

Substance Abuse Prevention Collaborative (SAPC)
Lead Community Tewksbury
Cluster includes Dracut, Chelmsford, Lowell, Billerica, Tyngsborough, Westford and
Wilmington.

SAPC Overview and Grant Intent

Guidance document available at <http://masstapp.edc.org/substance-abuse-prevention-collaborative-sapc-guidance-document>

Research has shown that ***addressing the issue of underage drinking reduces the risk that youth will go on to use opioid and other substances.*** (See for example, Office of Juvenile Justice and Delinquency Prevention [OJJDP], 2012) <http://www.ojjdp.gov/pubs/241584.pdf>

BSAS Statement of Grant Intent

The SAPC initiative is intended to prevent underage drinking and other drug use across the Commonwealth, BSAS strongly encourages SAPC grant recipients to place the majority of their focus on the universal prevention of underage drinking through the implementation or amendment of local policies, practices, systems and environmental change. ***By addressing the issue of underage drinking, you will reduce the risk that youth will go on to use opioids and other substances.***

While this is not required, SAPC grantees may choose to use a subset of their resources on the universal prevention of other drug use, provided that they adequately address the issue of underage drinking with the majority of their SAPC funding and that there are substantial data to support other drug use beyond alcohol.

Definitions

1. **Cluster model:** The objective of this model, in which groups of municipalities or public health districts enter into formal, long-term agreements to share resources and coordinate activities, is to increase both the number and the capacity of municipalities across the Commonwealth to implement substance misuse and abuse prevention strategies among their combined populations.
2. **Community readiness:** The community's level of awareness of, interest in, and ability and willingness to support substance misuse and abuse prevention initiatives. More broadly, this connotes readiness for changes in community knowledge, attitudes, motives, policies and actions.

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3. **Consequences:** The social, economic, and health problems associated with substance misuse (e.g., increased mortality, morbidity, injury, school dropout and crime).
4. **Consumption patterns:** How people use, misuse and abuse substances, in terms of the frequency or the amount used. Consumption includes overall consumption, acute or heavy consumption, consumption in risky situations (e.g., while driving), and consumption by high-risk groups (e.g., youth, college students, pregnant women).
5. **Intervening variables:** Factors that have been identified through research as being strongly related to and influencing the occurrence and magnitude of substance use and related risk behaviors and their subsequent consequences. These variables, which include risk and protective factors, guide the selection of prevention strategies.
6. **Strategic Prevention Framework (SPF):** The model developed by the Substance Abuse and Mental Health Services Administration (SAMHSA), guides the selection, implementation, and evaluation of evidence-based, culturally appropriate, sustainable interventions, addressing substance misuse and abuse.

