

Prevention Subcommittee Recommendations

Prevention Recommendation #1	Recommend to DHHS/(or whoever oversees those dollars) to double the amount of investment in primary prevention programming every two years for ages 0-24.
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This recommendation combined the following recommendation submissions:

Recommendation Submission on February 15, 2023

Survey Question	Survey Response
<p>Recommendation submitted by Prevention Subcommittee Member Debi Nadler.</p>	<p>DEA recognizes that not only reducing the quantity (supply) of drugs is essential to a safe and drug free country, but also reducing the desire (demand) for illicit drugs is a vital component to effectively reduce drug use in our Nation. For that reason, DEA created the Community Outreach Section as a critical complement to our primary law enforcement mission and included drug use prevention as one of the seven priorities in DEA’s vision:</p> <p>"Support initiatives to reduce the demand for drugs and give assistance to community coalitions and drug prevention initiatives." DEA’s Community Outreach Section provides the public with current and relevant drug information about illicit drug use, the misuse of prescription drugs, drug use trends, and the health consequences of drug use.</p> <p>The Community Outreach Section also develops drug information brochures, drug fact sheets, pamphlets, and parent/teacher drug education guides to assist the community in identifying drug use and finding help.</p> <p>Another major component of the Community Outreach Section is collaboration with various drug use prevention partners. These partners include other federal agencies, national and regional prevention organizations, law enforcement organizations, community coalitions, fraternal and civic organizations, youth-serving organizations, state local governments, and schools.</p>

Survey Question	Survey Response
<p>Please describe your justification/background information for this recommendation.</p>	<p>Nevada used to have DEA 360- it is no longer. Now the DEA has started a Community Outreach Program which is active in @15 states. California is one of those. I attended their family summit in November and was amazed at the outreach they are providing. They DEA’s Community Outreach strategy is to develop and disseminate effective drug information for youth, parents, caregivers, and educators, and to increase the public’s awareness about the dangers associated with using drugs.</p> <p>There are three major concepts of drug use prevention research at the core of this strategy: Parents and teens alike need to know that the brain continues to develop to age 25. In particular, the frontal cortex, which carries out mental processes such as thinking, decision making, and judgment, is not fully developed until that age; therefore, it’s vitally important that youth and young adults refrain from drug use as this use will affect brain development.</p> <p>When youth and young adults perceive that drug use is harmful and risky, drug use dramatically declines. The longer youth and young adults delay drug use, addiction and/or substance use disorders are significantly reduced.</p>
<p>Please include any associated research or links for your recommendation.</p>	<p>https://www.dea.gov/engage/operation-engage-southern-california</p>
<p>Please select AB374 Section 10 Requirement(s) that have been assigned to the Response Subcommittee that aligns with your recommendation. Please select all that apply.</p>	<p>(a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids and stimulants, and identify ways to enhance those efforts through coordination and collaboration.</p> <p>(j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders.</p>

SURG Prevention Subcommittee and Harm Reduction Recommendations August 2023

Survey Question	Survey Response
Please select the AB374 Section 10 Requirement(s) that are cross-cutting elements assigned to all three subcommittees that aligns with your recommendation. Please select all that apply.	
If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.	My recommendation does not focus on a special population.
Please describe the Action Step aligned with your recommendation.	Other (please specify): Not sure
Is this a short-term or long-term recommendation?	Long-term (2+ years)
If your recommendation requires a fiscal note, please approximate the amount.	Unsure
On a scale of 1-3, please rate the urgency of your recommendation.	3
On a scale of 1-3, please rate the impact of your recommendation.	3
On a scale of 1-3, please rate the current capacity to implement your recommendation.	2
Please list who you would like to present on this recommendation.	Presentation was made on this during the May 15 subcommittee meeting from Ruth Morales, Community Outreach Specialist from DEA

Recommendation Submission on May 25, 2023

Survey Question	Survey Response
Recommendation submitted by Prevention Subcommittee Member Debi Nadler.	Dare. Revamped version of the old Dare. They are nationwide. We have a Nevada rep.
Please describe your justification/background information for this recommendation.	I have been working with Parent Action Network and SAM. Dr Kevin Sabet. They highly recommend this program.
Please include any associated research or links for your recommendation.	https://dare.org/

Survey Question	Survey Response
<p>Please select AB374 Section 10 Requirement(s) that have been assigned to the Response Subcommittee that aligns with your recommendation. Please select all that apply.</p>	<p>(a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids and stimulants, and identify ways to enhance those efforts through coordination and collaboration.</p> <p>(j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders.</p>
<p>Please select the AB374 Section 10 Requirement(s) that are cross-cutting elements assigned to all three subcommittees that aligns with your recommendation. Please select all that apply.</p>	<p>(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder; (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses.</p>
<p>If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.</p>	<p>My recommendation does not focus on a special population.</p>
<p>Please describe the Action Step aligned with your recommendation.</p>	<p>Expenditure of Opioid Settlement Funds</p>
<p>Is this a short-term or long-term recommendation?</p>	<p>Unsure</p>
<p>If your recommendation requires a fiscal note, please approximate the amount.</p>	<p>Unsure</p>
<p>On a scale of 1-3, please rate the urgency of your recommendation.</p>	<p>3</p>
<p>On a scale of 1-3, please rate the impact of your recommendation.</p>	<p>3</p>

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Survey Question	Survey Response
On a scale of 1-3, please rate the current capacity to implement your recommendation.	2
Please list who you would like to present on this recommendation.	Dennis Osborne, 775-696-3153, Regional Director

Recommendation Submission on June 1, 2023

Survey Question	Survey Response
Recommendation submitted by Prevention Subcommittee Member Debi Nadler.	Northstarcare - A wonderful approach to harm reduction. A program that encompasses all from nutrition to mental health science and compassion. Going to homes for a year.
Please describe your justification/background information for this recommendation.	Dr Amanda Wilson. She is actually working with Patrick Kennedy.
Please include any associated research or links for your recommendation.	www.northstarcare.com
Please select AB374 Section 10 Requirement(s) that have been assigned to the Response Subcommittee that aligns with your recommendation. Please select all that apply.	(a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids and stimulants, and identify ways to enhance those efforts through coordination and collaboration. (j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders.

Survey Question	Survey Response
<p>Please select the AB374 Section 10 Requirement(s) that are cross-cutting elements assigned to all three subcommittees that aligns with your recommendation. Please select all that apply.</p>	<p>(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder; (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses.</p> <p>(c) Assess and evaluate existing pathways to treatment and recovery for persons with substance use disorders, including, without limitation, such persons who are members of special populations.</p> <p>(h) Examine qualitative and quantitative data to understand the risk factors that contribute to substance use and the rates of substance use and substance use disorders, focusing on special populations.</p> <p>(q) Study, evaluate and make recommendations to the Department of Health and Human Services concerning the use of the money described in section 10.5 of this act to address substance use disorders, with a focus on: (1) The use of the money described in subsections 1, 2 and 3 of section 10.5 of this act to supplement rather than supplant existing state or local spending; (2) The use of the money described in section 10.5 of this act to support programs that use evidence-based interventions; (3) The use of the money described in section 10.5 of this act to support programs for the prevention of substance use disorders in youth; (4) The use of the money described in section 10.5 of this act to improve racial equity; and (5) Reporting by state and local agencies to the public concerning the funding of programs to address substance misuse and substance use disorders.</p>

SURG Prevention Subcommittee and Harm Reduction Recommendations August 2023

Survey Question	Survey Response
If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.	My recommendation does not focus on a special population.
Please describe the Action Step aligned with your recommendation.	Expenditure of Opioid Settlement Funds
Is this a short-term or long-term recommendation?	Long-term (2+ years)
If your recommendation requires a fiscal note, please approximate the amount.	Unsure
On a scale of 1-3, please rate the urgency of your recommendation.	3
On a scale of 1-3, please rate the impact of your recommendation.	3
On a scale of 1-3, please rate the current capacity to implement your recommendation.	3
Please list who you would like to present on this recommendation.	Dr Amanda Wilson 413-221-6113

Prevention Recommendation #2	Allocate tobacco control and prevention funding using local lead agencies model to reach \$2 per capita recommended funding using a combination of funding sources (e.g., cigarette tax, other tobacco tax, Juul settlement, master settlement agreement, future vaping settlements, other tobacco related settlements, etc.).
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The following recommendation submissions informed this recommendation or have been submitted to revise and/or provide additional information:

Recommendation Submission on July 21, 2023

Survey Question	Survey Response
Recommendation submitted by Prevention Subcommittee member Jessica Johnson.	Allocate tobacco control and prevention funding using local lead agencies model to reach \$2 per capita recommended funding using a combination of funding sources (e.g., cigarette tax, other tobacco tax, Juul settlement, master settlement agreement, future vaping settlements, other tobacco related settlements, etc.)
Please describe your justification/background information for this recommendation.	<p>This funding recommendation was recommended and supported by the Nevada Tobacco Control & Smoke-free Coalition. With the \$2 per capita support, this brings total to \$6.2 million for tobacco control and prevention statewide in Nevada. This would move Nevada's national ranking for tobacco control and prevention funding to 24th instead of its current position at 47th in the nation. CDC recommends states fund tobacco control and prevention at \$30 to mitigate morbidity and mortality.</p> <p>Other relevant background information -</p> <ul style="list-style-type: none"> - 1 in 6 Nevada teens use electronic vapor products. - This is important because we know that tobacco use is the number 1 cause of preventable illness and death in the United States. - Tobacco kills more than 480,000 people annually. More than alcohol, car accidents, illegal drugs, murders, suicides and HIV/AIDS - COMBINED. - Use of electronic cigarettes often lead to co-use or commercial tobacco use. - Prevention is key. 90% of adult smokers started before the age 18. <p>Nevada’s Youth Vaping Prevalence Rate:</p>

Survey Question	Survey Response
	<p>- Current ever tried rate for high schoolers 36.7% (2021)</p> <p>- Current ever tried rate for middle schoolers 12.6% (2021)</p> <p>- Current past 30 days user high school 17.6% (2021)</p> <p>- Current past 30 day user middle school 13.4% (2021)</p> <p>(programs were implemented in high schools across Nevada for vaping prevention and demonstrated a reduction on the YRBS between 2019 - 2021 for all groups except middle school 30-day use (group that was not the focus of the intervention)).</p> <p>In 2023, Youth Vaping Prevention Funding was Eliminated</p> <p>Nevada Tobacco Revenue</p> <p>The overall total of \$231+ Million from Cigarette Taxes, Other Tobacco Taxes and Settlement Funding is broken down below to demonstrate how much is allocated for tobacco control and prevention.</p> <ul style="list-style-type: none"> - \$145.2 million of Cigarette Taxes / \$0 for tobacco control and prevention - \$30.8 million of Other Tobacco Taxes / \$0 for tobacco control and prevention - \$14.6 million Juul Settlement / \$0 for tobacco control and prevention - \$41 million Master Settlement Funding / \$950,000 for tobacco control and prevention <p>This equals .004% allocated in Nevada to Tobacco Control and Prevention efforts.</p> <p>To reiterate:</p> <p>CDC Recommendation for Nevada Tobacco Control and Prevention is \$30mil.</p> <p>This ranks Nevada currently as 47th in the country for Tobacco Control and Prevention funding.</p> <p>From earlier submission: According to the CDC, 2.55 million U.S. middle and high school students reported current (past 30-day) e-cigarette use in 2022, which includes 14.1% of high school students and 3.3% of middle school students. Nearly 85% of those youth used flavored e-cigarettes, and more than half used disposable e-cigarettes. In Nevada,</p>

Survey Question	Survey Response
	funds for youth vaping prevention have been reduced in 2023.
<p>Please include any associated research or links for your recommendation.</p>	<ul style="list-style-type: none"> • Nevada YRBS Data https://www.unr.edu/public-health/research-activities/nevada-youth-risk-behavior-survey • CDC Tobacco Funding Recommendations https://www.cdc.gov/tobacco/stateandcommunity/tobacco-control/program-funding/index.htm • CDC Tobacco Control Best Practices https://www.cdc.gov/tobacco/stateandcommunity/guides/index.htm • Nevada Legislature 2023 Session • From earlier submission: https://www.cdc.gov/media/releases/2022/p1007-e-cigarette-use.html
<p>Please select AB374 Section 10 Requirement(s) that have been assigned to the Response Subcommittee that aligns with your recommendation. Please select all that apply.</p>	<p>(a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids and stimulants, and identify ways to enhance those efforts through coordination and collaboration.</p> <p>(j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders.</p>
<p>Please select the AB374 Section 10 Requirement(s) that are cross-cutting elements assigned to all three subcommittees that aligns with your recommendation. Please select all that apply.</p>	<p>(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder; (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses.</p>

SURG Prevention Subcommittee and Harm Reduction Recommendations August 2023

Survey Question	
If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.	a. Veterans, elderly persons, and youth d. Lesbian, gay, bisexual, transgender and questioning persons f. Children who are involved with the child welfare system g. Other populations disproportionately impacted by substance use disorders
Please describe the Action Step aligned with your recommendation.	Other (please specify): Identifying funding sources alternative to FRN that can support these statewide programs
Is this a short-term or long-term recommendation?	Unsure
If your recommendation requires a fiscal note, please approximate the amount.	Estimated fiscal note amount: 6.2 million
On a scale of 1-3, please rate the urgency of your recommendation.	3
On a scale of 1-3, please rate the impact of your recommendation.	3
On a scale of 1-3, please rate the current capacity to implement your recommendation.	3
Please list who you would like to present on this recommendation.	Updated information is from presentation received on 7/17

Recommendation Submission on April 14, 2023

Survey Question	Survey Response
Recommendation submitted by Prevention Subcommittee member Jessica Johnson.	Increase support for youth vaping prevention.
Please describe your justification/background information for this recommendation.	According to the CDC, 2.55 million U.S. middle and high school students reported current (past 30-day) e-cigarette use in 2022, which includes 14.1% of high school students and 3.3% of middle school students. Nearly 85% of those youth used flavored e-cigarettes, and more than half used disposable e-cigarettes. In Nevada, funds for youth vaping prevention have been reduced in 2023.

Survey Question	Survey Response
<p>Please include any associated research or links for your recommendation.</p>	<p>https://www.cdc.gov/media/releases/2022/p1007-e-cigarette-use.html</p>
<p>Please select AB374 Section 10 Requirement(s) that have been assigned to the Response Subcommittee that aligns with your recommendation. Please select all that apply.</p>	<p>(a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids and stimulants, and identify ways to enhance those efforts through coordination and collaboration. (g) Make recommendations to entities including, without limitation, the State Board of Pharmacy, professional licensing boards that license practitioners, other than veterinarians, the State Board of Health, the Division, the Governor and the Legislature, to ensure that controlled substances are appropriately prescribed in accordance with the provisions of NRS 639.2391 to 639.23916, inclusive. (j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders.</p>
<p>Please select the AB374 Section 10 Requirement(s) that are cross-cutting elements assigned to all three subcommittees that aligns with your recommendation. Please select all that apply.</p>	<p>(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder; (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses.</p>
<p>If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.</p>	<p>a. Veterans, elderly persons and youth f. Children who are involved with the child welfare system g. Other populations disproportionately impacted by substance use disorders</p>

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Survey Question	Survey Response
Please describe the Action Step aligned with your recommendation.	Bill Draft Request (BDR) Other (please specify): Review for expenditure of other funding types
Is this a short-term or long-term recommendation?	Unsure
If your recommendation requires a fiscal note, please approximate the amount.	Unsure
On a scale of 1-3, please rate the urgency of your recommendation.	3
On a scale of 1-3, please rate the impact of your recommendation.	3
On a scale of 1-3, please rate the current capacity to implement your recommendation.	3
Please list who you would like to present on this recommendation.	Presentation scheduled for July 17 meeting from Malcolm Ahlo from SNHD

Prevention Recommendation #3	Recommendation to the DHHS (Office of Analytics/or the appropriate entity) to create a data dashboard or other type of regularly updated report on alcohol outlet, tobacco outlet, and cannabis outlets density.
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The following recommendation submissions informed this recommendation or have been submitted to revise and/or provide additional information:

Recommendation Submission on July 21, 2023

Survey Question	Survey Response
Recommendation submitted by Prevention Subcommittee member Jessica Johnson.	Recommend to the DHHS (Office of Analytics/or the appropriate entity) to create a data dashboard or other type of regularly updated report on alcohol outlet, tobacco outlet, and cannabis outlets density.
Please describe your justification/background information for this recommendation.	(this is a suggested wording update and expansion to current SURG Prevention Recommendation item #3) This wording expansion supports the initial proposal for alcohol outlet density maps and expands tracking to other substance outlets in Nevada
Please include any associated research or links for your recommendation.	
Please select AB374 Section 10 Requirement(s) that have been assigned to the Response Subcommittee that aligns with your recommendation. Please select all that apply.	(g) Make recommendations to entities including, without limitation, the State Board of Pharmacy, professional licensing boards that license practitioners, other than veterinarians, the State Board of Health, the Division, the Governor and the Legislature, to ensure that controlled substances are appropriately prescribed in accordance with the provisions of NRS 639.2391 to 639.23916, inclusive.
Please select the AB374 Section 10 Requirement(s) that are cross-cutting elements assigned to all three subcommittees that aligns with your recommendation. Please select all that apply.	

Survey Question	Survey Response
If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.	g. Other populations disproportionately impacted by substance use disorders
Please describe the Action Step aligned with your recommendation.	Other (please specify): DHHS data recommendation
Is this a short-term or long-term recommendation?	Short-term (Under 2 years)
If your recommendation requires a fiscal note, please approximate the amount.	No fiscal note
On a scale of 1-3, please rate the urgency of your recommendation.	2
On a scale of 1-3, please rate the impact of your recommendation.	2
On a scale of 1-3, please rate the current capacity to implement your recommendation.	3
Please list who you would like to present on this recommendation.	This is just an update in wording. We have already received a presentation on this topic.

Recommendation Submission on May 30, 2023

Survey Question	Survey Response
Recommendation submitted by Prevention Subcommittee member Jessica Johnson.	Create one or more recommendations regarding alcohol outlet density regulations, such as: create a statewide report on alcohol outlet density and associated outcomes, form state liquor control board to create statewide regulations regarding access, create guidelines on alcohol outlets including limiting advertising happy hour specials, and "all you can drink" promotions, ensure alcohol advertisement is not targeted children/youth under 21, regulating new alcohol outlets near areas of recreation for children, including schools.

Survey Question	Survey Response
<p>Please describe your justification/background information for this recommendation.</p>	<p>Recommendations provided by subject matter expert testimony from the Statewide Coalition Partnership.</p>
<p>Please include any associated research or links for your recommendation.</p>	<p>CDC Guidance for Measuring Alcohol Outlet Density: https://www.cdc.gov/alcohol/pdfs/cdc-guide-for-measuring-alcohol-outlet-density.pdf</p> <p>Literature review on outcomes related to alcohol outlet density: https://www.ncbi.nlm.nih.gov/books/NBK350757/</p> <p>Summary from County Health Rankings on outcomes: https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/alcohol-outlet-density-restrictions</p> <p>Resources for how to measure alcohol outlet density: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7263305/</p>
<p>Please select AB374 Section 10 Requirement(s) that have been assigned to the Response Subcommittee that aligns with your recommendation. Please select all that apply.</p>	<p>(a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids and stimulants, and identify ways to enhance those efforts through coordination and collaboration.</p> <p>(g) Make recommendations to entities including, without limitation, the State Board of Pharmacy, professional licensing boards that license practitioners, other than veterinarians, the State Board of Health, the Division, the Governor and the Legislature, to ensure that controlled substances are appropriately prescribed in accordance with the provisions of NRS 639.2391 to 639.23916, inclusive.</p> <p>(j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders.</p>

Survey Question	Survey Response
<p>Please select the AB374 Section 10 Requirement(s) that are cross-cutting elements assigned to all three subcommittees that aligns with your recommendation. Please select all that apply.</p>	<p>(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder; (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses.</p> <p>(h) Examine qualitative and quantitative data to understand the risk factors that contribute to substance use and the rates of substance use and substance use disorders, focusing on special populations.</p>
<p>If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.</p>	<p>a. Veterans, elderly persons and youth b. Persons who are incarcerated, persons who have committed nonviolent crimes primarily driven by a substance use disorder and other persons involved in the criminal justice or juvenile systems c. Pregnant women and the parents of dependent children d. Lesbian, gay, bisexual, transgender and questioning persons e. People who inject drugs; (as revised) f. Children who are involved with the child welfare system g. Other populations disproportionately impacted by substance use disorders</p>
<p>Please describe the Action Step aligned with your recommendation.</p>	<p>Regulatory or Licensing Board Other (please specify): Depending on what is created above one of these is likely</p>
<p>Is this a short-term or long-term recommendation?</p>	<p>Long-term (2+ years)</p>
<p>If your recommendation requires a fiscal note, please approximate the amount.</p>	<p>No fiscal note</p>
<p>On a scale of 1-3, please rate the urgency of your recommendation.</p>	<p>2</p>

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Survey Question	Survey Response
On a scale of 1-3, please rate the impact of your recommendation.	3
On a scale of 1-3, please rate the current capacity to implement your recommendation.	2
Please list who you would like to present on this recommendation.	This presentation already happened at the May SURG Prevention Subcommittee meeting.

Harm Reduction Recommendations

Harm Reduction Recommendation #1	Pilot and evaluate the use of the “Bad Batch” App services in one behavioral health region. Rigorously evaluate the impact and reach of the app to determine effectiveness and next steps for potential expansion.
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This recommendation was informed by the following Harm Reduction recommendation submissions from March 2023:

Survey Question	Survey Response
Recommendation submitted by SURG Committee member Lisa Lee	Bad batch application for people who use drugs (PWUDs) and people who work in harm reduction to enter data (positive tests, overdoses) and receive bad batch push notifications.
Please describe your justification/background information for this recommendation.	Two high school students are working on a bad batch app for their service learning project that will allow PWUDs to enter data about deadly drugs and receive life saving notifications. It is being modeled on the SOAR app from Ohio.
Please include any associated research or links for your recommendation.	https://thesoarinitiative.org/the-soar-app/
Please select the AB374 Section 10 Requirement(s) that align with your Harm Reduction recommendation. Please select all that apply.	(i) Develop strategies for local, state and federal law enforcement and public health agencies to respond to and prevent overdoses and plans for implementing those strategies.
If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.	a. Veterans, elderly persons and youth c. Pregnant women and the parents of dependent children d. Lesbian, gay, bisexual, transgender and questioning persons e. People who inject drugs; (as revised)
Please describe the Action Step aligned with your recommendation.	Expenditure of Opioid Settlement Funds

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Survey Question	Survey Response
Is this a short-term or long-term recommendation?	Long-term (2+ years)
If your recommendation requires a fiscal note, please approximate the amount.	No fiscal note
On a scale of 1-3, please rate the urgency of your recommendation.	3
On a scale of 1-3, please rate the impact of your recommendation.	3
On a scale of 1-3, please rate the current capacity to implement your recommendation.	3

Harm Reduction Recommendation #2	<p>Establish a statewide initiative for community drug checking that incorporates qualitative and quantitative drug checking and includes the following parameters:</p> <ul style="list-style-type: none"> • Work with harm reduction community to identify partners/ locations and provide guidance and training. • Start all sites with mail-based testing while piloting on-site drug checking in a subset of early adopters to refine implementation needs. • Standardize the data collection, entry, testing, mailing, analysis, reporting as a best practice. Make this as transparent of a process as possible. • Articulate principles and plans for what will happen to the data.
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This recommendation was in part workshopped from the following submissions:

Prevention Subcommittee Recommendation Submission on May 18, 2023

Survey Question	Survey Response
Recommendation submitted by Prevention Subcommittee member Erik Schoen	N/A
If you do not have a recommendation at this time, is there a speaker you are interested in hearing from or an evidence-based program you are interested in learning more about to provide you with the information you need to create a recommendation? If so, please provide information on the speaker or the program.	I am very interested in getting accurate drug-testing resources as far into the communities as possible for two reasons. One, surveillance of trends in the overall drug supply; and two, as an "early warning" tool for folks to be able to utilize prior to using drugs from a particular batch. From our last presentation, it sounds like the technology is still not where we need it to be -- but it would be nice if we could raise the flag on the importance of this somehow, if anyone has ideas?

Survey Question	Survey Response
<p>If there are any recommendations from the 2022 Annual Report put forth by this subcommittee that you would like to consider for further development for potential inclusion in the 2023 Annual Report, please share the recommendation(s) and any additional details that should be considered (such as a status update, what you would like to add or emphasize, suggestions to further operationalize the language, etc.).</p>	<p>Honestly, I think we need to look at ALL of them and decide which ones no longer need to be followed up on or continued. My hunch is that we need to keep most of them on "the radar" as they are longer-term, developmental goals that will take (in most cases) years before we realize anything approaching "success."</p>

Harm Reduction recommendation submission:

Survey Question	Survey Response
<p>Recommendation submitted by SURG committee member Lisa Lee.</p>	<p>Quantitative drug checking services for people who use drugs (PWUDs).</p>
<p>Please describe your justification/background information for this recommendation.</p>	<p>Currently, PWUDs in Nevada lack broad access to quantitative drug checking services, which has been shown to prevent overdoses and change drug using behavior.</p>
<p>Please include any associated research or links for your recommendation.</p>	<ul style="list-style-type: none"> • Borden, S. A., Saatchi, A., Vandergrift, G. W., Palaty, J., Lysyshyn, M., & Gill, C. G. (2022). A new quantitative drug checking technology for harm reduction: Pilot study in Vancouver, Canada using paper spray mass spectrometry. <i>Drug and Alcohol Review</i>, 41(2), 410-418. https://doi.org/10.1111/dar.13370 • Bowles, J. M., McDonald, K., Maghsoudi, N., Thompson, H., Stefan, C., Beriault, D. R., ... & Werb, D. (2021). Xylazine detected in unregulated opioids and drug administration equipment in Toronto, Canada: clinical and social implications. <i>Harm reduction journal</i>, 18(1), 1-6. https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-021-00546-9 • Scott, Ian A., and Russ J. Scott. "Pill testing at music festivals: is it evidence-based harm reduction?" <i>Internal Medicine Journal</i> 50, no. 4 (2020): 395-402. https://doi.org/10.1111/imj.14742

Survey Question	Survey Response
	<ul style="list-style-type: none"> Vandergrift, G. W., & Gill, C. G. (2019). Paper spray mass spectrometry: a new drug checking tool for harm reduction in the opioid overdose crisis. <i>Journal of Mass Spectrometry</i>, 54(9), 729-737. https://doi.org/10.1002/jms.4431
<p>Please select the AB374 Section 10 Requirement(s) that align with your Harm Reduction recommendation. Please select all that apply.</p>	<p>(a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids and stimulants, and identify ways to enhance those efforts through coordination and collaboration.</p> <p>(h) Examine qualitative and quantitative data to understand the risk factors that contribute to substance use and the rates of substance use and substance use disorders, focusing on special populations.</p> <p>(i) Develop strategies for local, state and federal law enforcement and public health agencies to respond to and prevent overdoses and plans for implementing those strategies.</p> <p>(q) Study, evaluate and make recommendations to the Department of Health and Human Services concerning the use of the money described in section 10.5 of this act to address substance use disorders, with a focus on: (1) The use of the money described in subsections 1, 2 and 3 of section 10.5 of this act to supplement rather than supplant existing state or local spending; (2) The use of the money described in section 10.5 of this act to support programs that use evidence-based interventions; (3) The use of the money described in section 10.5 of this act to support programs for the prevention of substance use disorders in youth; (4) The use of the money described in section 10.5 of this act to improve racial equity; and (5) Reporting by state and local agencies to the public concerning the funding of programs to address substance misuse and substance use disorders.</p>
<p>If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.</p>	<p>a. Veterans, elderly persons, and youth</p> <p>c. Pregnant women and the parents of dependent children</p> <p>d. Lesbian, gay, bisexual, transgender and questioning persons</p>

SURG Prevention Subcommittee and Harm Reduction Recommendations August 2023

Survey Question	Survey Response
	e. People who inject drugs; (as revised) g. Other populations disproportionately impacted by substance use disorders
Please describe the Action Step aligned with your recommendation.	Expenditure of Opioid Settlement Funds
Is this a short-term or long-term recommendation?	Long-term (2+ years)
If your recommendation requires a fiscal note, please approximate the amount.	Unsure
On a scale of 1-3, please rate the urgency of your recommendation.	3
On a scale of 1-3, please rate the impact of your recommendation.	2
On a scale of 1-3, please rate the current capacity to implement your recommendation.	2

Harm Reduction recommendation submission:

Survey Question	Survey Response
Recommendation submitted by SURG committee member Jessica Johnson	Expand opportunities for drug-checking for syringe services programs and other programs that serve individuals who use drugs
Please describe your justification/background information for this recommendation.	Drug checking services analyze drug samples and provide information to people who use drugs about the chemical composition of the drugs they are taking. These services are provided in various settings, including anonymously at syringe services programs, at mobile services provided on site at events, and through distribution of test strips for personal use. A growing body of evidence has shown that drug checking services can alter behavioral intention and has demonstrated their impact on the behavior of people who use drugs. . Drug checking services, often coupled with tailored harm reduction advice, can facilitate outreach to people who use drugs and help them access substance use disorder treatment. When aggregated, data from drug checking services can provide important information about local drug supplies to inform policymaking and public health surveillance. Drug checking services have been effective in detecting adulterants and novel psychoactive compounds in the drug supply. NRS 453.554 (AB345 from the 2021 legislative session) which defines drug paraphernalia has already been amended to exclude "he term does not

Survey Question	Survey Response
	include: (a) Any type of hypodermic syringe, needle, instrument, device or implement intended or capable of being adapted for the purpose of administering drugs by subcutaneous, intramuscular or intravenous injection; or (b) Testing products. 3. As used in this section: (a) “Fentanyl test strip” means a strip used to rapidly test for the presence of fentanyl or other synthetic opiates. (b) “Testing product” means a product, including, without limitation, a fentanyl test strip, that analyzes a controlled substance for the presence of adulterants."
<p>Please include any associated research or links for your recommendation.</p>	<ul style="list-style-type: none"> • Pu, Ajisope, Earlywine. “Drug Checking Programs in the United States and International: Environmental Scan Summary.” Mathematica. September 2021. • https://publichealth.jhu.edu/2018/low-tech-low-cost-test-strips-show-promise-for-reducing-fentanyl-overdoses
<p>Please select the AB374 Section 10 Requirement(s) that align with your Harm Reduction recommendation. Please select all that apply.</p>	(j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders; and (2) Reduce the harms associated with substance use and substance use disorders while referring persons with substance use disorders to evidence-based treatment.
<p>If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.</p>	e. People who inject drugs; (as revised)
<p>Please describe the Action Step aligned with your recommendation.</p>	Other (please specify): Expand and encourage entities to offer drug-checking services
<p>Is this a short-term or long-term recommendation?</p>	Short-term (Under 2 years)
<p>If your recommendation requires a fiscal note, please approximate the amount.</p>	Unsure
<p>On a scale of 1-3, please rate the urgency of your recommendation.</p>	2
<p>On a scale of 1-3, please rate the impact of your recommendation.</p>	2
<p>On a scale of 1-3, please rate the current capacity to implement your recommendation.</p>	2

Harm Reduction Recommendation #3	Harm Reduction Shipping Supply: Provide travel costs for pickup of used products to be returned for destruction. Increase advertising about shipping programs. Establish alternative strategy if people can't receive delivery of the supplies.
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This recommendation was informed in part by the following Harm Reduction recommendation submission:

Survey Question	Survey Response
Recommendation submitted by SURG committee member Chelsi Cheatom.	Provide for the expansion of Harm Reduction services in every county including supporting shipping from urban Harm Reduction programs to rural/ frontier areas
Please describe your justification/background information for this recommendation.	Syringe exchanges and harm reduction programs are not available throughout most of the state and distance should not be a barrier for people to receive harm reduction services and products.
Please include any associated research or links for your recommendation.	Nextdistro is a national Harm Reduction Program that partners with local programs to ship overdose prevention supplies to individuals that need it. Trac-B/Impact Exchange in Las Vegas is a partner. www.nextdistro.org
Please select the AB374 Section 10 Requirement(s) that align with your Harm Reduction recommendation. Please select all that apply.	(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder; (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses. (j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about

SURG Prevention Subcommittee and Harm Reduction Recommendations August 2023

Survey Question	Survey Response
	the effects of substance use and substance use disorders; and (2) Reduce the harms associated with substance use and substance use disorders while referring persons with substance use disorders to evidence-based treatment.
If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.	e. People who inject drugs; (as revised) g. Other populations disproportionately impacted by substance use disorders
Please describe the Action Step aligned with your recommendation.	Expenditure of Opioid Settlement Funds
Is this a short-term or long-term recommendation?	Long-term (2+ years)
If your recommendation requires a fiscal note, please approximate the amount.	Unsure
On a scale of 1-3, please rate the urgency of your recommendation.	1
On a scale of 1-3, please rate the impact of your recommendation.	3
On a scale of 1-3, please rate the current capacity to implement your recommendation.	3

Harm Reduction Recommendation #4	Increase support for harm reduction based post-overdose outreach with public safety, including wrap-around services for surviving family members and/or postmortem services for families (for example, the services could be funeral related, housing needs, health care, counseling, or a warm handoff to treatment for substance use disorder).
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This recommendation was informed in part by the following Harm Reduction recommendation submission:

Survey Question	Survey Response
Recommendation submitted by SURG committee member Christine Payson.	Funding is requested for a SNHD position to work with the HIDTA Overdose Response Team. The goal is to have a full-time position (SME) that would respond to overdose calls. Once the scene has been cleared by law enforcement, this health department subject matter expert would work with the victim, their family members, other persons on scene etc. to provide linkage to care services and harm reduction programs such as naloxone, fentanyl test strips and needle exchange programs. Other services needed could be funeral related, housing needs, health care, counseling or a warm handoff to treatment for substance use disorder. This position would also offer a continuum of care, providing follow up and case management as needed. The SNHD is currently working with the CFC Foundation, The National HIDTA Overdose Response Strategy (ORS), Las Vegas Metropolitan Police Department, Henderson Police Dept, Homeland Security Investigations and the Nevada Sheriff's and Chief's Association to bring harm reduction training to the law enforcement community as well as pilot the above program in an effort to combat the harmful effects of fentanyl related deaths in our communities.
Please describe your justification/background information for this recommendation.	The 2018 Overdose Response Strategy Cornerstone Project details Public Safety -Led Linkage to Care Programs in 23 States. Methods and strategies in this project can serve as guidance in how linkage to care can be provided starting at an overdose scene.

Survey Question	Survey Response
<p>Please include any associated research or links for your recommendation.</p>	<p>https://www.hidtaprogram.org/pdf/cornerstone_2018.pdf</p>
<p>Please select the AB374 Section 10 Requirement(s) that align with your Harm Reduction recommendation. Please select all that apply.</p>	<p>(a) Leverage and expand efforts by state and local governmental entities to reduce the use of substances which are associated with substance use disorders, including, without limitation, heroin, other synthetic and non-synthetic opioids and stimulants, and identify ways to enhance those efforts through coordination and collaboration.</p> <p>(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder; (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses.</p> <p>(c) Assess and evaluate existing pathways to treatment and recovery for persons with substance use disorders, including, without limitation, such persons who are members of special populations.</p> <p>(d) Work to understand how residents of this State who are involved in the criminal justice system access supports for treatment of and recovery from substance use disorders at various points, including, without limitation, by reviewing existing diversion, deflection and reentry programs for such persons.</p> <p>(e) Evaluate ways to improve and expand evidence-based or evidence-informed programs, procedures and strategies to treat and support recovery from opioid use disorder and any co-occurring substance use disorder, including, without limitation, among members of special populations.</p>

Survey Question	Survey Response
	<p>(f) Examine support systems and programs for persons who are in recovery from opioid use disorder and any co-occurring substance use disorder.</p> <p>(i) Develop strategies for local, state and federal law enforcement and public health agencies to respond to and prevent overdoses and plans for implementing those strategies.</p> <p>(k) Recommend strategies to improve coordination between local, state and federal law enforcement and public health agencies to enhance the communication of timely and relevant information relating to substance use and reduce duplicative data collection and research.</p> <p>(q) Study, evaluate and make recommendations to the Department of Health and Human Services concerning the use of the money described in section 10.5 of this act to address substance use disorders, with a focus on: (1) The use of the money described in subsections 1, 2 and 3 of section 10.5 of this act to supplement rather than supplant existing state or local spending; (2) The use of the money described in section 10.5 of this act to support programs that use evidence-based interventions; (3) The use of the money described in section 10.5 of this act to support programs for the prevention of substance use disorders in youth; (4) The use of the money described in section 10.5 of this act to improve racial equity; and (5) Reporting by state and local agencies to the public concerning the funding of programs to address substance misuse and substance use disorders.</p>
<p>If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.</p>	<p>My recommendation does not focus on a special population.</p>

Survey Question	Survey Response
Please describe the Action Step aligned with your recommendation.	<ul style="list-style-type: none"> • Expenditure of Opioid Settlement Funds • DHHS Policy
Is this a short-term or long-term recommendation?	Long-term (2+ years)
If your recommendation requires a fiscal note, please approximate the amount.	Unsure
On a scale of 1-3, please rate the urgency of your recommendation.	2
On a scale of 1-3, please rate the impact of your recommendation.	3
On a scale of 1-3, please rate the current capacity to implement your recommendation.	2

Harm Reduction Recommendation #5	Create a bill draft request at the legislature to change the language around drug paraphernalia as it relates to smoking supplies.
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This recommendation was informed in part by the following Harm Reduction recommendation submission:

Survey Question	Survey Response
Recommendation submitted by SURG committee member Jessica Johnson.	Expand the scope of materials that may be made available for public health purposes by syringe services programs (SSPS), such as access to safer smoking supplies
Please describe your justification/background information for this recommendation.	Fentanyl is rapidly become a primary opioid in the illicit drug supply. Fentanyl, especially in its pill form, is most often smoked rather than injected, both by individuals who are new to opioid use and by those experienced in injecting black tar heroin. Along with a parallel increase in the use of methamphetamine, which is also commonly smoked, the prevalence of opioid and stimulant smoking is quickly overtaking injection as a primary and frequent route of administration. This strategy is a significantly less risky mode of administration for people who are unwilling or unable to stop using drugs. A person’s overall drug-related risk is lowered every time they choose to smoke instead of inject. Studies have found that participants who inject drugs are often willing to switch to smoking or other modes of administration when feasible, and that non-injection routes of administration may pose less risk of overdose. Many of the harms of injection drug use, such as endocarditis, skin infections, and vein damage, are injection-specific. In addition to being harmful to individual health, endocarditis, HIV, and HCV are expensive to treat, and place a considerable economic burden on the public health system. Expansion of access to these supplies for public health purposes are additionally important for reducing risk for exposure to tuberculosis outbreaks and COVID-19. Harm reduction services for people who use drugs are almost entirely focused on injection. Access to safer smoking supplies create

Survey Question	Survey Response
	safer-use options for people who don't inject, or who prefer stimulants as a primary drug. This broadens the reach of harm reduction services and offers an additional pathway into care and recovery.
<p>Please include any associated research or links for your recommendation.</p>	<ul style="list-style-type: none"> • Example briefing from Washington State: https://adai.uw.edu/wordpress/wp-content/uploads/SaferSmokingBrief_2022.pdf • CDC: Issue Brief: Smoking Supplies for Harm Reduction.
<p>Please select the AB374 Section 10 Requirement(s) that align with your Harm Reduction recommendation. Please select all that apply.</p>	<p>(j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders; and (2) Reduce the harms associated with substance use and substance use disorders while referring persons with substance use disorders to evidence-based treatment.</p>
<p>If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.</p>	<p>b. Persons who are incarcerated, persons who have committed nonviolent crimes primarily driven by a substance use disorder and other persons involved in the criminal justice or juvenile systems e. People who inject drugs; (as revised) g. Other populations disproportionately impacted by substance use disorders</p>
<p>Please describe the Action Step aligned with your recommendation.</p>	Bill Draft Request (BDR)
<p>Is this a short-term or long-term recommendation?</p>	Long-term (2+ years)
<p>If your recommendation requires a fiscal note, please approximate the amount.</p>	No Fiscal Note
<p>On a scale of 1-3, please rate the urgency of your recommendation.</p>	3
<p>On a scale of 1-3, please rate the impact of your recommendation.</p>	3
<p>On a scale of 1-3, please rate the current capacity to implement your recommendation.</p>	3

Harm Reduction Recommendation #6	Provide support to community coalitions to support community health workers to expand Harm Reduction throughout the state of Nevada and prioritize funding for Community Health Workers to provide community-based harm reduction services.
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This recommendation was informed in part by the following Harm Reduction recommendation submission:

Survey Question	Survey Response
Recommendation submitted by SURG committee member Chelsi Cheatom.	Provide support to community coalitions to support community health workers to expand Harm Reduction throughout the state of Nevada
Please describe your justification/background information for this recommendation.	Nevada has a robust community health worker program and the community prevention coalitions each have community health workers on staff that provide support to their communities in various ways which could include harm reduction efforts that are for the communities they serve.
Please include any associated research or links for your recommendation.	
Please select the AB374 Section 10 Requirement(s) that align with your Harm Reduction recommendation. Please select all that apply.	(b) Assess evidence-based strategies for preventing substance use and intervening to stop substance use, including, without limitation, the use of heroin, other synthetic and non-synthetic opioids and stimulants. Such strategies must include, without limitation, strategies to: (1) Help persons at risk of a substance use disorder avoid developing a substance use disorder; (2) Discover potentially problematic substance use in a person and intervene before the person develops a substance use disorder; (3) Treat the medical consequences of a substance use disorder in a person and facilitate the treatment of the substance use disorder to minimize further harm; and (4) Reduce the harm caused by substance use, including, without limitation, by preventing overdoses.

Survey Question	Survey Response
	(j) Study the efficacy and expand the implementation of programs to: (1) Educate youth and families about the effects of substance use and substance use disorders; and (2) Reduce the harms associated with substance use and substance use disorders while referring persons with substance use disorders to evidence-based treatment.
<p>If your recommendation focuses on a special population, please select all that apply. If your recommendation does not focus on a special population, please select that response.</p>	<p>b. Persons who are incarcerated, persons who have committed nonviolent crimes primarily driven by a substance use disorder and other persons involved in the criminal justice or juvenile systems</p> <p>g. Other populations disproportionately impacted by substance use disorders</p>
<p>Please describe the Action Step aligned with your recommendation.</p>	<p>Expenditure of Opioid Settlement Funds</p>
<p>Is this a short-term or long-term recommendation?</p>	<p>Long-term (2+ years)</p>
<p>If your recommendation requires a fiscal note, please approximate the amount.</p>	<p>Unsure</p>
<p>On a scale of 1-3, please rate the urgency of your recommendation.</p>	<p>1</p>
<p>On a scale of 1-3, please rate the impact of your recommendation.</p>	<p>2</p>
<p>On a scale of 1-3, please rate the current capacity to implement your recommendation.</p>	<p>3</p>