

**CONTINUUM OF ALCOHOL, TOBACCO AND OTHER DRUG SERVICES STRATEGIC PLANNING PROCESS
OVERVIEW OF THE STRATEGIC DIRECTION AND PROBLEM STATEMENTS**

Overall Philosophical Approach

Alcohol, tobacco and other drug use, abuse and addiction range in intensity from experimentation to severe and life-threatening chronic medical conditions. Therefore, alcohol, tobacco and other drug-related problems can be most effectively prevented, treated and/or managed through providing a continuum of prevention, treatment and recovery support services.

STRATEGIC DIRECTION 1: IMPACT NORMS AND PERCEPTIONS

Priority Problem Statement 1.1: Substance abuse continues to be viewed primarily as a social problem, rather than as a health condition.

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Priority Problem Statement 1.2: There are pervasive high-risk patterns of alcohol, tobacco and other drug use across Marin

- 1.2.1. High-rate, frequent and poly-substance use of alcohol, inhalants, prescription drugs and marijuana are emerging as the predominate pattern of use among youth and seniors in Marin leading to significant academic, health and safety consequences.

Priority Problem Statement 1.3: Youth have easy access to alcohol, tobacco and other drugs from social sources

- 1.3.1. Alcohol, tobacco and other drugs are available in significant quantities in social environments where youth are present leading to regular and heavy consumption which results in threats to individual health and community safety.

Priority Problem Statement 1.4: There is a lack of consistent adherence to and implementation of alcohol, tobacco and other drug laws and policies

- 1.4.1. Local, state and federal laws and regulations are not being followed/adhered to in retail settings leading to sales and service to minors under the age of 18 for tobacco products; under the age of 21 years for alcohol and adult (over 21 years of age) sales to intoxicated persons which results in threats to individual health and community safety.

STRATEGIC DIRECTION 2: IMPROVE SYSTEM CAPACITY AND INFRASTRUCTURE

Priority Problem Statement 2.1: There is a lack of consistent early identification, screening and referral of alcohol, tobacco and other drug problems, which reduces access to appropriate services

- 2.1.1 A significant number of individuals with, or at risk of, alcohol, tobacco and other drug issues are not receiving prevention messages or being identified and referred for treatment, as screening is not universally implemented in many settings such as school, community, medical or criminal justice.
- 2.1.2 Screening for tobacco use is not currently being integrated into the intake and service delivery processes at all substance abuse and mental health treatment agencies in a consistent manner.

Priority Problem Statement 2.2: There is a lack of communication, coordination and collaboration between departments and agencies

- 2.2.1 Treatment for Dually Diagnosed clients is being met through different systems (Mental Health and Alcohol & Other Drug) and there is no unifying coordination of this treatment across systems.
- 2.2.2. Many Divisions within HHS and many Departments within the County work with the same clients and there is no system in place to ensure that there is cross communication regarding client services accessed, history, needs, etc.
- 2.2.3 Case management, ancillary and aftercare services, which are integral to achieving long-term recovery, are not systematically provided throughout the assessment, treatment and recovery process.

Priority Problem Statement 2.3: Data collection in the alcohol, tobacco and other drug system of care is not consistent and does not support a continuum of care model

- 2.3.1. There is a lack of local alcohol, tobacco and other drug data to demonstrate community-specific needs and the prevalence and impact of culturally relevant, evidence-based programs and strategies.
- 2.3.2. The current data collection systems do not accurately reflect a continuum of care model.

Priority Problem Statement 2.4: There is a need to leverage alternative resources in order to maximize the provision of comprehensive alcohol, tobacco and other drug services

- 2.4.1. The cost to address alcohol, tobacco and other drug use and its related community consequences is a significant burden on the public health and safety resources in Marin and is out of balance to the resources available for local communities to address the issue.

STRATEGIC DIRECTION 3: IMPLEMENT EFFECTIVE ALCOHOL, TOBACCO AND OTHER DRUG SERVICES

Priority Problem Statement 3.1: Alcohol, tobacco and other drug services are not consistently tailored to specific client needs and considerations, such as economic, gender, age, language, geographical, racial, cultural and situational issues

- 3.1.1. As a large proportion of available public funding is categorical and restrictive, it is insufficient to adequately address community priorities.
- 3.1.2. There is a significant lack of substance abuse treatment services for adolescents and their families.

Priority Problem Statement 3.2: Alcohol, tobacco and other drug programs and services are not consistently incorporating evidence-based practices

- 3.2.1. All tobacco using clients are not being advised to quit using tobacco and are not being routinely provided with cessation services on site or by referral.
- 3.2.2. School curricula, programs and strategies utilized do not incorporate the latest in science and research; are not implemented with fidelity, decline in frequency as youth age and use increases; and record little to no documented effectiveness or measurement of impact.
- 3.2.3. Communities are not engaged in effective alcohol, tobacco and other drug prevention due to a lack of: local data, capacity to address the issues, implementation of evidence-based strategies, and coordinated action.

Priority Problem Statement 3.3: The lack of coordination, communication and collaboration across departments and agencies, which is not consistent with a chronic disease and continuum of care model, limits access to and delivery of effective services.

- 3.3.1. Current substance abuse and mental health treatment services in Marin have limited dual diagnosis capabilities.
- 3.3.2. Economic instability can undermine long-term recovery for many of the system's treatment clients.