

Substance Abuse Prevention **PROVIDERS' ANNUAL REPORT**

Fiscal Year 2022-2023

Substance Use Prevention Services (SUPS)
August 2024

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EXECUTIVE SUMMARY

The Los Angeles County Department of Public Health, Substance Abuse Prevention & Control (SAPC) Prevention Services Division (PSD) is responsible for the planning, development, implementation, and evaluation of effective, relevant, and culturally competent substance use prevention services and initiatives. SAPC aims to reduce the burden of substance abuse by reducing the individual and community level availability and accessibility of alcohol and other drugs through implementing effective, equitable, comprehensive, and culturally and linguistically competent evidence-based prevention programming countywide.

The 2022-23 Annual Prevention Progress Report highlights key prevention strategies and initiatives implemented in Los Angeles County (LAC) for the priority substances identified by a countywide needs assessment. The report highlights accomplishments as well as adjustments made to regular programming to address programmatic challenges, many of which arose from the COVID-19 pandemic. Additionally, there are recommendations for next steps in accordance with Federal and State guidelines and the Los Angeles County's Strategic Prevention Plan¹ to reduce underage drinking and binge drinking among youth and young adults, decrease prescription drugs and over-the-counter medication misuse and abuse, reduce marijuana use by youth, reduce underage drinking and binge drinking among youth and young adults, and decrease availability of and access to methamphetamine and other illicit drugs by youth and young adults.

In 2022 there were over 3,200 AOD related overdose deaths, over 137,000 AOD related emergency department (ED) visits, and 134,000 hospitalizations. Overdose fatalities from 2023 showed a slight decrease in the overall overdose deaths, especially in the 18-25 age group. Overdose deaths were highest among Black/African American populations, and fentanyl and methamphetamine are the primary contributors to these deaths.² On average, each alcohol and other drug (AOD) related hospitalization costs over \$100,000.³ Similarly, the cost of medical care for people with substance use disorders is 2-3 times higher on average, compared to individuals without AOD issues,⁴ where local AOD amounted to an estimated \$14.8 billion in medical care costs in 2021.⁵

In light of these trends, SAPC has continued investing in localized and community-driven substance use primary prevention programs as both as cost-saving strategy and public health necessity. It is known that for every dollar invested in prevention, there is a cost savings of \$7.40-\$36 in future substance use-related health, social and criminal costs.⁶ SAPC remains committed to ensuring that LAC receives comprehensive, data-driven, and community-led primary prevention

¹ http://publichealth.lacounty.gov/sapc/prevention/PP/Strategic_Prevention_Plan_072820.pdf

² <http://publichealth.lacounty.gov/sapc/MDU/SpecialReport/Fentanyl-Overdoses-in-Los-Angeles-County.pdf>

³ <https://lacountydphsapc.inzastories.com/>

⁴ <http://publichealth.lacounty.gov/sapc/MDU/MDBrief/CostDataBrief.pdf>

⁵ <https://lacountydphsapc.inzastories.com/>

⁶ *ibid*

Substance Use Prevention Services (SUPS)

Initiatives that reduce the overall burden and risk of addiction, while protecting and promoting individual health and the health of communities.

In summary, SAPC continues to deliver relevant, evidence-based, and innovative substance use disorder (SUD) prevention services across the county. This fiscal year, an estimated 97,000 youth and adults were served as a result of community collaboration⁷ with various community-based organizations, County agencies, and educational institutions.⁸

- Services are aimed at specific populations in multiple settings, such as schools, after-school programs, and faith-based organization and match the needs, resources, and cultural requirements of community(ies) they serve.
- The network offers prevention services through culturally competent coalition-building and network development to engage all community groups in policy advocacy solutions to minimize the risks and harms associated with substance use.
- Our prevention providers' civic engagement efforts included informing the community on the public health issues and local policies, providing testimonials, engaging elected officials, and encouraging communities to be involved in conversations with their local representatives to advocate on behalf of their communities.
- Strategic educational partnerships are built to ensure positive youth development, engaging middle and high school youth as active leaders, mentors, and advocates to reduce access to and availability of alcohol and other drugs.
- Positive youth development initiatives have expanded partnerships with public health community resource centers, public parks, local universities, and libraries to broaden the reach of substance use prevention education and positive youth development opportunities to at-risk youth, utilizing evidence-based curriculum that is both developmentally and culturally relevant. Youth voices are elevated to improve awareness, outreach, and education of substance use prevention issues affecting adolescents and communities-at-large.
- Large-scale media campaigns provide countywide awareness and education regarding priority substances that most affect local communities through data-driven media campaigns that involve the most relevant forms of media, with both general and targeted messaging, and include a significant call to action.
- Evidence-based programs (EBPs) and local innovative strategies were used to address substance misuse through numerous interagency collaboratives countywide.

⁷ Reported by prevention providers, obtained through annual progress report at the end of each fiscal year.

⁸ <http://publichealth.lacounty.gov/sapc/prevention/PV/PreventionStandardsManual.pdf>



INTRODUCTION

The Los Angeles County (LAC) Department of Public Health (DPH) is committed to promoting health equity and ensuring optimal health and well-being for all our residents. Substance Abuse Prevention and Control (SAPC) is one of the five Bureaus within LAC DPH, funding over 150 prevention and treatment community-based organizations aimed at addressing alcohol and other drug-related problems in the county through prevention initiatives and community partnerships. Through the application of inclusive and equitable best practices, SAPC aspires to prevent and reduce the burden of substance use in LAC through collaboration with multiple public and private entities. Our community partners and agencies improve substance use prevention in communities by influencing the social norms and community conditions that promote substance use in select populations and communities.

About SAPC

- The Department of Public Health's Division of Substance Abuse Prevention and Control (DPH-SAPC) oversees the most diverse and comprehensive continuum of SUD services in California.

SUBSTANCE ABUSE SERVICE HELPLINE

1.844.804.7500

CENS

Client Engagement
and Navigation Services

REcenter

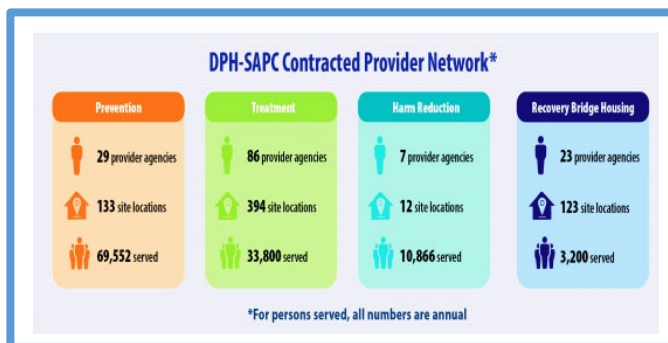
Connecting to Opportunities for Recovery and Engagement

- SAPC is committed to innovative, equitable, and quality-focused substance use **prevention, harm reduction, treatment, and recovery services.**

SAPC is committed to:
INNOVATIVE, EQUITABLE AND QUALITY-FOCUSED
SUBSTANCE USE PREVENTION, HARM REDUCTION,
TREATMENT, AND RECOVERY SERVICES.

Prevention First Treatment Works, and Recovery is Possible.

SAPC administers the operations of a network of contracted community-based agencies and County-based initiatives, utilizing the Strategic Prevention Plan (SPP) and the federal Substance Abuse and Mental Health Services Administration (SAMHSA) Strategic Prevention Framework (SPF). SAPC works collaboratively with a network of community and County partners to assess community needs and resources and develop effective and culturally responsive prevention strategies to promote community engagement and build capacity at the local level, enhancing the overall delivery of primary prevention services.



This report represents highlights, accomplishments, challenges, and opportunities encountered during the 2022-23 fiscal year. Service data were summarized based on community partner self-reports and entries into the state data reporting system. Effective interventions impacting substance use prevention have also been showcased. In general, substance use prevention services continue to address individual and community-level public health issues of drug access and availability, initiation of use, and positive and healthy activities that serve as alternatives to drug misuse and abuse among youth and adults.

OUR VISION AND MISSION

SAPC's Vision:

Healthy communities that are safe and free from substance use problems.

SAPC's Mission:

Implement effective prevention initiatives, guided by best practices and data in order to systematically reduce community substance use problems.



[SAPC Strategic Prevention Plan](#)
[SAPC Prevention Provider Manual](#)

LOS ANGELES COUNTY SUBSTANCE USE PREVENTION GOALS AND OBJECTIVES

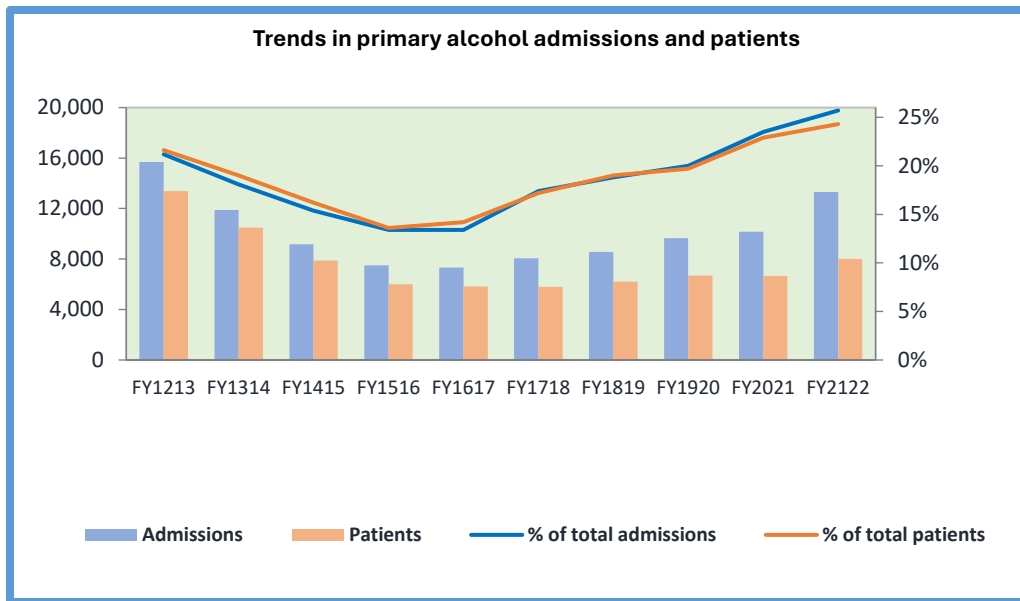
SAPC addressed the following four priority area goals and objectives through collaboration with the local community and County partners to design and implement data-driven and community-based strategies, addressing priority AOD-related issues and their associated risk factors in the target communities.

1. Decrease alcohol use among youth
2. Decrease cannabis use among youth
3. Decrease methamphetamine use among youth and adults
4. Decrease prescription drug misuse or abuse among youth and adults

DATA SNAPSHOT

Alcohol

Substance misuse has increased since the start of the COVID-19 pandemic,⁹ based on an overwhelming number of alcohol and drug related deaths, hospital admissions, and emergency visits.¹⁰ Additionally, treatment admissions for alcohol use disorder has been on the rise.¹¹



Alcohol is the most widely used drug and one of the leading causes of preventable deaths in the United States.¹² According to the 2022 LAC Community Needs Assessment (CNA)¹³, 39.2% of respondents reported current use of alcohol.

Alcohol use is highest among young adults between the ages of 18 and 25; perception of binge drinking as a health risk is lowest among this age group. Based on 2022 CNA responses, the highest binge alcohol use was reported in SPAs 5, 1, 2 and 8, at 64.9%, 49.9%, 39.7% and 39.4% respectively.¹⁴ Among those who used alcohol, the majority of their friends and family (81.4%) also used alcohol. In contrast, among non-users, only 26.7% of friends and family reported alcohol use.¹⁵

⁹ <https://nida.nih.gov/research-topics/comorbidity/covid-19-substance-use>

¹⁰ https://file.lacounty.gov/SDSInter/dhs/1103393_TSAISubstanceUseDuringtheCOVID-19Pandemic.pdf

¹¹ <http://lapublichealth.org/sapc/MDU/SpecialReport/AnnualTxReportFY2122.pdf>

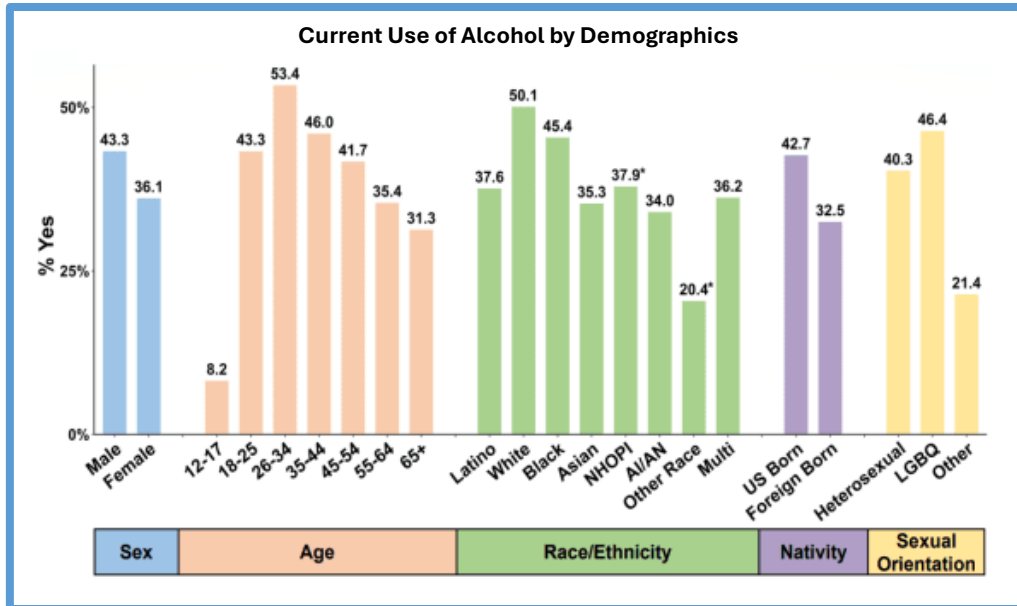
¹² <http://publichealth.lacounty.gov/sapc/MDU/SpecialReport/AODReport2020.pdf>

¹³ <http://publichealth.lacounty.gov/sapc/MDU/SpecialReport/Alcohol-Use-and-Public-Perceptions-in-Los-Angeles-County.pdf>

¹⁴ *ibid*

¹⁵ *ibid*

**Substance Use
Prevention Services
(SUPS)**



In addition to high access and availability, low perception of risk of harm has been associated with increased alcohol use¹⁶, driving communities to develop public health policies and interventions to change risk perception and curb alcohol use.

Cannabis

Cannabis use has been consistently increasing, since the legalization of cannabis in California. According to the 2022 CNA¹⁷, 36.5% of respondents reported having tried cannabis and 13.8% reported current cannabis use.¹⁸ The highest cannabis use was reported among those between the ages of 21-29 at 57.4%, followed by youth between the ages of 18-20, at 45.4%.¹⁹

Among youth (Ages 12-17), 9.2% reported current cannabis use. Across LAC, the highest current cannabis use was reported in SPA 5 (25.9%), followed by SPAs 7 (14.5%), SPA 6 and SPA 1 at 14.4% each. Mean age of initiation in this sample was 17 and over 93% reported easy access to cannabis.²⁰

The perception of risk of harm is a protective factor against substance use.²¹ Among youth (ages 12-17), the perceived risk of harm associated with once monthly and twice weekly use of marijuana increased slightly while the perceived availability of marijuana declined in the same age group.²² The increased perception of harm, coupled with the decreased perception of availability has been associated with reductions in marijuana

¹⁶ <https://www.samhsa.gov/data/sites/default/files/NSDUH099a/NSDUH099a/sr099a-risk-perception-trends.pdf>

¹⁷ <http://publichealth.lacounty.gov/sapc/MDU/SpecialReport/Marijuana-Use-and-Public-Perceptions-in-Los-Angeles-County.pdf>

¹⁸ ibid

¹⁹ ibid

²⁰ ibid

²¹ <https://www.samhsa.gov/data/sites/default/files/reports/rpt35323/NSDUHDetailedTabs2020v25/NSDUHDetailedTabs2020v25/NSDUHDetailedTabsSect3pe2020.htm>

²² ibid

use among this age group.²³ Additionally, positive youth development programs have the potential to reduce vulnerability to cannabis use.²⁴

Prescription (Rx) Drugs

Results from the 2022 CNA²⁵ indicate that 12.7% of LAC residents surveyed, reported prescription (Rx) misuse, at least once in their lifetime and 2.1% reported current Rx misuse. An estimated 33.7% of American Indian/Alaska Natives, and 27.6% of Native Hawaiians and Other Pacific Islanders (NHOPI) reported Rx misuse, at least once in their lifetime.²⁶

Among demographic categories, current misuse of Rx drugs was reportedly highest among American Indian/Alaska Natives at 15.6%, followed by Lesbian/Gay/Bisexual/Queer (LGBQ) at 4.7%, men at 3.1% and women at 1.4%.²⁷

The SPAs with highest proportion of residents with current Rx misuse were SPA 1 at 2.9%, followed by SPA 5 at 2.6% and SPA 4 at 2.5%. Median age of initiation was 19 for males and 22 for women. An estimated 40% of men and 35.7% of women misused Rx drugs before age 18. About 52.8% of men and 41.7% of women reported easy access to Rx medications without a prescription. Access was reported higher among Black/African American, at 57.7%, followed by Asians 51.9%, and Latinos by 49.5%. Within LAC, 58.9% of SPA 6, 54.7% of SPA 5 and 54.3% of SPA 1 residents reported an easy access to Rx drugs.²⁸

The most frequently misused Rx drugs include opioids at 50.3%, followed by sedatives at 40.2%, and stimulants at 23.5%.

Fentanyl

Opioid related overdose deaths, especially those involving fentanyl have experienced sharp increases since the start of the pandemic. In 2022, fentanyl accounted for 59% of all alcohol and other drug overdose deaths, surpassing methamphetamine.²⁹ Due to the unique risks associated with fentanyl exposure, overdose prevention education and naloxone distribution became a vital part of our prevention practices. In 2022, fentanyl overdose deaths increased for all race/ethnicities. The rates of fentanyl overdose deaths per 100,000 population were highest for Black/African Americans (49.5), followed by Whites (27.2), Latinos (15.0), and Asians (2.7).

²³ <https://bmcpublihealth.biomedcentral.com/articles/10.1186/s12889-021-11906-2>

²⁴ <https://www.cdc.gov/healthyyouth/safe-supportive-environments/positive-youth-development.htm>

²⁵ <http://publichealth.lacounty.gov/sapc/MDU/SpecialReport/Prescription-Misuse-and-Public-Perceptions-in-Los-Angeles-County.pdf>

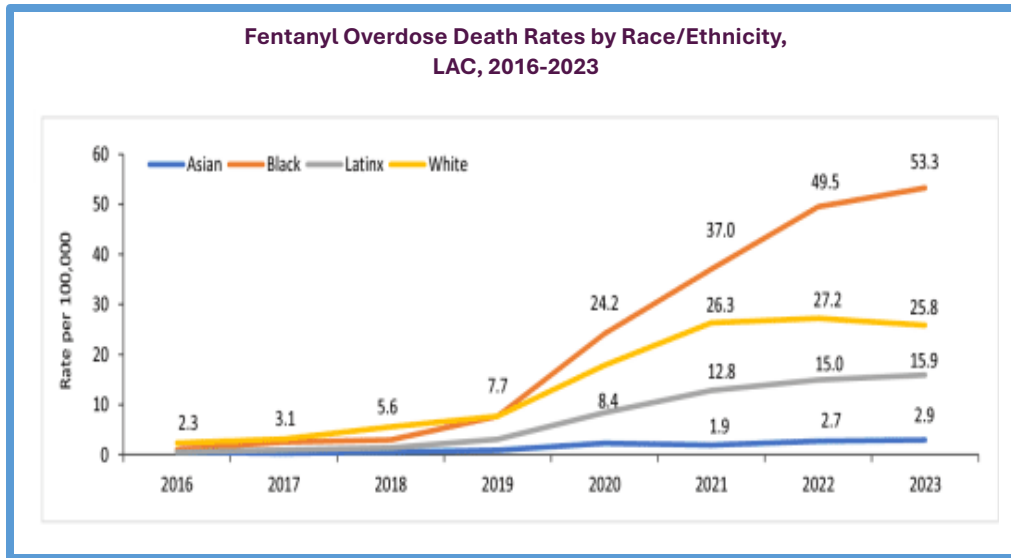
²⁶ *ibid*

²⁷ *ibid*

²⁸ <http://ph.lacounty.gov/sapc/MDU/SpecialReport/Prescription-Misuse-and-Public-Perceptions-in-Los-Angeles-County.pdf>

²⁹ <http://publichealth.lacounty.gov/sapc/MDU/SpecialReport/Fentanyl-Overdoses-in-Los-Angeles-County.pdf>

**Substance Use
Prevention Services
(SUPS)**



From 2016-2023, rates of fentanyl overdose deaths per 100,000 population in 2023 were highest for African Americans (53.3), followed by Whites (25.8), Latinxs (15.9), and then Asians (2.9) when accounting for different population sizes.³⁰



³⁰ *ibid*

**Substance Use
Prevention Services
(SUPS)**

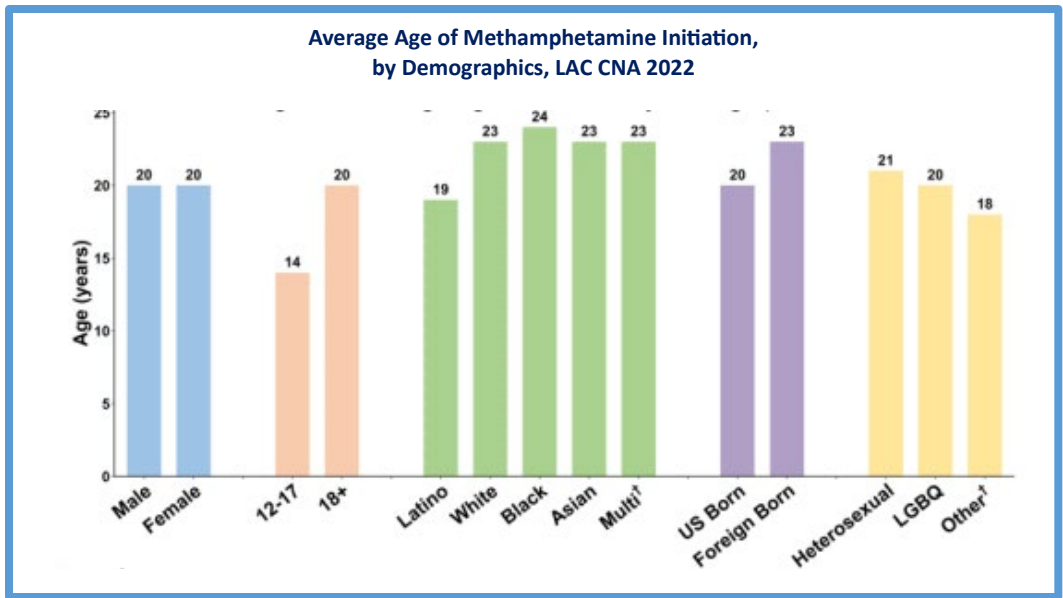
Methamphetamine

Methamphetamine (meth) has continued to be a major public health concern in LAC and the most seized drug by law enforcement agencies.³¹ Over 36% of violent crimes and 32% of property crimes have been attributed to meth.³²

According to the 2022 LAC CNA, 8% of LAC residents 12 or older reported having used meth at least once, in their lifetime, and 1.6% reported using meth within 30 days of being surveyed. Average age of meth initiation was 20; about 48% reported using meth before age 18.³³

The most common reasons reported for meth use were for fun (48%), enhanced mood (44%), increased energy (42%), and getting more done (35%). Over 41% reported easy access to meth around their neighborhood, especially from friends (47%) or dealers (32%).³⁴

Area	% Lifetime Use	% Current Use
Service Planning Area (SPA)		
SPA 1	4.6	2.0*
SPA 2	7.7	0.9*
SPA 3	8.7	1.2
SPA 4	8.6	3.5
SPA 5	8.3*	0.7*
SPA 6	8.6	2.4
SPA 7	8.7	0.4*
SPA 8	6.4	1.9*
Supervisory District (SD)		
SD 1	8.4	1.7
SD 2	8.7	2.9
SD 3	7.2	0.8*
SD 4	7.2	0.7*
SD 5	8.3	1.5



³¹ <https://insight.livestories.com/s/v2/meth-availability/121156dc-631a-4e8d-8487-b38c597dbb5e>

³² https://www.dea.gov/sites/default/files/2018-07/DIR-040-17_2017-NDTA.pdf

³³ <http://ph.lacounty.gov/sapc/MDU/SpecialReport/Methamphetamine-Use-Public-Perceptions-Los-Angeles-County.pdf>

³⁴ *ibid*

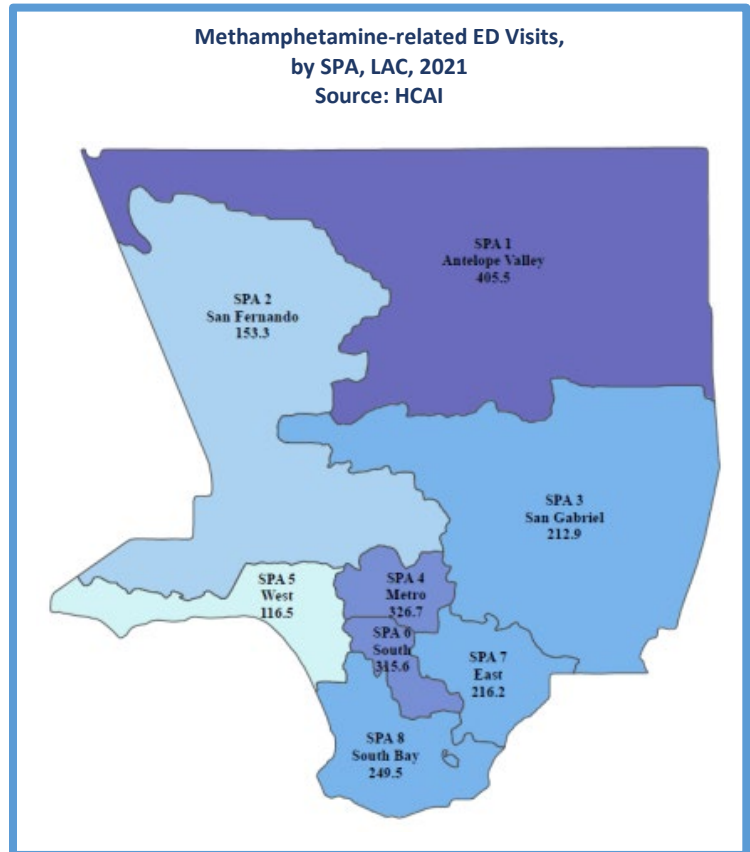
Substance Use Prevention Services (SUPS)

Within the 8 SPAs, the highest current use was reported in SPA 4 (3.5%), SPA 1 (2.0%). The highest current use of meth was reported in the 2nd supervisorial district.³⁵

In 2021, there were 23,064 meth-related ED visits and 5,817 primary meth ED visits in LAC, including meth poisoning, dependence, and abuse.³⁶ The highest rates of meth ED visits were seen in SPA 1 (405.5 per 100,000 persons), followed by SPA 4 (326.7) and SPA 8 (315.6).³⁷

The highest number of meth-involved fatal crashes occurred in SPA 2 (116), followed by SPA 3 (108), and SPA 1 (79).³⁸

An analysis of LAC drug overdose deaths by Service Planning Area revealed a noticeable increase in the number and rate of drug overdose deaths in all 8 Service Planning Areas (SPA). The highest number of deaths during 2016-2022 were seen in SPA 4 (1,592), SPA 2 (1,086) and SPA 8 (815). The highest death rates (number of deaths per 100,000 persons) were seen in SPA 4 (19.7), SPA 5 (9.8) and SPA 1 (9.1) respectively.³⁹



Highlight: 2022 Community Needs Assessment

Our 2022 Community Needs Assessment (CNA) survey tool was an adaptation of SACP's 2017 survey tool intended to guide our communitywide effort to address the current data gaps for smaller regions, specific topics, and underrepresented demographic groups related to alcohol and other drug use, perceptions of risk, and associated problems. The CNA focused on identifying disparities, potential risks, and protective factors in target communities in LAC to provide a comprehensive profile of alcohol and other drug use problems and facilitate community prevention efforts countywide. The CNA findings serve to guide service providers, stakeholders, and policymakers in making informed decisions about prioritizing problems, strategic planning, and resource allocation for implementing solutions to address the needs of target communities.

³⁵ *ibid*

³⁶ <https://lacountydphsacp.inzastories.com/meth-availability/>

³⁷ <https://lacountydphsacp.inzastories.com/meth-spa/>

³⁸ *ibid*

³⁹ <http://ph.lacounty.gov/sacp/MDU/SpecialReport/FentanylOverdosesInLosAngelesCounty.pdf?v11.17.23>

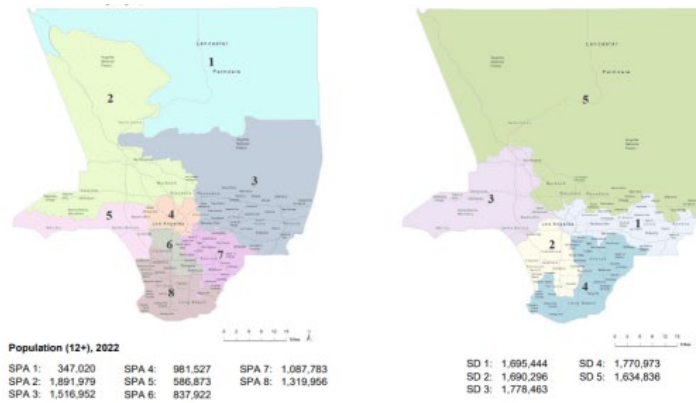
Substance Use Prevention Services (SUPS)

During this fiscal year, four CNA reports helped provide more community specific information on the patterns and risks associated with the use of [alcohol](#), [cannabis](#), [prescription drugs](#), and [methamphetamine](#), by service planning area and supervisorial district.



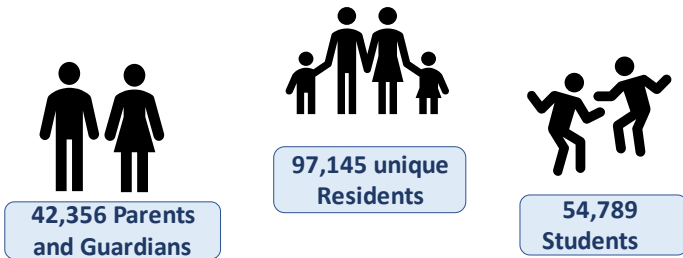
Photo courtesy of KYCC (CoPALM Coalition)

Community Needs Assessment (CNA) Surveys Collected: 9,572



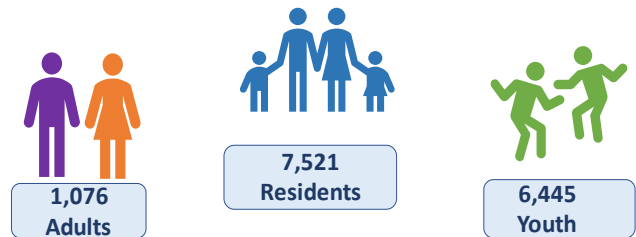
PREVENTION SERVICES

Residents Served, Los Angeles County, FY 22-23



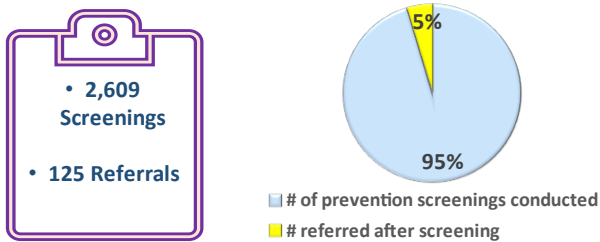
* Includes Environmental and Information Dissemination Services

Individual* Prevention Services, Los Angeles County, FY 22-23

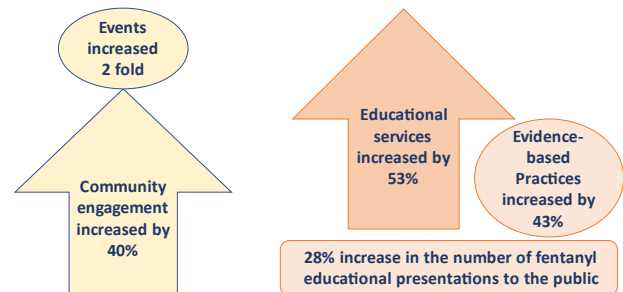


* Includes Educational, Alternative, and Screening Services Only

Substance Use Prevention Screenings and Referrals, Los Angeles County, FY 22-23

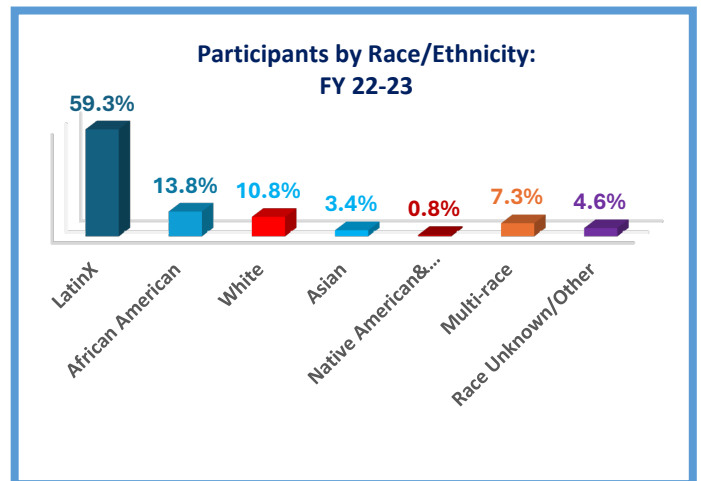
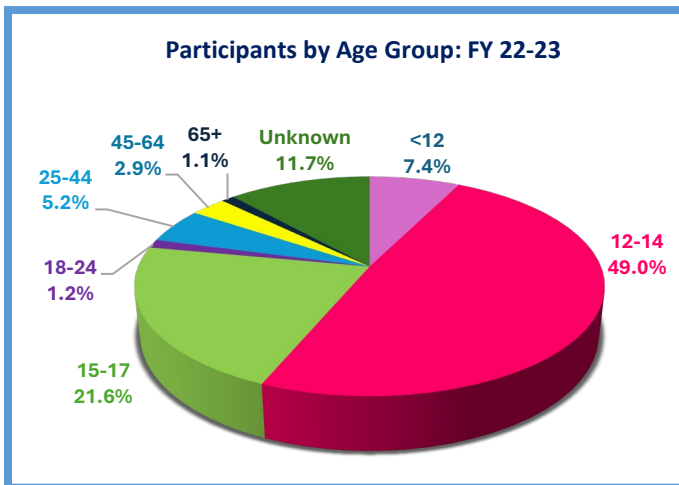


Community Engagement and Prevention Education Programs, Los Angeles County, FY 22-23



DEMOGRAPHIC DATA

During FY2022-23, SAPC-contracted prevention providers offered individualized services (i.e. educational sessions, alternative activities, and screening & referral services) to 7,510 Los Angeles County residents, including 6,445 youth. Overall, there were 3,316 males and 3,704 females. Gender was unknown for 490 residents served during this fiscal year.



Most of the participants (78%) were youth; (49%) were between the ages of 12 and 14, 21.6% were youth ages 15-17, and 7.4% were under the age of 12.

An estimated 59.3% of residents served, were reported to be of Latino ancestry. The remaining participants included 10.8% non-Latino White⁴⁰, 13.8% Black/African American³⁵, 3.4% Asian²⁷ less than 1% American Indian/Alaska Native, or Native Hawaiians/Pacific Islanders. Almost 12% were identified as multi-racial/other.

SUMMARY DATA

For the FY 22-23, An estimated 24% of our educational services used evidence-based interventions, while 76% used local innovative programs to address the educational needs of their respective communities.

⁴⁰ May include Hispanic

Evidence-Based Program Highlight: Botvin Life Skills Training (LST)

LST is an evidence-based program that has proven to be effective in increasing protective factors against substance use for middle-school and high-school students. This year, over 1,100 youth received LST in their schools or after school programs. Pre- and post-test survey results were collected and analyzed. Students had strong anti-drug attitudes regarding smoking cigarettes and alcohol consumption. Evaluation results are still pending but preliminary results show some improvement in the reported attitudes towards drugs and drug refusal skills. About 50% of both groups reported saying 'no' if someone tried to get them to use drugs. Students reported moderately high levels of relaxation. Over half 'agreed/strongly agreed' that they would do breathing exercises to cope with stress and would relax their body muscles to deal with stress and anxiety.

Local Innovative Program Highlight: Our SPOT (Social Places and Opportunities for Teens)

LA County OUR SPOT is a joint venture between DPH and the LAC Department of Parks and Recreation (DPR), providing positive youth development to teens in grades 7-12, through free recreational programs, in a safe space at 13 county parks in the unincorporated areas of LAC with higher levels of poverty. Through trauma informed care, social-emotional learning, mindfulness, and self-care, youth gain the opportunity for self-exploration, self-empowerment, and healthy development. They participate in leadership building activities, career pathway exploration, educational and recreational field trips, and gain skills to improve their emotional health and resiliency and lead healthier lives free from substance abuse and violence.

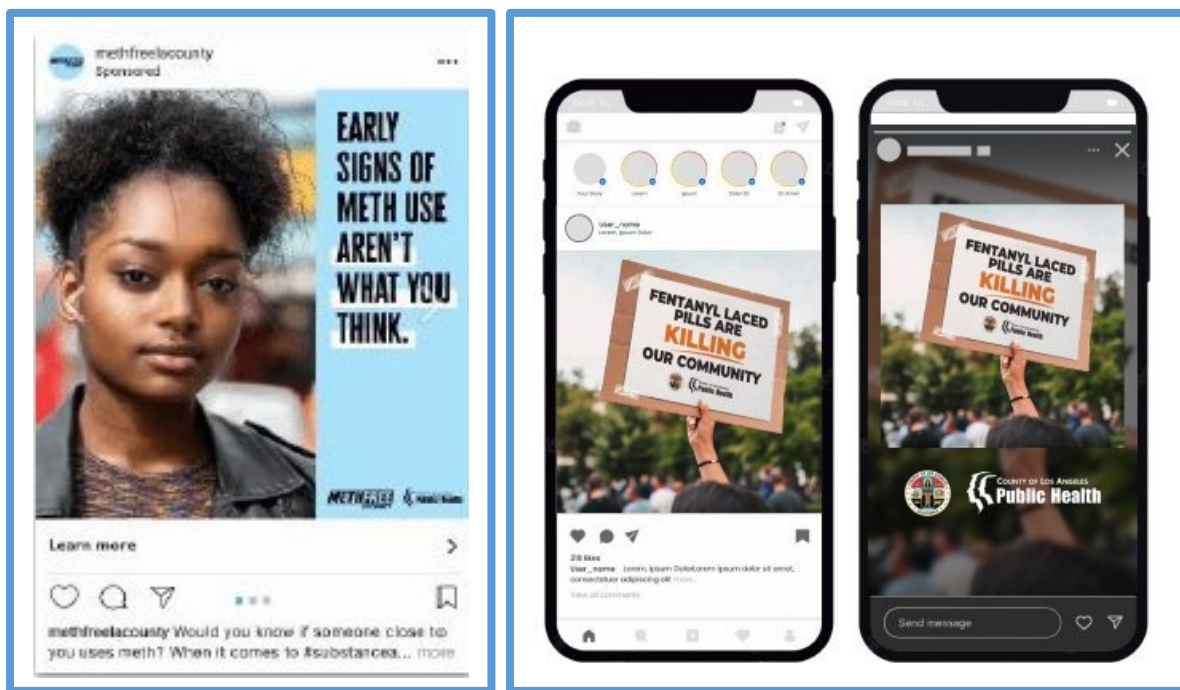
This year, OUR SPOT served close to 38,000 youth across the county. A survey taken showed that 80% of youth felt they could achieve their life goals, 77% felt rooted in their culture, 90% had strong family traditions, and 68% felt a sense of belonging in the community. Almost 80% felt they had support from friends, 72% knew where to go in the community to get help, 98% reported no substance use and no involvement with substance use indicators, and 72% reported wanting to make the world a better place to live.



Photo courtesy of LA County OUR SPOT Program

Local Innovative Program Highlight: LAC Media Campaigns and Social Media Activities

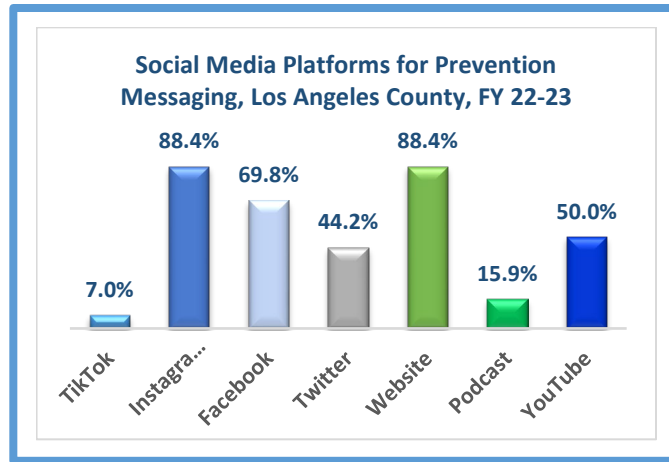
From September through November of 2022, LAC relaunched the “Meth Free LA County” campaign. The first objective was to educate those experimenting with meth to understand that the consequences apply to their personal experiences with meth. Additionally, the campaign aimed to raise awareness that meth users could be their family or friends and help them identify early signs of meth use.



LAC Fentanyl media campaign focused on the fentanyl crisis in LAC and emphasized that 7 out of 10 illegally obtained pills could be laced with fentanyl. The campaign also aimed at educating the public about what can be done in the event of an opioid overdose.

This included a large public education campaign from our provider network and a wide distribution of naloxone to reverse fentanyl related overdose incidents.

The most frequently used platform to reach out to LAC residents was Instagram (88.4%), followed by Facebook (69.8%), YouTube (51.2%), Twitter (44.2%), and TikTok (7%). Collectively, community partners shared over 4,000 posts, with 19,529 followers on Instagram, over 2,800 posts and 30,742 followers on Facebook, and over 5,100 tweets and 8,300 followers on Twitter.

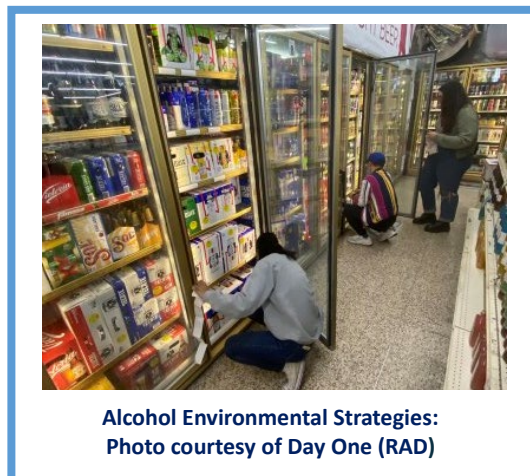


PREVENTION EFFORTS BY PRIORITY SUBSTANCE

ALCOHOL

LAC prevention providers addressed alcohol access and availability to youth through a variety of strategies. Youth and family education programs helped communities build resiliency and experience healthy alternative activities free from substance use.

Community engagement efforts aimed at educating families to raise community awareness about alcohol-related harms, discuss the social and economic factors that contribute to substance misuse, and encourage civic participation and advocacy efforts to support alcohol use prevention.



Environmental prevention strategies, such as Merchant Committed, Project Sticker Shock, Alcohol social host liability, and nuisance abatement were implemented to decrease the negative impact of alcohol on public health and safety.

To increase healthy social connection, our providers planned various activities to bring community members together to learn about the negative impacts of excessive alcohol use, while celebrating local and national events – including Red Ribbon Week, Alcohol Awareness Month, and National Impaired Driving Prevention Month, and holidays during which alcohol use is increased.

The Responsible Alcohol Delivery Project (RADP) aims to document and address youth access to alcohol via third-party delivery services originating at off-sale retail outlets to prevent youth access to alcohol and reduce citations for sales to minors. The project documents identification verification by third-party delivery service providers over time at participating off-sale retail outlets, aiming for universal compliance. The goal is for these results to lead to increased reductions in CA Alcohol Beverage Control (ABC) citations, recommendations for alcohol delivery, and address 3rd party delivery service provider policies. Transparency and accountability were integral parts of this campaign.

San Fernando Valley Partnership provided support for this project through 12 training sessions. Initial stages started in SPAs 2, 4, 7, and 8 where providers approached retailers to educate them about ramifications of not documenting proper identification at time of delivery.

Targeted messaging was sent to communities to empower them to advocate for healthier, more protective alcohol-related regulations, and stand against permissive alcohol policies and increases in alcohol outlet concentration, especially in areas where greater numbers of vulnerable populations tend to reside. These included state and local regulations, such as SB 930 to prevent increased alcohol sales after hours, SB 846 addressing alcohol delivery, SB 840 dealing with alcohol advertising in California State University campuses, as well as social host liability in select cities across the county.

Community-based providers addressed alcohol access and availability to youth through a variety of strategies that included youth and family education programs and community engagement efforts to raise awareness about alcohol-related harms and help communities build resiliency and engage in healthy alternative activities free from substance use. Additional efforts included working on the social and economic factors that contribute to substance misuse and encouraging civic participation and advocacy efforts to support alcohol use prevention.

CANNABIS

During FY 2022-2023, many of our partner agencies participated in various prevention campaigns to curb cannabis industry marketing efforts directed towards youth and educated community stakeholders on relevant cannabis related issues. Through working with their respective local authorities, prevention agencies focused on addressing unlawful cannabis activity, establishing safer retail practices, testing hemp products, and properly labeling cannabis products to prevent potential accidental poisoning incidents, emergency visits, and hospitalizations among youth.

Local coalitions collaborated with the “Reducing Access to Marijuana” (RAM) coalition, to create and promote cannabis educational materials and enhance social media messaging to engage more youth and young adults. Advocacy campaigns focused on educating the public about relevant bills, such as AB 1207 “Cannabis Candy Child Safety Act”, demanding stronger warnings on cannabis products to reduce use among vulnerable populations such as youth, young adults, pregnant, or breastfeeding women.

By informing the city officials of cannabis outlet research findings, they showed support for safer cannabis sales policies. For example, the SPA 1 coalition participated in education efforts on ordinances in select municipalities, for smoke free outdoor areas and banning flavored vaping products. The SPA 2 coalition advocated for several policies to advocate for increased regulatory efforts relating to cannabis and hemp product testing and delivery.



International TV Interview: PyS (AVMAPP)

SPA 3 partners helped support the expansion of Pasadena’s smoke free zone in multi-unit housing and shared spaces. SPA 4 prevention coalitions proposed ordinances that included prohibition of new cannabis businesses in the Skid Row neighborhood. Several agencies advocated for enhanced cannabis enforcement in Los Angeles, calling for stronger enforcement of illegal marijuana business closures.

RAM partners focused on billboard advertisements in partnership with a media company to educate local communities about the negative impacts of cannabis use on the health, productivity, and brain development of youth and young adults and safety risks associate with cannabis use.

Several agencies participated in Environmental Scans of smoke shops within 1,000 feet of youth sensitive locations that may illegally sell unregulated cannabis and hemp products to youth. Providers collaborated with local law enforcement agencies, the local tobacco prevention community partners, advocacy groups, and faith-based organizations on enacting flavored tobacco and vaping product sales ban within their communities.

Rethinking Access to Marijuana (RAM) is a countywide coalition aimed at reducing youth's access to marijuana through education and policy efforts. For the FY 22-23, RAM focused on creating an inclusive environment to encourage greater in-person participation following the pandemic.

The collaborative created and developed campaigns around AB 1097, 4/20, and safe storage of cannabis products. RAM hosted 3 Instagram live events around safe storage of cannabis edibles during Halloween to build awareness around fentanyl, safe storage, and 4/20. Agencies such as Avalon Carver and NCADD recorded a session with the Pueblo y Salud radio station on June 2023, to talk about the RAM workgroup mission/vision and the media committee efforts around cannabis.

Positive youth development (PYD) programs focus on increasing protective factors and decrease risk factors to reduce substance use among youth. Utilizing evidence-based practices, PYD initiatives have the potential to reduce substance use and vulnerability to cannabis use among youth, especially those at-risk, linking them to supportive adults and opportunities for healthy connectedness. These initiatives have shown promise across a range of health outcomes.⁴¹

OPIOIDS - PRESCRIPTION DRUGS & FENTANYL

For the past several years, our local coalitions have partnered with local law enforcement agencies, the Drug Enforcement Agency (DEA), community clinics, and service providers on the bi-annual National Take Back Day (NTBD) campaigns. These events support of promoting safe medication practices, collect unused or expired prescription drugs all in an effort to help prevent prescription drug misuse.



⁴¹ <https://www.cdc.gov/healthyyouth/safe-supportive-environments/positive-youth-development.htm>

Substance Use Prevention Services (SUPS)

Providers engage in extensive outreach to communities for the planning and execution of county-wide drug take-back events occurring on the last Saturdays in April and October.

Many agencies developed prescription drug kits including educational brochures that encouraged safe dispensing, storage, and disposal practices, pill boxes and deactivation pouches.

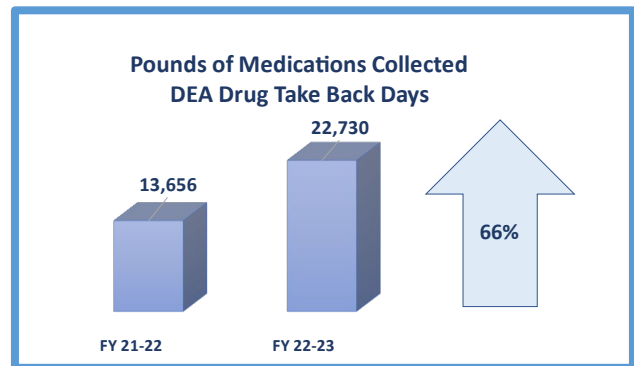
Local coalitions launched campaigns to raise awareness of the risks and harms associated with opioid misuse and abuse, informed community members about the availability of naloxone and the Sharps Disposal Program and expanded the network of take-back day collection sites.

The SPA coalitions worked with their community partners providing public comments on CA state bills, such as SB 212 to highlight the benefits of establishing safe and convenient collection and disposal options for specified drugs and home-generated sharps waste.



Several agencies submitted written public comments as well as recommendations to inform the community and local legislators about the public health impacts of proposed regulations.

There was a 66% increase in the total pounds of medications collected through these efforts during FY 22-23.



METHAMPHETAMINE

To address increases in meth related Emergency Department (ED) visits and overdose deaths, LAC's Methamphetamine Task Force was reactivated in 2021. After identifying existing methamphetamine prevention services and resources, the task force worked on increasing community awareness about the impact of meth and its burden on Los Angeles County.

Following the success of the 2021 meth campaign, LAC relaunched the *"Meth Free LA County"* campaign to continue the 2020 campaign curtailed by the COVID pandemic and to better reach Spanish speaking communities. This relaunch would continue to help educate communities about the impact of meth use and raise awareness that anyone, even our families or friends, could be using meth. The campaign also helped Angelinos identify early signs of meth use.

Participating providers worked diligently to reduce methamphetamine-related harms in their communities through community education and awareness-building strategies. Through social media platforms, local coalitions amplified methamphetamine campaign messages to increase meth awareness, augment risk reduction services, and to destigmatize those who use meth.

The "Act Now Against Meth" (ANAM) Coalition developed a comprehensive list of recommendations to better address the current meth crisis in LAC. Through public health education and extensive advocacy work, our providers worked with select cities to mitigate the burden of drug overdose deaths in LAC, reduce bloodborne infections, and foster a shift in social norms away from drug use.

Examples included extensive work with the cities of West Hollywood and Los Angeles to promote healthier social norms, especially in bars and clubs, as well as adopting a motion requiring that Los Angeles City Recreation and Parks staff make naloxone available in Skid Row area parks.

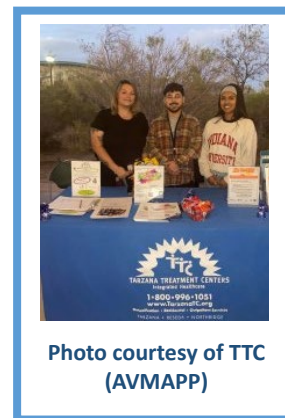
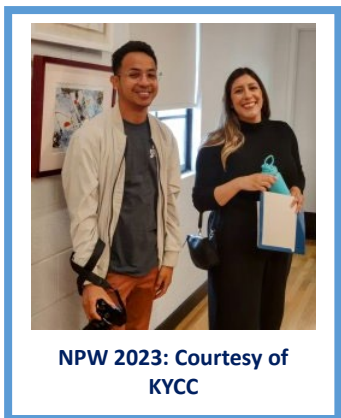


EVENTS

Prevention agencies across the county either hosted or participated in over 900 community events, distributing almost 200,000 printed materials, to engage their communities and bring awareness to unhealthy cultural norms as well as identify individual and environmental practices that lead to increased alcohol and drug use.

These included Drug Take Back events, National Prevention Week, Red Ribbon Week, Recovery Month, and Drug Overdose Prevention Day, collaborating with local parks, schools, faith-based agencies, pharmacies, and community medical providers to enhance prevention goals across the county.

Forty percent of our providers offered youth leadership or peer support programs to provide opportunities for youth to become SUD prevention ambassadors in their community and schools.



Through resource fairs and cultural celebrations, social media messaging, and advocacy efforts, our providers continued to engage and mobilize their communities to increase awareness of substance use and its negative impact on the community. To address the fentanyl overdose crisis, providers continued to inform youth and families, collaborated with local law enforcement, government, schools, and health care providers to inform residents about this issue.

CHALLENGES AND OPPORTUNITIES

SAPC's prevention community and County partners continued to cultivate existing relationships and explore new partnerships with community stakeholders, school administrators, faith-based community, and decision makers, to enhance community connections and reinforce regulations to limit availability and access to substances.

Substance Use Prevention Services (SUPS)

One of the biggest challenges identified was the overwhelming increases in the drug-related overdose deaths. Many communities felt devastated and needed additional support. Our community partners rose to the challenge and provided several community education and outreach opportunities within their communities to discuss the fentanyl threat, community concerns, and opioid overdose reversal through naloxone.

Our network implemented two collective impact projects, Responsible Alcohol Delivery Project Initiative (RADP) and Let's Make a Difference Campaign (LMD), countywide. This was the first time LAC coordinated countywide prevention initiatives across all agencies. Despite the challenges of implementing a collective program countywide, our providers successfully implemented both programs across LAC to impact alcohol and Rx drugs availability and access to youth and young adults. SAPC provided support through a contracted agency to enhance capacity building across all SPAs. Securing an MOU with local school districts to implement Life Skills Training (LST) posed another challenge for many providers. Some of the local school districts restricted access to schools based on their district's preplanned programs to address substance use prevention through their existing contracts. Our prevention providers persisted with consistent and strategic engagement efforts including engaging charter or private schools, as well as after school programs to provide LST to middle and high school youth.

Staffing turnovers and shifts in program management limited some of our community-based providers. Through recruitment and training efforts, our partners rose to the challenge and implemented their intended programs in their respective communities.

Competing priorities among youth and lack of transportation posed additional challenges. Additionally, limited access to reliable internet and devices, especially in communities experiencing higher poverty levels, lower socioeconomic standings, or those with lower literacy levels or technical acuity remained challenging. Through school-based programs and age-appropriate incentives, some of those challenges were met.

Pervasive socioeconomic issues such as poverty, unemployment, housing crisis, and homelessness have inevitably increased the overall burden of substance use/misuse countywide. Providers adjusted their program plans to increase efforts towards addressing social determinants of health pertinent to their service area. Addressing the individual and community-level risk factors for substance use, such as poverty, violence, low neighborhood attachment and community pride, favorable alcohol laws, and the social norms that encourage substance use is vital in improving community conditions that protect against substance misuse. The network of community and County partners worked diligently to increase community engagement, learning opportunities, as well as prospects for collaboration and policy support through both in person and digital platforms. Additionally, SAPC offered a robust media campaign to address methamphetamine use countywide.

RECOMMENDATIONS

This report represented a snapshot of key prevention strategies and initiatives implemented, the challenges imposed, and adjustments made to address substance use issues exacerbated by post pandemic economic and societal stressors, as well as new less limiting alcohol regulations expected to boost the state economy.

Environmental prevention approaches, including policy initiatives, can continue to be utilized as one of the most effective prevention strategies used to reduce access and availability of alcohol and other substances. Community and County partners can continue to inform and mobilize residents to advocate on behalf of their own communities for more protective regulations that reduce the availability to alcohol and other substances, empowers communities to improve their local conditions, enabling them to live healthier and more productive lives.

Recommendations on next steps are to continue engaging local populations, to promote social connection and community pride, address negative health and societal impacts of substance misuse, and increase access to supportive services for youth and families to enhance resiliency and improve overall health. Offering youth opportunities to engage and access healthier alternatives to substance misuse, can continue to inspire them to tap into their own creativity and resiliency to rise above substance use.



Thank you, prevention providers for your hard work, vision, passion, and expertise.

APPENDICES

APPENDIX A

PREVENTION FRAMEWORK

To achieve comprehensive, effective, and culturally competent AOD prevention services, SAPC uses a combination of the following three frameworks:

1. Federal Substance Abuse and Mental Health Services Administration (SAMHSA) Strategic Prevention Framework (SPF) planning process.
2. SAMHSA's Center for Substance Abuse Prevention (CSAP) prevention strategies.
3. Institute of Medicine (IOM) classification system.

The use of these frameworks is required by the California Department of Health Care Services (DHCS) and is part of the mandatory reporting requirements for primary prevention services electronic data system.

SAMHSA'S Strategic Prevention Framework (SPF)⁴²

The SPF is a five-step planning process that systematically guides the development of prevention services and includes two guiding principles to ensure cultural competency and sustainability:

- Step 1:** Assess Needs - What is the problem, and how can I learn more?
- Step 2:** Build Capacity - What do I have to work with and how can I make it stronger?
- Step 3:** Plan - What should I do and how should I do it?
- Step 4:** Implement - How can I put my plan into action?
- Step 5:** Evaluate - Is my plan going as intended and is it succeeding?

By addressing each step, prevention services would address the needs of their target communities and populations by reducing risk factors and enhancing protective factors, build community capacity and collaboration, develop goals and measurable objectives, and evaluate their efforts to ensure the prevention program achieves the intended outcomes.



⁴² Strategic Prevention Framework. (n.d.). Retrieved from: <https://www.samhsa.gov/sites/default/files/20190620-samhsa-strategic-prevention-framework-guide.pdf>

Center for Substance Abuse Prevention (CSAP) Strategies and Activities⁴³

The SAMHSA Center for Substance Abuse Prevention (CSAP) has classified prevention strategies into six major categories. An effective prevention program utilizes these strategies and activities to comprehensively address the needs of the target communities through evidence-based interventions and services.

1. **Environmental Strategy** – establishes and/or changes community standards, codes, and attitudes, thereby influencing the prevalence of alcohol and other drug use within the community through engaging a broad base of community partners, interventions, and policies.
2. **Community-Based Process Strategy** – enhances the community’s capacity to address AOD issues through organizing, planning, collaboration, coalition-building, and networking.
3. **Information Dissemination Strategy** – improves awareness and knowledge of the effects of AOD issues on communities and families through “one-way” communication with the audience, such as speaking engagements, health fairs, and distribution of print materials.
4. **Problem Identification and Referral Strategy** – identifies individuals who have infrequently used or experimented with AOD who could change their behavior through education. The intention of the screening is to determine the need for indicated prevention services, not treatment services.
5. **Education Strategy** – encourages “two-way” communication between the facilitator and participants. This strategy aims to improve life- and social skills, such as decision-making, refusal skills, and critical analysis.
6. **Alternative Strategy** – redirects individuals from potentially problematic situations and AOD use by providing constructive and healthy events/activities.

Institute of Medicine (IOM) Classification System⁴⁴

The prevention classifications are subdivided into universal, selective, and indicated categories. The IOM category is assigned by looking at the risk-level of the individual, or group, receiving the service. Federal prevention funding allows for the delivery of services for universal, selective, and indicated populations. The funding is not intended for those who need or receive AOD (ab)use treatment or recovery services.

Universal

Universal prevention targets the entire population (national, local community, school, and/or neighborhood) with messages and programs aimed at preventing or delaying the (ab)use of AOD. All members of the population share the same general risk for substance (ab)use, although the risk may vary among individuals.

⁴³ Center for Substance Abuse Prevention Strategies and CSAP Activities Definitions (Approved July 24, 2017, Updated August 17, 2017). Retrieved from: <http://www.ca-cpi.org/wp-content/uploads/2017/08/CSAP-Strategies.pdf>

⁴⁴ Center for Applied Research Solution | Fred Springer, J., & Phillips, J. (n.d.). The Institute of Medicine Framework and its Implication for the Advancement of Prevention Policy, Programs, and Practice. Retrieved from: http://ca-sdfc.org/docs/resources/SDFC_IOM_Policy.pdf

Universal prevention programs are delivered to large groups without any prior screening for substance abuse risk.

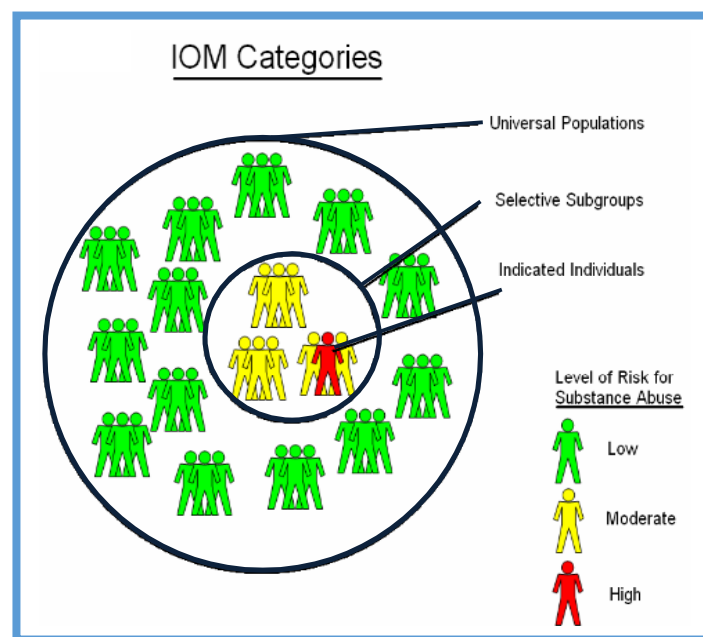
- **Universal Direct**
Interventions directly serve an identifiable group of participants but who have not been identified based on individual risk (e.g., school curriculum, afterschool program, parenting class). This also could include interventions involving ongoing or repeated contact (e.g., coalitions).
- **Universal Indirect**
Interventions supporting population-based programs and environmental strategies (e.g., establishing ATOD policies, modifying ATOD advertising practices). This may include programs and policies implemented by coalitions.

Selective

Selective prevention targets subsets of the total population at risk for substance abuse by virtue of their membership in a particular population segment. Selective prevention targets the entire subgroup, regardless of the degree of risk of any individual within the group.

Indicated

Indicated prevention is designed to prevent the onset of substance abuse in individuals who do not meet Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM-V) criteria for abuse or dependence, but who are showing early danger signs, such as failing grades and consumption of alcohol and other gateway drugs. The mission of indicated prevention is to identify individuals who are exhibiting potential early signs of substance abuse and other problem behaviors associated with substance abuse, and to target them with special programs.



APPENDIX B

**FY2022-2023 PREVENTION PROVIDER NETWORK
SUBSTANCE USE PREVENTION SERVICES CONTRACTED PROVIDERS**

SPA	Contracted Substance Use Prevention Services Providers
8	Asian American Drug Abuse Program
6	Avalon Carver Community Center
8	Behavioral Health Services, Inc. (Gardena)
4	Behavioral Health Services, Inc. (Hollywood)
8	Cambodian Association of America
1	Change Lanes
1	Child and Family Center – Palmdale
2	Child and Family Center – Santa Clarita
4	Children’s Hospital of Los Angeles
6	Community Coalition for Substance Abuse
3	Day One, Inc.
3	HealthRight 360 - Prototypes
7	Helpline Youth Counseling, Inc.
4	Institute for Public Strategies
5	Institute for Public Strategies
4	Korean American Family Services, Inc.
4	Koreatown Youth & Community Center
7	Los Angeles County Office of Education
3	NCADD of East San Gabriel and Pomona
2	NCADD of San Fernando, Inc.
3	Pacific Clinics
1	Parents Anonymous
3	Parents Anonymous
6	People Coordinated Services of Southern
2	Phoenix House of Los Angeles
3	Prototypes a Center for Innovation
1	Pueblo Y Salud, Inc. (Palmdale)
2	Pueblo Y Salud, Inc. (San Fernando)
	Rescue Agency
	San Fernando Valley Partnership, Inc.
6	Shields for Families, Inc.
4	Social Model Recovery Systems, Inc.
6	South Central Prevention Coalition
6	Special Services for Groups
1	Tarzana Treatment Center
2	Tarzana Treatment Center
4	The Wall Las Memorias Project
7	The Wall Las Memorias Project
6	Watts Health Foundation, Inc.

APPENDIX C

FY2022-2023 PREVENTION PROVIDER NETWORK SPA COALITIONS

There were many community coalitions at work, including Service Planning Area (SPA) Coalitions, neighborhood councils, and youth coalitions. Other collaboratives included youth and adult leadership groups, the Los Angeles Drug and Alcohol Policy Alliance (LA DAPA), community prevention councils, “Manos Unidos con la Esperanza para la Comunidad” (MUEC), Marijuana Public Smoking Initiative (MPSI), and Rethinking Access to Marijuana (RAM), to name a few.

SPA 1: Antelope Valley Marijuana, Alcohol, & Pharmaceutical Prevention Coalition (AVMAPP)
SPA 2: Communities in Action
SPA 3: Rethinking Alcohol and Other Drugs (RAD)
SPA 4: Coalition to Prevent Alcohol-Related Harms in LA Metro (COPALM)
SPA 5: Westside Impact Project
SPA 6: South LA Movement Prevention Coalition (SLAM)
SPA 7: South-East Community Alliance (SECA)
SPA 8: South Bay Communities Creating Change (SBC 3)



APPENDIX D

ENVIRONMENTAL PREVENTION STRATEGIES

Alcohol Delivery Project

The Alcohol Delivery Project aims to address youth access to alcohol and minimize citations issued to alcohol retailers by the California Department of Alcoholic Beverage Control (ABC) for selling alcohol to minors via third party delivery services (alcohol delivery apps). It engages and establishes working relationships with off-sale retailers to increase their understanding of the importance of responsible alcohol retailing practices to reduce youth access to alcohol while reducing retailers' ABC citations. Participating stores will utilize "We Verify ID" decals, sales counter stickers, and signs at the "point of pick-up" for alcohol deliveries. QR code decal placed on alcohol deliveries originating from participating stores, will document retailer participation and levels of 3rd party delivery driver identification verification. Alcohol delivery scan document will capture both process and outcome measures. Clerk training will increase delivery driver engagement to ensure identification verification via QR code on all alcohol deliveries.

Alcohol Restricted Use Sub-Districts (ARUS)

City motion (Council File 17-0117) instructs the Planning Department, in consultation with the LA City Attorney, to prepare a report on the feasibility of establishing a process to create Alcohol Restricted Use Sub-districts (ARUS). ARUS would allow communities and their representatives to identify vulnerable areas in city council districts where restrictions could be applied on the future issuances of off-sale or on-sale alcohol licenses. ARUS zones will protect communities and families while encouraging healthier retail options to open in the area.

Civil Social Host Liability Laws

Civil liability ordinances are designed to deter underage drinking parties. Through civil social host liability laws, adults can be held responsible for underage drinking parties held on their property, regardless of whether they directly provided alcohol to minors. To date, more than 150 cities or counties have social host liability ordinances in place. The research on this strategy is still emerging, but findings currently show that social host liability reduces alcohol-related motor vehicle crashes as well as other alcohol-related problems.⁴⁵

Community Events Policies on the Promotion, Sales and Service of Alcohol

Alcohol restrictions at community events include policies that control the availability and use of alcohol at public venues, such as concerts, street fairs and sporting events. These policies may reduce youth access and the occurrence of alcohol-related problems such as binge drinking, sales to minors, traffic crashes, vandalism, fighting, and other public disturbances.

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<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4211332/#:~:text=One%20study%20examined%20effects%20of,the%20presence%20of%20SH%20laws.>

Conditional Use Permit (CUP) Ordinances

CUPs can be used to effectively address problems of crime and violence by structuring land use to allow less density of outlets and by holding merchants accountable for operating conditions in and around their premises. The CUP is a powerful tool in regulating the availability of alcohol by requiring spacing or distance requirement between outlets, regulating proximity to sensitive land uses such as a schools, churches, parks, and residential neighborhoods, and allowing outlets only in specific areas of the city or county.

Deemed Approved Ordinance (DAO)

DAO is a nuisance abatement tool designed to address public health and safety problems created by alcohol outlets, both on-sale (bars, restaurants) and off-sale (markets, supermarkets, drugstores, etc.). It changes the legal status of existing alcohol beverage establishments, granting them “Deemed Approved” status, permitting them to operate as usual as long as they do not create a public nuisance or violate any state or local laws.

Let’s Make a Difference (LMD)

The overall purpose of the LMD program is to reduce the impact of prescription drug misuse. The program highlights how access contributes to use, the dangers of Rx misuse, the harms associated with sharing medications and how to communicate 3-core messages/behaviors. Activities include engaging pharmacies (large and small scale) and other strategic partners (medical groups, LAUSD schools/parent centers, childcare centers, and other strategic partners) to “Let’s Make a Difference” through the distribution of "safe home pledge cards" and promotion of the overall campaign to their constituents/target communities. Measuring impact/reach is done by documenting the number of participating pharmacies, organizations, schools, and potential partners, number of pledge cards collected at each location, number of Rx medications collected at DEA take back events within the geographic area of campaign and documenting increase in disposal boxes at smaller pharmacies, along with increased utilization of LAC Safe Centers within the initiative implementation areas.

Merchant Committed

The Merchant Committed campaign encourages retailers to fully adopt preventive practices as part of their business operations and encourage the city to improve its oversight of off-sale outlets through community policing and CUP administration. The goal of this strategy is to reduce underage drinking and youth access to alcohol by increasing alcoholic beverage establishment compliance.

Minor Decoy Operations

The Decoy Program allows local law enforcement agencies to use persons under 20 years of age as decoys to purchase alcoholic beverages from licensed premises. As of 10/01/04, the Department of Alcoholic Beverage Control (ABC) has used decoys to regulate businesses selling alcohol to underage individuals. The Decoy Program has been recognized as a method to attack the problems associated with the unlawful purchase and consumption of alcoholic beverages by young people.

Preventing Prescription Drug Misuse (Safe Med LA)

Safe Med LA addresses the prescription drug misuse/abuse epidemic in the county, guided by its five-year strategic plan. Safe Med LA employs a "9-6-10" approach organized into 9 Action Teams focusing on 6 priority areas with 10 objectives. SUPS are members of the Community Education Action Team they provide community education and awareness of the risk of prescription drug misuse, safe use/storage, and available resources for help with disposing their medications.

Project Sticker Shock (PSS)

PSS capitalizes on community activism, cooperative efforts, and collective responsibilities to combat underage drinking and its related problems. The project not only educates citizens, businesses, educational institutions, health organizations, law enforcement and governmental authorities on the problems of underage drinking, but also ensures a consistent message about the law exists, increasing efforts to bring about change.

Responsible Alcohol Delivery Project (RADP)

The emergence of alcohol delivery services has raised concerns about the increased accessibility and availability of alcohol to underage youth. The ease of ordering alcohol online and having it delivered to one's doorstep has created new opportunities for youth to obtain and consume alcohol, bypassing traditional age verification methods. The Responsible Alcohol Delivery Project aims to document and address youth access to alcohol via third-party delivery services originating at off-sale retail outlets. The project is shaped by three key elements, including retailer engagement, in-store signage, and documenting compliance for retail alcohol deliveries, combined to prevent youth access to alcohol and reduce citations for sales to minors.

Responsible Beverage Server (RBS)

RBS training is a community-based approach to promote public safety and to reduce risks associated with the retail alcohol environment. RBS has three essential elements: the adoption of alcohol-service policy for ABC-licensed establishments; the providing of server education and guidance; and the development of partnerships between law enforcement, local government, and community groups.

Restaurant Beverage Program (RBP)

The Restaurant Beverage Program (RBP)⁴⁶ offers qualifying sit-down restaurants, within LA City Council designated RBP-Eligible geographic areas⁴⁷, special provisions to serve alcoholic beverages, assuming they comply with 50 community friendly standards which includes limited hours of operation, outdoor seating limitations, and other noise and security requirements. RBP approval is also based on robust enforcement requirements to provide community protections, such as mandatory inspections and enforcement, to ensure that after three violations are issued within two years a restaurant would be disqualified from the program for a period of five years. The RBP eliminates the need to obtain a Conditional Use Permit (CUP), reducing cost and required processing time to obtain which significantly shortens the processing time and lowers the cost of obtaining the City's approval.

⁴⁶ Restaurant Beverage Program (RBP) | Los Angeles City Planning (lacity.org)

⁴⁷ https://planning.lacity.org/odocument/777a537e-bb22-4571-ae8f-e01f2ce838f6/RBP_City_Wide_SP.pdf

Substance Use Prevention Services (SUPS)

Retail Framework

The Retail Framework provides a gradual, eight stepwise approach that methodically documents problems at the outlets, recruits retailers to participate directly in prevention actions, mobilizes concerned community groups to act, and approaches city agencies to carry out their oversight responsibilities for off-sale alcohol outlets.

Rethinking Access to Marijuana (RAM)

The RAM Coalition was formed in 2015. The RAM Coalition educates elected officials, parents and other caregivers as well as those with relationships with young people such as teachers, coaches, and others about marijuana's effects on the developing brain of youth between the ages of 12-26.

Social Host Ordinance (SHO)

Preventing Underage Drinking Parties- Social Host Ordinances (SHO) prevent underage drinking parties by holding the host (e.g., parents or other adults) accountable for the negative alcohol related issues resulting from these parties. A social host ordinance sends the clear message to parents and other adults that it is not acceptable to give alcohol to teens.

ACKNOWLEDGEMENTS

We thank the following individuals for their contributions in preparing this report:

Stephanie Chen, LCSW, MPH
Rangell Oruga, MPH
Farimah Fiali, MS

*“The opposite of addiction is NOT sobriety.
The opposite of addiction is social connection.”*

Johann Hari