



2014-2015

STRATEGIC PLAN

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Pontotoc County Drug Free Coalition adheres to the Strategic Prevention Framework. This document specifically addresses planning and implementation strategies.

Executive Summary

Various agencies and citizens in Pontotoc County began meeting as the Pontotoc County Turning Point Coalition in 2003. The Pontotoc County Turning Point Coalition focused on health & wellness, substance abuse, mental health, and other community services. However, many community members did not recognize substance abuse as a major issue in our county.

In October 2008, Oklahoma implemented a statewide methamphetamine campaign and aired a documentary called “Crystal Darkness”. At this time, the Turning Point Coalition formed a Crystal Darkness Committee. Communities across the state organized watch parties for this event. In Pontotoc County, a watch party occurred with over 850 in Pontotoc County—the largest in the state. Our citizens learned that Pontotoc County was ranked #3 of 77 counties in Oklahoma for its number of individuals entering state-funded treatment centers with

methamphetamine as their primary drug of choice in fiscal years 2005-2007. During 2009, the Crystal Darkness Committee continued to meet monthly and participated in Oklahoma's Crystal Darkness Phase II, which involved assessment of existing data, resources/needs and strategies to address these issues.

In early 2010, the Crystal Darkness Committee of the Pontotoc County Turning Point Coalition unanimously voted to become its own stand-alone coalition to pursue Federal Drug Free Community grant funding. The Pontotoc County Drug Free Coalition (PCDFC) was born. The coalition has continued to thrive and grow each year, with over 80 current members. Since 2011, PCDFC has hosted a yearly march and rally, "Step Out of the Darkness", emphasizing the importance of communities being united in spirit for prevention & recovery. This event draws more than 500 people each year. Coalition members are passionate about raising awareness of substance abuse issues, implementing environmental strategies to reduce substance use and abuse, and furthering health initiatives in Pontotoc County.

In October 2013, the PCDFC was awarded the Drug Free Communities Grant, with the Brandon Whitten Institute at East Central University acting as the fiscal agent. Pontotoc County also receives Tobacco Settlement Endowment Trust funds, which resulted in the development of the STOP (Stomp Tobacco Outta Pontotoc County) Coalition. The STOP Coalition is an important partner of the PCDFC and its staff and members are members of PCDFC. In addition, Pontotoc County is served through a SPFTIG (Strategic Prevention Framework Tribal Incentive Grant), the Meth & Suicide Prevention Initiative grant program, and the Tobacco Prevention Program, all facilitated by the Chickasaw Nation and all essential partners and members of PCDFC.

Organizational Description

The Pontotoc County Drug Free Coalition is made up of over eighty members with representation in all twelve sectors. The current leadership and committee structure for Pontotoc County Drug Free Coalition is as follows:

PCDFC 2014-2015 Elected Leaders

Cheryl Yott, First Chair
Tina Matthews-Price, Second Chair
Deanna Carpitche, Secretary

Committees:

Danny Coats, Chair – Community Education
Vicki Orsburn, Chair – Media Advocacy
Lance Huntsman, Chair – Youth Involvement
Calvin Prince, Chair – Sustainability

As aforementioned, the coalition has the support of several grants in order to aid in its mission. The Drug Free Communities Grant (DFC) was awarded to the coalition in September 2013. There is also a Strategic Prevention Framework State Incentive Grant (SPFSIG), which focuses on prescription drugs with adults ages 25-54 years old, Strategic Prevention Framework Tribal Incentive Grant (SPFTIG), whose target is also prescription drugs as well as underage drinking,

Chickasaw Nation Meth & Suicide Prevention Initiative, Chickasaw Nation Tobacco Prevention Program, and lastly a TSET grant for tobacco prevention and education.

PCDFC DFC staff offices are located on the East Central University campus at 1100 East 14th Street, Horace Mann Building Room 109, Ada, Oklahoma 74820.

Vision

A safe and healthy community free of substance abuse.

Mission

United to reduce substance abuse by using proactive strategies to empower our community.

Values

- **Proactive:** Providing relevant, pertinent, and quality information to educate the community on prevention and recovery strategies and to promote effective policy change.
- **United:** Working together to make a difference and reduce substance abuse and addiction in our community.
- **Diverse:** Recognizing the importance of awareness, respect, and sensitivity to diversity within the community.
- **Empowered:** Empowering people with the knowledge and tools to address substance abuse issues affecting individuals, families, and businesses within Pontotoc County.

Definition of the problem

Data collection and analyses reveal that non-medical use of prescription drugs is a priority substance abuse issue in Pontotoc County. Pontotoc County's opioid analgesic death rate is 15.7/100,000 population, totaling 48 deaths from 1999-2007. Between 2006-2010, there were 344 prescription drug treatment admissions. This is a rate of 1.87, a 33.33% change between 2005-2010 (ODMHSAS, n.d.). Data indicates that 89.8% of prescription overdose deaths in Pontotoc County involve **adults ages 25-54** (OBNDD, 2011). Furthermore, 83.2% of admitted users reported obtaining prescription drugs to abuse from a friend, with 57.7% reporting that they could obtain these drugs within one hour (Pontotoc County Drug Free Coalition [PCDFC], 2011).

In addition, alcohol and tobacco products are by far the most readily accessible, socially acceptable, and widely abused substances of choice for youth in Pontotoc County and across all of Oklahoma. Not far behind, marijuana and prescription drugs are growing in popularity (ODMHSAS, 2013).

Adult tobacco rates are also an issue of concern. According to 2012 data from the Oklahoma State Department of Health (OSDH), the current adult smoking rate in Pontotoc County is 27.1%. Approximately 24% of citizens are former smokers. Five of the top ten causes of death in

Pontotoc County are associated with smoking and/or obesity and accounts for 59.1% of total county deaths. Concerning economic impact, the annual cost for smoking is \$91,166.45 (A. Harjo, personal communication, January 15, 2014).

The following table shows the most recent 2012 Oklahoma Prevention Needs Assessment data. The 2012 OPNA survey did not collect data on age of first use, perception of risk, or perception of parent or peer disapproval for prescription drugs. This will be included in the revised April 2014 OPNA survey. The most recent OPNA data available for reporting was collected in April 2012. It was conducted with grades 6, 8, 10, and 12. The sample size was 612 students. OPNA survey research as again conducted in April 2014 with the results not yet available. OPNA surveys will continue to be conducted every two years (ODMHSAS, 2013).

2012 OPNA Survey Results					
OPNA Core Measure	Substance	Grade 6	Grade 8	Grade 10	Grade 12
Alcohol	Age of Onset of Drug Use	10.6%	12.0%	13.3%	14.4%
	Past 30 Day Use	6.2%	24.5%	29.4%	41.9%
	Perception of Risk or Harm	62.3%	63.3%	56.7%	61.3%
	Perception of Parent Disapproval	95.8%	90.6%	94.0%	70.5%
	Perception of Peer Disapproval	94.4%	77.9%	78.3%	67.2%
Tobacco	Age of Onset of Drug Use	10.7%	11.4%	13.6%	12.2%
	Past 30 Day Use	4.8%	12.6%	19.1%	21.9%
	Perception of Risk or Harm	82.0%	84.8%	91.0%	88.7%
	Perception of Parent Disapproval	96.7%	96.0%	94.0%	82.0%
	Perception of Peer Disapproval	93.2%	80.9%	77.9%	63.3%
Marijuana	Age of Onset of Drug Use	11.6%	12.4%	14.1%	13.1%
	Past 30 Day Use	1.2%	5.4%	5.9%	9.7%
	Perception of Risk or Harm	83.8%	81.8%	81.2%	83.9%
	Perception of Parent Disapproval	98.1%	95.9%	98.5%	98.4%
	Perception of Peer Disapproval	96.6%	86.8%	88.2%	88.3%
Prescription Drugs	Past 30 Day Use	2.3%	4.0%	5.9%	4.8%

GOALS

PCDFC Goals

1. To network, involve, and utilize all of our community citizens, agencies, organizations, and institutions in order to promote positive youth, family, and community development.
2. To develop increased awareness of problems facing society and promote a community climate of positive opportunities, attitudes, and activities.
3. To promote community support for effective parenting, constructive family communication, and parental networking.
4. To promote community awareness and revision of youth-related laws and their consistent enforcement, as well as the development of appropriate juvenile justice programs in the community.
5. To promote the continued development and implementation of a comprehensive, community-wide program of primary prevention, intervention, and education.
6. To change social policy, laws, and advertising practices regarding alcohol, tobacco, and other drugs.

PCDFC also focuses on goals of our identified grants, which are detailed below.

DFC Goals

1. Establish and strengthen collaboration among communities, public and private non-profit agencies, and federal, state, local, and tribal governments to support the efforts of community coalitions working to prevent and reduce substance use among youth.
2. Reduce substance use among youth and, over time, reduce substance abuse among adults by addressing the factors in a community that increase the risk of substance abuse and promoting the factors that minimize the risk of substance abuse.

SPFSIG Goal

Decrease the nonmedical use of opiates among adults ages 25-54 in Pontotoc County.

SPFTIG Goal

To prevent the onset and reduce the progression of substance abuse, including underage drinking, to reduce substance abuse related problems, and to build capacity and infrastructure at the Tribal and community levels.

STOP Coalition Goal

To educate local citizens about Tobacco Prevention and to reduce the number of Tobacco users in Pontotoc County.

2014-2015 STRATEGIES & ACTION PLANS

(The following action plan is specific to the Drug Free Communities Grant Program. Action plans can be requested from additional grant partners).

DFC Goal One: Increase community collaboration.

Objective 1: Provide a minimum of 5 coalition building workshops to strengthen coalition capacity by 9/29/2015.

Strategy 1: *Continue to implement yearly workshop series to focus on aspects of Strategic Prevention Framework.*

Activity	Who is responsible?	By when?
Develop a workshop timeline for FY2014-2015.	Sustainability Committee, DFC Staff	10/15/14
Advertise/provide SPF workshops on a scheduled basis to community members	Community Education, DFC Staff	Ongoing
Review evaluation feedback from each workshop to aid in future revisions	Sustainability Committee	Ongoing

Strategy 2: *As part of the coalition development workshops, provide annual cultural competency training.*

Activity	Who is responsible?	By when?
Identify areas of need related to cultural competency via coalition surveys	Executive Committee	3/31/15
Schedule and provide needed cultural competency trainings to coalition	Community Ed. & Executive Committee	5/30/15

Objective 2: Provide a minimum of 4 opportunities for community participation and collaboration with PCDFC by 9/29/2015.

Strategy 1: *Continue to host and evaluate capacity building activities and events*

Activity	Who is responsible?	By when?
Collect/update membership cards to identify coalition members' skills/interests	DFC Staff	9/29/15
Distribute and evaluate coalition member satisfaction surveys	Executive Committee	9/29/15
Develop and implement yearly recruitment campaign	Sustainability Committee	8/31/15
Hold quarterly committee meetings and report activities at monthly meetings	All Committees	Ongoing
Host recovery & prevention celebration event for recognition and recruitment	Executive Committee, DFC Staff	10/31/2014

Objective 3: Maintain a youth coalition of at least 15 members through grant FY14-15.

Strategy 1: *Involve youth ages 12-18 in all phases of the Strategic Prevention Framework.*

Activity	Who is responsible?	By when?
Continue to recruit youth to serve on PCDFC & youth coalition.	Youth Inv. Committee	9/29/15
Train new youth members on SPF processes.	Youth Inv. Committee	9/29/15

Activity		Who is responsible?	By when?
Train youth members on media advocacy & work on recruitment pitch		Youth Inv. Committee & Youth Coalition	3/31/15
Youth to create media materials for recruitment		Youth Coalition	Ongoing
Host annual youth conference to recruit, raise awareness and provide protective factor opportunities		Youth Inv. Committee, Project Coordinator	9/29/15
Host annual celebration & recruitment event for youth coalition		Youth Inv. Committee, Youth Coalition, PCDFC	12/31/14

DFC Goal Two: Reduce youth substance use.

Objective 1: Decrease last 30 day use of alcohol by Pontotoc County youth by 3% as measured by 2016 Oklahoma Prevention Needs Assessment (OPNA) surveys.

Strategy 1: Provide information concerning youth social access of alcohol

Activity		Who is responsible?	By when?
Provide info to parents/community members on underage drinking/social host law		Media Advocacy Committee	4/30/15
Provide info on local hotline to community for social host violation/alcohol issues		Media Advocacy Committee	4/30/15

Strategy 2: Build skill to decrease youth social access of alcohol

Activity		Who is responsible?	By when?
Host reality tours to educate parents on youth AOD use/tips on parent strategies		Community Ed. Committee	9/29/15

Strategy 3: Change access/barriers concerning youth social access of alcohol

Activity		Who is responsible?	By when?
Partner with law enforcement to create hotline procedures for call ins of social host violations or other alcohol related issues		DFC Staff, Law enforcement	4/30/15

Strategy 4: Change consequences (incentives/disincentives)

Activity		Who is responsible?	By when?
Publish media highlighting partners who have established MOUs for 2M2L training		Media Advocacy Committee	7/31/15
Publish media highlighting partners who have established MOUs for parenting training or modules		Media Advocacy Committee	7/31/15

Strategy 5: Change policy

Activity		Who is responsible?	By when?
Develop MOU with local law enforcement training center to provide 2M2L training		Sustainability Committee	7/31/15
Develop MOU with juvenile affairs office & specialty courts mandating parent module on youth substance use		Sustainability Committee	7/31/15

Objective 2: Decrease overall yearly noncompliance rates during alcohol compliance checks in Pontotoc County by 3% as measured by results of 2015 ACC's.

Strategy 1: Provide information

Activity	Who is responsible?	By when?
Provide flyers to noncompliant businesses about Responsible Beverage Service & Sales Training (RBSS) following alcohol compliance checks (ACCs)	Coalition Staff	Quarterly
Offer information to alcohol service and sales employees on alcohol purchase laws, liability, etc. through RBSS training	PCDFC, Coalition Staff	Quarterly
Provide information to alcohol establishments on importance of RBSS training	Media Advocacy Committee	9/29/15

Strategy 2: Build skill

Activity	Who is responsible?	By when?
Train youth for ACC's in partnership with law enforcement prior to ACCs	Coalition Staff, Law enforcement	Quarterly
Offer skill building opportunities for alcohol establishments age verification, sale refusal, recognizing signs of intoxication, etc. through RBSS training	PCDFC, Coalition Staff	Quarterly

Strategy 3: Provide Support

Activity	Who is responsible?	By when?
Provide youth stipends for aiding with ACCs	PCDFC, Coalition Staff	Quarterly
Assist with youth recruitment, age assessment, documentation, and ACC assistance	Youth Inv. Committee, Staff	Quarterly

Strategy 4: Change access/barriers

Activity	Who is responsible?	By when?
Conduct quarterly compliance checks with law enforcement	Coalition Staff & Law Enforcement	12/31/14 3/31, 6/30, & 9/29/15
Offer any RBSS trainings for free to local alcohol establishments	PCDFC, Coalition Staff	Quarterly

Strategy 5: Change consequences (incentives/disincentives)

Activity	Who is responsible?	By when?
Publish media highlighting businesses in compliance during ACCs and businesses which have established MOUs for RBSS	Media Advocacy Committee	Quarterly

Strategy 6: Change policy

Activity	Who is responsible?	By when?
Develop MOU with local law enforcement to conduct quarterly ACCs	Executive Committee	09/29/15
Develop MOUs with local alcohol establishments on mandatory RBSS training	Community Ed. Committee	9/29/15
Develop/present ordinance for mandatory RBSS training to Ada City Council	PCDFC, Law Enforcement	8/31/15

Objective 3: Increase rates of Pontotoc County youth reporting perception of risks from drinking by 5% as measured by 2016 OPNA surveys.

Strategy 1: Provide information

Activity	Who is responsible?	By when?
Provide information to youth and parents concerning alcohol risks and harms	Media Advocacy Committee	4/30/15
Provide information to youth and parents on educational module (see below)	Media Advocacy Committee	8/31/15
Provide civic presentations on underage drinking	Community Ed. Committee	9/29/15

Strategy 2: Build skill

Activity	Who is responsible?	By when?
Provide skill building to parents via education module on alcohol risks/harms	Community Ed. Committee	8/31/15
Provide training sessions to school staff to help implement student module	Coalition Staff	8/31/15

Strategy 3: Change access/barriers

Activity	Who is responsible?	By when?
Assist with costs/implementation of student module	PCDFC	8/31/15

Strategy 4: Change consequences (incentives/disincentives)

Activity	Who is responsible?	By when?
Publish media highlighting schools implementing alcohol student modules	Media Advocacy Committee	12/31/15

Strategy 5: Change policy

Activity	Who is responsible?	By when?
Collaborate with schools to develop policy including alcohol student module as part of school curriculum	Community Ed. Committee, DFC Staff	8/31/15

Objective 4: Increase rates of youth in Pontotoc County (grades 6, 8, 10, 12) reporting perception of risks from using marijuana by 3% as measured by 2016 OPNA surveys.

Strategy 1: Provide information

Activity	Who is responsible?	By when?
Provide information to youth and parents concerning marijuana risks and harms	Media Advocacy Committee	4/30/15
Provide information to youth and parents on educational module (see below)	Media Advocacy Committee	8/31/15
Provide civic presentations on marijuana use	Community Ec. Committee	9/29/15
Provide <i>D.Driver</i> activity to youth coalition on drugged driving awareness	Youth Inv. Committee	5/31/15

Strategy 2: *Build skill*

Activity	Who is responsible?	By when?
Provide skill building to parents via marijuana module	Community Ed. Committee	8/31/15
Provide training sessions to school to implement student module	Coalition Staff	8/31/15

Strategy 3: *Change access/barriers*

Activity	Who is responsible?	By when?
Assist with costs/implementation of student module	PCDFC	8/31/15

Strategy 4: *Change consequences (incentives/disincentives)*

Activity	Who is responsible?	By when?
Publish media highlighting schools that have implemented student modules	Media Advocacy Committee	12/31/15

Strategy 5: *Change policy*

Activity	Who is responsible?	By when?
Collaborate with schools to develop policy including marijuana student module as part of school curriculum	Community Ed. Committee, DFC Staff	8/31/15

Objective 5: Decrease reports of marijuana use in local parks by 10% as measured by 2015 focus groups (by 9/29/15).

Strategy 1: *Provide information*

Activity	Who is responsible?	By when?
Provide information to law enforcement concerning local conditions	Executive Committee, DFC staff	2/28/15

Strategy 2: *Build skill*

Activity	Who is responsible?	By when?
Train parks and recreation staff on recognizing indicators of use on public trails	Community Ed. Committee, DFC Staff	2/28/15

Strategy 3: *Provide support*

Activity	Who is responsible?	By when?
Assist with increased lighting/signage in high use areas	Executive Committee	9/29/15

Strategy 4: *Change access/barriers*

Activity	Who is responsible?	By when?
Partner with law enforcement to implement increased police patrol in identified areas after 3 p.m.	DFC Staff, Law enforcement	2/28/15

Strategy 5: *Change physical design*

Activity	Who is responsible?	By when?
Work with City Council to add lighting/signage to identified problems areas	Community Ed. Committee, PCDFC	9/29/15

Objective 6: Decrease last 30 day use of marijuana by Pontotoc County youth by 3% as measured by 2016 OPNA surveys.

Strategy 1: *Provide information concerning youth availability of marijuana*

Activity	Who is responsible?	By when?
Provide info to parents and community members on marijuana risks and harms	Media Advocacy Committee	9/29/15
Provide info on local hotline to community for marijuana related issues	Media Advocacy Committee	9/29/15

Strategy 2: *Build skill to decrease youth availability of marijuana*

Activity	Who is responsible?	By when?
Train coalition members on marijuana issues and community advocacy	Executive Committee, Coalition staff	6/30/15
Host reality tours to educate parents on youth AOD use/tips on parent strategies	Community Ed. Committee	9/29/15

Strategy 3: *Change access/barriers concerning youth availability of marijuana*

Activity	Who is responsible?	By when?
Partner with law enforcement to create hotline procedures for call ins on marijuana related issues	DFC Staff, Law enforcement	6/30/15

Strategy 4: *Change consequences (incentives/disincentives)*

Activity	Who is responsible?	By when?
Publish media highlighting partners implementing parenting modules MOUs	Media Advocacy Committee	7/31/15

Strategy 5: *Change policy*

Activity	Who is responsible?	By when?
Develop MOU with juvenile affairs office & specialty courts mandating parent module on youth substance use	Sustainability Committee	7/31/15

Objective 7: Decrease last 30 day prescription misuse by Pontotoc County youth by 3% as measured by 2016 OPNA surveys.

Strategy 1: *Provide information to decrease social access to prescription drugs*

Activity	Who is responsible?	By when?
Provide info to community members on local RX drop boxes and lock boxes	Media Advocacy Committee	9/29/15

Strategy 2: *Build skill to decrease social access to prescription drugs*

Activity	Who is responsible?	By when?
Train coalition members on prescription issues and community advocacy	Executive Committee, Coalition staff	9/29/15
Host reality tours to educate parents on youth AOD use/tips on parent strategies	Community Ed. Committee	9/29/15
Provide law enforcement workshop on tracking criminal diversion/doctor shopping	Community Ed. Committee	5/31/15

Activity	Who is responsible?	By when?
Provide health care workshop on safe prescribing, benefits of using PMP & SBIRT	Community Ed. Committee	5/31/15

Strategy 3: *Provide support to decrease social access to prescription drugs*

Activity	Who is responsible?	By when?
Provide RX lock boxes to real estate offices for new listings, Section 8 housing, local university health services for students, etc.	PCDFC	9/29/15
Provide RX bags with local drop box info to pharmacies and medical centers	PCDFC	9/29/15

Strategy 4: *Change consequences (incentives/disincentives)*

Activity	Who is responsible?	By when?
Publish media highlighting partnerships with local offices or new RX policies	Media Advocacy Committee	9/29/15

Strategy 5: *Change policy*

Activity	Who is responsible?	By when?
Assist business and schools with developing RX safe storage policies	Coalition Staff	9/29/15
Assist real estate offices with developing policy to give all new listings/customers RX lock box to use while showing homes	Coalition Staff	9/29/15
Assist local university with policy to give students receiving RX a lock box	Coalition Staff	9/29/15
Assist section 8 office with policy to require secured medications in housing	Coalition Staff	9/29/15

Objective 8: Decrease perception of prescription drug misuse as “helpful” by 10% as measured by 2015 focus groups.

Strategy 1: *Provide information*

Activity	Who is responsible?	By when?
Provide info to youth and parents concerning prescription misuse risks/harms	Media Advocacy Committee	9/29/15
Provide information to youth and parents on educational module (see below)	Media Advocacy Committee	8/31/15
Provide civic presentations on prescription drug misuse	Community Ec. Committee	9/29/15
Provide <i>D.Driver</i> activity to youth coalition on drugged driving awareness	Youth Inv. Committee	5/31/15

Strategy 2: *Build skill*

Activity	Who is responsible?	By when?
Provide skill building to parents via prescription drug module	Community Ed. Committee	8/31/15
Provide training sessions to school to implement student module	Coalition Staff	8/31/15

Strategy 3: *Change access/barriers*

Activity	Who is responsible?	By when?
Assist with costs/implementation of student module	PCDFC	8/31/15

Strategy 4: *Change consequences (incentives/disincentives)*

Activity	Who is responsible?	By when?
Publish media highlighting schools that have implemented student modules	Media Advocacy Committee	12/31/15

Strategy 5: *Change policy*

Activity	Who is responsible?	By when?
Collaborate with schools to develop policy including prescription drug student module as part of school curriculum	Community Ed. Committee, DFC Staff	8/31/15

Objective 9: Decrease reports of youth prescription misuse at school by 10% as measured by 2015 key informant interviews.

Strategy 1: *Provide information*

Activity	Who is responsible?	By when?
Provide info to youth/parents on prescription misuse risks/harms & reminders about school policies	Media Advocacy Committee	9/29/15

Strategy 2: *Build skill*

Activity	Who is responsible?	By when?
Collaborate with school to train school staff on related issues (dangers, risks, importance of policy) and how to enforce	Community Ed. Committee	9/29/15
Provide training sessions to school to implement student module	Coalition Staff	8/31/15

Strategy 3: *Provide support*

Activity	Who is responsible?	By when?
Assist schools with signage, flyers and related information to school policies	PCDFC	9/29/15

Strategy 4: *Change access/barriers*

Activity	Who is responsible?	By when?
Provide schools with prescription lock boxes to aid in locked storage	PCDFC	9/29/15

Strategy 5: *Change policy*

Activity	Who is responsible?	By when?
Assist schools with developing and implementing policies on faculty medication storage (already existing student medication storage policies)	Coalition Staff	9/29/15