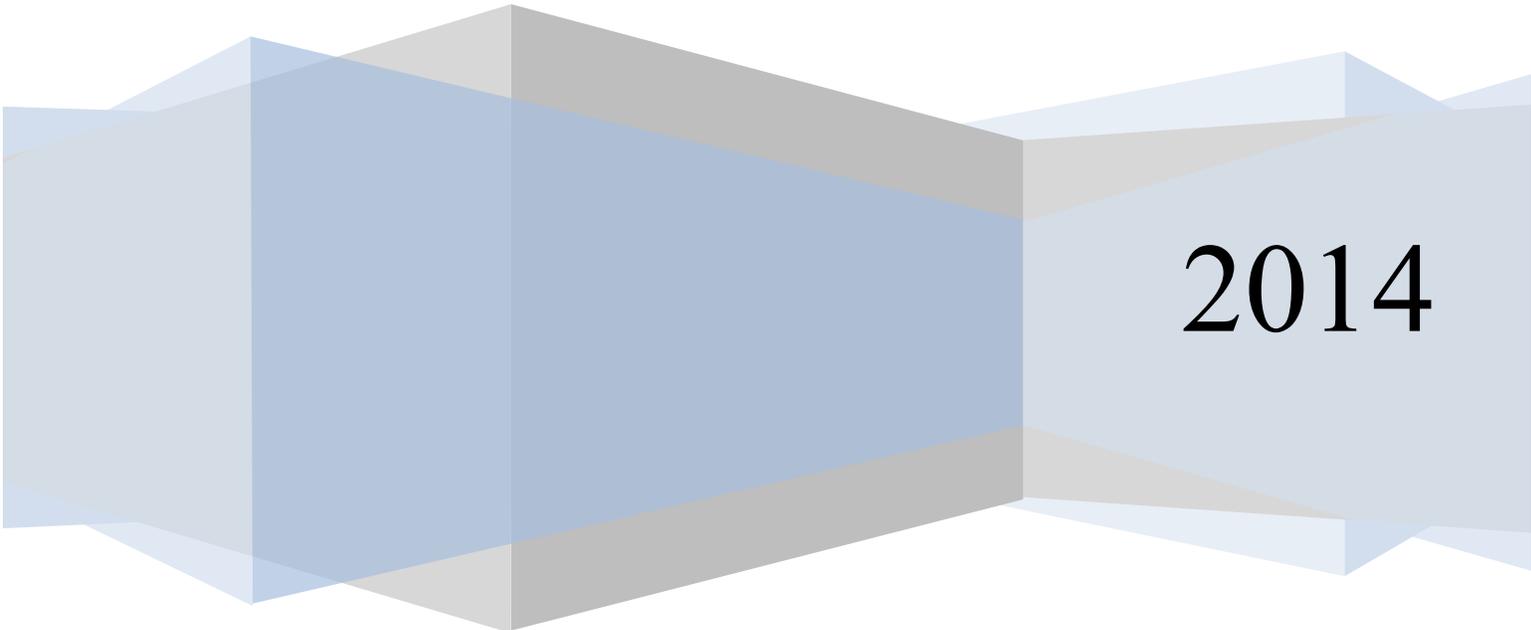


Ashland Decisions at Every Turn

Coalition Self Assessment Report

Prepared by

A decorative graphic consisting of several overlapping, semi-transparent blue and grey rectangular blocks arranged in a horizontal, slightly wavy pattern. The blocks are layered, creating a sense of depth and movement.

2014

Methodology

A survey was created and e-mailed to coalition members via Survey Monkey in March 2014. A reminder email followed the initial invitation. A total of 23 coalition members completed the survey out of 85 that received the invitation, generating a response rate of 27%. Several open-ended response questions were asked. Coalition members' responses to these questions are in italics.

Results

COALITION TENURE AND ACTIVITIES

Length of Time Involved in Ashland Decisions at Every Turn

Survey respondents were asked how long they have been actively involved in Ashland Decisions at Every Turn. They were given four option choices.

Statement	Number of respondents
Less than 6 months	4
6 months- 1 year	4
1-2 years	5
2 years or more (coalition previously called 'Ashland Substance Abuse Task Force [ASATF])	9

Coalition Meetings Attended in Past Year

Survey respondents were asked how many coalition meetings they have attended in the past year. They were given four option choices.

Meetings Attended	Number of respondents
None	4
1-3 Meetings	6
4-6 Meetings	7
7-10 Meetings	5

Interest in Participation

Survey respondents were asked if they would be interested in signing up for an on-going subcommittee or work on an ad-hoc basis contributing to specific, time limited projects. They were allowed to select more than one option.

Statement	Number of respondents
Yes, I would be interested in participating on an on-going subcommittee (Ex: communication, policy, parent education)	5
Yes, I would be interested in participating on an ad-hoc basis (Ex: write an article, send out communications, set up for a program, etc.)	6
No, neither	5

MEETING FEEDBACK

Meeting Time

Coalition members were asked if the current meeting time of the last Tuesday of the month from 5:30 p.m. - 7:00 p.m. works for them.

- 12 respondents reported 'Yes'
- 10 reported 'No'

Coalition members were asked if the current meeting day did not work for them, what days would work best. They were allowed to select all that apply.

Statement	Number of respondents
Mondays	3
Tuesdays	5
Wednesdays	4
Thursdays	5
Fridays	2

Coalition members were asked if the current meeting time did not work for them, what times would work best. They were allowed to select all that apply.

Statement	Number of respondents
Early morning (8 a.m. - 10a.m.)	7
Mid morning (10 a.m.- noon)	5
Afternoon (Noon- 4 p.m.)	4
Evening (4 p.m. or later)	6

Future Coalition Meetings

Coalition members were asked what they would like to see happen at future coalition meetings. Respondents were allowed to select more than one option.

Statement	Number of respondents
Small group work on action plan items	13
Updates and announcements	12
Learning about prevention	11
Outside experts on related substance abuse topics	11
Presentations by coalition members	9
Networking before and after meetings	8
Large group discussions/decision making	7

Other comments mentioned:

- *Focused, well thought out initiatives. Sometimes some discussion at the table is best left to behind the scenes.*
- *I see the Coalition as a place where issues get aired and members are assigned to take action as required. I think that we need presentations where we can be challenged, discuss and reach action. I want things to be done, as opposed to things being debated endlessly. We save kids by making things happen for them, not by talking about others doing things.*

What Changes Need to Happen at Coalition Meetings

Coalition members were asked what (if any) changes need to happen at coalition meetings. The following recommendations were given:

- *Folks need to be engaged instead of just listening*
- *Once subcommittees kick in, reporting out from them*
- *I would like to see a focus on involving the recovery community in discussions. The focus can seem to learn too much to the punishment end of the resolution scale and away from treating this as possibly, not always but possibly an indication of a serious problem that requires intervention.*
- *More kid involvement, more kid friendly.*
- *Too early to comment, Erica just started. I expect big things to happen.*

Comfort Level at Coalition Meetings

Coalition members were asked if the environment of coalition meetings is one in which they feel comfortable participating.

Statement	Number of respondents
Very comfortable	6
Somewhat comfortable	9
Comfortable	1
Somewhat uncomfortable	1

Other comments mentioned:

- *Because I participate so rarely, I do not feel very comfortable speaking up. This has nothing to do with the tone of the group!*
- *Too cold*
- *Coalition meetings have a diverse and respectful air. That's a testament to leadership!*

PARTICIPATION OUTSIDE OF MEETINGS

Those who reported that they do not regularly attend meetings were asked a series of questions. Eleven coalition members answered these questions.

Staying Connected

Members were asked if they do not regularly attend coalition meetings, how they stay connected to the coalition. They were allowed to select multiple responses.

Statement	Number of respondents
Review meeting minutes	10
Volunteer for coalition initiatives/strategies	4
Meet or talk with director/coordinator regularly	3
Learning about prevention	2
Participate in subcommittee meetings	1
Visit website frequently	1

Other ways coalition members reported staying connected were: *emails* (2)

Reasons Why Do Not Attend Coalition Meetings

Members were asked if they do not regularly attend coalition meetings, why they are not able to attend. They were allowed to select multiple responses.

Statement	Number of respondents
The time does not fit with my schedule	6
The day does not fit with my schedule	5
Unclear of my role within the coalition	2
I do not feel it is a good use of my time	2
I am too busy	2
I participate with the coalition in other ways	1

Other reasons given:

- *I changed my job*
- *I am very busy and so must prioritize*
- *Family member illness*
- *My counseling time problems*

COALITION FEEDBACK

Coalition Mission and Goals

Coalition members were asked if they have a clear understanding of the mission and goals of the coalition.

Statement	Number of respondents
Yes	12
No	0
Not sure	4

Coalition Communication

Coalition members were asked if the coalition communicates the right amount and type of information (ex. Meeting minutes, email updates) to keep members well informed of its activities and plans.

Statement	Number of respondents
Yes, the TYPE of information being distributed keeps me well-informed	12
Yes, the AMOUNT of information being distributed keeps me well-informed	9
No, the TYPE of information being distributed does not keep me well-informed	2
No, the AMOUNT of information being distributed does not keep me well-informed	1
I would like to hear more often about ways to get involved	1
Information is disseminated in a timely manner	3

Other response given:

- *I'd like to receive the minutes via email.*

Coalition Representation

Statement	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
I feel the coalition is representative of the community.	3	6	4	4	0

Groups that are missing:

- *Police at the meetings consistently*
- *BOS or Town Manager*
- *Underserved/underprivileged*
- *Diverse population representatives*

Comfort Talking About Coalition

Coalition members were asked if they feel they can comfortably talk about Ashland Decisions at Every Turn and their current plan to reduce youth substance use in Ashland.

- 12 coalition members said 'Yes'.
- 3 members said 'No'.

Members were also asked what tools or support they need to help them do this. The following responses were given:

- *Would be helpful to have access to goals & planned strategies of the Coalition.*
- *There should be a "maybe" button here! I can speak comfortably about what the purpose of the coalition is, but not details about the current plan.*
- *An elevator pitch and a cheat sheet of volunteer roles to describe*
- *I need organized talking points about the broad issues and how these issues can be addressed. The Principals and the Chief know this stuff. Talking points updated annually or as appropriate are needed. We also need emissaries out into the community. Age grouped within age group; parents to parents. As a geezer, I can take the elders in the Senior Center.*

What Coalition Members Like About Being a Member

Coalition members were asked what they like most about being a member of the Ashland Decisions at Every Turn coalition. The following responses were given:

- *Continuing the good work begun in our community probably 20 years ago to address health education issues with our children, specifically substance use/abuse.*
- *I wish to make more connections with those in this town. I have little opportunity to do so because I can attend the meetings so rarely.*
- *The thought/hope that we can reduce substance use in Ashland*
- *Being around like minded community members!*
- *Energy I feel that the group has and even when things were not in our favor we never gave in or up!*
- *The goals and mission of this group are critical needs within our or any community*
- *I believe that by publishing articles in the Ashland Directions help educate the community on how to reduce the use of drugs in our youth.*
- *Collaboration to make our corner of the world a better place. It's really good; there's always room to improve.*
- *I care about kids. The Coalition is focused on kids.*

Biggest Internal Challenges to Coalition

Coalition members were asked to define the biggest internal (within the coalition) challenges Ashland Decisions at Every Turn needs to address to maximize the impact of the coalition. The following responses were given:

- *To make sure the coalition serves the greater good of the community and not only the good of the coalition.*
- *We/you need to get more involvement from other sectors of the community.*
- *Chain of command; who's in charge of what; Roles*
- *Keeping members engaged and feeling like they have added value*
- *Apathy, "Someone else will do it", lack of creativity; I'm guilty of all of these...*
- *Inclusion of the recovery community*
- *The message and the need to stay as one unit; this is an asset with coalition; we stay on point. There is clarity when this happens.*
- *Getting the facts that are needed then educate the community.*
- *Brand recognition strategy, identifying and implementing stakeholder roles.*
- *Get parental attention and buy-in! This actually is an external but this is a "do it here at home in Ashland" committee. We need their commitments. Too frequently it seems that we get a "not my child" feedback.*

Biggest External Challenges to Coalition

Coalition members were asked to define the biggest external (in Ashland, the state, etc.) challenges Ashland Decisions at Every Turn needs to address to maximize the impact of the coalition. The following responses were given:

- *Collaboration to build acceptance and buy-in, and collaboration to ensure efficient use of resources.*
- *Educating the public about the seriousness of underage usage of all substances.*
- *Need greater buy in from the Ashland community as a whole to institute systemic change.*
- *Expand membership*
- *Entrenched cultural values and beliefs. Counter-productive community attitudes. "Kids will be kids..." "We did it when we were kids, and we're OK..." "I'd rather have them drink/ smoke weed under my supervision so I can take their keys..." Apathetic, passive parenting in general. Adults and parents who make excuses for and enable kids.*
- *More visibility*
- *To keep the outside people in tune with our message and concerns; that we must listen to learn and learn to listen so that we are current with the ongoing situations that come up*
- *To realize there really is a drug crisis that the residents need to be aware of and work together to help our youth.*
- *Brand recognition and PR for increased participation and respect.*
- *No idea. We have the funding. I am totally suspicious about broader political involvement which to me is more interference than assistance. We need to be able to call on them as appropriate. They do not need to be "involved". Involvement typically translates into Reps "being seen" in my experience. I would want to see the involvement of School Professional staff and Police and Fire Professional staff at all appropriate learning and information sharing seminars and gatherings within their peer groups. I would want Erica to feel and be free to attend and share info and experiences within her peer group.*

COALITION MEMBERSHIP

Membership

Coalition members were asked if they consider themselves a “member” of the coalition.

- 11 respondents indicated ‘Yes’.
- 3 respondents indicated ‘No’.

Comments given:

- *Because of my professional experience in health education (most recently in tobacco treatment) and my commitment to our community, I stay connected to the coalition by keeping up with their activities. Due to my current work schedule, I am unable to attend meetings unless there is a strong need for the extended group to attend.*
- *Where is the "somewhat" button? Since I rarely get to a meeting, I haven't formed ties that continuity would bring me.*
- *While I feel a member of the coalition, my participation is best described as on hold for the reason mentioned earlier.*
- *Because at the beginning stages I was present and my participation was there. Because of the new time it conflicts with the time I can spend with the coalition group. It bothers me because I believe in what we are doing and what the group has accomplished.*

Coalition members were asked what they believe qualifies an individual as a coalition “member”

Statement	Number of respondents
Assists with coalition activities	13
Regularly attend meetings	11
Receive coalition emails	5

Other comments given:

- *Provides support to the coalition's strategies and initiatives, which may be provided in various ways.*
- *Considers and thoughtfully shares insight*
- *Actively contributes to prevention initiatives and healthy living*

Feel Valued as a Coalition Member

Coalition members were asked to response to the following statement.

Statement	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
I currently feel valued as a coalition member.	5	8	2	0	0

Contribution to Coalition

Coalition members were asked in what ways they contribute their knowledge/skills/connections to the coalition. The following responses were given:

- *I try to keep informed of coalition initiatives and offer information on community/state resources and best practices as I become aware and updated myself through my job in tobacco treatment.*
- *I do not contribute as much as I feel I ought to. I do, however, have experience working with youth.*
- *Through professional affiliations.*
- *Involved with students and parents and local task forces in area, also speaking and interventions*
- *Board of Health engagement*
- *By making sure their articles are published in the Ashland Directions.*
- *Recruiting, collaboration, participation*
- *Active in discussion, fund small projects.*

Opinion is Heard

Coalition members were asked to response to the following statement.

Statement	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
My opinion is heard within the coalition.	6	5	3	0	0

Additional comments provided:

- *When I have spoken, I think I have been heard.*
- *I wish I could attend more meetings, but my work hours do not permit; therefore, I think it takes away my total involvement with the group. If we could schedule a time that is good for all I think that would benefit us all.*

STAFF FEEDBACK

Coordinator Constructive Feedback

Coalition members were asked what constructive feedback they have for the Coalition Coordinator, Erica Dinerman. Responses follow:

- *I notice throughout the calendar year that meetings are the 1st Tuesday of the month & find that often that causes me to miss meetings. The first Tuesday is often the day after Labor Day, 2nd day after kids get back to school after New Years. I would prefer the 2nd Tuesday of the month.*
- *Take risks! Consider adding a back room arm twisting, deal making style to the bag of tricks! Hard to do, particularly with volunteers. Erica's both tough and a good listener, and could do it. She probably already does it and I don't even know!*
- *I think now that we have the grant, we have to carry out our mission. I think that is very possible with the group as a whole, we seem to be focused on what the messages and goals are!*

Director Constructive Feedback

Coalition members were asked what constructive feedback they have for the Coalition Director, Amy Turncliff. Responses follow:

- *As a parent of college children and a health educator with decades of experience, I've found that we can't keep our kids away from all the dangers in life. Often they will be forced to make choices on their own, so for those instances we should make sure that health education includes opportunities that prepare them to evaluate consequences, know their own values and make sound decisions for themselves. I've seen over the years that sometimes a moderate position is a sound one. We should strive to help people to become better at making healthy decisions rather than removing all the options & making the decisions for them, because science & technology are always changing and what's in will be out & what is out may come back in.*
- *Continue to stay positive. It's a real strength of Amy's, and it matters!*
- *I think she inspires us all by her focus and work ethics - I welcome our talks together*

Chair Constructive Feedback

Coalition members were asked what constructive feedback they have for the coalition Chair, Liz Byrnes. Responses follow:

- *[I have] offered to assist them as they hone this wonderful organization they've built.*
- *I really hope Liz makes a long term commitment to being chair. She's excellent!*
- *Like Amy, she takes charge and leadership energies are her assets*

Contact Information

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