

# Delaware SPF-SIG Community Readiness Assessment

Please  in the square that best reflects your knowledge of substance use and abuse problems and the initiatives/activities designed to prevent them in the community on which you are reporting.

## RESPONDENT DEMOGRAPHICS

1. Age:

- 12-17 yrs
- 18-20yrs
- 21-25 yrs
- 26-35 yrs
- 36-45 yrs
- 46-55 yrs
- 56-65 yrs
- 66 yrs and older

2. Gender:

- Male
- Female

3. Race/Ethnicity (check ALL that apply):

- African American/Black
- American Indian/Alaskan Native
- Asian American
- Hispanic/Latino
- Native Hawaiian or other Pacific Islander
- White/Caucasian
- Other, please specify: \_\_\_\_\_

3a. Race/Ethnicity (check which one you most identify with):

- African American/Black
- American Indian/Alaskan Native
- Asian American
- Hispanic/Latino
- Native Hawaiian or other Pacific Islander
- White/Caucasian
- Other, please specify: \_\_\_\_\_

4. Please PRINT the name of the SPF-SIG grantee/community you are reporting for in the box below:

5. Are you a resident of the community for which you are reporting?

- Yes
- No

6. Please identify the group(s) you represent for the purpose of this survey

(check ALL that apply):

- Government
- Law Enforcement
- Youth Serving Organization
- Coalition/Council/Task Force
- Social/Human Service Agency
- School
- Neighborhood/Community Group
- Public Health
- Mental Health Service/Provider
- Faith-Based Organization
- Substance Abuse Prevention Agency/Provider
- Substance Abuse Treatment Agency/Provider
- Youth
- Parent
- Other, please specify: \_\_\_\_\_

## SUBSTANCE USE PROBLEMS

7. In your opinion, which ONE substance is of greatest concern for **12-17 yr olds** in this community?

- Alcohol
- Tobacco
- Marijuana/Hashish
- Cocaine/Crack
- Heroin
- Hallucinogens
- Inhalants
- Prescription Drug Misuse (e.g. pain killers, tranquilizers, stimulants or sedatives)
- Other, please specify: \_\_\_\_\_

8. In your opinion, which ONE substance is of greatest concern for **18-20 yr olds** in this community?

- Alcohol
- Tobacco
- Marijuana/Hashish
- Cocaine/Crack
- Heroin
- Hallucinogens
- Inhalants
- Prescription Drug Misuse (e.g. pain killers, tranquilizers, stimulants or sedatives)
- Other, please specify: \_\_\_\_\_

9. In your opinion, which ONE substance is of greatest concern for **21-25 yr olds** in this community?

- Alcohol
- Tobacco
- Marijuana/Hashish
- Cocaine/Crack
- Heroin
- Hallucinogens
- Inhalants
- Prescription Drug Misuse (e.g. pain killers, tranquilizers, stimulants or sedatives)
- Other, please specify: \_\_\_\_\_

10. In your opinion, which ONE substance is of greatest concern for **26-65 yr olds** in this community?

- Alcohol
- Tobacco
- Marijuana/Hashish
- Cocaine/Crack
- Heroin
- Hallucinogens
- Inhalants
- Prescription Drug Misuse (e.g. pain killers, tranquilizers, stimulants or sedatives)
- Other, please specify: \_\_\_\_\_

11. In your opinion, which ONE substance is of greatest concern for **persons 66 years of age and older** in this community?

- Alcohol
- Tobacco
- Marijuana/Hashish
- Cocaine/Crack
- Heroin
- Hallucinogens
- Inhalants
- Prescription Drug Misuse (e.g. pain killers, tranquilizers, stimulants or sedatives)
- Other, please specify: \_\_\_\_\_

The next five questions ask what you believe **community members**' (i.e. residents of this community) attitudes are regarding substance abuse problems.

12. How much of a problem do **community members** (i.e., residents of this community) think each of the following substances is for **youth ages 12- 17**?

	1=Not A Problem	2=A Minor Problem	3=A Significant Problem	
			1 2 3	Don't Know
a. Tobacco.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
b. Marijuana.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
c. Other Illicit Drugs (e.g. cocaine, amphetamines, heroin).....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
d. Prescription Drugs (e.g. pain killers, sedatives, tranquilizers).....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
e. Alcohol.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>

13. How much of a problem do **community members** (i.e. residents of this community) think each of the following substances is for **young adults ages 18 to 20**?

	1=Not A Problem	2=A Minor Problem	3=A Significant Problem	
			1 2 3	Don't Know
a. Tobacco.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
b. Marijuana.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
c. Other Illicit Drugs (e.g. cocaine, amphetamines, heroin).....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
d. Prescription Drugs (e.g. pain killers, sedatives, tranquilizers).....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
e. Alcohol.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>

14. How much of a problem do **community members** (i.e. residents of this community) think each of the following substances is for **young adults ages 21 to 25**?

	1=Not A Problem	2=A Minor Problem	3=A Significant Problem	
			1 2 3	Don't Know
a. Tobacco.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
b. Marijuana.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
c. Other Illicit Drugs (e.g. cocaine, amphetamines, heroin).....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
d. Prescription Drugs (e.g. pain killers, sedatives, tranquilizers).....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
e. Alcohol.....			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>

15. How much of a problem do **community members** (i.e. residents of this community) think each of the following substances is for **adults ages 26 to 65**?

	1=Not A Problem	2=A Minor Problem	3=A Significant Problem		Don't Know
a. Tobacco.....			1 2 3	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
b. Marijuana.....				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
c. Other Illicit Drugs (e.g. cocaine, amphetamines, heroin).....				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
d. Prescription Drugs (e.g. pain killers, sedatives, tranquilizers).....				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
e. Alcohol.....				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>

16. How much of a problem do **community members** (i.e. residents of this community) think each of the following substances is for **adults ages 66 and older**?

	1=Not A Problem	2=A Minor Problem	3=A Significant Problem		Don't Know	
a. Tobacco.....				1 2 3	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
b. Marijuana.....					<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
c. Other Illicit Drugs (e.g. cocaine, amphetamines, heroin).....					<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
d. Prescription Drugs (e.g. pain killers, sedatives, tranquilizers).....					<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
e. Alcohol.....					<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>

## COMMUNITY AWARENESS

The next set of questions asks about your opinion concerning **community members'** attitudes regarding substance abuse prevention. Please tell us how much you agree or disagree with each of the following statements.

17. I think that most residents in this community...

1=Strongly Agree      2=Somewhat Agree      3=Somewhat Disagree      4=Strongly Disagree

	1	2	3	4	Don't Know
a. Are concerned about preventing alcohol abuse.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are concerned with preventing other drug abuse.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Believe that youth, regardless of economic/class background, are at risk of substance abuse.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Know about the community programs that are working to prevent alcohol and drug abuse.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Would support community or state ordinances that discourage underage drinking.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Believe it is possible to prevent alcohol and other drug problems among youth.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Feel alcohol and other drug prevention programs are a good investment for the community.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Believe that prevention programs for youth are effective at preventing substance abuse.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Are willing to support substance abuse prevention programs with county/city tax dollars.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Believe that youth, regardless of ethnicity, are at risk of substance abuse.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Feel that it is okay for youth to drink alcohol occasionally.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Believe the use of alcohol and other drugs is a private matter that should be dealt with at home.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Believe enforcement of liquor laws should be a priority (e.g. sales to minors, drunk driving arrests).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Think that the occasional use of marijuana is not harmful.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Feel that youth should be able to drink at parties with parental supervision.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Believe that it is okay for teens to drink if they don't drive.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Feel that it is okay for adults to drive after having one or two alcoholic drinks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Believe that it is okay for adults to get drunk occasionally.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Think that it is risky to drink alcohol while taking prescription medications.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SUBSTANCE ABUSE PREVENTION RESOURCES/ASSETS**

18. Communities implement a variety of strategies to prevent alcohol and other drug use. Please indicate the degree to which you feel each of the following strategies is functioning effectively in this community. Check one answer for each strategy.

1=Does Not Exist      2=Ineffective      3=Somewhat Effective      4=Very Effective

	1	2	3	4	Don't Know
a. Coalition/council/task force that addresses substance abuse.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Community policing programs or services.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Community laws and policies that discourage substance abuse (city/county ordinances, zoning, server training) ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Enforcement of community laws/policies that discourage substance abuse (citizen watch, server stings)...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Media advocacy (press releases/conferences and other media approaches to advocate for policy change).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Social marketing (PSAs, poster campaigns, other health communications aimed at changing behaviors).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Faith-based youth groups.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Information distribution (brochures, fact sheets, videos or presentations).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Youth life/social skills training programs (assertiveness, communication, drug refusal, problem-solving).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Parent education programs/parenting skills training.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Peer leader or peer helper programs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Mentoring programs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. School-based substance abuse education (DARE, health curriculum).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Teen center/club (Rec, drop-in, YMCA, Boys and Girls Club).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Youth community action groups (youth councils).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Structured youth development activities (sports leagues, theater and arts programs).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Supervised after school programs for elementary school students.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Local business organizations dedicated to supporting community initiatives.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Screening and brief intervention for substance problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t. Counseling programs (mental health services).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u. Adolescent substance abuse treatment services.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Adult substance abuse treatment services.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
w. Recovery support activities (AA and other 12 step groups, recovery centers).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. In your opinion, which **ONE** of the above strategies is most needed in this community?

## BARRIERS

20. In your opinion, how much do each of the following issues limit or pose a barrier to alcohol and other drug prevention activities in this community?

	1=Not A Barrier	2=A Moderate Barrier	3=A Large Barrier	Don't Know
a. Lack of leadership.....	1	2	3	<input type="checkbox"/>
b. Lack of coordination among organizations and groups.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Too few community members with time or willingness to volunteer.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Lack of consensus on how to address substance abuse issues.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Lack of political support for substance abuse prevention.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Substance abuse is not considered a priority problem in our community.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Lack of a strategic plan to address substance abuse prevention needs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Insufficient awareness of current efforts among community members.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Limited financial resources to address substance abuse in the community.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Lack of knowledge of effective strategies to address substance abuse problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Lack of community buy-in that substance abuse is an important issue.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Lack of trained staff .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Lack of programs with culturally competent staff.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Perception that substance abuse is a personal problem, not a community problem.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PLANNING**

21. How would you rate the community’s level of readiness to initiate the following substance abuse prevention activities?

	1=Not Ready	2=Low	3=Medium	4=High	Don't Know
a. Collect data on the nature of local substance abuse problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Identify available resources for substance abuse prevention (personnel, financial, organizational).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Identify community members’ abilities to act as resources to meet community needs (asset mapping).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Secure support for prevention from local policy makers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Utilize needs assessment data to plan prevention programs and policies.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Develop culturally appropriate prevention programs and strategies.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Raise community awareness of substance abuse problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Improve services and programs for substance abuse prevention.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Convene community meetings to address substance abuse issues.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Collaborate with organizations concerned with preventing other types of problems (HIV, violence).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Allocate local funds to substance abuse prevention in the community.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Develop policies related to or specifically for substance abuse prevention in the community.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Identify the barriers to substance abuse prevention in the community.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Develop a strategic plan to address substance abuse in the community.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. What types of substance abuse prevention data (i.e. levels of use, risk and protective factors, and inventories of programs) are available in this community? Check **ALL** that apply that you know about

- Census data
- Community household surveys
- Law Enforcement data (arrests, DUI)
- Key informant interviews
- Inventory of programs
- School data (achievement, suspensions, truancy)
- School surveys
- Public meetings or forums
- Focus groups
- Alcohol/drug related hospital visits/admissions
- Public health statistics (mortality/morbidity rates)
- Public safety data (motor vehicle accidents)
- None available
- Don't know
- Other, please specify \_\_\_\_\_



23. What barriers have limited the community's ability to collect data? Check **ALL** that apply.
- The community does not see the need to collect data
  - Lack of understanding of how to collect data
  - Lack of understanding of how to use data
  - Lack of trained volunteers/staff for data collection
  - Lack of trained volunteers/staff to interpret data
  - Lack of community leadership support to collect data
  - Unable to gain access to data sources (schools, students, government personnel, hospital information)
  - Lack of funds to support data collection activities
  - Uncertainty about which data to collect
  - Lack of cooperation among stakeholders
  - Concerns about negative publicity
  - Don't know
  - Other, please specify \_\_\_\_\_

24. If your community does collect data, how are the data used? Check **ALL** that apply.
- For strategic planning/program development purposes
  - For budgeting purposes
  - To evaluate programs/policies
  - To advocate for policy change
  - To leverage grant funding
  - To connect people with needs to people with resources
  - To connect youth and adults to natural support systems
  - The community does not collect data
  - Don't know
  - Other, please specify \_\_\_\_\_

25. Using the following list, please identify which stage of readiness for change/action for substance abuse prevention best describes this community. Select only **ONE**.

- This community tolerates or encourages substance abuse.
- This community has little or no recognition of the substance abuse problem.
- This community believes that there is a substance abuse problem, but awareness of the issue is only linked to one or two incidents involving substance abuse.
- This community recognizes the substance abuse problem and leaders on the issue are identifiable, but little planning has been done to address problems and risk factors.
- This community is planning for substance abuse prevention and focuses on practical details, including seeking funds for prevention efforts.
- This community has enough information to justify a substance abuse prevention program and there is great enthusiasm for the initiative as it begins.
- This community has created policies and/or more than one substance abuse prevention program is running with financial support and trained staff.
- This community views standard substance abuse programs as valuable, new programs are being developed to reach out to at-risk populations and there is ongoing sophisticated evaluation of current efforts.
- This community has detailed and sophisticated knowledge of prevalence, risk factors, and substance abuse program effectiveness and the programming is tailored by trained staff to address risk factors within the community.

26. Please provide any additional comments or concerns that you feel are important to understand substance abuse prevention needs and readiness in this community.

**Please place the completed survey in the enclosed self-addressed stamped envelope and return it to the Center for Drug and Alcohol Studies, University of Delaware, 257 E. Main Street, Newark, DE 19716-2582. If you have any questions, please call Steve Martin at the Center 831-6107 or send an email to [martin@udel.edu](mailto:martin@udel.edu)**

**THANK YOU!**