

What is substance misuse prevention?

Department of Health
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VERMONT
DEPARTMENT OF HEALTH

Why is substance misuse prevention important?

Early Use & Substance Use Disorders

*The adolescent brain is **more vulnerable** to alcohol and drugs than the adult brain.*

***Early use** can disrupt brain development, which increases the risk of developing a Substance Use Disorder*



90%

of those with substance use disorders nationally started using drugs and alcohol before age 18*

*Source: [What is Prevention | Addiction Policy Forum]

Defining Prevention

Substance misuse prevention reduces the harmful effects of tobacco, alcohol and other drugs and ***stops addiction before it starts.***

Increasing protective factors & reducing risk factors

Delaying the onset of first use

Substance Use Disorder Prevention Contributes to Long-Term Positive Outcomes

- Promotes early SUD identification and timely intervention[14,15]
- Reduces the risk for binge drinking and SUD[16]
- Enhances overall physical and mental health[14,15,17]
- Improves occupational and/or academic performance[18,19]
- Lowers school dropout rates and reduces disciplinary issues among adolescents[18,19]

SAMHSA: Integrating Substance Use Disorder Prevention with Physical Health Care

Prevention Is a Smart Investment

Investments

- School-based Prevention
- Community Strategies
- Substance Use Messaging
- Policy Initiatives



Savings

- Chronic Disease Care
- Hospital and ED Costs
- Treatment Services
- Recovery Services
- Criminal Justice System Expenses
- Future Health Care Costs

Substance Abuse Prevention Dollars and Cents: A Cost-Benefit Analysis
The Return on Investment of Substance Use Prevention

Prevention works. Treatment is effective. People recover.

How do we fund prevention initiatives in Vermont?

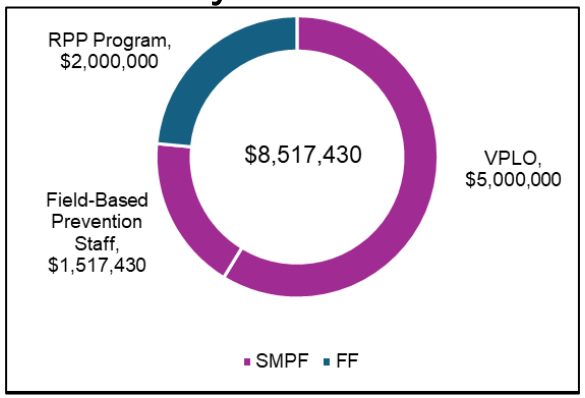
Substance Misuse Prevention Fund (SMPF) from the Cannabis Excise Tax FY27 Proposed Budget

The General Assembly established the Substance Misuse Prevention Fund (SMPF) and dedicated 30% of the regulated Cannabis Sales Excise Tax from this fund for substance misuse prevention.

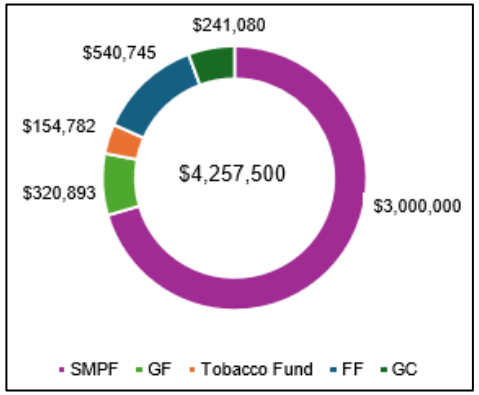
Focus Area	Description of Goals	FY27 Budget
Vermont Prevention Lead Organization	• Sustain and grow existing prevention partners • Build additional capacity at all levels of prevention • Engage non-traditional partners • Identify populations at higher risk • Address gap areas to ensure baseline primary prevention while also building capacity • Four regional organizations responsible for assessment and subgranting within their region	$5,000,000
School Based Prevention Services	• Screening, referral, and educational support groups • Integration of substance use prevention into the coordinated school health initiatives • Assess and provide school staff training • Advising and training peer leadership groups • Evidence-based curricula	$3,000,000
Field Based Prevention Staff (Prevention Consultants)	Regional staff provide technical assistance on substance misuse prevention 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.	$1,517,430
	Total	**$9,517,430**

SFY27 Department of Health Prevention Proposed Budget

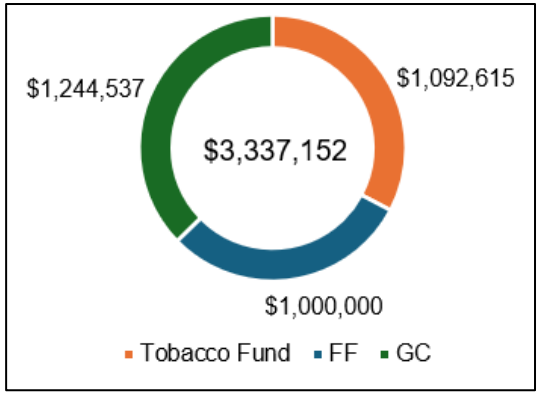
Community-Based Services



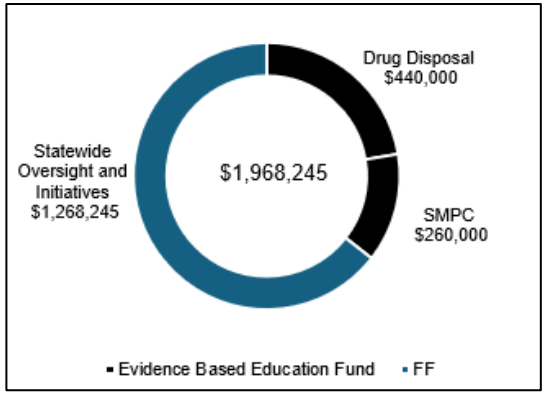
School-Based Services



Tobacco Control Program



Other Prevention Activities



$18,080,327

Total Department of Health Prevention Programming Proposed Budget in FY27

Funding drawn from:

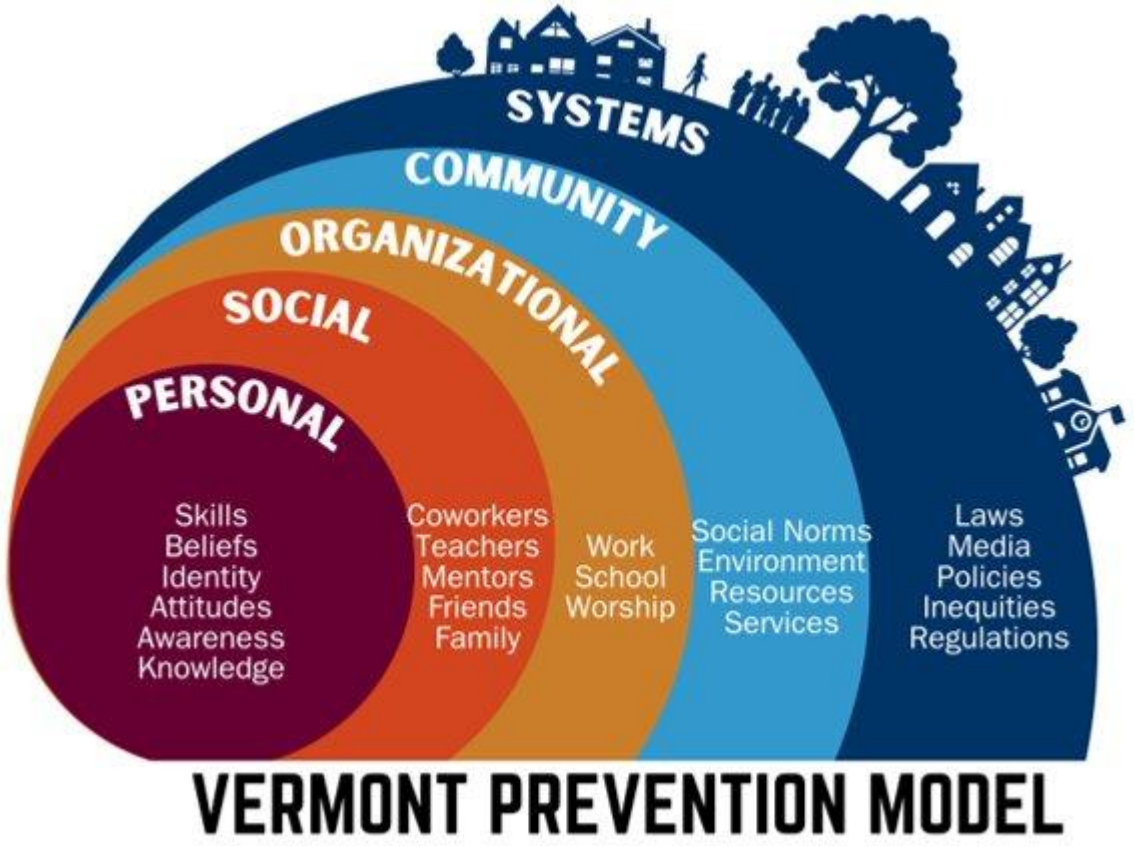
- Federal Funds (FF)
- Substance Misuse Prevention Fund (SMPF) *from the Cannabis Excise Tax*
- Evidence Based Education Fund
- General Fund (GF)
- Global Commitment (GC)
- Tobacco Fund

Prevention works. Treatment is effective. People recover.

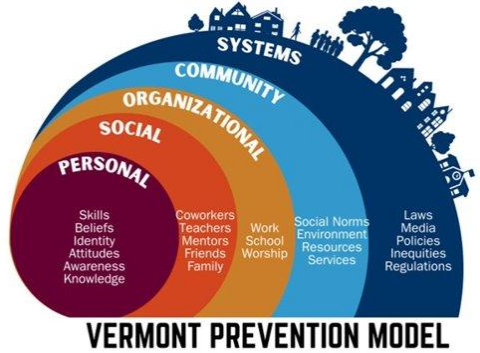
How do we approach prevention in Vermont?

Vermont Prevention Model

The Vermont Prevention Model is grounded in the understanding that prevention strategies are most likely to succeed if they reach people holistically in all environments: ***individual, family, school, community, and state level.***



The Vermont Prevention Model succeeds by changing social norms and reaching people holistically in all environments.



	Personal	Social	Organizational	Community	Systems
What It Is	Shared beliefs, attitudes, and awareness are affected through media campaigns and specialized programing, leading to changes in personal behaviors related to drug use.		Vermont funds prevention in schools to reach young people through curricula, screening, and trained peer leaders and school staff.	Prevention efforts coordinated at the local and regional levels seek to influence environmental factors and social norms.	Laws, policies, and regulations seek to reduce access to substances.
Who It Serves	*Seeks to serve all Vermonters*		*Seeks to serve K-12 school age Vermonters*	*VPLOs coordinate prevention initiatives at the regional level; RPP serves youth & young adults at the statewide & regional level; PCs serve Vermonters by health district*	*Seeks to serve all Vermonters*
Outcomes	Reduced access to **18,000 lbs.** of medication through disposal in 2024	**51.3 million** impressions for three paid media campaigns (ParentUp, Let's Talk Cannabis, OutLast) from 2021 to 2025	**64% of students** are in Supervisory Unions School Districts that receive VDH school health funding	Rates of past 30-day alcohol use **decreased for youth grades** 9-12 from 2019 to 2023 in all RPP funded regions	**82%** of Vermont high school students **do not use tobacco**; the legal age for tobacco is 21+
Example	 A parent orders a free mail-back envelope to dispose of extra oxycodone prescribed after a surgery.	 A Vermonter sees the One Less campaign, makes personal changes, and talks to family members about alcohol consumption.	 A student learns about the harmful effects of vaping as a part of the Stanford Tobacco Prevention Toolkit curriculum.	 A family attends forums on youth substance misuse with other families, staff, and community members in Burlington.	 A retailer selling tobacco to people under 21 is subject to a civil penalty.

Vermont Prevention Model
Personal & Social Highlights



Personal | **Social** | Organizational | Community | Systems

Statewide Drug Disposal

9 tons of medication disposed of in 2024

45 collection sites for Takeback Day

89% approval rating for mail back envelopes

Specialized Programming

One More Conversation Can Make the Difference

Nurturing Parenting®
Established 1983

my time

Campaigns

PARENT UP

One Less

OUTLAST

DO YOUR PART

-CHECK- YOURSELF

OVER THE DOSE

Prevention works. Treatment is effective. People recover.

Vermont Prevention Model
Organizational Highlights

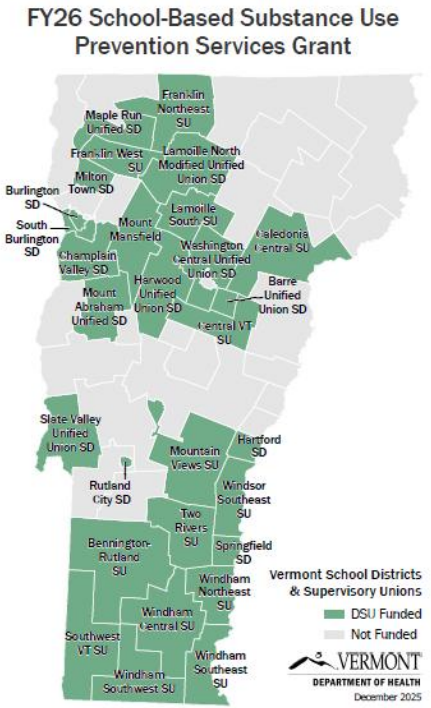


Personal | Social | **Organizational** | Community | Systems

29 Supervisory Unions/School Districts receive funding for School-based Substance Misuse Prevention Services.

All grantees are required to:

- Screen students & hold support groups
- Integrate prevention in school health
- Provide training to school staff
- Train peer leaders
- Follow evidence-based curricula



Prevention works. Treatment is effective. People recover.

School-Based Initiatives



CRAFFT

GAIN
GLOBAL APPRAISAL OF INDIVIDUAL NEEDS
Coordinating Center

Screening



Capacity Building



Staff Training



Educational Support Groups

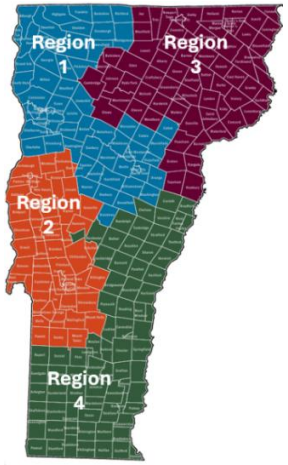
Student assistant professionals (SAPs) often coordinate prevention initiatives in schools.
Looking ahead: VDH will continue to standardize the SAP role.

Vermont Prevention Model
Community Highlights



Personal | Social | Organizational | **Community** | Systems

Vermont Prevention Lead Organizations (VPLOs)



Coordinating prevention initiatives statewide in all 4 regions

Regional Prevention Partnership (RPP)

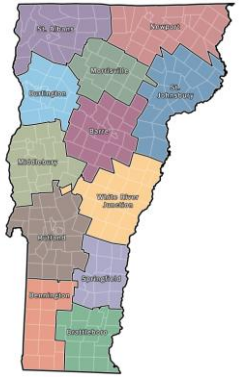


Statewide and regional efforts to prevent and reduce alcohol and cannabis use by youth and young adults

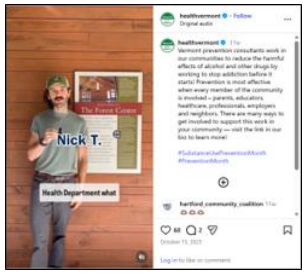
VERMONT YOUNG ADULT SURVEY

Young Adult Survey

Prevention Consultants (PCs)



Increasing local prevention capacity in 12 health districts



PCs in action

Prevention works. Treatment is effective. People recover.

Vermont Prevention Lead Organizations (VPLO) *Initiatives*



VPLO Highlights:

Region 1 (United Way of Northwest Vermont):

- Youth substance misuse **forums with Burlington students, parents, staff, and community members.**



Region 3 (Northeastern Vermont Regional Hospital):

- Healthy in Lamoille Valley.

Region 2 (Rutland Regional Medical Center):

- Building internal capacity for identifying substance misuse in older Vermonters in Addison County by implementing **screenings into case reviews and providing an evidence-based training.**



Region 4 (The Collaborative):

- SoberFest, a free, substance-free **event in Bennington promoting prevention** and celebrating recovery.

Vermont Prevention Lead Organizations (VPLO) *Funding Model*



VPLOs empower communities to implement substance misuse prevention initiatives that meet their needs based on regional data

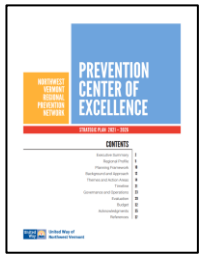
*Funds allocated based on assessment & regional needs

1 Gather Data

- VPLOs review regional data
- Identify needs in line with Evidence Based Practice & Prevention Science
- Engage local partners

2 Strategic Plan

- Draft a 5 Year Strategic Plan
- Focused on regional priorities



Region 1 Example

3 Competitive Process

- VPLOs host a competitive funding process (e.g., Region 4) Subgrants based on regional needs
- Address geographic & population disparities

4 Board Allocation

- Regional Funding Advisory Board allocates funds*
- Diverse board representation
- Balanced funding approach across Prevention Model Levels

Prevention works. Treatment is effective. People recover.

Regional Prevention Partnership (RPP)



RPP Highlights:

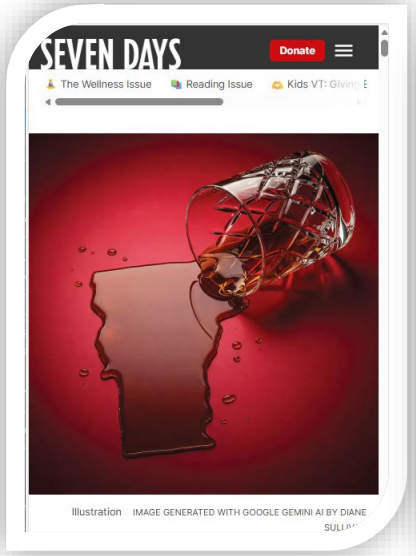
Partnering with DLL



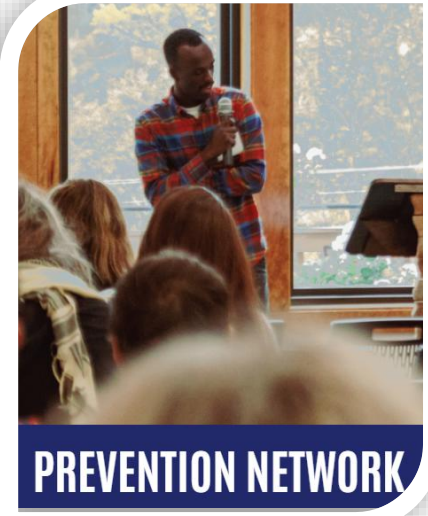
Partnering with DPS & DEA



Collaborating with municipalities on zoning



Engaging with local media



Community education and engagement

Prevention Consultant (PCs) Initiatives



PC Highlights:



Presentations to schools on YRBS



Trainings on Vermont Prevention Model



Representation at Community Forums



Facilitating school or community events

Vermont Prevention Model:
Systems Highlights

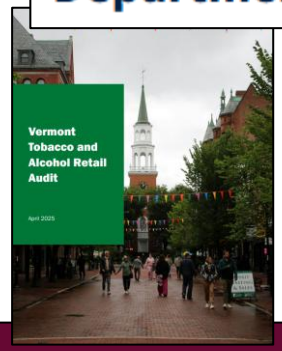


Personal | Social | Organizational | Community | **Systems**

Prevention requires robust laws and policies to make an impact.

- ✓ Alcoholic Beverage Tax
- ✓ Restrictions on Cannabis Advertising
- ✓ Tobacco and Alcohol Retail Density
- ✓ Synar
- ✓ Tobacco 21
- ✓ Vermont Pain Rules
- ✓ Vermont Prescription Monitoring System (VPMS)

Agency of Administration
Department of Taxes



STATE OF VERMONT
Office of the Attorney General
Department of Taxes
Department of Liquor and Lottery
Department of Health

Vermont Prescription Monitoring System (VPMS)

Vermont Prevention Model: *Systems Highlights*



Personal | Social | Organizational | Community | **Systems**

The **Substance Misuse Prevention Oversight & Advisory Council** (SMPC) was enacted through 18 V.S.A. §4803. The SMPC seeks to improve the health outcomes of all Vermonters through a consolidated and holistic approach to substance misuse prevention. 2026 SMPC Report: SMPC 2026 Report to the Legislature

Address All Substances

- Alcohol
- Cannabis
- Controlled Substances (e.g., opioids, cocaine, methamphetamines)
- Tobacco Products

Provide Advice

Provides advice to improve prevention policies and programming to:

- Governor
- General Assembly
- Health Department

Purpose

To Ensure that Population Prevention Measures are at the Forefront of all Policy Determinations

Goals

- Increase protections
- Decrease risks
- Increase efficiency and collaboration on prevention through a consolidated and holistic approach that is sustainable, scalable, and equitable

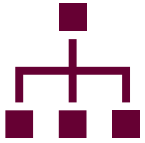
What is the on-the-ground impact of these programs for Vermonters?

By the Numbers



64%

Middle and high school students receiving school-based prevention services



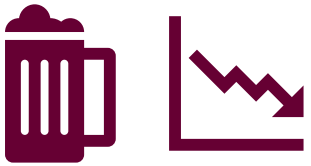
67

Active subgrantees supported by VPLO funding



300K

Vermonters reached via regionally-marketed RPP strategies (e.g., media campaigns)

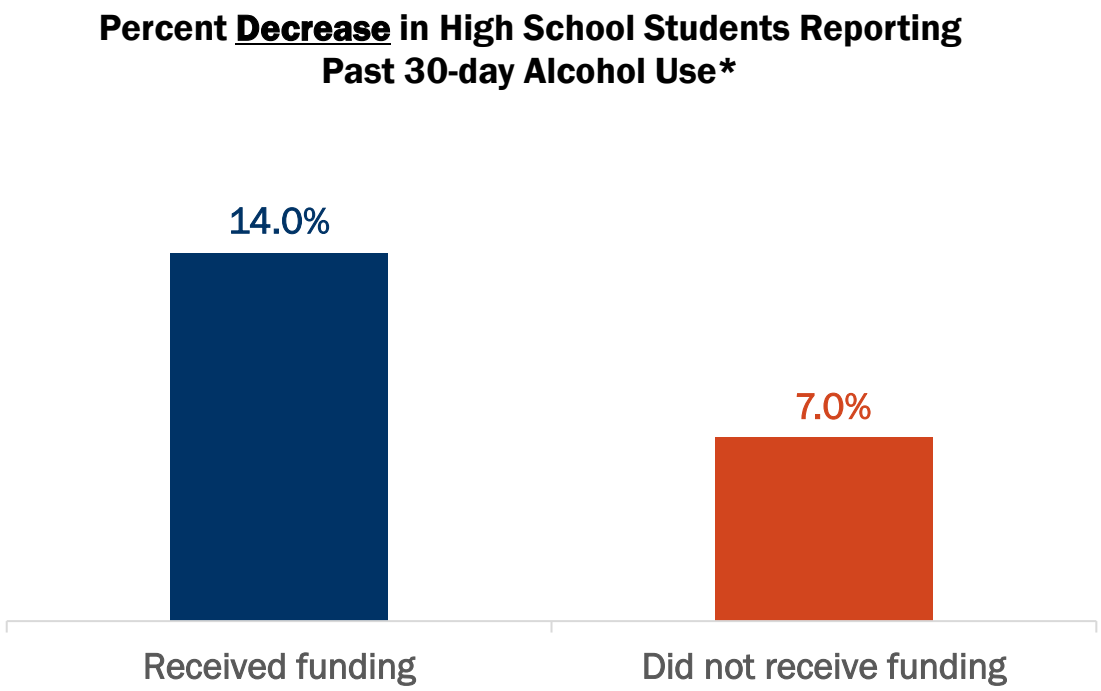


2.7%

Decrease in binge drinking for Vermonters aged 12+

Prevention Funding Demonstrates Results

Evaluation data shows Vermont regions receiving funding had twice the decrease in alcohol use than unfunded areas



Recent data also shows regions in Vermont receiving multiple sources of funding outperform regions only receiving a single source of funding ^

*PFS Evaluation Report, 2013 (baseline) vs 2015, YRBS

^RPP Evaluation Report

Prevention works. Treatment is effective. People recover.

Data Collection & Evaluation Process

Evaluation Process Overview



VDH analyzes data to inform program decisions.



Impacts of prevention work cannot be easily attributed to one activity.



Long-term, consistently funded programming leads to improved population-level prevention outcomes.

Data Collection Highlights

- Grantee Reporting
- National Outcome Measures
- Vermont Young Adult Survey (YAS)
- Vermont Youth Risk Behavior Survey (YRBS)

Looking ahead

Prevention requires continuously and consistently funded programs over many years to make impacts.

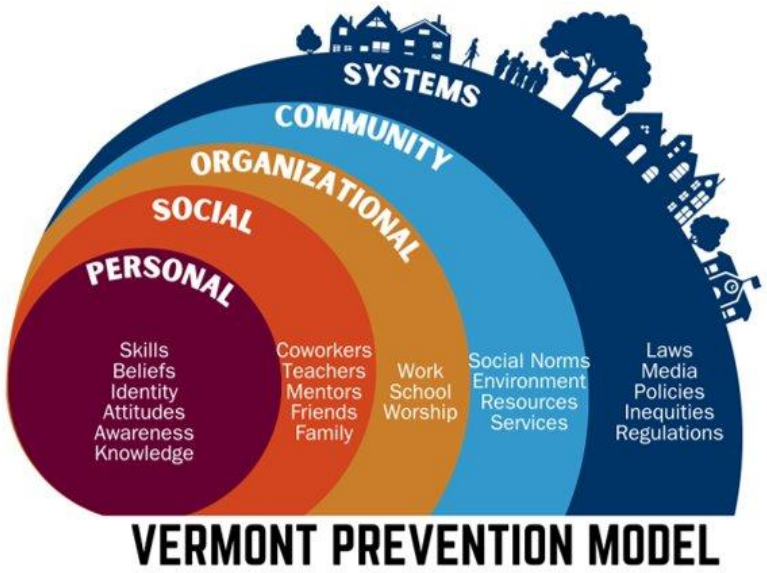
2030 Goals:

- Outreach & education serves 100% of middle school and high school students
- Increase the number of high school students that don't use alcohol
- Increase the number of high school students that don't use cannabis
- Increase the number of adults age 21+ that don’t binge drink
- Increase the number of adults age 18+ who perceive a great risk from cocaine usage once per month

Continued stable funding will support these prevention goals

Key Takeaways

Substance misuse prevention ***stops addiction before it starts.***



VDH programs tackle prevention at the personal, social, organizational, community, and systems levels to **increase protective factors** and **delay the onset of first use**.

Continuing to support prevention programming is critical to maintaining a healthier Vermont.

Prevention Works.

Thank you!

Let’s stay in touch.

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