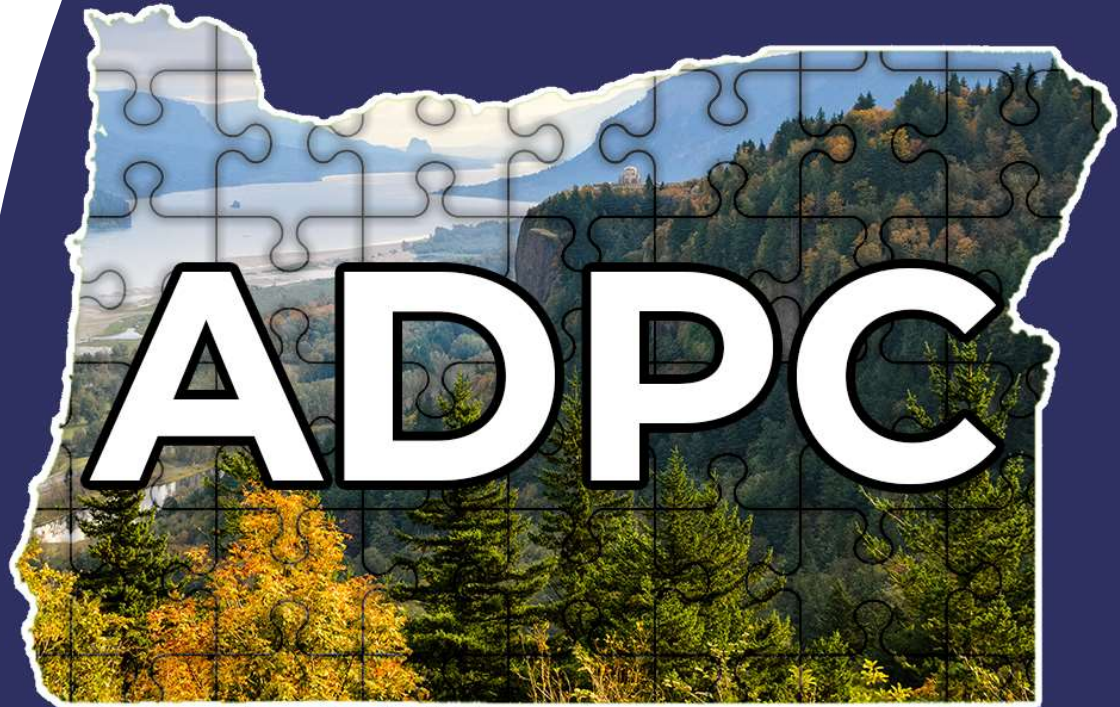


**Oregon  
Alcohol and Drug Policy  
Commission Comprehensive  
Plan Update and Discussion**

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# Comprehensive Plan Approach and Priorities

# Comprehensive Addiction, Prevention, Treatment and Recovery Plan

The Alcohol and Drug Policy Commission **shall** develop a comprehensive addiction, prevention, treatment and recovery plan for the state and make recommendations related to state, local and tribal alcohol and drug abuse prevention and treatment programs.

ORS 430.223

# Plan Requirements

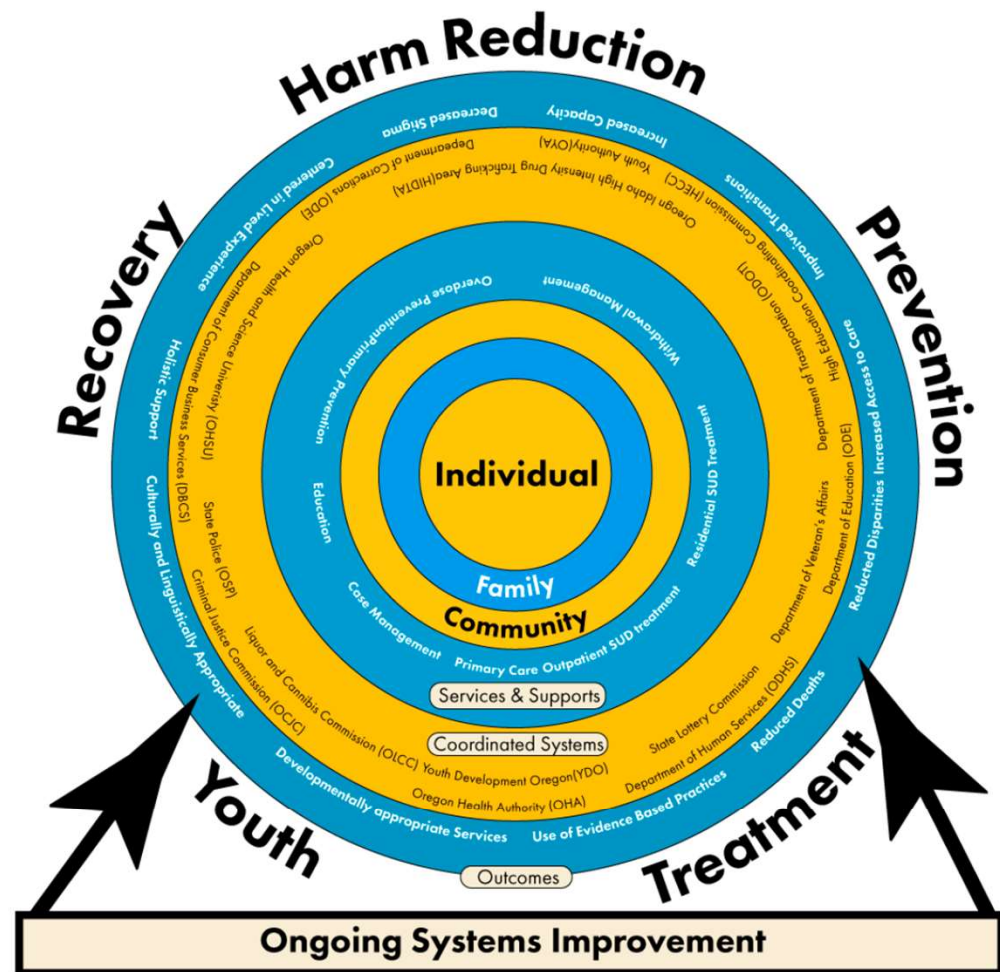
- Capacity, type and utilization of programs;
- Methods to assess the effectiveness and performance of programs;
- The best use of existing programs;
- Budget policy priorities for state agencies;
- Standards for licensing programs;
- Minimum standards for contracting for, providing and coordinating alcohol and drug abuse prevention and treatment services; and
- The most effective and efficient use of state agency resources to support programs.

ORS 430.223



# A Recovery Oriented System of Care

- is Consumer and Family-Driven
- is Timely and Responsive
- is Person-Centered
- is Effective, Equitable, and Efficient
- is Safe and Trustworthy
- maximizes use of Natural Supports and Settings



## ACHIEVES WHAT?

### REDUCES

- Substance Use
- Substance Use Disorders
- SUD related Deaths
- SUD Disparities

## EVIDENCE BASE

### SUPPORTS

- What shows this will be effective?
- What supports the implementation and sustainment of these strategies?
- Where else has this been done before?

## COMMUNITY INPUT

### ENGAGEMENT

- Is this what the community wants and needs?
- Who do we need to engage with?
- How do we best engage with them?

## STRATEGY

### PLAN

- How do we go about this?
- Are we leveraging existing information, programs, funding, etc... to accomplish this?
- Are we suggesting something new entirely?

## MEASURES

### DATA

- Can progress be measured?
- Can it be continuously monitored?
- How we will evaluate the success of these strategies?
- How will we report these outcomes?

Cross-Cutting Values

Reduces Stigma | Equity | Centers Lived Experience | Holistic Support | Evidence & Culturally Informed | Considers Transitions

# 2026-2030 ADPC Overarching Priorities:

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## Overarching Theme

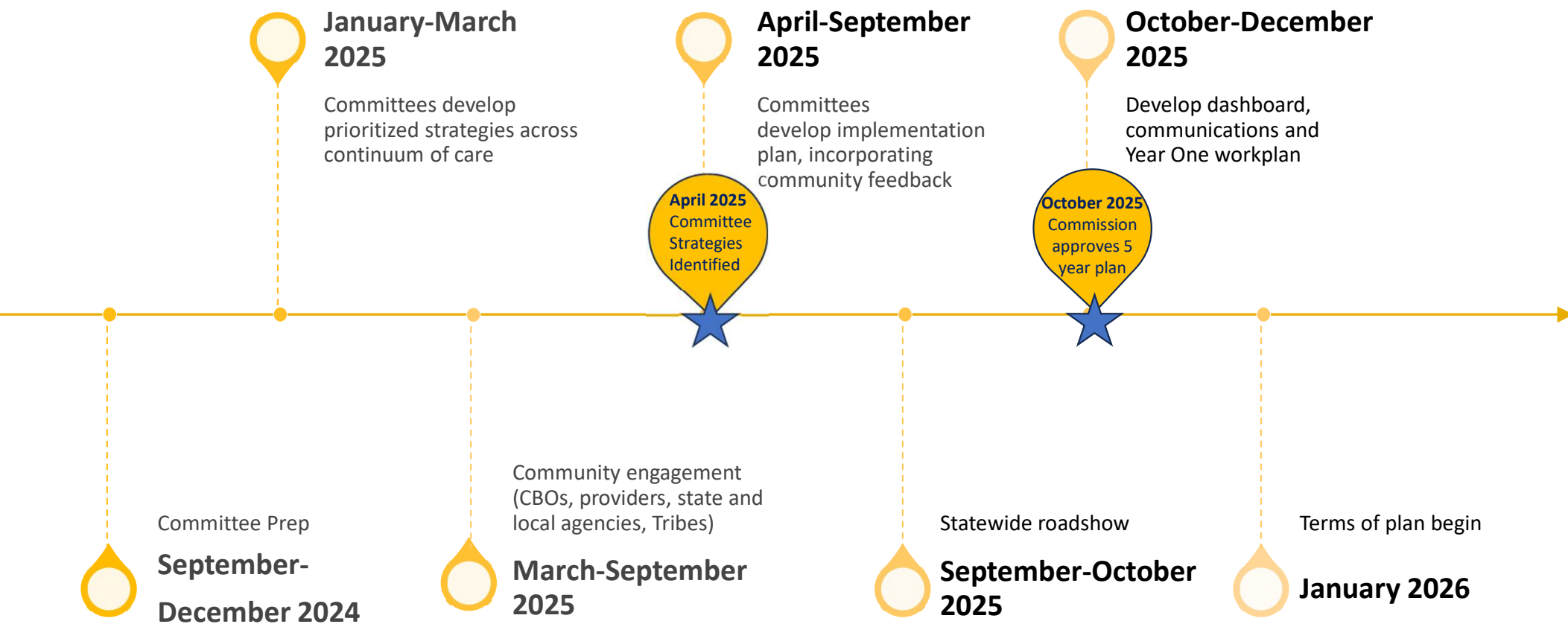
- Increase **access** across the continuum of care

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## "Big Three" Outcomes

- Reduce prevalence of substance use disorders
- Reduce substance use-related deaths
- Reduce substance use-related disparities and inequities

# Comprehensive Plan Timeline



## Committee Priorities

- 
- Harm Reduction
  - Treatment
  - Prevention
  - Recovery
  - OYAA
-

# Harm Reduction

- **Develop and fund a statewide strategy for the purchase and distribution of short-acting overdose reversal medications, such as naloxone, which will ensure access in rural areas and include education strategies to ensure proper administration and dosage during overdose emergencies.**
- **Implement a statewide drug-checking strategy that is available at the state, regional, and community levels.**
- **Expand access to safer use supplies to ensure comprehensive harm reduction services are available to all Oregonians by incentivizing existing programs to provide mobile services and encouraging community safety net providers (like FQHCs and health departments) to include safe supply services.**
- **Ensure cross-sector education, awareness, and infrastructure that promotes safer use programs, practices, and policies that welcome and support individuals who use drugs.**

# Treatment

- **Expand Equitable Access to Evidence-Based Treatment Options**
- **Ensure Timely Access to the Appropriate Level of Care at All Entry Points**
- **Facilitate Improved Transitions Throughout the Treatment and Recovery Journey**
- **Drive Quality and Accountability Across All Components of the Treatment System**

# Prevention

- **Strengthen regulatory and fiscal strategies that bolster primary prevention services**
- **Establish a Prevention Center of Excellence to expand the implementation of best practices and support the growth of the primary prevention workforce.**
- **Expand access to primary prevention activities in K-12 schools.**
- **Expand access to primary prevention programs and strategies on college campuses.**
- **Expand community-based prevention efforts focused on children, transition-aged youth/young adults, and families.**

# Recovery

- **Expand the number of Recovery Community Centers (RCCs) across Oregon to ensure equitable access through culturally diverse program offerings, irrespective of geographical constraints.**
- **Ensure adequate recovery housing, with a wide range of levels of care, is in place for Oregonians seeking support, especially for priority populations.**
- **Standardize Peer Recovery Support Services across community systems to build a skilled peer workforce and financially sustainable peer recovery services.**

# OYAA

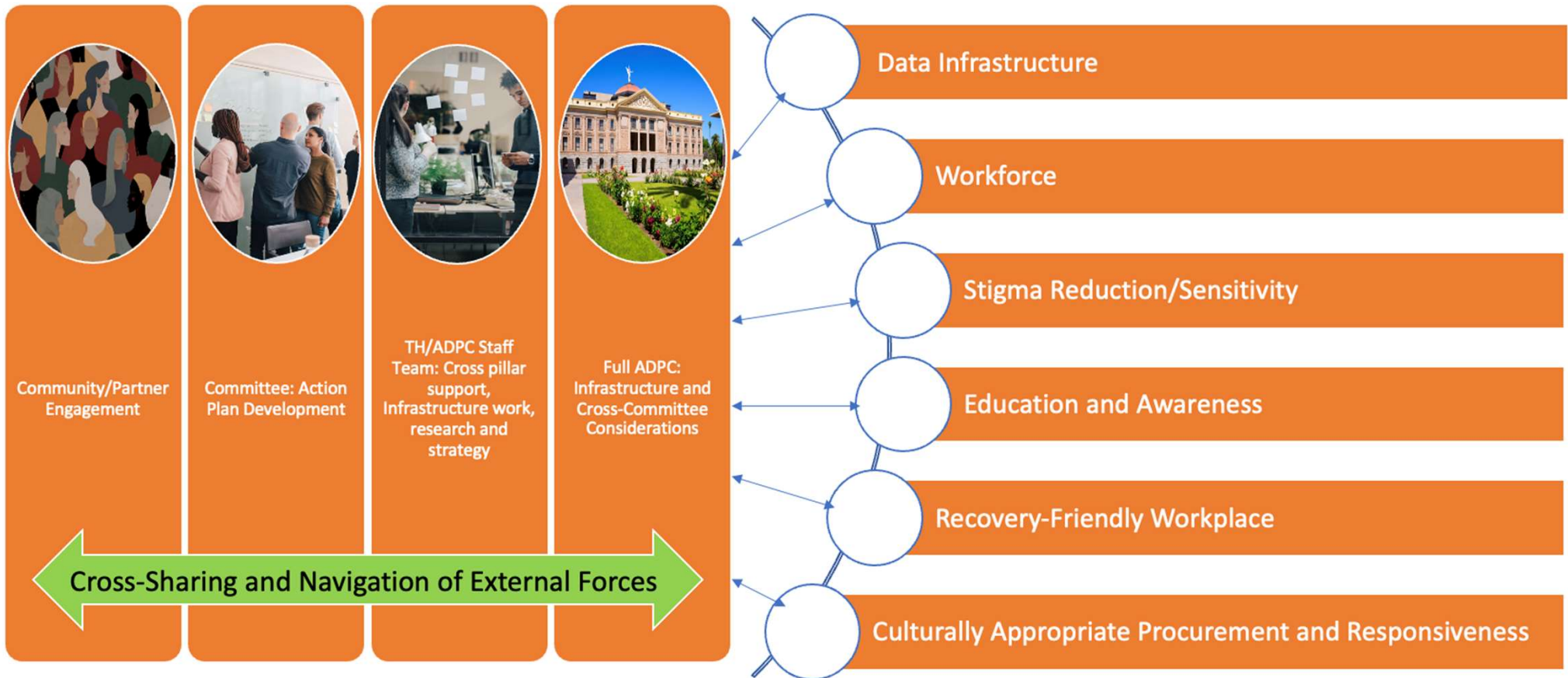
- **Legal & Carceral Settings:** Individuals in carceral settings and their families need/want access to stigma free and immediate evidence-based programming including relational support and a holistic/full continuum of co-occurring treatment and recovery supports because successful transition to the community reduces recidivism.
- **Treatment:** Youth and families with treatment needs in all regions of the State want access to affordable/no cost, confidential treatment and recovery support services that allow for optional family involvement because they want comfortability in having their whole health needs met.
- **Education Settings:** Students in K-12 and higher education need/want creative treatment options, educator training, substance education, screening, recovery supports, and compassion because we often use punishment as intervention.
- **Peer Support:** Youth and families who could benefit from ongoing peer support services need/want low-barrier access to CRM and peer services because there is a lack of trained, age appropriate, inclusive and diverse peer support specialists, programs, and drop-ins.

# OYAA

- **Youth and Family Recovery Spaces:** Youth, families and the system of providers that support them need an array of behavioral services that is on-demand, individualized, accessible, culturally/linguistically responsive, and holistic (including: peer support, community spaces, and resource navigation); because youth deserve access to spaces where they feel accepted, supported and seen. Often there are generational cycles of addiction in home and punitive practices in other institutions youth frequent.
- **Co-occurring Disorders:** Youth in Oregon that experience co-occurring SUD & Mental Health disorders need/want access to tailored services that account for individuals' personalized needs because they need to feel wanted, safe, and able to treat their diagnoses without financial, geographic, and other barriers that currently restrict access to essential healthcare.
- **Recovery Housing and Support:** Youth and families living with substance use disorder want recovery oriented and sustained housing through positive social supports in their community because they need supports that meet their diverse needs and housing status directly correlates with recovery success.

# Next Steps

# Interactive Engagement Map



# Questions to Define the How?

- What **activities, strategies or actions** fall underneath the priority?
- For each activity, strategy or action:
  - What is the role of the **committee**?
  - What is the role of the **ADPC (Full Commission and/or Staff)**?
  - What is the role of **others (state agencies, communities, other entities)**?
- What are the **fiscal realities** that need to be addressed to achieve the priority?
- What are the **regulatory actions** that need to be addressed to achieve the priority?
- What are the **metrics/measures of success** that should be monitored to track progress toward the priority?

# Tentative Commission Timeline





# Thank you!

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