Substance Misuse Prevention Oversight and Advisory Council Testimony

House Human Services May 15, 2025

Monica Caserta Hutt, Chief Prevention Officer Kelly Dougherty, Deputy Commissioner **The Substance** Misuse Prevention **Oversight and** Advisory **Council** was enacted through Act 82 in June 2019.

- This council replaces the Opioid Coordination Council, Vermont Alcohol and Drug Advisory Council, and the Vermont Tobacco Evaluation and Review Board to move toward a consolidated approach to substance use prevention.
- The SMPC is charged with providing advice to the Governor and General Assembly for improving prevention policies and programming throughout the State and to ensure that population prevention measures are at the forefront of all policy determinations.

The SMPC has various requirements and responsibilities as described in Act 82.

- Review best practices, initiatives, and evaluations for youth and older adults, and existing state laws, rules, policies, and programs.
- Recommend best practices to reduce demand for substances and address gaps in services or populations, and strategies to integrate prevention initiatives across state and partnerships.
- Propose changes to state laws, rules, policies, and programs to address redundancy and eliminate barriers to coordinating prevention with State government.
- Advise the Health Department on their substance use prevention communications activities and plan to host 2 public comment sessions.
- Advise the Governor, General Assembly, and Community Programs in best practices for prevention.

SMPC required representation for the Executive Committee:

Commissioner of Health or delegate (Chair)

Community prevention partner (Vice chair)

Chief Prevention Officer

Commissioner of Public Safety or delegate Secretary of Education or delegate

SMPC required representation

- 1. Individual with lived substance use disorder experience as a person in recovery
- 2. Individual with lived substance use disorder experience as a person with a family member in recovery
- 3. Youth less than 18 years of age
- 4. Young adult between 18-25 years of age
- 5. Director of Trauma Prevention and Resilience Development
- 6. An individual with expertise in substance misuse prevention in a professional setting
- 7. An individual with expertise in pediatric care specific to substance misuse prevention or substance use disorder
- 8. An individual with expertise in academic research pertaining to substance misuse prevention or behavioral addiction treatment
- 9. An individual with expertise in education in a public school setting specific to substance misuse prevention
- 10. An individual with expertise in law enforcement with expertise in drug enforcement, addressing impaired driving, and community policing



SMPC required representation

11. An individual with expertise in community outreach or collaboration in the field of substance misuse prevention.

- 12. An individual with expertise in the criminal justice system
- 13. An individual with expertise in treatment of substance use disorder
- 14. An individual with expertise in recovery from substance use disorder in a community setting
- 15. An individual with expertise in municipalities
- 16. An individual with expertise in community-based, nonprofit youth services

17. An individual with expertise in substance use disorder or substance misuse prevention within the older Vermonter population 18. An individual with expertise in comprehensive communications and media campaigns

19. An individual from DMH or from the field of mental health (2020)



The goals of the SMPC are to:

- 1. Increase protective factors and build resilience and feelings of connectedness in Vermont communities, across all ages, cultures, and socioeconomic conditions
- 2. Decrease risk factors for substance use in Vermont for individuals of all ages, cultures, and socioeconomic conditions
- 3. 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

Performance Measures (updated 2025)

- 1. Percent of high school and middle school students who believe they matter to their community. (Measures Goal #1 and is measured through the Youth Risk Behavior Survey).
- 2. Percent of high school and middle school students who perceive harm in using substances (marijuana, alcohol, and tobacco). (Measures Goal # 1 and is measured through the Youth Risk Behavior Survey).
- 3. Percent of Vermonters who used alcohol, cannabis, stimulants (prescription and illicit), opioids (prescription and illicit), tobacco/nicotine products in the last 30 days. (Measures Goal #2 and is measured through the National Survey on Drug Use and Health , YRBS, BRFSS).
- 4. Percentage of the cannabis excise tax, opioid settlement funds, Tobacco Master Settlement Agreement, and other state revenue allocated to prevention programming (Measures Goal #3 and is measured through review of state and federal investments in prevention).
- 5. At least annually, the full SMPC will meet with the four Vermont Prevention Lead Organizations (VPLOs) and community-based organizations funded by the Vermont Tobacco Control Program or review their coalition needs assessments, strategic planning documentation, health equity plans, or workplans and utilize this information to identify continued challenges related to the work of prevention in Vermont.



The SMPC has submitted six annual reports to the General Assembly

- o 2020 Annual Report
- o 2021 Annual Report
- o 2022 Annual Report
- o 2023 Annual Report
- o 2024 Annual Report
- o 2025 Annual Report

Each with recommendations to the Governor and General Assembly

The SFY 2025 Report Included:

- Overall Policy Recommendations
- Recommendations Specifically for VDH
- Summary of Evaluation Results related to Prevention Programs
- Explanation of state-funded prevention programs
- And...appendices reviewing YRBS and BRFSS measures over their two most recent years

	Logic Model: ACT 82, relating to substance mi	suse prevention	
Strategies/Inputs/Activities	Short-term Outputs/Outcomes	Intermediate Outcomes	Lorig-term
Review and recommend best practices to reduce demand for substances in communities and schools.	Evidence-based/informed prevention initiatives are advanced in the State.	Improved prevention policies and programming	Outcomes Improved health outcomes for all Vermonters Improved well-being through prevention efforts VT Prevention approaches are Holis
Propose changes to existing state laws, rules, policies, and programs after review	Coordination of prevention action in State Government is improved by reducing redundancy and barriers to coordination	Prevention efforts are consolidated and coordinated across State Government	
Review community-based youth programming	Gaps in services and populations are addressed	Social and environmental factors ensure opportunities for action,	
Make specific prevention program recommendations after evaluations review	Foundation of connection and support for all VT Children and youth is determined.	engagement, and connectedness	
Review community-based programs for older Vermonters	Gaps in services, geographic disparities and barriers are identified and addressed.	Prevention programs are available and sustainably funded across VT communities and schools	
Advise Governor and General Assembly		Increased efficiency and	
Examination of promising practices for prevention	Population prevention measures are at the forefront of all policy decisions.	collaboration of prevention efforts across all state, public, and private entities	
Identify and coordinate initiatives across State government and community stakeholder groups	Funding for prevention initiatives is available through a portion of tax revenue	Increased % of : MS/HS students who feel they matter to community MS/HS students who perceive	
Inventory of substance misuse prevention programs in the state	Increased protective factors, resilience, and feelings of connectedness across all ages,		
Draft annual report on findings including recommendations for legislative action	cultures, and socioeconomic conditions Decreased risk factors for substance use in VT	Decreased % of : VT'ers age 12+ using any substances at risk for abuse VT'ers age 18-25 using any	
Coordinate the work of the SMPC Council and planning of regional	across all ages, cultures, and socioeconomic conditions	substances at risk for abuse	

prevention efforts