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**Report to  
The Vermont Legislature**

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**Substance Misuse Prevention Oversight and Advisory Council Annual Report  
2023 Report to the Legislature**

**In Accordance with 18 V.S.A. § 4803**

**Submitted to:** House Committees on Appropriations and Human Services  
Senate Committees on Appropriations and Health and Welfare

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## Substance Misuse Prevention Oversight and Advisory Council Annual Report 2023 Report to the Legislature

### Introduction

The Substance Misuse Prevention Oversight and Advisory Council (SMPC), created under 18 V.S.A. § 4803, is charged with reviewing the current prevention policies and initiatives in Vermont and providing advice to the Governor and General Assembly on the prevention system throughout the state, ensuring that data and evidence-based strategies are at the forefront of all policy determinations.

### Overview of 2022 Work

#### Membership and Meetings

All positions for the Substance Misuse Prevention Oversight and Advisory Council's Executive Committee have been filled and the SMPC has completed its first three years of work.

The SMPC held seven fully-attended meetings during the 2022 calendar year. Meetings were held virtually with an in-person option becoming available in May. Information on the membership of the Substance Misuse Prevention Oversight and Advisory Council can be found [here](#).

The current SMPC logic model can be found in Appendix B of this report.

The following subcommittees carry forward the SMPC's work:

- Communications
- Equity
- Policy
- Prevention

Each subcommittee identified priority topics that will support a cohesive prevention system in Vermont. These priorities are reflected in the recommendations section below.

#### Measurable Goals for Prevention Programming

Using a group decision-making process, the Substance Misuse Prevention Oversight and Advisory Council identified the following three goals as necessary for effective substance misuse prevention statewide:

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 misuse 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.

## Activities to Support Goals

The SMPC prioritizes the following activities to support the goals identified above:

- 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 the state and throughout 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 host two public comment sessions.
- Advise the Governor, General Assembly, and Community Programs on best practices for prevention.

## Performance Measures

The SMPC will track the following population outcome measures to inform the effectiveness of prevention programming statewide:

1. Percent of high school and middle school students who believe they matter to their community.
2. Percent of high school and middle school students who perceive harm in using substances (cannabis, alcohol, and tobacco).
3. Percent of Vermonters aged 12 years old and older who used alcohol, marijuana, and/or tobacco in the last 30 days.
4. Percent of Vermonters aged 18-25 who use alcohol, cannabis, tobacco, stimulants (prescription and illicit) and opioids (prescription and illicit).
5. Number of prevention initiatives and services available and sustainably funded across Vermont's communities and schools.

These performance measures are currently collected and used to inform the [Agency of Human Services'](#) and [Department of Health's](#) strategic planning processes.

## SMPC Recommendations

The SMPC has developed the following recommendations for consideration related to substances at risk of misuse. These recommendations are addressed to Vermont substance use programs, state agencies, and the Vermont Legislature.

### Programmatic Recommendations:

The SMPC recommends that the following programmatic policies be implemented:

#### Representation in Prevention Planning

1. The Council recommends that the Vermont Department of Health (VDH) ensure that under-served and under-represented communities, including Black, Indigenous, People of

Color, New Americans, people with disabilities, youth, older Vermonters, and the LGBTQ+ community, are consulted during the planning process for the distribution and use of available prevention funding. This should be done with a focus on cultural humility and using strategies and methods that optimize engagement with these identified communities.

2. As part of the planning process for any new prevention funding, including the \$3 million allocated to prevention coalitions in the SFY23 budget, the Council recommends that VDH identify opportunities for the SMPC to provide feedback and guidance in this process.

#### Responsible Messaging

3. The Council recommends that VDH review current funding levels dedicated to prevention messaging of all substances at risk of misuse in comparison to [the CDC's recommended level](#) of prevention messaging funding as a part of evaluating the effectiveness of those messaging. Identified gaps in recommended funding levels and current budgets for effective reach should be addressed, including identifying additional funding to meet or exceed the minimum recommended levels.

#### Integration of Substance Use Prevention in Education Recovery and Revitalization Efforts

4. The Council recommends that the Agency of Human Services (AHS) and the Agency of Education (AOE) increase collaboration with VDH's Division of Substance Use Programs to more thoroughly integrate the substance use prevention into AOE's [Social Emotional Learning \(SEL\) and Well-being supports](#). This collaboration could include increasing use and evaluation of the SEL program.

#### Legislative Recommendations:

The SMPC recommends that the following proposals be considered by the Vermont Legislature:

#### Cadence of Reporting

1. Amend 18 V.S.A. §4803 to change the reporting cadence of the SMPC to the Vermont Legislature to every other year rather than annually, beginning in 2023. An annual interim executive summary can be provided upon request. This amendment will allow for more strategic and comprehensive recommendations to be provided to the General Assembly from the SMPC.

#### Cannabis

2. Consider a bill that requires a re-evaluation every two years of the allowable THC limits for adult-use cannabis to ensure alignment with evolving scientific research to reduce the risk of psychosis and deterioration of mental health. At a minimum, ensure annual hearings are held to explore the data regarding THC limits and the risk of psychosis and deterioration of mental health and formulate recommendations related to THC limits accordingly.

3. Based on the documented research of negative public health impacts associated with a high density of alcohol outlets,<sup>1</sup> explore the necessity to develop cannabis retail outlet density parameters to proactively address the potential for negative impacts on public health.

Tobacco and Nicotine Flavor Ban

4. Enact a comprehensive ban of the sale of all flavored tobacco and nicotine products in Vermont, including menthol flavored products.

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<sup>1</sup> [https://www.cdc.gov/pcd/issues/2013/12\\_0090.htm](https://www.cdc.gov/pcd/issues/2013/12_0090.htm)

## Appendix A: Explanation of State-Funded Prevention Program Budgets and Results of Evaluations of State-Funded Programs

### Explanation of State-Funded Prevention Program Budgets

The following substance misuse prevention programs within the Department of Health receive funding through general fund or special funding:

- School-based Substance Abuse Services;
- Statewide Drug Disposal Program;
- Substance Misuse Prevention Oversight and Advisory Council;
- Tobacco Control Program Global Commitment Funding State-Share; and
- Tobacco Master Settlement Agreement Funding

The amounts spent from these programs in State Fiscal Year 2022 (July 1, 2021-June 30, 2022), are as follows:

Program	General Fund FY22 Spend	Special Fund FY22 Spend	Total Actual Spend
School Based Substance Abuse Services	\$387,644	\$0	\$387,644
Statewide Drug Disposal Program	\$0	\$558,112	\$558,112
Substance Misuse Prevention Oversight and Advisory Committee	\$0	\$236,751	\$236,751
Tobacco Control Program Global Commitment	\$658,500	\$0	\$658,500
Tobacco Master Settlement Agreement	\$0	\$1,241,505	\$1,241,505

Spending overview:

- School based substance misuse prevention programming: \$387,644
  - Funding is provided to 14 (of 54) Vermont school supervisory unions/districts to fund 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: evidence-based classroom health curriculum, advising and training of peer leadership groups, delivery of parent information and implementation of educational programs, teacher and support staff training and educational support groups for students.
- Statewide Drug Disposal Program: \$558,112
  - In accordance with Act 173 (2016), this funding is used to support the statewide prescription drug disposal system. This system 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 which informs Vermonters about safe storage and disposal of unused prescription drugs; and partially funds 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.

- Substance Misuse Prevention Oversight and Advisory Council: \$236,751
  - In accordance with Act 82 (2019), this funding is used to partially fund the salary, indirect and fringe benefit costs of the Substance Misuse Prevention Manager.
- Tobacco Control Program Global Commitment Funding State-Share: \$658,500
  - This funding supported the Tobacco Control Program's youth engagement programs, Our Voices Exposed and Vermont Kids Against Tobacco, for annual training summit and prevention activities. The Global Commitment funding is also instrumental for implementing community-based prevention strategies with 12 tobacco community coalitions. Tobacco coalitions work on increasing perception of harm, reducing youth access, promotion of tobacco prevention strategies, and engaging stakeholders for creating protective town level policies, including those that reduce smoking/vaping in public places and around multi-unit housing.

The program collaborated with 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. Importantly, this funding also supports counter-marketing against the tobacco industry's promotions to youth/young adults and other populations at risk for industry targeting, including Native Americans, BIPOC individuals, people with a disability, and those insured by Medicaid. The funds also support performing program evaluations for quality improvement and outcome monitoring.

- Tobacco Master Settlement Agreement (MSA) Funding: \$1,241,505
  - The MSA funded the Tobacco Control Program's infrastructure by supporting a 4.5 FTE staff positions. A more significant share of the funds went toward funding the Quitline and Quit Online services offered by 802Quits and funding a mentor behavioral health site, engaging behavioral health facilities and partners in our statewide behavioral health work group, and providing behavioral health facilities with 802Quits materials. The program also engaged providers with 802Quits materials and conducted mass media and social media to reach Vermonters with quit resources.

### Evaluation Results of State Funded Prevention Programs

The most recent evaluations for the following programs can be found at the links or documents included:

- [School-based Substance Abuse Services Evaluation](#)



- [Law Enforcement Drug Disposal Program](#)
- [Tobacco Control Program](#)
- [Prevention Inventory](#)

## Appendix B: SMPC Logic Model

