

# **SUMMARY REPORT & RECOMMENDATIONS**



**METHAMPHETAMINE PREVENTION  
NETWORK LEADERSHIP COUNCIL  
SANTA BARBARA COUNTY**

**November 18, 2008**

# Contents

<b>I. Executive Summary</b>	3
<b>II. Introduction</b>	6
<b>III. Background</b>	7
<b>A. What is Methamphetamine?</b>	7
<b>B. Methamphetamine Abuse in our Communities: What’s Being Done &amp; Latest Trends</b>	8
1. “From Me to We:” MPN Summit December 2006	8
2. County Efforts	9
3. Community Coalition Efforts	13
<b>C. Methamphetamine Prevention Network - 2007 - 2008</b>	15
1. Leadership Council	15
2. MPN Task Forces	16
• Educated Communities & Professionals Task Force	16
• Meth Free Individuals, Children & Families Task Force	16
• Safe Neighborhoods Task Force	17
• Finance Task Force	17
• Outcomes & Evaluation Task Force	18
3. Accomplishments to Date	18
• Informational Brochures	18
• Drug Endangered Children (DEC) Memorandum of Understanding Coordination	19
• Training	19
• Resource Survey	19
<b>IV. Priorities and Recommendations</b>	20
<b>A. Prevention Strategies</b>	20
<b>B. Intervention Strategies</b>	21
<b>C. Treatment Strategies</b>	22
<b>D. Data &amp; Outcome Strategies</b>	23
<b>V. Summary and Next Steps</b>	24
<b>A. Substance Abuse Coordinating Council</b>	24
<b>B. Funding</b>	26
<b>C. Board of Supervisors’ Action</b>	26
<b>VI. Appendices</b>	27
<b>A. List of Participants</b>	27
<b>B. Glossary of Terms</b>	28

# I. Executive Summary

**M**ethamphetamine (meth) is a highly addictive, powerful, long-acting, physical, and psychological stimulant drug that affects the central nervous system within the brain. Long-term meth abuse can cause extreme weight loss, severe dental problems, anxiety, confusion, insomnia, mood disturbances, and violent behavior.

Over the last decade, meth use has been increasing in Santa Barbara County. In fiscal year 2000-01, meth was reported as the drug of choice for 19% of clients at admission in drug treatment; by FY 06-07, 37% of clients reported meth as their drug of choice at admission, making it the primary drug of choice in Santa Barbara County. Children continue to be negatively impacted by meth and other substance abuse. In 2007, 578 children were placed in foster care in our county, as a result of parental substance abuse – representing 67% of all kids in foster care that year. The negative impact of meth on individuals, families and the community is tremendous.

In 2006, the Santa Barbara County Board of Supervisors requested information about the impacts of meth on County Departments. This was in response to four departments' reports that their services were being strained including County jail over-crowding, waiting lists for detoxification and an overwhelming caseload for Child Welfare Services.

As a result, a Summit on Methamphetamine was held December 14, 2006 with 125 participants from the affected County departments and each of the communities within our County. During the Summit, recurring themes mentioned were the need to improve collaboration and communication, coordinate information and data, build upon existing efforts and expand public outreach.

In February 2007, the Board of Supervisors authorized the convening of the Methamphetamine Prevention Network (MPN) that has worked to develop strategies that build upon the themes identified at the Summit. This report reflects the culmination of work over the last 16 months by the MPN's Leadership Council and five task forces.

On November 18, 2008, the Board was asked to accept the Leadership Council's report and support their future efforts, including pursuing funding from various sources to implement strategies to fight addiction and its effects on County residents.

The specific recommendations to the Board are:

1. Accept the report from the MPN Leadership Council;
2. Endorse the transition of the MPN into the Substance Abuse Coordinating Council (SACC) that would address all forms of addiction that affect residents of Santa Barbara County, including meth addiction. The MPN would transition and convene as the Substance Abuse Coordinating Council during 2009.
3. Support the continuation of work started by the MPN under the newly formed SACC to continue implementing strategies to combat methamphetamine, which include:
  - a. Television/Coalition/County Media Campaign;
  - b. County Data Project;
  - c. Demonstration Project focused on treating parents and children;
  - d. Drug Endangered Children Protocol and Coordination;
  - e. Drug Paraphernalia Law Enforcement; and
  - f. Efforts to obtain grant and foundation funding to implement strategies.
4. Encourage cities within the County to:
  - a. Designate a member of the City Council and/or appropriate staff to serve on the MPN's Leadership Council/ Substance Abuse Coordinating Council; and
  - b. Contribute resources to the MPN and local coalitions to support their efforts.

The Substance Abuse Coordinating Council (SACC) is unique in that it includes representatives from four County departments, cities, non-profits and community coalitions that work on prevention, intervention and treatment of drug and alcohol abuse throughout the County. SACC is intended to function as an umbrella council addressing a broad range of substance abuse issues affecting families and children county-wide. The transition from the MPN to the SACC can be accomplished within the existing County budget and no additional funding is being requested at this time. The new Council and its Work Groups would pursue various funding sources to implement strategies summarized in this report.

# METHAMPHETAMINE PREVENTION NETWORK HISTORY OF STRATEGIES

**Summit Recommendations  
2006**

**Actions Initiated  
2007- 2008**

**Future  
Recommendations  
2008 - 2009+**

## **OVERALL APPROACH**

**Support the creation of a Meth Prevention Network** - continue to refine & ultimately implement strategies to combat meth. The MPN shall include representatives of stakeholder groups, community groups, schools, elected officials, law enforcement & social service agencies.

**Implement Meth Prevention Network Leadership Council & Task Forces** - the 22-member Leadership Council (LC) has been meeting since June 2007. Five task forces comprised of LC members & people from the community were formed to address identified issues & make recommendations presented in this report.

**Initiate Substance Abuse Coordinating Council** - continue the MPN's work & broaden their focus to other forms of addiction. The proposed SACC would meet at least twice a year. County staffing would be minimal to support this group.

## **PREVENTION**

*Developed by the Educated Communities & Professionals Task Force*

**Use public education and media strategies** - coordinated around one clear anti-meth theme to increase the public's knowledge of the problem.

**Employ multidiscipline, culturally relevant evidence-based education & mobilization strategies** - to promote social norms that discourage use and increase awareness of the dangers of meth use.

**Train Professionals** in the community to identify the signs of use so they will be able to intervene more effectively.

**Distribute Informational Brochures** – two brochures in both English & Spanish have been purchased & distributed to regional coalitions & government offices. To date, about 5,200 brochures have been distributed.

**Provide Training** – training that targets medical professionals and school resource staff has been developed and is being provided on an ongoing basis.

**1. Television/Coalition/ County Multimedia Campaign** including a documentary on meth intended to be aired on major television networks in the County on the same day and time, in both English & Spanish. This effort could include town hall meetings, in coordination with coalitions and schools.

## **INTERVENTION**

*Developed by the Safe Neighborhoods Task Force*

**Create interdisciplinary regional action teams** – based on a community policing structure to provide sweeps in local parks and in truancy and probation compliance cases.

**Conduct a series of community meetings** – to disseminate information and build strategic partnerships with communities.

**Partner with local businesses and media to disseminate information**—by conducting compliance checks and educating selected businesses

**Expand Drug Endangered Children (DEC) education** – to include all mandated reporters including: CWS, probation, police, teachers, hospitals, health professionals, and others.

**Conduct Operation Pipeline Drug Paraphernalia Enforcement** – a collaborative enforcement effort throughout the County to address the availability of drug paraphernalia being sold at local stores.

**Provide Drug-Endangered Children (DEC) Training & Coordination** – DEC protocols have been revised & the related Memorandum of Understanding among the law enforcement agencies has been approved. Training has been provided to school-based Family Service Coordinators & Youth Program staff pursuant to the revised protocols.

**2. Operation Pipeline** – continue coordinated sweeps by law enforcement throughout the County Sheriff's jurisdiction and in all the cities in the County.

**3. Drug Endangered Children (DEC)** - continue coordination of training, protocols, etc.

**4. Town Hall Meetings**—hosted by coalitions, law enforcement and/or local government will be held to educate and communicate with the public and gather input on substance abuse issues. Local media will be included as appropriate.

# METHAMPHETAMINE PREVENTION NETWORK HISTORY OF STRATEGIES

**Summit Recommendations  
2006**

**Actions Initiated  
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Recommendations  
2008 - 2009+**

## **TREATMENT**

*Developed by the Meth-Free Individuals, Families & Children Task Force*

**Establish a System of Care** - in the County or communities to ensure that the services and supports needed to obtain and maintain recovery are present where the individuals and families need it most - where they live.

**Develop a Meth Response Team**—to address individuals, children and families needs utilizing a timely, multidisciplinary approach to service delivery.

**Establish a Legislative Liaison or Committee** – which would seek legislative changes to remove barriers to services and fiscal resources that help individuals obtain and maintain a meth free lifestyle.

**Conduct Training for Judges & Child Welfare Services staff** – Judges working in SB County have developed training materials & conducted training for local judges on meth related issues.

**Conduct a Resource Survey** – the task force conducted a survey of providers to determine gaps in service and additional needs. Results have been used to help shape some of the treatment recommendations included in this report.

**Pursue Federal Legislation** – a meeting with Congresswoman Lois Capps was held to discuss the need for greater support for treatment services relating to meth addiction. Discussion included removal of barriers to services & additional fiscal resources that are needed.

**5. Treatment Demonstration Project** – this proposal would fund family-based, comprehensive long-term substance abuse treatment services, community-based children & family counseling, & mental health services. Providing these services ensures that fewer children enter foster care and can instead remain safely at home.

**6. Establish a Legislative Liaison or Committee** – that works with the Board of Supervisors Legislative Committee to seek changes removing barriers to services that help individuals obtain and maintain a meth-free lifestyle.

## **DATA & EVALUATION**

*Developed by the Outcomes & Evaluation Task Force*

**Identify existing data elements** - that are currently being collected by key agencies in the County.

**Identify future data elements** - we want agencies to measure.

**Identify measurable indicators/ outcomes** - for each of the other task forces' strategies & action plans.

**Develop a data base** - that will allow us to track indicators/outcomes over time.

**Identify existing data elements** –data that is collected by Social Services, Probation & Sheriff's Departments has been identified & shared with the other departments.

**Identify future data elements** – the data that we want agencies to measure has been identified and will be regularly adjusted as needs change.

**Identify measurable indicators/ outcomes** – indicators of success have been identified for each of the other task forces' strategies & action plans.

**7. County Data Project** – the Information Technology Dept. is working with the MPN on a research project that will gather data on clients from four County departments. Information will be de-identified and provided about groups of clients in summary reports. The research project will allow for a more comprehensive perspective and greater efficiency when making decisions about the delivery of services.

## II. Introduction

The effects of methamphetamine (meth) on residents of Santa Barbara County is devastating. County Departments have been struggling to meet increased demand for services with resulting County jail overcrowding, waiting lists for detoxification and overwhelming caseloads for Child Welfare Services. These impacts are attributed, at least in part, to meth abuse. Community coalitions from throughout the County that provide prevention, community education, and/or treatment services also have been challenged to meet the increased demand.

In response to the increase in meth use and its impact on the County and community, in December 2006, 125 people participated in the Summit on Methamphetamine convened by the County of Santa Barbara. During the Summit, recurring

themes mentioned the need to improve collaboration and communication, coordinate information and data, build upon existing efforts and expand public outreach.

In early 2007, the County Board of Supervisors supported the desire for a more collaborative effort by authorizing the establishment of the Methamphetamine Prevention Network (MPN). Beginning in June 2007, the MPN Leadership Council and five task forces were formed to work on short-term and long-term strategies to combat meth abuse by developing culturally appropriate interventions and strategies that build upon the themes identified at the Summit.

This report outlines the MPN's work from the last 16 months and its recommendations for the future.



### **MPN Mission Statement**

"The Methamphetamine Prevention Network (MPN) of Santa Barbara County is a collaborative effort of public and private organizations, coalitions and stakeholders working together to develop and implement prevention, treatment and intervention strategies to reduce the impact of methamphetamine use on Santa Barbara County residents."

# III. Background

## A. WHAT IS METHAMPHETAMINE?

Methamphetamine (meth) is a highly addictive, powerful, long-acting, physical, and psychological stimulant drug that affects the central nervous system within the brain. Methamphetamine is chemically related to amphetamine, but the central nervous system effects of meth are much greater.

Methamphetamine is known by a variety of street names including meth, speed, crank, crystal, CR, vitamin C, ice, go-fast, chalk, and glass. Often powdery, meth may be found in a variety of colors (due to differences in chemicals used to produce it and the expertise of the manufacturer) and it may emit a chemical odor. Meth can be smoked, snorted, eaten, or injected.

Methamphetamine increases the release of very high levels of the brain chemical dopamine, which is involved in motivation, the experience of pleasure, and motor function. Even small amounts of

meth can result in increased wakefulness and physical activity, decreased appetite, rapid or irregular heart rate, increased blood pressure, and hyperthermia. Long-term meth abuse can cause extreme weight loss, severe dental problems, anxiety, confusion, insomnia, mood disturbances, and violent behavior. Chronic meth use can also result in psychotic episodes including paranoia, and visual and auditory hallucinations.

Long-term meth abuse can also lead to addiction, i.e., a chronic, relapsing disease, characterized by compulsive drug seeking and use, and accompanied by chemical and molecular changes in the brain. Some of these changes persist long after meth abuse is stopped, and some reverse after sustained periods of abstinence.<sup>1</sup>

<sup>1</sup>National Institute of Drug Abuse Info Facts: Methamphetamine, 2008

### Short-Term Effects May Include:

- Increased attention and decreased fatigue
- Increased activity and wakefulness
- Decreased appetite
- Euphoria and rush
- Increased respiration
- Rapid/irregular heartbeat
- Hyperthermia

### Long-Term Effects May Include:

- Addiction
- Psychosis, including:
  - paranoia
  - hallucinations
  - repetitive motor activity
- Changes in brain structure and function
- Memory loss
- Aggressive or violent behavior
- Mood disturbances
- Severe dental problems
- Weight loss

Source – National Institute of Drug Abuse, "Methamphetamine Abuse and Addiction," 2006

## **B. METHAMPHETAMINE ABUSE IN OUR COMMUNITIES: WHAT'S BEING DONE & LATEST TRENDS**

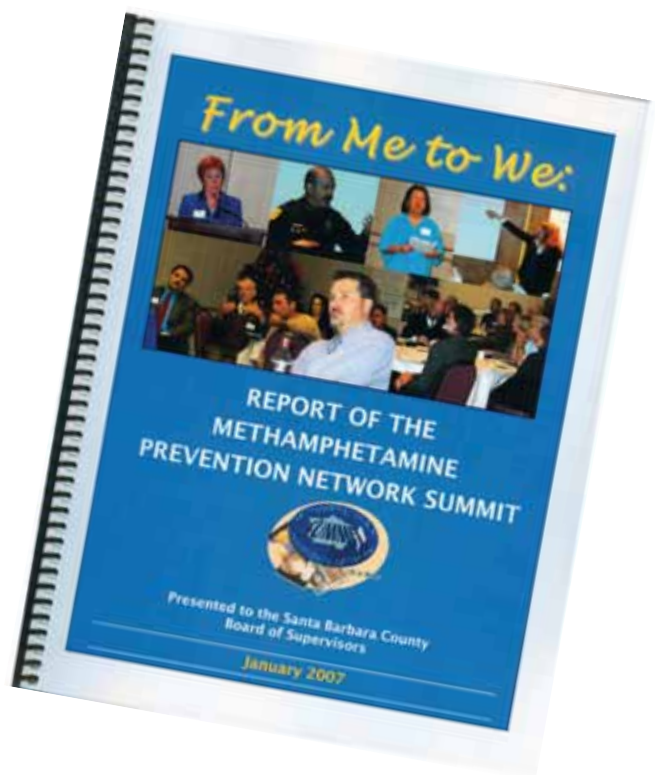
Methamphetamine has significantly affected the communities within Santa Barbara County for the past decade. Many social service, medical, educational and enforcement organizations have been impacted, resulting in waiting lists for detox and treatment, jail overcrowding, and increased demand for foster care placement. Yet the drain on departmental resources has caused many of these agencies to become engaged in trying to rid their communities from the hazards of this drug. Agencies, County departments, and community coalitions traditionally tackled this problem from within their own organization or community. With the creation of the Meth Prevention Network, coalitions, County departments and social service agencies have a forum to share ideas and successful programs, develop countywide strategies, and collaborate on creating both community and countywide changes. Here's a look at how our County is addressing the methamphetamine problem currently and what the latest trends reveal:

### **1. "FROM ME TO WE:" METHAMPHETAMINE PREVENTION NETWORK SUMMIT - DECEMBER 2006**

Several agencies along with others in the community, identified a growing need for a coordinated approach to deal with meth. These issues lead to the convening of groups at the Santa Barbara County Methamphetamine Prevention Network Summit on December 14, 2006.

The Summit was attended by 125 representatives from a wide array of stakeholder groups that developed a set of recommended prevention, intervention and treatment strategies. A list of these strategies along with the final recommendations to the Board of Supervisors can be found in the "*From Me to We: A Report of the Methamphetamine Prevention Network Summit, January 2007*" report and/or the MPN website at [www.stopmethinsbc.org](http://www.stopmethinsbc.org). Consensus from the Summit showed a need for:

- **Collaboration and communication** - Improved collaboration, coordination and communication between all affected individuals, businesses and agencies, both public and private, is needed;
- **Coordination of information and data** Increased availability of information and coordinated data collection in order to facilitate measurement of actual impacts and success of strategies is needed;
- **Build upon existing efforts** Strategies should build upon the efforts of existing local anti-drug community coalitions such as Fighting Back; and
- **Public outreach** Strategies should be developed for effective public outreach to communities & residents across the County.





## 2. COUNTY EFFORTS

### ALCOHOL, DRUG & MENTAL HEALTH SERVICES

ADMHS has perhaps the most comprehensive data on methamphetamine use. Their database represents individuals, both youth and adults, who have sought treatment for substance abuse through publicly funded treatment providers in the County. The population served includes low income, Medi-Cal eligible residents, and those involved in the criminal justice system.

Overall findings regarding individuals in treatment from June 2000 through June 2008 show that fiscal year 2006-2007 had the highest levels of treatment admissions for methamphetamine (Figure 1). In the same year, meth made up 37% of all treatment admissions, up from 19% just six years earlier. While youth admissions for methamphetamine have decreased dramatically since fiscal year 2004-2005, youth make up less than 5% of the treatment population, clearly making meth an adult drug (Figure 2).

The demographics of meth users include a fairly equal distribution countywide. Regionally, there are more Latino admissions in North County and a shift in Central County from primarily Caucasian to Latino in fiscal year 07/08. Since fiscal year 06/07, there has been an equalization of males and females in treatment admissions for meth; this is a change as males were higher in prior fiscal years.

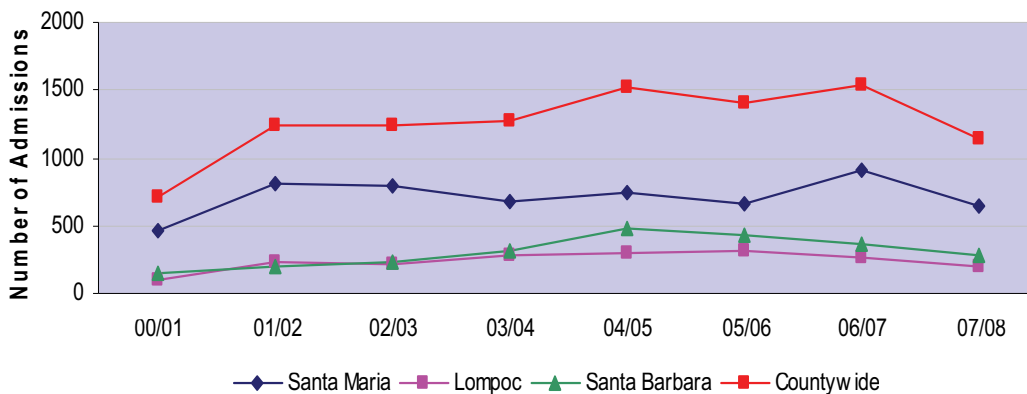
Regarding regional use trends, North County (Santa Maria and Guadalupe) has more drug admissions and

meth admissions than any other region. North County has the highest meth admissions, but the total number of admissions for all drugs of choice has been higher in South County for the last 3 or 4 years. Compared to North and South County (Carpinteria to Goleta), Central County (Lompoc, Santa Ynez, Solvang and Buellton) has the highest ratio of meth admissions to total admissions.

ADMHS has been very involved in drug-related issues. They hosted the UCLA Integrated Substance Abuse Programs community training; adopted research-based treatment curriculum and provided ongoing treatment for those abusing methamphetamine; developed a radio campaign to encourage treatment for meth abuse. ADMHS helped sponsor the Summit on Methamphetamine and supports the Methamphetamine Prevention Network (MPN).

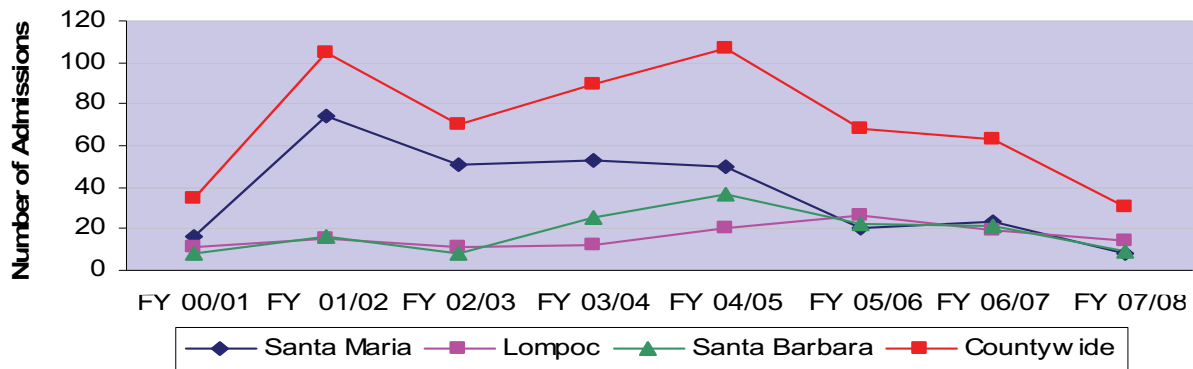
In 2008, ADMHS was awarded a SAMHSA Drug Court Grant for Methamphetamine Recovery Services (MARS) of \$280,000 a year for three years to specifically address Drug Court clients that have barriers to recovery from meth abuse. This grant provides 30 additional treatment slots and will offer ancillary services to approximately 300 clients including psychiatric services when needed. In 2008, ADMHS was awarded a perinatal grant for Lompoc to provide residential treatment services to women, their children and families. The goal of the grant is to facilitate reunification of families and avert foster care placements by placing mothers and children into the treatment setting together.

**Figure 1**  
**Fiscal Year Methamphetamine Treatment Admissions**  
**by County Region**



*Data may include clients with multiple episodes*

**Figure 2**  
**Youth Methamphetamine Treatment Admissions**



Youth: 0-17 years. Data may include clients with multiple episodes.

**PROBATION DEPARTMENT**

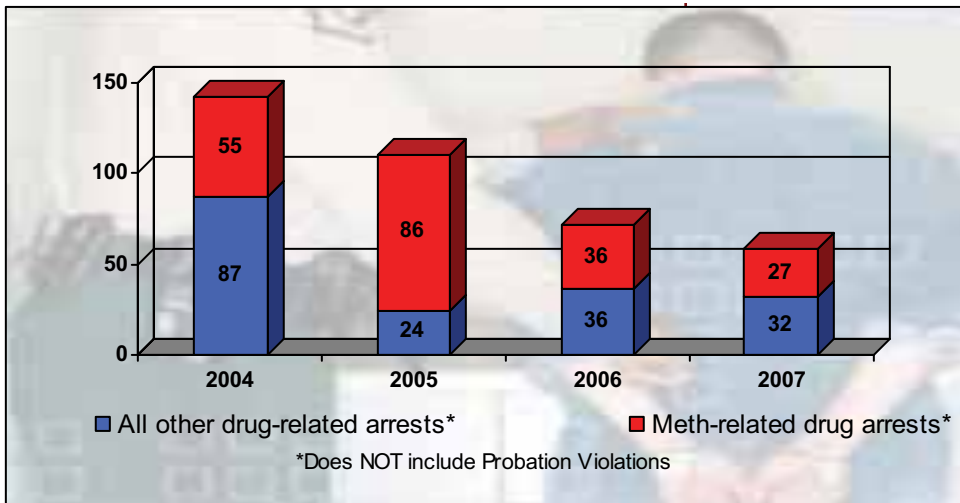
As part of their routine intake, the Probation Department gathers information on substance use, including methamphetamines. The Probation Department serves both the youth and adult populations. Overall findings regarding methamphetamine use show a peak in 2005, for youth and adults. For youth, Juvenile Hall drug related bookings for methamphetamine peaked at 78% in 2005 (Figure 3). Juvenile meth related bookings vs. other drug related bookings have decreased significantly since 2006; the percentage of other drug related bookings have increased since 2006 (alcohol & marijuana make up most other drug related juvenile bookings).

Juvenile Probation primarily serves the 12-17 year old population. Of the 1260 juvenile offenders on active supervision, 1148 or 91% have testing for alcohol/drugs as a term or condition.

For adults in Drug Court, methamphetamine remains the primary drug of choice for North County clients since 1996 and since 2004 for clients in South County. The total number of clients in adult Drug Court for methamphetamine peaked in fiscal year 2004/2005 and has decreased since then.

Despite the decrease in methamphetamine use, the majority of adult or juvenile offenders have problems with drugs/alcohol. Currently there are 5224 adult offenders on active supervised probation. Of this number 3571 (or 68 %) have a testing clause for alcohol/drugs as a term and condition of probation. Of the 5224 offenders, 1952 or (37%) have an active case for an alcohol or drug offense conviction. In conducting substance abuse testing in FY 07-08, 208 offenders or 17% of offenders tested positive for methamphetamines. Only positive tests for marijuana at 29% and opiates at 21% were higher.

**Figure 3**  
**Drug Related Bookings**  
**Santa Barbara County Juvenile Halls**



**DEPARTMENT OF SOCIAL SERVICES**

Of greatest concern regarding methamphetamine abuse has been the increase in the number of children placed in foster care. Santa Barbara County’s Department of Social Services is charged with providing foster care services for children who are neglected or abused, often a result of parental methamphetamine use.

While the Department of Social Services (DSS) does not track methamphetamine use specifically, parental substance abuse is closely monitored. Overall findings from Child Welfare Services, a division within

Social Services, report that from 2001 - 2007 a peak in the number of child welfare cases with a substance abuse issue occurred in 2006 (Figure 4).

In 2007, 69% or 578 children were placed into foster care as the result of parental substance. Overall, substance abuse remains the greatest contributing factor in child abuse and neglect cases.

Since 2005, the North County continues to have the highest number of new cases with parental substance abuse , while Central County has decreased

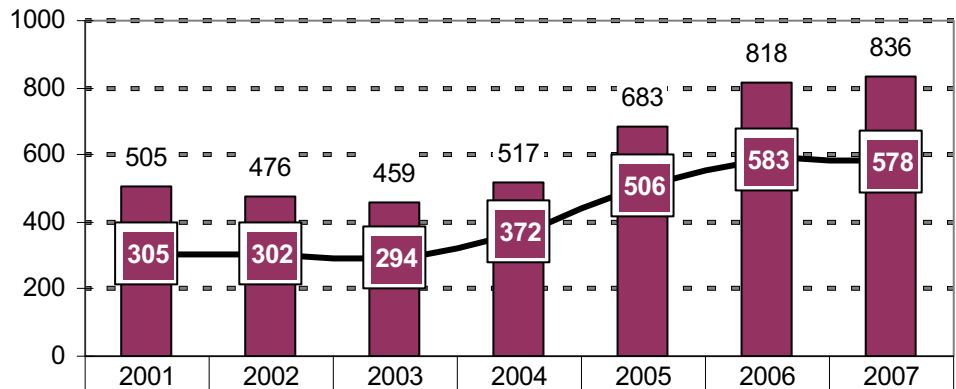




and South County has risen slightly.

Regarding meth-related work, DSS helped sponsor the Summit on Methamphetamine in December 2006 and provides staff support for the Methamphetamine Prevention Network (MPN). They also implemented new assessment tools allowing for better decision making regarding parental substance use and foster care placement. DSS has made extensive effort to train staff on substance abuse, particularly methamphetamine.

**Figure 4**

**Children In Foster Care for at Least One Day in the Calendar Year**



 In Foster Care for At Least One Day During the Calendar Year	505	476	459	517	683	818	836
 In Foster Care for At Least One Day During the Calendar Year Due to Parental Substance Abuse	305	302	294	372	506	583	578

## SHERIFF'S DEPARTMENT

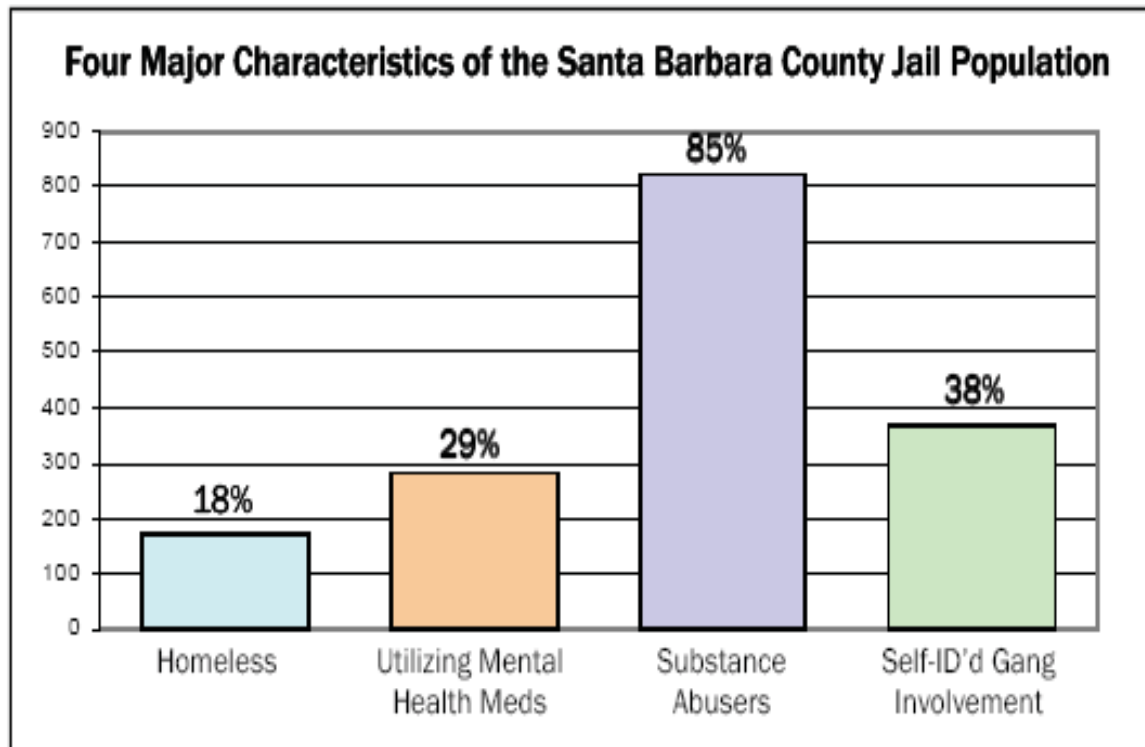
Currently, the Sheriff's Department does not track methamphetamine specifically, but an overwhelming majority of inmates in the County Jail have substance abuse problems (Figure 5). The Sheriff's Department has been dealing with jail overcrowding for years with inmates being released early because the jail is above capacity. There are also significant waiting lists for inmate participation in programs that are designed to reduce recidivism, including the Sheriff's Treatment Program to address addiction that has a 30-60 day waiting period.

The Sheriff's Department often deals with drug related issues, particularly problems associated with the sale and use of methamphetamine. Meth labs

have significantly decreased as a result of laws passed in mid 2000 that limit the ease of purchasing products such as pseudoephedrine, a major ingredient used in making meth.

In addition to daily law enforcement, the Sheriff's Department has been active in the prevention of methamphetamine problems. A significant number of educational presentations on meth have been conducted by a Sheriff's officer in the community as well as at various schools. The department has also devoted staff to participate on the Methamphetamine Prevention Network. The Public Information Officer is playing a key role in the media campaign by producing the documentary on methamphetamine and working with the local English and Spanish language television networks to support this campaign.

Figure 5



Note: Numbers and percentages add to more than 100% because some inmates fall into more than one category.

Source: Final Report and Recommendations, Blue Ribbon Commission on Jail Overcrowding, Feb. 2008

### 3. COMMUNITY COALITION EFFORTS

Santa Barbara County is fortunate to have community coalitions that are actively engaged in the fight against drug abuse. These coalitions, many of whom started as grass roots efforts, are made up of diverse community members and agency representatives with the expertise and passion to address difficult drug issues, particularly methamphetamine. Five coalitions representing different communities throughout the county participate on the Meth Prevention Network, providing a regional perspective and community voice in the development of prevention, intervention and treatment initiatives for our County. Multiple community coalitions in partnership with various county departments developing shared strategies and programs is what makes this collaborative unique. This public private collaboration has been integral to the success of this effort and is critical in the ongoing fight against methamphetamine.

**FIGHTING BACK SANTA MARIA VALLEY** – is a coalition comprised of local political and business leaders, governmental and private youth/family service agencies, law enforcement, faith organizations, health providers, youth and parents, serving children, teens and families in the Santa Maria Valley. The impetus for the coalition's formation was Santa Maria Valley residents' deep concern about rising drug use and related delinquent behavior among our youth. Our mission is to make a difference in the lives of children, teens, and their families by offering a variety of prevention and educational services, intervention, and partnering with treatment agencies to help address



**FIGHTING BACK**  
SANTA MARIA VALLEY  
"Tomorrow's Leaders Fighting for Today"

problems of risks associated with alcohol, tobacco and other drug use, as well as violence, teen pregnancy, abuse, crime, school dropout and other related social issues. Fighting Back Santa Maria Valley has conducted several community forums, public service announcements, in-service to teachers, peer to peer class presentations on Meth and distributed educational brochures on Meth prevention throughout their community. This year the coalition received a \$1,377,715.00 grant that will support prevention, intervention, treatment and mental

health services to the youth in Santa Maria Valley. It is the collaboration among these sectors that provides our community the programs and services they need.

Website: [www.fightingbacksmv.com](http://www.fightingbacksmv.com).

### SANTA YNEZ VALLEY COALITION TO PROMOTE DRUG FREE YOUTH

Formed in 2005 by the staff at People Helping People and other community members, the Santa Ynez Valley Coalition to Promote Drug Free Youth is a collaboration of volunteer community leaders dedicated to promoting healthy lifestyles and preventing and reducing alcohol and other substance abuse among youth and ultimately adults. The Coalition focuses on advocating for the implementation of research based best practices, policies and prevention programs. The Coalition will facilitate and take collective action resulting in conditions where youth in the Valley are healthy, safe, and resilient and can thrive. The Santa Ynez Valley Coalition to Promote Drug Free Youth has been active in distributing meth prevention brochures throughout the Valley and has provided training to its school resources personnel. Website: [www.syvdrugfree.org](http://www.syvdrugfree.org)



Website: [www.syvdrugfree.org](http://www.syvdrugfree.org)

### LOMPOC RECOVERY TASK FORCE

When the Methamphetamine Prevention Network was first formed, Lompoc Valley was fortunate to have the Lompoc Recovery Task Force as a coalition addressing alcohol and drug issues in their community. Operating as a grassroots coalition, the Task Force received support from the Lompoc Valley Health Care Organization (LVCHO) for facilitation and coordination. The Task Force had two goals: to bring detox services to Lompoc and to establish a perinatal treatment program for women with children. After accomplishing these two goals in 2008 and without any formal funding or further support, the Task Force disbanded. Since then, an informal network of individuals developed and two members from this network, Kevin Smith of Zona Seca and Pat Brady of Good Samaritan Services, serve on the Leadership Council. Through the former Task Force as well as individual leadership, Lompoc Valley has conducted forums on methamphetamine, distributed educational brochures on methamphetamine and created a video on meth for airing on their local cable channel.

**FIGHTING BACK SANTA BARBARA**

Started in September 1992, Santa Barbara’s Fighting Back initiative is a community-wide effort to build a safer, healthier, and drug-free community by reducing the demand for alcohol and other drugs. The initiative began by implementing a comprehensive plan to address the problems caused by substance abuse. It involves the collaborative efforts of concerned members of our community. The community-wide strategies developed through Santa Barbara’s Fighting-Back evolved into a long-term local intervention designed to reduce the problems associated with substance use and abuse. The Fighting Back coalition includes businesses, media, secondary schools, health care, non-profit and service organizations, criminal justice, law enforcement, higher education, several county offices and concerned individuals. Together, we are working to fight drug abuse through prevention, intervention, treatment and aftercare. The goals of Fighting Back include:



1. Reducing substance abuse among youth aged 12-17; and
2. Increasing treatment services for youth, adults, and families; and

3. Reducing excessive alcohol consumption and the related mayhem.

Website: [www.cadasb.org/en/fighting-back](http://www.cadasb.org/en/fighting-back)

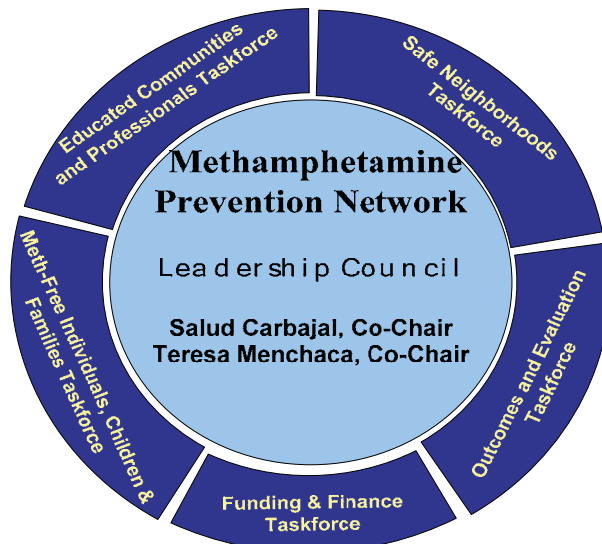


**CARPINTERIA CARES FOR YOUTH –**

Carpinteria Cares for Youth is a grassroots task force that aims to support youth and their families through advocacy, education, collaboration, and information dissemination. Made up solely of volunteers, their primary goal is to facilitate the development of a positive environment for youth in Carpinteria by identifying needs and facilitating program development and mental health resources in Carpinteria. Carp Cares has conducted forums on methamphetamine, distributed educational brochures throughout their community, and supported Rincon High School students in developing their own meth prevention brochures. They have also collaborated with the Carpinteria Unified School District to establish more counselors on all campuses as a result of the START program; advocated for Teen Court and is now working with the City of Carpinteria on a joint use agreement for the beginnings of a community center that will be a place for youth to hang out and have small group meetings, including recovery groups.

Website: [www.carpcares.org](http://www.carpcares.org)

**Figure 6  
Leadership Council and Task Forces**



## C. METHAMPHETAMINE PREVENTION NETWORK - 2007 AND 2008

Participants at the Summit on Methamphetamine achieved consensus on the need to collaborate around prevention, intervention, treatment and enforcement approaches. Attendees spoke of the unique efforts within each of the local communities to address problems associated with meth and identified a need to be more effective by collaborating with other coalitions and organizations in the County. As a result, the Methamphetamine Prevention Network (MPN) was endorsed by the Board of Supervisors in January, 2007 and formally created in June, 2007. The MPN is comprised of community coalitions, non-profit organizations, and governmental agencies. The MPN is a public and private collaborative established to reduce methamphetamine problems and improve collaboration, coordination and communication throughout Santa Barbara County. The MPN consists of a 22 member Leadership Council and five Task Forces. Over the last sixteen months, the focus for the Leadership Council and its five task forces has been:

- ✦ **Prioritize the strategies** developed at the Summit and assess them for relevancy and feasibility of implementation;
- ✦ **Gather additional information** about the strategies, including data needs, groups involved in im-

plementation and potential funding;

- ✦ **Begin implementation** of short-term strategies;
- ✦ **Develop long term strategies** through its five task forces and Leadership Council.

### 1. LEADERSHIP COUNCIL

The 22 member Leadership Council is made up of representatives of community coalitions throughout the County as well as County departments that are involved in meth issues. Co-chaired by First District Supervisor Salud Carbajal and Fighting Back Santa Maria Valley Executive Director Teresa Menchaca, their purpose is to provide guidance and overall direction to the project. Over the last sixteen months, the Council and its five task forces sought to identify and implement strategies that would make the existing prevention, intervention and treatment systems more efficient and achieve the overall goals of the MPN. While putting various short-term recommendations into action in 2007 and 2008, the Council was also working to identify longer term recommendations that would provide meaningful improvements in our ability to reduce meth use and its effects on residents of the County. The short-term recommendations that, for the most part, have already been implemented are discussed below. The future recommendations of the Leadership Council and task forces are included in Section IV.



## 2. MPN TASK FORCES

Early in the Leadership Council process, task forces were established to assess and refine the strategies developed at the Summit. Task forces were created based upon the broad areas of prevention, intervention and treatment and were made up of individuals with expertise in each of these specialties. The Council and its task forces began implementation on strategies that were considered short term. A summary of these accomplishments is discussed following the description of the task forces below. The participants in each task force are listed in Appendix A. The task forces and their goals are:

### EDUCATED COMMUNITIES & PROFESSIONALS TASK FORCE

Of all the suggested recommendations during the Summit on Methamphetamine, the overwhelming priority was prevention. The Educated Communities & Professionals (EC&P) Task Force was formed to help further refine the prevention recommendations from the Summit, with a special interest in educating and reaching out to our local communities. The following strategies have been the task force's priorities for the past year:

- Use public education and media strategies coordinated around one clear anti methamphetamine theme to increase the public's knowledge of the nature and scope of the problem;
- Employ multidiscipline, culturally relevant evidence-based education and mobilization strategies to promote social norms that discourage use and increase awareness of the dangers of methamphetamine use among all age groups; and
- Train professionals in the community to identify signs of use so they will be able to intervene more effectively.

Chaired by Alice Patino, Councilwoman for the City of Santa Maria, President of the Board for Santa Maria Valley Fighting Back and Assistant to 4th District Representative Joni Gray, the Educated Communities & Professionals Task Force acquired 12,000 brochures on methamphetamine, of which 5,200 have been distributed by regional community coalitions and at government offices throughout the County. The Task Force has been instrumental in planning the development of a multimedia campaign

that will include a documentary intended to be aired on all major networks in the County on the same day and time, including both English and Spanish language television. The Task Force identified medical professionals as their target audience for training and has conducted numerous trainings throughout the County. The task force has also recommended the creation of a "voucher" type program that would create an incentive for medical professional to complete accredited CEU courses within their professional scope on methamphetamine.



### METH FREE INDIVIDUALS, CHILDREN & FAMILIES TASK FORCE

The focus of the Meth Free Individuals, Children & Families Task Force has been to examine treatment needs and other services that would support recovery from meth abuse and addiction. The strategies of this task force include:

- Establish a System of Care in the County or communities to ensure that the services and supports needed to obtain and maintain recovery are present where the individuals and families need it most - where they live.
- Develop a Meth Response Team to address individuals, children and families utilizing a timely, multidisciplinary approach to service delivery.
- Establish a Legislative Liaison or Committee that would seek legislative changes to remove barriers to services and fiscal resources that help individuals obtain and maintain a meth free lifestyle.



Chaired by Lois Craig, Associate Executive Director of People Helping People, this task force has supported the training of Child Welfare Service staff and judges on meth addiction. They also conducted a survey to gather information on the gaps in treatment and housing support as well as hosted a meeting with Congresswoman Lois Capps. Held at Casa Serena, a residential treatment facility in Santa Barbara, task force members discussed the need for greater support for treatment services, both financially and legislatively, while residents of the program spoke about their experience trying to get sober.



Pictured: Superior Court Judge Rogelio Flores, Congresswoman Lois Capps, and Santa Barbara County Alcohol & Drug Program's Interim Division Chief, Nancy Gottlieb.

### SAFE NEIGHBORHOODS TASK FORCE

Law enforcement plays an important role in helping keep our communities drug free and safe from problems associated with meth. The Safe Neighborhoods Task Force includes representatives from all the law enforcement agencies throughout the County, including the Santa Barbara Regional Narcotics Enforcement Team, local police departments, the Sheriff's Department and Probation. The strategies of the Safe Neighborhood Task Force include:

- Create interdisciplinary regional action teams based on a community policing structure that include agencies such as the social service agencies, law enforcement, fire, building and zoning, and community groups to provide sweeps in local parks and in truancy and probation compliance cases;
- Conduct a series of community meetings to

disseminate information and build strategic partnerships with communities;

- Partner with local businesses and media to disseminate information by conducting compliance checks and educating selected businesses on products commonly used in the production or use of meth. Businesses may include: pharmacies, feed stores, beauty supply businesses, hotels, agricultural community (i.e. ranchers and farmers, etc), & other businesses as identified;
- Expand Drug Endangered Children (DEC) education to include all mandated reporters including: Child Welfare Services, Probation, police, teachers, hospitals, healthcare professionals, and others.

Chaired by Ken Bambrick, Task Force Commander of Santa Barbara Regional Narcotics Enforcement Team (SBRNET), the Safe Neighborhoods Task Force has been involved in revising the DEC protocols and conducted training on DEC to school-based Family Service Coordinators and Youth Program staff. The Safe Neighborhoods Task Force has been instrumental in getting a collaborative enforcement effort to occur throughout the County that would address the availability of drug paraphernalia being sold at local stores, such as smoke shops.

### FINANCE TASK FORCE

Created in spring 2008, the purpose of the Finance Task Force is to solicit and secure funding to implement the various meth-related strategies recommended in this report. Chaired by Dr. Carrick Adam, the Finance Task Force has created a brochure to explain the goals of the Meth Prevention Network and to assist with the promotion of strategies needing financial support. Council members will attempt to seek funding from a variety of sources, including local foundations, cities and private groups.



## **OUTCOMES & EVALUATION TASK FORCE**

As the MPN was formed, the importance of measurable outcomes became apparent and the Outcomes & Evaluation Task Force was formed. Members included representatives from County departments impacted by methamphetamine (Sheriff, ADMHS, Probation, Public Health, and Social Services), People Helping People, and UCSB. Their primary charge is to ensure that an evaluation component is included as programs, strategies and/or services are developed. The taskforce strategies include:

- Identify the data elements that are currently being collected by key agencies in the County;
- Identify the data elements we want agencies to measure;
- Work with other MPN task forces in developing and identifying measurable indicators/outcomes for each of their strategies/action plans;
- Develop a database that will allow us to track indicators/outcomes over time.

Chaired by Susan Klein-Rothschild of the Public Health Department, the task force has made significant progress towards accomplishing these strategies. This committee went through an exhaustive review process to determine the extent to which data on meth was being collected by our County departments. Working with Daniel Milei of the Information Technology Department, this task force has taken a lead role in developing a research project to gather data from four key departments that would result in improving the effectiveness of interventions. Also, the task force focused on monitoring data throughout the County regarding methamphetamine.

### **3. ACCOMPLISHMENTS TO DATE BY LEADERSHIP COUNCIL & TASK FORCES**

The Leadership Council includes members from the South Coast and North County as well as the Santa Ynez and Lompoc Valleys. Four County departments have representatives on the Council: Alcohol, Drug and Mental Health Services (ADMHS), Probation, Sheriff, and Social Services. The Council also includes members from non-profit agencies and community coalitions from Carpinteria, Lompoc, Santa Barbara, Santa Maria and Santa Ynez.

Four task forces were formed early in the process to address prevention, intervention, treatment and data collection and outcomes. Each task force includes members of the Leadership Council and others from the community with expertise in the topic under discussion. The task forces met monthly and did a majority of the research and collaboration that lead to the recommendations in this report. The fifth group, the Finance Task Force, convened in spring 2008 and will be involved in helping secure funding for implementing the recommendations.

Over the last sixteen months, all five task forces sought to identify and implement strategies that would make the existing prevention, intervention and treatment systems more efficient and achieve the overall goals of the MPN. While putting various short-term recommendations into action in 2007 and 2008, the Leadership Council was also working to identify longer term recommendations that would provide meaningful improvements in our ability to reduce meth use and its effects on residents of the County. The short-term recommendations that, for the most part, have already been implemented are discussed below.

### **INFORMATIONAL BROCHURES**

The Task Force identified a need in Santa Barbara County for printed material with a clear, consistent, current, and accurate anti-methamphetamine message to be placed in key public locations countywide to discourage meth use, increase awareness of the dangers of meth, and prompt referrals for treatment.

Provided by ADMHS's Alcohol & Drug Program, two different brochures with an anti methamphetamine message and treatment referral information were distributed in public locations throughout the County (see Figure 8). With 12,000 brochures purchased and 5,200 already distributed, the goal of this effort was to discourage meth use, increase awareness of the dangers of meth, and prompt referrals for treatment. Distribution was accomplished by staff and volunteers with the regional community coalitions and County agencies.

**Figure 8**  
**Informational Brochures**



Links to sample copies of the brochures have been added to the MPN website at [www.stopmethinsbc.org](http://www.stopmethinsbc.org), including information on how interested persons may purchase additional copies in the future. The Task Force conducted a process evaluation by creating a web-based survey where volunteers could log where, when, and to whom the brochures were distributed. Data has been collected on the distribution of 5,200 brochures.

**DRUG ENDANGERED CHILDREN (DEC)  
MEMORANDUM OF UNDERSTANDING  
COORDINATION**

When a child has been physically exposed to methamphetamine, many agencies respond to address the care and well being of the child. As a result, protocols have been developed statewide to help establish roles and procedures. In Santa Barbara County, DEC protocols began in May, 2006 with the signing of a Memorandum of Understanding (MOU) by each of the agencies involved. The annual signing of the MOU and implementation of DEC protocols have been coordinated by SBRNET and the Safe Neighborhood Task Force.

**TRAINING**

Identified as a critical need at the Summit, training programs have been established to broaden the knowledge of methamphetamine throughout our County. A team of trainers have developed curriculums tailored to particular audiences, for example, medical personnel. Outcomes are being monitored and additional training will be provided. Trainings included:

- **Judges** – An informational briefing in July, 2008 to all Judges on methamphetamine treatment models that are appropriate for the needs of the abuser.
- **School Resource Staff** – Through People Helping People, resource officers at Santa Ynez Valley schools were trained in Drug Endangered Children (DEC) protocols.
- **Medical Professionals** – Physicians, nurses, and medical assistants were trained on identifying the signs of meth use and abuse, reporting children at risk, and making referrals for treatment.
- **Child Welfare Services** – Child Welfare staff has received training on issues of meth recognition, abuse & treatment.

**RESOURCE SURVEY**

In spring 2008, the Meth Free Individuals, Children & Families Task Force conducted an informal survey of providers to determine gaps in service or additional needs. Results from this survey were presented to the Leadership Council in May and have been used to help shape some of the treatment recommendations.

**Resource Survey Results**  
**2008**

**Unmet Community Prevention Needs**

- Media and community education
- Agency and service coordination
- School based prevention activities
- Family support services
- Prevention strategies for the homeless, parents/families, youth and perinatal populations

**Unmet Community Treatment Needs**

- Regional low cost treatment services
- Methamphetamine specific treatment services
- Residential beds
- Detox beds, including medical detox
- Non-Prop 36 services
- Clean & sober living, particularly for women and their children together
- Treatment for co-occurring conditions
- Aftercare services
- Treatment for youth and the indigent
- Walk in services

**Unmet Community Outreach Needs**

- Funding for anti-drug materials
- Targeted outreach strategies to the homeless, parents/families, youth and “hidden users”
- School based outreach counselors
- Regional & grassroots outreach services

## IV. PRIORITIES & RECOMMENDATIONS

The Leadership Council and Task Forces have devoted sixteen months to studying the meth problem in the County. They have implemented short-term solutions and developed long-term recommendations. The programs initiated during the Leadership Council's tenure, described in the previous section, are assumed to continue as long as they produce positive outcomes. Many of the significant recommendations relate to the four major areas that address meth use and abuse: Prevention, Intervention, Treatment and Data & Evaluation. The following seven strategies are recommended for implementation by the Meth Prevention Network as it evolves into the Substance Abuse Coordinating Council as described in Section V.

### PREVENTION STRATEGIES

Education and community dialogue were strongly advocated for at the Summit as a crucial strategy to prevent meth use and addiction. The Educated Communities & Professionals task force has done extensive work to provide education throughout the county, and is now advocating for the development of a media campaign that could also educate the community on the devastating impact of methamphetamine, described below.

**For every \$1.00 spent on prevention,  
\$5.00 is saved in treatment.**

NIDA, "Preventing Drug Use Among Children & Adolescents"

#### 1. TELEVISION/COALITION/COUNTY MEDIA CAMPAIGN

Of all the strategies of the Methamphetamine Prevention Network, the Media Campaign is the perhaps largest collaborative effort and most urgent. Scheduled for implementation in January or May, 2009, this media project is designed to educate youth and their parents about the harms of meth use as well as provide a message that treatment is available and people can recover if addicted. The campaign includes:

- a. *Meth documentaries* - The creation of two documentaries (English and Spanish), featuring individuals and families impacted by methamphetamine. The goal is to have the documentaries aired on television in "roadblock" format, meaning being shown on all television networks on the same night at

the same time;

- b. *Two Town Hall meetings* (English & Spanish) co-hosted by television network anchors as part of the media "roadblock" featuring community leaders and residents. Community coalitions such as Fighting Back Santa Maria Valley will help support and organize the meeting;
- c. *Meth phone bank to provide info* - A phone bank to provide information and referral to callers on the night of the media roadblock and in subsequent days;
- d. *School involvement* - Involvement by the schools in promoting the viewing of the documentary and coinciding curriculum instruction in the classroom; and
- e. *Providers ready* - Engagement of prevention and treatment providers in preparing for increased demand following the media event.

*Goals* – The overall goal of the campaign is to increase the awareness of County residents to the harms associated with meth use. Additional goals include increasing the awareness and use of treatment services for those in need of treatment.

*Involved Agencies* - This project is truly a collaborative effort and currently includes the Sheriff's Department, Alcohol, Drug & Mental Health Services, Social Services, the Board of Supervisors, and Santa Maria Valley Fighting Back. As the project develops, other organizations and businesses will be involved, including: prevention and treatment providers, television stations, radio stations, newspapers, and primary and secondary schools within the County.

*Funding* – Financial support is needed for this project. The MPN is actively seeking the assistance of foundations and businesses to help finance this effort. As with other communities who have implemented similar efforts, it is anticipated that some costs will be donated or provided in-kind.

*Implementation* – Planning and development of the media project has already begun. Social Services, Alcohol, Drug & Mental Health Services and the Sheriff's Department have identified staff to manage this effort. MPN's Leadership Council has provided

oversight and decision-making while the Educated Communities & Professionals Task Force has developed an initial plan. A committee of key individuals is working on the documentary. The intended air date of the documentary is mid January 2009 or May 2009.

*Performance Outcomes* – Formal outcomes have yet to be developed, but it is anticipated that viewership and treatment referral will be two indicators of interest. Since collaboration is such a significant part of this project, an indicator on collaboration may be included.

*Requested Board Action* – Advocacy and support.

## **INTERVENTION STRATEGIES**

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Meth and other drug use have a profound effect on law enforcement agencies, the courts and the community. Law enforcement agencies throughout the County have been working together to address drug use through a variety of means, including coordinated efforts to reduce drug paraphernalia availability and efforts to protect children as described below.

### **2. DRUG PARAPHERNALIA LAW ENFORCEMENT – OPERATION PIPELINE**

Developed by the Safe Neighborhood Task Force, Operation Pipeline is a countywide program that brings together all the law enforcement agencies throughout the County in an effort to ensure that existing drug paraphernalia laws are enforced in Santa Barbara County.

*Goals* – The goals of the program are twofold: to reduce the availability of drug paraphernalia sold in local retail stores and to give a positive message to the community of the importance of drug prevention and the success of drug treatment.

*Involved Agencies* - SBRNET, Santa Barbara County Sheriff's, District Attorney, Probation Departments, and Police Departments from the cities of Santa Barbara, Santa Maria, Lompoc and Guadalupe.

*Funding* - Existing funding from the various law enforcement agencies involved in this effort will be used for this project.

*Implementation* - This program is based on a successful model implemented in San Diego County. The mechanics of the program focus on an "Informational Notice" and educational material sent/given out to all businesses/owners by law enforcement, a media event (press conference by the SBRNET Executive Board/ MPN), and law enforcement follow-up- (compliance checks/ undercover operations). The timing for start of this program is still to be determined, but it has been suggested that it coincide with the MPN Media Event which is still in development or Red Ribbon Week. This operation will be coordinated by the Safe Neighborhood Task Force and SBRNET.

*Performance Outcomes* - Fewer retail establishments selling drug paraphernalia and the reduced availability of products used to make meth in Santa Barbara County.

*Requested Board Action* - Advocacy and support.

### **3. SANTA BARBARA COUNTY DRUG ENDANGERED CHILDREN (DEC) PROTOCOL & COORDINATION**

Santa Barbara County Drug Endangered Children (DEC) Protocol was implemented by Santa Barbara County law enforcement agencies in May 2006. The Santa Barbara County Narcotics Enforcement Team (SBRNET) was assigned responsibility for coordinating the implementation of the Protocol. The Safe Neighborhood Task Force will remain an ongoing committee and will assist SBRNET in effectively coordinating the DEC Protocol.

*Goal* - The goal of DEC is to ensure more effective protection to children exposed to drugs through the use and coordination of the Santa Barbara County Drug Endangered Children (DEC) Protocol.

*Involved Agencies* - SBRNET, Santa Barbara County Sheriff's, District Attorney, Public Health, Social Services and Probation Departments, Police Departments of the cities of Santa Barbara, Santa Maria, Lompoc and Guadalupe.

*Funding* - The current SBRNET staff responsible for coordinating the DEC Protocol is partially funded by the Probation Department. In order for this staff to devote more time to this responsibility additional funding is needed.

*Implementation* - The Safe Neighborhood Task Force will continue periodic meetings and consultations with the SBRNET DEC Coordinator to monitor and improve the ongoing implementation of the DEC Protocol by the various agencies in Santa Barbara County.

*Performance Outcomes* - Increased protection of drug endangered children.

*Requested Board Action* – At the point that a proposal is submitted to a funding source, the Task Force would ask that the Board of Supervisors take action to support the funding request.

#### **4. TOWN HALL MEETINGS**

Past experience has shown that town hall meetings are an effective tool to gather community input and perspective as well as disseminate information. Meetings would be held as needed to support and publicize coordinated drug-related intervention activities or gather community members input on drug related concerns. These would be coordinated with law enforcement throughout the County, community coalitions (Fighting Back Santa Maria Valley, Santa Barbara and Santa Ynez), local governments and the media as appropriate.

### **TREATMENT STRATEGIES**

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Treatment agencies in our County provide a valuable service to those who are seeking to address their addiction. The focus of the treatment task force has been to examine the treatment needs in Santa Barbara County that are currently not offered and attempt to propose strategies that address the gaps. The following two strategies are proposed to help with this need:

#### **5. DEMONSTRATION PROJECT – TREATMENT OF PARENTS AND CHILDREN SUFFERING FROM METH ADDICTION**

This proposal would fund family-based, comprehensive long-term substance abuse treatment services, community-based children and family counseling, and mental health services. Providing these services would reduce the need for children to enter foster care, but instead, remain safely at home. If removal is imminent, funding will allow parents to receive long-term drug and alcohol treatment that is

**For every \$1.00 spent on treatment,  
\$12 is saved in crime  
and health care costs.**

National Institute on Drug Abuse, "Principles of Drug Addiction Treatment: A Research-Based Guide," 2000

critical to combat methamphetamine use and supporting the reunification process.

*Goals* - The goals of the program are:

- Reduce risk factors contributing to substance use/abuse by both parents and children;
- Promote and support parental sobriety;
- Enhance relationships between parents and children;
- Increase self-confidence, self-esteem, and self-reliance of parents and children.

*Involved Agencies* - This proposal utilizes case managers, in-home community workers and existing public and private agencies in support of families living in their home following completion of their assessment phase and short-term treatment modalities.

*Funding* - Funding will be sought through federal and state grants, foundations, and private funding; as well as investigating possible options through existing funding streams such as Title IV E. Pursuing this option may require legislative action, which would require Board approval.

*Implementation* - The success of this comprehensive aftercare program depends on four major conditions: effective case management, multiple and collaborative treatment programs, successful family utilization of treatment services and the physical resources to move ahead with sobriety and self-reliance. The Department of Social Services and Alcohol, Drug & Mental Health Services will work collaboratively to manage the implementation of this demonstration project.

*Performance Outcomes* - The proposed project would contract with a university to provide an evaluation and a measurement of success. The evaluation will utilize treatment records and client interviews to measure client success and impact of program activities for families and their children.

*Requested Board action* – When the proposal is submitted to a funding source, the MPN would ask the Board of Supervisors to take action to support the funding request.

## **6. ESTABLISH A LEGISLATIVE LIAISON OR COMMITTEE**

A meeting was held earlier this year with Congresswoman Lois Capps and others to address possible federal assistance in treating meth addiction and abuse. The Council concluded that in order to help individuals obtain and maintain a meth free life, legislative changes are needed, both programmatically and fiscally. As the MPN evolves (see discussion in Section V.), the newly proposed Substance Abuse Coordinating Council could pursue these changes in partnership with the Board of Supervisors Legislative Committee.

## **DATA & EVALUATION STRATEGIES**

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Use of data for planning, monitoring and evaluation is imperative to the work of the MPN. The County has several departments that collect data related to substance abuse including Social Services, Sheriff, District Attorney, and ADMHS. Improving the collection and use of this data is a priority for the Leadership Council and its partnering County departments.

### **7. COUNTY DATA RESEARCH PROJECT**

The MPN was identified by the County's Information Technology Department to serve as a pilot in the development of a research project that would result in increasing the effectiveness of interventions to individuals served by County departments. The research project will allow the gathering of data on clients from four County departments. Information will be de-identified and provided about groups of clients in summary reports. The broader goal is to assess which services or interventions are most effective with specific groups of clients.

*Goals* – The goals of the County Research Project is to increase the effectiveness of our data collection to support better decision-making regarding client services.

*Involved Agencies* – This project includes the involvement of County Departments of: Information Technology, Alcohol, Drug & Mental Health Services, Social Services, Public Health, Sheriff's, County Counsel, and the County Executive's Office.

*Funding* – Existing funding from Social Services, Information Technology and the Alcohol & Drug Program have been used to kick start this effort. Additional funds will be needed as the project develops.

*Implementation* – A plan for implementation has been developed. Memorandums of Understanding (MOU's) between departments are being written and key data elements from each department have been identified. The Information Technology department has primary responsibility for this project, with strong collaboration by all departments involved: Social Services, Alcohol, Drug & Mental Health Services, Probation, and the Sheriff's Department. Over time, other departments may join the project.

*Performance Outcomes* – The goal is to increase the effectiveness of our data collection to support better decision-making. The primary performance indicator will be the use of business intelligence technology by participating county departments and the CEO's office. Anticipated longer term outcomes include an improvement in service delivery to clients utilizing County services and increased efficiencies in County staff coordination in providing services to clients.

*Requested Board Action* – Continued support is requested. On February 13, 2007, the Santa Barbara County Board of Supervisors endorsed this initiative as part of the Summit recommendations in the Report to the Board of Supervisors and staff has been pursuing this project diligently since that time.

## V. SUMMARY & NEXT STEPS

After hearing a report on the Methamphetamine Summit held in December 2006, the Santa Barbara County Board of Supervisors supported the creation of the Meth Prevention Network. The MPN, a collaborative effort of public and private organizations dedicated to reducing meth use and abuse throughout Santa Barbara County, established a Leadership Council and five task forces that began meeting in June 2007. While great strides have been made in the fight against meth in Santa Barbara County and the latest trends suggest that momentum is on our side, there is still work to be done.

The following is an overview of the next steps that the MPN Leadership Council is planning to continue its work to reduce substance abuse and its impacts throughout the County.

### A. SUBSTANCE ABUSE COORDINATING COUNCIL

The Leadership Council has recognized that the collaboration over the last sixteen months has helped reduce meth use and its impacts on residents of the County. They wish to continue working together on addiction-related issues in a format that is effective and efficient for all involved and produces the best results. Because meth users often abuse other drugs or alcohol, a preferred approach is to treat the

individual and not one particular drug. This approach is more effective in helping all substance abusers regardless of their drug of choice.

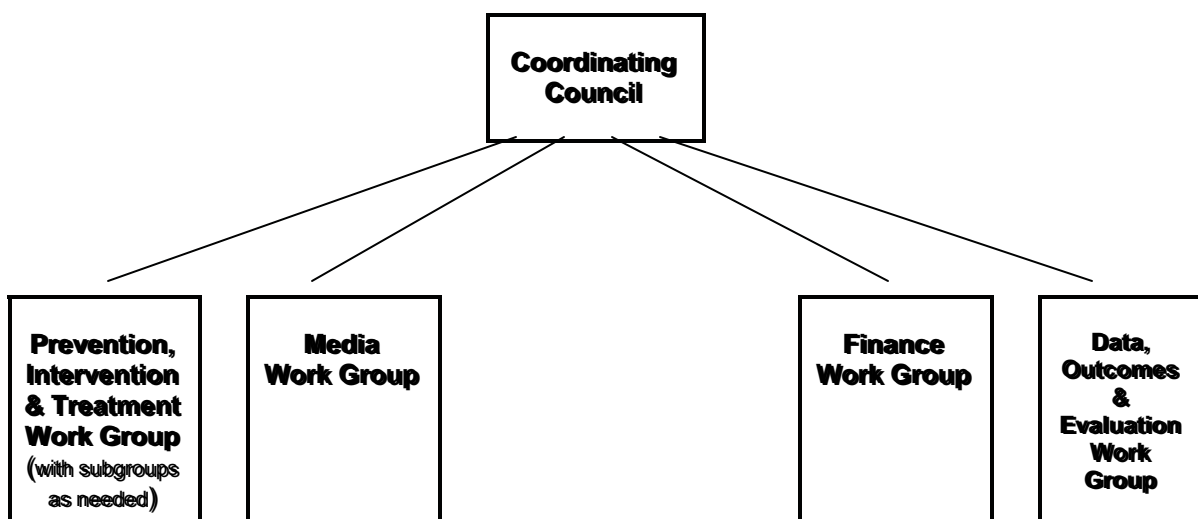
At the end of the 16-month Leadership Council process, the Council reached three conclusions:

- The Leadership Council should continue working collaboratively on meth-related issues that affect County departments, non-profits and community coalitions;
- The Council could broaden its scope to address the range of addictions that are impacting residents of this County, especially given that most meth users also abuse other drugs; and
- Consideration must be given to the potential for duplication and the lack of funding available to support an effort similar to the Meth Prevention Network's work over the last 16 months.

Given these three factors, the Council is recommending that they transition into the new "Substance Abuse Coordinating Council" that would address all addictions afflicting County residents, including meth. This group of experts on substance abuse would be flexible in working together to find the best approach to address alcohol and drug abuse.

Figure 9

### Proposed Substance Abuse Coordinating Council (SACC)





The structure of the Coordinating Council would be similar to the Leadership Council's as shown in Figure 9.

The proposed Substance Abuse Coordinating Council (SACC) would be unique in that it would include representatives from four County departments, non-profits and community coalitions that work on prevention, intervention and treatment of drug and alcohol abuse throughout the County. SACC may work in conjunction with other entities, such as the Advisory Board on Alcohol and Drug Problems, the Therapeutic Justice Policy Council, and the Juvenile Justice Coordinating Council. These two councils include representatives from the criminal justice health care and substance abuse systems. Having these entities involved on the SACC would broaden the collaboration and effectiveness as well as reduce duplication.

The transition from the Meth Prevention Network to the SACC can be accomplished within existing County budget allocations and no additional funding is being requested at this time. The new Council and its Work Groups would pursue various funding sources to implement the strategies summarized in this report.

The staffing requirements for the SACC would be minimal and could be absorbed by existing Alcohol, Drugs and Mental Health Services staff. The bulk of the work would be done by the Work Groups (similar to the Task Forces) that wouldn't have staff per se but would be self-supporting. The Work Groups would be focused around particular issue areas, as the Task Forces currently are, as well as particular projects to continue to develop culturally appropriate strategies that would reduce problems associated with substance abuse.

## Proposed Substance Abuse Coordinating Council

The Substance Abuse Coordinating Council will carry forward the work of the MPN and determine overall policy and direction. The Council would meet at least two times annually or as needed. Membership could include:

Representatives from each of the following community coalitions:

- Carpinteria Cares for Youth
- Santa Barbara Fighting Back
- Lompoc Valley Recovery Task Force/Lompoc Valley Health Care Org.
- Santa Ynez Valley Coalition to Promote Drug Free Youth
- Santa Maria Valley Fighting Back

Representative from the following departments/organizations:

- Alcohol, Drug & Mental Health Services
- Social Services
- Public Health
- County Law Enforcement Chiefs (CLEC)
- Probation
- Criminal Justice/Judge
- Board of Supervisors
- Cities in County
- Advisory Board on Alcohol & Drug Problems
- Therapeutic Justice Councils

Staff to the Coordinating Council: Alcohol & Drug Program staff will coordinate meeting logistics and send out agendas and minutes within existing budget allocations.

### SACC Work Groups

- Work Groups will meet six times annually or as needed
- Work Groups will be coordinated and facilitated by the chair and support (minutes, meeting notification, etc.) shall be determined by Work Group; no formal staff will be provided
- The chair of the Workgroup should be a voting member of the Coordinating Council and report back to the Council on Workgroup progress
- Work Group membership is "open" to those most appropriate for the issue
- The purpose of the Work Group is to implement recommendations, with the support of the Coordinating Council.

## **B. FUNDING**

The sixteen month long Leadership Council and task force effort has largely been funded by the County of Santa Barbara. Moving forward, the Council recognizes that they need to reach out to private sources of funding to assist in the implementation of the recommendations, particularly where specific initiatives may pertain to one community or interest group. For example, there are many aspects to the Media Campaign (English and Spanish documentary, town hall meetings, and involvement with schools, etc.) and we plan to pursue funding from a variety of private groups interested in public education and the media.

The Finance Task Force has prepared a brochure geared to potential funding groups that will be used to solicit financial backing to implement the strategies. Once the transition to the Substance Abuse Coordinating Council is complete and the Work Groups are established, the Finance Work Group would begin identifying potential funding sources to pursue to help implement the various recommendations.

The Board may be asked to support the submittal of grant applications or other funding requests, but no additional County allocations are being requested as part of this continuing effort.

## **C. BOARD OF SUPERVISORS' ACTION**

On November 18, 2008, the Board of Supervisors will be asked to accept the MPN Leadership Council's report and support their future efforts, including pursuing funding from various sources to implement strategies to fight meth addiction and its effects on County residents. The specific recommendations to the Board are:

1. Accept the report from the MPN Leadership Council;
2. Endorse the transition of the MPN into the Substance Abuse Coordinating Council (SACC) that would address all forms of addiction that affect residents of Santa Barbara County, including meth addiction.

The MPN would transition and convene as the Substance Abuse Coordinating Council during 2009.

3. Support the continuation of work started by the MPN under the newly formed SACC to continue implementing strategies to combat methamphetamine, which include:
  - a. Television/Coalition/County Media Campaign;
  - b. County Data Project;
  - c. Demonstration Project focused on treating parents and children;
  - d. Drug Endangered Children protocol and Coordination (DEC);
  - e. Drug Paraphernalia Law Enforcement; and
  - f. Efforts to obtain grant and foundation funding to implement strategies.
4. Encourage cities within the County to:
  - a. Designate a member of the City Council and/or appropriate staff to serve on the MPN's Leadership Council/ Substance Abuse Coordinating Council; and
  - b. Contribute resources to the MPN and local coalitions to support their efforts.

The new Substance Abuse Coordinating Council would continue the collaboration the Leadership Council started and broaden its scope to address all forms of addiction that affect residents and families in the County. The Council would partner with other similar groups as appropriate to maximize the effectiveness and efficiency of the limited resources available to fight addiction and its effects on the community.

As noted under "Funding" above, the transition from the Meth Prevention Network to the Substance Abuse Coordinating Council can be accomplished within existing County budget allocations and no additional funding is being requested at this time. The new SACC and its work groups will pursue alternate funding sources to implement the strategies summarized above.

## VI. APPENDICES: List of Participants

We gratefully acknowledge the contributions of the following individuals, whose participation on the Leadership Council and/or one of the five task forces made the work of the Methamphetamine Prevention Network possible:

### **Leadership Council**

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Salud Carbajal (Co-Chair) - *Board of Supervisors -1st District*  
Teresa Menchaca (Co-Chair) - *Fighting Back Santa Maria Valley*  
Carrick Adam - *Santa Maria Valley Fighting Back & Probation*  
Ken Bambrick - *County Law Enforcement Chief's & Santa Barbara Regional Narcotics Enforcement Team*  
Pat Brady - *Good Samaritan Services, Inc. & Lompoc Recovery Task Force*  
Lois Craig - *Santa Ynez Valley Coalition to Promote Drug Free Youth & People Helping People*  
Georgina Duran-Conn - *Probation Department*  
Judge Rogelio Flores - *Superior Court*  
Kathy Gallagher - *Social Services Department*  
Nancy Gottlieb - *Alcohol, Drug & Mental Health Services*  
Eric Hanson - *District Attorney & Santa Barbara Fighting Back*  
Shereen Khatapoush - *Santa Barbara Fighting Back & Council on Alcoholism & Drug Abuse*  
Susan Klein-Rothschild - *Public Health Department*  
Alice Patino - *Fighting Back Santa Maria Valley & City of Santa Maria and County of Santa Barbara*  
Steve Powell - *Carpinteria Cares for Youth & Rincon/Foothill High Schools*  
Kevin Smith - *Zona Seca Youth & Family Treatment & Lompoc Recovery Task Force*  
Cindy Stevens - *Santa Ynez Valley Coalition to Promote Drug Free Youth*  
Carolyn Wood - *Carpinteria Cares for Youth & Real Estate*

### **Educated Communities & Professionals Task Force (Prevention Focus)**

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Alice Patino (Task Force Chair) - *Fighting Back Santa Maria Valley & City of Santa Maria & County of Santa Barbara*  
Lilia Bello - *Alcohol, Drug & Mental Health Services*  
Jayne Brechwald - *Advisory Board on Alcohol & Drug Problems & American Lung Association*  
Mary Conway - *Santa Ynez Valley Coalition to Promote Drug Free Youth & People Helping People*  
Sandra Copley - *Public Health Department*  
Lois Craig - *Santa Ynez Valley Coalition to Promote Drug Free Youth & People Helping People*  
Sandra Fahey - *Perinatal Substance Abuse Task Force & Alcohol, Drug & Mental Health Services*  
Lisa Gilbert - *Alcohol, Drug & Mental Health Services*  
Shereen Khatapoush - *Fighting Back Santa Barbara*  
Steve Powell - *Rincon/Foothill High Schools, Carpinteria Unified School District*  
Cindy Stevens - *Santa Ynez Valley Coalition to Promote Drug Free Youth*  
Leo Trujillo - *City Councilmember & Mayor Pro Tem, City of Santa Maria*  
Lorraine Waldau - *Santa Barbara County Education*  
Carolyn Wood - *Carpinteria Cares for Youth*  
Katarina Zamora - *Alcohol, Drug & Mental Health Services*

### **Meth Free Individuals, Children & Families (Treatment Focus)**

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Lois Craig (Task Force Chair) - *Santa Ynez Valley Coalition to Promote Drug Free Youth & People Helping People*  
Sylvia Barnard - *Good Samaritan Services, Inc.*  
Asia Eichmiller - *Alcohol, Drug & Mental Health Services*  
Judge Rogelio Flores - *Superior Court*  
Nancy Gottlieb - *Alcohol, Drug & Mental Health Services*  
John MacKinnon - *District Attorney's Office*

### **Safe Neighborhoods Task Force (Law Enforcement Focus)**

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Ken Bambrick (Task Force Chair) - *Santa Barbara Regional Narcotics Enforcement Team*  
Butch Arnoldi - *Sheriff's Department*  
Megan Baldwin - *District Attorney's Office*  
Mauricio Calderon - *Guadalupe Police Department*  
Lori Crestfield - *Probation Department*  
Howard Coolidge - *Santa Maria Police Department*  
Don Deming - *Lompoc Police Department*  
Lisa Gilbert - *Alcohol, Drug & Mental Health Services*  
Eric Hanson - *District Attorney & Santa Barbara Fighting Back*  
Deborah Hartman - *Department of Social Services*  
Armando Martel - *Santa Barbara Police Department*  
Annette Martinez - *Santa Barbara Regional Narcotics Enforcement Team & Sheriff's Department*  
Freya Schultz - *Department of Social Services*  
Esther Trejo - *Santa Barbara Regional Narcotics Enforcement Team & Probation*

### **Outcomes & Evaluation Task Force**

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Susan Klein-Rothschild (Task Force Chair) - *Public Health Department*  
Trina Boyce - *Probation Department*  
Merith Cosden - *University of California Santa Barbara*  
April Howard - *Alcohol, Drug & Mental Health Services*  
Daniel Milei - *Information Technology Services*  
Bill Miller - *Sheriff's Department*  
Amy Ratliff - *Santa Ynez Valley Coalition to Promote Drug Free Youth & People Helping People*  
Freya Schultz - *Department of Social Services*

### **Finance Task Force**

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Dr. Carrick Adam (Task Force Chair) - *Fighting Back Santa Maria Valley & Probation*  
Kathy Gallagher - *Department of Social Services*

### **Staff**

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Kathy Gallagher - *Executive Sponsor*  
Heather Gardner - *Task Force Coordinator*  
Lisa Garrison - *Project Support*  
Nancy Gottlieb - *Project Director*  
Laura L. Mancuso - *Educated Communities & Professionals Task Force Facilitator*  
Bob Montgomery - *Meth Free Individuals, Children & Families Task Force Facilitator*  
Dennis Pankratz - *Safe Neighborhoods Task Force Facilitator*  
Pat Saley - *Leadership Council & Finance Task Force Facilitator*  
Nancy Vasquez - *Project Manager & Outcomes & Evaluation Task Force Facilitator*  
Maria Xique - *Project Support*

## VI. APPENDICES: Glossary of Terms

ADMHS—Alcohol, Drug & Mental Health Services

ADP—Alcohol & Drug Program, a division within ADMHS

CLEC—County Law Enforcement Chief's

CBO—Community Based Organization

CWS—Child Welfare Services, a division within the Department of Social Services

DEC—Drug Endangered Child Protocol

DSS—Department of Social Services

EC&PTF—Educated Communities & Professionals Task Force

LC—Leadership Council

MFIFCTF—Meth Free Individuals, Children & Families Task Force

MPN—Methamphetamine Prevention Network

NGO—Non-Governmental Organization

O&ETF—Outcomes & Evaluation Task Force

PH—Public Health Department

SBRNET—Santa Barbara Regional Narcotics Enforcement Team

SNTF—Safe Neighborhoods Task Force

“Strategy” - is defined as a long term plan of action designed to achieve a particular goal



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[www.adp.com](http://www.adp.com)  
[www.dontw8.info](http://www.dontw8.info)