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White House Drug Policy Office Awards a 5-year \$625,000 Drug Free Communities Grant to Local Coalition to Prevent Youth Substance Use in Hubbard County

Grants Support Administration Efforts to Emphasize Prevention among Youth

PARK RAPIDS, MN (September 7, 2016) – On September 2, Michael Botticelli, Director of National Drug Control Policy (ONDCP), announced \$85.9 million in grants for 698 Drug-Free Communities (DFC) Support Programs across the country. The grants will provide funding to local community coalitions for preventing youth substance use, including prescription drugs, marijuana, tobacco, and alcohol. Hubbard in Prevention (HIP) from CHI St. Joseph's Health in Hubbard County was one of the grant recipients and will receive 5-year \$625,000 in DFC grant funds to involve and engage their local community to prevent substance use among youth.

"The evidence-based prevention work led by local DFC community coalitions is critically needed to reduce youth substance, particularly in the midst of the national prescription opioid and heroin epidemic," said Director Botticelli. "To fully address the opioid crisis, however, Congress must act to provide funding to make lifesaving treatment available to everyone who seeks it. The President has called for \$1.1 billion in new funding for States to help expand access to treatment. Every day that passes without Congressional action to provide these additional resources is a missed opportunity to save lives."

"Our goal is to make Hubbard County a safe and drug-free place for our youth," said Angela Graham, Grant Coordinator, CHI St. Joseph's Health Community Health. "Prevention is a powerful tool to counteract prescription drug misuse and other youth substance use in our community, and we will use this funding to help youth in Hubbard County to make healthy choices about substance use."

"The Drug-Free Communities Support Program makes a vital difference at the community level – reaching out to people where they live with the help they need to prevent substance use," said SAMHSA Principal Deputy Administrator Kana Enomoto.

“SAMHSA is honored to join the Office of National Drug Control Policy in working with community coalitions across the nation to create healthy and drug-free environments for children, youth, and families.”

[DFC's 2014 National Evaluation Report](#) showed a significant decrease in past-30-day use of prescription drugs among youth in DFC communities. The report also found a significant decrease in past-30-day use between the first and most recent data reports for alcohol, tobacco, and marijuana use among middle school and high school youth in DFC communities.

Prescription drug misuse prevention is one of the core measures of effectiveness for local DFC coalitions, and coalitions nationwide have led innovative opioid prevention initiatives.

This year's DFC grantees are continuing innovative opioid prevention initiatives such as:

- In Illinois, the DuPage County Prevention Leadership Team has been working to raise awareness about the link between prescription medication misuse and heroin use. They are focusing on educating the medical community on safe prescribing practices and on promoting drug take back programs, which help people safely dispose of unused medications.ⁱ
- In New York, the Cortlandt Community Coalition developed a PSA which features the progression from receiving prescription medications from a doctor to heroin use. The PSA, which has received excellent reviews, urges youth in the community to seek help for themselves or for a loved one.ⁱⁱ
- In California, the Tahoe-Truckee Future without Drug Dependence coalition is working towards reducing access to prescription pain medications. They are focusing on safe disposal programs, and also educating prescribers on proper prescribing practices. Currently, the coalition is working with the Tahoe Forest Health System and the Placer and Nevada County Safe Opioid Steering Committee to institutionalize new best prescribing and chronic pain management practices.ⁱⁱⁱ

Background on the Drug-Free Communities Support Program

The Drug-Free Communities (DFC) Support Program, created by the Drug-Free Communities Act of 1997, is the Nation's leading effort to mobilize communities to prevent youth substance use. Directed by the White House Office of National Drug Control Policy (ONDCP), in partnership with the Substance Abuse and Mental Health Services Administration (SAMHSA), the DFC Program provides grants to community coalitions to strengthen the infrastructure among local partners to create and sustain a reduction in local youth substance use.

The DFC Program provides grants of up to \$625,000 over five years to community coalitions that facilitate youth and adult participation at the community level in local youth drug use prevention efforts.

According to data for 2014, an estimated 3,800 young people per day between the ages of 12 and 17 used drugs for the first time in the preceding year.^{iv} Additionally, high school seniors are more likely to be current smokers of marijuana than cigarettes and non-medical use of prescription or over-the-counter drugs remains unacceptably high.^v Parents should also know that 17% of high school seniors in 2015 reported binge drinking (i.e., 5 or more drinks in a row) in the past two weeks.^{vi}

Recognizing that local problems need local solutions, DFC-funded coalitions engage multiple sectors of the community and employ a variety of environmental strategies to address local drug problems. Coalitions are comprised of community leaders, parents, youth, teachers, religious and fraternal organizations, health care and business professionals, law enforcement, and media. By involving the community in a solution-oriented approach, DFC also helps those youth at risk for substance use recognize the majority of our Nation's youth choose not to use drugs.

Additionally, DFC-funded communities have proven to be more effective in addressing these complex social issues and have demonstrated an increase in positive outcomes over communities that do not have DFC's.

Background on the Administration's National Drug Policy

The Administration's drug policy is based on a balanced public health and public safety approach. This approach is built upon the latest scientific research demonstrating that addiction is a chronic disease of the brain that can be successfully prevented and treated, and from which one can recover. The Administration has directed Federal agencies to expand community-based efforts to prevent drug use before it begins, empower healthcare workers to intervene early at the first signs of a substance use disorder, expand access to treatment for those who need it, support the millions of Americans in recovery, and pursue "smart on crime" approaches to drug enforcement.

The President has made clear that addressing the prescription opioid and heroin epidemic is a priority for his Administration and has called for \$1.1 billion in new funding for States to help expand access to treatment. While Federal agencies have been using their authority to take every available action they can, Congress needs to take action on what is most urgently needed now – additional funding to make lifesaving treatment available to everyone who seeks it.

For more information about the Administration's efforts to reduce drug use and its

consequences, or to learn more about the Drug-Free Communities Support Program, visit: <http://www.whitehouse.gov/ondcp/Drug-Free-Communities-Support-Program>

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About CHI St. Joseph's Health

CHI St. Joseph's Health is a 25-bed critical access hospital serving communities in Hubbard, Becker, Cass and Wadena Counties since 1946. In recent years, CHI St. Joseph's Health's award-winning teams received several national honors including: The Joint Commission Top Performer on Key Quality Measures in surgery; Top 100 Critical Access Hospital, HealthStrong; WomenCertified's America's Best Hospitals Women's Choice Award in obstetrics; and the Studer Group Fire Starter Healthcare Organization of the Month among other national, regional and state recognitions.

About CHI

Catholic Health Initiatives, a nonprofit, faith-based health system formed in 1996 through the consolidation of four Catholic health systems, expresses its mission each day by creating and nurturing healthy communities in the hundreds of sites across the nation where we provide care. The nation's third-largest nonprofit health system, Englewood, Colorado-based CHI operates in 18 states and comprises 103 hospitals, including four academic health centers and major teaching hospitals as well as 30 critical-access facilities; community health-services organizations; accredited nursing colleges; home-health agencies; living communities; and other facilities and services that span the inpatient and outpatient continuum of care. In fiscal year 2015, CHI provided almost \$970 million in charity care and community benefit - an 8% increase over the previous year -- for programs and services for the poor, free clinics, education and research. Charity care and community benefit totaled more than \$1.6 billion with the inclusion of the unpaid costs of Medicare. The health system, which generated operating revenues of \$15.2 billion in fiscal year 2015, has total assets of approximately \$23 billion. Learn more at www.catholichealthinitiatives.org.

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ⁱ DFC 2015 Progress Report

ⁱⁱ DFC 2015 Progress Report

ⁱⁱⁱ Tahoe-Truckee Future Without Drug Dependence 2016 Project Narrative

^{iv} SAMHSA. Results from the 2014 National Survey on Drug Use and Health: Detailed Tables (September 2015) available here: <http://www.samhsa.gov/data/sites/default/files/NSDUH-DetTabs2014/NSDUH-DetTabs2014.pdf>.

^v University of Michigan. Monitoring the Future Study (December 2015) available here: <http://monitoringthefuture.org/pubs/monographs/mtf-overview2015.pdf>.

^{vi} University of Michigan. Monitoring the Future Study (December 2015) available here: <http://monitoringthefuture.org/pubs/monographs/mtf-overview2015.pdf>.