STATE INFRASTRUCTURE INTERVIEW PROTOCOL

SPF SIG NATIONAL CROSS-SITE EVALUATION

DATE: |___|___| / |___|___| / |___|___|___|___|

INTERVIEWER NAME:________________________ ______________________

RESPONDENT NAME:_____________________________________________

RESPONDENT TITLE/POSITION:______________________________________

RESPONDENT ORGANIZATION ALFFILIATION:__________________________

STATE: [____]

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SPF SIG NATIONAL CROSS SITE EVALUATION
STATE INFRASTRUCTURE INTERVIEW PROTOCOL

Hello, this is (name) from the National SPF SIG Cross-Site Evaluation Team. Joining me for this call is (name), another member of the Cross-Site Team. Thank you for agreeing to participate in this interview. The SPF SIG Project Director suggested we speak with you because of your expertise about (State)’s prevention system. It is our understanding that we will be asking you about the following domains. (Name the specific domains that the respondent will address). Is this your understanding, as well? (If yes, proceed. If no, ask which domains s/he expected to discuss and list. Continue with interview, if possible.)

We are conducting this interview to help us understand (State)’s prevention system early in the SPF SIG process. We then plan to conduct follow-up interviews approximately once each year to track changes in the prevention system over time. Do you have any questions about this?

Before we proceed with the interview, I’d like to cover a few important issues. First, the interview will last about 60 minutes. Does this still fit your schedule? (If yes, continue. If no, ask how much time s/he has and say “We’ll cover what we can in that time.”)

Second, your participation in this interview is completely voluntary. You may choose to end this interview at any time, or not answer a specific question without any effect on your role in the project.

Third, we will make every effort to keep your answers confidential. Your name and position will not be connected with any of your responses. All responses will be combined and individual responses will not be identified in the reporting of results.

Finally, at times during this interview we will be referring to supplementary documents, including the following:

- Written vision or mission statement from lead ATOD agency
- Written strategic plan for prevention from lead ATOD agency
- Written guidelines for use of data systems by sub-state recipients of ATOD funds
- Written plan for developing a statewide ATOD prevention workforce
- Written plan or policy addressing cultural competence in the prevention system
- Written guidelines for selecting and implementing culturally competent interventions
- Evaluation/monitoring requirements for sub-state recipients of ATOD prevention funds.
(For any documents not obtained previously) We ask that you send copies of documents to Ann Schensky.

Ann Schensky  
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Madison, WI 53719  
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608-819-0109 X 21

Are there any other documents that you think would help us to understand the history or present state of prevention infrastructure in your state? (If yes, ask that these also be sent to Ann Schensky.)

If you have no objections, we would like to tape record this conversation. This will help us check our notes and ensure that we are accurately capturing your responses. The tapes will not be transcribed and will be erased once all the interviews have been analyzed. Is it OK if we turn the tape on? (If yes, proceed with interview. If no, say “That’s OK, we’ll proceed without the tape recorder.”)

As we begin the interview, let me remind you that we are talking about the overall (State) prevention system, not just the SPF SIG project. We are defining the prevention system as “the entire set of agencies, organizations, and persons that contribute to efforts to prevent substance abuse and related problems within the state.” As you respond about the prevention system, it may help to think about the lead ATOD prevention agency as being at the center of the system.

Finally, if you feel the SPF SIG has played, or will play, a role in influencing a domain that we are discussing, please say so.

OK, let’s begin.
A. STATE ORGANIZATIONAL STRUCTURE

First, we’d like to talk about the organizational structure of prevention activities in your state.

Authority

1. Is there an agency designated by the state government (for example, by the Governor or the Legislature) to be the lead agency responsible for ATOD prevention?
   - Yes
   - No (If no, skip to question 4)

2. If yes, please name the agency and its director.

3. Is the SPF SIG housed in the designated ATOD prevention agency?
   - Yes
   - No

Please tell me which state agencies are responsible for allocating the following funds:

4. Prevention Portion of the Substance Abuse Prevention and Treatment (SAPT) Block Grant

5. Safe and Drug Free Schools and Communities Act (SDFSCA)

6. Governor’s 20% Set Aside of SDFSCA

7. Other funds for ATOD prevention, including Tobacco Settlement funds

Is there a lead ATOD prevention agency or body that has the authority to:

8. Make programmatic decisions for the statewide ATOD prevention system?
   (Check all that apply)
   - Alcohol (Specify)_
   - Tobacco (Specify)_
   - Illicit drugs (Specify)_
   - Other (Specify)_

(End of page)
9. Make policy decisions for the statewide ATOD prevention system?  
*Check all that apply*

☐ Alcohol  (Specify)______________________________  
☐ Tobacco  (Specify)______________________________  
☐ Illicit drugs  (Specify)______________________________  
☐ Other  (Specify)______________________________

10. Allocate ATOD prevention resources for the statewide ATOD prevention system?  
*Check all that apply*

☐ Alcohol  (Specify)______________________________  
☐ Tobacco  (Specify)______________________________  
☐ Illicit drugs  (Specify)______________________________  
☐ Other  (Specify)______________________________

**Group Planning**

Next, we’d like to ask you about the process of group planning for ATOD prevention in your state.

11. Does a group of state-level decision makers convene to integrate ATOD prevention efforts?  

☐ Yes  
☐ No *(If no, skip to question 14)*

12. How often is this group scheduled to convene?  

☐ Monthly  
☐ Quarterly  
☐ Annually  
☐ Other: _____________

13. Which state-level agencies are represented in the state agency prevention planning group?  

a. __________________________  
b. __________________________  
c. __________________________  
d. __________________________  
e. __________________________  
f. __________________________

*Probe to find out which actually attend meetings and which participate actively.*
Do members of the state-level prevention planning group engage in:

14. Information sharing? □ Yes □ No
15. Broad based strategic planning? □ Yes □ No
16. Planning of specific prevention initiatives? □ Yes □ No
17. Planning co-funding for prevention activities? □ Yes □ No
18. Seeking prevention resources jointly? □ Yes □ No

Probe to find out which activities involve high levels of collaboration.

19. Does a group of state and sub-state level stakeholders convene to integrate state and sub-state-level ATOD prevention efforts?
   □ Yes
   □ No (If no, skip to question 21)

20. How often does this group convene?
   □ Monthly
   □ Quarterly
   □ Annually
   □ Other

Decision Making

21. Please describe the decision making process for major substance abuse prevention-related decisions (such as setting priorities and allocating resources) in the state prevention system.

   Probe for the extent to which each of the following is part of that process:
   a. Use of guidelines specified in written documentation
   b. Incorporation of input from sub-state stakeholders (individuals at the community level or who represent prevention agencies below the state level)
   c. Involvement of state-level prevention stakeholders
   d. Solicitation of input from the public

22. How are key decisions disseminated to the public?
B. PLANNING

Now we would like to ask you some questions about the process of prevention planning.

23. Could you please describe the overall prevention planning process in your state?

Vision and Mission Statements

24. Are there written vision or mission statements on substance abuse prevention that guides the statewide prevention system?

☐ Yes
☐ No (If no, skip to question 27)

25. Describe how the vision or mission statements were developed.

*Probe for the following information:*

a. *Use of input from multiple prevention-related agencies and other state government agencies or departments*

b. *Use of input from sub-state entities such as community-level stakeholders or prevention service providers*

26. How often are the vision or mission statements reviewed and updated/revised?

☐ Annually
☐ Every 2 years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: ____________________________

*Probe for information about the process used in reviewing and updating/revising the mission/vision statement.*

Strategic Planning

27. Does the state prevention system have a written strategic plan for substance abuse prevention?

☐ Yes
☐ No
28. How often is the strategic plan revised or updated?

☐ Annually  
☐ Every 2 Years  
☐ Every 3 years  
☐ Every 4-5 years  
☐ Other: _____________

_Probe for information about the process used in reviewing and updating/revising the strategic plan._

29. How would you characterize the level of support for the state strategic plan among various stakeholders?  
_Sources of support might include state-level leaders and decision makers, decision makers in state agencies involved in prevention, sub-state leaders and decision makers, and grassroots level prevention workforce members._

30. How would you characterize the impact of the state strategic plan on prevention decisions and activities in the statewide prevention system?

_Probe for information about the following domains in which the impact could have occurred:_

a. Substance abuse prevention policies  
b. Funding for prevention programs  
c. Prevention workforce development efforts

**Steps in Strategic Planning**

Now I am going to describe some steps in strategic planning. Can you tell me if your state is currently using each of these steps?

31. Data are used to identify target populations.

☐ Yes  
☐ No (If no, skip to question 32)

32. How often are data used to identify target populations?

☐ Annually  
☐ Every 2 Years  
☐ Every 3 years  
☐ Every 4-5 years  
☐ Other: _____________
33. Data are used to prioritize needs in target populations.

☐ Yes
☐ No (If no, skip to question 35)

34. How often are data used to prioritize needs in target populations?

☐ Annually
☐ Every 2 Years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: ______________

35. Data are used to identify needs for building systems capacity.

☐ Yes
☐ No (If no, skip to question 37)

36. How often are data used to identify needs for building systems capacity?

☐ Annually
☐ Every 2 Years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: ______________

37. Data are used to prioritize needs for building systems capacity.

☐ Yes
☐ No (If no, skip to question 39)

38. How often are data used to prioritize needs for building systems capacity?

☐ Annually
☐ Every 2 Years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: ______________
39. Long term goals and objectives based on assessed needs are established.

☐ Yes
☐ No (If no, skip to question 41)

40. How often are long term goals and objectives based on assessed needs reviewed and/or updated?

☐ Annually
☐ Every 2 Years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: _____________

41. Action plans are developed that identify tasks and strategies to achieve key objectives.

☐ Yes
☐ No (If no, skip to question 43)

42. How often are these action plans reviewed and/or updated?

☐ Annually
☐ Every 2 Years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: _____________

43. Resources necessary to ensure accomplishment of action plans are identified.

☐ Yes
☐ No (If no, skip to question 45)

44. How often are these resource allocations reviewed and/or updated?

☐ Annually
☐ Every 2 Years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: _____________
45. Please describe the resources available at the state level specifically for strategic planning, that is, focused effort to engage in data-driven prevention planning.

   Probe for the following types of resources provided specifically for strategic planning:
   a. Allocation of staff time
   b. Coverage for travel expenses
   c. Data analysis and summary reports
   d. Outside experts to help with the process
   e. The involvement of state-level prevention leaders

46. Please describe state-level resources made available specifically for strategic planning at the sub-state level.

   Probe for the following information about the types of resources provided by the state specifically for sub-state strategic planning:
   a. State-level staff time allocated to assist in the process
   b. Coverage for state-level staff travel expenses
   c. Data analysis and summary reports
   d. Outside expert help, if needed

47. Are there mechanisms for linking state and sub-state planning efforts?

   □ Yes
   □ No (If no, skip to question 49)

48. Please describe the mechanisms for linking state and sub-state planning efforts.

C. DATA SYSTEMS

(Note: The respondent should be familiar with the use of data systems, rather than the technical aspects of data systems)

Now we’d like to ask some questions about the data systems used in the state’s prevention activities.

Resources

49. How would you characterize your state agencies’ collaboration on the development and management of state prevention data systems?
50. Does a state-level group exist that organizes and manages prevention data systems?

☐ Yes
☐ No (If no, skip to question 52)

51. What types of data does this group organize and manage?

Probe for the following information about types of data and data sources:

a. ATOD consumption data
b. Data on ATOD related-problems or consequences
c. Data from sub-state entities (individuals at the community level or who represent prevention agencies below the state level)
d. Data obtained from public-use data files
e. Data provided by state-level prevention stakeholders
f. Data provided by sub-state prevention stakeholder
g. Data on prevention system capacity
h. Types of data available at state and sub-state level

52. Please describe how, if at all, sub-state level prevention stakeholders have input into the development and management of prevention data systems. Specifically, please tell me how the state-level prevention data group solicits input from sub-state prevention stakeholders.

Probe for specific mention of procedures for soliciting guidance from sub-state prevention stakeholders on the use of data for assessing prevention system capacity and infrastructure and for prevention planning and evaluation.

53. How would you characterize the state-level prevention data system group’s access to people with expertise in data system management (whether on staff or through contract), relative to the need for such expertise?

54. How would you characterize funding for building state-level prevention data systems capacity, relative to the need for such capacity building?
55. Please describe the single state agency (or SSA)’s stance on the use of the SAPT block grant funds for building data system capacity at the sub-state level.  *For example, do they allow or even encourage funds to be used for this?*

**Sub-state Expectations**

56. Are there written guidelines for the use of data systems by sub-state recipients of ATOD prevention funds?

☐ Yes
☐ No (If no, skip to question 59)

57. Have the guidelines been finalized?

☐ Yes
☐ No

58. Are the guidelines distributed to those applying for prevention funds?

☐ Yes
☐ No

59. What opportunities exist for exchanging information between state-level and sub-state agencies about data expectations, requirements and challenges?

*Probe for information about the types of stakeholders involved in these information exchanges.*

**Reports**

60. Please describe how state and sub-state level prevention stakeholders share epidemiological (“epi”) data.

*If data are shared, probe for specific mention of:*

a.  *Frequency with which data are shared*

b.  *State-community collaboration or collaboration among sub-state organizations on the development of reporting formats (for example, reporting templates)*

61. What guidance is provided to sub-state stakeholders about how to interpret epi data?
62. Please describe how state and sub-state level prevention stakeholders share data on statewide ATOD prevention system capacity.

   If data are shared, probe for specific mention of:
   a. Frequency with which data are shared
   b. State-community or sub-state collaboration on the development of reporting formats

D. WORKFORCE DEVELOPMENT

Now we’d like to ask some questions about prevention workforce development in the state.

Understanding Workforce Needs

63. Does the statewide prevention system have a formal, written definition of the ATOD prevention workforce that specifies who makes up the workforce? (for example, state employees, community leaders, prevention practitioners, volunteers, law enforcement)

☐ Yes  ☐ No

64. Please explain how, if at all, the adequacy (for example, size and composition) of the workforce is assessed.

   If workforce adequacy is assessed, probe for the following information:
   a. Frequency with which the adequacy of the number of staff is assessed
   b. Procedures for assessing staff size and composition (for example, web-based surveys, annual project management reports)

65. What are the requirements (credentials or certification) regarding workforce competencies?

   Probe for the following information:
   a. How these competency requirements are communicated to the prevention workforce
   b. How, if at all, workforce competencies are assessed
   c. Frequency with which workforce competencies are assessed.
66. Please explain how, if at all, workforce development needs (for example, training and technical assistance) are assessed.

Probe for the following information:
   a. Procedures for assessing workforce development needs (for example, web-based surveys, annual project management reports)
   b. Frequency with which training and technical assistance needs are assessed, if at all

Workforce Development Plan

67. Is there a written plan in place for statewide ATOD prevention workforce development?

☐ Yes
☐ No

68. Is the workforce development plan based on data or an assessment of workforce development needs?

☐ Yes
☐ No

69. Is the workforce development plan consistent with the state’s strategic plan for prevention?

☐ Yes
☐ No

70. How often is the workforce development plan reviewed and updated?

☐ Annually
☐ Every 2 years
☐ Every 3 years
☐ Every 4-5 years
☐ Other

71. Please describe how the plan is communicated to key prevention stakeholders.

72. What resources (human, fiscal, and technological) are allocated to ensure the implementation of the plan?

Probe for the following information: the level of resources allocated for workforce development in relation to the need for workforce development.
73. How, if at all, is the implementation of the plan monitored?

_Probe for the following information:
   a. *Frequency with which the implementation plan is monitored (annually, more or less frequently)*
   b. *How the results of this review are used, if at all, to address plan implementation fidelity issues that are uncovered,*
   c. *Procedures for assessing plan implementation (for example, web-based surveys, annual project management reports)*

74. How would you characterize workforce development opportunities provided to the state-level and sub-state level workforce? *Use examples as needed (for example, relevance, workforce awareness of opportunities, accessibility, cost, cultural appropriateness).*

_Probe for information about how, if at all, distance learning technologies are used.*

**Workforce Development Activities**

Please tell me which of the following workforce development activities have taken place during the last year:

75. Efforts to coordinate with academic institutions and professional associations to develop ATOD prevention curricula for use in higher education. □ Yes □ No

76. Continuing education opportunities □ Yes □ No

77. Mechanisms for career advancement in ATOD prevention □ Yes □ No

78. Coaching or mentoring programs for ATOD personnel □ Yes □ No

79. Mechanisms for developing prevention leaders □ Yes □ No

80. Efforts to increase the diversity of the prevention workforce □ Yes □ No

81. Efforts to build evaluation capacity in the prevention workforce □ Yes □ No

82. Efforts and resources to reduce turnover among the prevention workforce, including salary adjustments □ Yes □ No

83. Opportunities for multidisciplinary cross training and networking □ Yes □ No

84. Efforts to enhance the cultural competence of the ATOD prevention workforce. □ Yes □ No
E. EVIDENCE-BASED PROGRAMS, POLICIES, AND PRACTICES

Now we’d like to ask you some questions about the use of evidence-based programs, policies, and practices in the state.

Common Understanding of Evidence-Based Programs, Policies, and Practices

85. Are the criteria for defining evidence-based programs, policies, and practices consistent across state agencies?

☐ Yes
☐ No

86. Are the criteria for defining evidence-based programs, policies, and practices criteria consistent across state and sub-state prevention entities?

☐ Yes
☐ No

87. How is information on the criteria for evidence-based programs, policies, and practices disseminated to the ATOD prevention workforce?

Probe for the following specific information: To whom is this information distributed?

Use of Evidence–Based Programs, Policies, and Practices

88. Are SAPT block grant recipients required to use a specified percentage of funds on evidence-based programs, policies, and practices?

☐ Yes
☐ No (If no, skip to question 90)

89. What percentage of the funds is required to be spent on evidence-based programs, policies, and practices? ______%

90. Are SDFSCA block grant recipients required to use a specified percentage of funds on evidence-based programs, policies, and practices?

☐ Yes
☐ No (If no, skip to question 92)
91. What percentage of the funds is required to be spent on evidence-based programs, policies, and practices? ______%

92. Please describe resources available (for example, training, TA, and materials) to assist program providers in the selection of evidence-based programs, policies, and practices.

93. Please tell me about the resources available (for example, training, TA, and materials) to assist in the implementation of evidence-based programs, policies, and practices.

94. What resources are available (for example, training, TA, and materials) to assist local providers in appropriate adaptation of evidence-based programs, policies, and practices?

F. CULTURAL COMPETENCE

Now I would like to ask you some questions about the ways in which issues of cultural competence are addressed in the state.

Policies and Plans

95. Is there a written plan for addressing cultural competence in the statewide prevention system?
   □ Yes
   □ No (If no, skip to question 97)

96. Please describe how the implementation of the cultural competence plan is monitored and enforced.

   Probe for the following information:
   a. Frequency with which the cultural competency plan is monitored (for example, annually, more or less frequently)
   b. How the results of this review are used, if at all, to address plan implementation fidelity issues, if they exist
c. Procedures for assessing plan implementation (for example, web-based surveys, annual project management reports)

d. Follow-up action if the plan is not followed

97. Is there a written formal policy on culturally competent ATOD Prevention?

☐ Yes
☐ No (If no, skip to question 99)

98. How often is this policy reviewed?

☐ Annually
☐ Every 2 Years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: ______________

99. Please describe how the policy on culturally competent prevention is monitored.

100. How is noncompliance with the policy addressed?

Resource Allocation

101. Please describe how the state prevention system supports the use of culturally appropriate prevention strategies (for example, support may include funding, policies or processes or technical assistance).

Probe for descriptions of the following information:

a. Funding-contingent requirements to ensure culturally and linguistically competent practices

b. Resources, including services and materials, provided to sub-state entities to help them develop and implement culturally and linguistically competent practices,

c. Written guidelines for selecting culturally competent interventions

d. Written guidelines for implementing culturally competent interventions

e. Systematic processes for assessing inclusiveness and cultural appropriateness of prevention materials
G. EVALUATION AND MONITORING

Now we would like to ask you some questions about prevention evaluation in your state.

**Resources for Evaluation and Monitoring**

102. How would you characterize the availability of evaluation expertise (*for example, academic institutions, private research organizations*) for statewide prevention efforts relative to statewide needs for prevention evaluation?

103. Is there an evaluator--on staff or through contract--who provides evaluation services and technical assistance?
   - [ ] Yes
   - [ ] No (If no, skip to question 105)

104. Can you please describe the evaluator’s role and involvement in prevention evaluation efforts?

105. What other resources does the statewide prevention system have for evaluation?

106. Please tell me about state support for the use of SAPT block grant funds at the sub-state level for evaluation.

107. Please tell me about state support for the use of SAPT block grant funds at the sub-state level for monitoring the implementation of prevention activities.
**Evaluation and Monitoring Strategy**

108. Are sub-state recipients of state ATOD prevention funds provided with written guidelines by the state on evaluation and monitoring requirements?

☐ Yes
☐ No (If no, skip to question 110)

109. What kinds of evaluation are required (for example, outcome evaluation, process evaluation, or fidelity monitoring)?

110. Please tell me about the opportunities for state and sub-state prevention stakeholders to exchange information about evaluation expectations, requirements, reports, and challenges.

Probe for the following information:

a. Processes through which state and sub-state prevention stakeholders share evaluation data
b. Whether state and sub-state prevention stakeholders collaborate to determine which data should be collected for report
c. Whether state and sub-state prevention stakeholders collaborate to determine methods of data collection
d. Whether state and sub-state prevention stakeholders collaborate to develop evaluation report formats

**Evaluation and Monitoring Reports**

Next I would like to discuss evaluation reports produced in the state.

111. How often does the state issue evaluation reports on ATOD prevention?

*If no reports are issued, check here ☐ and go to question 114.*

☐ Annually
☐ Every 2 Years
☐ Every 3 years
☐ Every 4-5 years
☐ Other: _____________

112. Who are the target audiences for the reports (for example, policy makers, general public, prevention providers)?
113. How would you characterize the evaluation reports’ format in terms of suitability (for example, relevance, understandability) for intended audiences?

   Probe for guidance available to intended audiences about how to interpret evaluation data and reports.

114. What has been your experience in terms of the use of reports by policy makers and other non-research audiences?

115. In what ways does the statewide ATOD prevention system use evaluation data (process, outcome and fidelity data)?

   Probe for the following information:
   a. Whether evaluation data are used to review the prevention system’s performance relative to its goals and objectives
   b. Whether reviews are regularly scheduled, and if so, the frequency of the review

116. In what ways does the sub-state ATOD prevention system use evaluation data (process, outcome and fidelity data)?

   Probe for the following information:
   a. Whether (and how) sub-state entities use evaluation data to evaluate performance relative to goals and objectives
   b. Whether reviews are regularly scheduled, and if so, the review frequency

H. SYSTEMS SUSTAINABILITY
Now we’d like to ask some questions about how sustainability is addressed in the state.

Sustainability Efforts

117. Please describe sustainability efforts related to building workforce capacity.

118. Please tell me about any efforts to diversify funding streams to address sustainability.
119. Please describe the status of efforts to use multiple and coordinated prevention strategies to support prevention sustainability.

120. Please describe sustainability efforts in the realm of fostering community involvement and ownership.

121. Please describe sustainability efforts in the area of building public awareness and support for prevention.

122. How, if at all, are prevention sustainability efforts reviewed?

   Probe for the following information:
   a. Frequency with which the sustainability plan is monitored annually, more or less frequently)
   b. Description of the obstacles, if any, that have been identified during these reviews
   c. Description of procedures for addressing obstacles, if any were implemented

123. Please describe the process for soliciting state agency level input on prevention sustainability.

124. Please describe the process for soliciting sub-state agency level input on prevention sustainability.

125. Is there a line item (or items) in the state’s general revenue budget for ATOD primary prevention?

   ☐ Yes
   ☐ No

126. During the last two years, what additional federal funding has the state sought for ATOD prevention?
J. EXTERNAL EVENTS

Finally, we’d like to ask about events that have occurred in your state that may have an impact on the state’s prevention activities.

127. In the past 12 months, what external events or incidents have taken place that may have an impact on ATOD prevention activities in your state? (These could be things like new legislation, administrative changes, and significant changes in prevention funding sources or levels or even natural disasters.) For each event, please describe how it had an impact or may have an impact on your state's ATOD prevention activities.