ANNEX A

Evaluation of Community Coalitions Addressing Drug Use and Crime: A Multinational Comparison

The Inter-American Drug Abuse Control Commission (CICAD) requires that a research team based in US carry out the study "Evaluation of Community Coalitions Addressing Drug Use and Crime: A Multinational Comparison."

Introduction

The world drug problem is an increasingly complex and multi-causal phenomenon that negatively affects public health, security, human rights, the environment, and the well-being of society. From a Public Health perspective, the analysis of the world drug problem focuses on the population level, employing a range of disciplines, including biomedical sciences and social, economic, environmental, political, and population sciences.

As with any other health issue, it is practical to analyze substance use disorders underlying causes with a multifaceted approach. Understanding risk factors helps to identify prevention opportunities; understanding protective factors shows how to intervene. In 2005, the World Health Organization (WHO) Commission on Social Determinants of Health proposed an analytical framework[1] that considers multiple components from environmental, social, economic, and political domains that influence the onset and evolvement of problems due to substance use. Pragmatically, the model encompasses five areas for analysis: socioeconomic context and position (society), differential exposure (social & physical environment), differential vulnerability (population group), differential healthcare outcomes (individual), and differential social consequences (individual). In these areas, scientific research has identified numerous risk factors for substance use disorders within the different layers surrounding individuals[2]: interpersonal relations (ecosystem), community (mesosystem), and society (macrosystem).

From a broader perspective, the conditions under which people live in each community determine the intensity of substance use problems. Research shows community partnership models can positively influence health, social, and well-being outcomes. Community coalitions are a promising solution as they have demonstrated efficacy in preventing substance use, mainly when technical assistance is available, and the coalitions implement evidence-based strategies[3]. A coalition approach to drug prevention is attractive because it supports community-driven solutions to local problems[4]. Community coalitions also promote processes that improve the implementation of quality programs and environmental change strategies, including interagency collaboration, shared decision-making, and communication. Community coalitions address key implementation challenges by providing a hub of prevention expertise and serving as the overarching program delivery system—coordinating the selection, training, monitoring, evaluation, and problem-solving for programs and environmental change strategies.

Over the years, Community Anti-Drug Coalitions of America (CADCA) has continuously developed community coalitions in many countries, steadily striving towards building positive effects. Assessments of CADCA-supported community coalitions have registered community improvement benefits documented in various forms, drawing information from standardized data collection instruments familiar to community coalitions and their key community champions.

However, much of this coalition research has happened in high-income countries like the United States. Given the vastly different contextual factors found worldwide, exploring coalition successes and failures in developing countries is crucial. The first aim of this study is to examine the contributions of community coalitions in developing countries on outcomes related to population-level reductions in substance use and crime. The second aim is to explore the contributions of CADCA technical assistance on coalition operations. Additionally, this study will examine the determinants of coalition sustainability.

Outcomes to measure
- Reductions in Gangs and Neighborhood Crime
  - Gang-related problems
  - Overall neighborhood crime
- Reductions in Drug Use and Access
  - Buying and selling of drugs in the neighborhood
  - Drug use in the neighborhood
- Sustainability
  - Coalitions that do not receive INL funding once achieving sustainability/self-sufficiency.
  - Continuing CADCA engagement with coalitions no longer receiving INL funding.
  - Determinants for sustainability.

Key questions to include in the evaluation study:
- To what extent are these reductions in substance use and crime rates related to coalition efforts?
- Are there specific types of coalition activities that appear to have a more significant impact on population-level reductions?
- To what extent did the INL-funded training provided by CADCA contribute to coalition community change efforts?
- How sustainable are coalitions no longer receiving INL funding, and what are some sustainability determinants?

The US Congress will receive this report to expand the data analysis with information from coalitions in different world regions. Besides information directly collected through the mechanisms and processes of the community coalition, the evaluation team must consider taking advantage of other sources of information that can be a reference to show the community coalition's impact, such as official epidemiological reports on drug use, crime, violence, etc.

Additionally, the document must include details on the lessons learned in implementing and evaluating the community coalition model.

Sample

The selected research team will contact drug prevention coalitions, ideally from five different regions of the world, that previously received funding from the Bureau of International Narcotics and Law Enforcement Affairs (INL) via email, phone, or any other means using the contact information provided by CADCA and the Organization of American States in collaboration with the INL. The research team must stratify the sample to allow cross-comparisons between North America, South America, Asia, and Africa or the regions where coalitions selected for this analysis are based.

Inclusion/Exclusion criteria:
- Coalitions must have been active for more than three years.
- Coalitions must have a designated coordinator.
- INL-funded-CADCA technical assistance to coalitions must have stopped before 2023.
- Attending recent CADCA activities, not as a direct beneficiary of the INL funding, such as webinars and virtual sessions, must not limit coalition members' participation in this study.
- Coalitions must have met at least four times in the past year.
- Coalitions must have at least five members representing multiple sectors of the community who have attended two or more meetings in the past year.

Data collection

To gather information, the research team will invite community coalition leaders, ideally from countries in five different regions of the world, to participate in an online survey to assess community context and coalition capacity. Coalitions that complete the questionnaire and meet inclusion criteria can participate in second-phase semi-structured interviews, which will follow an interview guide and allow follow-up probes by the interviewer. This methodology will provide quantitative descriptions of the coalitions and their activities while enabling qualitative thematic analysis of responses to open-ended questions.

Besides the information coming directly from the community coalition, the research team must collect data from any valuable sources of information, such as but not limited to official epidemiological reports on drug use, crime, violence, official statistic reports, bulletins, databases, other scientific publications, etc. The research team might need to conduct on-site visits to gather the data required to perform longitudinal comparative analyses covering at least three moments of the localities where the programs are: 1. baseline conditions before implementing the community coalition; 2. conditions while implementing the community coalition; 3. conditions after implementing the community coalition.

Data analysis

Initially, the research team must perform a descriptive statistical analysis portraying the context and capacity of coalitions in the sample. Then, utilize regression models to explore how contextual factors relate to coalition capacity and perceived sustainability.

For the open-ended interview questions, researchers will use standard qualitative analysis approaches, which associate codifications with portions of text and identify patterns within and across codes to reflect relationships within the data. A lead coder will develop codes based on the conceptual model, the interview guide, and the concepts that emerge from the text to create meaningful analytic groupings.

The quantitative data obtained from coalitions must describe changes in community-level drug use, crime, and violence over time, documenting trends and marking the period when community coalition activities occurred. This analysis will allow a comparison of community outcome trends in the presence and absence of coalition activities. Regression models will indicate the magnitude of change in community outcomes when implementing coalition activities.

Deliverables

1. One-page report summarizing study findings on the community coalition's impact on drug use, crime, and violence.

2. Executive summary on the findings of the report "Evaluation of Community Coalitions Addressing Drug Use and Crime: A Multinational Comparison."

3. PowerPoint editable file containing the "Evaluation of Community Coalitions Addressing Drug Use and Crime: A Multinational Comparison" executive summary highlights.

4. Full report "Evaluation of Community Coalitions Addressing Drug Use and Crime: A Multinational Comparison."

5. PowerPoint editable file containing the main tables, figures, and graphs from the study "Evaluation of Community Coalitions Addressing Drug Use and Crime: A Multinational Comparison."

6. Full datasets and databases in multiple file formats, exportable and compatible with the most common software like Excel, IBM SPSS Statistics, SAS, Stata, etc.

7. Case studies of the principal countries from the different world regions included in the evaluation.

The research team must present all the information, tables, summaries, reports, and all deliverables in English.

The Chief of CICAD's Demand Reduction Unit (DRU) must authorize the researchers' team's satisfactory presentation of the deliverables.

<u>Personnel</u>

The research team based in US will define the number and characteristics of the personnel that will deliver the requested products. The team leader must be a senior researcher with extensive experience in evaluation research, demonstrated by publications on community coalitions' effect on preventing substance use and positively influencing health, social, and well-being outcomes. A background in publications specific to evaluating CADCA's work will be highly appreciated.

The OAS will not have any labor or contractual relationship with the personnel or team members involved in the evaluation study.

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[1] Blas, E., & Kurup, A. S. (Eds.). (2010). *Equity, social determinants and public health programmes*. World Health Organization.

[2] Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. American Psychologist, 32(7), 513–531. https://doi.org/10.1037/0003-066X.32.7.513

[3] Spoth RL, Trudeau LS, Redmond C, Shin C, Greenberg MT, Feinberg ME, & Hyun GH (2015). PROSPER partnership delivery system: Effects on adolescent conduct problem behavior outcomes through 6.5 years past baseline. Journal of Adolescence, 45, 44–55. doi: 10.1016/j.adolescence.2015.08.008 [PubMed: 26356808]

[4] Butterfoss, F. D. (2007). Coalitions and partnerships in community health. Jossey-Bass.