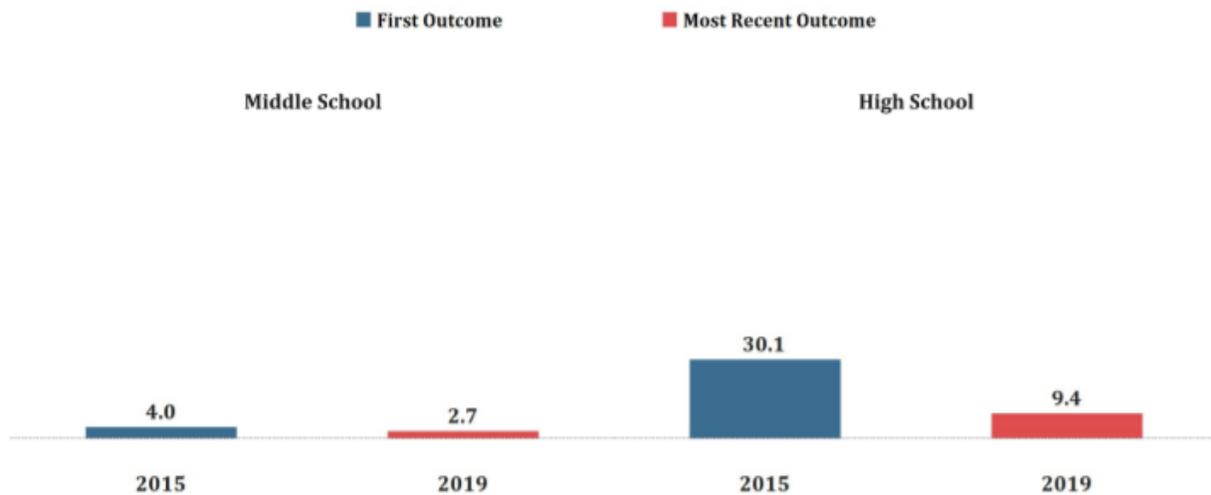
As a Coalition, they know that addressing wellness issues "upstream" will influence substance use within their county. It has allowed their transition from being seen with the negative message of not doing drugs to a positive message of what is possible when youth and adults intentionally live out a life of wellness.

The Benton County coalition just received the second round of the CARA Enhancement grant in July, along with a coalition in Clinton County, and one in rural Linn County.

The **Camanche-Dewitt Coalition** in Clinton County, which is beginning their 7th year of funding, had tremendous data reductions from 2015 to 2019 for both middle and high school students, with 11th grade past 30 day alcohol use decreasing from 30.1% to 9.4%, tobacco use decreasing from 14.1% to ONLY .7%, marijuana use going down from 12.8% to 5.8%, and prescription drug misuse declining from 7.7% to JUST .7% in only 4 years. New data will be coming out soon, but was delayed for many coalitions due to schools being overwhelmed last fall dealing with COVID-19.



Change in Past 30-Day Prevalence of Use by Grade Level: **Alcohol**

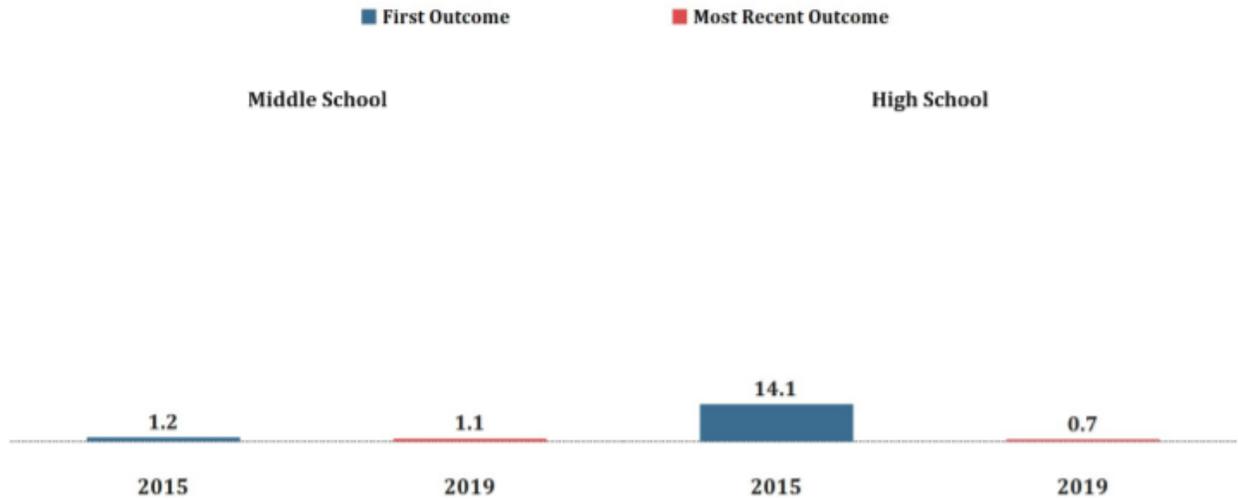


The percentage of middle school youth reporting past 30-day use of alcohol **Decreased** at a rate of **-32.5%** from **4.0%** in **2015** to **2.7%** in **2019**.

The percentage of high school youth reporting past 30-day use of alcohol **Decreased** at a rate of **-68.8%** from **30.1%** in **2015** to **9.4%** in **2019**.



Change in Past 30-Day Prevalence of Use by Grade Level: **Tobacco**

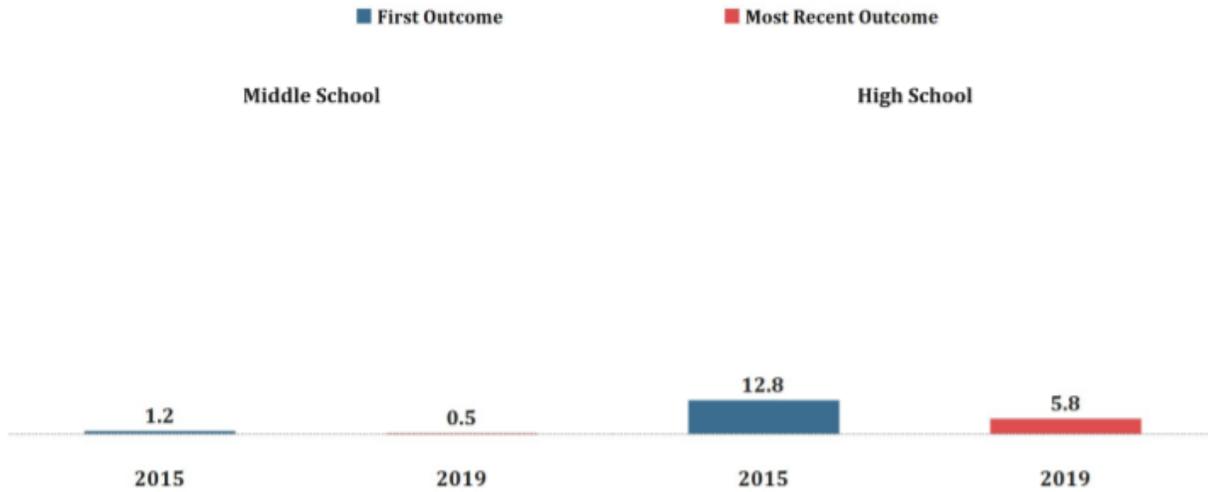


The percentage of middle school youth reporting past 30-day use of tobacco **Decreased** at a rate of **-8.3%** from **1.2%** in **2015** to **1.1%** in **2019**.

The percentage of high school youth reporting past 30-day use of tobacco **Decreased** at a rate of **-95%** from **14.1%** in **2015** to **0.7%** in **2019**.



Change in Past 30-Day Prevalence of Use by Grade Level: **Marijuana**

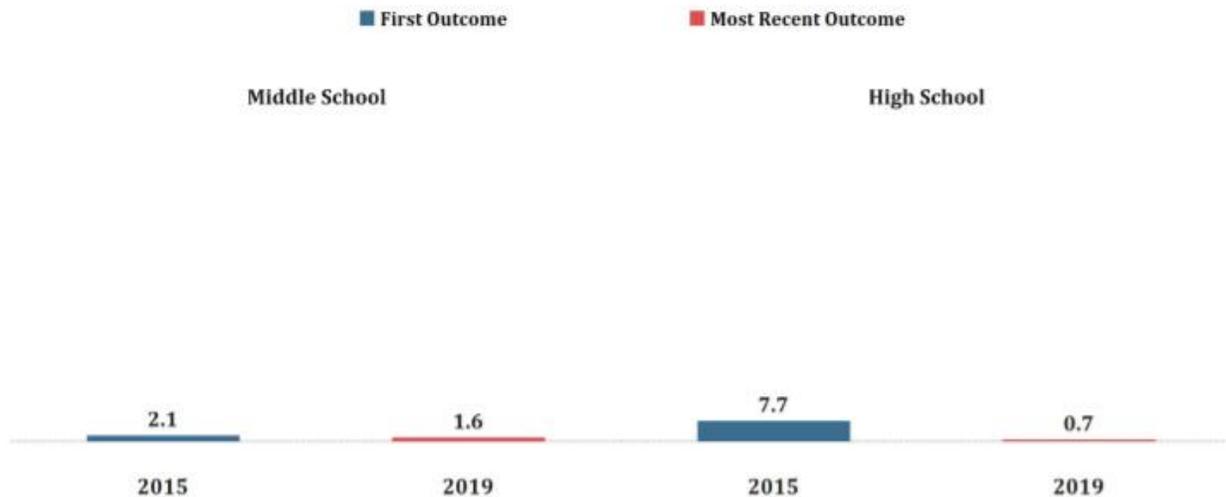


The percentage of middle school youth reporting past 30-day use of marijuana **Decreased** at a rate of **-58.2%** from **1.2%** in **2015** to **0.5%** in **2019**.

The percentage of high school youth reporting past 30-day use of marijuana **Decreased** at a rate of **-54.7%** from **12.8%** in **2015** to **5.8%** in **2019**.



Change in Past 30-Day Prevalence of Use by Grade Level: **Prescription Rx**



The percentage of middle school youth reporting past 30-day misuse of prescription drugs **Decreased** at a rate of **-23.8%** from 2.1% in 2015 to 1.6% in 2019.

The percentage of high school youth reporting past 30-day misuse of prescription drugs **Decreased** at a rate of **-90.9%** from 7.7% in 2015 to 0.7% in 2019.

The Camanche-Dewitt Coalition continues to see membership increase from year to year. One sector that has grown significantly is the youth. The coalition maintains a great working relationship with their area schools which allow coalition members to come in and speak directly to youth, whether it's for education, focus groups, or simply to recruit. Because of the partnership between the Camanche-DeWitt Coalition and AC4C, the coalition has been able to participate in the Day on the Hill event the past two years. The first year that the coalition brought students to Day on the Hill, the youth were not only able to meet with their local legislatures but also the Governor.

One of the 7th grade students came back from that trip wanting to make a difference and approached her teacher and fellow classmates on increasing the legal age to purchase tobacco to 21. The students learned all about the Strategic Prevention Framework from the coalition coordinator and the difference between lobbying and educating. The students worked diligently for a year with their local Senator, sending out educational information to all of Iowa's Senate and House Representatives. The students were asked to be guests at a local fundraiser where they again got to meet with the Governor and educate them on tobacco/nicotine and the harms

associated with vaping. The student's work paid off and they were invited to the Iowa Capitol to watch Governor Reynolds sign the Tobacco 21 bill into law.

A major strength of the DFC Program is that all Year 1 grantees are required to go through a year-long training academy to implement *Seven Strategies for Community Change*. I want to highlight some of the key strategies our coalitions have implemented to achieve these results and outcomes. The academy is developed and coordinated by the National Community Anti-Drug Coalition Institute (the Institute) - a grant to CADCA. The Academy provides state of the art, customized training and technical assistance for the DFC program. It trains DFC grantees in CADCA's model for community change so that they are able to use local data to assess their specific substance use related issues and problems and develop comprehensive, data driven multi-sector strategies to address them. It provides all DFC coalition grantees access to the best, latest available knowledge, tools and strategies to comprehensively plan, implement and evaluate their efforts and outcomes over time. Every coalition is required to produce the following 5 products before they can successfully complete the Academy: Community Assessment; Logic Model; Strategic and Action Plan; Evaluation Plan; and Sustainability Plan. The Academy training helps maximize the success of DFC grantees in achieving and documenting population level reductions in youth drug use, to include opioid misuse. It provides all DFC grantees with the capacity to choose the most salient set of comprehensive strategies to have the greatest impact on reducing population level rates of opioid misuse, as well as all of the other substance use issues facing their community.

These *Seven Strategies for Community Change* are designed to align a coalition's activities to target each specific local condition that contributes to opioid misuse and reinforce each other for maximum impact. These seven strategies include both demand and supply reduction approaches. They also include a synergistic combination of individual strategies (to increase awareness, enhance skills and provide support, which is what most people think of as "prevention") with environmental strategies that change norms, policies and systems to actually modify community settings.

This comprehensive blend of individually and environmentally focused efforts adopted by implementing multiple strategies across multiple sectors of a community, is the key to the success of DFC coalitions in achieving major population level reductions in substance use in their communities.

Here are just some of the strategies that the 3 coalitions implemented across the Seven Strategies of Change:

They Provide Information through:

- Inundating their communities with extensive media and public education campaigns through a variety of venues, including social media. Sometimes the campaigns specifically address local conditions that encourage the use of substances, and other times the educational campaigns are about the harms related to alcohol, marijuana, vaping, prescription drug misuse, methamphetamine, or other emerging drug use.

- They host special events to educate parents, youth and community members on these topics and protective factors.

They work to Enhance Skills by:

- Training businesses in responsible beverage service training
- Providing science-based curriculum to the schools

They Provide Support by:

- Hosting alternative social events
- Bringing Hidden in Plain Sight, mock teen bedroom scenes to schools and events for parents to learn about the trends and early signs of substance use

To Enhance Access and Reduce Barriers they:

- Provided training and education in Spanish or other languages needed in our areas
- Reduced home and social access to alcohol and other substances through social host ordinances
- Taught parents and grandparents to monitor prescription drugs and alcohol in their homes

They Change Consequences by:

- Publically recognizing businesses who pass tobacco and alcohol compliance checks

They Alter Physical Design by:

- Posting signage in parks and at different times of the year reminding the public about drug, alcohol or tobacco free zones or positive signage reminding why social hosting is not legal

Finally, to Modify or Change Policies they:

- Involved youth in educating decision makers on what students think will help reduce vaping, alcohol, marijuana or prescription drug use
- Educated the public and decision makers about evidence-based policies concerning the cost of alcohol and availability/access to alcohol

Conclusion

The most important lesson learned from the success of the DFC program's ability to reduce population levels of youth substance misuse and related consequences is that there is no single strategy or approach that can mitigate this crisis. As the three examples highlight, effective substance use prevention is a comprehensive community-wide process. Communities must be trained on the CADCA model for community change and must be organized with all of the relevant sectors working together to identify the local conditions driving the epidemic so that they that they can plan, implement and evaluate locally tailored responses across all of the *Seven Strategies for Community Change*, to address each of these issues.

In all three of the communities highlighted in this testimony, small investments of federal prevention funding from the DFC program, (up to \$125,000/year for up to 10 years, with a required dollar-for-dollar match that can be cash or in-kind) coupled with extensive training and technical assistance from the Community Anti-Drug Coalition Institute, resulted in large local mobilization efforts to tackle every aspect of the underlying causes of these local issues. It was the process of implementing synergistic and reinforcing efforts across all 12 required sectors that led to the impressive reductions in youth substance misuse.

The keys to the success of the DFC program's ability to effectively address youth substance use that can and should be transferred to other federal and state efforts to mitigate substance use include:

- Building and maintaining adequate multi - sector capacity to assess, plan, implement and evaluate comprehensive, coordinated efforts over time;
- Providing intensive training and technical assistance to ensure appropriate knowledge and skills needed to comprehensively address the epidemic;
- Ensuring that there is a major focus on preventing initiation of opioid misuse and other substance use among youth, along with providing adequate treatment, overdose reversal through naloxone, and recovery support for those with substance use disorders.
- Breaking down silos so that all appropriate strategies, programs, services and activities, across all of the *Seven Strategies for Community Change*, are implemented in concert, across the supply/demand split, to include both individual and environmental strategies.

Thank you for the opportunity to testify today. I am happy to answer any questions you may have.