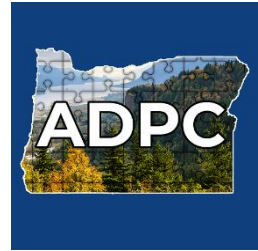


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# Oregon Alcohol and Drug Policy Commission

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# PREVENTION COMMITTEE AGENDA



**August 27, 2025**  
**10:30 AM –12:00 PM**

ZOOM Meeting link:  
<https://www.zoomgov.com/j/1619342467?pwd=a0NlcWltN2ZrWlUwd1hPMEVWSktXUT09>

Find your local number: <https://www.zoomgov.com/u/abuVBqduSe>

## **SCHEDULE**

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10:30 –10:40	Welcome	Chair Jones
10:40- 10:50	Director Updates	Director Dolph, Wes Rivers
10:50 - 11:50	<ol style="list-style-type: none"><li>1. Review Community Engagement Analysis w/r/t Prevention</li><li>2. Review Strategy Dashboard Matrix – Prevention Strategies</li></ol>	Third Horizon
11:50-12:00	Public Comment	Chair Jones

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## **ADDITIONAL INFORMATION**

**ADPC Prevention Committee's definition of Primary/Universal Prevention:** "Practice, programs, and policies designed to prevent and reduce the incidence and prevalence of alcohol and other drug use and consequent health, behavioral health, and social problems (National Academy of Medicine (NAM))."

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Note: The Committee may choose to take agenda items out of order, pull, defer or shorten presentation time of agenda item(s) to accommodate unscheduled business needs. Anyone wishing to be present for an item should arrive when the meeting begins to avoid missing an item of interest

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The meeting location is accessible to persons with disabilities. A request for an interpreter for the hearing impaired or for other accommodations for persons with disabilities should be made at least 48 hours before the meeting to: Corina Vasquez at [corina.vasquez@oha.oregon.gov](mailto:corina.vasquez@oha.oregon.gov).

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### **7.23.25 ADPC PREVENTION SUBCOMMITTEE RECAP NOTES:**

**Members Present:** Caroline Cruz, Debby Jones, Pam Pearce, Luis Pimentel, Jessica Neuwirth, Frances Hupy, Lyndi Petty, Beth Stormshak, Darin Dale, Shauna Tominey, Alexis Drakatos, Ami Muilenburg

#### **Welcome and Introduction**

Chair Debby Jones started the meeting with reading the prevention definition, welcomed everyone and called the roll.

#### **Alcohol and Drug Policy Commission Director's Update**

Annaliese Dolph provided a director's updates on commission-level activities and coordination across committees:

- Workforce development remained a key priority, with recognition of the need for ongoing pipeline development, training opportunities, and stronger support for certified prevention specialists.
- Progress updates were shared from other committees (harm reduction, recovery, treatment, OYAA), highlighting how each is approaching final recommendations and integration of prevention-related priorities.
- Emphasis was placed on alignment across all committees to ensure prevention efforts remain central in the broader system.

Annaliese reviewed legislative updates:

- HB 3321 - A key prevention-focused bill was signed into law, establishing a foundation for statewide prevention strategy. This legislation defines primary prevention, mandates assessment of financing and programs.
- Members noted that the law allows immediate progress rather than delaying implementation until the next budget cycle. The prevention committee recognized this as a milestone in elevating prevention work within state-level planning.

#### **Strategic Priorities and Planning and Higher Ed**

Discussion centered on how to position prevention strategically within the larger behavioral health system:

- Prevention was described as the 'foundation' of the system, ensuring sustainability of outcomes across treatment, recovery, and harm reduction. Members stressed the importance of measurable accountability mechanisms for prevention work.
- Integration with treatment and recovery systems was considered vital to ensure continuity and effectiveness.
- The committee explored the proposed Prevention Hub as an infrastructure investment to strengthen prevention statewide.
  - The hub will serve as a repository for best practices, training, and technical assistance.
  - Members highlighted the importance of leveraging the hub to support local implementation while maintaining consistency statewide.
  - Coordination of funding streams through the hub was identified as a strategy to reduce fragmentation and improve efficiency.
- The committee followed up on college prevention:
  - Third Horizon remarked that there may need to be additional assessment as a starting point – supported by the committee and the HUB.
  - Some members commented on the importance of sober housing options and supporting different staffing models.
  - A committee member commented: Many colleges and universities are taking intentional/dedicated steps to support students across the transition to college. OSU, for example, is launching a “Transitions” course that ALL students will be required to take moving forward that focuses on well-being, belonging, navigating university life, etc. Although the course has a week dedicated to mental health and another focused on healthy behaviors, there is no current mention in the syllabus, discussions, or assignments whatsoever related to substance use/abuse, prevention, recovery, or related resources. I see this as an opportunity not only with OSU, but likely with many other 2-year and 4-year institutions

### **Community Prevention Strategies**

Significant focus was placed on prevention strategies in communities:

- Social-emotional learning and family engagement were identified as critical elements.
- Members discussed the need for programs that extend beyond schools into neighborhoods, youth organizations, and culturally specific networks.
- Supporting local coalitions and community conversations was noted as important.
- Buy-in from the community, especially when we are trying to get more and more upstream, is difficult but also key.

- Equity in prevention services was emphasized, ensuring access for underserved communities.
- Several barriers were noted as ongoing challenges to effective prevention:
  - Workforce shortages and limited training opportunities create gaps in capacity.
  - Inconsistent policies across regions and systems lead to inequities in service delivery.
  - Short-term or fragmented funding models hinder long-term planning.
  - Gaps remain in aligning prevention initiatives with treatment and recovery systems.
- The committee talked about several possibilities in guiding these community prevention efforts:
  - Strengthen cross-agency coordination and ensure consistent prevention priorities.
  - Support workforce development through expanded training, certification pathways, and technical assistance.
  - Utilize the Prevention Hub to standardize practices, provide resources, and expand access to technical assistance.
  - Expand culturally responsive, community-driven prevention strategies.
  - Secure sustainable funding to ensure prevention efforts remain effective over the long.

### **Public Comment**

Public comment: As mentioned, a wrap-around approach may be a good starting point for community-based prevention. It would be great to see if there was a way to call out community organizations connected with caregivers, youth, and young adults as a connector to prevention wrapped in holistic support. Across the country, states make investments in afterschool/youth development as prevention strategy. For example; Kentucky currently has State Opioid Response prevention grants for substance use prevention to Boys & Girls Clubs to use Positive Action, and state general funds for curriculum geared toward mental health and substance use prevention.

Public comment (Jessica Jax): Excited to be here today. I would like to underscore the importance of ensuring the workforce capacity as a critical component of community based prevention. We need to ensure that every county has a prevention expert so that community based prevention can be implemented in a manner that is reflective of that communities culture. After that I'd highly recommend a focus on k-12 education and assuring that evidence based practices are being utilized in our school setting. Upstream. I want to be able to say that every child in Oregon has been influenced by evidence based practices. Prevention is both simple and complex. We have so much to do and very little

resources. I'd advocate for a focus in workforce and schools (coalitions are effective at this) and then work from there. If I can be a part of this continuing conversation, I'd like to.