

**SUBSTANCE ABUSE
PREVENTION AND CONTROL
(SAPC)**

*Alcohol and Other Drug
Prevention Services
(AODPS)*

**PROVIDERS'
YEAR-END
PROGRESS REPORT
Fiscal Year 2016-17**

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Executive Summary

INTRODUCTION

The County of Los Angeles, Department of Public Health, Substance Abuse Prevention & Control (DPH-SAPC), Prevention System of Services Unit administers the operations of a network of Alcohol and Other Drug Prevention Services (AODPS) contracted community-based organizations. DPH-SAPC guides the implementation of prevention services via its Strategic Prevention Plan and the federal Substance Abuse and Mental Health Services Administration (SAMHSA) Strategic Prevention Framework (SPF). Central to each prevention framework step is ensuring efforts are culturally competent and the results are achieved and sustained.



PREVENTION FRAMEWORK

To achieve comprehensive, effective, and culturally competent alcohol and other drug (AOD) prevention services, DPH-SAPC combines three distinct frameworks:

- 1) Federal Substance Abuse and Mental Health Services Administration (SAMHSA) Strategic Prevention Framework (SPF) planning process.
- 2) SAMHSA's Center for Substance Abuse Prevention (CSAP) prevention strategies.
- 3) Institute of Medicine (IOM) classification.

Use of these frameworks is required by the California Department of Health Care Services (DHCS), and is part of the mandatory reporting requirements for the California Outcome Measurement Services for Prevention (CalOMS Pv) reporting system.

SAMHSA'S Strategic Prevention Framework (SPF)¹

The SPF is a five-step planning process that systematically guides the development of prevention services. Central to all steps is ensuring cultural competency and sustainability. By addressing each of these steps, prevention services should address the needs of the specific target community(ies) and population(s), enhance protective factors and reduce risk factors, build community capacity and collaboration, develop goals and measurable objectives, and emphasize evaluation to ensure the program achieves the intended outcomes. The following is a brief description of each SPF step.

- [Step 1: Assess Needs](#): What is the problem, and how can I learn more?
- [Step 2: Build Capacity](#): What do I have to work with?
- [Step 3: Plan](#): What should I do and how should I do it?
- [Step 4: Implement](#): How can I put my plan into action?
- [Step 5: Evaluate](#): Is my plan succeeding?



Center for Substance Abuse Prevention (CSAP) Strategies and Activities²

The SAMHSA CSAP has classified common prevention activities into six major categories, termed *strategies*. An effective prevention program utilizes these strategies and activities to comprehensively address the actual needs of the target communities through evidence-based interventions and services.

1. **Environmental Strategy** – establishes and/or changes community standards, codes, and attitudes, thereby influencing incidence and prevalence of alcohol and other drug use within the community. The strategy emphasizes engagement with a broad base of community partners, place-based interventions, and public policy.
2. **Community-Based Process Strategy** - enhances the community's capacity to address AOD issues

¹ Strategic Prevention Framework. (n.d.). Retrieved from <https://www.samhsa.gov/capt/applying-strategic-prevention-framework>

² Center for Substance Abuse Prevention Strategies and CSAP Activities Definitions (Approved July 24, 2017, Updated August 17, 2017). Retrieved from <http://www.ca-cpi.org/wp-content/uploads/2017/08/CSAP-Strategies.pdf>

through organizing, planning, collaboration, coalition-building, and networking.

- 3. Information Dissemination Strategy** - improves awareness and knowledge of the effects of AOD issues on communities and families through “one-way” communication with the audience, such as speaking engagements, health fairs, and distribution of print materials.
- 4. Problem Identification and Referral Strategy** – identifies individuals who have infrequently used or experimented with AOD who could change their behavior through education. The intention of the screening is to determine the need for indicated prevention services, not treatment services.
- 5. Education Strategy** – encourages “two-way” communication between the facilitator and participants. This strategy aims to improve life/social skills such as decision making, refusal skills, and critical analysis.
- 6. Alternative Strategy** – redirects individuals from potentially problematic situations and AOD use by providing constructive and healthy events/activities.

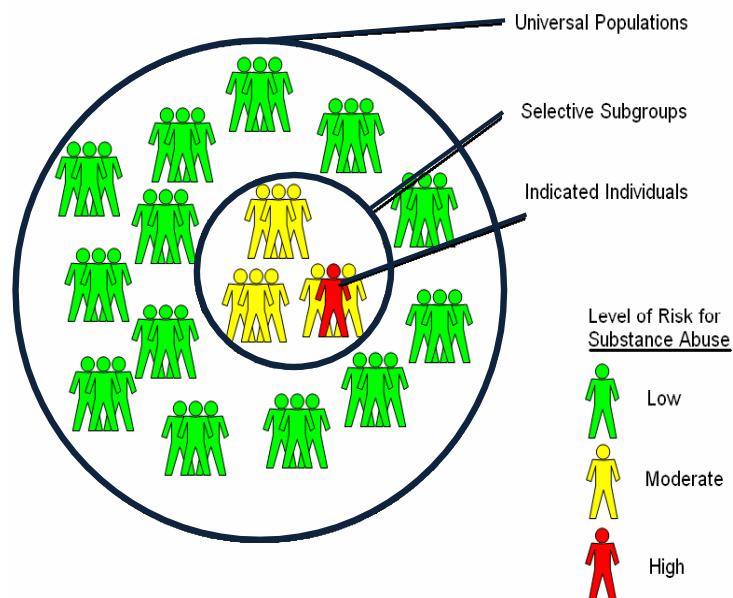
Institute of Medicine (IOM) Classification System³

The prevention classifications are subdivided into universal, selective, and indicated. The IOM category is assigned by looking at the risk level of the individual or group receiving the service. Federal prevention funding allows for the delivery of services for **universal, selective, and indicated** populations; funding does not include those who need and receive treatment and recovery services.

Universal - Universal prevention targets the entire population (national, local community, school, and/or neighborhood) with messages and programs aimed at preventing or delaying the (ab)use of AOD. All members of the population share the same general risk for substance (ab)use, although the risk may vary among individuals. Universal prevention programs are delivered to large groups without any prior screening for substance abuse risk.

Selective - Selective prevention targets subsets of the total population at risk for substance abuse by virtue of their membership in a particular population segment. Selective prevention targets the entire subgroup, regardless of the degree of risk of any individual within the group.

IOM Categories



³ Center for Applied Research Solution | Fred Springer, J., & Phillips, J. (n.d.). The Institute Of Medicine Framework and its Implication for the Advancement of Prevention Policy, Programs, and Practice. Retrieved from http://ca-sdfc.org/docs/resources/SDFC_IOM_Policy.pdf

Indicated - Indicated prevention is designed to prevent the onset of substance abuse in individuals who do not meet Diagnostic and Statistical Manual of Mental Disorders Fourth Edition, Text Revision (DSM-IV-TR) criteria for abuse or dependence, but who are showing early danger signs, such as failing grades and consumption of alcohol and other gateway drugs. The mission of indicated prevention is to identify individuals who are exhibiting potential early signs of substance abuse and other problem behaviors associated with substance abuse, and to target them with special programs.



AODPS PROVIDER NETWORK

DPH-SAPC's network consists of 36 contracted providers, 56 contracts and 6 contract types: 33 Comprehensive Prevention Services contracts, 8 Environmental Prevention Services contracts, 12 Adolescent Prevention Services contracts, and 3 special-project contracts, including: Friday Night Live; Memorandum of Understanding with the Los Angeles County Sheriff's Department, to provide school-based services; and Community Centered Emergency Room Project. For a list of 2016-17 fiscal year (FY) AODPS contracted providers, see Attachment A.

1. Comprehensive Prevention Services (CPS)

AODPS-CPS aim to: 1) decrease underage drinking and binge drinking; 2) decrease illicit drug use (e.g., marijuana, methamphetamine, ecstasy); and 3) decrease misuse of legal products (e.g., inhalants, over-the-counter (OTC) and prescription (Rx) medications) among youth and young adults in Los Angeles County. This is achieved through culturally competent, evidence-based prevention program services that focus on both community- and individual-level efforts. The goal of these efforts is to reduce alcohol availability and accessibility, and decrease the social norms and community conditions that contribute to AOD use within target populations and communities. The selection of services is data-driven and designed to specifically address the highest priority AOD-related problems and contributing factors in target communities. The services must also clearly align with the County's SPF. This includes changing the local conditions and environment that facilitate AOD use, and improving knowledge and behaviors of youth and adults that contribute to community norms about AOD use.

Integral to the success of these efforts is active and sustained involvement of local community residents (youth and adults), leaders, non-AOD focused businesses, AOD-service providers, and others who are knowledgeable of local AOD-related issues and are committed to engaging in evidence-based solutions. AODPS-CPS contractors will appropriately engage community members and leaders throughout the process to best identify, implement, and sustain efforts.

2. Environmental Prevention Services (EPS) SPA Based Coalitions

AODPS-EPS contracts aim to decrease underage drinking and binge drinking, especially among youth and young adults, by reducing alcohol availability and accessibility in Los Angeles County through culturally competent, evidence-based prevention environmental efforts. These efforts aim to: change the policies, ordinances, and practices that facilitate alcohol use, and develop methods to ensure efforts are enforced and sustained. The selection of environmental service efforts is data-driven and designed to specifically address the highest priority alcohol-related problems and contributing factors in target communities. Environmental efforts must also clearly align with the County's SPF. This includes: addressing where and how alcohol is sold and marketed; alcohol serving and sales practices; alcohol sales to minors; passage of alcohol-related ordinances and policies; and compliance with local alcohol-related regulations.

Integral to the success of these environmental efforts is active and sustained involvement of local community residents (youth and adults), leaders, non-AOD focused businesses, AOD-service providers, and others who are knowledgeable of local alcohol related issues and are committed to engaging in evidence-based solutions. AODPS-EPS contractors will appropriately engage community members and leaders throughout the process to best identify, implement, and sustain efforts.

3. Adolescent Prevention Services (APS)

APS prevention services are consistent with the six CSAP strategies and the three IOM prevention classifications. These services, such as outreach, brief screening, educational sessions, alternative and other activities, were reported and tracked via the CalOMS Pv reporting system.

4. Friday Night Live (FNL)/Club Live (CL), & FNL Kids

The FNL aims to decrease: 1) underage drinking and binge drinking; 2) illicit drug use (e.g., marijuana, methamphetamine, ecstasy); and 3) misuse of legal products (e.g., inhalants, OTC and Rx medications), among youth and young adults. FNL provides opportunities for positive youth development through school- and community-based efforts, to reduce alcohol availability and accessibility and decrease the social norms and community conditions that contribute to AOD use.

5. Los Angeles County Sheriff's Department – Success through Awareness and Resistance (STAR)

The STAR program aims to prevent or decrease use of AOD and tobacco and violence in SPA 3 by targeting youth who live in poverty-stricken areas with higher rates of crime, substance abuse, and gang involvement. This is achieved by implementing a three-pronged prevention program that includes a school curriculum, after-school activities, and a summer program. The three-pronged approach allows Sheriff's deputies to establish positive relationships with school administrators, teachers, parents, and students.

6. Community Centered Emergency Room Project (CCERP)

The CCERP bridges the gap between health, public health, mental health services, and community prevention. Research indicates that the well-being of individuals depends on coordinated, quality health care services and preventive community conditions that support health and safety. A successful health system combines the above approaches to transform community environments to reduce AOD use risk factors. In addition, the CCERP collaborates with the Needs Special Assistance (NSA) interdepartmental team to provide educational strategies to prevent health disparities and chronic diseases and promote healthier living.

The CCERP uses the Public Health Model as the conceptual basis for implementing prevention strategies to reduce AOD-related problems afflicting the targeted area. It educates and empowers local community residents and stakeholders to address community risk factors that contribute to overuse of the LAC+USC Medical Center Emergency Department.

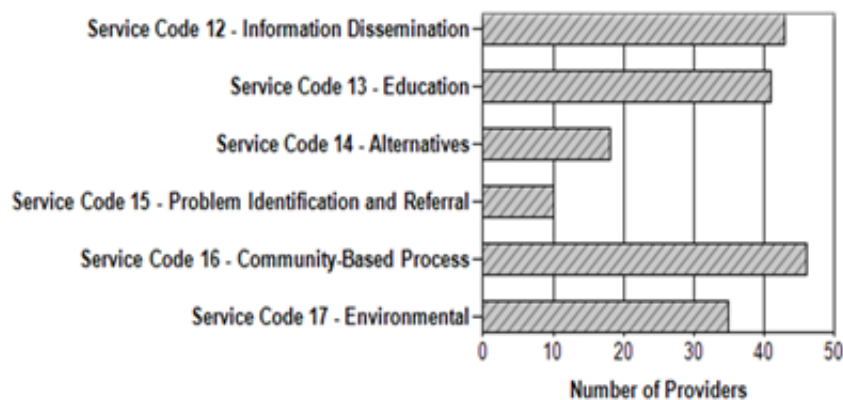
GOALS AND OBJECTIVES

Per SAPC’s Prevention Unit, the AODPS-contracted providers addressed the following goals and objectives in FY2016-17. SAPC collaborated with prevention contractors to design and implement data-driven and community-based strategies addressing priority AOD-use issues and other contributing factors within their communities. Examples of implemented environmental prevention programs are presented in Attachment B.

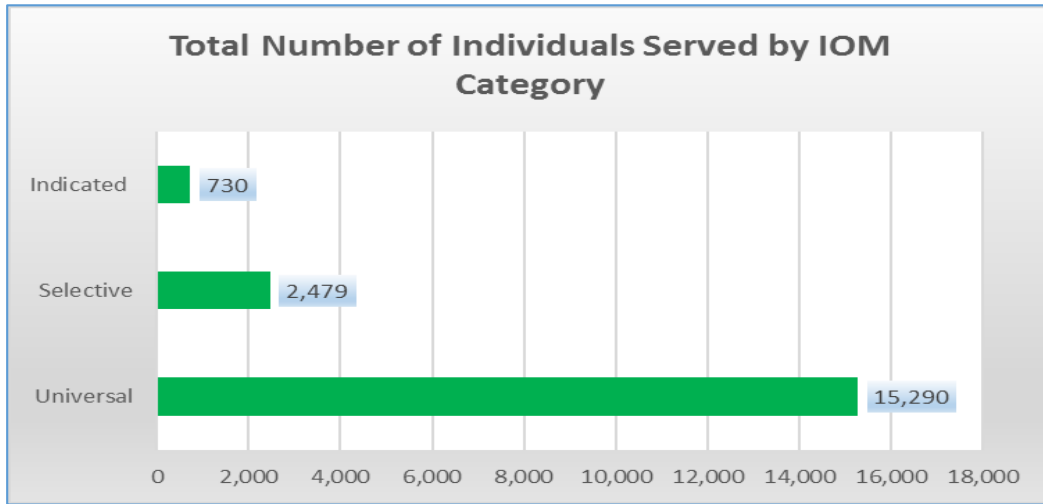
Goals	Objectives
Goal 1: Reduce prescription drugs and over-the-counter medication misuse and abuse.	Reduce availability of and access to prescription drugs and legal products that can be misused.
Goal 2: Reduce marijuana use by youth.	Reduce availability of and access to marijuana by youth.
Goal 3: Decrease underage drinking and binge drinking among youth and young adults.	Reduce availability of and access to alcohol by underage youth.
Goal 4: Reduce availability of and access to methamphetamine and other illicit drugs by youth and young adults.	Change social norms that contribute to substance use by decreasing favorable attitudes toward methamphetamine and other illicit drug use.

The chart below shows the number of prevention providers who implemented prevention services from each CSAP strategy in FY2016-17. The top three strategies implemented include: Community-Based Process, Information Dissemination, and Education.

SAPC Provider Engagement in CSAP Strategies



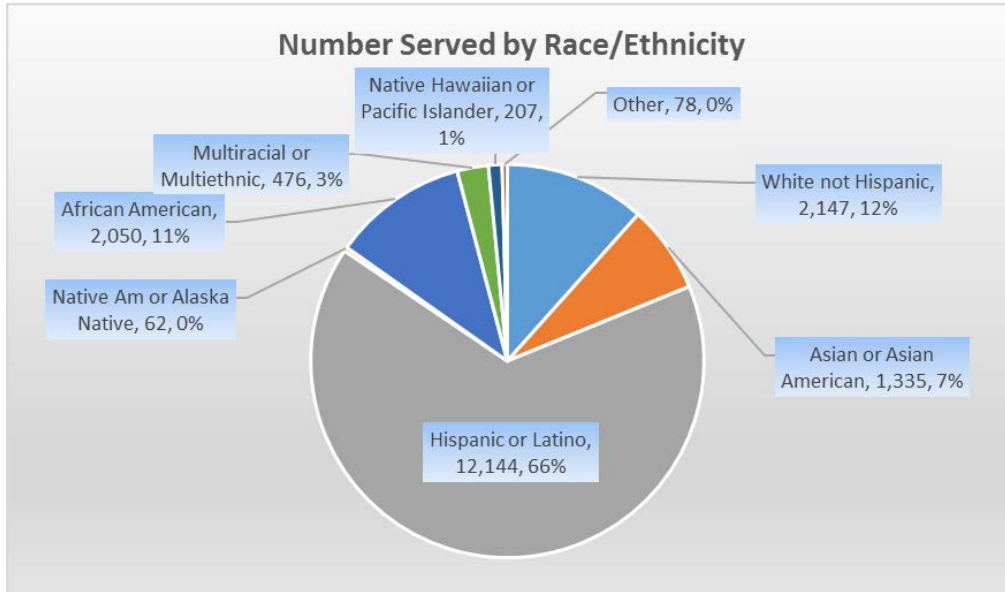
Individuals receiving services by each IOM prevention classification (Universal, Selective, or Indicated) are shown below, with a majority of recipients (15,290) in the Universal category.



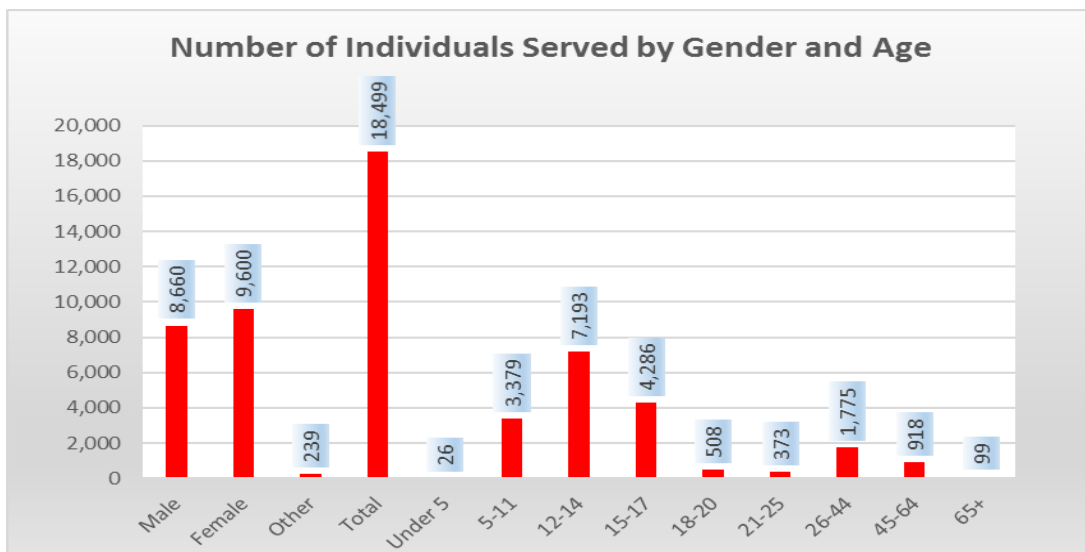
DEMOGRAPHIC DATA: CaIOMS PREVENTION

During FY2016-17, SAPC prevention contractors served 18,499 Los Angeles County residents. Service recipients included youth, young adults, parents, families, and community partners. Presented below is a breakdown of service recipients, by various demographic characteristics.

The chart below presents the total number of residents served, by race/ethnicity:



The chart below shows the breakdown of individuals served, by gender and age group:



QUALITATIVE DATA: PROGRAM HIGHLIGHTS


Goal 1: Reduce prescription drugs and over-the-counter medication misuse and abuse

- Providers serving the eight Service Planning Areas (SPAs) outreached to pharmacies, left flyers and newsletters in community spaces, created social media informational postings, and disseminated information about the upcoming National Drug Take-Back Day events on October 2016 and April 2017. During pharmacy visits, community members encouraged pharmacists and pharmacy technicians via flyers and in-person meetings to educate their customers about drug take-back and safe-disposal opportunities.
- Prevention contractors in all SPAs collaborated with SAPC to complete community assessments that measure Rx and OTC drug misuse, attitudes toward misuse, and knowledge of Rx and OTC safe-disposal practices.
- Providers serving SPAs 2 and 3 created presentations and disseminated information to community members and parent groups on Rx and OTC drugs and how to safely dispose of them. There were major Rx and OTC medication capacity-building efforts in Spanish-speaking neighborhoods to develop community-driven Rx and OTC solutions.
- The Parent Committed Program in SPA 2 incorporated a session on the dangers of Rx and OTC medications, and provided emergency disposal kits and information on safe-disposal sites. The program participated in two National Drug Take-back Day events in collaboration with Kaiser Permanente, the DEA, and the USC School of Pharmacy. These efforts increased community knowledge and awareness regarding the availability of safe drug disposal sites, and fostered new community partnerships.
- SPA 2 and 3 providers developed and disseminated educational materials and conducted social media campaigns to increase public awareness of the Rx drug abuse epidemic. Prevention staff also shared available community resources centered around expanding knowledge of safe usage, storage, and disposal of prescription drugs.
- Provider staff serving SPA 3 developed the EmpoweRx card, a tool for community members to personally track use of open drug prescriptions. This card also contains information about safe use, safe disposal locations, and important questions about Rx drugs to empower patients to prevent misuse. The tool was made available in Spanish, Vietnamese, and Chinese, to reach diverse populations.



Goal 2: Reduce marijuana use by youth

- Using more interactive teaching methods, providers in SPA 1 providers observed many students develop protective factors to reduce marijuana use and promote well-being, such as self-confidence and the ability to handle peer-pressure.

- Through collaborations with the Rethinking Access to Marijuana (RAM) coalition and community partners, prevention providers across most SPAs (SPAs 1, 2, 3, 5, 7 and 8) prepared presentations on the impact of marijuana on the developing youth brain, developed and administered coalition-efficacy surveys, enhanced the policy menu, and created position papers to include cannabis laws in existing smoking laws.
- RAM's Media Campaign included prevention providers from SPAs 5 and 8. They generated media messages about marijuana-related car crashes and drugged driving. The campaign consistently outreached to their public health contacts at the *Los Angeles Times* to share stories and information related to marijuana policies, regulations, and harms.
- Prevention staff from SPAs 2, 3 and 5 faithfully implemented evidence-based prevention education curriculums (e.g., Too Good for Drugs, Project Alert, LifeSkills Training; Positive Action) and local/innovative curriculum programs to over 2,000 students to increase protective factors and decrease the risk factors that promote marijuana use. The Guiding Good Choices curriculum was implemented to over 135 parents in these SPA communities.
- As reported by prevention staff from SPAs 3, 6, and 7, pre-test and post-test items measuring parents' and students' knowledge and attitudes about marijuana found statistically significant improvements in both outcomes. For example, at pretest, 65.1% of students indicated it was "never ok" to use marijuana, whereas at post-test 80.9% indicated this disapproval. Additionally, whereas 53.0% of youth either somewhat- or strongly disagreed with the statement, "you have more fun when smoking marijuana", at post-test follow up, the disagreement percentage increased to 66.0%.
 
- In collaboration with student leaders and school administration, prevention providers from SPAs 2, 4, 6, 7 and 8 created newsletters with prevention messages about marijuana use, which was distributed to approximately 600 families; a marijuana education curriculum, to increase youths' knowledge of the long-term harms of marijuana use and reduce the positive norms associated with marijuana use among youth; and alternative activities on campuses to serve as healthy and safe alternatives to marijuana use.

Goal 3: Decrease underage drinking and binge drinking

- Prevention staff from SPAs 1, 3, and 7 engaged with community members and leaders, including city council members, to address and reduce community risk factors, such as alcohol outlet density and licensure violations (e.g., sales to minors). Some prevention staff from SPAs 1 and 3 also provided requested technical assistance to councilmembers regarding the 4 am Senate Bill to oppose its passage.
- Prevention staff from numerous SPAs successfully implemented the environmental Retail Framework services, including Pseudo-decoy buys, Merchant Committed (SPAs 2, 3 and 7), Sticker Shock (SPA 2, 3 and 6), Knock and Talks (SPAs 2 and 8), Responsible Beverage Service (RBS) trainings (SPAs 1, 2 and 4), to help reduce underage drinking. After RBS trainings, staff noted retailers were in higher compliance with responsible sales practices, such as checking IDs, to prevent alcohol sales to minors.

- Providers from SPAs 2, 6, and 7 collaborated with school districts, parents and students, local city officials, law enforcement, local businesses, and community members to implement prevention programs, such as the Beer Run Prevention Project (BRPP). Additionally, classroom programs were implemented with students from SPAs 2, 4, 5, and 7 (e.g., “Every 15 Minutes”; “Wheel of Misfortune”) to promote their knowledge of alcohol-related harms and to reduce underage drinking by promoting healthy alternatives (e.g., school and community leadership activities).
- By implementing a risk-reducing training program (“Youth Media Literacy”) in SPA 3, 41 teenagers self-reported decreased exposure and interest in alcohol advertisements.
- Youth in SPAs 3 and 4 were provided with Problem Identification and Referral services to help them and their families access resources promoting protective factors (e.g., resiliency) and reducing overall risk for youth drinking and binge drinking.
- Prevention providers in SPAs 3, 7, and 8 implemented culturally-competent underage drinking and binge drinking prevention services via: AOD-prevention presentations for youth and parents; educational workshops (e.g., Creating Lasting Family Connections); and printed material dissemination. The distributed prevention materials were translated into other languages (e.g., Chinese, Khmer, Vietnamese, and Spanish) to reach and impact a wider community audience.
- SPA 7 prevention staff participated in the Healthy Stores for a Healthy Community Alcohol Subgroup and, in collaboration with community stakeholders, county prevention providers, and city officials, helped pass the Safe Access to Alcohol and Food Establishments (SAAFE) Deemed Approved Ordinance at the LA County Board of Supervisors meeting on 05/02/17. These efforts reduce the availability and access to alcohol by underage youth and young adults.
- To promote passage of policies that reduce underage drinking and binge drinking (e.g., social host ordinance), SPA 5 prevention providers, in partnerships with city officials, law enforcement, and the Santa Monica-Malibu Unified School District, hosted a Reality Party. The Reality Party educated parents about teen parties, motivating them to pass a social host ordinance in SPA 5 communities. Additionally, prevention contractors from SPAs 6 and 8 collaborated with retailers and city officials to inform parents and other adults about social host ordinance and the consequences of its violation.



Goal 4: Reduce availability of and access to methamphetamine and other illicit drugs by youth and young adults

- Prevention staff from SPA 2 conducted focus groups to learn about trends in methamphetamine and other drug use in the community of Van Nuys and the surrounding areas. Additionally, they conducted “key-informant” interviews with college students, law enforcement, fireman and community stakeholder to gain insight into community needs.
- Providers from SPA 4 conducted surveillance of public drug use, and shared key findings and recommendations at public hearings with local officials, business owners, and other

community members. SPA 4 staff interrupted and discouraged illicit drug activity at public parks by using comprehensive prevention strategies to promote community safety and health.

- Prevention contractors from SPAs 2, 3, and 6 conducted youth and parent educational presentations to increase awareness and reduce risk factors that promote methamphetamine or other drug use in their communities (e.g., LifeSkills Training (LST), Drug Free 24/7 school-wide campaign). Providers noted a significant increase in students' risk perception and anti-drug knowledge about methamphetamine and other drugs from pre-test to post-test.

CHALLENGES AND BARRIERS

During this reporting period, SAPC and its contracted providers noted the following challenges and barriers in their countywide prevention efforts:

- Lack of buy-in from local elected leaders and law enforcement officials to support prevention efforts for underage drinking and marijuana use.
- Challenges in collaborating with retailers to promote the Beer Run Prevention Campaign and to deter adults from buying alcohol for underage youth.
- Delays in reply from school administration resulting in challenges with timely access to schools and the timely implementation of prevention curriculums. Additionally, the Memorandum of Understanding process tended to be a lengthy process, and frequent school staff turnover created delays in its enactment.
- Difficulty in engaging student and parent interest in educational prevention curriculums and parent workshops, especially among lower-socioeconomic, higher-risk communities.
- Concern about how accepted cultural and social norms related to recreational marijuana use will impact marijuana prevention strategies among youth and young adults after the passage of Proposition 64.
- Engaging minority community participation in the alcohol retail framework and prescription drug take-back events because of retailer language barriers.
- Rigorous and time-intensive process to receive approval to implement prevention programs at public parks, which challenged the timely implementation of AOD-prevention services in high-risk communities.



FUTURE PLANS

Prevention providers expressed the importance of expanding and strengthening collaborative relationships with community stakeholders, city officials, and law enforcement agencies to effectively implement and reinforce laws that reduce AOD use among youth and young adults in the SPA communities. Future plans include:

- Working with City Attorney's Office to adopt the Retail Framework Merchant Committed code of best-practices to ensure retailer's participation in reducing alcohol availability and accessibility to minors.
- Increasing community coalitions' capacity to present their needs to retailers, law enforcement, and city officials to reduce risk factors for AOD use in communities.
- Place ban on cannabis licensing, update existing smoke-free ordinances, and develop new cannabis ordinances to limit the use, availability, and access to marijuana by youth and young adults and to mitigate the perception of risk-reduction among minors, following the passage of Proposition 64.
- Continue implementing educational curriculums to youth and parents about the physical and social harms of alcohol, marijuana, and other drug use to promote prevention dialogue between parents and youth and thereby reduce AOD use by youth and young adults.
- The Rethinking Access to Marijuana (RAM) Coalition continuing to reduce community risk factors by increasing community awareness of the harms of youth marijuana use via presentations and disseminated printed materials.
- Expanding providers' in-person engagement of lawmakers and continuing to update the "Policy Menu" to distribute to city officials (e.g., council members, mayors) to help them make informed decisions and enact effective AOD-prevention policies.



ATTACHMENTS

Attachment A

PREVENTION PROVIDER NETWORK

ALCOHOL AND OTHER DRUG PREVENTION SERVICES (AODPS) CONTRACTED PROVIDERS

No.	Contracted Alcohol and Other Drug Prevention Services (AODPS)	CPS	EPS - SPA Based Coalitions	APS	Special Project
1	Asian American Drug Abuse Program	X	SPA 8	X	
2	Avalon Carver Community Center	X			
3	Behavioral Health Services, Inc.			X	
	• Beach Cities	X			
	• Torrance	X			
	• Hollywood	X			
4	California Hispanic Commission on Alcohol & Drug Abuse	X	SPA 7	X	
5	Cambodian Association of America	X			
6	Child and Family Center – Santa Clarita			X	
7	Children's Hospital of Los Angeles	X		X	
8	City of Pasadena Recovery Center	X			
9	Clare Foundation Inc.	X			
10	Community Coalition for Substance Abuse Prevention & Treatment	X	SPA 6		
11	DayOne, Inc.	X	SPA 3		
12	Didi Hirsch Psychiatric Services			X	
13	Helpline Youth Counseling, Inc.	X		X	
14	Institute for Public Strategies	X	SPA 5		
15	Jewish Family Services of Los Angeles	X			
16	Koreatown Youth & Community Center	X	SPA 4		
17	Los Angeles County Office of Education	X			FNL
18	Los Angeles County Sheriff's Department (STAR Unit)				MOU

No.	Contracted Alcohol and Other Drug Prevention Services (AODPS)	CPS	EPS - SPA Based Coalitions	APS	Special Project
19	MJB Transitional Recovery, Inc.	X			
20	NCADD of East San Gabriel and Pomona Valley, Inc.	X			
21	NCADD of San Fernando, Inc.	X			
22	Pacific Clinics	X		X	
23	People Coordinated Services of Southern California	X			
24	Phoenix House of Los Angeles	X			
25	Prototypes a Center for Innovation	X			
26	Pueblo Y Salud, Inc.				
	• San Fernando	X			
	• Palmdale	X			
27	San Fernando Valley Partnership, Inc.		SPA 2		
28	Shields for Families, Inc.			X	
29	Social Model Recovery Systems, Inc.	X			CCERP
30	South Central Prevention Coalition	X			
31	Special Services for Groups			X	
32	SPIRITT Family Services, Inc.	X		X	
33	Tarzana Treatment Center	X	SPA 1	X	
34	The Wall Memorias Project	X			
35	Volunteers of America	X			
36	Watts Health Foundation, Inc.	X			
	TOTAL CONTRACTS	33	8	12	3

Attachment B

ENVIRONMENTAL PREVENTION PROGRAMS

Beer Run Prevention Project

Beer Run is a slang term used when some individual walks into a store, takes alcohol and walks casually to the counter as if to pay. The individual will then quickly run out of the store, stealing the alcohol. While this may appear to be harmless fun and a simple crime, the suspect who commits this crime could face jail time, injury or death. Many of these thefts can quickly turn into felony crimes of robbery when force or fear is used during the commission of the crime.

Retail Framework

The Retail Framework provides a gradual, 8 step-wise approach that methodically documents problems at the outlets, recruits retailers to participate directly in prevention actions, mobilizes concerned community groups to act, and approaches city agencies to carry out their oversight responsibilities for off-sale alcohol outlets.

Merchant Committed

Merchant Committed campaign encourages retailers to fully adopt preventive practices as part of their business operations, and Policy Development campaigns encourage the city to improve its oversight of off-sale outlets through community policing and CUP administration.

Social Host Ordinance (SHO)

Preventing Underage Drinking Parties Social host ordinances prevent underage drinking parties by holding the host (e.g., parents or other adults) accountable for these parties. A social host ordinance sends the clear message to parents and other adults that it is not acceptable to give alcohol to teens.

Sticker Shock Project

Capitalizes on community activism, cooperative efforts and collective responsibilities to combat underage drinking and its related problems. This includes adults providing alcohol to minors. The project not only educates citizens, businesses, educational institutions, health organizations, law enforcement and governmental authorities on the problems of underage drinking, but also ensures a consistent message about the law exists, increasing efforts to bring about change.

Responsible Beverage Server (RBS)

RBS training is a community-based approach to promote public safety and to reduce risks associated with the retail alcohol environment. RBS has three essential elements: the adoption of alcohol-service policy for ABC-licensed establishments; the providing of server education and guidance; and the development of partnerships between law enforcement, local government and community groups.

Warning Sign Campaign

Licensees who fail to post required signs may receive a fine, suspension, or in repeated cases, revocation of their alcoholic beverage license. The ABC does not furnish or sell signs to licensees.

Parents Who Host, Lose the Most – Don't be a party to teenage drinking Campaign

Strives to create consistent parental/community norms that underage drinking is not only illegal, but is unsafe, unhealthy and unacceptable. By increasing parental awareness and understanding of the health, safety and legal consequences of allowing underage drinking, this campaign reduces the number of parents who allow underage drinking on their property, which decreases underage access to alcohol.

Reality Parties

Many adults feel drinking and drug use is a rite of passage. They assume teen parties are the same as when they were young. At Reality Parties, parents tour a home set up as a teen drinking party, with youth actors portraying common party activities and voicing concerns expressed by local teens and young adults. After each performance or tour, Straight-Up facilitates community dialogue, with a panel to answer questions and discuss ideas for change.

Lee Law

Refers to California Business and Professions Code § 25612.5, enacted in 1994. It requires off-sale alcohol retailers (e.g. liquor stores, grocery stores, but not bars or restaurants) to abide by a set of public health and safety standards to protect surrounding neighborhoods and communities from problems associated with alcohol sales.

ACKNOWLEDGEMENTS

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