



Prevention Expenditures

January 15, 2026

In Accordance with Act 27 (2025), Section E.313.2

Submitted to: House Committee on Human Services
House Committee on Health Care
Senate Committee on Health and Welfare

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Key Takeaways

- Substance misuse prevention requires robust and ongoing funding over many years to make impacts.
- Prevention is about providing people with the knowledge, skills and opportunities to make the choices that are best for them – it does not use scare tactics or focus on just saying no to drugs.
- Current prevention efforts in Vermont:
 - Reach all age groups and educate about all substances.
 - Include initiatives that are data-driven and responsive to community need.
 - Employ strategies that work at the individual, community, and policy levels to impact long-term change.

Legislative Charge

Pursuant to Act 27 (2025) Section E.313.2, the Vermont Department of Health (Department) prepared this report with information on total or estimated expenditures made by the State on substance use prevention efforts in state fiscal years 2024, 2025, and 2026.

Information on prevention expenditures is also included in the Substance Misuse Prevention Oversight and Advisory Council's (SMPC's) annual report to the legislature, required by 18 V.S.A. § 4803. The [SMPC's 2025 report](#) included an explanation of state-funded prevention program budgets for SFY24. The [SMPC's 2026 report](#) aligns with the state and federal expenditures described below for SFY25.

Recommendation for future legislative reporting: To streamline future reports of prevention expenditures information, the Department recommends that state and federal prevention expenditures continue to be included only in the SMPC's annual report and not duplicated in a separate prevention expenditures report.

Expenditures on Substance Misuse Prevention Efforts

The Department of Health receives state and federal funding from various sources to support several substance misuse prevention programs, including:

- School-based substance misuse prevention services
- Statewide drug disposal program
- Tobacco Control Program

- Substance Misuse Prevention Oversight and Advisory Council
- Community-based substance misuse prevention services
- Division of Substance Use Programs prevention staff
- Regional Prevention Partnerships Program

Tables 1 and 2 describe expenditures for these programs in State Fiscal Year 2024 (July 1, 2023 – June 30, 2024) and State Fiscal Year 2025 (July 1, 2024 – June 30, 2025) respectively. Table 3 describes the budget for these programs in State Fiscal Year 2026 (July 1, 2025 – June 20, 2026).

Table 1. State Fiscal Year 2024 Expenditures

Program	General Fund (GF)	Special Fund (SF)	Tobacco Fund	Federal Funds (FF)	Global Commitment (GC)	Total
School-based Substance Misuse Prevention Services	\$244,978		\$46,042	\$354,116	\$71,713	\$716,849
Statewide Drug Disposal Program		\$536,938				\$536,938
Tobacco Control Program			\$1,690,360	\$1,124,976	\$1,464,779	\$4,280,116
Substance Misuse Prevention Oversight and Advisory Council		\$198,074				\$198,074
Community-based Substance Misuse Prevention Services	\$2,206,091					\$2,206,091
Division of Substance Use Programs Prevention Staff				\$2,880,915		\$2,880,915
Regional Prevention Partnership Program				\$909,438		\$909,438
Total	\$2,451,069	\$735,012	\$1,736,402	\$5,269,445	\$1,536,492	\$11,728,420

Table 2. State Fiscal Year 2025 Expenditures

Program	General Fund (GF)	Special Fund (SF)	Tobacco Fund	Federal Funds (FF)	Global Commitment (GC)	Total
School-based Substance Misuse Prevention Services	\$248,116	\$48,138	\$119,678	\$418,106	\$186,404	\$1,020,441
Statewide Drug Disposal Program		\$470,449				\$470,449
Tobacco Control Program			\$1,791,842	\$1,024,087	\$1,400,000	\$4,215,930
Substance Misuse Prevention Oversight and Advisory Council		\$214,891				\$214,891
Community-based Substance Misuse Prevention Services	\$3,781,919					\$3,781,919
Division of Substance Use Programs Prevention Staff				\$3,735,739		\$3,735,739
Regional Prevention Partnership Program				\$956,010		\$956,010
Total	\$4,030,035	\$733,478	\$1,911,520	\$6,133,942	\$1,586,404	\$14,395,380

Table 3. State Fiscal Year 2026 Budget*

Program	General Fund (GF)	Special Fund (SF)	Tobacco Fund	Federal Funds (FF)	Global Commitment (GC)	Total
School-based Substance Misuse Prevention Services	\$320,893	\$533,702	\$154,782	\$540,745	\$241,080	\$1,791,202
Statewide Drug Disposal Program		\$440,000				\$440,000
Tobacco Control Program			\$574,918	\$1,101,504	\$1,455,755	\$3,132,177
Substance Misuse Prevention Oversight and Advisory Council		\$260,000				\$260,000
Community-based Substance Misuse Prevention Services		\$6,750,000				\$6,750,000
Division of Substance Use Programs Prevention Staff				\$2,704,539		\$2,704,539
Regional Prevention Partnership Program				\$1,682,718		\$1,682,718
Total	\$320,893	\$7,983,702	\$729,700	\$6,029,506	\$1,696,835	\$16,760,636

* The Department expects to use these funds for their intended purpose and fully obligate or expend these funds in FY26. None of these appropriations are subject to reversion or have obligation deadlines that would preclude the use of the funds.

Description of Substance Misuse Prevention Efforts

School-based Substance Misuse Prevention Services

As of SFY26, funding is provided to 29 (of 54) Vermont school supervisory unions/districts to provide screening and referral to substance misuse and mental health services while supporting the [Whole School, Whole Community, Whole Child model](#). Additionally, schools may choose to implement any of the following evidence-based activities:

- Classroom health curriculum
- Advising and training of peer leadership groups
- Delivery of parent information and implementation of educational programs
- Teacher and support staff training
- Educational support groups for students.

In the 2023-24 school year, 5,160 students participated in prevention curriculums, 878 students were screened for substance use and 2,590 school staff were assessed and provided training in substance use.

Statewide Drug Disposal Program

Funding supports the statewide prescription drug disposal system, which includes:

- Drug disposal kiosks at police, pharmacy, and hospital locations
- Free mail-back envelopes provided to Vermonters
- Support of Drug Enforcement Administration (DEA) National Take-Back Days
- The Do Your Part media campaign that informs Vermonters about safe storage and disposal of unused prescription drugs.

It also partially supports the salary of the Substance Abuse Program Manager at the Department of Health who is responsible for developing, maintaining and managing the statewide drug disposal system.

In 2024, Vermonters safely disposed of over 18,000 pounds of medication through the drug disposal program.

Tobacco Control Program

Funding for the Department's comprehensive Tobacco Control Program, implemented by the Division of Health Promotion and Disease Prevention, supports:

- The Tobacco Control Program's infrastructure, including 4.5 FTE positions.
- Quitline services, with protocols and incentives for priority populations, which serve over 3,000 Vermonters annually. The Quitline and Quit Online services offered by 802Quits includes a range of services from providing information about quitting to supporting quitting through counseling and short and long-acting nicotine replacement therapy. Nearly 40% of registrants are Medicaid members or uninsured. Other populations the Quitline assists with tobacco treatment are youth, young adults, Indigenous, menthol users, and those who are pregnant.
- Community prevention activities, including:
 - Support for tobacco prevention coalitions. Tobacco prevention coalitions are a key component of effective tobacco control and focus on local policy, tobacco treatment, and communications. In SFY24, available funding supported 12 coalitions. In SFY25 and SFY26, available funding supported 6 coalitions.
 - In SFY24, collaborative efforts between the Department, the Pride Center, and Outright Vermont to increase awareness of harm caused by tobacco, promote cessation among those that identify as LGBTQ+, and provide cultural sensitivity training among providers.
 - In SFY25 and SFY26, tobacco grants to community partners: Outright Vermont, the Abenaki Circle of Courage youth empowerment, and Vermont Afterschool.
 - Some examples of grantee initiatives include: Working with towns to make public places, multi-unit housing, parks and beaches smoke-free; promoting the benefits of passing ordinances and updating town plans and zoning districts to reduce the impact of tobacco in local communities; helping businesses and behavioral health facilities incorporate tobacco-free policies.
- Youth and young adult engagement and empowerment work to reduce initiation and use of tobacco. This includes school-based Our Voices X'Posed (OVX) youth groups, an annual fall training summit, and winter OVX Youth Rally at the State House.
- Counter marketing against the tobacco industry's promotions to youth/young adults and other populations at risk including those with disability, Medicaid insured, Native Americans, and who are Black, Indigenous and people of color. These efforts focus on increasing perception of harm of tobacco products, including vaping and nicotine pouches.
- Evaluations of programs for quality improvement and outcome monitoring.

Substance Misuse Prevention Oversight and Advisory Council

Funding is used to support the salary, indirect, and fringe benefit costs of the Substance Misuse Prevention Manager who convenes and supports the work of the Substance Misuse Prevention Oversight and Advisory Council.

Community-based Substance Misuse Prevention Services

Four regional Vermont Prevention Lead Organizations (VPLOs) were established in July 2023 to lead substance misuse prevention efforts and allocate substance misuse prevention funding within their region. The regional/VPLO structure came out of a robust 11-month prevention systems planning process that included state and community substance misuse prevention partners and the Public Consulting Group with a focus on enhancing and expanding prevention in Vermont.

The goals of the VPLOs are to:

1. Sustain existing substance misuse prevention coalitions;
2. Build additional community substance misuse prevention capacity; and
3. Reach gap areas to ensure statewide substance misuse prevention coverage of all 12 health districts.

These efforts reach all age groups, target all substances, and includes both reducing the likelihood of use from occurring and intervening when early signs of misuse are detected.

VPLOs allocate funding in their regions based on local and statewide data and assessment. A regional advisory board makes sub-granting decisions based on these needs and priorities to maximize regional assets and variability.

In SFY24, VPLOs funded over 54 substance misuse prevention projects and initiatives. In SFY25, VPLOs funded over 60 substance misuse prevention projects and initiatives. In SFY26, VPLOs are funding at least 4 new grants to community-based prevention partners in each region (over 16 new grants total) in addition to over 60 preexisting grants.

Examples of evidence-based programming being funded by VPLOs include:

- A parent child center offering prevention trainings for early childhood educators and other partners serving families with young children
- Student leadership: Community coalitions support youth in addressing substance use and other community issues, and growing leadership skills. Example: In Hartford students were trained as youth facilitators in the evidence-based [Getting to Y](#) program. Middle and high schools then attended a district-wide summit to identify strengths and concerns from the 2023 [Youth Risk Behavior Survey](#). The students

presented key data points and facilitated working sessions to brainstorm possible root causes and solutions to the concerns they highlighted.

- Youth cannabis use prevention education and outreach: Raising awareness and sharing guidance for parents and schools about prevention through local media (articles and Op-eds), community events, presentations at school and municipal meetings on substance use trends (using the [Youth Risk Behavior Survey](#), [Vermont Young Adult Survey](#) and other data).
- Substance use prevention case management in primary care settings: Integrating substance abuse prevention and harm reduction into primary care services through substance use disorder (SUD) case management. Example: Little Rivers Health Care's behavioral health team offers SUD case management that is individualized and trauma informed.
- Community Response Model: A collaborative approach to addressing community issues, particularly in the context of violence and safety emphasizing community involvement and coordination. Example: [Umbrella](#) received \$14,930 to support individuals who are experiencing domestic/sexual violence and who have a history of substance misuse. Using the findings of their FY24 needs assessment, also funded by the Department, their Community Response Model will advance prevention strategies to reduce the identified risk factors and system improvements.
- Wellness initiatives for older Vermonters: Supporting Vermont's aging population, which has high rates of substance use. Example: [Elderly Services Inc.](#) in Addison County was able to support its day program and provide an evidence-based training curriculum focused on three key areas related to substance misuse – knowledge, behavior and social support.
- Regional planning commissions collaboration: Promoting town ordinances and updating town plans and zoning districts to reduce the impact of substance use. Examples include zoning rules to restrict sales or advertising near schools, declaring local parks substance free and adding signage and restricting substance use at community events.

In FY26, VPLOs are also supporting capacity-building activities in 23 Supervisory Unions/School Districts (SUs/SDs) ranked as high or moderate need that do not currently receive a DSU school-based prevention services grant. The goals of this effort are to:

1. Increase capacity in the identified gap areas related to substance misuse prevention;
2. Build a prevention foundation so these SUs/SDs may apply for a DSU school-based services grant in FY27; and

3. Increase overall school-based substance misuse prevention capacity in each VPLO region and statewide.

Strategies to support achieving these goals include:

- Analyzing data from Youth Risk Behavior Survey County and Supervisory Union/School District Reports to inform prevention programming. Offering VPLO staff time to consult with schools on staff capacity and prevention integration.
- Supporting school in using the Department-developed [Prevention for Stronger Schools](#) resource.

Division of Substance Use Programs Prevention Staff

Funding supports the Prevention Consultant Network, which includes eleven Regional Prevention Consultants (PCs) assigned to Local Health District Offices who serve as subject matter experts that provide technical assistance on substance misuse prevention. PCs serve the agencies, organizations, and individuals within their district, and support their VPLO region 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. 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

This work occurs at the community level and according to need. Prevention Consultants provide presentations to schools and social services organizations on Youth Risk Behavior Survey data. They also train on the Strategic Prevention Framework, Prevention 101, logic models and more in communities to schools, social service organizations, regional planning commissions, relevant boards and advisory structures, new community prevention staff around assessment and risk and protective factors for substance misuse. In partnership with the Department's Division of Local Health, Prevention Consultants play a vital role in connecting communities with the work of the Department by being a consistent presence in, and an advocate for, Vermont communities.

Funding also supports DSU staff who direct all prevention activities, oversee DSU grants, and work on media campaigns.

Regional Prevention Partnerships Program

Five-year grants funded by SAMHSA Strategic Prevention Framework – Partnerships for Success for States (PFS) support Vermont's Regional Prevention Partnerships (RPP) Initiative focused on youth and young adults. This federal grant also supports statewide coordination by DSU related to prevention training, technical assistance, the Young Adult Survey, prevention messaging, and capacity-building.

Federal FY24 and Federal FY25 represented Year 4 and 5 of Vermont's 2020 PFS/RPP grant. During this period, RPP was implemented at both the state and region/community levels with an intense focus in 5 of 12 health districts in Vermont that demonstrated a need for additional support. RPP uses the SAMHSA Strategic Prevention Framework (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. In addition to LGBT youth, RPP also addresses health disparities related to substance use by youth in rural communities and those with low socioeconomic status (SES).

The Department applied for, and received, its third 5-year SAMHSA PFS grant (started 9/30/25 and will go through 9/29/30). Final receipt of this award is contingent on the final Federal FY26 budget. Funding from the PFS grant will be distributed through VPOOs to community-based organizations statewide to strengthen, leverage, and align with community prevention activities funded by other sources.

These efforts will work to:

- Reduce the onset and progression of alcohol and cannabis use/misuse by youth and young adults by expanding the capacity of community-based organizations statewide to implement and sustain prevention services in communities with high substance misuse rates
- Promote the use of evidence-based interventions and/or practices to maximize positive health outcomes
- Address larger, more systematic structural issues related to access to high quality recovery-oriented and trauma-informed prevention services for all populations that are relevant, as a means of improving overall health and wellbeing.

Activities focus on cannabis and alcohol misuse prevention for youth and young adults ages 13-25. The work is statewide and seeks to address the rates of cannabis and alcohol use among youth and young adults in Vermont, which are higher than the national average.