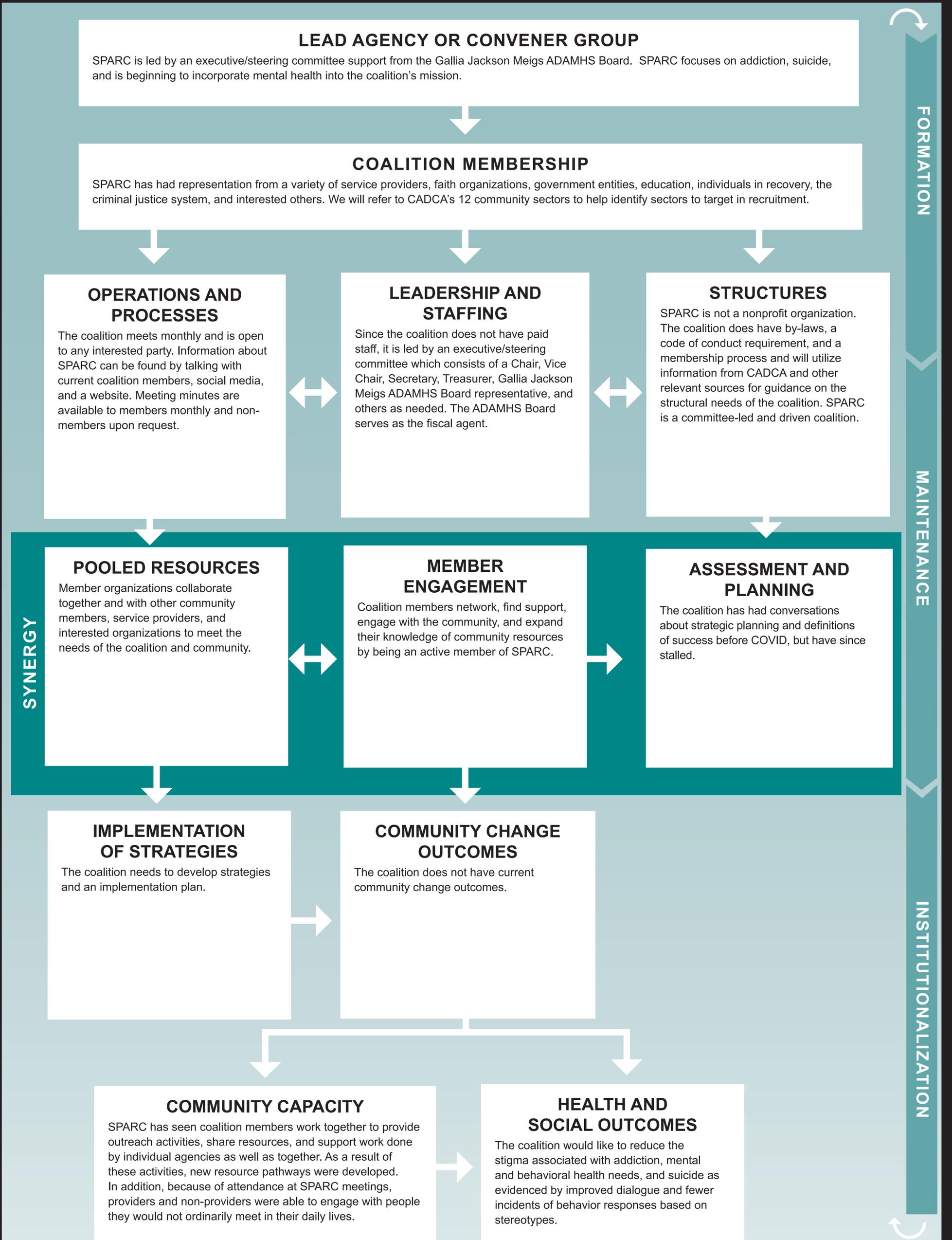




SUBSTANCE ABUSE PREVENTION AND ADDICTION RESOURCE COUNCIL

COMMUNITY CONTEXT: The Substance Abuse Prevention and Addiction Resource Council (SPARC) serves Jackson County Ohio. Jackson County has a population of 32,413¹ and is located in the Ohio Appalachian region. Jackson County is racially homogeneous, with 96.8%² of the population being white, non-Latino. Currently, Jackson struggles with issues around addiction, inequality, and poverty.



FORMATION

MAINTENANCE

INSTITUTIONALIZATION

LEAD AGENCY OR CONVENER GROUP

SPARC is led by an executive/steering committee support from the Gallia Jackson Meigs ADAMHS Board. SPARC focuses on addiction, suicide, and is beginning to incorporate mental health into the coalition's mission.

COALITION MEMBERSHIP

SPARC has had representation from a variety of service providers, faith organizations, government entities, education, individuals in recovery, the criminal justice system, and interested others. We will refer to CADCA's 12 community sectors to help identify sectors to target in recruitment.

OPERATIONS AND PROCESSES

The coalition meets monthly and is open to any interested party. Information about SPARC can be found by talking with current coalition members, social media, and a website. Meeting minutes are available to members monthly and non-members upon request.

LEADERSHIP AND STAFFING

Since the coalition does not have paid staff, it is led by an executive/steering committee which consists of a Chair, Vice Chair, Secretary, Treasurer, Gallia Jackson Meigs ADAMHS Board representative, and others as needed. The ADAMHS Board serves as the fiscal agent.

STRUCTURES

SPARC is not a nonprofit organization. The coalition does have by-laws, a code of conduct requirement, and a membership process and will utilize information from CADCA and other relevant sources for guidance on the structural needs of the coalition. SPARC is a committee-led and driven coalition.

POOLED RESOURCES

Member organizations collaborate together and with other community members, service providers, and interested organizations to meet the needs of the coalition and community.

MEMBER ENGAGEMENT

Coalition members network, find support, engage with the community, and expand their knowledge of community resources by being an active member of SPARC.

ASSESSMENT AND PLANNING

The coalition has had conversations about strategic planning and definitions of success before COVID, but have since stalled.

IMPLEMENTATION OF STRATEGIES

The coalition needs to develop strategies and an implementation plan.

COMMUNITY CHANGE OUTCOMES

The coalition does not have current community change outcomes.

COMMUNITY CAPACITY

SPARC has seen coalition members work together to provide outreach activities, share resources, and support work done by individual agencies as well as together. As a result of these activities, new resource pathways were developed. In addition, because of attendance at SPARC meetings, providers and non-providers were able to engage with people they would not ordinarily meet in their daily lives.

HEALTH AND SOCIAL OUTCOMES

The coalition would like to reduce the stigma associated with addiction, mental and behavioral health needs, and suicide as evidenced by improved dialogue and fewer incidents of behavior responses based on stereotypes.

Community Coalition Action Theory- Shorter Narrative
Substance Abuse Prevention and Addiction Resource Council (SPARC)
Jackson County, Ohio

Community Context

The Substance Abuse Prevention and Addiction Resource Council (SPARC) serves Jackson County Ohio. Jackson County has a population of 32,413¹ and is located in the Ohio Appalachian region. Jackson County is racially homogeneous, with 96.8%² of the population being white, non-Latino. Currently, Jackson struggles with issues around addiction, inequality, and poverty.

Lead Agency or Convener Group

SPARC is led by an executive/steering committee support from the Gallia Jackson Meigs ADAMHS Board. SPARC focuses on addiction, suicide, and is beginning to incorporate mental health into the coalition's mission.

Coalition Membership

SPARC has had representation from a variety of service providers, faith organizations, government entities, education, individuals in recovery, the criminal justice system, and interested others. We will refer to CADCA's 12 community sectors to help identify sectors to target in recruitment.

Coalition Operations and Processes

The coalition meets monthly and is open to any interested party. Information about SPARC can be found by talking with current coalition members, social media, and a website. Meeting minutes are available to members monthly and non-members upon request.

Leadership and Staffing

Since the coalition does not have paid staff, it is led by an executive/steering committee which consists of a Chair, Vice Chair, Secretary, Treasurer, Gallia Jackson Meigs ADAMHS Board representative, and others as needed. The ADAMHS Board serves as the fiscal agent.

Structures

SPARC is not a nonprofit organization. The coalition does have by-laws, a code of conduct requirement, and a membership process and will utilize information from CADCA and other relevant sources for guidance on the structural needs of the coalition. SPARC is a committee-led and driven coalition.

Pooled Resources

Member organizations collaborate together and with other community members, service providers, and interested organizations to meet the needs of the coalition and community.

¹ [Census.gov](https://www.census.gov)

² [U.S. Census Bureau QuickFacts: Jackson County, Ohio](https://www.census.gov/quickfacts/jackson-county-ohio)

Member Engagement

Coalition members network, find support, engage with the community, and expand their knowledge of community resources by being an active member of SPARC.

Assessment and Planning

The coalition has had conversations about strategic planning and definitions of success before COVID, but have since stalled.

Synergy

Synergy, in our coalition, is evident by the ways the coalition members work together to achieve goals and plan events. Our coalition has been able to utilize the different perspectives of the members representing the various sectors to create learning opportunities and events that appeal to a broad range of people.

Implementation of Strategies

The coalition needs to develop strategies and an implementation plan.

Community Change Outcomes

The coalition does not have current community change outcomes.

Health and Social Outcomes

The coalition would like to reduce the stigma associated with addiction, mental and behavioral health needs, and suicide as evidenced by improved dialogue and fewer incidents of behavior responses based on stereotypes.

Community Capacity

SPARC has seen coalition members work together to provide outreach activities, share resources, and support work done by individual agencies as well as together. As a result of these activities, new resource pathways were developed. In addition, because of attendance at SPARC meetings, providers and non-providers were able to engage with people they would not ordinarily meet in their daily lives.

Community Coalition Action Theory- Longer Narrative

Substance Abuse Prevention and Addiction Resource Council (SPARC)

Jackson County, Ohio

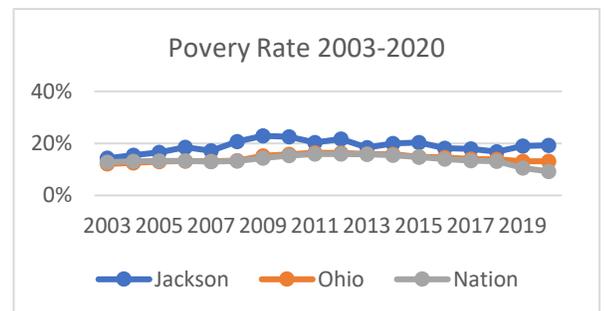
Community Context



The Substance Abuse Prevention and Addiction Resource Council (SPARC) serves Jackson County Ohio. Established in 1816, Jackson County (p. 32,413ⁱ) is in the southeast portion of the state and is part of the Ohio Appalachian region. Jackson was once known for apple, iron, and saltⁱⁱ production, coal mining, and had at least one stop on the Underground Railroad. Jackson County has three main municipalities, the city of Jackson (p. 6,230ⁱ), the city of Wellston (p. 5,507ⁱ), and the village of Oak Hill (p.1,115ⁱⁱⁱ). Jackson County is racially homogeneous, with 96.8%ⁱ of the population being white, non-latino. Additionally, Jackson County has a strong Protestant Christian bent and is primarily a Republican county with 74.4%^{iv} of voters voting for the Republican candidate in the last presidential election.

Approximately 83.5%^v of Jackson County residents over 25 have a high school diploma, and a little over 14% have a 4-year college degree. Most of Jackson County's jobs are centered around service provision and food manufacturing, k-12 education, and healthcare, with the largest employers being Bellesio Foods, General Mills, Holzer Medical Center, Jackson City Schools, Osco Industries, Walmart, and Wellston City Schools.

From 2003 to 2020, the poverty rate for Jackson has ranged from approximately 15%-22% of the population, which is higher than both the state of Ohio and the United States as a whole. Jackson County has a childhood poverty rate of 28.8%, which ranks as the 11th highest in the state^{vi}, 71.8%⁸ of Jackson County's children are considered economically disadvantaged, and 67.1% of children in Jackson County are enrolled in Medicaid. Jackson County also has a teen birth rate of 27.8^{vii} (per 1,000 females).



Like all communities, Jackson County has a mix of positive and negative qualities. The people embrace their own and will come together as a community to help a deserving native son or daughter. Conversely, there can be a distinction between deserving and undeserving people, a strong belief in individualism, and caution towards outsiders as well as those who are not like the typical Jackson Countian, which is similar to many Appalachian counties. Currently, Jackson struggles with issues around addiction, inequality, and poverty.

Lead Agency or Convener Group

The coalition does not have a lead agency; however, it does receive significant support from the local ADAMHS board. Instead, SPARC is led by an executive/steering committee. SPARC focuses on addiction, suicide, and is beginning to incorporate mental health into the coalition's mission. An anti-addiction coalition or task force has been in Jackson County, off and on, since the early 2000s with SPARC being the latest version. Currently, SPARC is funded by donations and sponsors.

Coalition Membership

SPARC has had representation from a variety of service providers, faith organizations, government entities, education, individuals in recovery, the criminal justice system, and interested others. Recruitment methods include personal invitations to meetings from current members and information sharing through local media. When we are actively recruiting, SPARC will refer to CADCA's 12 community sectors to help identify needed areas of representation and look for people or organizations who can provide insights, offer ideas for projects, support activities, and add additional appropriate and useful voices to the coalition. Pre-COVID, SPARC enjoyed a robust membership but has struggled during the pandemic to maintain active participants.

Coalition Operations and Processes

The coalition meets monthly. Pre-COVID, the meetings were held at Holzer Hospital and during COVID, meetings are held virtually through Zoom. Members of the coalition are encouraged to attend meetings as well as special events. The benefits of participating in SPARC include networking and information sharing. Members can also have input into what the community needs and offer ideas for solutions. Community members can find out information about SPARC from current coalition members, social media, and a website. Meeting minutes are available to members monthly and non-members upon request.

Leadership and Staffing

Since the coalition does not have paid staff, it is led by an executive/steering committee which consists of a Chair, Vice Chair, Secretary, Treasurer, Gallia Jackson Meigs ADAMHS Board rep, and others as needed. The ADAMHS Board serves as the fiscal agent. Coalition members are encouraged to take leadership roles as committee chairs and leads on planning activities.

Structures

SPARC is not a nonprofit organization. The coalition does have by-laws, a code of conduct requirement, and a membership process and will utilize information from CADCA and other relevant sources for guidance on the structural needs of the coalition. SPARC is a committee driven coalition with executive/steering, data, harm reduction, community outreach, and nominations as the standing committees. Ad hoc committees are developed for special needs or events.

SPARC's mission is to work as a community to reduce and prevent addiction through education and support, and the vision is a community free of addiction. SPARC's current goals are to educate youth and adults about the dangers of opioid addiction and the negative effects it has on society; to encourage and strengthen county and community efforts to prevent and treat opioid addiction; and to promote family building and workforce development as ways of combatting opioid addictions in communities.

Pooled Resources

SPARC's primary populations include individuals and families of those experiencing addiction, substance misuse, and loss by suicide. SPARC works to provide and support prevention for addiction and suicide as well as advocate to address and promote good mental health. To do this, we collaborate with community members, service providers, and other entities in a variety of ways. Financial resources can be pooled with other types of resources to meet the needs of the coalition and community. Several member organizations have funding that

specifically targets one or more of our identified populations, which can be used independently or combined to meet needs. In addition, members can contribute their time and knowledge.

Member Engagement

Members of the coalition are able to network, find support, and expand their knowledge of community resources by being an active member of SPARC. The leadership encourages participation in special events, planning, and information sharing. Additionally, on occasion, there are training and learning opportunities. If members are hesitant to be an active participant, the leadership will attempt to identify positive ways they can contribute and participate. It is important to acknowledge that some members are more satisfied by actively engaging whereas other members are satisfied with less involvement.

Assessment and Planning

The coalition needs to develop a strategic plan and a method to better incorporate community assessments and other data into our work. The executive/steering committee began conversations about strategic planning and definitions of success before COVID. They were gathering input from providers and community members, but those conversations are no longer taking place.

Synergy

When organizations come together and combine resources, knowledge, skills and different points of view, they create something new that can accomplish more than the individual organizations could have accomplished on their own (Taylor-Powell, Rossing & Geran, 1998.) There is something powerful in this partnership which researchers and others call synergy (Lasker, Weiss & Miller, 2001; Taylor-Powell, Rossing & Geran, 1998.) In the CCAT, synergy occurs through the combination of: pooled resources, member engagement and assessment and planning. Synergy, in our coalition, is evident by the ways the coalition members work together to achieve goals and plan events. Our coalition has been able to utilize the difference perspectives of the members representing the various sectors to facilities Town Halls, where a multi-member team addressed the same topic from different perspectives so those in attendance could have a deeper understanding of the topic. Synergy has also been evident in the holistic approach to events where each sector combines their resources to create an environment for multiple populations (children, those experiencing addiction, parents) to learn prevention, experience support, and find common ground.

Implementation of Strategies

The coalition previously sought input from members to implement ideas and strategies. We had success with members participating in these discussions and activities pre-COVID, but we have not been successful since the onset of COVID restrictions. The coalition needs to develop strategies and an implementation plan.

Community Change Outcomes

The coalition does not have current community change outcomes.

Health and Social Outcomes

The coalition would like to reduce the stigma associated with addiction, mental and behavioral health needs, and suicide but does not have any identified measurement methods. The coalition has supported the CIT

trainings which provides law enforcement with alternative methods to use during interactions with persons with substance use or mental health issues. That support could have a positive impact on social outcomes. Additional potential outcomes could include improved dialogue, decreased stigma, and fewer incidents of behavior responses based on stereotypes.

Community Capacity

Pre-COVID, we worked together with law enforcement, collaborated to include educational opportunities, and strengthened community agencies' coordination. Our meetings included our county children services agency, representatives from Jobs and Family Services, court personnel (from Municipal, Juvenile, and Common Pleas), substance use treatment providers, mental health agencies, government agencies, and a variety of community participants. This allowed interactions outside of the typical formal settings to connect and unite while working towards common goals.

SPARC has seen coalition members work together to provide outreach activities, share resources, and support work done by individual agencies as well as together. We have shared information on a variety of topics including medical marijuana, the impact of addiction services, the history of Appalachia, current research findings about the area, and the impact of trauma. As a result of these activities, new resource pathways were developed from the people who were in the room, which created new opportunities as new members joined the coalition. In addition, because of attendance at SPARC meetings, providers and non-providers were able to engage with people they would not ordinarily meet in their daily lives.

ⁱ [Census.gov](https://www.census.gov)

ⁱⁱ [Jackson County - Ohio History Central](https://www.ohiohistorycentral.org/ohio/jackson-county)

ⁱⁱⁱ [Oak Hill, Ohio - Wikipedia](https://en.wikipedia.org/wiki/Oak_Hill,_Ohio)

^{iv} [U.S. Census Bureau QuickFacts: Jackson County, Ohio](https://www.census.gov/quickfacts/jackson-county-ohio)

^v [Every Ohio city and county ranked for poverty, child poverty: census estimates - cleveland.com](https://www.cleveland.com/news/ohio/2019/07/every-ohio-city-and-county-ranked-for-poverty-child-poverty-census-estimates/)

^{vi} [KIDS COUNT County Profiles - Children's Defense Fund Ohio \(cdfohio.org\)](https://www.cdfohio.org/kids-count-county-profiles)

^{vii} [page1 \(ohio.gov\)](https://www.ohio.gov/page1)