

Division Substance Use Programs (DSU)

Prevention System & Program Overview July 1, 2024 – June 30, 2025 (FY25)

Substance Misuse Prevention uses a public health approach focused on addressing risk and protective factors to positively impact communities and people across the lifespan. Fiscal Year 2025 (FY25) marks the second year of a new regional funding structure that has allowed for expansion of prevention activities as a result of a \$3 million state investment and a broad prevention system enhancement that began in FY24.

Vision

A substance misuse prevention system in Vermont that is sustainable, scalable, and equitable and uses evidence-based/informed/best practice programs, policies, and innovative approaches to prevent the onset of substance misuse disorder, delay initiation of use, promote healthy lifestyles and optimize well-being among individuals, families, and communities across the lifespan.

High-level goals

1. Prevent and reduce substance use/misuse across all ages and substances.
2. Ensure all Vermonters have access to substance misuse prevention statewide that allows for and optimizes regional assets and variability.
3. Decrease geographic and other health disparities.
4. Increase efficiency and collaboration on prevention efforts across all state, public, and private entities through a consolidated and holistic approach to prevention that is sustainable, scalable, and equitable - [Vermont Substance Misuse Prevention Oversight and Advisory Council \(SMPC\)](#) Goal #3.

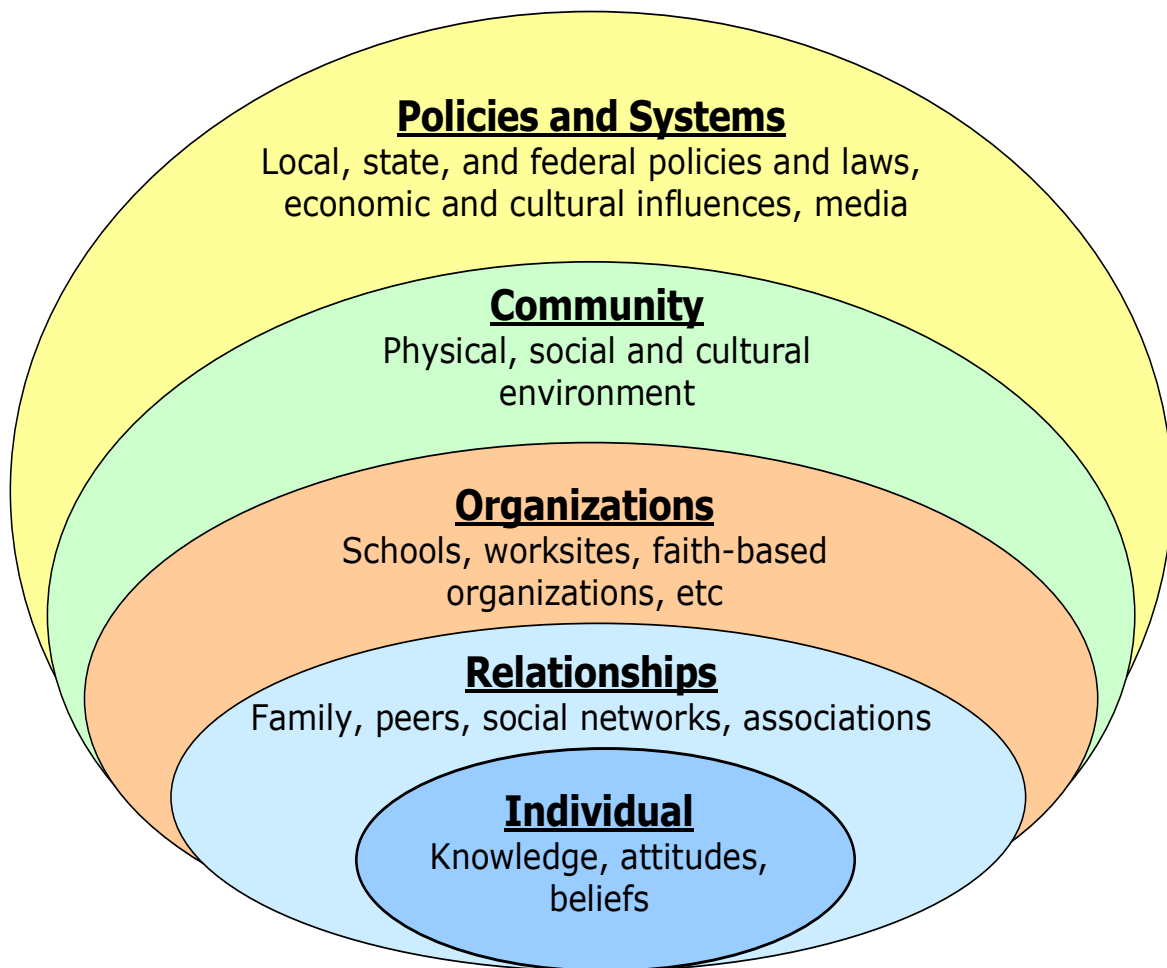
Prevention in Vermont

- Focuses on all substances and age groups
- Follows the Vermont Prevention Model (see page 2)
- Is built upon the [Strategic Prevention Framework](#) (SPF) and other research-based prevention principles while allowing for flexibility and innovation
- Supports and sustains substance misuse prevention coalitions
- Is embedded in other organizations and systems such as schools, third spaces, and higher education
- Engages non-traditional groups and partners
- Is coordinated and cost effective
- Includes and values primary, secondary, and tertiary prevention
- Is continually evolving

Vermont Prevention Model

It takes a combination of actions, sustained over time, to prevent and reduce alcohol and other drug use and misuse. Prevention strategies are most likely to succeed if they reach people holistically in all the environments in which they live: individual, family, school, community, and state level. The Vermont Prevention Model is a visual depiction of this holistic, or comprehensive framework and is the basis for DSU's prevention efforts.

Vermont Prevention Model



Adapted from: McElroy KR, Bibeau D, Steckler A, Glanz K. An ecological perspective on health promotion programs. *Health Education Quarterly* 15:351-377, 1988.

FY25 Funding Sources

The following funding sources support substance use prevention efforts across state, community, school, family, and individual environments:

- The Department of Health and Human Services Substance Abuse and Mental Health Services Administration ([SAMHSA](#)) Substance Use Prevention, Treatment and Recovery (SUPTRS) Block Grant, and SAMHSA COVID Block Grant Supplement, Mitigation and American Rescue Plan Act (ARPA) funding - funds substance misuse coalitions, Prevention Consultant Network, school-based services, and college initiatives.
- SAMHSA Strategic Prevention Framework – Partnerships for Success for States (PFS) grant - funds Vermont's Regional Prevention Partnerships (RPP) Initiative (9/1/20 through 8/31/25).
- Vermont State Appropriation (general fund/cannabis excise tax dollars) – funds Vermont Prevention Lead Organization (VPLO) structure and substance misuse coalitions and prevention partners.
- Vermont State Appropriation (tobacco master settlement funds) - funds Youth Vaping Grants and media campaign to address youth vaping of nicotine and cannabis (7/1/22 through 6/30/25).
- [Act 173 \(S.243\)](#): An Act Relating to Combating Opioid Use in Vermont - provides funding to support a statewide drug disposal system and educational media campaigns.

Strategic Prevention Framework

Prevention planners are pressed to put in place solutions to urgent substance misuse issues facing their communities. Research and experience have shown that prevention must begin with an understanding of these complex behavioral health issues within their complex environmental contexts; only then can communities establish and implement effective plans to address substance misuse.

To facilitate this understanding, SAMHSA developed the SPF which consists of five steps and two guiding principles that offer prevention planners a comprehensive approach to understanding and addressing the substance misuse and related behavioral health problems facing their states and communities.

The SPF includes these five steps:

1. **Assessment:** Identify local prevention needs based on data (e.g., What is the problem?)
2. **Capacity:** Build local resources and readiness to address prevention needs (e.g., What do you have to work with?)



3. **Planning**: Find out what works to address prevention needs and how to do it well (e.g., What should you do and how should you do it?)
4. **Implementation**: Deliver evidence-based programs and practices as intended (e.g., How can you put your plan into action?)
5. **Evaluation**: Examine the process and outcomes of programs and practices (e.g., Is your plan succeeding?)

The SPF is also guided by two cross-cutting principles that should be integrated into each of the steps that comprise it:

- ◆ **Cultural competence**: The ability of an individual or organization to understand and interact effectively with people who have different values, lifestyles, and traditions based on their distinctive heritage and social relationships.
- ◆ **Sustainability**: The process of building an adaptive and effective system that achieves and maintains desired long-term results.

The SPF has several defining characteristics that set it apart from other strategic planning processes. Most notably, it is:

- ◆ **Dynamic and iterative**. Assessment is the starting point, but planners will return to this step again and again as their community's substance misuse problems and capacities evolve. Communities may also engage in activities related to multiple steps simultaneously. For example, planners may need to find and mobilize additional capacity to support implementation once a program or practice is underway. For these reasons, the SPF is a circular rather than a linear model.
- ◆ **Data-driven**. The SPF is designed to help planners gather and use data to guide all prevention decisions including identifying which substance misuse issues to address in their communities, choosing the most appropriate ways to address those issues, and determining whether communities are making progress.
- ◆ **Reliant on and encourages a team approach**. Each step of the SPF requires and greatly benefits from the participation of diverse community partners. The individuals and institutions involved in prevention efforts may change as the initiative evolves, but the need for prevention partners will remain constant.

FY25 DSU Prevention Initiatives, Programs and Grants include:

Vermont Prevention Lead Organizations

Through a competitive process, four VPLOs were established in FY24 to ensure coordinated prevention work statewide. They serve as fiscal agents to community organizations, coordinate through a regional advisory structure, and work with district partners to allocate substance misuse prevention funding in their region.

Allocations are based on community assessments of regional and community needs, identified risk and protective factors, and community readiness in a manner that ensures prevention coverage in all 12 Vermont Department of Health (VDH) Health Districts.

The VPLOs are funded by the \$3 million per year state appropriation for substance misuse prevention in Vermont. Beginning January 1, 2024, VPLOs began subgranting state funding to substance misuse coalitions and other prevention partners statewide.

The four VPLOs are made up of the following VDH Health Districts and grantees as follows:

- Region 1 (Burlington, St. Albans, Barre) – United Way of Northwest Vermont
- Region 2 (Middlebury, Rutland) – Rutland Regional Medical Center
- Region 3 (Newport, St. Johnsbury, Morrisville) – Northeastern Vermont Regional Hospital
- Region 4 (Bennington, Brattleboro, Springfield, White River Junction) - The Collaborative

Youth Vaping Grants

To continue addressing the ongoing public health challenge of youth vaping, DSU, in partnership with the Division of Health Promotion and Disease Prevention, has awarded a third year of funding to eight grantees to prevent vaping of cannabis and nicotine by youth 21 and under. The Youth Vaping grantees are:

- Alliance for Community Transformations Bennington
- Champlain Valley Supervisory Union
- Gifford Hospital
- Healthy Lamoille Valley
- Prevention Works!
- The Collaborative
- United Way of Addison County
- West River Valley Thrives/Building A Positive Community

This three-year initiative is funded through a \$1 million state appropriation for substance use disorder and tobacco prevention and treatment activities. Efforts to address vaping focus on evidence-based approaches and effective strategies at the individual, school, and community level to continue to build a coordinated state and community approach to prevent vaping among Vermont youth.

Regional Prevention Partnerships Initiative

The federally funded RPP initiative is implemented at both the state and region/community level with an intense focus in 5 of 12 VDH health districts in Vermont. These health districts are Barre, Brattleboro, Rutland, Springfield and St. Albans. RPP uses the SPF and evidence-based programs to prevent and reduce alcohol and cannabis use by youth, young adults, and lesbian, gay, bisexual, and transgender (LGBT) youth and young adults. It also funds Outright Vermont to provide technical assistance and supports statewide coordination by DSU related to training, prevention messaging, capacity-building and

more. FY25 is the 5th year of a five-year SAMSHA Strategic Prevention Framework – Partnerships for Success for States grant to DSU (2020-2025).

Prescription Drug Prevention and Disposal Programs

In 2016, ACT 173: “An act relating to combating opioid abuse in Vermont,” the legislature provided funding and support to develop and implement a state-wide drug disposal system. Through the pharmaceutical manufacturers fee, funds were directed to aid in prevention, which includes drug disposal initiatives, and treatment. In addition, funding was provided for state-wide media campaigns on the safe use of prescription drugs as well as the safe disposal of pharmaceuticals. The goal of this work is to create easy access to safe disposal of Vermont’s unused prescription medication, provide education on effects of prescription drugs, and promote awareness. The program descriptions below represent our comprehensive approach to prescription misuse prevention, intervention, and disposal.

Lamoille County Sheriff Department (LCSD) Pilot Project

The Lamoille County Sheriff Department coordinates a statewide effort to ensure all law enforcement agencies, both local and state, have access to LCSD to dispose of unused or unwanted medications, and provides training on proper handling and transportation of disposed pharmaceuticals. The thirteen sheriff departments work with local law enforcement in their region to collect disposed medication that is handed off to the Lamoille County Sheriff Department on a monthly basis. The LCSD collects and weighs medication and provides the state with monthly metrics reports. On the biannual DEA take-back days, the LCSD coordinates handoff of medications stored securely at LCSD with DEA Representatives.

Biannual Drug Disposal Stakeholder Group

The Drug Disposal Stakeholder Workgroup meets for updates and discussion regarding Vermont’s Drug Disposal System. The stakeholder group consists of a range of partners including prevention coalitions, law enforcement, independent and chain pharmacies, Long-Term Care Facilities, and others. The workgroup continues to meet to discuss and provide insight into barriers, assets, resource gaps, innovation, and new potential projects.

Assistance to Pharmacies, Hospitals, and Long-Term Care Facilities

Drug disposal drop boxes are provided to local pharmacies and hospitals wishing to acquire one at no charge. To date, 25 facilities have received drug disposal kiosks and liners. When the liners are full, they are mailed to a licensed facility for incineration at no charge to the facility. With assistance from VDH’s Prevention Consultants, RPP grantees, and 211, an interactive prescription drug disposal map was created and launched on the VDH website.

Prescription Mail-Back Envelopes

Starting in June 2018, VDH launched a medication mail-back envelope program. Pre-paid mail-back envelopes have been disseminated throughout Vermont communities, offering a safe, simple, and secure way to dispose of unwanted prescription medications. Envelopes are available in the community and sent directly to homes.

Envelopes can also be [ordered FREE online](#) from the Health Department. To date, there has been 8025 envelopes returned to a licensed facility for incineration.

National Prescription Take Back Days

DSU has supported and participated in the biannual DEA National [Take Back Days](#) since 2011 and has supported community coalitions to actively participate in the event. In 2023, Vermont contributed over 10,000 lbs. from over 50 locations during two Take Back Days.

Over the Dose Media Campaign

The objective of the Over the Dose campaign is to reduce prescription opioid misuse among young, lower socioeconomic status adults, ages 18-25, at heightened risk for opioid misuse. This campaign was developed to reach young adults engaging in higher risk behaviors including occasionally consuming prescription opioids for purposes not-as-prescribed and routinely mixing prescription opioids with other substances, including alcohol. This digital campaign uses a Health Communications strategy, building awareness on the negative health implications of opioid misuse, including the direct connection to heroin or the negative consequences of mixing with alcohol.

Higher Education Initiatives

Vermont College Coalition

The Vermont College Coalition brings together all the Vermont colleges and universities to share resources, experiences, and build collaborative relationships statewide. The group is co-facilitated by two local higher education institutions and brings people together throughout the academic year both virtually and in-person. The group also brings in local coalition partners and others who are connected to the campuses as they are doing work around substance misuse and prevention.

Annual College Symposium

In 2012 Vermont college and university leaders requested assistance from VDH with planning an annual symposium focused on the high rates of alcohol use among its students. DSU has assisted by providing financial and staffing support with the planning of the event. With the help of the Vermont College Coalition, the topics for the symposium are gathered through their input. Over the years primary focus has shifted to other substances.

School Substance Use Prevention Grants

Nineteen school districts/supervisory unions (SD/SU) have a School Substance Use Prevention grant of \$60K to support a menu of substance use prevention, education, and early intervention services. Funding for these awards is through the SUPTRS block grant and ARPA funds for a total of \$1.1 million for fiscal year 2025. These one-year grants are contingent on satisfactory performance and the availability of funds. Funding of the School Substance Prevention Grants are tied to data around youth binge drinking and young people feeling

sad or hopeless as assessed through the Youth Risk Behavior Survey (YRBS) along with decreasing the percent of youth who used marijuana in the past 30 days and reducing the percent of people who need and do not receive treatment for alcohol use as measured by the National Survey on Drug Use and Health.

School Substance Use Prevention grantees are:

- Barre SD
- Central Vermont SU
- Champlain Valley SD
- Franklin Northeast SU
- Hartford SD
- Lamoille North SD
- Lamoille South SU
- Maple Run Unified SD
- Milton Town SD
- Mount Mansfield SD
- Slate Valley SD
- Southwest Vermont SU
- Springfield SD
- Two Rivers SU
- Washington Central SD
- Windham Central SU
- Windham Southeast SU
- Windham Southwest SU
- Windsor Central SU

Funded Prevention Strategies:

Required

- Screening, referral, and educational support groups
- Assessment of capacity and training needs
- Provide school staff training

Optional

- Integration of substance use prevention into the Coordinated School Health Initiatives
- Advising and Training Peer Leadership Groups
- Evidence Based/Evidence Informed Curricula

Up for Learning

Through a collaboration with Family Child Health and DSU, VDH supports two Up for Learning programs that work directly with elementary, middle school, and high school students.

For approximately 15 years, leadership teams of students and teachers from 79 Vermont middle and high schools have participated in the [Getting to Y](#) initiative where middle and high school students review their schools YRBS data, present their analysis, and use that data to take steps to strengthen their school and community.

A second program called [P2C2 \(Personal Power and Community Connections\)](#) empowers elementary school-age youth to work with adults to create positive change in their communities. Using an asset-based approach, teams identify strengths and opportunities in their learning environment using school climate data. They celebrate their strengths, and brainstorm action to take to improve their areas of concern. In this way youth

and adults gain empathy with their broader school community as they nurture their own skills and increase collective agency.

Through these primary prevention program, the youth team members become empowered change agents. The programs are focused on ensuring that youth feel valued as contributing members of their community, instilling a sense of purpose and shared responsibility which are powerful protective factors. While the impact of this work on the core youth team is most evident, the focus of their work is to empower youth in their school community, resulting in the improved health, wellness, and academic success of their peers

Regional Prevention Consultant (PC) Network

Regional PCs provide technical assistance on substance misuse prevention around the state through the Health Department's Office of Local Health. The PCs serve the agencies, organizations, and individuals within those District catchment areas with the goal of increasing local community capacity to carry out effective substance misuse prevention efforts to impact positive changes in behavior, attitudes, skill development, and environmental changes.

Prevention Consultant Services

PCs offer five essential services:

- Community organizing and mobilization
- Program planning, organizational development, and consultation
- Presentations, training, and technical assistance
- Community grants information and guidance
- Information and referral

Prevention Works!

Prevention Works! is a network of community coalition leaders, prevention professionals, service providers, and individuals with an interest in, and commitment to, substance misuse prevention across the state. DSU provides funding to PW! to support its work including:

- A Certified Prevention Specialist (CPS) program/credential
- Workforce development activities
- Supporting healthy coalitions and prevention professionals
- Convening workgroups and hosting learning forums
- Events and conferences

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