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DEAR FRIENDS,

Through the tireless efforts of community leaders, you will see how CADCA’s effective prevention model has reduced substance use and misuse in communities across the country and around the world.

Since the creation of CADCA almost 25 years ago, our organization has remained committed to encouraging, growing, training and assisting community coalitions. With our resources, we provide education and structure while local coalitions hone in on effective strategies for their communities. It takes leaders from all sectors – community, federal, state, law enforcement, medical and more – to make an impactful change in our culture.

In this Annual Report, you will learn about the impact your accomplishments have contributed to the field.

For example, without your support, we would not have been able to realize a record-breaking Capitol Hill Day event, exceeding previous number of attendees and Congressional appointments!

We would not have been able to expand our federal partnerships to cultivate projects and prevention efforts in the fields of prescription drug use and misuse, underage drinking, marijuana and tobacco use, and more.

We would not have been able to provide coalition building and prevention training in 19 countries across four continents to more than 1,500 people.

We would not have been able to do a deep dive into the health disparities through the Geographic Health Equity Alliance, exploring tobacco and cancer education gaps across the country.

On behalf of our coalitions, our staff, and Board of Directors, thank you for believing in CADCA’s mission to build safe, healthy, and drug-free communities globally. We could not do this crucial work without your support.

Sincerely,

Gen. Arthur T. Dean
CADCA’s Chairman and CEO

CADCA’s effective prevention model has reduced substance use and misuse in communities across the country and around the world.
Institute

2016 was a year of firsts. The National Coalition Institute partnered with SAMHSA to develop and deliver the first-of-its-kind Tribal Applicant Training to 13 Tribes entitled: Healthy Tribes, Healthy Nations for Generations to Come. Another first for the Institute was a training in Guam where 95 participants and 12 coalitions were in attendance. Lastly, one hundred and seventy-three coalitions graduated from the National Coalition Academy – the largest graduating class to date.

The Substance Abuse and Mental Health Services Administration again partnered with the National Coalition Institute to create coalitions at universities and colleges called the Campus Community Coalitions: Community of Practice (4CP) project. The pilot cohort class was California State University – Northridge, Indiana University – Bloomington, Iowa Lakes Community College, Morgan State University, Southeastern Louisiana University, University of Maryland – Eastern Shore, University of South Florida and the University of Tampa.

To expand the reach of CADCA training, a new class of Training of Trainers (TOTers) was started in 2016. The new class has gone through the prerequisites and the residential training.

In 2016, CADCA partnered with the Drug Enforcement Administration to start the DEA 360 Strategy in Milwaukee, Wisconsin; Louisville, Kentucky; and St. Louis, Missouri. In St. Louis, the training — A Comprehensive Approach to Addressing the Pills to Heroin Epidemic — was held at the St. Louis College of Pharmacy. In Milwaukee, the Lybert family spoke about how their son struggled with drugs and alcohol for 11 years until he decided to get help. In Louisville, CADCA worked with the U.S. Attorney, John Kuhn and the DEA to produce a successful Heroin and Opioid Response Summit. We will continue to move forward with this partnership in 2017 to include Philadelphia, Pennsylvania; Manchester, New Hampshire; Dayton, Ohio; Charleston, West Virginia; and Albuquerque, New Mexico.
The Research and Evaluation Advisory Board was convened at the Mid-Year Training Institute as a part of the launch of the new National Coalition Institute External Evaluation. The Advisory Board is chaired by the new evaluation lead, Dr. Mark Wolfson of the Wake Forest University School of Medicine, and was initially made up of both academic and coalition experts.

The 2016 Annual Survey Fact Sheet framed CADCA data to benefit our members and partners. The 2016 Fact Sheet framed demographic data against the National Coalition Institute Framework for Community Change. This continues the cycle of our Fact Sheets featuring data by the defining characteristics of our coalitions. Last year, we used the Seven Strategies to Affect Community Change and next year we’ll use the Strategic Prevention Framework.

A Certified Prevention Specialist (CPS) training was done in Idaho and Washington, D.C., in 2016. The CPS exam was available at the end of the trainings for participants to take; as a result, in Idaho 13 coalition leaders became CPS certified and in Washington, D.C., 16 leaders became CPS certified.

The National Highway Traffic Safety Administration (NHTSA) funded support for a meeting and training sessions at the 27th National Leadership Forum and the 15th Annual Mid-Year Training Institute. Additionally, they were a part of a CADCA ad hoc advisory committee at the Forum to discuss the development of a study design for determining coalition evidence-based strategies to reduce impaired driving. CADCA has also hosted two webinars that featured coalition efforts to help prevent impaired driving in their communities.

A Certified Prevention Specialist (CPS) training was done in Idaho and Washington, D.C., in 2016. The CPS exam was available at the end of the trainings for participants to take; as a result, in Idaho 13 coalition leaders became CPS certified and in Washington, D.C., 16 leaders became CPS certified.
Youth Leadership

In 2016, CADCA focused on building the capacity of our youth training team. After a rigorous application process, 12 prospective youth were selected to move forward, being trained on CADCA’s training curriculum as well as presentation skills. Each of these young people are continuing to accomplish great things in their communities, and brings their unique skills and talents to the team. They are all undergoing a one-year training process and will graduate to become an official member of CADCA’s Youth Leadership training team.

**Johnson & Johnson**

CADCA’s youth leadership department partnered with Johnson & Johnson Consumer to engage young leaders in a medicine safety youth educators pilot. CADCA trained youth from 20 member coalitions to teach 5th and 6th graders about medicine safety. The youth trainers collectively were able to train 866 5th and 6th graders about medicine safety.

**Cardinal Health Foundation**

CADCA’s youth leadership department partnered with the Cardinal Health Foundation to train over 100 youth from Pennsylvania, Tennessee, and Delaware on the Strategic Prevention Framework. These young people have created strategic action plans to combat underage drinking and prescription drug use.

**Office of National Drug Control Policy**

CADCA’s youth leadership department partnered with the Office of National Drug Control Policy to promote youth leadership in coalitions. Through our partnership, in 2016 we trained over 1,400 youth on the Strategic Prevention Framework. Youth who attend CADCA’s National Youth Leadership Initiative are the most engaged youth in coalitions and we want to thank ONDCP for their continued support.

CADCA wants to partner with you to foster Youth Leadership by engaging, developing, and inspiring young people to commit to coalition work.
1,400 YOUTH TRAINED

13 TRAININGS

3 WEBINARS
Training Events

Nearly 2,700 community leaders attended the National Leadership Forum in National Harbor, MD, in February 2016. The four-day training event featured more than 70 training sessions to help participants learn effective strategies to address drug-related problems in their communities.Speakers Michael Botticelli from the Office of National Drug Control Policy (ONDCP), Chuck Rosenberg from the Drug Enforcement Administration, and Dr. Bertha Madras from Harvard Medical School addressed attendees at the National Leadership Plenary, alongside CADCA’s own Chairman and CEO General Arthur T. Dean. 179 coalitions from 42 states, Washington, D.C. and Puerto Rico were recognized at CADCA’s National Coalition Academy graduation ceremony. A roundtable discussion among members of Congress was hosted at the Capitol Hill Day plenary session before attendees headed to the Hart Senate Office Building for the Congressional Reception. Over 200 Capitol Hill Day appointments were created so attendees could speak directly with their representatives. At the Membership Breakfast, award-winning reporter and producer Andy Field shared how to best tell your story to the media, how to personalize a message, the importance of visuals, practical do’s and don’ts and more.
At the National Leadership Awards Luncheon, Congressman Hal Rogers received the National Leadership Award for his invaluable prevention efforts on Capitol Hill; Shelby County Drug Free Coalition from Indiana received the Dose of Prevention Award for their educational work during National Medicine Abuse Awareness Month; and GOT OUTCOMES! award winners were recognized. Attendees had the opportunity to visit 40+ exhibitors during the week, including booths from companies such as the Truth Initiative and American Association of Poison Control Centers.

**MID-YEAR**

At the 15th annual Mid-Year Training Institute in Las Vegas, a record-breaking 2,000 attendees attended 80+ top-tier training sessions from tracks such as “Data Crusaders” and “Incredible Communication” to “Policy Power” and “Heroes in Training.” Attendees started the week with a Monumental Impact Welcome Reception. Opening Plenary and Breakfast treated attendees to wise words from Frances Harding, the Director of the Center for Substance Abuse Prevention at the Substance Abuse and Mental Health Services Administration and Dr. Moira O’Neil, senior researcher at the FrameWorks Institute, who discussed the importance of message framing. Attendees joined CADCA in giving back to the community through the Community Service Project at the Shade Tree, a safe shelter to homeless and abused women and children in crisis. Mid-Year also offered the opportunity for veteran attendees to go to the Advanced Coalition Academy. Before the week was over, the ONDCP Town Hall Meeting offered attendees the opportunity to hear from ONDCP’s Director Michael Botticelli, DFC Administrator Helen Hernandez and other ONDCP staff about upcoming key initiatives.

**Future CADCA Events**

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<thead>
<tr>
<th>Year</th>
<th>Date</th>
<th>Event</th>
<th>Location</th>
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<tr>
<td>2018</td>
<td>FEB 5-8</td>
<td>National Leadership Forum</td>
<td>National Harbor, MD</td>
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<tr>
<td>2018</td>
<td>JUL 15-19</td>
<td>Mid-Year Training Institute</td>
<td>Orlando, FL</td>
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<tr>
<td>2018</td>
<td>OCT 18</td>
<td>Drug-Free Kids Campaign Awards Dinner</td>
<td>National Harbor, MD</td>
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<tr>
<td>2019</td>
<td>FEB 4-7</td>
<td>National Leadership Forum</td>
<td>National Harbor, MD</td>
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<tr>
<td>2019</td>
<td>JUL 14-18</td>
<td>Mid-Year Training Institute</td>
<td>Dallas, TX</td>
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<tr>
<td>2019</td>
<td>FALL</td>
<td>Drug-Free Kids Campaign Awards Dinner</td>
<td>National Harbor, MD</td>
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Partner Projects

**CADCA ACCESS Project – Funded by the Conrad N. Hilton Foundation**

CADCA joined forces with the Conrad N. Hilton Foundation to enhance and increase adolescent Screening, Brief Intervention, and Referral to Treatment (SBIRT) services in local communities, with the intention to promote a new model through a community coalition construct. In 2016, CADCA’s new initiative – America’s Community Coalitions Expanding SBIRT Services – or ACCESS, began with the convening of a Blue Ribbon Advisory Panel to review the existing SBIRT-system in the United States, recommend strategies for coalitions and healthcare partners that incorporate a broader utilization of SBIRT at the local level, recommend strategies to catalyze SBIRT implementation through prevention coalition efforts, and to ultimately inform coalition involvement in SBIRT activities.

The Panel served an 8-month long tenure and completed a comprehensive review of issues affecting SBIRT expansion and enhancement, amongst other issues. A culmination report of the Panel’s conclusions and recommendations was submitted to CADCA’s Executive Leadership and Board of Directors in the Fall of 2016. The Panel’s major decision included a three-pronged approach for how CADCA’s coalitions can engage in SBIRT. The report noted that coalitions of all levels can engage in SBIRT as an advocate, while some coalitions that are more equipped, can engage in SBIRT as an implementer or a trainer (an abridged version of this recommendations report is available at CADCA.org.)

The recommendations provided by the Panel in this planning year greatly informed CADCA’s approach and supported the development of a new proposal to the Hilton Foundation. In the fall of 2016, CADCA submitted this proposal that was approved and funded by the Hilton Foundation in the spring of 2017.

### SBIRT IMPLEMENTER

Coalitions will engage directly in the implementation of SBIRT, e.g., working with service providers and healthcare partners, hiring SBIRT staff, managing the SBIRT project at the local level.

### SBIRT TRAINER

Coalitions will train their healthcare partners on an approved SBIRT model. Coalitions can train community partners on the benefits of SBIRT.

### SBIRT ADVOCATE

Coalitions will advocate to improve/enhance SBIRT services in the community or to advocate to ensure that their community implements a new SBIRT program.
Passage of the Comprehensive Addiction and Recovery Act (CARA)

In 2014, Senators Sheldon Whitehouse, Rob Portman, Amy Klobuchar and Kelly Ayotte brought together leading organizations across all the six pillars necessary for a coordinated response to the opioid/heroin epidemic – prevention, treatment, recovery, law enforcement, criminal justice reform, and overdose reversal to find evidence-based, comprehensive solutions. CADCA was a core member of this working group and an active participant in the many information summits that were held to discuss what to include in the CARA legislation. Through this process CADCA advocated for, and secured the inclusion in the introduced legislation (Section 103) of a $5 million enhancement grant program for current and former Drug-Free Communities (DFC) grantees to work more intensively in their communities to stop prescription drug misuse in the first place.

On March 10, 2016, CARA was passed in the Senate by a 94-1 vote, followed shortly thereafter by the House of Representatives in a 400-5 vote. To iron out the differences between the House and Senate versions of the legislation, a Conference Committee was formed. While the Senate included the $5 million enhancement grant program for current and former grantees (section 103), the House version did not. CADCA’s team quickly engaged the Members of the Conference Committee and their staffs to make sure that any final legislation included the critical DFC enhancement grant prevention program. On July 22, 2016, President Obama signed CARA into law with this important prevention provision intact.

CADCA is extremely proud that our organized, data-driven, and comprehensive model was included as the prevention pillar for the final CARA legislation and that the $5 million enhancement grant program was successfully authorized.
Reauthorization of the Sober Truth on Preventing (STOP) Underage Drinking Act

Reauthorizing the STOP Act has also been an important long-term priority for CADCA. In 2006, the original STOP Act legislation was signed into law to combat underage drinking, but authorization for the legislation expired in 2010. While CADCA successfully worked to ensure that funding for the STOP Act program, including $5 million for community coalition enhancement grants, was appropriated every year since 2010, it remained a top priority to reauthorize the program.

The STOP Act reauthorization legislation (H.R. 1717), introduced by Congresswoman Roybal-Allard, reauthorized: community coalition underage drinking enhancements grants; Interagency Coordinating Committee to Prevent Underage Drinking (ICCPUD); state annual reports on underage drinking; an adult-oriented media campaign; epidemiological studies on excessive drinking; and authorized a new program to assist pediatric health care provider organizations in educating their members on best practices for screening adolescents for alcohol use, offering brief interventions, referring to other care when needed, and working with parents.

To accomplish the goal of STOP Act reauthorization, CADCA mobilized coalition members during Capitol Hill Day, which helped the legislation achieve over 100 co-sponsors. CADCA then organized and led the National Association for the Prevention of Underage Drinking (NAPUD), a group of public health and safety organizations, in meetings with key offices in Congress. On September 8, 2016, CADCA’s Chairman and CEO, General Arthur T. Dean, testified at a Health Subcommittee hearing in the House Energy and Commerce Committee to stress the importance of the STOP Act reauthorization to Committee Members and the tremendous reductions in underage drinking that coalitions had achieved because of the STOP Act enhancement grants. CADCA and NAPUD members received important commitments from necessary offices, but the legislative calendar was ending. Due to the strong CADCA advocacy-led efforts of NAPUD, Congresswoman Roybal-Allard was able to get STOP Act reauthorization included in the 21st Century Cures legislation (P.L. 114-255), which was passed by both chambers in Congress and signed into law by President Obama on December 13, 2016.

CADCA is proud of our major legislative accomplishments that ensure effective substance use prevention, built on our coalition model, is appropriately included in legislation to address all the major substance use challenges our nation’s communities face.
Drug-Free Kids Campaign Awards Dinner

CADCA’s 18th annual Drug-Free Kids Campaign Awards Dinner (DFKC) held October 6 in Washington, D.C., recognized leaders and corporations who are supporting and educating the community about substance misuse and its impact on young people. Over 400 corporate leaders, including special guests, prominent Members of Congress, federal officials, corporate leaders, youth, and community coalition members were all unified with one voice, under one banner, with one goal – to keep children, teens, and young adults safe and healthy. There were speakers, live entertainment and opportunities to participate in a silent auction.

CADCA’s DFKC Awards Dinner provided a venue for young adult leaders to share their thoughts and insights about what it means to be leaders in the field of substance use prevention. Jetter White of the Pittsfield Prevention Partnership (Pittsfield, Massachusetts) affirmed, “Be confident, know what you want. You can be the change.” Youth coalition leader Ananth Ghosh of the SRSLY Chelsea Coalition (Chelsea, Michigan), who was also featured, shared that, “CADCA is an important inspiration source. We know that CADCA has our back – reinforcing the importance of people my age adopting peer pressure release strategies that help us realize that being drug-free is the norm.”

CADCA presented the 2016 Humanitarian of the Year award to Scott M. Melville, President and Chief Executive Officer of Consumer Healthcare Products Association (CHPA) for his commitment to addressing the complex issues of medicine abuse and misuse and for CHPA’s 10 years of outstanding partnership with CADCA. CADCA’s Champion for Drug-Free Kids award was bestowed upon The Honorable Mary Bono, Principal, FaegreBD Consulting and former Member of U.S. Congress (1998-2013) for her exceptional leadership on the issue of substance abuse while working both in and out of Congress. Funds raised through the DFKC help support CADCA’s efforts to build and strengthen local community coalitions and special programs that transform youth into civic leaders and reduce substance misuse in communities around the country.

“There is so much more that we can do. I say ‘we,’ because no one person, coalition or government entity can go at this problem alone.”

– LARRY COTE
Membership

Changing Communities
One Member at a Time

Members are the strongest supporters of CADCA. CADCA members attend trainings, advocate for prevention on Capitol Hill, tell us their success stories to share with the community at-large and much more. In return for such strong support, CADCA worked hard in 2016 to show our members that we care. We made changes to the way we recognize our members and we added benefits such as a new CADCA Prevention Job Board, a more frequent members’ newsletter and an election guide to give them more value for their membership.
What’s Changed?

MEMBER CATEGORIES.
CADCA added two new membership categories in August to better serve our member needs and to expand into a larger market. We eliminated the individual membership category and added:

PREVENTION PROFESSIONAL: Any individual who works in the substance use and prevention field, but does not belong to a specific organization.

FRIEND OF CADCA: Any individual with an interest in supporting substance abuse prevention programs and in building safe, healthy and drug-free communities.

Prevention Professionals receive a discount to training events, but Friends of CADCA do not. 2016 was a soft launch for these categories. New benefits and incentives will be rolled out in 2017 to increase membership in these categories.

OUTREACH.
We called nearly 1,500 members in 2016 to ask them what they need from CADCA. We listened and although most members tell us they are happy with their membership, we also received valuable feedback on resources that need to be developed as well as great stories on the challenges and successes that our members face in their communities every day.

RECOGNITION.
CADCA celebrated members who have been supporting CADCA for 5, 10, 15 and 20+ years. New membership lapel pins were passed out at trainings to create a sense of recognition and pride among our members. New members asked when they can receive one and are now looking forward to wearing their pins at a future CADCA event.
The Results?

2016 changes made a difference and CADCA membership is growing stronger.
Member Benefits:

To help members do their critical work effectively, we provide a number of benefits:

- Serve on Capitol Hill as the voice and champion of funding for coalitions and the prevention movement
- Use of CADCA logo for branding purposes
- Two digital newsletters: Members’ Edge, now published monthly, and Coalitions Online, published weekly
- Eligibility to enter CADCA sponsored contests and scholarship opportunities
- Legislative alerts and updates regarding CADCA’s public policy efforts and time-sensitive legislative issues
- Member-only rates for CADCA’s Leadership Forum and Mid-Year Training Institute
- Access to media outreach tools, including sample letters and templates
- Volunteer request referrals
- Discounted rates on CADCA’s printed publications and online courses
- CADCA Prevention Job Board
- Affinity Program discounts: Office Depot, Hertz, Dell, UPS
- Use of CADCA logo for branding purposes
- Member-only rates for CADCA’s Leadership Forum and Mid-Year Training Institute
- Voluntary request referrals
- CADCA Prevention Job Board
- Affinity Program discounts: Office Depot, Hertz, Dell, UPS

Additional Benefits for Sustaining Members

- Comprehensive report specifically tailored to your state based on results from the Annual Survey of Coalitions
- Ability to schedule CADCA senior leadership staff for public speaking engagements and training support
- Bi-annual state-level teleconference and/or webinar addressing issues at the forefront of states (scheduling upon request)
The Geographic Health Equity Alliance (GHEA), a CADCA project, is a national network funded by the Centers for Disease Control and Prevention (CDC) to address tobacco and cancer disparities specific to certain geographical regions throughout the United States. As we enter our fourth year, GHEA has made considerable progress in advancing our public health focal areas.

Cultural Competence in Tobacco Cessation Messaging

Alongside Community Connections, a West Virginia based coalition, GHEA utilized a barn to convey healthy messaging around quitting tobacco use and promoting the West Virginia Tobacco Quitline. The tobacco cessation messaging is based in part on the CDC’s national Tips from Former Smokers campaign (TIPS). Community Connections identified a barn in Mineral County to convey culturally competent, localized information to engage West Virginians, who have the highest reported adult smoking rates in the nation: 26.7 percent.

The TIPS campaign features real stories of people living with smoking-related diseases and disabilities. The Mineral County barn highlights Rebecca’s story, a woman who turned to smoking as an ineffective way to cope with her bouts of depression. An additional 11 barns in West Virginia will prompt calls to the West Virginia Tobacco Quitline. The Quitline offers free, evidence-based, tobacco cessation services. For the next 10 years, the Rebecca Barn will display Rebecca’s tip along U.S. Highway 50, where roughly 3,000 motorists daily will be exposed to this culturally competent messaging.

Coalition Capacity Building and Sustainability Efforts

In a working partnership with the Iowa Department of Public Health’s Division of Tobacco Use and Prevention and with support from the National Coalition Institute’s Master Trainers, GHEA is currently developing a three-part webinar series. The focus of the series is to support funded coalitions in the Hawkeye State in realizing their tobacco control goals areas, namely preventing initiation of tobacco use among youth and young adults, eliminating non-smokers’ exposure to secondhand smoke and promoting quitting among young people and adults.

GHEA is also developing skill-building and sustainability trainings with the Louisiana Healthy Communities Coalition, which will explore specific opportunities for growth with regional coalition leaders.
CADCA’s National Leadership Forum and Mid-Year Training Institute

GHEA led the development of 10 tobacco-related training sessions during the National Leadership Forum and Mid-Year Training Institute. They were presented by subject matter experts working on behalf of the CDC, professors and researchers from major universities, state-based tobacco control programs and representatives from non-governmental organizations.

Topics covered included:

- Primary and secondary prevention strategies to address tobacco and cancer disparities
- Emerging tobacco products including e-cigarettes and other electronic nicotine delivery devices
- Growing popularity of using hookah among youth and young adults
- Insight on how to include your LGBT neighbors in coalition work
- Tobacco 21 Policies

Addressing Rural Cancer Health Disparities – A GHEA Publication

GHEA and our partners at the Wake Forest School of Medicine, developed the publication Call to Action: Addressing Rural Cancer Health Disparities. The publication highlights ways leaders can address rural disparities along the cancer continuum. It provides GHEA’s geographic health equity model, which can be applied to better identify contributors to rural disparities in cancer and tobacco and implement the most appropriate practices.

Growing Social Media Presence

- GHEACast – GHEA’s Podcast
  - Facebook increase in followers: 460%
  - Twitter increase in followers: 275%
International Narcotics and Law Enforcement (INL) has supported the establishment of **229 community coalitions WORLDWIDE.**

CADCA works with in-country partners to establish coalition **NETWORKS**, currently composed of more than **7,000 CADCA-trained coalition members.**

In 2016, CADCA delivered **55 international trainings** in **19 countries** on **4 continents** in **5 languages** to more than **3,000 individuals.**
In 2016, CADCA, with the support of its global partners, was able to secure commitments and resources from local, regional, and national governments to support the development of anti-drug community coalitions through the Training of Leaders (TOL) Initiative. This approach led to the successful formation of 54 additional drug prevention coalitions, and to the strengthening of existing coalition networks in the following countries:

- **COSTA RICA**: 3 new coalitions in the greater San José Metropolitan Area
- **GHANA**: 6 new coalitions in the Eastern and Central regions
- **GUATEMALA**: 3 new coalitions in the Department of Quetzaltenango
- **HONDURAS**: 4 new coalitions in the Department of Cortéz
- **KYRGYZSTAN**: 5 new coalitions in 3 regions
- **MEXICO**: 12 new coalitions in 4 states
- **PERU**: 5 new coalitions in 5 cities
- **PHILIPPINES**: 9 new coalitions throughout the country
- **TAJIKISTAN**: 7 new coalitions throughout the country
Financial

**EXPENSES**
- Training & Technical Assistance: 36.1%
- International Programs: 18.5%
- Forum & Mid-Year Training: 21.4%
- Communications: 11.0%
- Fundraising: 5.0%
- Public Policy: 5.4%
- Membership: 2.6%

**REVENUE**
- Grants and Contracts: 59.0%
- Sponsorships & Contributions: 16.1%
- Forum & Mid-Year Training: 21.5%
- Membership Dues: 3.4%
Summation

CADCA’s mission is to strengthen the capacity of community coalitions to create and maintain safe, healthy and drug-free communities globally.

**COALITION STRENGTHENING:**

<table>
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<tr>
<th>2,654 community members impacted</th>
<th>2,000 leaders attended training</th>
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<tbody>
<tr>
<td>173 coalitions graduated</td>
<td>92 coalitions developed</td>
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<tr>
<td>93% coalitions effective at reducing substance abuse</td>
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**GLOBAL GROWTH:**

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<tr>
<th>55 international trainings in 19 NEW COUNTRIES</th>
<th>reaching 6,300 members</th>
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</thead>
<tbody>
<tr>
<td>9 countries adopted the CADCA coalition model</td>
<td>17 new coalitions in THREE NEW COUNTRIES</td>
</tr>
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</table>
PARTNERSHIPS AND POLICY:

CARA and the STOP Act Reauthorization were passed, creating effective policy change in favor of prevention.

1,000 leaders impacted

1,436 youth impacted

INNOVATION:

10 podcasts

35% increase in email marketing

60 entries

9% increase in membership

Thank you for your part in making this happen in 2016.
CADCA Board of Directors

CHAIRMAN AND CEO
Arthur T. Dean
Major General, U.S. Army, Retired
CADCA

VICE CHAIR
Jerilyn Simpson-Jordan
Past President & CEO, San Bernardino Communities Against Drugs

EMERITUS
Neil Austrian
Former Chairman & CEO, Office Depot, Inc.
and former President, The NFL

Gerald R. Roche
Senior Chairman, Heidrick & Struggles, Inc.

SECRETARY
Douglas Hughes
Past Executive Director, The Miami Coalition for a Safe and Drug-Free Community

TREASURER
Donald K. Truslow
Chief Financial Officer, Park Sterling Bank

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Principal, FaegreBD Consulting
Member of U.S. Congress (1993-2013)

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General Manager, SAVA Workforce Solutions, LLC and DEA Chief of Operations (Retired)

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Partner/Washington, D.C. Office Managing Partner, Quarles & Brady LLP

Kenneth W. Dobbins, MBA, Ph.D.
President Emeritus, Southeast Missouri State University

Karen Drexler, M.D.
National Mental Health Program Director – Substance Use Disorders, Mental Health Services (10P4M), Office of Patient Care Services, VA Central Office

Fran Flener
Former Arkansas Drug Director

Curtis Houglund
Founder, The Social Good

R. Gil Kerlikowske
Former Commissioner, U.S. Customs and Border Protection, Department of Homeland Security

Howard K. Koh, M.D., M.P.H.
Harvey V. Fineberg Professor of the Practice of Public Health Leadership, Harvard T.H. Chan School of Public Health and The Harvard Kennedy School

The Honorable Michael J. Kramer
Judge, Noble Circuit Court, 33rd Judicial Circuit of Indiana and Chair, Drug-Free Noble County

Chet Linton
President and Chief Executive Officer
School Improvement Network

Willie Mitchell
President / Interim Executive Director
San Antonio Fighting Back, Inc.

Thomas J. Reddin
Managing Partner, Red Dog Ventures, LLC

Nathaniel J. Sutton
Vice Chairman and Partner
Heidrick & Struggles, Inc.

Kathleen Widmer
President, Johnson & Johnson Consumer U.S. OTC Division, Co-Chair, Johnson & Johnson Consumer Inc., North America

Suzan Zimmerman
Senior Vice President, Strategic Campaigns
CACI International, Inc.
Coalition Advisory Committee

**Virgil Boysaw, Jr.**
Drug Free Community Coordinator
Cecil County Health Department

**Merilee Fowler**
Executive Director
MATFORCE and Community Counts

**Cheryl M. Guthier**
Past Executive Director
Community Prevention Partnership of Berks County

**Cindy C. Hayford**
Director
Deerfield Valley Community Partnership

**Michael Langer**
Chief, Office of Behavioral Health and Prevention
Department of Social and Health Services
Washington State Division of Behavioral Health and Recovery

**Erica Leary, MPH**
Program Manager
North Coastal Prevention Coalition / Vista Community Clinic

**Gregory Puckett**
Executive Director
Community Connections, Inc.

**Vicki J. Turner**
Director, Prevention Resource Center
Vice President – External Affairs,
National Prevention Network

**CADCA BOARD MEMBER**
**REPRESENTATIVE**

**The Honorable Michael J. Kramer**
Judge, Noble Circuit Court, 33rd Judicial Circuit of Indiana
Chair, Drug-Free Noble County