

*San Luis Obispo County
Strategic Prevention Plan*

**Promoting Wellness
and Reducing the
Problems Associated
with Alcohol and Other
Drug Use**



July 2017 – June 2022

**Health Agency
Behavioral Health Department
*Prevention and Outreach Division***



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Introduction

San Luis Obispo County is a community that values awareness and knowledge of alcohol and other drug use and acts accordingly in a safe, healthy, responsible manner. –*Vision Statement, County of San Luis Obispo Prevention & Outreach Team*

San Luis Obispo County

San Luis Obispo County (SLO) is the beautiful jewel of California's Central Coast and a community that prides itself on a healthy, friendly atmosphere. From the rolling hills, to the lush agricultural regions, to the unparalleled beaches, SLO County attracts tourists, students, retirees, businesses, and families seeking a safe environment and terrific neighbors. The county, however, is no different than any other in the state, with its share (and in some cases more than its share) of problems associated with the use of alcohol and other drugs. This document updates the original Strategic Prevention Framework adopted by SLO County in 2012 to both address those problems and to work toward maintaining the county's warm and inviting quality of life.

With a growing population of 282,000, SLO County is made up primarily of 89% Caucasian and 22% Latino/Hispanic individuals. The median household income is \$60,691 with an average of 2.51 individuals living in each home. Fourteen percent (14%) of the population live below the poverty line. There are ten public school districts with a combined 76,000 students K-12 (U.S. Census Bureau, 2016 estimates). San Luis Obispo County contains many rural and suburban communities, some of which are quite isolated from each other and located at significant distances from the centrally located city of San Luis Obispo. This isolation results in reduced services available to citizens who are often in greatest need of services due to the number of ethnically diverse and low income families who live and work in these out-lying communities.

The economy is centered around California Polytechnic State University (with approximately 20,000 students), tourism, agriculture, and other government services, including the California Men's Colony, a State penal institution. San Luis Obispo County is the third largest producer of wine in California, surpassed only by Sonoma and Napa Counties. Wine grapes are by far the largest agricultural crop in the county, and the wine production they support creates a direct economic impact and a growing wine country vacation industry (California Wine, 2007). Local breweries have also had an impact on the growing alcohol industry. Central Coast-based Firestone Walker Brewing Co. has been ranked the 6th largest craft brewery in the nation. Among all U.S. breweries, including corporate giants Anheuser-Busch and Coors, the company now ranks twelfth (SLO Tribune, March 2017).

Eighty-four percent (83%) of residents primarily speak English in their homes, while 17% speak another language (U.S. Census Bureau, 2011 estimates). In particular, the continued growth of agricultural production (including wine) has created an expanding Spanish-speaking working class that is often underserved in public health due to language, transportation and cultural issues.

The City of San Luis Obispo, with a population of 47,000, has a higher-than-state-average density of alcohol sales licenses; a major university with a higher-than-average binge drinking rate; and an inflated per-capita rate of DUI incidents. The dense, student-occupied neighborhoods around the city are regular sources of frustration for longtime city residents, and for police.

County of San Luis Obispo Mission Statement

The County's elected representatives and employees are committed to serve the community with pride to enhance the economic, environmental and social quality of life in San Luis Obispo County.

The County government structure is seated in the City of San Luis Obispo and is overseen by an elected Board of Supervisors, with an appointed County Administrative Officer. The San Luis Obispo County Health Agency encompasses the Departments of Public Health, and Behavioral Health (SLOBHD). In recent years the SLOBHD merged its mental health and alcohol and other drug (AOD) prevention programs creating a Prevention and Outreach Division. SLOBHD now contains the Divisions of Drug and Alcohol Services (DAS), the County's adult alcohol and drug treatment program, and Prevention and Outreach – which provides prevention, early intervention, and youth substance use disorder treatment. The Prevention and Outreach Division implements the Strategic Prevention Plan (SPP). By establishing the Prevention and Outreach Division, the Department created opportunities for the County to utilize the training and expertise of traditional AOD prevention programs to establish evidence-based practices while implementing Mental Health Services Act (MHSA) prevention programming. SLOBHD provides a continuum of services from prevention, to treatment, and maintenance of sobriety, to life-long recovery support. The Prevention and Outreach Division provides all SAPT-funded alcohol and other drug (AOD) prevention programming.

Behavioral Health Department Mission Statement

San Luis Obispo County Behavioral Health Department works in collaboration with the community to provide services necessary to improve and maintain the health and safety of individuals and families affected by mental illness and/or substance abuse. Services are designed to assist in the recovery process to achieve the highest quality of life by providing culturally competent, strength based and client and family centered strategies utilizing best practices.

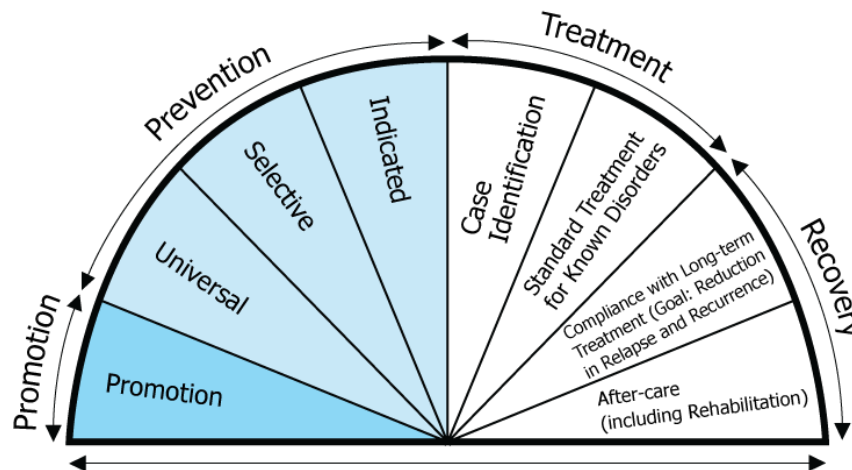
The Department's mission represents a comprehensive approach to behavioral health by recognizing promotion and prevention as part of an overall continuum of care. SAMHSA's **Behavioral Health Continuum of Care Model** serves as a visual guidepost for planning, implementing, and sharing the outcomes of the work done as part of the community's behavioral health system. The Continuum recognizes multiple opportunities for addressing behavioral health problems and disorders. Based on the Mental Health Intervention Spectrum, first introduced in a 1994 Institute of Medicine report, the model includes the following components:

Promotion—These strategies are designed to create environments and conditions that support behavioral health and the ability of individuals to withstand challenges. Promotion strategies also reinforce the entire continuum of behavioral health services.

Prevention—Delivered prior to the onset of a disorder, these interventions are intended to prevent or reduce the risk of developing a behavioral health problem, such as underage alcohol use, prescription drug misuse and abuse, and illicit drug use.

Treatment—These services are for people diagnosed with a substance use or other behavioral health disorder.

Recovery—These services support individuals' abilities to live productive lives in the community and can often help with abstinence. (SAMHSA, 2016)



Alcohol and other drug prevention programs in San Luis Obispo County address all ages, ethnicities, and socioeconomic groups by providing needs-based responses to community issues. SLOBHD's school-based prevention programs range from those using youth development strategies, such as Friday Night Live (FNL), to evidence-based school counseling approaches like Student Assistance Programs and Screening and Brief Intervention (SBI). SLOBHD partners with organizations throughout the County to address substance use issues, such as the Asset Development Network, the Prevention Alliance and local community coalitions. Specific interventions in underserved communities include outreach and education to high-risk populations, and a full complement of youth and family programs in rural communities, provided both in bilingual and bicultural settings.

The Department's Prevention Team collaborates with multiple public agencies and private organizations in addressing the often-complex array of community substance use issues. SLOBHD's strong partnership with law enforcement agencies includes both a countywide approach to reducing youth access to alcohol, and alcohol retailer compliance programs. The County Office of Education and SLOBHD collaborate throughout the year in providing training, capacity building, and evaluation services for local schools and youth programs. The San Luis Obispo County Friday Night Live Partnership, established in 1991, is a unique, public-private collaboration between SLOBHD and the local non-profit FNL organization.

Prevention and Outreach Team Mission Statement

The Prevention and Outreach Team provides a framework for collaborative county-wide prevention of substance use disorders and their related problems, and the promotion of mental wellness and health.

Guiding Principles

This is done by engaging individuals, families, neighborhoods, and communities, to promote safe and healthy environments through the following strategies:

- *Information dissemination and media advocacy*
- *Education and skill building*
- *Alternative activities*
- *Problem identification, referral, and clinical care*
- *Community based processes*
- *Environmental and policy development*
- *Increased access to care*
- *Consumer and family driven services*

Chapter 1 - Assessment

Data Assessment

Assessment Methodology

In October 2016, San Luis Obispo County's Behavioral Health Department Prevention Team began compiling data and information accumulated over the past five years. To conduct a proper assessment of the nature and scope of AOD-related problems in San Luis Obispo County, the Team reviewed national, state, and local surveys; focus group and stakeholder interview transcripts, coalition meeting notes, and media items. This process involved the following steps:

Collection of primary local AOD use and risk factors data

- California Healthy Kids Survey
- FNL Youth Development Surveys
- School Counseling Pre/Post Tests
- Indicators of Alcohol and Other Drug Abuse Report – SLO County
- LINK Family Advocate Data
- Treatment data (Cal OMS)
- Cal Poly CORE Survey

Collection of secondary local AOD use, risk factors and perception data

- Youth Council focus group reports
- Law enforcement arrest data and stakeholder notes
- Community Coalition reports
- Off-sale and on-sale alcohol outlet compliance records
- School Disciplinary Referrals
- Action for Healthy Communities Survey
- SWITRS alcohol related traffic crash injury and fatality data
- Cal Poly alcohol attitude surveys
- Stakeholder interviews and reports
- Media articles and broadcasts
- Alcohol Beverage Control licensing data
- SLO County truancy data

Collection of national and state data to assess trends and comparisons

- California Student Survey
- Monitoring the Future
- CalOMS treatment
- CURES data
- SWITRS
- CHP DUI arrests
- Alcohol Beverage Control licensing data

Presentation of data findings to community forums for feedback

- SLO County Friday Night Live Board
- Asset Development Network
- Juvenile Justice Commission
- MHSA Prevention and Early Intervention Stakeholder Group
- Behavioral Health Board
- Juvenile Services Advisory Council
- County Board of Supervisors
- School Boards and Faculty presentations
- Cal Poly Substance Use and Abuse Advisory Committee (SUAAC)
- Student Community Liaison Committee

- Opioid Safety Coalition
- Drug-Free Communities Coalition

Over the past several years, SLOBHD Prevention has tracked and reported these data sources in the CalOMS Prevention tool, grant reporting, community forums, and planning processes. In drafting this SPP, these reports were reviewed and discussed in Prevention Team meetings. Community input has been sought in forums such as the monthly collaborative meetings and trainings, Mental Health Services Act stakeholder sessions, and annual forums, such as the Cal Poly SUAAC sessions.

The key questions guiding this process have been:

- What are the primary substance use problems and related behaviors are facing SLO County at this moment?
- How often are these problems and related behaviors occurring?
- Where are these substance use problems and related behaviors occurring in SLO County?
- What local populations are experiencing more of these substance use issues and related behaviors?

These questions, naturally, led us to more concentrated questions such as “What services are currently being offered to alleviate these issues?” and “What services are lacking in SLO County in order to address these issues?” The SPP process in SLO County was not driven by the current successes being recorded here, but by those areas where the community and the SLOBHD Prevention Team felt more attention and resources would be needed to address problems.

In addition to the data points gathered above, the County conducted an online survey of local stakeholders. Over 180 substance use and mental health prevention and treatment providers, law enforcement officers, education faculty and administrators, parents, students, and others participated in a survey to provide the Department with input and feedback focused on local substance use issues and prevention efforts. Thirty-five percent (35%) of the respondents identified themselves as parents of school-aged children. The results of the survey have been critical to aid in the development of the Strategic Prevention Plan for County Prevention staff.

The key questions answered in the survey included:

- What are the leading problems associated with alcohol and other drugs in the local community?
- To what local problems do drug and alcohol abuse contribute?
- Which populations are most in need of prevention education and engagement?
- Which substances are most important to be addressed by local prevention efforts?
- What strategies are most recognized and responsive for local substance use issues?
- What local attitudes and values are important to consider when planning prevention programming?
- What tools and strategies are most desired for supporting community needs?

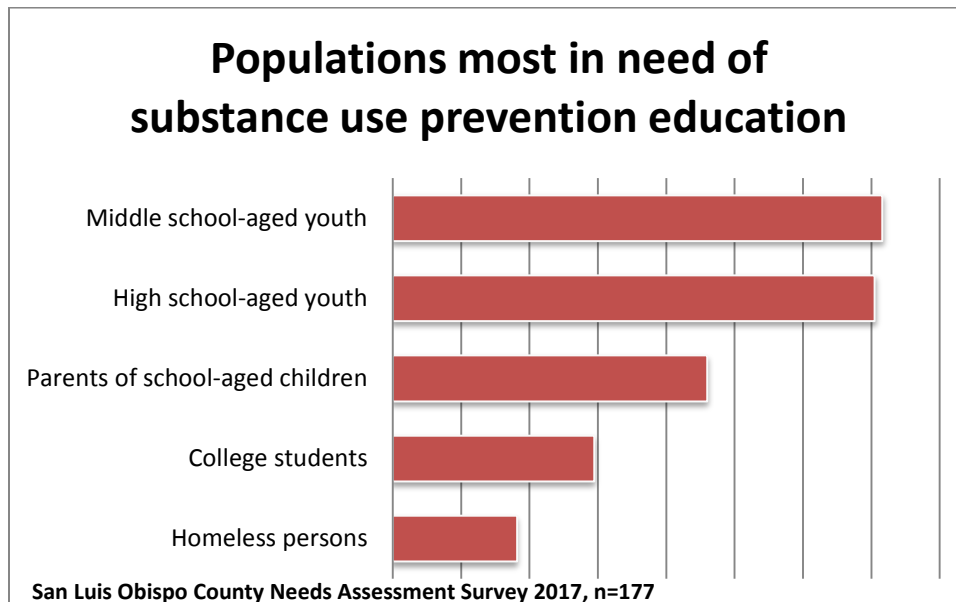
Data Sources and Findings

Local Needs Assessment Survey, Key Findings

The top five substance use “problems” in San Luis Obispo County:

1. Marijuana use by youth
2. Drinking/substance using and driving by adults
3. Prescription drug/opioid misuse and abuse by adults
4. Alcohol use by youth
5. Alcohol use by adults

(Survey asked respondents to score 14 common alcohol and other drug circumstances based on the question “In your community, how much of a problem do you believe each of the following to be?”)

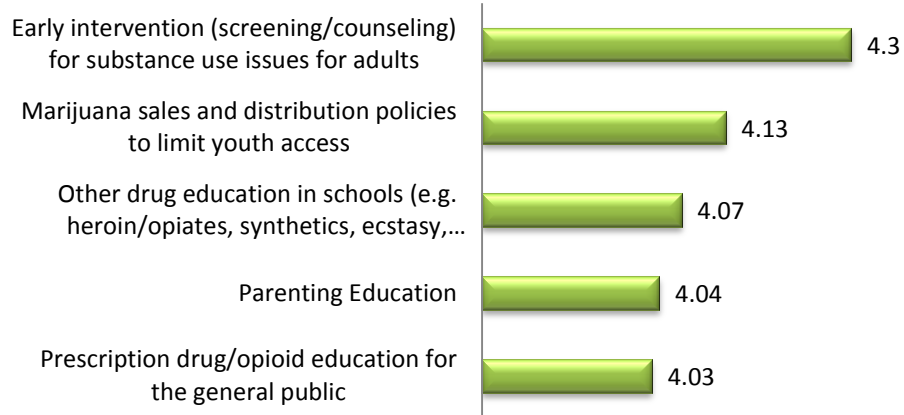


The survey also revealed that the community’s top concerns continue to be alcohol, marijuana, and prescription drug and opiate abuse. Methamphetamine, club drugs, and synthetic drug use also appear to be concerns amongst those responding to the survey. Steroid, hallucinogen, and inhalant abuse were of the least concern to the survey respondents.

An important question in the survey asked respondents to identify which common strategies are most “important” in addressing local substance use issues. The chart below details the rates of responses to the thirteen strategies listed. “Other” ideas were put forward by the community and are being reviewed by County staff.

Most important prevention strategies for SLO County

N = 177, Average score of scale 1-5



Survey respondents were provided with a series of eight statements about prevention, and asked to share the degree in which they agreed with the statement, or not. Here are the statements which received the most positive (agreement) responses:

1. Alcohol and other drug prevention programs are a good investment because they save lives and money
2. It is possible to reduce alcohol and other drug problems through prevention
3. Schools need to be more active in dealing with alcohol, tobacco and other drug problems
4. My community is interested in prevention to build a healthier and safer environment
5. The community has the responsibility to set up prevention programs to help people avoid alcohol and other drug problems

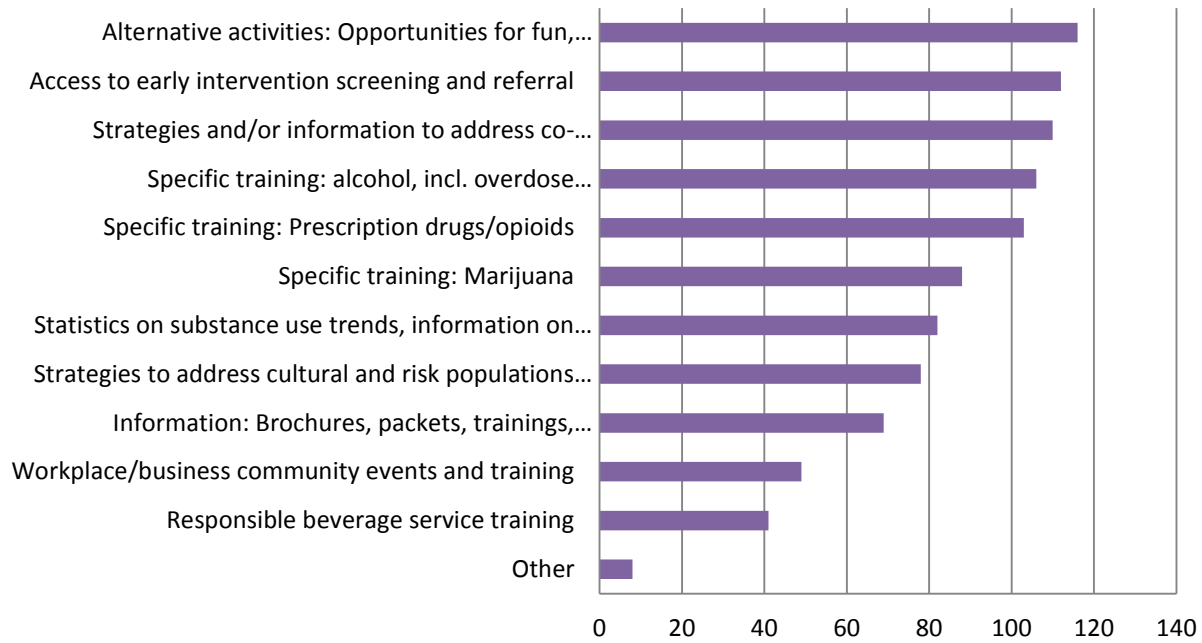
Although all statements had a majority of “Agree” or “Strongly Agree” responses, the statement which received the most “Disagree” or “Strongly Disagree” responses was:

- All alcohol advertising (billboards, magazines, etc.) should be banned

“Other” ideas were put forward by the community and are being reviewed by County staff.

Another important question in the survey asked respondents to identify which tools or assistance are most preferred in supporting local prevention efforts. The chart below details the rates of responses to the twelve tools listed. “Other” ideas were put forward by the community and are being reviewed by County staff.

Most preferred tools/strategies to support substance use prevention and wellness in SLO County



California Healthy Kids Survey (2015-2016), Key Findings

- 49% of San Luis Obispo County's 11th graders report that it is "very easy" to obtain alcohol
- 18% of 11th graders reported binge drinking in the last 30 days compared to the state figure of 17%
- 35% of 11th graders reported choosing to drink to intoxication, compared to 11% of their peers across the state
- 17% of 11th graders reported drinking and driving, or getting in a car with a friend who has been drinking
- 21% of those teens who drink report issues with police, emotional health, and blackouts (CHKS, 2012)
- 17% of 11th graders reported having been drunk or high while at school
- 21% of 11th graders find it slightly or not at all harmful to consume five or more drinks once or twice a week
- 73% of 11th graders reported alcohol is easy to get
- 2% of 7th graders reported using marijuana in the past 30 days
- 10% of 9th graders reported using marijuana in the past 30 days
- 23% of 11th graders reported using marijuana in the past 30 days
- 59% of 11th graders believed there was slight to no harm in using marijuana occasionally (increase of 3 points from 2011)

- 82% of 11th graders reported their parents would consider marijuana use to be “wrong”
- 95% of 11th graders reported their parents would consider tobacco use to be “wrong”
- 26% of 11th graders believe there is no harm in regular marijuana use (once or twice a week)
- 75% of 11th graders believe it is easy to get marijuana
- Painkillers and prescription drugs are the 3rd most popular class of drugs (after alcohol and marijuana) among high school students
- 21% of 11th graders reported recreational use of prescription painkillers in their lifetime (more than all other illegal drugs, except marijuana)
- 2% of 7th graders reported using prescription drugs to get high on school property in the last 30 days; that number increases to 6% in 9th grade

Healthy Minds Survey (2016), Key Findings

- 27% of Cal Poly students reported their drinking causes them to “do something they later regretted.”
- 15% of students reported drinking caused them to engage in unplanned sexual activity

Action for Healthy Communities (2016), Key Findings

- 53% of County residents reported binge drinking, higher than the state average last reported in 2014 as 33%
- 75% of parents reported a belief that alcohol and drug abuse problems were “very serious” at their child’s high school

American College Health Association, Cal Poly State University Report (2016), Key Findings

- Almost 74% of the respondents to the survey were aged 18-20
- 70% of college students drank alcohol in the past 30 days
- 42% of students reported binge drinking in the last 2 weeks
- 16% of students report driving after drinking in the past 30 days
- 48% of students reported drinking 5 or more servings the “last time they partied or socialized”
- 11% of students report using prescription drugs as study aids

SWTRS (2011), Key Findings

- Crime rates for felony and misdemeanor alcohol offenses increased from 2,222 per 100,000 (pop.) in 2000 to 2,380 per 100,000 in 2008
- San Luis Obispo County’s alcohol arrest rate was significantly higher than the state overall each year
- DUI arrests accounted for 51% of all arrests in 2008

Local News, Key Findings

- 35 people were arrested on St. Patrick’s Day in the city of San Luis Obispo alone, compared to 27 arrests in 2011 (San Luis Obispo Tribune, 2012)

- Emergency room visits due to opioid related emergencies increase from 65 in 2006 to 111 in 2015 (*A Quiet Epidemic: SLO County's Opioid Problem*, New Times SLO, 2017)
- 15 opioid related deaths in 2006; that number rose to 36 in 2015 (*A Quiet Epidemic: SLO County's Opioid Problem*, New Times SLO, 2017)

OSHPD (2017), Key Findings

- 640 opioid-related emergency room (ER) visits among the four local hospitals in 2014; this figure is a 31% increase from the prior year, and 59% greater than 2012
- Rate of opioid-related ER visits (234.5 per 100,000) is well above the California average of 151 per 100,000

CURES (2017), Key Findings

- 250,000 opioid prescriptions were written for the estimated 281, 000 residents of SLO County (2015)
- Over 16 residents-per-thousand have prescriptions for opiates extending 90 or more days
- Nearly three residents-per-thousand have prescriptions from six or more local prescribers or pharmacies

Priority Areas and Corresponding Risk and Protective Factors

Table 1.1: Risk and Protective Factors Chart

Priority Area	Risk Factor	Protective Factor
High Risk Alcohol Use	<ol style="list-style-type: none"> 1. Availability and easy access to alcohol for teens by adults (community) 2. High density of alcohol vendors and festivals (community) 3. Excessive drinking is an accepted norm (community) 4. Teens have a low perception of harm towards binge drinking (individual) 	<ol style="list-style-type: none"> 1. Effective enforcement policies to restrict availability and access to teens 2. Server/compliance training for seasonal employees 3. Effective enforcement of alcohol-related offenses 4. Family skills and support programs for parents
Youth Marijuana Use	<ol style="list-style-type: none"> 1. Marijuana is readily available to all ages (community) 2. Youth perception of harm for marijuana use is low (individual) 3. Favorable parent attitudes towards youth marijuana use 	<ol style="list-style-type: none"> 1. Local policies in place to restrict brick and mortar medical marijuana dispensaries 2. Parents and peers disapprove of marijuana use 3. Youth perceptions of parental monitoring

Prescription Drug Misuse	<ol style="list-style-type: none"> 1. Prescription drugs are readily accessible (community) 2. Youth and adults have a low perception of harm of prescription drugs 	<ol style="list-style-type: none"> 1a. Local ordinance requires all pharmacies participate in free take back program 1b. Local efforts to reduce over-prescribing of opiate medications 2. Youth and adults have social competence of misuse of prescription drugs
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Priority Areas and Problem Statements

This Strategic Prevention Plan is the product of many conversations, observations, and collaborations. The data, the surveys, the focus groups, and the daily engagement with the public have given the County Prevention staff a great deal of input to ensure the team’s work is effective. As a result of the data gathering and analysis process over the past several years, three priority problem areas needing action were identified:

Priority Area 1: High Risk Alcohol Use and Related Problems (Youth and Adult)

Problem Statement 1: SLO County continues to face problems associated with alcohol use and abuse, which continues to be a major factor in crime, health problems, DUIs, increased drug use and suicide. Binge drinking amongst local youth is consistent with the state average, as is recent alcohol use. College drinking also remains a problem with 18-20 year olds accounting for the highest arrest rate in the county.

Priority Area 2: Youth Marijuana Use and Related Problems

Problem Statement 2: Prescription drug misuse and abuse and its related problems are serious threats to the health and well-being of the citizens of SLO County, particularly to youth and young adults. Admissions to treatment are twice that of the state rate. Prescription medication is easily available and perceptions of harm are low.

Priority Area 3: Prescription Drug Misuse and Related Problems

Problem Statement 3: Local youth report an increase in marijuana use, with an increasing perception that marijuana is not harmful. Adult treatment clients report marijuana use as their primary drug of choice, often with addictions beginning in adolescence. The legalization of marijuana has brought an array of misinformation, mixed messages, and increased access to the drug, particularly affecting youth use and attitudes.

Priority Area 4: Capacity of SLOBHD Prevention Team and Community Partners

Problem Statement 4: County prevention efforts need to take a balanced approach that includes environmental factors as well as community, group, and individual-based programming. SLOBHD staff must be trained and proficient in the latest behavioral health wellness, promotion, and prevention methodology. County prevention partners require support to increase capacity in environmental, community, and identified group prevention responses.

Current Capacity

County Staff:

- Student Intern (2 @.25 FTE, 2 @ .5 FTE)
 - Key Job Duties for Student Interns include:
 - Support Specialists in implementing program services, including youth development activities, education, trainings, support and service delivery to schools and program participants, including youth, families and the general public.
- Drug and Alcohol Specialist I (2 FTE)
- Drug and Alcohol Specialist II (6 FTE)
- Drug and Alcohol Specialist III (1 FTE)
 - Key Job Duties for Specialists include:
 - Provide youth development activities, education, trainings, support and service delivery to schools and program participants, including youth, families and the general public.
 - Provide individual and group counseling, substance abuse and mental health screenings and resource referral.
 - Work with community groups, youth, adults, and businesses, including non-profit organizations in providing wellness opportunities and alcohol and other drug prevention education and activities.
 - Perform public speaking, event coordination, high-energy activities.
 - Develop and implement wellness activities which address substance abuse and mental health issues.
 - Participate in county and community data collection requirements and standards.
- Drug and Alcohol Program Supervisor (1 @ .5FTE)
 - Key Job Duties for Specialists include:
 - Under direction, plans, organizes, supervises and evaluates prevention and intervention programs and services.
 - Collaborates and leads community partnerships, stakeholder processes and data collection and monitoring.
 - Supervises, trains, evaluates staff.
 - Does other related work as required.

County Programs:

- *Friday Night Live (FNL)*: FNL serves youth in middle school (Club Live) and high school (Friday Night Live) in every school district in the County. FNL's youth development strategy, Roadmap, and programming reduce risk factors while building protective factors that keep young people from drinking.
- *Student Assistance Programs*: School-based prevention counselors utilize peer-led group and individual counseling to address early substance use and related problems.

- *Preventive Health Grant Outreach*: Staff provides culturally competent outreach and education to under-served families and communities to strengthen the protective factors within the family and community environments.
- *Community Outreach*: Prevention staff provides outreach and education to schools, community groups, coalitions, and parents on topics related to substance use.
- *Community Coalitions*: Prevention staff lead and participate in a variety of community coalitions (listed below).

County Providers: N/A

County Coalitions/Groups:

- *Drug-Free Communities Coalition* (lead): Coalition of representatives of the 12 sectors, focusing on substance use concerns related to youth transitioning from high school to college.
- *Substance Use and Abuse Advisory Committee (SUAAC)* (participate): Advisory group of Cal Poly and community organization representative to the Cal Poly State University President's Office. SUAAC provides programming oversight and recommendations to the President's Office related to student substance use.
- *Prevention Alliance* (lead): Collaborative group of youth-serving organizations that meets bi-monthly to foster communication and collaboration on countywide prevention efforts.
- *Prevention of Substance Abuse for Youth (POSAFY)* (participate): POSAFY was founded by local filmmaker and parent, Jody Belsher, who produced *The Other Side of Cannabis*, an award-winning documentary which she has shared with local prevention providers, schools, and therapists. The newly formed group aims to address mixed messages around marijuana and its legalization.
- *SLO Opioid Safety Coalition* (lead): The Coalition was established in 2016 to reduce prescription drug misuse and abuse, educate the community about prescription drugs and raise awareness about the dangers associated with misuse, as well as safe in-home storage and appropriate disposal methods in the county. The Coalition also works to adopt healthcare policy to meet the needs of the community. Coalition members make up five action teams: Data Collection and Monitoring; Safe Prescribing and Health Care; Medication Assisted Treatment; Community Prevention and First Responders; and Naloxone: Overdose Antidote.
- *Juvenile Services Advisory Council* (participant): Under Supervising Juvenile Judge Linda Hurst, this coalition serves as an advisory council within the juvenile justice system providing oversight, support and resources for agencies and programs that serve youth associated with law enforcement, probation and considered high risk.

County Partners:

- *Friday Night Live Board of Directors*: Community members serve as advocates to the FNL program, and support youth in FNL with fundraising opportunities.

- *Behavioral Health Board*: Community members advocate for public policy responses to reduce the access to substances for youth, adults and to raise awareness of the related problems. Community partners provide SLOBHD with focused data and information regarding local substance use issues and will be critical to any further prevention implementation focusing on substance use issues.
- *The LINK Family Resource Center*: Community organization that fosters a safe, healthy, and thriving community by linking children, youth, and families with programs and services to address their unique needs. The LINK partners with SLOBHD to serve families needing substance use support as well as community-based supports.
- *Student Community Liaison Committee (SCLC)*: SCLC is a Town/Gown committee with representation from the City of SLO, Cal Poly State University, and Cuesta Community College that works to lessen community issues related to a high college student population. SCLC partners with SLOBHD to help address substance use related issues within the community, such as noise and neighborhood consequences of high risk drinking.
- *Tobacco Control Coalition*: The Tobacco Control Program and its community coalition partner with Friday Night Live youth on tobacco prevention efforts, including education, awareness, and policy advocacy.
- *County Office of Education*: The San Luis Obispo County Office of Education partners with SLOBHD to coordinate the Prevention Alliance, administer the CHKS survey every 2 years, and is critical in ensuring school districts and parents receive the prevention opportunities available.
- *Transitions Mental Health Association (TMHA)*: A non-profit organization serving San Luis Obispo and North Santa Barbara Counties, Transitions-Mental Health Association is dedicated to eliminating stigma and promoting recovery and wellness for people with mental illness through work, housing, community and family support services.
- *AVOID the 14* – San Luis Obispo County’s DUI Task Force, the AVOID regional task force is made up of multiple county law enforcement agencies that join forces during peak holiday periods to fight drunk driving through prevention messaging, community outreach and enforcement. SLO County Prevention & Outreach partners on DUI prevention campaigns, media and outreach efforts.
- *Promotores Collaborative of San Luis Obispo County*: Builds, fosters and supports a network of Promotores throughout SLO County, bringing diverse, comprehensive and equal access to healthcare and services. The Promotores partner with our staff to provide culturally competent resources and family supports.

Workforce Development:

SLOBHD staff has received several trainings through annual Friday Night Live Training Institutes, CADCA’s annual and mid-year conferences, and SAMHSA’s Prevention Day. SLOBHD has also implemented an E-learning program for staff to receive prevention, early intervention and cultural competence trainings through online courses on a regular basis. The County puts significant resources towards training all staff in cultural competence issues, as well as Trauma Informed Care. All SLOBHD Prevention staff receives at least six

hours of culture-oriented training each year. Staff members are assigned various trainings, but also have the option to self-select trainings of interest to their specific assignment.

Capacity Assessment

Table 1.4 Capacity Assessment Chart

		Priority Area 1: High Risk Alcohol Use and Related Problems (Youth and Adult)		
		Resources	Readiness Level	Challenges/Gaps
Resources	Community	<ul style="list-style-type: none"> Community awareness Specialized knowledge about Pv research, theory, and practice Practical experience Political/policy knowledge 	Stage 8 – Confirmation/Expansion	SLO County’s growing wine, spirits and craft brew industry with major media presence contributes to high risk drinking, as well as college drinking social norms.
	Fiscal	<ul style="list-style-type: none"> Funding: SAPT, state and federal grants, local contracts Equipment: computers, meeting space, phones, etc. Promotion and advertising 	HIGH Fiscal resources currently support proposed SPP	Competing with alcohol industry funds, county funding cannot implement the same level of community messaging/promotion.
	Human	<ul style="list-style-type: none"> Competent staff Training Volunteers Stakeholders Other agency partners Community leaders 	MEDIUM-HIGH Training and engaging stakeholders and community partners is strong. Staff cultural competence and professional development is a priority.	Staff recruitment and retention are the greatest challenges. Community partner staffing turnover is the next greatest challenge.
	Organizational	<ul style="list-style-type: none"> Vision and mission statement Clear and consistent organizational patterns and policies Adequate fiscal resources for implementation Technological resources Specialized knowledge about Pv research, theory, and practice 	MEDIUM-HIGH The County is consistent with clear expectations, resources, support and follow up for operations and direct service needs.	Heavy focus has been dedicated to Treatment/Drug MediCal programs and the new Waiver implementation. Prevention is not being seen as a priority in many levels of the system.

		Priority Area 2: Youth Marijuana Use and Related Problems		
		Resources	Readiness Level	Challenges/Gaps
Resources	Community	<ul style="list-style-type: none"> Community awareness Practical experience 	Stage 2 – Denial	With the legalization of recreational marijuana, our communities are not prepared with accurate knowledge to create policies that will reduce risk factors. Local voting data showed favorable attitudes towards recreational marijuana.

	Fiscal	<ul style="list-style-type: none"> Funding: SAPT, state and federal grants, local contracts Equipment: computers, meeting space, phones, etc. Promotion and advertising 	HIGH Fiscal resources currently support proposed SPP	There is an unknown fiscal impact of recreational marijuana, as this is a newly passed law with unknown fiscal implications.
	Human	<ul style="list-style-type: none"> Competent staff Training Volunteers Stakeholders Other agency partners Community leaders 	MEDIUM-HIGH Training and engaging stakeholders and community partners is strong. Staff cultural competence and professional development is a priority.	Staff recruitment and retention are the greatest challenges. Community partner staffing turnover is the next greatest challenge.
	Organizational	<ul style="list-style-type: none"> Vision and mission statement Clear and consistent organizational patterns and policies Adequate fiscal resources for implementation Technological resources Specialized knowledge about Pv research, theory, and practice 	MEDIUM-HIGH The County is consistent with clear expectations, resources, support and follow up for operations and direct service needs.	Heavy focus has been dedicated to Treatment/Drug MediCal programs and the new Waiver implementation. Prevention is not being seen as a priority in many levels of the system.

Priority Area 3: Prescription Drug Misuse and Related Problems				
		Resources	Readiness Level	Challenges/Gaps
Resources	Community	<ul style="list-style-type: none"> Community awareness Specialized knowledge about Pv research, theory, and practice Practical experience Political/policy knowledge 	Stage 8 – Confirmation/Expansion	Community awareness of safe storage and disposal and coordinating outreach to multiple medical providers regarding safe prescribing methods.
	Fiscal	<ul style="list-style-type: none"> Funding: SAPT, state and federal grants Equipment: computers, meeting space, phones, etc. Promotion and advertising 	LOW-MEDIUM Fiscal resources currently support proposed SPP	The County has a small grant allocated to address this specific issue, which limits the amount of outreach and education.
	Human	<ul style="list-style-type: none"> Competent staff Training Volunteers Stakeholders Other agency partners Community leaders 	MEDIUM-HIGH Training and engaging stakeholders and community partners is strong. Staff cultural competence and professional development is a priority.	Staff recruitment and retention are the greatest challenges. Community partner staffing turnover is the next greatest challenge.

	Organizational	<ul style="list-style-type: none"> • Vision and mission statement • Clear and consistent organizational patterns and policies • Adequate fiscal resources for implementation • Technological resources • Specialized knowledge about Pv research, theory, and practice 	<p>MEDIUM-HIGH</p> <p>The County is consistent with clear expectations, resources, support and follow up for operations and direct service needs.</p>	<p>Heavy focus has been dedicated to Treatment/Drug MediCal programs and the new Waiver implementation.</p> <p>Prevention is not being seen as a priority in many levels of the system.</p>
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All three priority areas have the capacity to move forward with planning and implementation.

Integrate Sustainability

SLOBHD Prevention has tracked and reported data sources in the CalOMS Prevention tool, grant reporting, community forums, and planning processes. In drafting this SPP, these reports were reviewed and discussed in Prevention Team meetings. Community input has been sought in forums such as the monthly collaborative meetings and trainings, Mental Health Services Act stakeholder sessions, and annual forums, such as the Cal Poly SUAAC sessions.

Integrate Cultural Competence

The County’s Prevention programs have built relationships and partnerships with organizations serving cultural populations often underserved in the behavioral health system, including youth, LGBTQ, veterans, and older adults along with expanded services with the Latino population. Demographic data is captured for all existing prevention programs providing accurate assessment to address the needs of cultures and populations. The SLOBHD has implemented a Training Policy which includes requirements for staff development in cultural competence and demonstrated improvements in service to diverse clients.

Chapter 2 – Capacity Building

Capacity Building Plan

Priority Area 4: Capacity of SLOBHD Prevention Team and Community Partners			
	Resource Challenges/Gaps	Course of Action	
Four Key Elements of Capacity Building	Engage Stakeholders	<p>SLO County is fortunate to have many dedicated, passionate stakeholders; however they are involved in many community efforts, so the challenge for them is dividing their time to be able to dedicate to prevention.</p>	<p>SLOBHD Prevention has a strong record in convening and engaging partners, key stakeholders, agencies, and the populations and communities that are most affected by AOD problems to plan and implement effective prevention efforts, maintain high levels of commitment, and stay abreast of important changes in the field.</p>
	Strengthen Collaborative Groups	<p>Some challenges related to strengthening collaboration among groups include varying political agendas/goals of organizations and competition among partners for funds or access to certain target groups. Another challenge is having multiple groups addressing the same issue or activity, but doing so separately, so there can be a duplication of efforts, instead of combing efforts for a stronger/larger effect.</p>	<p>SLOBHD primarily builds capacity through community coalitions and agency partners focused on preventing AOD-related problems in the County. These partners have been integrally involved in planning and, eventually, implementing the SPP process. Regular Prevention Team meetings, community coalition meetings and annual prevention collaborative meetings include reviews of SLOBHD Prevention planning and strategies, in order to receive feedback and advisory direction from the community. These meetings have been used as a way to keep prevention partners and community groups informed about the Strategic Prevention Plan assessment process, reflect on findings, and assist in setting priorities. These groups have reviewed key problem areas and worked to brainstorm contributing factors to high-risk alcohol use, marijuana concerns among youth, and prescription drug misuse. These groups identified the settings, environments, attitudes, and behaviors that contribute to these problems. The groups included representatives from the entire county, including rural and underserved communities.</p>
	Increase Community Awareness	<p>Limited human and financial resources specific to advertising and public relations reduce the amount of work we can accomplish in this area. The SLOBHD Prevention Team has built relationships with several local media outlets that have helped get awareness messages out to the community, although we are limited by what they can provide at little to no cost.</p>	<p>The SLOBHD Prevention Team launched an agency-wide social media presence, utilizing Facebook and Instagram platforms to increase community awareness of Behavioral Health topics specific to the county. This compliments the online presence the Friday Night Live program has been implementing for many years. The County is currently in the process of developing a new website, which is designed to be more community-friendly and accessible. In addition to online strategies increase community awareness, the SLOBHD participates in various community events and resource fairs to engage the general community in Behavioral Health prevention.</p>

	Mobilize Communities	<p>Funds and access to trainings are a challenge in our community, due to our lack of proximity to a large city/hub like Los Angeles, Sacramento, or San Francisco. Most trainings held locally have to be hosted by a local group, or a local group has to pay for a specific trainer to travel.</p>	<p>In the past few years, SLOBHD provided numerous training and technical assistance opportunities to the community including the Student Community Liaison Committee (SCLC), the County Office of Education consortium of school district prevention coordinators, youth councils, the Keeping Kids in Schools conference, SLO Loud youth leadership conference, United Way, municipal recreation and parks youth programs, and several schools throughout the County. The SLOBHD Prevention Team assists in presenting trauma-related training throughout the county. Other training topics include: youth development, evidence-based environmental prevention strategies, developing partnerships and prevention coalitions, AOD-related problems and contributing factors, developing a needs and resource assessment, facilitating meetings, analyzing data, and developing goals and objectives for addressing priority problems and contributing factors.</p>
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Training Plan

Training Schedule			
<p><u>Monthly</u></p> <ul style="list-style-type: none"> • SCLC – Stakeholder • SUAAC - Stakeholder • TMHA – Stakeholder • Cultural Competence – Staff/Stakeholder • Juvenile Justice Commission - Stakeholder • Friday Night Live: Staff • SAP: Staff 	<p><u>Quarterly</u></p> <ul style="list-style-type: none"> • Opioid Summit- Staff/Stakeholder • PEI/MHSA-Stakeholder • Prevention Alliance - Stakeholder 	<p><u>Annually</u></p> <ul style="list-style-type: none"> • SLOBHD Prevention & Outreach -Division Training - Staff • CFNLP / LTI - Staff • LINK Family Advocates - Stakeholder • Juvenile Advisory Council -Stakeholder 	<p><u>Continuous</u></p> <ul style="list-style-type: none"> • School Staff in-services • SLOBHD E-Learning-Staff

Integrate Sustainability

SLOBHD utilizes training and education to foster readiness, cultural competence, leadership, and evaluation capacity among staff and community partners. Trainings and education reach community partners through convening meetings and workshops with key stakeholders, coalitions, and others. Training topics include: trauma informed care, mental health first aid, youth development, evidence-based environmental prevention strategies, developing partnerships and prevention coalitions, AOD-related problems and contributing factors, developing a needs and resource assessment, facilitating meetings, analyzing data, and developing goals and objectives for addressing priority problems and contributing factors.

Integrate Cultural Competence

Community partnerships key in the SPP process include the County Behavioral Health Board, the SLO Friday Night Live Partnership Board of Directors, the California Youth Council, Prevention Alliance, The LINK, the Student Community Liaison Committee (SCLC), Tobacco Control Coalition, the Juvenile Services Advisory Council, SLO Opioid Safety Coalition, and the County Office of Education. Specific issue target groups include the Drug Free Communities 101

Task Force (coalition) and Cal Poly's Substance Use and Abuse Advisory Committee (SUAAC). These groups have reviewed key problem areas and worked to brainstorm contributing factors to high-risk alcohol use, marijuana concerns among youth, and prescription drug misuse. These groups identified the settings, environments, attitudes, and behaviors that contribute to these problems. The groups included representatives from the entire county, including rural and underserved communities.

Many of the community partnerships utilized in this process have been established for the past decade or more. SLOBHD values the strength of these community collaborations and will continue to build effective community relations in order to provide quality prevention services. Because the field of prevention is rapidly progressing, it is imperative that the prevention partners in the community evolve accordingly.

Chapter 3 - Planning

Data-Based Strategies

Table 3.1: Prioritizing Risk and Protective Factors

Risk and Protective Factor(s)	Importance		Changeability	
	Low	High	Low	High
Availability and easy access to substances for teens		✓		✓
High density of alcohol vendors and festivals (community)		✓	✓	
Favorable attitudes towards substance use (community norm)		✓		✓
Low perception of harm		✓		✓
Effective enforcement policies to restrict availability and access to teens		✓		✓
Server/compliance training for seasonal employees		✓		✓
Local policies in place to restrict access to substances		✓	✓	
Family skills and support programs for parents		✓		✓
Perceived disapproval of use		✓		✓
Perception of parental monitoring		✓		✓
Social competence of dangers of substance use/misuse		✓		✓
Access to prescription drug take back programs		✓		✓

Table 3.2: Criteria for Strategy Selection

Strategy	Effectiveness	Conceptual Fit	Practical Fit
Information Dissemination: media campaigns, websites, social media, presentations, health fairs	✓	✓	✓
Education: parenting/family management services, classroom education services	✓	✓	✓
Alternatives: FNL, Youth adult leadership activities	✓	✓	✓
Problem Identification & Referral: SAP Program	✓	✓	✓
Community-Based Process: Training; multi-agency coordination/collaboration	✓	✓	✓
Environmental: Prescription drug disposal efforts, Minor Compliance Checks, Merchant Training, Media advocacy, Zoning ordinance	✓	✓	✓

Table 3.3: Data-Based Strategies

Risk Factor	Protective Factor	Strategies
Priority Area 1: High Risk Alcohol Use and Related Problems (Youth and Adult)		
1. Availability and easy access to alcohol for teens by adults (community)	1. Effective enforcement policies to restrict availability and access to teens	1a. Environmental: Minor Compliance Checks 1b. Education: Parenting/family management services 1c. Information Dissemination: Media campaigns, websites
2. High density of alcohol vendors and festivals (community)	2. Server/compliance training for seasonal employees	2. Environmental: Merchant Training
3. Excessive drinking is an	3. Effective enforcement of	3a. Community-Based Process:

<p>accepted norm (community)</p> <p>4. Teens have a low perception of harm towards binge drinking (individual)</p>	<p>alcohol-related offenses</p> <p>4. Family skills and support programs for parents</p>	<p>community trainings</p> <p>3b. Environmental: Media advocacy</p> <p>4a. Problem Identification & Referral: SAP Program</p> <p>4b. Information Dissemination: media campaigns, presentations, health fairs</p> <p>4c. Alternatives: FNL, Youth adult leadership activities</p>
Priority Area 2: Youth Marijuana Use and Related Problems		
<p>1. Marijuana is readily available to all ages (community)</p> <p>2. Youth perception of harm for marijuana use is low (individual)</p> <p>3. Favorable parent attitudes towards youth marijuana use</p>	<p>1. Local policies in place to restrict brick and mortar medical marijuana dispensaries</p> <p>2. Parents and peers disapprove of marijuana use</p> <p>3. Youth perceptions of parental monitoring</p>	<p>1a. Environmental: Zoning ordinance</p> <p>1b. Environmental: Compliance checks</p> <p>2a. Problem Identification & Referral: SAP Program</p> <p>2b. Information Dissemination: media campaigns, presentations, health fairs</p> <p>2c. Alternatives: FNL, Youth adult leadership activities</p> <p>2d. Education: Classroom educational services</p> <p>2e. Community-Based Process: Training (school)</p> <p>3a. Information Dissemination: media campaigns, presentations, health fairs</p> <p>3b. Education: Parenting/family management services</p>
Priority Area 3: Prescription Drug Misuse and Related Problems		
<p>1. Prescription drugs are readily accessible (community)</p> <p>2. Youth and adults have a low perception of harm of prescription drugs</p>	<p>1a. Local ordinance requires all pharmacies participate in free take back program</p> <p>1b. Local efforts to reduce over-prescribing of opiate medications</p> <p>2. Youth and adults have social competence of misuse of prescription drugs</p>	<p>1a. Information Dissemination: media campaigns, presentations, health fairs, website</p> <p>1b. Environmental: Prescription drug disposal efforts</p> <p>1c. Community-based process: Multi-agency coordination/collaboration; training</p> <p>2a. Problem Identification & Referral: SAP Program</p> <p>2b. Information Dissemination: media campaigns, presentations, health fairs, website</p> <p>2c. Alternatives: FNL, Youth adult leadership activities</p> <p>2d. Education: Classroom educational services; Parenting/family management</p>

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The SLOBHD Prevention Team reviewed the key findings from assessment to identify the three priority areas, and then reviewed the specific data to identify local risk and protective factors contributing to high risk alcohol use, marijuana use, and prescription drug misuse. The focus of this review was on the settings, environments, attitudes, and behaviors that contribute to these problems. Once the data was reviewed, the team reviewed the capacity of prevention partners in SLO County to assess readiness and feasibility of addressing each priority area, and selected the areas with the highest “problem” and feasibility of success.

Goals, objectives, and strategies were prioritized based on the following criteria:

- Current urgency and need, based on data and anecdotal evidence
- Benefits: Populations served must be at greatest risk
- Effectiveness: Programs to address the priority must be available and culturally competent
- Feasibility: The goals and objectives must be ethically based, and politically feasible in the next five years.

Logic Model

Table 3.7: Logic Model

<p>Priority Area: High Risk Alcohol Use and Related Problems</p> <p>Problem Statement 1: SLO County continues to face problems associated with alcohol use and abuse, which continues to be a major factor in crime, health problems, DUIs, increased drug use and suicide. Binge drinking amongst local youth is consistent with the state average, as is recent alcohol use. College drinking also remains a problem with 18-20 year olds accounting for the highest arrest rate in the county.</p> <p>Contributing Factors: 1) Youth access to alcohol. 2) Decreased perceived harm of alcohol’s effects. 3) Norm of excessive drinking.</p> <p>Goal: Reduce underage and high risk drinking by 5% by June 2022</p>					
Objective	Strategies	Short Term Outcomes	Intermediate Outcomes	Long Term Outcomes	Indicators
Reduce youth social and retail access to alcohol by 5% by June 2022	<p>Environmental:</p> <ul style="list-style-type: none"> Minor Compliance Checks Merchant Training <p>Education:</p> <ul style="list-style-type: none"> Parent Education <p>Information Dissemination:</p> <ul style="list-style-type: none"> Media Campaigns Websites 	<ul style="list-style-type: none"> Increase rate of Minor Compliance checks Increase rate of shoulder tap operations Increased dialogue of social host policies Media and public opportunities for addressing issues of underage drinking 	<ul style="list-style-type: none"> Partnerships with law enforcement to conduct Minor Compliance, shoulder-tap operations, and training for employees Decreased number of parties where alcohol is served to teens by adults 	<ul style="list-style-type: none"> Decreased rates of sales to minors Decreased youth & adult alcohol-related problems Decreased minor possession arrests 	<ul style="list-style-type: none"> Liquor law violations (Local police records, ABC) Youth alcohol use in past 30 days (CHKS, SAP) <ul style="list-style-type: none"> ✓ 31% of 11th graders used alcohol in past 30 days (CHKS 2016) Youth binge-drinking in past 30 days (CHKS, SAP) <ul style="list-style-type: none"> ✓ 18% of 11th graders binge drank in the past 30 days (CHKS, 2016) Youth drinking and driving (CHP) <ul style="list-style-type: none"> ✓ 17% of 11th graders drank & drove in the past 30 days (CHKS, 2016) Youth alcohol-related Arrests (Police,

					probation) ✓ 75% of 11 th graders feel alcohol is very to fairly easy to get (CHKS, 2016) ✓ 36% of parents believe alcohol & drug problems are “very serious” at their child’s high school (Action for Healthy Communities, 2010)
Increase the level of youth’s perceived harm associated with alcohol use by 5% by June 2022	Community-Based Process: <ul style="list-style-type: none"> Community trainings Environmental: <ul style="list-style-type: none"> Media advocacy Problem Identification & Referral: <ul style="list-style-type: none"> SAP Program Information Dissemination: <ul style="list-style-type: none"> Media campaigns Presentations Health fairs Alternatives: <ul style="list-style-type: none"> Friday Night Live Youth adult leadership activities 	<ul style="list-style-type: none"> Increase school trainings Media and public forum opportunities on issues of high risk drinking Improved school access to selective prevention Increase FNL Chapter activities around alcohol Increase partnerships with law enforcement to educate public on traffic safety 	<ul style="list-style-type: none"> Increased youth media education and advocacy Improved school responses to CHKS results Improved awareness of vehicle safety 	<ul style="list-style-type: none"> Decreased rates of youth alcohol use Decreased youth alcohol-related problems Increased youth perceived harm of alcohol Decreased DUI and distracted driving incidents & injuries 	<ul style="list-style-type: none"> Youth alcohol use in past 30 days (CHKS, SAP) Youth perceived harm of alcohol (CHKS, SAP) <ul style="list-style-type: none"> ✓ 21% of 11th graders say there is less than moderate harm in using alcohol (CHKS, 2016) Youth binge-drinking in past 30 days (CHKS) Liquor law violations (Local police records, ABC) Youth alcohol-related Arrests (Police, probation)

Priority Area: Youth Marijuana Use and Related Problems

Problem Statement 2: Local youth report an increase in marijuana use, with an increasing perception that marijuana is not harmful. Adult treatment clients report marijuana use as their primary drug of choice, often with addictions beginning in adolescence. The legalization of marijuana has brought an array of misinformation, mixed messages, and increased access to the drug, particularly affecting youth use and attitudes.

Contributing Factors: 1) Lack of marijuana-specific education. 2) Decreased perceived harm of marijuana. 3) Lack of family awareness resulting in supported use

Goal: Reduce youth marijuana use and related problems by 3% by June 2022

Objective	Strategies	Short Term Outcomes	Intermediate Outcomes	Long Term Outcomes	Indicators
Reduce social and retail access to marijuana by 3% by June 2022	Environmental: <ul style="list-style-type: none"> • Zoning ordinance • Compliance checks 	<ul style="list-style-type: none"> • Increased FNL opportunities focused on marijuana • School personnel trained in marijuana recognition • Increased awareness of laws pertaining to marijuana paraphernalia 	<ul style="list-style-type: none"> • Increased youth-led peer education focused on marijuana • Increased policies aimed at promoting consistent message of marijuana’s health effects • Partnerships with law enforcement to address marijuana access 	<ul style="list-style-type: none"> • Decreased access to marijuana • Decreased use of marijuana 	<ul style="list-style-type: none"> • AOD Indicators report <ul style="list-style-type: none"> ✓ Marijuana accounts for 43% of drug arrests in SLO County • School-based marijuana violations (School records, Probation) • Perceived difficulty of obtaining marijuana (CHKS) <ul style="list-style-type: none"> ✓ 75% of 11th graders say it’s fairly to very easy to get marijuana (CHKS, 2016) • Youth marijuana use in past 30 days (CHKS) <ul style="list-style-type: none"> ✓ 23% of 11th graders have used marijuana in the past 30 days (CHKS, 2016)
Increase the level of youth’s perceived harm associated with marijuana	Problem Identification & Referral: <ul style="list-style-type: none"> • SAP Program 	<ul style="list-style-type: none"> • Increased educational opportunities focused on marijuana 	<ul style="list-style-type: none"> • Improved school responses to CHKS results 	<ul style="list-style-type: none"> • Increased perceived harm of marijuana 	<ul style="list-style-type: none"> • Youth perception of marijuana harm (CHKS, SAP)

<p>use by 3% by June 2022</p>	<p>Information Dissemination:</p> <ul style="list-style-type: none"> • Media campaigns • Presentations • Health fairs <p>Alternatives:</p> <ul style="list-style-type: none"> • Friday Night Live • Youth adult leadership activities <p>Education:</p> <ul style="list-style-type: none"> • Classroom educational services • Parenting/family management services <p>Community-Based Process:</p> <ul style="list-style-type: none"> • Training (schools) 	<ul style="list-style-type: none"> • School personnel trained in marijuana recognition 	<ul style="list-style-type: none"> • Increased completions of SAP and school-based counseling programs by youth with marijuana as a primary drug of referral 		<ul style="list-style-type: none"> ✓ 47% of 11th graders feel there is no to slight risk of harming oneself smoking marijuana once or twice a week ✓ 59% of 11th graders feel there is no to slight risk of harming oneself smoking marijuana occasionally (CKHS, 2016)
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<p>Priority Area: Prescription Drug Misuse and Related Problems</p> <p>Problem Statement 3: Prescription drug misuse and abuse and its related problems are serious threats to the health and well-being of the citizens of SLO County, particularly to youth and young adults. Admissions to treatment are twice that of the state rate. Prescription medication is easily available and perceptions of harm are low.</p> <p>Contributing Factors: 1) Lack of prescription drug-specific education. 2) Decreased perceived harm of prescription drug misuse effects. 3) Easy access to prescription drugs.</p> <p>Goal: Reduce prescription drug misuse and related problems by 3% by June 2022</p>					
Objective	Strategies	Short Term Outcomes	Intermediate Outcomes	Long Term Outcomes	Indicators
<p>Increase school, family and community awareness of the availability and harms related to prescription</p>	<p>Information Dissemination:</p> <ul style="list-style-type: none"> • Media campaigns • Presentations • Health fairs • Website 	<ul style="list-style-type: none"> • Increased FNL opportunities focused on prescription drug misuse & abuse • Increase media 	<ul style="list-style-type: none"> • Increase public awareness of prescription drug misuse • Increased participation 	<ul style="list-style-type: none"> • Decrease access to prescription drugs for misuse 	<ul style="list-style-type: none"> • SLO DAS Treatment services ✓ 14.8% of SLO DAS admissions were related to

<p>drug misuse by 5% by June 2022</p>	<p>Environmental:</p> <ul style="list-style-type: none"> • Prescription drug disposal efforts <p>Community-based process:</p> <ul style="list-style-type: none"> • Multi-agency coordination/collaboration • Training 	<p>advocacy regarding prescription drug issues</p>	<p>in Prescription Drug Take Back Days</p>		<p>prescription drug misuse (ADP, 2010)</p> <ul style="list-style-type: none"> • Overdose Data <ul style="list-style-type: none"> ✓ 36 accidental drug overdoses in SLO County were caused by prescription drugs (SLO Opioid Coalition, 2016) • Lifetime prescription drug use (CHKS) <ul style="list-style-type: none"> ✓ 21% of 11th graders have used prescription pain killers
<p>Increase perception of harm of prescription misuse by 3% by June 2022</p>	<p>Problem Identification & Referral:</p> <ul style="list-style-type: none"> • SAP Program <p>Information Dissemination:</p> <ul style="list-style-type: none"> • Media campaigns • Presentations • Health fairs • Website <p>Alternatives:</p> <ul style="list-style-type: none"> • Friday Night Live • Youth adult leadership activities <p>Education:</p> <ul style="list-style-type: none"> • Classroom educational services • Parenting/family 	<ul style="list-style-type: none"> • Increased educational opportunities focused on prescription drugs • School personnel trained in prescription drug misuse & abuse recognition 	<ul style="list-style-type: none"> • Improved school responses to CHKS results • Increased completions of SAP and school-based counseling programs by youth with prescription drug misuse as a primary drug of referral 	<ul style="list-style-type: none"> • Increased perceived harm of prescription drug misuse 	<ul style="list-style-type: none"> • CADCA surveys <ul style="list-style-type: none"> ✓ 6% of local teens say there is nothing wrong with abusing prescription drugs every once in a while (CHKS 2016)

	management services				
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<p>Priority Area: Capacity of SLOBHD Prevention Team and Community Partners</p> <p>Problem Statement 4: County prevention efforts need to take a balanced approach that includes environmental factors as well as community, group, and individual-based programming. SLOBHD staff must be trained and proficient in the latest behavioral health wellness, promotion, and prevention methodology. County prevention partners require support to increase capacity in environmental, community, and identified group prevention responses.</p> <p>Contributing Factors: 1) Rapidly progressing field. 2) Turnover of staff and community partners. 3) Lack of community education and resources to respond.</p> <p>Goal: Enhance System Capacity for AOD Prevention by increasing community and organization participation in evidence-based prevention programs by 4% by June 2022.</p>					
Objective	Strategies	Short Term Outcomes	Intermediate Outcomes	Long Term Outcomes	Indicators
Expand the participation and collaboration of schools and community organizations by adding 4 new trainings or collaborative events per year.	Community-based process: <ul style="list-style-type: none"> Multi-agency coordination/collaboration Training 	<ul style="list-style-type: none"> Increased youth-adult partnerships engaged in prevention 	<ul style="list-style-type: none"> Increased participation in best practices 	<ul style="list-style-type: none"> Increased community response to alcohol and other drug problems 	<ul style="list-style-type: none"> Drug Free Communities Reports (BH) Community Surveys (BH) Cal OMS Training Agendas Workshop pre/post surveys
Expand the participation and collaboration of youth by increasing membership and participation in prevention programs by 4% by June 2022.	Alternatives: <ul style="list-style-type: none"> Friday Night Live Youth adult leadership activities 	<ul style="list-style-type: none"> Increased membership in FNL Chapters, community and school-based youth-led projects 	<ul style="list-style-type: none"> Improved prevention efforts amongst youth and on school campuses 	<ul style="list-style-type: none"> Increased scope of prevention campaigns on campus and into the community 	<ul style="list-style-type: none"> FNL Participant Surveys (YD Survey) CalOMS
Increase the skills of County prevention program team members to enhance their capacity to implement effective prevention practices by ensuring each team member completes 12 CEU's per year.	Community-based process: <ul style="list-style-type: none"> Training 	<ul style="list-style-type: none"> Increased training 	<ul style="list-style-type: none"> Increased training Increased collaborations with community partners around data and evaluation 	<ul style="list-style-type: none"> Improved service provision Increased community awareness of Health Agency Prevention efforts Increased support for DAS Prevention programming 	<ul style="list-style-type: none"> Staff Evaluations Cal OMS Client Satisfaction Surveys (BH) Employee Performance Reviews (BH) Funding Increases (BH) Annual Prevention Outcomes (BH)

Collaboration with the Planning Process

In January 2017, SLOFNLP, Behavioral Health staff, and members of various prevention partnerships met and reviewed the program action areas, goals and objectives to verify that they reflected the contributing factors identified in the assessment chapter. In addition to the three AOD problem-related priority areas (high-risk drinking, marijuana use, and prescription drug misuse), goals and objectives were developed in a fourth priority area to enhance the capacity of the AOD prevention system in San Luis Obispo County. Community members, agencies, and organizations were engaged in the assessment and planning process by contributing their organization's data, completing and sharing the Local Needs Assessment Survey, and participating in meetings to review and prioritize problem areas and local capacity. Many community partners are actively engaged with the various cultures in the county, and were valuable contributors to ensuring goals, objectives, and strategies were culturally relevant.

Integrate Sustainability

The County prevention team employs a wide variety of strategies and tools to engage young people, parents, families, and community residents, including addressing:

- structure (how the program is organized and constructed)
- content (the information, skills, and strategies of the program) and
- delivery (how the program is adapted, implemented, and evaluated)

Community input has been sought in forums such as the monthly collaborative meetings and trainings, Mental Health Services Act stakeholder sessions, and annual forums, such as the Cal Poly SUAAC sessions.

Integrate Cultural Competence

County prevention interventions, including programs and policies, are created to be acceptable to and appropriate for the needs and motivations of the populations and cultures being addressed. SLOBHD Prevention programs define populations by age, sex, race, geography (neighborhood, community, or region), and institutions (school or workplace). The County's Prevention programs have built relationships and partnerships with organizations serving cultural populations often underserved in the behavioral health system, including LGBTQ, veterans, and older adults along with expanded services with the Latino population.

Chapter 4 – Implementation

Programs/Interventions

Table 4.2: Specific Intervention/Programs

Strategies (from logic model)	Specific Program/Intervention
Information Dissemination <ul style="list-style-type: none"> • Media campaigns • Presentations • Health fairs • Website 	Friday Night Live (Local-Innovative) Club Live (Local-Innovative) Community Coalitions (Local-Innovative) Student Assistance Programs (Local-Innovative) Community Outreach (Local-Innovative)
Education: <ul style="list-style-type: none"> • Classroom educational services • Parenting/family management services • Educational services for youth or adult groups 	Friday Night Live (Local-Innovative) Club Live (Local-Innovative) Community Coalitions (Local-Innovative) Student Assistance Programs (Local-Innovative) Community Outreach (Local-Innovative)
Alternatives: <ul style="list-style-type: none"> • Friday Night Live • Youth adult leadership activities 	Friday Night Live (Local-Innovative) Club Live (Local-Innovative)
Problem Identification & Referral: <ul style="list-style-type: none"> • SAP Program 	Student Assistance Programs (Local-Innovative)
Community-based process: <ul style="list-style-type: none"> • Multi-agency coordination/collaboration • Training 	Friday Night Live (Local-Innovative) Club Live (Local-Innovative) Community Coalitions (Local-Innovative) Community Outreach (Local-Innovative)
Environmental: <ul style="list-style-type: none"> • Zoning ordinance • Compliance checks • Prescription drug disposal 	Friday Night Live (Local-Innovative) Club Live (Local-Innovative) Community Coalitions (Local-Innovative)

SLOBHD has no active providers other than the County itself, and will not utilize the RFP process. All programs and interventions outlined in the SPP will be implemented by the SLOBHD Prevention Team.

Implementation Plan

Table 4.4: Implementation Plan

Strategy: Information Dissemination (ID), Education (ED), Community-Based Process (CBP), Problem ID and Referral (PIDR), Environmental (ENV), Alternatives (ALT)

IOM Category: Universal (U), Selective (S), Indicated (I)

Goal 1	Reduce underage and high risk drinking by 5% by June 2022			
Objective 1	Reduce youth social and retail access to alcohol by 5% by June 2022			
Program/Intervention: Friday Night Live, Club Live, Community Outreach, Community Coalitions				
Major Tasks	Timeline	Responsible Party	Strategy	IOM
1. Minor compliance checks	July-June	County	ENV	U

2.	Retail Alcohol Merchant Awards	March-June	County	ENV	U
3.	Implement responsible beverage service training	Sept.-February	County	ENV	U
4.	Shoulder tap operations	July-June	County	ENV	U
5.	Social host policy research, advocacy and adoption	July-June	County	ENV	U
6.	Media and marketing strategies	July-June	County	ID	U
7.	College-based risk management trainings	One per Quarter	County	CBP	U
Goal 1	Reduce underage and high risk drinking by 5% by June 2022				
Objective 2	Increase the level of youth's perceived harm associated with alcohol use by 5% by June 2022				
Program/Intervention: Friday Night Live, Club Live, Community Outreach, Community Coalitions, Student Assistance Program					
Major Tasks		Timeline	Responsible Party	Strategy	IOM
1.	School in-service trainings	August-October	County	CBP	U
2.	Friday Night Live Youth Issues Conference	Sept.-November	County	ALT	U
3.	School-based counseling for high risk youth	August-June	County	PIDR	S
4.	AOD Awareness Campaigns	July-June	County	ID	U
5.	Classroom Presentations	Sept.-May	County	ED	U
6.	Community Forums & Engagement	July-June	County	ID	U
7.	Implement FNL traffic safety campaigns	July-June	County	ALT	U

Goal 2	Reduce youth marijuana use and related problems by 3% by June 2022				
Objective 1	Reduce social and retail access to marijuana by 3% by June 2022				
Program/Intervention: Friday Night Live, Club Live, Community Coalitions					
Major Tasks		Timeline	Responsible Party	Strategy	IOM
1.	Engage youth around media portrayals of marijuana use	August-June	County	ENV	U
2.	Engage community around social norms of marijuana issues	July-June	County	ENV	U
3.	Conduct storefront surveys with youth	Feb.-April	County	ENV	U
4.	Research community laws governing paraphernalia	Sept.-December	County	ENV	U
5.	Evaluate current sales citations with local law enforcement	Sept.-December	County	ENV	U
Goal 2	Reduce youth marijuana use and related problems by 3% by June 2022				

Objective 2	Increase the level of youth's perceived harm associated with marijuana use by 3% by June 2022			
Program/Intervention: Friday Night Live, Club Live, Community Outreach, Community Coalitions, Student Assistance Program				
Major Tasks	Timeline	Responsible Party	Strategy	IOM
1. Classroom education	Sept.-May	County	ED	U
2. Conduct school in-service	August-May	County	CBP	U
3. Meet with County Office of Education to advocate for policies which increase school-based counseling for marijuana referrals (prior to suspension)	August-May	County	ENV	U

Goal 3	Reduce prescription drug misuse and related problems by 3% by June 2022.			
Objective 1	Increase school, family and community awareness of the availability of prescription drug by 5% by June 2022			
Program/Intervention: Friday Night Live, Club Live, Community Outreach, Community Coalitions				
Major Tasks	Timeline	Responsible Party	Strategy	IOM
1. Implement campus & community-based trainings	August-May	County	ED	U
2. Prescription Drug Take Back Day	October, April	County	ENV	U
Goal 3	Reduce prescription drug misuse and related problems by 3% by June 2022.			
Objective 2	Increase perception of harm of prescription misuse by 3% by June 2022			
Program/Intervention: Friday Night Live, Club Live, Community Outreach, Community Coalitions, Student Assistance Program				
Major Tasks	Timeline	Responsible Party	Strategy	IOM
1. Classroom education	Sept.-May	County	ED	U
2. Conduct school in-service	August-May	County	CBP	U
3. Meet with County Office of Education to advocate for policies which increase school-based counseling for referrals (prior to suspension)	August-May	County	ENV	U

Goal 4	Enhance System Capacity for AOD Prevention by increasing community and organization participation in evidence-based prevention programs by 5% by June 2022.			
Objective 1	Expand the participation and collaboration of schools and community organizations by adding 4 new trainings or collaborative events per year.			
Program/Intervention: Community Outreach, Community Coalitions				
Major Tasks	Timeline	Responsible Party	Strategy	IOM

1. Quarterly SUD Trainings – trends and strategies	One per Quarter	County	CBP	S
Goal 4	Enhance System Capacity for AOD Prevention by increasing community and organization participation in evidence-based prevention programs by 5% by June 2022.			
Objective 2	Expand the participation and collaboration of youth by increasing membership and participation in prevention programs by 4% by June 2022.			
Program/Intervention: Friday Night Live, Club Live, Student Assistance Program				
Major Tasks	Timeline	Responsible Party	Strategy	IOM
1. Recruitment of FNL members, youth program participants	August-June	County	ALT	U
2. Increase youth involvement in tobacco, mental health, obesity, and other issue prevention and health promotion	July-June	County	ALT	U
Goal 4	Enhance System Capacity for AOD Prevention by increasing community and organization participation in evidence-based prevention programs by 5% by June 2022.			
Objective 3	Increase the skills of County prevention program team members to enhance their capacity to implement effective prevention practices by ensuring each team member completes 12 CEU's per year.			
Program/Intervention: Friday Night Live, Club Live, Community Outreach, Community Coalitions, Student Assistance Program				
Major Tasks	Timeline	Responsible Party	Strategy	IOM
1. Engage staff in the capacity to identify and track goals, objectives, and other key indicators by providing four staff trainings per year	One per Quarter	County	CBP	U
2. Review data to identify emerging needs and priorities	December-June	County	CBP	U

The Behavioral Health Department performs as the primary prevention provider for the County, and will guide the implementation phase of the SPP. The programs and strategies chosen to address the key problem areas, goals and objectives will mainly consist of the programs currently in place. In areas where resources do not currently support the prevention practice being suggested, the Prevention Team and its community partners will work to identify potential sources of support and collaboration.

Integrate Sustainability

SLOBHD evaluates each of its Prevention programs to enhance planning and decision making, as well as keep local stakeholders informed of program efficacy. To verify that goals and objectives are being achieved, program monitoring and evaluation are a regular part of SLOBHD program implementation.

Integrate Cultural Competence

The County's Prevention programs have built relationships and partnerships with organizations serving cultural populations often underserved in the behavioral health system, including LGBTQ, veterans, and older adults along with expanded services with the Latino population. The prevention team meets regularly with community partners and stakeholders to communicate efforts and successes.

Chapter 5 – Evaluation

Evaluation Plan

Methodology

San Luis Obispo County’s SPP evaluation process will involve collecting process and outcome data using CalOMS Prevention (CalOMS Pv), surveys and questionnaires, key informant interviews, focus groups, public records, participant observation, research and other tools. Data will be collected and reviewed annually, or in some cases every 2 years (e.g. CHKS). Program service data will be collected and reported monthly, in accordance with CalOMS Pv requirements. The goal of SLOBHD’s SPF evaluation will be to measure the effectiveness and impact of the implemented strategies, programs, policies, and practices.

San Luis Obispo County Behavioral Health will track changes and trends for the selected long-term data indicators that have been identified for each action area on an annual basis. The data collected and analyzed for current and emerging issues from the following chart will also be used in future strategic planning.

Long-Term AOD Outcome Indicators and Data Sources, By Action Area	
Indicator	Data Source/Tools
High Risk Drinking and Related Problems	
Alcohol Outlet Density	Alcoholic Beverage Control (ABC)
Rate of Illegal Sales of Alcohol to Minors	SLO County ABC Officer, Local law enforcement
Adult Awareness of Teen Drinking	Town Hall Meeting Focus Group
Youth Awareness of Alcohol Risks	CA Healthy Kids Survey (CHKS), Local SAP Surveys
Youth Alcohol Use in Past 30 Days	CHKS, Local SAP Surveys
Youth Binge Drinking in Past 30 Days	CHKS, Local SAP Surveys
Alcohol Advertising Compliance	Planning Commissions, Law enforcement
Age of Onset	CHKS
Youth perception of parental/peer approval	CHKS, SAP
Youth Development (YD) Outcomes (Risk & Protective Factors)	SAP, YD Survey
Youth Alcohol-Related Arrests	Police Records, Probation
Youth Perception of Harm of Alcohol	CHKS, SAP, YD Survey
Alcohol sales and Server Compliance rates	ABC
County Alcohol Arrest Rate per 100,000	California Arrest Data, California Department of Justice, Office of the Attorney General, Criminal Justice Statistics Center
Fatalities in Alcohol-Involved Accidents, Rate per 100,000	Statewide Integrated Traffic Records System (SWITRS), California Highway Patrol (CHP)
College binge-drinking in past 30 days	CORE Survey (Cal Poly)
DUI Arrests	Law Enforcement
Campus Alcohol Violations	Cal Poly Judicial Affairs, Cuesta College
County Alcohol Arrest Rate per 100,000	California Arrest Data, California Department of Justice, Office of the Attorney General, Criminal Justice Statistics Center
Marijuana Use and Related Problems	

Long-Term AOD Outcome Indicators and Data Sources, By Action Area	
Indicator	Data Source/Tools
Community & Youth Awareness of Marijuana Risks	CHKS, Focus Group Surveys
Paraphernalia Sales Violations	Local law enforcement
County Drug Arrest Rate per 100,000	California Arrest Data, California Department of Justice, Office of the Attorney General, Criminal Justice Statistics Center
Youth 30-Day Marijuana Use	CHKS, SAP
School-based marijuana violations	School records, Probation
Prescription Drug Misuse and Abuse	
Community Awareness of Prescription Drug Misuse Risks	CHKS, Focus Group Surveys
County Drug Arrest Rate per 100,000	California Arrest Data, California Department of Justice, Office of the Attorney General, Criminal Justice Statistics Center
Youth use in past 30 days	CHKS, SAP
Youth Risk and Protective Factors	SAP, YD Survey
Crimes Associated with Prescription Drug Misuse	Law Enforcement
Prescription Drug Take Back quantities	Local health and law enforcement
Opioid prescription rates	CURES data
Prevention Capacity	
Partner and Client Satisfaction	SLOBHD surveys
Employee Performance	SLOBHD Performance Reviews
Sustainability	Health Agency Administration

Roles and Responsibilities

SLOBHD Leadership Team, including the Division Manager, Supervisor, Team Leader, and Administrative Services Officer, will lead the evaluation plan. This team will engage other staff and community partners as needed for specific data collection and analysis.

Sustainability

The evaluation process is to be ongoing so that areas needing improvement can be identified, addressed, and possibly improved as early as possible. San Luis Obispo County Behavioral Health will track changes and trends for the selected long-term data indicators that have been identified for each action area. The data collected and analyzed for current and emerging issues from the previous chart, will also be used in future strategic planning.

Reporting Evaluation Results (Dissemination Plan)

The county will keep regular communication with stakeholders throughout the evaluation process by reviewing and discussing reports, service delivery, and outcomes in Prevention Team meetings and community-based forums such as the monthly collaborative meetings and trainings, Mental Health Services Act stakeholder sessions, and Cal Poly SUAAC sessions. The evaluation process will provide relevant information to the focus populations of young people, parents, families, and community members. This information will be provided via social media, websites, and community forums. Progress on objectives will be reported annually into CalOMS/PPSUDDS, utilizing the indicators identified in the logic model.

Integrate Sustainability

The evaluation process is to be ongoing so that areas needing improvement can be identified, addressed, and possibly improved as early as possible. San Luis Obispo County Behavioral Health will track changes and trends for the selected long-term data indicators that have been identified for each action area. The data collected and analyzed for current and emerging issues from the previous chart, will also be used in future strategic planning.

Integrate Cultural Competence

The County's Prevention programs have built relationships and partnerships with organizations serving cultural populations often underserved in the behavioral health system, including youth, LGBTQ, veterans, and older adults along with expanded services with the Latino population. Demographic data is captured for all existing prevention programs providing accurate assessment to address the needs of cultures and populations. From this data, the County will compile evaluation reports that include the diversity and cultural relevance of prevention programs, and addressing how health disparities can be resolved in the future.

Attachment

Local Needs Assessment Survey

Behavioral Health Department: Substance Use Prevention Needs Assessment

We want your opinion about the prevention of alcohol and other drug use/abuse among youth and adults in our community. By filling out this survey, you will help our Department plan prevention and early intervention programs and policies to make San Luis Obispo County healthier, and safer for children, youth and families.

Generally, in this survey, "Youth" refers to adolescents, under 18; and "Adults" are those 18 or older, including college-students. This survey is anonymous.

1. In your community, how much of a problem do you believe each of the following to be?

Not a problem A minor problem A moderate problem A serious problem

Alcohol use by youth

Tobacco use by youth

Marijuana use by youth

Prescription drug/opioid misuse and abuse by youth

Other drug use (such as cocaine, inhalants, methamphetamines, or "club drugs") by youth "Binge drinking" or excessive drinking by youth

Drinking/substance using and driving by youth

Alcohol use by adults

Tobacco use by adults

Marijuana use by adults

Prescription drug/opioid misuse and abuse by adults

Other drug use (such as cocaine, inhalants, methamphetamines, or "club drugs") by adults

"Binge drinking" or excessive drinking by adults

Drinking/substance using and driving by adults

2. To what extent do drug and alcohol use contribute to the following in your community?

Not at all A little Somewhat Quite a bit A great deal

Crashes or injuries (such as automobile, boating, cycling, household accidents, etc.)

Violent crimes

Family problems

Academic failure

Domestic violence

Sexual assault

Depression or other mental health issues

Absenteeism (e.g. work, school, etc.)

Other crimes (e.g. drug dealing, burglary, vandalism, etc.)

3. Please select THREE community populations you feel are MOST in need of substance use prevention education:

Pregnant women
Middle school-aged youth
High school-aged youth
Homeless persons
Veterans
Student Athletes
Unemployed/underemployed
College students
LGBTQ Community
Parents of school-aged children
Teachers, coaches, clergy, etc.
Older adults
Doctors, nurses, therapists, etc.

4. Please select THREE addictive substances you feel are MOST important to be addressed by prevention programs in San Luis Obispo County:

Alcohol
Marijuana
Club drugs (i.e. Ecstasy, "Molly," etc.)
Cocaine
Synthetic drugs (i.e. "bath salts," K2, etc.)
Heroin/opiates
Hallucinogens (LSD, mushrooms, etc)
Inhalants
Methamphetamine
Prescription medications
Steroids
Tobacco/nicotine
Date rape drugs
Don't Know/No Opinion
Other (please specify)

5. Prevention of substance use and abuse takes many efforts. Please tell us what strategies or activities you feel are MOST important for the community of San Luis Obispo County:

Social host policies (reducing adult provision of alcohol to youth)
DUI check points/saturated patrols

Responsible beverage service training and compliance policies
 College student alcohol and drug education
 Parenting education
 Early intervention (screening/counseling) for substance use issues in schools
 Early intervention (screening/counseling) for substance use issues for adults
 Prescription drug/opioid education for the medical community
 Prescription drug/opioid education for the general public
 Marijuana education for the public
 Marijuana sales and distribution policies to limit youth access
 Alcohol sales and distribution policies (e.g. shoulder tap operations, retail compliance checks) to limit youth access
 Other drug education in schools (e.g. heroin/opiates, synthetics, ecstasy, cocaine, etc.)

6. People have different attitudes about preventing alcohol, tobacco, and other drug problems. How much do you agree or disagree with each of these statements?

Strongly disagree Disagree Neither agree nor disagree Agree Strongly agree

Schools need to be more active in dealing with alcohol, tobacco and other drug problems
 It is possible to reduce alcohol and other drug problems through prevention
 Alcohol and other drug prevention programs are a good investment because they save lives and money
 The community has the responsibility to set up prevention programs to help people avoid alcohol and other drug problems
 All alcohol advertising (billboards, magazines, etc.) should be banned
 Public service announcements are a good way to change attitudes about alcohol and other drug use
 Increased taxes on alcohol and tobacco should be used to fund prevention programs
 My community is interested in prevention to build a healthier and safer environment

7. As a community member with an opportunity to provide or support prevention programs, which of the following would you find most helpful to support your interests or work? Mark all that apply.

Information: Brochures, packets, trainings, websites, etc.
 Alternative activities: Opportunities for fun, substance-free events
 Specific training: Marijuana
 Specific training: Prescription drugs/opioids
 Specific training: alcohol, incl. overdose prevention, access issues, etc.
 Workplace/business community events and training
 Responsible beverage service training
 Access to early intervention screening and referral
 Statistics on substance use trends, information on current research
 Strategies to address cultural and risk populations (e.g. ethnic groups, LGBTQ, veterans, homeless, student athletes, etc.)
 Strategies and/or information to address co-occurring issues of mental health and addiction risk
 Other (please specify)

8. How aware are you about drug and alcohol prevention services in the county?

Not at all aware

A little aware

Fairly aware

Very aware

9. If you are aware of alcohol and drug abuse PREVENTION programs in the county...which one(s)?

Red Ribbon Week

GREAT

Friday Night Live

Medication Take Back Day

Kick Butts Day

Club Live

Kayla Peach Memorial Foundation

Other Side of Cannabis

Alcohol Beverage Control Compliance Checks

Responsible Beverage Service

Opioid Safety Coalition

Drug Free Communities 101 (college-based)

I am not aware of any of the above choices.

Other (please specify)

10. Do you live or work in San Luis Obispo County, California?

Yes

No

11. Please choose the categories that best describe your role in the county:

Resident of the County

Parent of school age children

Community Organization

Law Enforcement

Medical/Physical Health Professional

Mental Health/Substance Abuse Treatment Provider/Professional

Religious Organization Leader

Elected Official/Municipalities Official

School/Education Professional

Social Service Agency

Youth/Student Based Club or Organization member

Business Leader/Employer
Other (please specify)

12. Of the choices you checked above, which ONE are you most closely identifying with for the purpose of this survey?

Resident of the County
Parent of school age children
Community Organization
Law Enforcement
Medical/Physical Health Professional
Mental Health/Substance Abuse Treatment Provider/Professional
Religious Organization Leader
Elected Official/Municipalities Official
School/Education Professional
Social Service Agency
Youth/Student Based Club or Organization member
Business Leader/Employer
Other (please specify)

Thank you for your time and valuable input! Results of this survey will be published in the Department's Strategic Prevention Plan for 2017-2021. Please check the Department's website in July, 2017.