Prevention Track

- Alcohol excise tax - price increases as one of the best interventions - indirect correlation, particularly with youth
- Oklahoma Prevention Policy Alliance (OPPA) - Alcohol excise tax - need to look at beer (see data on consumption) - Advocate for adjusting for inflation. No infrastructure necessary.
- Screening, Brief Intervention and Referral to Treatment (SBIRT) - would be helpful for Regional Prevention Centers (RPCs) as well. Referenced a study - for every 9 screenings, you prevent 1 DUI (Oregon?)
- Most people in Oklahoma are drinking within healthy limits. But approx. 2-5% are dependent and need treatment; 25% are using outside of healthy limits, are not clinically addicted, but are seeing some consequences (DUI, ED visits, etc). For this 25%, a conversation with their Primary Care Physician (PCP) will help push them back into drinking within healthy limits.
- SBIRT - Problem - an assumption by PCPs that SBIRT is just a screen and refer (e.g. to treatment) vs. having a conversation with the individual about healthy limits. SBIRT is the #4 prevention strategy in primary care. Do PCPs know about it? Find a way to plug it into their education or within the healthcare system. Most medical schools do not have a mental health/substance abuse requirement. Only 1 had a 1 hr. requirement.
- SBIRT is unfunded. Concerns with costs of implementing in the healthcare system.
- SBIRT complements what the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) is already doing. Their leadership has made it a priority. Have applied for grant funds to bolster this program.
- SBIRT - Look at other states that have an effective program and provide info to medical community. Info starts with the paramedic - info is relayed to triage nurse. Policy issue related to SBIRT - insurance laws deter hospitals from asking people about their alcohol and drug use in the Emergency Room (ER). If they know that a person was in the ER for an alcohol-related issue, the insurance company can deny the claim, known as an "alcohol exclusion law." This needs to be addressed at the state level. Google: UPPL for more info
- 2Much2Lose (2M2L) - the Enforcing Underage Drinking Laws (EUDL) funding is ending, from the Office of Juvenile Justice and Delinquency Prevention (OJJDP). ODMHSAS is trying to preserve the essential elements of the program (training, relationships with Alcohol Beverage Licensing Enforcement (ABLE) Commission). With this funding ending soon, what can we do to ensure that communities can continue to receive this law enforcement training? Train community based trainers through coalitions/2M2L chapters to provide to law enforcement agencies. Financial sponsors, involving PTAs to raise funds to continue efforts. Broaden by earmarking funds to ensure sustainability. For example, use a portion of the excise tax or another fee to keep those efforts going.
- 2M2L training has lost the community attraction. Community folks are no longer attending the training. Much of the training is based on partnerships, but lacks the community members. We need to bring this back to facilitate communication between law enforcement and prevention/community members.
- California child safety/injury prevention initiative - added license plate symbols on a vanity plate. Every time one of these is purchased, money goes into a fund. Could generate revenue for prevention.

- Value of law enforcement partnerships - sobriety checks - social media has been a game changer - particularly when they're moving (this decreases avoidance). High visibility enforcement makes the constituents feel good. Feedback from the community showing support is a tremendous benefit to the law enforcement community.
- Bring retailers to the table in discussing enforcement.
- Media can be a deterrent. Publicizing checkpoints is part of the policy. What other ways can we use the media? 2M2L students (youth voices!) doing Public Service Announcements (PSAs) on the radio for alcohol awareness month, etc.
- The media needs stories, so they will use you if you've shown to have good stories for them - build the relationships. Learn how to craft the message; promote positive messages too.
- Creating positive relationships between law enforcement and youth through doing compliance checks (underage drinking prevention)
- Party dispersals come from calls from youth who have participated in compliance checks. Building relationships.
- Responsible Beverage Sales and Service (RBSS) training - can help do some damage control for retailers who have been busted previously. This can also help promote RBSS among other retailers.
- RBSS training - RBSS needs to be a requirement for retailers - through legislation or other policy. The current system sets people up for failure due to their liability. This training needs to be integrated into training for on- and off- premise retailers. Need additional funding, tracking system - infrastructure would need to be outlined for this. Could make it mandatory for the application process.
- Place of Last Drink (POLD) data - issues with the data. A uniform system to gather the data at an immediate level (at the time of arrest). Missing the boat on a lot of data for info of where people got their last drink. It's 1 more question to ask in the process. Alcohol and Drug Substance Abuse Course (ADSAC) Assessors aren't gathering the information in a uniform way, sometimes don't ask it at all. The time when they are drunk is the best time to ask the question - they'd be much less likely to lie to law enforcement.
- POLD in real-time is crucial for RPCs. Suggestion to focus on POLD data from fatality crashes and youth offenses, first and foremost, so that we don't bog the system down. The data needs to get back to the RPCs quickly for follow up.
- Prescription (Rx) drugs - discussion surrounding drug “per se” law. Apply this law (prima fascia) law to illegal drugs. Testing industry is 10 years away from a breath test on drugs. Focused on providing Drug Recognition Expert (DRE) training.
- Suggestion to develop DUI / Wolf Pack teams (like Washington State) - they work high times/places for impaired driving and have DRE/Advanced Roadside Impaired Driving Enforcement (ARIDE) trained officers available.
- Cops in shops - change perceptions of young peoples attitudes - raise the perceptions of risk. Law enforcement is critical in creating that risk perception.
- Also, promoting policies via media and enforcement.
- Party dispersal policies are another component of this.
- 2M2L - create a more robust system for young people, creating more movement within the community. Parental/community attitudes - don't see alcohol as a "drug" like they do meth.
- Community awareness to understand the risks of alcohol. Most calls happen right after someone dies - this is when people want to jump on board. Enforcement on kids (minor in possession (MIP), etc) - it raises the awareness of both parents and kids.

- Suggestion for Schools to implement a policy - to park in the parking lot, parents had to complete parentEDU. This is available to parents in OK for free. One of the outcomes with AlcoholEDU is reduced reports of riding in a vehicle with an impaired driver. Tying these things together. Inconveniencing parents seems to aid in deterrence.
- Surveyed teens would rather ride with an impaired driver than deal with their parents. Young people aren't getting basic information on health and well-being, including substance use and abuse and the ways it affects the developing brain.
- Is there anything tied into GDL education? Include AlcoholEDU as a component?
- Excise tax revenues to prevention.

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