ISSUES IN PREVENTION

Campus and Community Coalitions

Campus and Community Coalitions: Implementing Environmental Prevention Strategies
by John D. Clapp

Since the early 1990s common wisdom and a number of reports, such as A Call to Action: Changing the Culture of Drinking at U.S. Colleges (NIAAA 2002), contend that campus and community coalitions are an important component of comprehensive prevention programs in higher education. In fact, Environmental Management: A Comprehensive Strategy for Reducing Alcohol and Other Drug Use on College Campuses, a 1998 publication of the Higher Education Center, calls for formation of campus and community coalitions that focus on environmental change strategies as key to effective prevention.

In 1997, I directed a coalition-based prevention project based at San Diego State University called the Community-Collegiate Alcohol Prevention Partnership (C-CAPP). It used a large coalition of students, community leaders, law enforcement representatives, business representatives, and researchers to develop, implement, and evaluate environmental prevention strategies, including media advocacy, policy development and enforcement, a social norms campaign, increased DUI and underage drinking laws enforcement, and server training.

C-CAPP had about 110 community members and served 140,000 students at the county’s nine major campuses. One of the reasons for C-CAPP’s success in reducing the frequency of heavy alcohol use and certain related problems was the diversity of its membership. It included people from local police departments, state law enforcement organizations, regulatory agencies, community groups, prevention service providers, and businesses, including bar and restaurants owners whose customers are students, as well as campus representatives, such as health service personnel, campus police, and students.

While we had a large coalition in place to support the interventions, the heavy lifting, as it were, was accomplished through task forces that were focused on specific environmental changes that we wanted to accomplish. For example, our College Bar Task Force, many of whom were owners of bars that are frequented by college students, worked with bar owners to promote responsible beverage service practices and with media outlets on their advertising practices regarding drink specials at college bars. The Safe (Continued on page 2)
and Responsible Private Party Task Force targeted residents of houses in the college areas of San Diego who hosted parties where alcohol use and noise created unhappy neighbors. It worked with the San Diego Police Department to implement the city’s Community Assisted Party Program (CAPP). Under the program, if a house is the scene of a noisy party that generates a police visit twice in 31 days, it is “CAPPed.” That means the house cannot host another party for a full year. If the house violates the CAPP, a resident can be arrested on the spot, even if that person was not the cause of previous police calls.

C-CAPP, which was awarded a model program grant by the Department of Education in 2001, is but one example of how a coalition can be effective working in a very large metropolitan area. Other campuses and communities have developed different models of coalition-driven or -supported prevention efforts. For example, the Study to Prevent Alcohol-Related Consequences (SPARC) was a randomized community trial involving 10 universities in North Carolina (five intervention sites and five comparison sites). It was conducted between 2003 and 2007. SPARC aimed to reduce high-risk drinking behaviors and alcohol-related consequences among students through the mobilization of a campus and community coalition through a community organizing approach for planning and implementing environmental strategies focused on modifying social norms, policies, and enforcement practices. The SPARC community organizing process was made up of a series of connected steps conducted by a community organizer and campus and community coalition: sustainability, action, strategic planning, coalition building, and assessment. The community organizer was a central component to the SPARC approach and, in concert with a campus and community coalition, had a pivotal role in assisting in the carrying out of all aspects of the work. The model suggested that all five steps are required, beginning with assessment and following through to sustainability. The model also showed that the intervention involved a continual process of re-assessment.

(AMOD) A Matter of Degree: The National Effort to Reduce High-Risk Drinking Among College Students, a large-scale prevention project that started in 1996 and included 10 campuses nationwide, focused on campus and community coalitions as the main mechanism for achieving environmental change. The goals of AMOD were to test the efficacy of the environmental model to reduce high-risk drinking and its effects; create sustainable campus-community partnerships to address the entire student environment; and reduce secondary effects of high-risk drinking for both individuals and the community, including injury and death, violence, and campus and neighborhood disturbances, such as vandalism and noise. One of the underlying principles guiding the AMOD projects was that identification, discussion, and solutions for problems must be collaborative and involve city and campus governance, concerned citizens, law enforcement, and business.

An evaluation of the efficacy of the AMOD project in 2004 found promise for coalition-based environmental prevention strategies. An important factor in the successes of the AMOD campus and community coalitions was the degree to which they were able to implement those strategies. The AMOD sites that implemented greater depth and breadth of environmental programming reported consistent declines in consumption and harms. A lessons learned report says that a key element of success for AMOD projects was the structure and process for the campus and community coalition. It points out that while many campuses have a campus task force or committee to address alcohol issues, a campus and community coalition is something that is completely different. With a campus task force, the tendency at most universities is to focus on the students as the problem. But a campus and community coalition based on an environmental approach sees student behavior as the symptom of the problems. The most successful AMOD coalitions were those that were very thoughtful and deliberate in determining their membership. Rather than just establishing a checklist of campus and community stakeholders and inviting them to participate, project staff
engaged in a strategic process to identify those individuals who would be helpful to meeting the goals for the project.

The campus and community coalition at the University at Albany, State University of New York, is an example of a long-standing coalition that demonstrates how such coalitions can provide an opportunity to avoid misunderstandings between the student population and neighboring communities. Through its coalition with the city of Albany, the university has emphasized that it is devoted to improving the quality of life both for students living off campus and for their landlords and neighbors. Ensuring that community residents understand the purpose of a coalition helps gain participation and public support for its activities. A study found that Albany’s town-gown coalition “confirms the general wisdom that community mobilization, involving a mix of educational, civic, religious, and governmental agencies, is a key to successful prevention of substance abuse among college students. Essential to making community-based programs work is the formation of coalitions and interagency links that lead to a coordinated approach, with adequate planning and a clear division of responsibilities among coalition members. Where such programs do not exist, higher education officials can take the lead in forming similar citizen-led coalitions and moving them toward an environmental approach to prevention.”

Despite evidence that campus and community coalitions can be successful over time in implementing and sustaining environmental changes to reduce certain alcohol-related problems, these partnerships can be difficult to develop and maintain. One study points out that “effective coalition building requires multiple actions that vary in importance and intensity over the stages of development: recruiting, educating, and committing stakeholders; nurturing leaders; developing structures and processes that allow active stakeholder involvement; undertaking strategic planning efforts; implementing agreed-on strategies; refining actions through evaluation; and institutionalizing the partnership. Each phase presents its own challenges, all of which require time, resources, and creative solutions to overcome. Although campus–community partnerships hold promise for addressing environmental conditions both on- and off-campus, those charged with facilitating them need guidance.”

That said, there is much to be gained in terms of prevention in forging campus and community partnerships. Those campuses that have taken the initiative in working with their surrounding communities, and done so in the spirit of collaboration and mutual respect, have seen positive changes in town-gown relationships and improvement in those quality of life issues that so often plague college communities. But the lessons learned from those campuses that have developed successful coalitions suggest that their development must be entered into in a very thoughtful and strategic manner, with a clear vision of what the goals are and who needs to be involved in order to achieve those goals.

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**Campus Brief: University of Rhode Island**

The University of Rhode Island (URI) was ranked as the number one party school by the Princeton Review in 1993, 1994, and 1995. The campus had a very high awareness of the campus alcohol and drug policy and prevention efforts among students, but off campus it was a different matter. In response to community concerns, the Narragansett-URI Coalition, called Common Ground, was formed in 2000. The Narragansett-URI Coalition was formed in response to concerns raised in the local community about increased college student alcohol use and related consequences in the Narragansett community yet desiring a cooperative relationship of mutual respect and trust between the communities of the
town of Narragansett and the University of Rhode Island. The coalition is a group of volunteers whose mission is to work together to address problems and concerns by developing strategies and activities that foster amicable coexistence. Members represent the Narragansett town government, neighborhood associations, university officials and students, realtors, and businesses.

The coalition focuses on the following key areas:

- Improving the quality of life in all neighborhoods for permanent residents and URI renters
- Reducing underage drinking and harmful consequences of substance abuse
- Increasing awareness, community involvement, and support of the coalition's work

The rationale behind the coalition was that existing policy and on-campus preventive interventions needed to be augmented with environmental management initiatives in the local community, along with complementary efforts with high-risk subcultures.

Common Ground had two specific aims: to demonstrate the feasibility of a coalition-driven, multistage environmental change process and to work with the community coalition to implement and evaluate the efficacy of selected environmental management strategies.

In 2003 Common Ground received a National Institute on Alcohol Abuse and Alcoholism grant to “demonstrate the feasibility of a coalition driven multi-stage environmental change process with fraternities and sororities and work with a Greek coalition to implement and evaluate the efficacy of selected environmental management strategies.”

The Common Ground initiative focused on increased enforcement and decreased access to alcohol. For fall 2005 through spring 2006, $34,000 went to campus and local police to beef up enforcement efforts. The coalition also worked with the Rhode Island General Assembly to draft science-based responsible beverage service legislation and certification procedures. It also formed a Cooperating Tavern Program with owners and managers in two municipalities bordering URI.

URI also strengthened policy for off-campus jurisdiction and supported the town in the adoption of tougher policies for student houses creating neighborhood disturbances. To publicize its initiatives, the coalition developed a media campaign called RhodeMap to Safety to inform URI students that a majority of them support alcohol policy and enforcement efforts to create a safer and healthier campus; to make students aware of increased alcohol enforcement efforts in Narragansett, South Kingstown, and on campus; and to educate students about Rhode Island drinking and driving laws and URI alcohol policies.

The International Town & Gown Association

The International Town & Gown Association (ITGA) is an information resource point for common issues between institutions of higher education and the communities in which they reside. The ITGA brings together practitioners from varying fields addressing immediate issues and future opportunities. It provides a network of resources to assist civic leaders, university officials, faculty, neighborhood residents, and students to collaborate on common services, programs, academic research, and citizen issues, creating an improved quality of life for all residents, students, visitors, faculty, and staff.

While ITGA focuses on a broad range of town-gown issues and promotes partnerships between campuses and surrounding communities, quality of life concerns are of particular interest. For example, its June 2012 conference included workshops on community coalition building to address issues negatively affecting campus communities; town-gown partnerships to reduce high-risk drinking and improve livability using the example of the city and St. Cloud State University IMPACT Diversion Program, which offers underage alcohol violators the opportunity to
receive alcohol education and prevention services; and fostering on- and off-campus relationships between Arizona State University and the city of Tempe through education, service, and enforcement.

Q&A With Traci Toomey and Bob Saltz on the Role of Coalitions in Prevention

Traci Toomey is a professor in the Division of Epidemiology and Community Health and the director of the Alcohol Epidemiology Program at the University of Minnesota. She is a leading expert on alcohol policy research and has served as an investigator on many large-scale community-based alcohol policy projects.

Bob Saltz is a senior research scientist at the Prevention Research Center in Berkeley, California. His work has centered on ways in which drinking contexts may influence the risk of subsequent injury or death.

Both are Higher Education Center for Alcohol, Drug Abuse, and Violence Prevention Fellows. In this interview Toomey and Saltz discuss the role that coalitions can play in reducing alcohol-related problems among college students and in surrounding communities.

Q: The development of campus and community coalitions has been identified in a number of reports as at least a potentially effective strategy advancing certain prevention initiatives. What role do such coalitions play in reducing certain alcohol-related problems?

Toomey: Coalitions can be a strategy for advancing prevention interventions, but they are not an outcome in and of themselves. Coalitions are often recommended as a solution for preventing problems. They are not solutions but can be a means to get to a solution. In some cases, a coalition can be an effective approach to get a policy passed or affect some other type of environmental change if you bring together a group of people who actually move toward action, not just talk to each other. If the coalition members think strategically about how to bring about environmental change, it can wield a certain amount of power if it includes the right people.

Saltz: There is no doubt that a coalition can be useful, especially when there is some debate about the legitimacy of the prevention strategies. Coalitions, depending on who is involved, can lend legitimacy if members represent groups that have a stake in both the problem and in the solution to the problem. But, as Traci pointed out, sometimes the coalition is seen as an end in itself not only because people feel like they have accomplished something merely by having a meeting but also because sometimes they get so lost in the process of sustaining the coalition that it is very difficult to get into the action phase. Traci and I are probably in agreement that the coalition should not be a distraction from getting to implementation.

Coalitions need to be built strategically. Sometimes they are brought together too soon as a first step. Instead, membership recruitment should be very thoughtful and include people who have a stake in solving the problem and are committed to making changes. All too often coalitions wind up including an arbitrary list of important people who may ultimately be obstacles to action.

Toomey: Often with a coalition approach, organizers think that if everyone is not at the table, it cannot move to action. They are always looking for additional groups or people to get involved. But if you invite people whom you are trying to influence or those who need to make the change, they may be resistant and you’re not going to have any external influence in that situation.

Saltz: It’s very easy, especially in university and college settings, to spend a lot of effort just in making everybody happy and oftentimes that objective gets in the way of actually implementing an effective prevention strategy.

Q: Is there research evidence suggesting that some structures and processes for campus and community coalitions are more likely to result in success in reducing problems than others and, if so, what are those structures and processes?

Saltz: I don’t think there is credible research focused on that specific question. It is something
that the research community really needs to turn its attention to. What we do know is that people have achieved effective prevention in all sorts of ways with coalitions and without them. Communities can get the job done in a number of different ways. It is less a question of whether there is one “right” structure, but more a question of what is the most effective and efficient way to get to effective prevention implementation.

Toomey: I also advocate for a grassroots community-organizing effort, which builds on Bob’s point that there are multiple ways to make it happen. My support for a grassroots community-organizing effort versus a coalition approach goes back to our earlier point, which is that the way these coalitions are organized and run sometimes results in no action whatsoever. In a grassroots community-organizing model you meet with individuals one-on-one to identify those whose self-interest is in working on this issue and moving it forward. It is about developing leadership and moving toward action. It is not about getting everyone to the table, but rather getting the right people who are ready to take action. I have seen this approach result more often in movement toward action. However, a coalition approach may work if it does not get stuck in process and the right people are at the table.

Q: With a grassroots community-organizing effort, as you say, to help identify people that have some interest in advancing these issues, would that necessarily in your mind then result in an ad-hoc coalition to band together as it were to advance policy change?

Toomey: It should result in a core group of people who are passionate and want to take action on the issue at hand. It is a fine line between an action group and a coalition. Typically in the public health field, a coalition model tends to be a very large group with members who are there because they represent an organization rather than because they are passionate about a particular issue. Fundamentally, coalitions have a tendency to get stuck because of how they are put together. However, when the issue involves changing state policy, you need to get big organizations (e.g., the Heart Association) involved and all the lobbying power that comes with those types of organizations. That can be very powerful because they may bring professional lobbyists, money, and/or members who can be activated to contact their representatives. But for a campus and community that wants to create change, it does not make sense to have a group of people around the table who do not really want to be there and will not take action until “everyone” is involved.

Saltz: Traci and the rest of the Minnesota team have demonstrated that this model works in programs like Communities Mobilizing for Change on Alcohol (CMCA), and Mark Wolfson has done a really great job of using grassroots organizing in the SPARC (Study to Prevent Alcohol Related Consequences) intervention in North Carolina. As for what approach works best, I wonder whether we can achieve similar outcomes without the labor intensity involved in grassroots mobilizing. There are different paths that one can take to get to an objective. It may be that for more controversial interventions grassroots organizing might be more effective than reliance on a smaller task group. But I am keenly interested in efficiency and how difficult it is to achieve a change using different approaches. We do not know yet whether grassroots organizing gets to better or longer lasting outcomes than a small working group that recruits people for specific tasks—which is what I probably would prefer. The question is still open about the limitations of each model and the resources necessary to pull them off.

Q: From your perspectives as researchers, are coalitions the best way to engage the campus and the community in collaborative prevention work?

Toomey: For the past year Bob and I and others have had a discussion about whether we, as researchers, should be directive regarding which strategies campuses and surrounding communities should use to address college student drinking or should it be completely left up to each community and campus to figure out the solution for themselves. To a certain degree, I believe that we can provide a fairly long list of options for campuses and communities, but they need to decide what the problems are and which
recommended solutions best address that problem and the political environment. Keg registration is a good example. If kids are not getting their alcohol from a beer keg, it doesn’t make sense to work on getting keg registration ordinances passed and implemented. However, I have become more convinced over the past year that we have to be a bit more directive and stronger in our recommendations. Otherwise we see people continuing to do the same things that have not made any dent whatsoever in the drinking rates on our campuses.

Saltz: At the risk of oversimplification, I think it is important to tell the community or the campus what needs to be done. My list might be a lot shorter and include only those interventions that research evidence shows can be effective. Local knowledge and context come into play in determining which should be at the top of the list. As Traci points out, you don’t want to do decoy operations if retailers are not selling to minors. But problem assessments are constrained by the knowledge that only a handful or more of evidence-based intervention strategies exist and then go from there with local knowledge on how to get them implemented. The conundrum is how best to get it done—whether it is a coalition, a task force, or whatever group it is, the labor needs to be divided among people who know how to get things done. They can each take a role then in getting to the action, but it is a lot faster when they begin with knowing the short list of interventions that can work. We have been coming at this problem from different directions, but even though the research is lacking, in the anecdotal realm we are beginning to converge in selecting and combining parts of each style that seem to be most effective.

Higher Education Center Resources

Case Studies
- Bloomington Normal Community Campus Committee: Bloomington Normal Community Campus Committee
- Finger Lakes Community College: Campus Community Coalition
- Missouri Partners in Prevention: Missouri Partners in Prevention (PIP) Coalition
- St. Cloud State University: Community Alliance
- University of Colorado: Addressing “Quality of Life” Offenses in Boulder, CO
- University of Florida: Reducing High-Risk Drinking Among College Students
- University of Wyoming: Alcohol Wellness Alternatives, Research, & Education (AWARE)

Publications
- Building an Infrastructure for AODV Prevention: Coalitions and Statewide Initiatives (2010)
- Catalyst (Summer 2009) Vol. 11 No. 1: Organizing Models for Campus and Community Prevention
- Catalyst (Summer 2007) Vol. 9 No. 1: Coalitions and Partnerships
- Experiences in Effective Prevention (2007)
- Campus and Community Coalitions in AOD Prevention (2004)

Web Page
- Coalitions

Webinar
- “Building and Sustaining Statewide Initiatives for Effective Alcohol Prevention”

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