

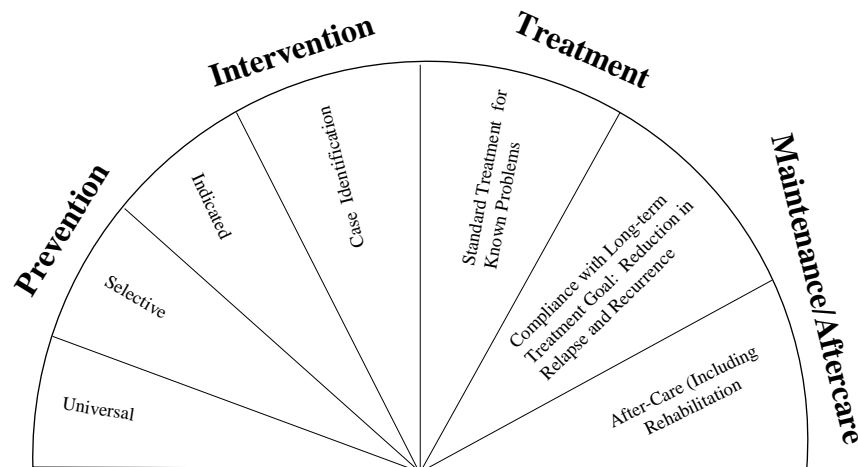
PREVENTION SERVICES UNIT

What Is Prevention?

Prevention means creating conditions that promote good health. It is achieved by reducing those factors that are known to cause illness and problem behaviors and encouraging those factors that buffer individuals and promote good health. Prevention promises a reduction in the incidence of new cases of illness and problem behavior. When properly done, a good preventive intervention is long lasting and focused on reducing vulnerability and enhancing wellness.

Prevention is the first step in the substance abuse and mental health continuum of care. Interaction with the prevention system often serves as a catalyst for individuals to seek intervention and treatment services. Prevention practitioners are trained to identify and refer individuals with problems to appropriate intervention and treatment services.

The Intervention Spectrum for Behavioral Disorders



As the first step in any continuum of care, prevention can help decrease hospital stays, long-term residential treatment, suicide, violence and aggression. It provides for long-term cost savings and can create better quality of life for individuals and safe and resilient communities.

PREVENTION SERVICES UNIT

Prevention Framework

Prevention programs are usually divided into three categories: Universal, selected and indicated. Universal prevention programs target the general public or a whole population that has no known risk factors. Selective prevention interventions are targeted to individuals or a segment of the population whose risk for developing substance abuse or a mental health disorder is significantly higher than average. Indicated prevention programs target high-risk individuals who have started exhibiting problems. There is an array of best practice universal, selective and indicated prevention interventions directed at individuals and families in their schools, neighborhoods, places of worship and workplaces which have proliferated across the country in the last twenty years. These interventions have evolved from several generations of programs, theoretical models and approaches that address individuals across the lifespan. Over the years, these approaches have been researched across target populations and fields of practice, with consideration given to developmental appropriateness, gender and sexual orientation factors. This has resulted in new knowledge and lessons learned about the impact and effectiveness of prevention, which has assisted planners and program developers in creating extremely promising prevention systems.

There are several state and local agencies within Connecticut with prevention systems that use a variety of theoretical models. The Connecticut Department of Mental Health and Addiction Services (DMHAS) is the single state agency (SSA) for mental health and substance abuse services. The prevention division within DMHAS is organized to provide efficient, cost-effective, developmentally appropriate and culturally sensitive behavioral health services based on scientific models and best practices, through a comprehensive system that matches services to the needs of the individuals and local communities. This comprehensive system includes the following five areas:

- ***Management and Organization*** of DMHAS' Prevention System.
- ***Prevention Program Infrastructure*** including concepts, strategies and activities, program functions, and targets.
- ***Prevention Planning, Needs Assessment, Resource Allocation and Data Collection.***
- ***Coordination with Other Agencies.***
- ***Quality Assurance and Improvement.***

COMPREHENSIVE BEHAVIORAL HEALTH PREVENTION SYSTEM



MANAGEMENT & ORGANIZATION

- *Structure & Organization*
- *State Advisory Councils*
- *Strategic Action Plan*

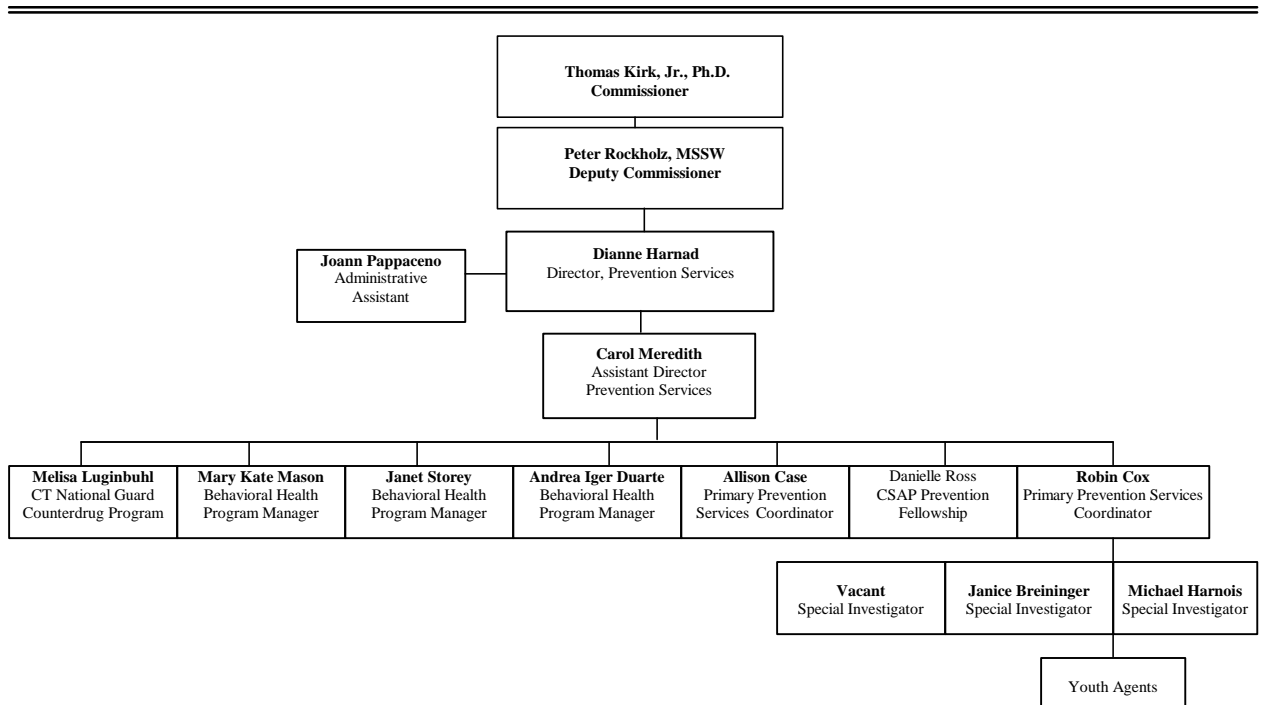
MANAGEMENT AND ORGANIZATION

Structure and Organization

The Department of Mental Health and Addiction Services (DMHAS) was formed in July 1995 by a merger of the Addiction Services Division of the Department of Public Health and Addiction Services, and the Department of Mental Health. Alcohol, tobacco, and other drug (ATOD) prevention services are placed under the Division of Prevention/Intervention within the DMHAS.

Prevention services are within the Division of Community Services and Hospitals and under the management of the Director of Prevention Services who reports to the Director of Community Services and Hospitals. The Prevention Division oversees and administers the prevention set-aside funds for the Substance Abuse Prevention and Treatment (SAPT) block grant as well as the implementation of the SYNAR amendment. The Table below illustrates the staff and the relationships among the various sub-units within the Prevention Division.

PREVENTION ORGANIZATIONAL CHART



MANAGEMENT AND ORGANIZATION

Sub-State Organization

The Connecticut legislature has established 5 human service regions for the purpose of providing state health and human services. DMHAS uses 15 subdivisions of these regions as the geographic basis for prevention services. The prevention services within these regions are comprised of six major components: (1) five Statewide Service Delivery Agents that undergird and support prevention programs statewide, known as the Prevention Infrastructure; (2) thirteen Best Practices Projects aimed at implementing proven prevention strategies with specific populations; (3) two science-based programs that will implement the gender-specific violence prevention intervention model, *SAFE-T*, and associated services for court-involved and at-risk girls (ages 14-17) in Hartford attending Quirk Middle School and the Hartford Alternative Learning Opportunities (HALO) School; (4) 130 plus Local Prevention Councils providing primary prevention strategies; (5) five state university partnerships to develop a comprehensive prevention system that is responsive to the needs of young adults, ages 18-25 attending public universities throughout Connecticut; (6) Tobacco Compliance Initiatives aimed at reducing underage use of tobacco products; (7) fourteen Regional Action Councils that build capacity of individuals and communities to deliver prevention services; and (8) community-based programs under the PRISM initiative that link violence and substance abuse prevention and mental health promotion to improve the quality of care for children in grades K-5.

State Advisory Councils

The Connecticut Alcohol and Drug Policy Council (ADPC) was established by the Governor through executive order in 1996 to address substance abuse issues within the state and to implement the recommendations of its predecessor Blue Ribbon Task Force on Substance Abuse. The ADPC and its Prevention, Treatment and Criminal Justice committees developed a multi year, interagency statewide plan for substance abuse that has been annually updated and evaluated and which provides for policy and budgetary direction for substance abuse prevention and treatment annually.

Mental Health Policy Council (MHPC)- In January 2000, Governor Rowland established the Blue Ribbon Commission on Mental Health to examine Connecticut's mental health system and make recommendations on how it can be improved. The Commission uncovered a large number of individuals in Connecticut and their families who need mental health services. Among the recommendations made in the July 2000 report was the need to develop public education and primary prevention programs. Another recommendation crucial to the implementation of all the others, called for the establishment of the MHPC. Similar to the ADPC, the MHPC provides direction for those services within the state and make periodic reports to the Governor and legislature regarding progress toward achievement of the Commission's recommendations. The recommendations are currently awaiting action by the Governor and legislature.

MANAGEMENT AND ORGANIZATION

Strategic Action Plan

In July 2000, DMHAS developed a strategic action plan consisting of four goals and several related action strategies. The Prevention Division has used it to develop the prevention direction for SFY2005. The Table below also identifies the Prevention Division's role in implementing the DMHAS strategic action plan during the 2005 fiscal year.

SFY2005 DMHAS Strategic Prevention Direction

