Turning the Curve in Vermont with Community-Based Prevention

Why prevention?

Because 9 out of 10 people with addiction involving nicotine, alcohol or other drugs began using these substances before they were 18 years old.

Because people who began using addictive substances before age 15 are 6 1/2 times likelier to become addicted than those who delay first use until age 21 or older.

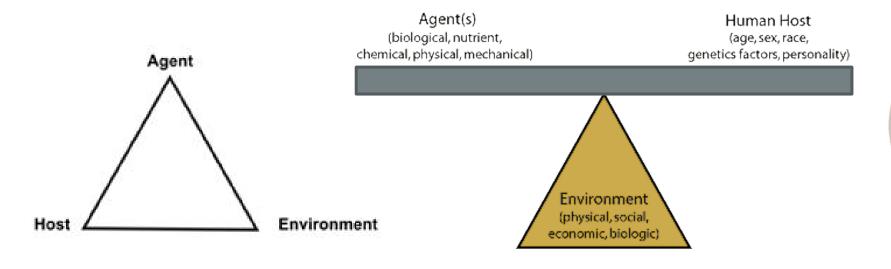
Because only 10% of health outcomes are a result of medical care. 50% to 60% of health outcomes are due to behavioral health problems.

Goals of Prevention

Years of research show that effective substance abuse prevention:

- is targeted to **promote protective factors** against addiction and **reduce risks** for addiction
- helps individuals develop the knowledge, attitudes, and skills they need to make good choices or change harmful behaviors
- has multiple and connected interventions in communities, schools, families and media
- addresses all forms of substance use
- is **sustained** over time

Public Health Models



This model shows
Agent, Host, and Environment
as having equal influence.

This model shows
Agent and Host as variables
that are dependent on each
other and on the
Environment.

Policies and Systems Local, state, and federal policies and laws, economic and cultural influences, media Community Physical, social and cultural environment Organizations Schools, worksites, faith-based organizations, etc. Relationships Family, peers, social networks Individual Knowledge, attitudes, beliefs

This model shows that in order to prevent ATOD use, acting across multiple levels of the model at the same time is critical to shift outcomes.

This approach is more likely to sustain prevention efforts over time than any single intervention.

Community-Based Prevention:

Provide coordinated programs among many agencies and organizations involved in prevention.

Prevention Principles for Community Based Prevention:

- Community prevention programs that combine two or more effective programs (e.g., family-based and school-based programs) can be more effective than stand-alone programs
- Community prevention programs targeting populations in multiple settings are most effective when they present consistent, communitywide messages across settings
- · Programs match the needs, norms, and culture of the community
- Retain core elements of the original research-based intervention: structure, content, delivery
- Long-term with repeated interventions or booster sessions to reinforce original prevention goals

Community-Based Prevention

Prevention with youth

Prevention with older adults

Prevention in the workplace

Prevention in the military

Prevention with adults

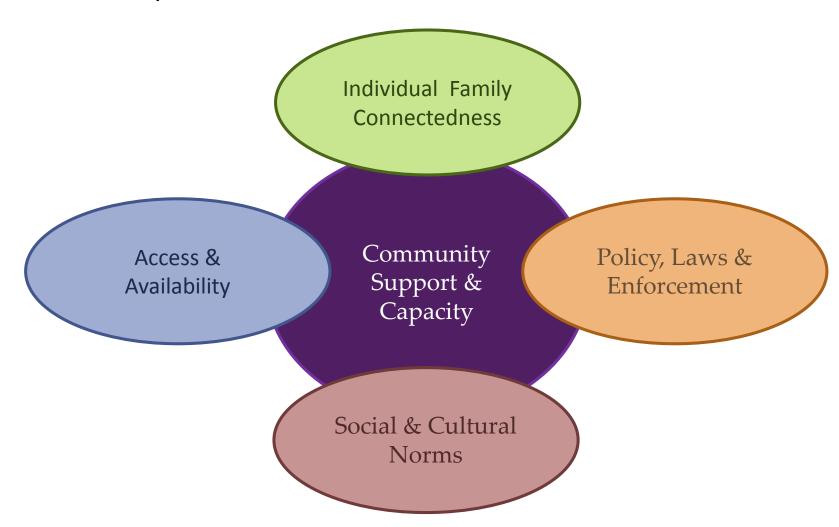
Prevention with special populations

Prevention on campus

Prevention in the community

Community Substance Abuse Prevention Coalitions

Creating communities where individuals, families, schools, faith-based organizations, and workplaces take action to promote emotional health and reduce the likelihood of substance abuse.



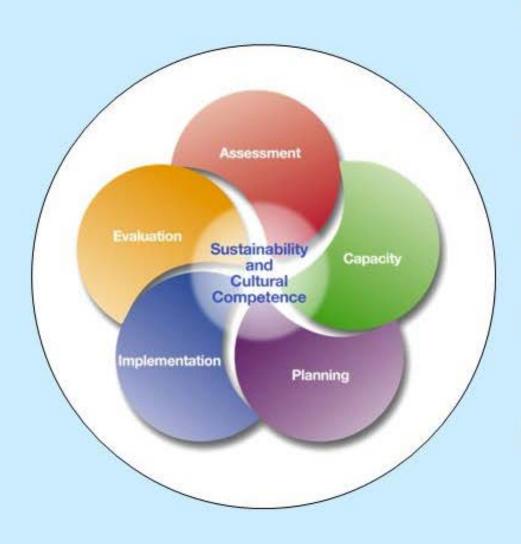




A comprehensive approach using as many or all seven prevention strategies works best.

Strategic Prevention Framework

Supports Accountability, Capacity, and Effectiveness



Assessment

Profile population needs, resources, and readiness to address needs and gaps

Capacity

Mobilize and/or build capacity to address needs

Planning

Develop a Comprehensive Strategic Plan

Implementation

Implement evidence-based prevention programs and activities

Evaluation

Monitor, evaluate, sustain, and improve or replace those that fail















Connecting outh in

Chittenden



Winooski Coalition for a Safe and Peaceful Community











Burlington Partnership for a Healthy Community





Engaging and inspiring healthy communities



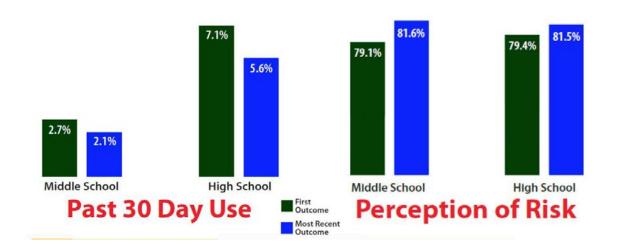


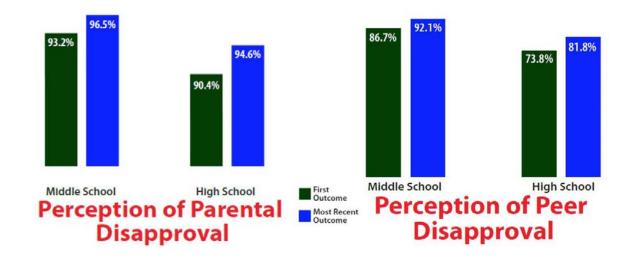


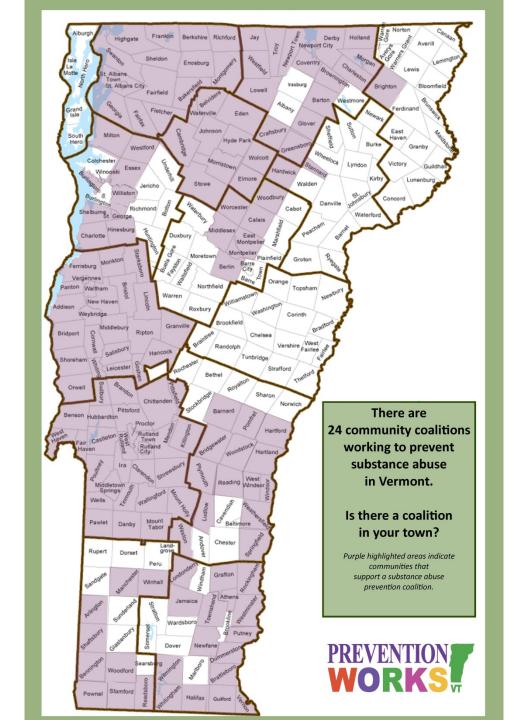


Drug-Free Communities (DFC) Support Program Findings on Illicit Use of Prescription Drugs from the 2014 National Evaluation

Core Measure Data for FY 2013 Grantees







What do Coalitions do to Prevent Adolescent Use of Prescription Drugs?

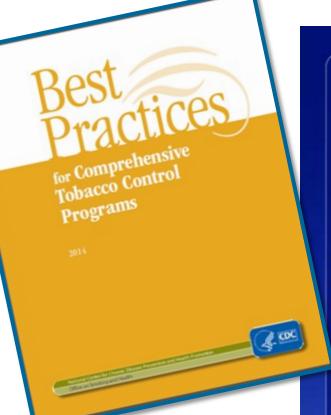
- Increase Awareness at Schools-(Administrators/Teachers/Students)
 - How?
 - Website
 - Informational brochures
 - Training programs (for Teachers/Prevention Educators)
- Engage Youth
 - How?
 - Developing materials (posters, informational flyers)
 - Social marketing campaigns
- Parental Awareness
 - How?
 - PTA
 - Informational brochures
 - Website
- Restricting Availability/Access
 - How?
 - Active parental involvement
 - Safeguard procedures (know your drugs!)

A comprehensive state approach to ATOD prevention would include several parts

- Universal school based prevention for youth
- Universal school based prevention for parents
- Comprehensive set of environmental prevention strategies
- Media campaign that supports the messages of the above
- Setting benchmarks and collecting data to monitor (both inputs & outcomes)
- Coalitions can play a role in keeping up awareness, community pressure & ensuring fidelity
- Provide schools/coalitions resources and support they need to implement well, and ensure accountability

A comprehensive approach to ATOD prevention would NOT include

- School based "one shots" (assemblies, DUI crash videos, guest speakers, parent education night)
- Field trips (substance abuse treatment centers)
- Art-based projects (making skits, songs or posters)
- Science-based projects (chemistry of alcohol)
- Health curricula module on drugs (although well meaning, often not evidencebased)
- Having youth carry out ineffective prevention strategies
- Having schools/community organizations chase grants
- Fear Arousal
- Personal Testimony from People in Recovery



We know what works

- Sustained funding of comprehensive programs
- Excise tax increases
- 100% smoke-free policies
- Aggressive media campaigns
- Cessation services access
- Comprehensive advertising restrictions



Opportunities to do more

1. Create an interdisciplinary and cross-sector collaboration across the vertically organized agencies ("cylinders of excellence") that currently provide health, education, social, protection, and justice services.

National Prevention Strategy



National Prevention Council

Department of Labor
Department of Transportation
Department of Veterans Affairs
Environmental Protection Agency
Federal Trade Commission
Office of Management and Budget
Office of National Drug Control Policy
White House Domestic Policy Council

2. Adopt a single universal prevention curriculum in all schools.

- Not giving anything up
 - No evidence that picking programs based on a needs assessment leads to better outcomes
 - Universal programs are designed for all anyway
- Its about giving all VT youth access to the best prevention programming
- Makes it easier for state system to support high quality implementation
- Provide each school with a stipend (3-5K per year) to offset some of the costs (depends on implementation)
- Utilize current ADAP prevention specialists
- Task & support existing coalitions with supporting roll out and evidence-based environmental prevention strategies
- Add other prevention pieces over time

3. Identify improved models to invest in Prevention at the community level to complement investments currently being made to Recovery & Treatment.

Vermont will use outcome data from controlled studies and information from cost-benefit analyses to inform policy decisions regarding investments in prevention, treatment, and control of behavioral health problems.

Allocate a distinct % of all public funds spent on young people support effective prevention programs.

4. Vermont will be a leader as states across the U.S. create cross-agency "backbone" organizations that provide coaching, technical assistance, and monitoring services to local community organizations that provide behavioral health promotion and prevention services for youth and their families. (Could be a Not for Profit or University)

5. Develop and increase public awareness of the advances and cost savings of effective prevention that promotes healthy behaviors for all.

So that a majority of Vermonters report that it is possible and cost-effective to prevent substance use among children and adolescents.

6. Disseminate a universal prevention message for youth that any use of substance causes health risk.

7. Increase beer & wine taxes.

This environmental policy reduces alcohol use and provides funding for other addressing substance use issues.

8. Enhance promotion of Drug-Take Back Days

The vast majority of drugs recovered at take back days are non-scheduled – we need to do a better job of getting leftover opiates out of homes (ie. distribute Rx disposal bags to Meals on Wheels for its homebound clients).

9. Create a VT Legislative Caucus on ATOD & addiction.

To educate and raise awareness among lawmakers about addiction prevention and treatment and substance abuse.

10. Identify and engage Employers

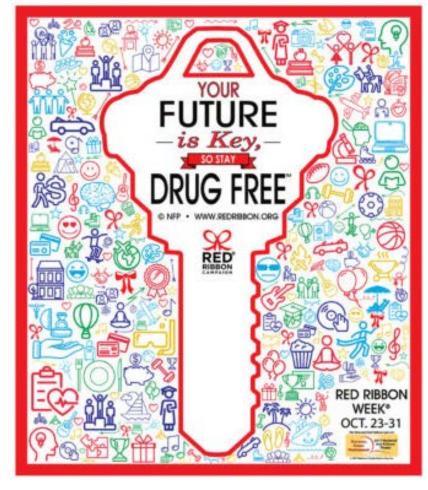
they are a key component to reaching families and identifying new resources to contribute to our work.

11. Provide training to health care providers, health care administrators, and health care students, community-based care professionals, home visiting program staff, and other community programs and all VT state employees.

12. Use high profile months – like October – to promote our efforts

October is...







October is National Substance Abuse Prevention Month