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September 23, 2008

We had a very successful second Annual Arizona Rural Policy Forum in Flagstaff at Northern Arizona University, July 10th and 11th.

We have enclosed for your review the Final Report of the 2008 Arizona Rural Policy Forum prepared by Jeff Peterson and Megan Stalheim of the Arizona Rural Policy Institute at NAU. These "best practices" were gleaned from successful rural programs around the world and were the basis for our discussions at the 2008 Arizona Rural Policy Forum.

Drug abuse in rural Arizona was the main focus of this year's forum. The 2008 event also highlighted the current state of the three topics discussed during the 2007 forum: Affordable Housing, Workforce Training and Recruitment and Retention of Health Care Workers in Rural Arizona.

We are very conscious of our environment, therefore, we are providing this report to you electronically. If you would like for us to provide you with a hard copy or CD of the report we would be glad to do so, please contact Charlie Thompson at charliethompson@cox.net or 602-828-9734. The final report is also posted at: <http://www.franke.nau.edu/RPI/>.

Sincerely,

Mike Ortega
Chairman, Board of Directors

Charles P. Thompson
Conference Chair

Enclosure: Final Report

2008 Arizona Rural Policy Forum

Final Report

Drug Abuse in Rural Arizona

Prepared by

The Arizona Rural Policy Institute
A Unit of the Center for Business Outreach

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A Project of the
Arizona Rural Development Council



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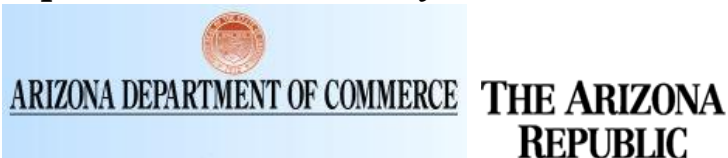


Table of Contents

Executive Summary	4
Featured Speakers and Topic Updates.....	6
Common Risk Factors.....	7
Impact of Drug Abuse on Business	10
What Can Be Done on a Community Level	12
Effective Strategies for Rural Arizona.....	15
Conclusion.....	19
Appendix.....	19
Arizona Rural Development Council.....	Error! Bookmark not defined.
Panel Chairs & Recorders	20
2008 Forum Participants.....	20

Executive Summary

The 2nd annual Rural Policy Forum was held July 10th and 11th, 2008, at the W.A. Franke College of Business on the Northern Arizona University Campus.

A project of the Arizona Rural Development Council, the forum provided a priceless opportunity for community and business leaders to become informed, discuss important topics, and network with others from around the state.

Drug abuse in rural Arizona was the main focus of this year's Arizona Rural Policy Forum. The 2008 event also highlighted the current state of the three topics discussed during the 2007 forum: Affordable Housing, Workforce Training, and Recruitment and Retention of Health Care Workers in Rural Arizona.

After an intensive series of presentations and question-and-answer sessions, the participants separated into five breakout groups. Each group, guided by panel moderators, discussed both risk factors and the effects on businesses and communities. They then identified community assets for prevention and treatment, and some best practices from current efforts from around the state and country. The results of each topic have been grouped into six major categories.

Common Risk Factors

- Perceived deficit in activities for children and youth in rural towns
- Depressed economy and lack of quality jobs
- Proximity to Mexico
- Barriers to effective law enforcement due to vast distances, lack of resources, and weak prosecution
- Lack of awareness of the consequences of drug abuse among potential users and parent
- Communities lack essential social fabric, resulting in gang activities and other social problems.

Impact of Drug Abuse on Business

- Lack of applicants who successfully pass pre-employment drug screening
- Prohibitive costs of drug screening for small businesses
- Employee theft, high turnover, and absenteeism
- Poor workplace productivity and quality
- High safety risks in potentially hazardous occupations
- Drug problems with families have a ripple effect in the workplace

What Can Be Done to Promote and Use Community Assets

- Form strong public/private sector coalitions within communities
- Establish effective leadership for community-based prevention efforts – identify “champions” within each community
- Harness the energy of youth and students
- Use the highly effective statewide coordinating organizations (Partnership for a Drug-Free America, Arizona Methamphetamine Task Force, etc.)
- Encourage effective interaction of existing prevention, enforcement, and treatment organizations
- Continue effective local/regional/tribal/statewide prevention outreach and education activities (broadcast and print media, public presentations, etc.)

Effective Strategies for Rural Arizona

- Develop effective community and regional coalitions throughout rural Arizona, including private sector, government, education, and faith-based organizations
- Establish the “Willcox Model” as a statewide standard for community action, with due consideration of local cultural characteristics
- Limit access (statewide) to pseudoephedrine and ephedrine products
- Develop a “drug abuse factsheet” to effectively inform policymakers about the economic impact of drug abuse
- Provide incentives to establish effective regional treatment centers
- Provide resources for more comprehensive drug testing activities (public employers, businesses, schools, etc)

This final report will hopefully serve as a guiding document for those involved in the epidemic of drug use in rural Arizona, with a special emphasis on Methamphetamine.

Featured Speakers and Topic Updates

The 2008 forum began on Thursday with a series of speakers addressing the current state of topics from the 2007 forum as well as 2008's central topic of the Impact of Drug Abuse on Rural Arizona.

An update and discussion of *Affordable Housing in Rural Arizona* was anchored by Fred Karnas, the director of The Arizona Department of Housing; Jean Richmond-Bowman from the Arizona Housing Commission; Helen Hudgens-Ferrel, Executive Director of Bothands; and Robert King of the Arizona Community Foundation.

The update and discussion of *Workforce Training* in the state was presented by Jody Ryan, Director of Workforce Development at the Arizona Department of Commerce, and Bill Bolin, Director of the Arizona Department of Commerce's Rural Development Office.

Joyce Hospodar, Senior Program Coordinator of the Rural Health Office at the University of Arizona's Mel and Enid Zuckerman College of Health provided the update and discussion on *the Recruitment and Retention of Health Care Workers*.

The 2008 Forum topic, *The Impact of Drugs on Arizona's Rural Economy*, was introduced and discussed at length by Leslie Bloom, CEO, and Colleen Pyra, Program Director, of the Arizona Affiliate of the Partnership for a Drug Free America. This discussion was continued on Friday morning with a presentation by Dr. Dawn Walker of Wilcox, who detailed the successful approach her community used to reduce methamphetamine abuse. Dr. Walker also provided the participants with valuable insight about the medical and social costs of methamphetamine along with prevention strategies.

Following Dr. Walker's presentation and the ensuing question and answer session, the participants separated into five discussion groups. The groups approached the discussion by first identifying risk factors and ill effects. They then discussed community assets and defined what they saw as best practices in the fight against drug abuse.

Challenges and Solutions - *Economic Impact of Drug Abuse in Rural Arizona*

Common Risk Factors

The five groups deliberated on the risk factors contributing to drug abuse in rural areas of Arizona. Group members identified the following common risk factors:

- Perceived deficit in activities for children and youth in rural towns
- Depressed economy and lack of quality jobs
- Proximity to Mexico
- Barriers to effective law enforcement, due to vast distances, lack of resources, and weak prosecution
- Lack of awareness of the consequences of drug abuse among potential users and parents
- Communities lack essential social fabric, resulting in gang activities and other social problems

Perceived Deficit in Activities for Youth

Group members suggested that youth in their area perceive a lack of activities in which to participate, and may engage in drug use as an escape from boredom. Those who live in remote areas and lack transportation could be particularly susceptible to this problem.

Cultural tolerance of drug use and the cultural norm of instant gratification were listed as possible causes for young people's preference of drug use over other activities. In addition, youth may be attracted to the "cool factors" of specific drugs, such as weight loss, increased energy, street credit, and fitting in with other users.

Economic Depression

Group participants suggested that the high rate of unemployment or underemployment found in some areas can lead to boredom and depression, which may in turn lead to drug abuse. Lack of legitimate economic opportunity also encourages participation in the lucrative trade of drug dealing. Parents who choose to stay in legitimate low wage jobs to support their family may need to

work several jobs, leaving their children unsupervised and more likely to experiment with drugs.

Poor and sparsely populated communities are attractive to dealers and meth lab operators since rent is inexpensive, law enforcement is lax, and demand for the drug is high. Dealers and bootleggers who work with impoverished users are known for cut-throat business practices such as raising prices for addicts and accepting bartered items in lieu of cash when the addict's money runs out. These practices encourage a cycle of poverty and unemployment among drug users.

Proximity to Mexican Border

Recent law enforcement efforts and increased restrictions on the sale of meth components within Arizona have encouraged a shift of drug production to Mexico. Several communities located near the U.S./Mexican border have noted an increase in drugs smuggled into their communities. In addition, the legal age for alcohol consumption in Mexico is 18, which draws underage drinkers from Arizona border towns.

Ineffective Law Enforcement

Many barriers to effective law enforcement exist in Arizona communities, including vast distances, weak prosecution, and lack of resources. In vast, understaffed law enforcement zones, officers may be unable to execute adequate surveillance. Arrests cannot be made without proof of drug use or possession, which may be difficult or impossible. Finally, law enforcement efforts often lack the necessary funding to effectively stifle drug use and production.

Lack of Public Awareness

Ignorance and misperception are barriers to drug abuse prevention efforts in communities. Lack of public awareness also hinders the detection and eradication of drug abuse. In sparsely populated rural areas, drug users may be able to keep their activities concealed from other residents and law enforcement officers fairly easily. Residents who are under the mistaken impression that drug abuse is only a problem in metropolitan areas may be less likely to detect drug-related activities in their family or neighborhood. Youth may harbor misconceptions about drugs being able to help them lose weight or fit into a social circle, and remain uneducated about drugs' long-term negative consequences.

Lack of Social Fabric in Communities

Individuals in contemporary society often experience a lower level of connection to others in their family and community. When family and community fail to provide individuals with social acceptance and stability, gangs and drug cliques become attractive alternatives. Decreasing levels of connectedness and accountability in communities also make drug abuse easier to hide and perpetuate. As a result, family and community activities are seen as unappealing, while drugs provide instant gratification. Whereas community residents used to know their neighbors and were aware of the activities of youth in the neighborhood, that is often not the case today. Decreased social cohesiveness in communities also makes anti-drug efforts more difficult to carry out, since the entire community must be involved in order to successfully eradicate drug abuse.

Other

Methamphetamine is particularly attractive to some youth because it is relatively inexpensive and easier to obtain than alcohol. It also provides an income for enterprising youth. Lighter legal penalties for youth compared to adult offenders may also serve to embolden young drug abusers.

Group members also cited societal factors that contribute to drug abuse, such as parents who are not very involved in their children's development and the rise of gang culture in rural areas and on Native American reservations. Cultural factors noted include a society which values privacy over connectedness and immediate gratification over hard work with long-term rewards.

Impact of Drug Abuse on Business

The five groups deliberated on the impact of drug abuse on business in their communities. Group members identified the following key impacts:

- Lack of applicants who successfully pass pre-employment drug screening
- Prohibitive costs of drug screening for small businesses
- Employee theft, high turnover, and absenteeism
- Poor workplace productivity and quality
- High safety risks in potentially hazardous occupations
- Drug problems within families have a ripple effect in the workplace

Lack of applicants who successfully pass pre-employment drug screening

Several businesses reported finding very low percentages of applicants who pass a drug test. When businesses are unable to find drug-free applicants, they are forced to lower their standards or recruit labor from other pools, such as recent high school graduates or workers from more distant communities. This may result in a lower-skilled workforce or additional transportation costs for the employer. Some businesses have even been forced to shut down due to a lack of available drug-free employees.

Prohibitive costs of drug screening for small businesses

Small businesses in particular suffer from the increased drug screening and insurance costs caused by increased drug abuse, since their expense per employee is much higher than that of a large business. Discussion participants noted that small businesses are often unable to afford drug screening, and may only become aware of drug abuse among employees through decreased work performance or legal charges brought against the employee. As a result, small businesses face great problems with employee retention due to drug abuse.

Employee theft, high turnover, and absenteeism

When businesses are forced to hire employees without performing a pre-employment drug screening or when employees develop drug abuse problems after their hire, employers observe higher instances of employee theft, turnover, and absenteeism. Even drug users who are productive workers when they are

present might go on “benders” and miss work for an entire week or more when the company needs them most.

Poor workplace productivity and quality

Employees who abuse drugs are routinely less productive at work. They often come to work under the influence of drugs, physically exhausted, emotionally disturbed, or lacking motivation. The quality of their performance as well as the volume of work they are able to accomplish suffers measurably.

High safety risks in potentially hazardous occupations

Employees working under the influence of drugs put themselves and others under great risk of physical injury or death when operating heavy machinery.

Drug problems within families have a ripple effect in the workplace

Employees who have drug problems in their families are often less productive at work due to stress and increased absenteeism. They often need to leave work suddenly or miss work in order to deal with the problems of their drug abusing family member(s). Youth with drug-abusing parents who often miss work are more likely to abuse drugs themselves and copy their parents’ poor work habits.

Other

Even though youth are the primary focus of many methamphetamine prevention efforts, the average age for meth users is 32. Since the average user is in prime child-rearing years, the quality of parenting and domestic work may suffer as drastically as the quality of work which takes place outside of the home. When meth users fail at their jobs as parents, children are removed from the household and sent to adoption agencies. This process is quite costly for the county. In Pima County, 700 children are currently available for adoption, and drug use is the primary reason they have been removed from their homes.

What Can Be Done on a Community Level

Participants were asked to identify what can be done on a community level to promote community assets (families, faith based, schools, programs) to deter drug abuse in rural communities?

- Form strong public/private sector coalitions within communities
- Establish effective leadership for community-based prevention efforts— identify “champions” within each community
- Harness the energy of youth and students
- Use the highly effective statewide coordinating organizations (Partnership for a Drug Free America, Arizona Methamphetamine Task Force, etc.)
- Encourage effective interaction of existing prevention/ enforcement/ treatment organizations
- Continue and increase effective local/regional/tribal/statewide prevention outreach and education activities (i.e., broadcast and print media, public presentations)

Form strong public/private sector coalitions within communities

“Looking only to government may not be the best solution.”

Most groups noted that the skills of both private and public entities are necessary to successfully address the issue. The assets of the community exist both within and outside the government. As mentioned repeatedly during the forum’s presentations and discussions as well as the background report, drug abuse is a financial drain on private firms through such issues as employee turnover and theft. Businesses should be cooperative if they realize that their best interest lies in the eradication of this problem. The public and private sectors have different skill sets; using every approach possible is the surest way to solve the problem. It will be necessary to define the common interests of the sectors.

The motivations and assets of the private sector will vary. For-profit businesses require a competent, drug-free workforce and have financial power over their employees. Nonprofits, churches, and educational institutions exist to better the community and provide essential services and outreach. As one attendee stated

in the post-forum questionnaire, “Are we relying solely on government to solve our problems? That is a recipe for disaster.”

Establish effective leadership for community-based prevention efforts— identify “champions” within each community

Leadership is essential when bringing together the mix of service providers necessary to enact such extensive social action. Finding the right leadership within the community is necessary, and these people must be groomed to address the long-term problem. Leadership needs to be identified, and existing assets need to be outlined and involved. It has been repeated that leadership needs to be identified by those involved. From the identified leadership locals must appoint “champions” who direct and mobilize the assets available and lead a strong task force to tackle the issue.

The leader of each coalition depends on the community. It is important to accurately identify where the leadership lies. Leaders may be anywhere, from government to the business community to youth leadership. Picking the right person for the job is essential.

Harness the energy of youth and students

Youth summits were mentioned by several groups. A number of outgoing questionnaires lamented the lack of a youth voice in the forum’s drug discussions. Young people are not only a significant portion of the users in many areas, they are also an essential part of the community and can provide insight into many of the factors that contribute to drug use.

Student and youth leaders are needed in order to bring up the issues of this significant portion of stakeholders. The unique insights they have into the problem may hold the key to solving the issue for young people.

Use the highly effective statewide coordinating organizations (i.e., Partnership for a Drug Free America, Arizona Methamphetamine Task Force, etc.)

Arizona is fortunate to have a number of talented statewide coordinating agencies. Participants discussed the need for outside experts to work directly with local systems and leadership in promoting the development of a sustainable, culturally appropriate plan for individual communities. Teams of experts can help provide direction and support to local leaders. These locals can then mobilize their assets, address relevant barriers and take action in consideration of the local culture and resources. Direction from such experts will ensure that

interventions are rooted in evidence-based practice and that locally crafted responses apply patterns that have proven successful.

Local drug-abuse coalitions should use the services and knowledge of such groups as the Partnership for a Drug-Free America and the Arizona Methamphetamine Task Force.

Effective interaction of existing prevention/enforcement/treatment organizations

The existing groups should work together to create new strategies and emulate proven best practices. Simply enforcing the rules and policies already in place would lead to reductions in incidences of drug use. There is a general consensus that there are many rural community assets available to deter drug abuse.

Every community has its unique mix of organizations already in place. Even very small communities use state and county law enforcement resources. Many are home to additional prevention and treatment organizations. Panel recommendations advocate the effective use of these currently available resources, both alone and in collaboration with each other.

In terms of mobilizing these various entities, acknowledging the problem and assessing how each views it must come first. The chosen leadership must bear in mind the different viewpoints.

Assets need to be identified and utilized, including medical facilities, schools, townspeople, churches, community groups, law enforcement, stay at home parents, social services, and young people.

Continue and increase effective local/regional/tribal/statewide prevention outreach and education activities (i.e., broadcast and print media, public presentations)

Education has proven effective in reducing meth use. The Montana Meth Project and successors such as the Arizona Meth Project and the National Indian Country Meth Initiative have worked to drastically reduce the number of people who use the drug. These projects use highly visible media to deliver messages about drug abuse. Most groups agreed that the use of such projects should continue and be more widespread. The people reached by these messages become educated about the consequences of drug use, the risks of addiction, and the effects of drug use on others. The effective continued use of a successful and proven program is something everyone can agree on.

Other

The groups mentioned other community assets that didn't necessarily fit in the six major categories above. Reports stressed the fact that tailoring efforts to individual communities is essential. No two places will be identical, and what works in one place will not work exactly the same in another.

Treatment should be both accessible and affordable for those who need it. This is especially important for those arrested and convicted, as the motivation to quit the drug will be high. Therefore, rehabilitation programs should be more widespread and available wherever the drug problem is found.

Drug testing is often repeated as a necessary approach. Where testing is appropriate is often debated. Some believe testing should be applied to students, teachers, and all government workers. A group even recommended the testing of certain private employees.

One group was concerned that local governments might not always be trusted to tackle problems like this. Because they often have competing obligations they may mishandle their duties. In this case other community assets might be more appropriate managers of drug policy. School districts and community centers were specifically mentioned.

Effective Strategies for Rural Arizona

The final topic discussed by breakout groups focused on identifying the best practices to address and create momentum in the fight against substance abuse. These were identified as the best strategies for rural Arizona.

- Develop effective community and regional coalitions throughout rural Arizona, including private sector, government, education, and faith-based organizations
- Establish the “Willcox Model” as a statewide standard for community action, with due consideration of local cultural characteristics
- Limit access (statewide) to pseudoephedrine and ephedrine products
- Develop a “drug abuse factsheet” to effectively inform policy makers about the economic impact of drug abuse
- Provide incentives to establish effective regional treatment centers
- Provide resources for more comprehensive drug testing activities (businesses, schools, etc.)

Develop effective community and regional coalitions throughout rural Arizona, including private sector, government, education, and faith-based organizations

The best anti-drug plans are supported by regional and community coalitions. These include teachers, school administrators, corporations, local businesses, and all possible public agencies. There is really no limit to the amount of people and organizations that should participate.

Effective coalitions need structure and accountability, and they must be based on the uniqueness of specific areas. A community may need to use consensus or democratic models, depending on its cultural aspects. Leadership is as important as the participants. Although each area will require certain unique approaches, the available examples are many, and communities should use the work of others as a model.

It is also important to use the resources that are available through the state and federal governments as well as non-governmental resources such as the Partnership for a Drug-Free America.

Establish the “Willcox Model” as a statewide standard for community action, with due consideration of local cultural characteristics

The approach Willcox took to address its meth problem should serve as a model for the entire state. The city took many of the best practices available and integrated them into a comprehensive and effective plan. Willcox’ Methamphetamine Task Force promoted education at every opportunity. It educated physicians about prevention and identifying meth-related illnesses. It used free advertising donated by the movie theatre, newspaper, and radio station, to reach people all over town. Medical and law-enforcement personnel presented educational forums to community organizations, local businesses and schools. Over-the-counter sales of pseudoephedrine were limited. Many businesses implemented random and pre-employment drug tests. Even the Willcox Unified School District implemented random testing of students. The Task Force facilitated treatment programs through the hospital and partnerships with larger cities.

Limit access (statewide) to pseudoephedrine and ephedrine products

Limiting access to pseudoephedrine has reduced the amount of locally-produced meth in communities across the country. Many states have laws requiring limited access, and some communities in Arizona do as well. Many groups suggested passing a state law to this effect.

Develop a “drug abuse factsheet” to effectively inform policymakers about the economic impact of drug abuse

Because education has proven to be an effective tool in this fight, the groups suggested creating a consistent fact sheet that can focus on different problems associated with drug abuse. While many policy makers may understand the personal toll the drug makes, they may be unaware of the economic impact. It has been proven that the effects of drug use go well beyond the negative personal impacts seen in most anti-drug campaigns. If more people were aware of the costs to government and private enterprises, there might be more community buy-in. Several groups suggested a significant increase in funding aimed at drug abuse education.

Provide incentives to establish effective regional treatment centers

The success of treatment programs moved several groups to advocate for increased incentives for creating treatment centers. This is important in communities as well as the prisons, as drug addicts either check themselves into treatment or do so under the direction of law enforcement. Participants called for

an increase in funds and other resources offered to communities as an incentive to provide more treatment opportunities.

Provide resources for more comprehensive drug testing activities (businesses, schools, etc.)

Drug tests seem to have a dampening effect on drug use rates. Who and when to test is sometimes debated. Groups differed in who they believed should face drug test. Alternately, schools (employees and students), law enforcement, governmental institutions, and certain businesses were mentioned. Different communities will see different priorities and privacy issues. However, because of the proven success of testing programs, communities should be able to test when they decide to do so. Funding, expertise, and other resources should be offered to communities that choose to use drug tests.

Other

Other best practices participants noted are worth mentioning. One group emphasized that many cultures use certain drugs in cultural and religious ceremonies. These culturally-appropriate instances of drug use need to be respected and separated from the definition of drug abuse.

Some suggested reforming legislation that deals with the complex and specific issues off meth use. Because the abuse of this drug leads to such severe consequences, it deserves special consideration in federal, state, and local law. This approach might go as far as using creative sentencing that implements education as well as punishment.

Another suggestion was to tie sobriety in with eligibility for public resources and social privileges, such as the legal right to drive.

Also discussed was the inclusion of “non-traditional” participants in discussing solutions. Some people mentioned were homeowners, mail carriers, families of drug users, and the users themselves.

Conclusion

Nearly all of rural Arizona is touched somehow by the negative effects of illegal drug abuse. The problem crosses all lines, between personal, professional, and community life. The solution to the problem can be found in the many approaches that have been used already around the state and the country. By working together and using all the resources available, communities and the entire state can stop the growth of the drug problem and eventually eradicate it.

This can be accomplished by implementing a combination of incentives, punishments, and cultural pressures. If people living together can successfully apply these three tools, the negative results of drug abuse can be stamped out. Governments and organizations tasked with solving the problem must use their resources to provide the proper tools for locals to tackle their individual situations. The best practices are available to imitate. Strong, current methods can be encouraged and enhanced. With a concentrated, collaborative effort put into place, next year's Rural Policy Forum can include dozens of examples of small victories in Arizona's fight against rural drug abuse.

Appendix

Panel Chairs & Recorders

Group	Moderator	Recorder
Ponderosa	Mike Ortega	Corrie Griffith
Aspen	Marty Laurel	Allie Stender-Mrazek
Juniper	Eddie Browning	Eslir Musta
Pinon	Carol Sanger	Jaina Moan
Palo Verde	Jane Whitmire	Stefanie Kunze

2008 Forum Participants

Mike	Albertson	Health Solutions and Market Intelligence
Arthur	Batala	The Hopi Tribe
Tom	Belshe	League of Arizona Cities and Towns
Leslie	Bloom	Partnership for Drug Free America
Larisa	Bogardus	Town of Springerville
Connie	Boggs	Pinetop-Lakeside Main Street/Economic Development
Bill	Bolin	Arizona Department of Commerce
Leah	Bornstein	Coconino Community College
Sheila	Breen	Grand Canyon Unified School District
Eddie	Browning	USDA Rural Development
Marc	Chopin	NAU - W.A. Franke College of Business
Madeleine	Coil	United Way of Yuma County, Inc.
Glenn	Cummings	Gila River Indian Community
Aja	DeZeeuw	Town of Superior
Teri	Drew	NACOG
Suzanne	Drum	SEAGO
Eric	Duthie	Town of Taylor
Maria	Echeveste	Bank of America
Rebecca	Flanagan	U.S. Housing and Urban Development
Keith	Fish	Town of Taylor
Wayne	Fox	WA Franke College of Business
Laurie	Frost	Navajo County
Richard	Gaar	SouthEastern Arizona Governments Organization
Kathy	Gallagher	DNA Peoples Legal Services
Mason	Gerety	NAU
Kathleen	Gomez	Southeast Arizona Medical Center
John	Grahame	Coconino County Sustainable Economic Development Initiative
Judy	Gresser	Arizona Community Foundation
L. H.	Hamilton	Cochise County Facilities Management
Angie	Harmon	Freeport McMoRan Copper and Gold, Inc.
Peg	Harmon	Catholic Community Services of Southern Arizona
Leila	Help-Tulley	Navajo Nation Legislative Branch
Mignonne	Hollis	Cochise College
Bill	Holmes	Wells Fargo
Todd D.	Honyaoma, Sr.	Hopi Tribe
Joyce	Hospodar	Rural Health Office, UA MEZCOPH
Chuck	Hoyack	Cochise College
Helen	Hudgens-Ferrell	Bothands
Matt	Jewett	Children's Action Alliance
Fred	Karnas	Arizona Department of Housing
Kelley	Keffer-Marsh	Mohave Community College
Gary	Kellogg	Partnership For Economic Development
Robert	King	Arizona Community Foundation
Carl	Kinney	Arizona Housing Finance Authority
Jeffrey	Kros	League of Arizona Cities and Towns
Romalita	Laban	Walpai Housing Management

Marty	Laurel	Blue Cross Blue Shield of Arizona
Connie	Leto	Citizens Against Substance Abuse
Todd	Madeksza	County Supervisors Association of Arizona
Gary	Marks	Prescott Valley Economic Development Foundation
Chris	Martin	Southern Gila County EDC
David	Maurer	Prescott Chamber of Commerce
Cindy	May	APS
Jeff	McCormick	Arizona Department of Commerce
Mike	McElmury	APS
Stephanie	McKinney	National Bank of Arizona
Nancy	McLain	AZ House of Representatives
Jen	Miles	Mohave County
Randy	Nelson	AWC SBDC
George	Nerhan	Town of Huachuca City
Lloyd	Notah, Jr.	Office of Planning and Evaluation
Sally	Odette	APS
Michael	Ortega	Cochise County
Dana	Overson	EDAC Corporation
Rayna	Palmer	Apache Junction Chamber of Commerce
Lynne	Pancrazi	Arizona State Legislation
Julie	Pastrick	Flagstaff Chamber of Commerce
Gaye	Perry	Central Arizona College
Donna	Phipps	APS
Barbara	Poley	The Hopi Foundation
Sara	Presler	Mayor, City of Flagstaff
Mike	Proctor	University of Arizona - CALS
Colleen	Pyra	Partnership for a Drug Free America
Renee	RedDog	Tohono O'odham Ki:Ki Association
Bill	Regner	Clarkdale Planning & Zoning
Daniel	Rhodes	Yuma Police Department
Everett	Rhodes	Project CENTRL
Jean	Richmond-Bowman	Toltec Strategies
Carla	Roberts	ACF/AZRDC
Chris	Romiti	Central Arizona College
Casey	Rooney	City of Cottonwood Economic Development
James	Rounds	Elliott D. Pollack
Jody	Ryan	AZ Department of Commerce
Carol	Sanger	Arizona Community Foundation
Don	Schoening	Arizona Western College
Lynne	Skelton	Town of Sahuarita
Danny	Smith	City of Safford
Gary	Smith	Unisource Energy Services
Richard	Smith	Flagstaff Medical Center
Ken	Sweet	NACOG
Carl	Taylor	Coconino County
Charlie	Thompson	Community Advisor
Kathy	Turner	United Way of Northern Arizona
Nils	Urman	City of Nogales

Ken	Volz	Payson Regional Economic Development Corporation
Dawn	Walker	Northern Coconino Community Hospital
Heather	Walker	HWC
Ron	Walker	Mohave County
Kim	Winter	Williams Chamber of Commerce
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