

Partnership for Success II Grant – Special Conditions of Award Utah

1. A behavioral health disparities impact statement that includes all sub-populations identified in your proposal.

Acknowledging the diversity, culturally and linguistically, throughout the entire State of Utah is essential to being able to provide appropriate and effective strategies to Utah's citizens. The Division of Substance Abuse and Mental Health (DSAMH) recognizes that there are multiple factors that can impact an individual's health and outcome.

Utah will use the Healthy People 2020 health disparity definition as guidance. It defines health disparity as a "particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion."

Based on the information that is available at this time, Utah will target the regions identified as 1, Northern Utah (Bear River, Weber, Davis, Tooele counties); 2, Salt Lake (Salt Lake County); 3, Central (Utah, Wasatch and Summit counties); 4, Eastern Utah (San Juan, Four Corners, Northeastern counties); 5, Southern Utah (Southwest and Central counties). These areas are together based upon a number of factors, including rural, suburban, and frontier populations. In one case, a strong community with a number of protective factors was paired with a community that has struggled in implementing strategies with the idea that the stronger community will be able to mentor the struggling community. The other areas have similar cultural values and data.

It is recognized that each of these regions will still be unique – for example Salt Lake is the most populous county and is also home to a multitude of refugees (Salt Lake is a Refugee City). In contrast Eastern Utah is home to the oil fields and National Parks, both which makes the population fluctuate depending on the season.

In 2012, the state of Utah had a projected population of approximately 2,855,287 according to the United States Census Bureau. Utah is one of the youngest states in the nation, with over 31% of the population under the age of 18 (vs. 24% for the nation), and only 9% of the population over the age 65 (vs. 13% for the nation). In terms of race, the vast majority of Utah's population is White (92%), with small percentages reporting Asian (2.2%), multi-racial (2.2%), American Indian (1.5%), Black (1.3%) and Pacific Islander/Native Hawaiian (1%). In terms of ethnicity, 13% of the state's population identified as Hispanic/Latino in 2012. Educationally, over 90% of Utahns have received a high school diploma (or

equivalent), and 30% of residents over the age of 25 have a bachelor's degree or higher. Utah enjoys relatively low unemployment (6.5% vs. 8.7% [total unemployed]) and poverty rates compared to the nation (11.4% vs. 14.3%), as well as a higher than average median household income (\$57,783 vs. \$52,762). However, because of Utah families are larger than average, per capita income in Utah trails that of the nation (\$23,650 vs. \$27,915).

In 2010, four counties were considered urban, 12 rural, and 13 were considered frontier status. Seventy-five percent of the state's population resides in the four northern "Wasatch Front" counties of Utah, Salt Lake, Davis and Weber (which comprise only 5% of the state's land mass). This dense population distribution ranks Utah in the top ten most urbanized states in the U.S. (#8 in 2010).

District	Youth 30 Day Alcohol: % Used (High School)		Youth Binge Drinking: % Used (High School)		Youth Perceived Risk of Alcohol: % Moderate to Great Risk (All grades)		Youth Peer Disapproval: % Wrong or Very Wrong (All grades)		Youth Parental Disapproval: % Wrong or Very Wrong (All grades)	
	2009	2011	2009	2011	2009	2011	2009	2011	2009	2011
Northern Utah	12.7	14.0	8.1	9.8	81.2	82.2	88.7	91.1	94.8	94.6
Salt Lake County	20.4	18.0	12.7	12.8	76.1	79.4	84.1	88.2	92.9	93.5
Central Utah	8.9	8.5	5.5	6.6	86.6	86.3	92.8	93.6	97.0	96.9
Eastern Utah	20.2	15.2	13.3	9.8	76.2	76.3	84.1	89.3	92.9	92.4
Southern Utah	12.9	11.4	9.4	8.9	82.1	81.8	89.5	91.7	96.1	95.2
State of Utah	15.0	13.9	9.5	10.0	80.4	81.9	87.8	90.4	94.6	94.7

Prescription Drugs Indicators

District	Youth 30 Day Rx Narcotics: % Used (High School)		Youth 30 Day Rx Sedatives: % Used (High School)		Other Narcotics ED Encounters ¹ (2008-2010)		Methadone ED Encounters ² (2008-2010)		Drug Poisoning Deaths ³ (2009-2011)		Adult Past Year Rx Pain Killer Use (2010)	Adult Past Year Rx Pain Killer Use (2010)
	2009	2011	2009	2011	Number	Rate per 100,000 pop	Number	Rate per 100,000 pop	Number	Rate per 100,000 pop	% Used 12-17	% Used 18-25
Northern Utah	2.9	1.9	3.2	3.2	785	37.1	113	5.4	361	17.17	n/a	n/a
Salt Lake County	3.1	2.0	4.1	3.1	1058	36.1	214	7.2	591	19.67	n/a	n/a
Central Utah	1.7	1.3	2.4	1.8	437	28.8	72	4.6	266	17.55	n/a	n/a
Eastern Utah	2.9	2.5	2.3	2.8	101	33.1	18	3.6	63	21.8	n/a	n/a
Southern Utah	2.4	1.2	3.4	2.4	234	30.9	79	10.5	127	17.55	n/a	n/a
State of Utah	2.7	1.7	3.3	2.8	2615	34.2	496	6.4	1408	18.39	5.6	8.2

Northern Utah

The Northern Utah Region demographics match up to the state demographics for the most part – predominately White racial population. The estimated population make up includes 1.1% African American, 1.5% Asian, 5.1% other race, and 2.6% 2+ races. There is an Hispanic population of 11.3%. There is a poverty rate of 7.4 (13,917 families) and an unemployment rate of 6.1.

Salt Lake County

Salt Lake County is the most racially and culturally diverse county in Utah. Whites still are the majority with 81.2%, but there are also 1.6% African-American, 3.3% Asian, 3.1% more than 2 races, and 8.3% define themselves as other races. Salt Lake has the largest Hispanic population of 17.1%. Salt Lake's poverty rate is 8.2 (19,542 families), so while this isn't the highest rate, it is the largest number of families impacted. The unemployment rate is 6.7.

Central Utah

Central Utah is comprised of 89.5% White, 1.3% Asian, 0.5% African American, 2.6% more than 2 races, and 4.8% define themselves as other races. The Hispanic population in Central Utah is 11.0%. The poverty rate is 8.4, which translates into 10,787 families. The unemployment rate is the lowest of the state of 5.9.

Eastern Utah

Eastern Utah is unique in Utah due to the fact that 10.6% of their population is Native American. In one community with Eastern Utah, the Native American population rises to 52%. In addition, Eastern Utah has an unemployment rate of 6.4 and ties for the highest poverty rate of 10.1.

Southern Utah

Southern Utah has the highest percentage of White population at 90.8%. They also have the highest unemployment rate of 8.6 and ties for the highest poverty rate of 10.1.

2. A plan regarding implementation of policies and procedures, including the translation of materials as appropriate, to ensure the cultural and linguistic needs of all sub-populations in your proposal.

Utah will use the Strategic Prevention Framework model to identify the unique cultural and linguistic needs of each region identified. After the needs are identified, each area will work with their own agencies and their policies to translate the program materials as appropriate. The agencies will contract with entities that can translate or adapt the strategies correctly.

It should be noted that since the regions will be following the SPF model, they will select the culturally appropriate strategies that fit their communities.

3. A plan of how you will review your data for outcomes regarding race, ethnicity, and LGBT status, including processes or programmatic adjustments to address identified issues, across the following domains:

- a. Program Services and activities development**
- b. Data collection activities**
- c. Data reporting, including access, use and outcomes measures**

Program services and activities development and implementation

Program services and activities will be developed to be inclusive and appealing to various audiences in terms of race, ethnicity and LGBT status. During the SPF model, the communities have identified organizations and individuals that work within the communities and represent various high risk subgroups. These organizations and individuals will be engaged in order to reach various subgroups and ensure the cultural competency of program activities.

Data collection activities

Data regarding race, ethnicity, sexual identity, satisfaction with program activities, prescription drug misuse/abuse and social norms will be collected via paper and on-line surveys for program activities, as appropriate. If it is a youth population, parental consent will be required to survey the youth. This may pose a barrier in collecting data regarding sexual identity. In addition to routine evaluation reporting, the evaluators will lead monthly calls with program teams from the communities to discuss program implementation, identify and share problems that have been encountered, and strategize revisions/any changes that could be made to enhance participant, staff, community partner and stakeholder engagement and satisfaction.

Data reporting, including access, use and outcome measures

Measures of overall participation rates and satisfaction with program activities will be reported in addition to measures of participation rates and satisfaction per subgroups (race/ethnicity/LGBT) per county in order to ensure various populations are being included and tracked. Expansion of programs, collaborative partners, and support for the initiative in all communities will be documented and reported on.

The evaluation contractor will also work with each sub-recipient to identify more proximal outcome and process data elements that will be used to evaluate the specific implementation activities of each sub-recipient community, being sensitive to collect data on the subgroups. Through this process, each sub-recipient will have an individualized evaluation plan, rather than forcing all sub-recipients to a “one size fits all” approach. As a result, the evaluation data collected will be meaningful and useful for both state staff in examining the outcomes in each community, as well as for community level staff in monitoring and improving their interventions.

Utah’s Student Health and Risk Prevention Survey data will also be used to monitor progress towards desired outcomes. Aggregate data will be reported as well as data based on key demographic characteristics available. Participant rates, satisfaction data and other feedback will be used to inform program adjustments throughout the grant to more effectively serve high-risk populations.

4. A plan for the establishment of policies and procedures to ensure adherence to the National Culturally and Linguistically Appropriate Services (CLAS) Standards to ensure the provision of effective care and services that are responsive to the:

- a. Diverse cultural health beliefs and practices;**
- b. Preferred languages;**
- c. Health literacy, and other communication needs of all sub-populations all sub-populations identified in your proposal.**

Each LSAA is under contract to ensure they implement culturally competent care and are monitored by DSAMH. Prevention providers are required to be certified in SAPT which includes developing prevention systems that include addressing issues of demographics, language, sexual identity and disabilities. In addition, a more thorough training is required for each staff member of the LSAA and their providers. The Division has a rigorous monitoring plan to address adherence to these contracts, followed by training and technical assistance when required.

The SPF PFS Project will enhance the accomplishments of the SPF in the aforementioned issues. Following the SPF, coalitions and providers address each of the five stages of the SPF with an interest of cultural sensitivity. Our system now allows for cross training among providers which provides a rich experience of diversity and expertise. Such a system is deployed throughout the state which gives more opportunities for our providers to learn from diverse groups and populations. The DSAMH and the greater Department of Human Services takes addressing issues related to demographics, language, sexual identity and disability seriously and has hired staff and developed a system of training to reach all providers of services in Utah. For an example of the efforts by the DHS, see <http://diversity.hs.utah.gov/>.

Our system is not perfect and under the SPF PFS grant, the Division will include ongoing assessments, monitoring, and technical assistance to the subrecipients in each of the 14 standards of the Culturally and Linguistically Appropriate Services in Health Care. We plan to fully utilize the expertise of CSAP staff and contractors to assist us in this area.