



# ANNUAL REPORT

Fiscal Year

2025

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Executive Summary

Oklahoma Department of Mental Health and Substance Abuse Services,  
Prevention Services Division

Prepared and published by Oklahoma State University-Center for  
Health Sciences, Center for Rural Health, Tulsa, OK

Prevention Services End of Year Report 2025  
September 30<sup>th</sup> 2025

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This publication has been submitted in compliance with Section 3-114 of Title 65 of the Oklahoma Statutes.*



The Oklahoma Department of Mental Health and Substance Abuse (ODMHSAS) Prevention Division's End-of-Year (EOY) Report provides a comprehensive overview of the Division's work and impact across multiple substances and scopes of service during Fiscal Year 2025 (July 1, 2024 – June 30, 2025). This year's report is organized thematically by substance or primary area of focus, with an emphasis on how different sectors such as Community-Based Prevention Services (CBPS), Higher Education Prevention Services (HEPS), Schools, Law Enforcement, Workplaces, and Faith-Based Prevention Services (FBPS) have contributed to prevention efforts statewide.

Some initiatives within the Prevention Division are designed to address specific substances, while others operate across multiple focus areas. For example, Too Much to Lose (2M2L) and Responsible Beverage Service and Sales (RBSS) are targeted alcohol prevention programs, and Mental Health First Aid (MHFA) focuses specifically on suicide prevention and mental health awareness. In contrast, sectors such as Higher Education Prevention Services (HEPS), Community-Based Prevention Services (CBPS), Schools, and Faith-Based Prevention Services address multiple substances and mental health concerns simultaneously. These broader efforts include strategies related to stimulant, opioid, and marijuana prevention, naloxone distribution, school-based initiatives informed by OPNA Survey data, and outreach through faith communities.

The Oklahoma State University Center for Health Sciences – Center for Rural Health (OSU-CRH) provided evaluation services for the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) Prevention Division during this reporting period. OSU-CRH was responsible for collecting data, developing reports, and delivering evaluation-related training and technical assistance (TTA) to ODMHSAS staff and subrecipients.



# ALCOHOL MISUSE PREVENTION

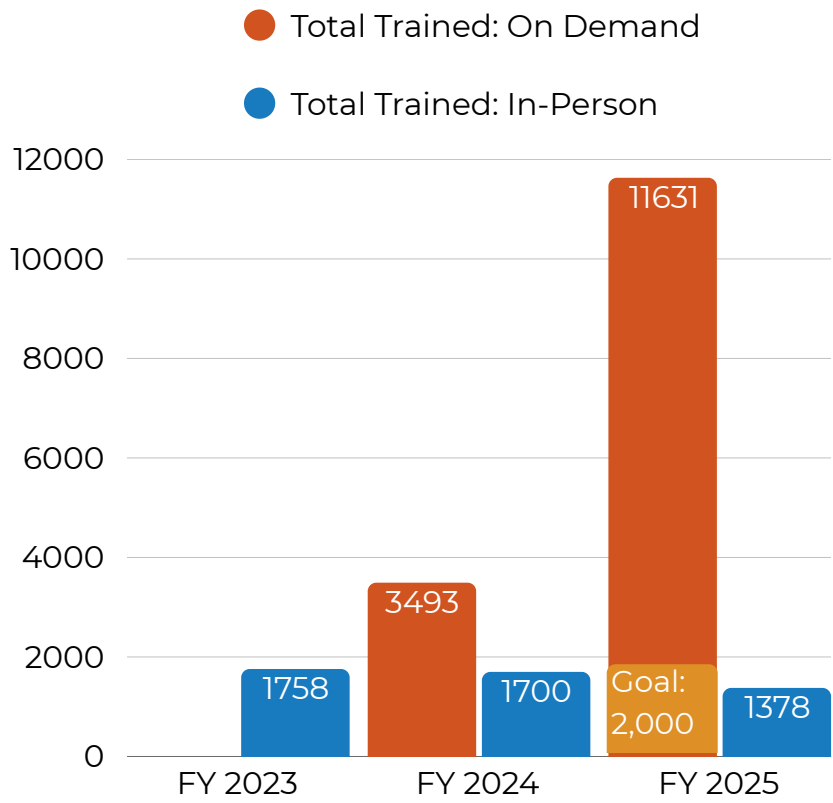
## RESPONSIBLE BEVERAGE SERVICE AND SALES

As gatekeepers in their communities, Oklahoma businesses, particularly those that sell or serve alcohol, play a vital role in preventing negative outcomes related to alcohol. The ODMHSAS, in partnership with ROCMND Area Youth Services, offered in-person Responsible Beverage Service and Sales (RBSS) training across the state to support this effort. This training program is designed for owners, managers, and servers of establishments that sell or serve alcohol. It equips participants with essential knowledge and skills to help them operate responsibly and meet legal requirements related to alcohol service.

In Fiscal Year 2024 (FY 24), ODMHSAS expanded access to the training by launching an on-demand version of the RBSS program. This addition significantly increased participation. **In FY25, the second year of on-demand availability, 13,009 individuals were trained, which more than doubled the 5,193 trained in FY24.**



**ODMHSAS surpassed its FY 25 goal of 2,000 individuals trained in RBSS through the on-demand platform**



# ALCOHOL MISUSE PREVENTION

## LAW ENFORCEMENT & ABLE COMMISSION

### Alcohol and Bar Compliance checks

The Oklahoma Alcohol Beverages Law Enforcement (ABLE) Commission is a statewide agency responsible for enforcing laws related to alcoholic beverages and protecting public welfare. In Fiscal Year 2025, the ODMHSAS continued its partnerships with the Tulsa, Oklahoma and Cleveland County Sheriffs' Offices to support underage drinking prevention efforts. These efforts included Alcohol Compliance Checks (ACCs) and bar checks.

ACCs involve law enforcement supervising trained underage volunteers who attempt to purchase alcohol from retail locations. The purpose is to see whether store employees properly check IDs and refuse to sell to minors. If an employee sells or provides alcohol to the underage buyer, law enforcement steps in and takes appropriate action to address the violation.

 **1,467 total alcohol compliance checks conducted** in FY 25

 The pass rate of ACCs conducted by County Sheriff Offices **improved from 63% in FY 2023 to 87% in FY 2025.**

 The pass rate of ACCs conducted by the ABLE commission **improved from 79% in FY 2023 to 89% in FY 2025.**

Bar checks are similar, but take place in bars and clubs rather than stores. Officers may observe whether alcohol is being sold to minors, if underage individuals are present in age-restricted venues, or if staff are serving alcohol to visibly intoxicated patrons. These checks help reduce illegal alcohol sales and promote safer environments in these settings.

 **515 Bar Checks Completed** in FY 25

 Both the County Sheriff Offices and the ABLE Commission had a **100% pass rate for Bar Checks in FY 25**



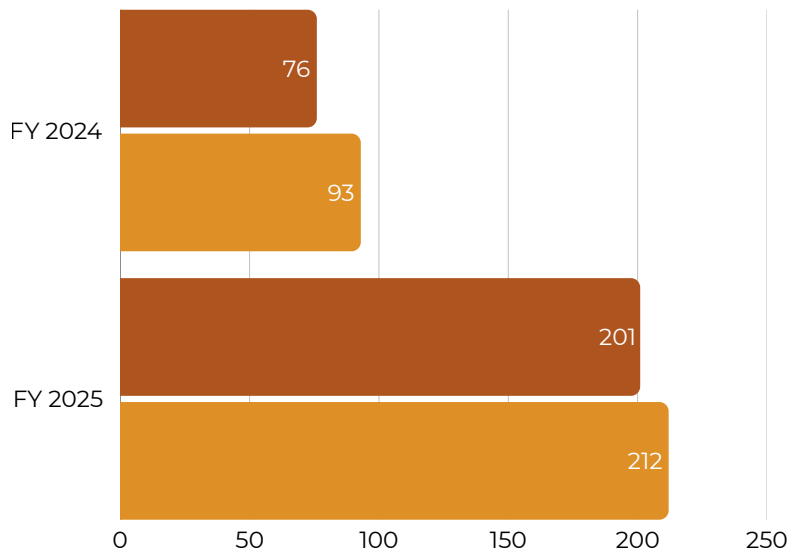
# ALCOHOL MISUSE PREVENTION

## TOO MUCH TO LOSE (2M2L)

Too Much to Lose (2M2L) is a program designed to reduce underage drinking, risky adult drinking, and the problems that often come with them, like accidents, injuries, and crime. The program focuses on changing community norms and systems to make alcohol less accessible to youth and to encourage safer choices overall. The ODMHSAS works with the ABLE Commission to deliver 2M2L trainings. These trainings are available in one-day or two-day sessions and are open to both law enforcement and community members who want to help make their communities safer and healthier.

### Number Trained in 2M2L by Fiscal Year

- Officers Trained in 2M2L
- Total Trained in 2M2L



There were **a total of 212 individuals trained** in 2M2L in FY 25, an increase from 93 trained in FY 24.

On March 5th, in partnership with the Oklahoma Department of Mental Health and Substance Abuse Services, a 2M2L (2 Much 2 Lose) Law Enforcement Training was held in McAlester, Oklahoma, at the Pittsburg County Emergency Management Center. This training provided law enforcement officers with valuable information and resources on updated alcohol laws in Oklahoma, alcohol compliance checks, bar checks, special event enforcement strategies, controlled party dispersals, and the overall impact of alcohol misuse across the state.

-Pittsburg County



# ALCOHOL MISUSE PREVENTION

## COMMUNITY BASED PREVENTION SERVICES (CBPS)

In Fiscal Year 2025, 15 counties across Oklahoma identified alcohol as their top prevention priority. Local coalitions in these areas play a central role in reducing alcohol misuse and its related harms through community-driven, data-informed strategies.

These coalitions focus on educating the public about the risks of alcohol use and promoting healthy behaviors through information campaigns and local events. Just as importantly, they work behind the scenes to strengthen how local organizations work together, holding regular coalition meetings, building partnerships, and ensuring communities are ready to support prevention efforts.

A major part of prevention efforts involve changing systems to make a lasting impact. Coalitions help improve local laws, school or workplace policies, and other community standards to reduce alcohol access and use. This systems-level approach is key to creating healthier environments that support long-term change, not just for individuals, but for entire communities.

“Over the past six months, we have been actively engaged in conversations with county law enforcement to review and strengthen enforcement-related policies, particularly those related to underage drinking and alcohol compliance. Simultaneously, we have been working with local city and county officials to discuss the inclusion of guidelines for responsible alcohol beverage sales as part of the special event permit application process. These discussions focus on enhancing public safety and aligning community standards with prevention objectives.”

-McIntosh County



# ALCOHOL MISUSE PREVENTION

## SCHOOL BASED PREVENTION SERVICES

ODMHSAS partners with K–12 schools across Oklahoma to implement evidence-based prevention programs focused on youth mental health and substance use. In FY 25, five public school districts (Multi-Tiered System of Support grantees) were actively contracted to carry out comprehensive strategies aimed at reducing underage alcohol use, youth psychological distress, and either marijuana or tobacco use. These multi-year partnerships help schools build sustainable prevention programs that promote healthier outcomes for students.

ODMHSAS supports K–12 schools through approved online trainings and presentations that raise awareness about substance use and mental health. These resources provide accessible, one-way educational content for students and staff, helping schools strengthen prevention efforts. In FY 25, commonly used programs to address alcohol use and other substances included 3rd Millennium Classrooms and AlcoholEdu.

### 3rd Millennium

3rd Millennium offers evidence-based online courses. The courses are implemented to promote understanding of substance use and foster healthier decisions. Additionally, 3rd Millennium is used as an intervention and alternative to suspension for students possessing or using substances on campus. Online course options include AlcoholWise, CannabisWise and Nicotine 101.

### AlcoholWise

AlcoholWise provides students with engaging, evidence-based education on alcohol use, helping them understand risks, build refusal skills, and make informed decisions. **Students that completed AlcoholWise online course had average pre-test knowledge score of 52% and average knowledge post test score of 74%.**



# ALCOHOL MISUSE PREVENTION

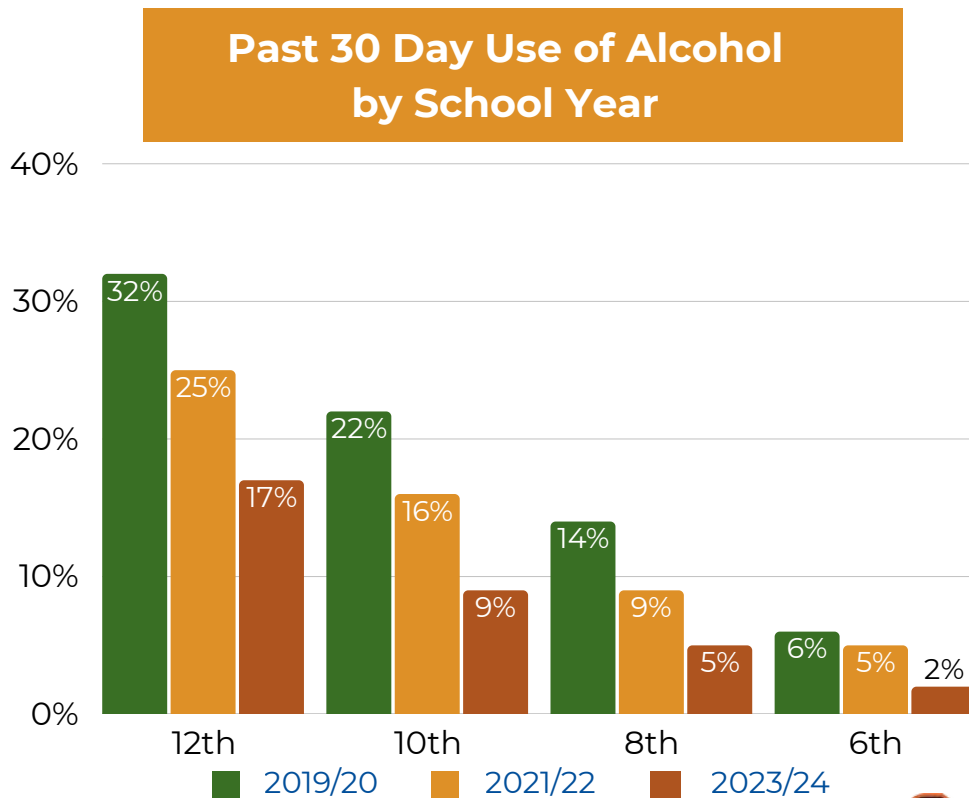
## STATEWIDE OUTCOME DATA

### OPNA Survey Data on Alcohol by Grade Level

The Oklahoma Prevention Needs Assessment (OPNA) Survey is a statewide, anonymous survey of students in grades 6, 8, 10, and 12 that helps schools identify and address youth substance use, mental health challenges, and other risk behaviors. The data guides prevention strategies and supports the evaluation of school- and community-based efforts.

Survey data from 2019 to 2024 show encouraging downward trends in past 30-day alcohol use among youth. In the data set, 12th graders report the highest rates of use across all three school years, while 6th graders report the lowest. Notably, 98% of 6th graders and 84% of 12th graders reported not using alcohol in the past 30 days in 2023-24. **Importantly, the 2023–24 school year reflects the lowest reported rates of alcohol use across all grade levels since 2019-20 school year.**

These data highlight sustained progress in reducing youth alcohol use and reinforce the importance of continued prevention efforts across all grade levels.





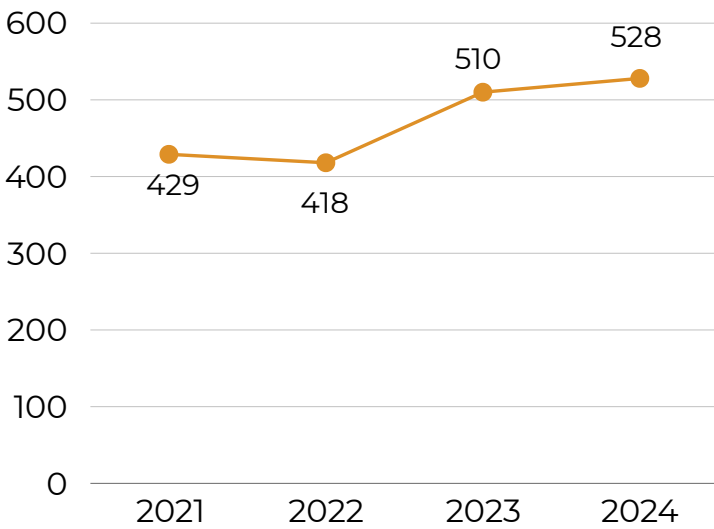
# ALCOHOL MISUSE PREVENTION

## STATEWIDE OUTCOME DATA

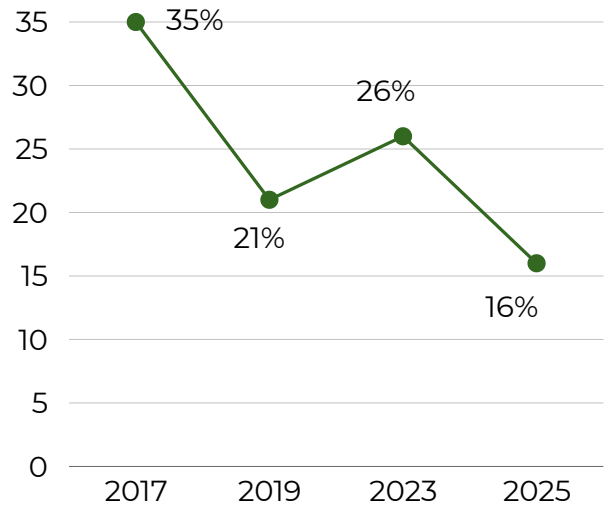
Recent data on alcohol-related hospitalizations across the state indicates a concerning trend: since 2022, nonfatal hospital discharges involving alcohol-related diagnosis have increased. This rise suggests a growing need for targeted interventions addressing adult alcohol use. In contrast, youth alcohol prevention efforts appear to be yielding positive results. The Alcohol Purchase Survey Violation rate is at an all-time low, indicating a significant decline in illegal alcohol sales to minors. The Alcohol Purchase Survey uses compliance check where underage buyers attempt to purchase alcohol under controlled conditions. It helps assess how well establishments are adhering to laws prohibiting alcohol sales to minors. This is further supported by consistently high compliance check pass rates from County Sheriff offices. Additionally, data from the OPNA Survey shows that youth self-reported alcohol use in the past 30 days is at its lowest level since 2021. Taken together, these data points strongly support the effectiveness of youth alcohol prevention programming across the state. As these trends evolve, it may be beneficial to explore how continued support for youth prevention efforts, alongside increased attention to adult alcohol-related outcomes, can inform future strategies.

**In FY 2025, Alcohol Compliance Check pass rates were 87% with the County Sheriff Offices. Both the ABLE Commission and County Sheriff Offices achieved a 100% pass rate on Bar Checks in FY 2025.**

**Alcohol-Non-fatal Hospital Discharge  
(Rate per 100,000)**



**Oklahoma Alcohol Purchase Survey  
Violation Rate (%)**



Hospital discharge data are identified using ICD-10-CM codes in any diagnosis field to include alcohol use, dependence, misuse or acute conditions 100% attributable to alcohol. Hospital discharge counts are limited to Oklahoma residents. Overdose cases with discharge status of death or deceased are excluded.




# SUICIDE PREVENTION

## SCHOOL BASED PREVENTION SERVICES

ODMHSAS partners with K–12 schools across Oklahoma to implement evidence-based prevention programs focused on youth mental health. In FY 25, five public school districts (MTSS grantees) were actively contracted to carry out comprehensive strategies aimed at reducing youth psychological distress,

### Lifelines

The Lifelines program helps schools build a supportive environment where students feel safe seeking help, and staff and peers are prepared to recognize and respond to signs of suicidal behavior.

 **In FY 25, 1,240 students completed the Lifelines suicide prevention training.** This program was implemented by Norman Public Schools. The training is a critical component of the district’s efforts to support student mental health and safety.

### 988 Mental Health Lifeline

Oklahoma’s 988 Mental Health Lifeline has enhanced both problem ID and referral by widely publicizing the easy-to-remember number and educating the public on when and how to use it. By increasing awareness of warning signs and promoting a direct, trusted line for support, the 988 campaign strengthens the early prevention framework through accessible, action-oriented information.

 **449,642 students referred to the 988 Mental Health Lifeline in FY 25 \***

\*These numbers are from the 988 Media Campaign, which is considered a form of information dissemination. However, because 988 functions as a crisis lifeline and thus can lead to services, these numbers are reported under Problem Identification and Referral rather than limiting it to the Information Dissemination CSAP strategy.

# SUICIDE PREVENTION

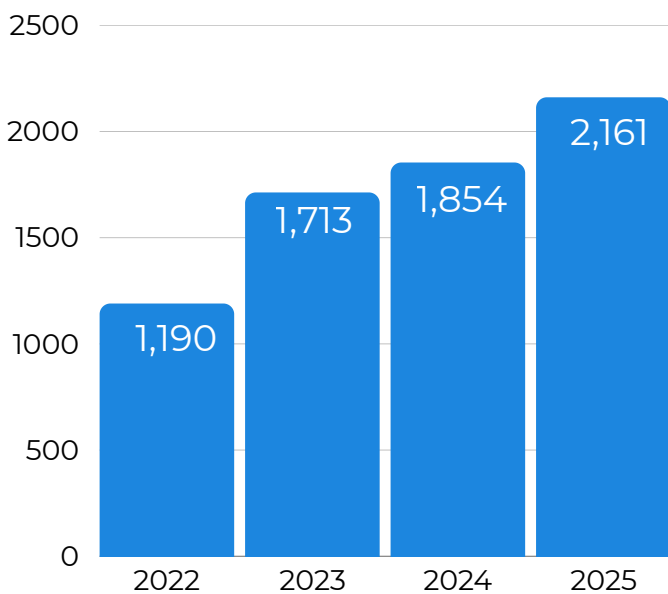
## MENTAL HEALTH FIRST AID

Mental Health First Aid (MHFA) is an 8-hour course designed to teach individuals how to recognize the signs of mental health challenges and how to provide initial support to someone experiencing a mental health crisis or showing early signs of a mental health disorder.

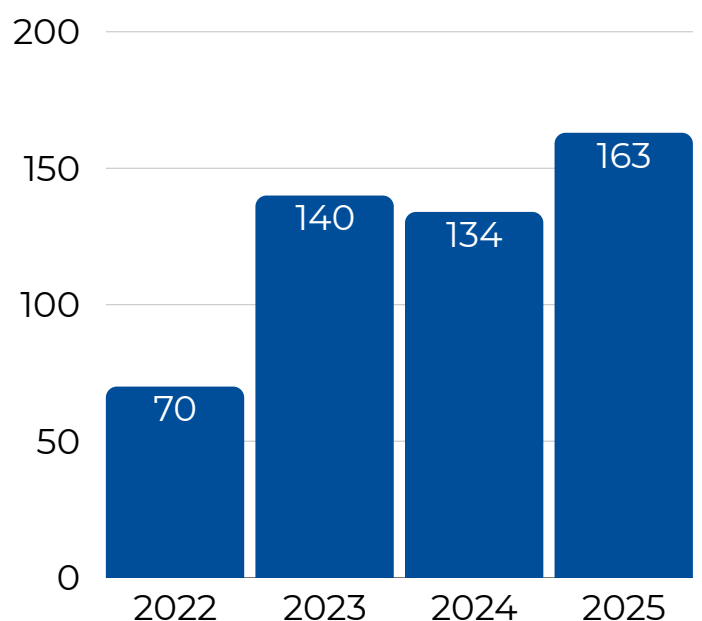
ODMHSAS partners with DCCCA, an organization in Oklahoma City, to deliver MHFA trainings across the state. These trainings are offered both virtually and in person, and cover both the Adult and Youth MHFA curricula. DCCCA also tailors trainings to meet specific community needs when requested.

Since 2022, the number of individuals trained in MHFA has increased steadily each year, reflecting growing interest and demand for mental health education. **In Fiscal Year 2025, MHFA reached its highest level of impact to since 2022, with 2,161 individuals trained statewide.**

### Individuals Trained in MHFA by Fiscal Year



### Number of MHFA Trainings by Fiscal Year

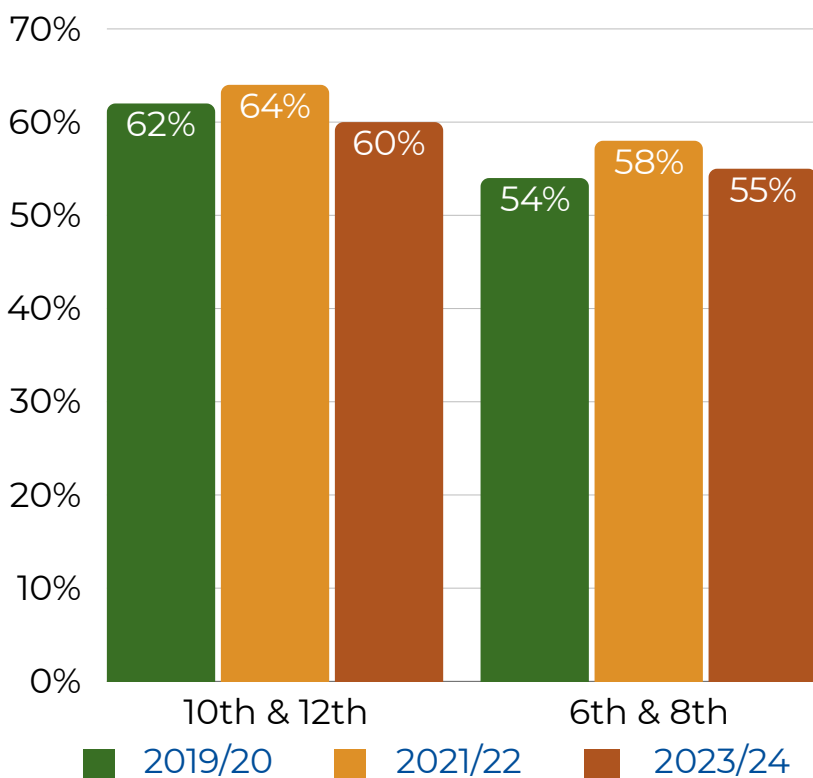


# SUICIDE PREVENTION

## STATEWIDE OUTCOME DATA

Again, the Oklahoma Prevention Needs Assessment (OPNA) Survey provides a statewide snapshot of substance use, mental health, and other risk behaviors among adolescents. The data guides prevention strategies and supports the evaluation of school- and community-based efforts. According to the 2023–2024 OPNA Survey, **about 1 in 13 students (across grades 6, 8, 10, and 12) reported attempting suicide one or more times in the past year.** This reflects a notable improvement from the 2021–2022 school year, when approximately 1 in 10 students reported a suicide attempt. While this decline is encouraging, these findings reinforce the urgent need for continued investment in youth mental health and suicide prevention in Oklahoma.

### Moderate to High Psychological Distress



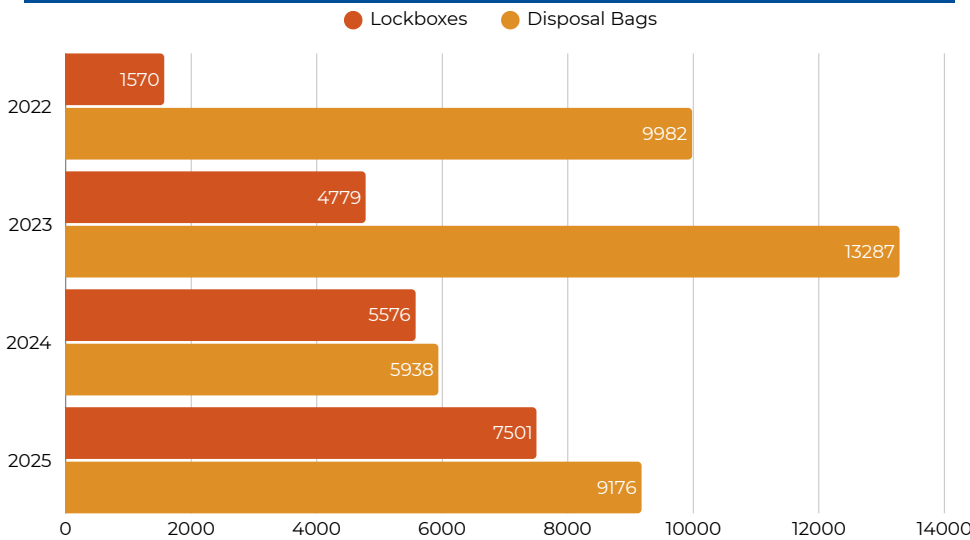
The OPNA Survey also collects data on psychological distress, which refers to a range of emotional symptoms such as persistent sadness, anxiety, hopelessness, and difficulty functioning in daily life. After rising between 2019-20 and 2021–22, **reported psychological distress among students has decreased to its lowest level in the past three years as of 2023–2024.** However, **more than half of students still report experiencing moderate to high levels of psychological distress,** underscoring the ongoing challenges youth face and the importance of maintaining, and expanding, school-based mental health supports and prevention strategies.

# STIMULANT AND OPIOID MISUSE PREVENTION

## COMMUNITY BASED PREVENTION SERVICES (CBPS)

In Fiscal Year 2025, 15 counties across Oklahoma identified stimulants or opioids as their top prevention priority. Local coalitions in these areas lead the charge in reducing opioid and stimulant misuse and its related harms through community-driven, data-informed strategies. Coalitions focused on stimulant and opioid misuse play a vital role in preventing substance use and promoting community well-being. They use a variety of strategies, including safe storage and proper disposal of medications, as well as implementing system-level policy changes, training sessions, and presentations about the dangers of misuse. These efforts aim to reduce access to harmful substances and raise awareness about the serious risks associated with opioid and stimulant misuse.

**Number of Lockboxes and Disposal Bags Distributed by Fiscal Year**



**While the number of disposal bags distribution for FY 2025 is less than FY 2022 and 2023, the distribution of medication lockboxes has steadily**

**increased over the past four years.** This shift occurred due to increased emphasis on safe storage, repeat requests for additional lock boxes from households, new partnerships with clinics and nonprofits distributing to the public, and the notion that lockboxes are more sustainable than one time use disposal bags.

Distributing medication lockboxes and disposal bags is a key part of preventing substance misuse in communities. These tools help reduce access to unused or unsecured medications, which is especially important given that many people who misuse prescription drugs often get them from friends or family members' medicine cabinets. By encouraging safe storage and proper disposal, coalitions are addressing one of the root causes of prescription drug misuse, social availability. These efforts support broader environmental prevention strategies by promoting safe practices and reducing the chances of accidental use, theft, or diversion of medications.



# STIMULANT AND OPIOID MISUSE PREVENTION

## HIGHER EDUCATION PREVENTION SERVICES

In Fiscal Year 2025, 13 Oklahoma colleges and universities participated in the HEPS program, which is funded through the State Opioid Response (SOR) and State Suicide Prevention grants and focuses on addressing opioid and stimulant misuse on campuses as well as suicide prevention. HEPS works to reduce substance misuse and prevent suicide among college students by promoting safe behaviors and creating supportive campus environments that lower risk factors and strengthen protective factors related to these substances.

Recognizing that lasting change requires system-level shifts, HEPS partners with campus departments to encourage organizational policy changes and safer practices. While formal policy adoption can be slow due to the complexities of higher education institutions, HEPS coalitions have successfully introduced changes such as distributing medication lockboxes and offering overdose prevention training. These efforts build momentum toward broader, sustainable improvements in campus safety and student well-being.



**32 unique agencies** engaged with regarding adoption or enhancement of organizational policies in FY 25 which is an increase from 29 in FY 24

[We worked] alongside the Assistant VP for Student Affairs to curate an memorandum of understanding (MOU), with the NEO Health Clinic on campus to provide lock boxes to students who are prescribed medication.

-Northeastern State University



**2,031 medication lockboxes** and **2,778 medication disposal bags** distributed in FY 2025 by HEPS providers

# STIMULANT AND OPIOID MISUSE PREVENTION

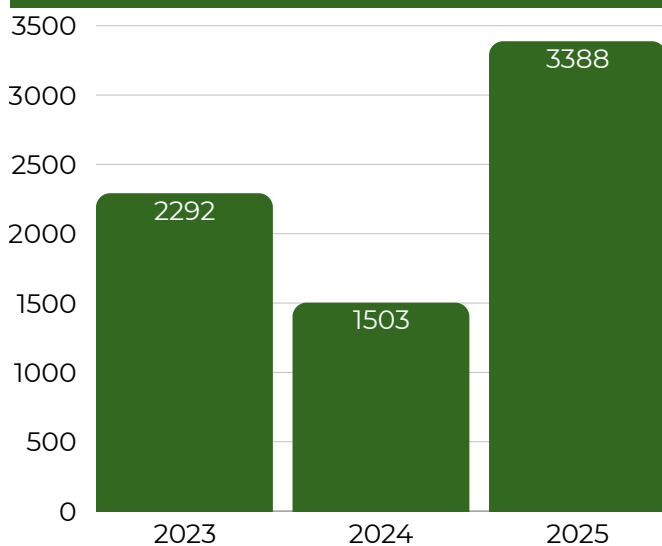
## HIGHER EDUCATION PREVENTION SERVICES

HEPS grantees implement a range of strategies, including trainings on the dangers of stimulant and opioid misuse, safe storage and disposal of medications using lockboxes and disposal bags, and awareness efforts to educate students and staff. These practical steps help reduce access to harmful substances and increase community knowledge about the risks of misuse.



In FY 25, **55 trainings and presentations** were conducted to deliver primary prevention programs across the HEPS sector.

Reach through Trainings and Presentations by Fiscal Year



The reach of trainings and presentations increased from FY 24 to FY 25, with a **total of 3,388 impressions** in FY 25, representing a 125% increase compared to the previous year.

“This January the HEPS Program Coordinator met with program coordinator...from LX Studios to create a naloxone training micro-credential for UCO students, staff, and faculty. Any person on campus who completes the training has the opportunity to take a quiz to receive a micro-credential that is good for two years that they can add to their resumes and CVs.”

University of Central Oklahoma

# STIMULANT AND OPIOID MISUSE PREVENTION

## FAITH BASED PREVENTION SERVICES

Faith coalitions contributed to stimulant and opioid misuse prevention by focusing on practical, community-level strategies. Their efforts included distributing medication lockboxes and disposal bags to promote safe storage and proper disposal of prescription drugs. By incorporating these efforts into their outreach, faith coalitions are taking meaningful steps to create safer, healthier communities.



In FY 25, Oklahoma Faith Network distributed **299 medication disposal bags and 60 medication lockboxes** throughout Oklahoma County and surrounding areas.

In Fiscal Year 2025, the Oklahoma Faith Network advanced its commitment to substance misuse prevention through targeted microgrant funding of up to \$5,000 each to five partner organizations. These faith-aligned initiatives focused on outreach, education, and prevention within Oklahoma communities. Grantees implemented impactful activities, including hosting opioid misuse workshops in collaboration with local high schools, distributing prevention resources and lockboxes to Christian recovery centers, supporting individuals experiencing homelessness and poverty through partnerships with county organizations, and mentoring at-risk youth in cooperation with local nonprofits. These grassroots efforts reflect the strength of faith-based partnerships in addressing the root causes of substance misuse across the state.

St. John's Missionary Baptist Church launched a series of workshops and events to combat stigma and educate the community about substance misuse and mental health. Their initiatives, which included youth-focused sessions and family forums, directly engaged more than 180 individuals and distributed resources like Narcan and lockboxes.

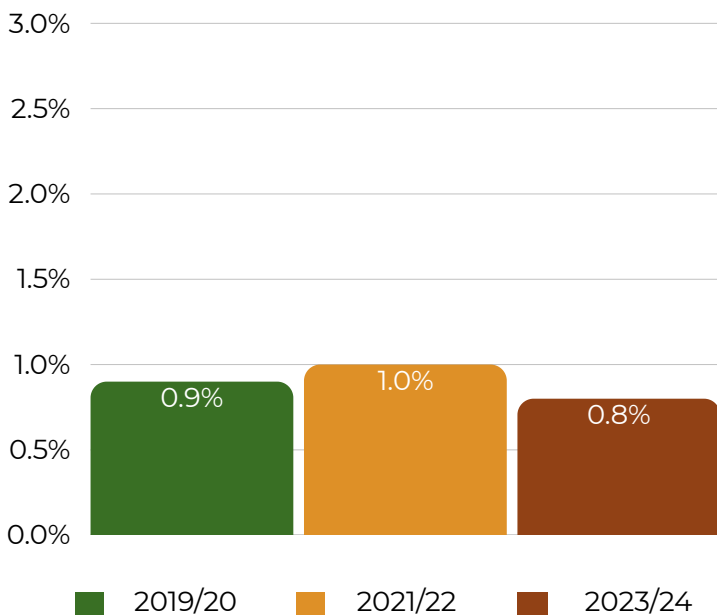


# STIMULANT MISUSE PREVENTION

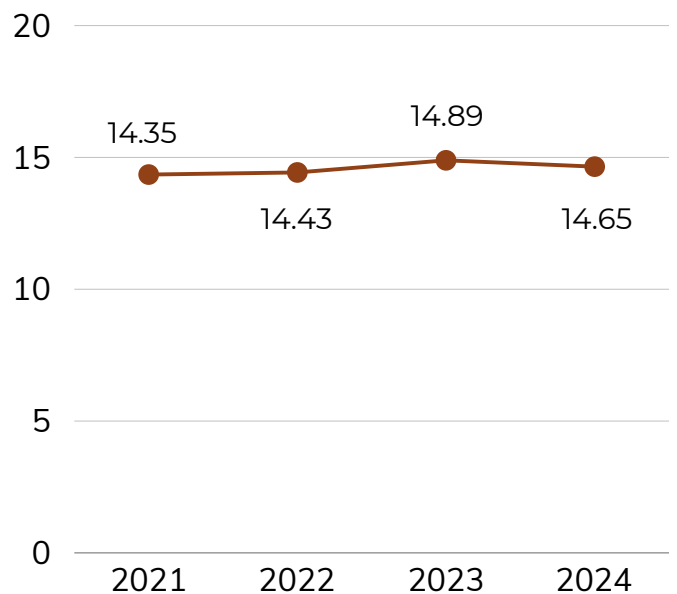
## STATEWIDE OUTCOME DATA

Stimulant use in Oklahoma has remained steady over the past 4–5 years, according to state outcome data. While the statewide rate of stimulant-related non-fatal hospital discharges reached a high of 14.89 per 100,000 in 2023, it declined slightly to 14.65 in 2024. Though this rate remains above the 2021 rate of 14.35, the overall trend has been stable over the past 4 years. The Oklahoma Prevention Needs Assessment (OPNA) Survey, data indicate that non-prescription stimulant use among youth remains very low, with less than 1% of students reporting past 30-day use in 2021–22, and a historic low of just 0.8% in 2023–24. This means that over 99% of surveyed students report not using non-prescription stimulants, which is a promising indicator for ongoing prevention efforts.

**Report of Non-medical Prescription Stimulants  
Past 30 Day Use (All Grades)**



**Statewide Stimulant Non-fatal Hospital Discharges by Year (Rate per 100,000)**



Hospital discharge data are identified using ICD-10-CM codes in any diagnosis field to include stimulant use, dependence, misuse or acute conditions 100% attributable to stimulants. Hospital discharge counts are limited to Oklahoma residents. Overdose cases with discharge status of death or deceased are excluded.

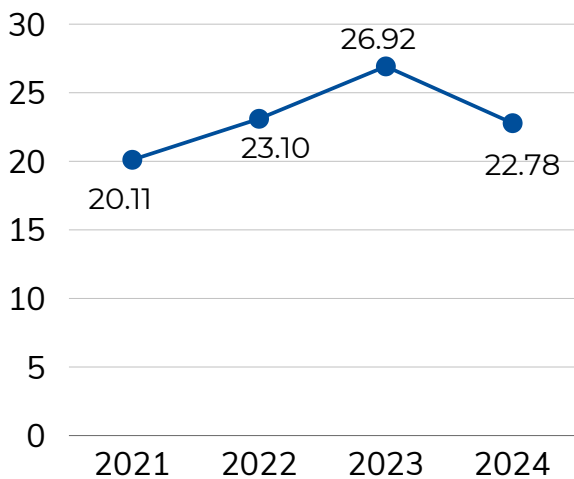


# OPIOID MISUSE PREVENTION

## STATEWIDE OUTCOME DATA

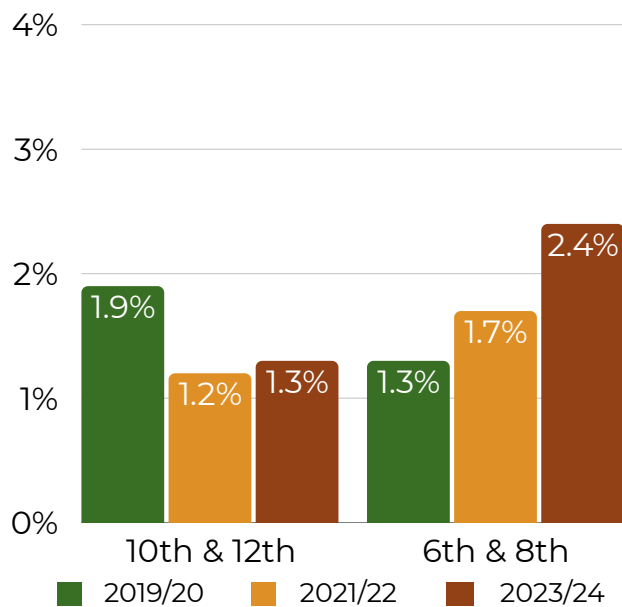
Statewide data indicate progress in opioid-related prevention efforts, though emerging trends among younger students warrant attention. Non-fatal hospital discharge rates related to opioid use reached a peak of 26.92 per 100,000 in 2023 but notably declined to 22.78 in 2024. While this is still slightly above the 2021 rate, it reflects meaningful improvement compared to 2022 and 2023. Data from the Oklahoma Prevention Needs Assessment (OPNA) Survey show a positive downward trend in past 30-day non-prescription pain reliever (opioid) use among high school students, with reported use among 10th and 12th graders declining from 1.9% in 2019–20 to 1.3% in 2023–24. However, use among 6th and 8th graders has slightly increased, from 1.3% in 2019–20 to 2.4% in 2023–24, indicating a potential rise in early experimentation among 6<sup>th</sup> graders. While overall use remains low, with 98% of students reporting not using non-prescription pain reliever in the past 30 days, this data is critical for targeting age-appropriate prevention strategies and supports.

**Statewide Opioid Non-fatal Hospital Discharges by Year (Rate per 100,000)**



Hospital discharge data are identified using ICD-10-CM codes in any diagnosis field to include opioid use, dependence, misuse or acute conditions 100% attributable to opioids. Hospital discharge counts are limited to Oklahoma residents. Overdose cases with discharge status of death or deceased are excluded.

**Report of Non-Medical Pain Reliever Past 30 Day Use (All Grades) Combined**





# OPIOID OVERDOSE PREVENTION

Over the past few years, ODMHSAS has focused on expanding the distribution of naloxone, a life-saving medication that can reverse opioid overdoses, particularly in high-need areas across the state. Naloxone is made available through partnerships with law enforcement agencies, local coalitions, and other trusted community organizations. These partnerships serve as key distribution hubs, helping expand access to life-saving resources and equipping individuals and communities with tools to respond effectively in overdose situations.

**In FY 25, distribution totaled 86,000 doses which is more than double the agency's goal of 40,000.**

A key measure of impact is the number of overdose reversals reported through the use of these naloxone kits. In partnership with law enforcement agencies, ODMHSAS provides naloxone kits specifically for use in the field by law enforcement officers. It is important to note that the data below reflects only overdose reversals from kits distributed by ODMHSAS to law enforcement and does not include reversals from kits provided by other organizations, agencies, tribes, or healthcare providers throughout the state.

**In FY 25, there were 385 administrations of Naloxone and 223 overdose reversals from law enforcement partners.**

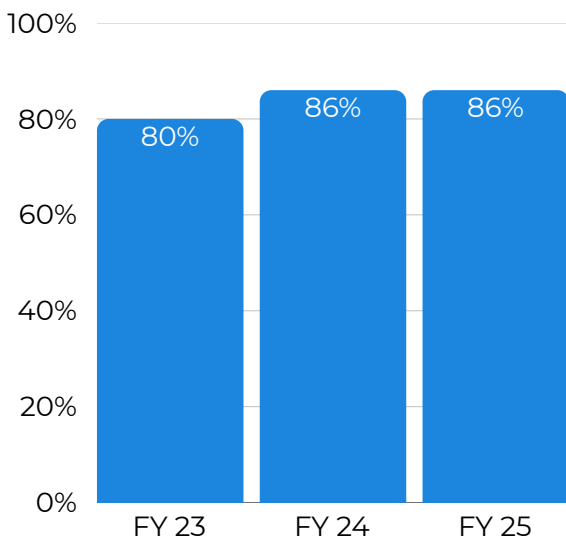
# TOBACCO MISUSE PREVENTION

## SYNAR

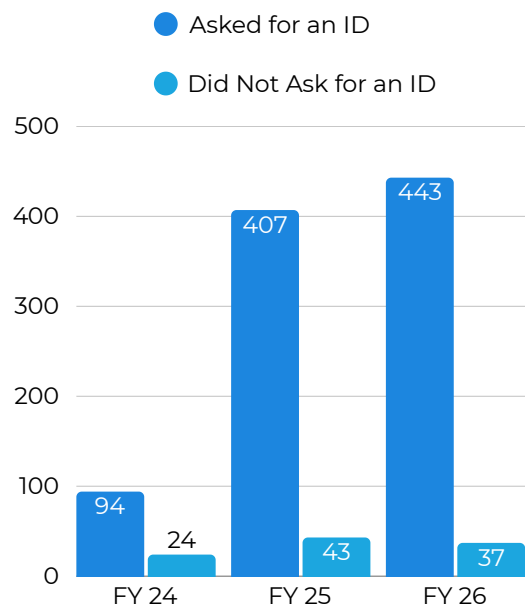
As part of a national effort to prevent youth access to tobacco, the Substance Abuse and Mental Health Services Administration (SAMHSA) requires states to carry out random, unannounced tobacco compliance checks. These checks are designed to see how easy it is for minors to buy tobacco products in retail settings. In Oklahoma, the ODMHSAS Prevention Division works with the ABLE Commission to conduct these checks.

To meet federal standards, states must maintain at least an 80% compliance rate, meaning at least 80% of stores refuse to sell tobacco to minors. Oklahoma has seen strong improvement in this area. The state met the 80% requirement in fiscal year FY 2023, then increased to 86% in both FY 2024 and FY 2025. These improvements reflect not only more compliance checks being completed but also a notable increase in store clerks asking for ID—an important step in keeping tobacco out of the hands of underage buyers.

**Synar Compliance Rate Percentage by Fiscal Year**



**Synar Compliance Rates for Clerks Checking ID by Fiscal Year**

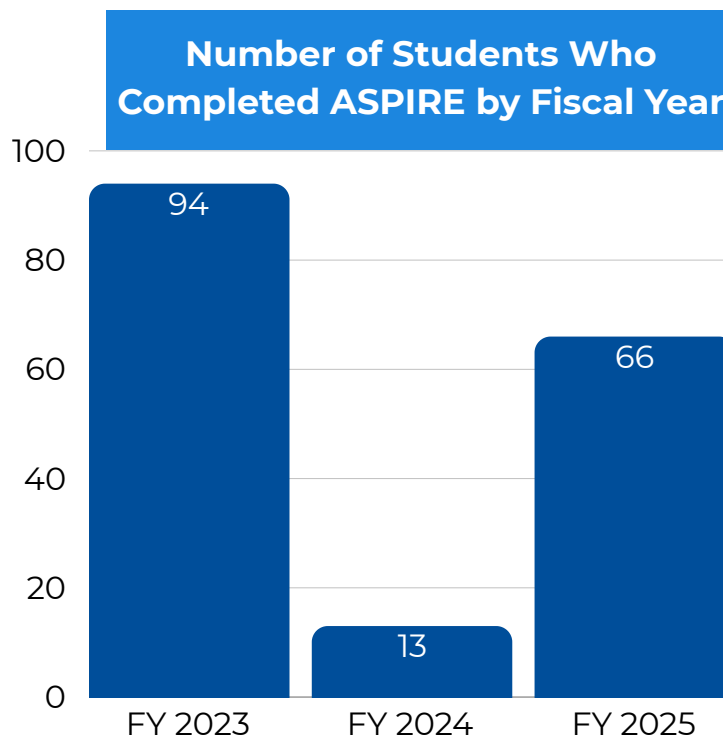


# TOBACCO MISUSE PREVENTION

## SCHOOL BASED PREVENTION SERVICES

### ASPIRE

ASPIRE (**A** Smoking **P**revention **I**nteractive **E**xperience) is an online program that informs adolescents about the risks of tobacco products and reinforces tobacco-free norms.



Previously, ODMHSAS collaborated with the Alcoholic Beverage Laws Enforcement (ABLE) Commission to refer students caught with tobacco products to the ASPIRE program as an alternative to receiving a citation. However, due to changes in state legislation effective November 2023, the ABLE Commission no longer oversees student tobacco citations. This shift resulted in a significant decrease in ASPIRE program referrals. In response, ODMHSAS developed a strategic plan to promote ASPIRE as a universal prevention program. This proactive approach has led to increased program utilization from FY 24 to FY 25, demonstrating the effectiveness of broader implementation beyond citation-based referrals.

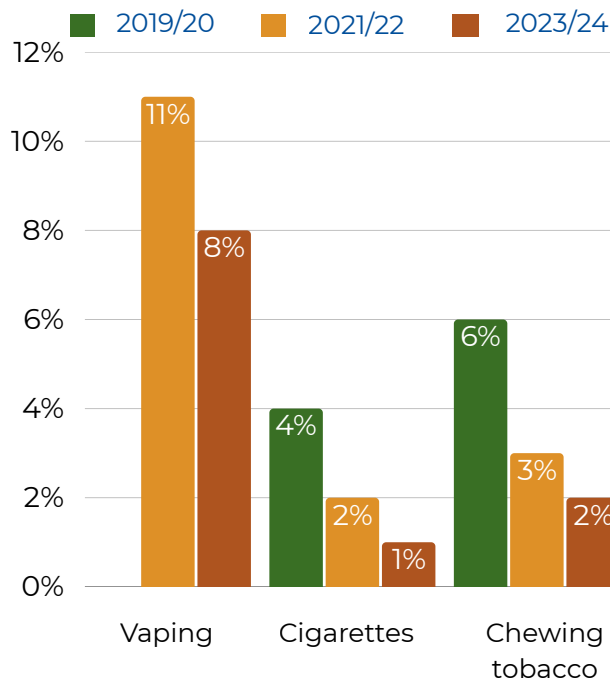
# TOBACCO MISUSE PREVENTION

## STATEWIDE OUTCOME DATA

Recent data from the OPNA Survey shows encouraging progress in reducing traditional tobacco use among youth in grades 6 through 12. **Cigarette smoking has reached a historic low, with 99% of students reporting they had not smoked cigarettes in the past 30 days.** Similarly, 98% of students reported not using chewing tobacco during the same timeframe. While vaping data was not available for the 2019–2020 school year, it continues to represent the most commonly used tobacco-related product among youth. However, there is positive momentum in this area as well. **From the 2021–2022 to the 2023–2024 school year, there has been a 3% decline in youth vaping, with 93% of students now reporting they had not vaped in the past 30 days.**

These trends reflect the impact of ongoing prevention efforts and highlight the importance of continued support for youth-focused education, community programs, and policies that discourage tobacco and nicotine use in all forms.

**Past 30 Day Use of Tobacco by School Year and Product Types**  
(All Grades Combined: 6<sup>th</sup>, 8<sup>th</sup>, 10<sup>th</sup>, 12<sup>th</sup>)



# MARIJUANA MISUSE PREVENTION

## COMMUNITY BASED PREVENTION SERVICES (CBPS)

In Fiscal Year 2025, 15 counties across Oklahoma identified marijuana as their top prevention priority. Local coalitions in these areas are leading efforts to reduce marijuana misuse and its associated harms through community-driven, data-informed strategies. These coalitions focus on educating the public about the risks of marijuana use and promoting healthy choices through awareness campaigns and local events. Equally important, they work behind the scenes to strengthen collaboration among local organizations by holding regular coalition meetings, building strategic partnerships, and ensuring communities are equipped to support effective prevention efforts.

A major part of prevention involves changing systems to make a lasting impact. Coalitions help improve local laws, school or workplace policies, and other community standards to reduce marijuana access and use. This systems-level approach is key to creating healthier environments that support long-term change, not just for individuals, but for entire communities.

“We have identified a specific ordinance that the City of Miami has in place that limits where dispensaries can be located, and we would like the surrounding towns to adopt this. We have spoken to some elected officials and identified that the town of Quapaw already has a similar ordinance in place, while the remaining towns do not have marijuana specific ordinances. We have also identified a law that prohibits tobacco smoke in most indoor and/or public places, and we would like communities to utilize the "Breathe Easy" signage that is already in place and add "marijuana products" to this signage. We have found that the officials we have spoken to were far more receptive to this idea.”

-Ottawa County

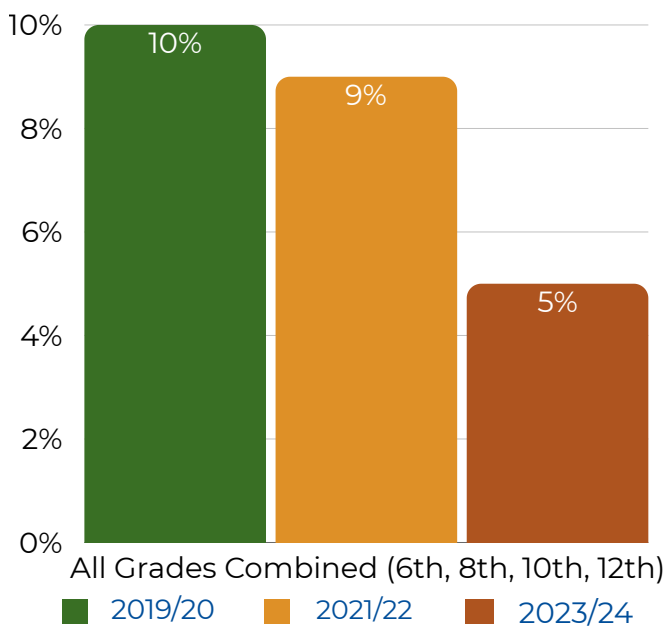


# MARIJUANA MISUSE PREVENTION

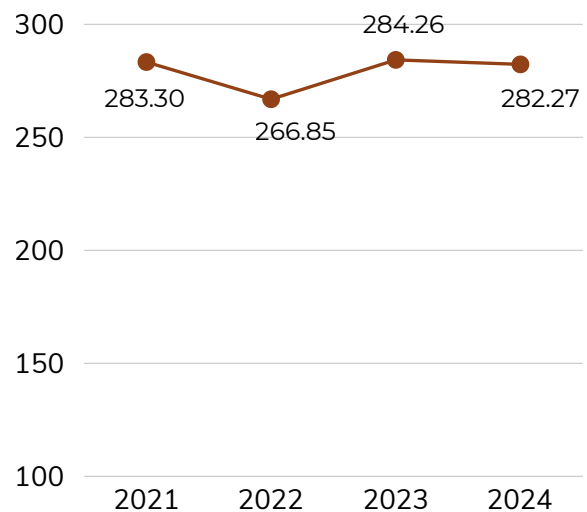
## STATEWIDE OUTCOME DATA

Youth marijuana prevention efforts in Oklahoma are showing positive results, though statewide marijuana hospitalization rates remain a concern. Data from the 2023–24 Oklahoma Prevention Needs Assessment (OPNA) Survey show that 94% of students across all grade levels reported not using marijuana in the past 30 days, an encouraging 5% improvement since the 2019-20 school year. This suggests that current school- and community-based prevention strategies are effectively reducing youth marijuana use. However, statewide non-fatal hospital discharge rates related to marijuana remain elevated, with rates holding steady since 2021, except for a brief decline to 266.85 in 2022. In 2024, the rate declined slightly to 282.27, which is lower than both 2021 and 2023. While the exact causes of these hospitalizations are not fully known, the potency of available medical marijuana products likely plays a role. These findings highlight the importance of continuing to strengthen youth prevention programs while also addressing broader prevention strategies to reduce marijuana-related hospitalizations statewide.

### Past 30 Day Use of Marijuana by School Year



### Statewide Marijuana Non-fatal Hospital Discharges by Year (Rate per 100,000)



Hospital discharge data are identified using ICD-10-CM codes in any diagnosis field to include marijuana use, dependence, misuse or acute conditions 100% attributable to marijuana. Hospital discharge counts are limited to Oklahoma residents. Overdose cases with discharge status of death or deceased are excluded.



# CROSS-CUTTING


## COMMUNITY BASED PREVENTION SERVICES (CBPS)

The CBPS sector includes 38 active community coalitions across the state addressing marijuana, alcohol, opioid, and stimulant misuse prevention. These coalitions play a key role in delivering local, data-informed prevention strategies to reduce substance use and related impacts in Oklahoma communities. One key strategy is systems change work, which focuses on creating long-term, sustainable improvements by changing the environments, policies, and practices that influence behavior. Unlike individual-level efforts that target personal choices, systems-level strategies shift the broader context, such as where people live, work, shop, and spend time. This work is critical to substance use prevention because it creates lasting impact by shaping community environments. Examples include adopting or strengthening laws and ordinances, public policies, and organizational policies within schools, businesses, and other institutions. By improving these systems-level structures, communities can reduce risk factors, support healthier behaviors, and create sustainable change beyond individual actions.



**In FY 25 across the CBPS sector, coalitions engaged with 340 agencies in systems change policy efforts. Additionally, coalitions held 2,877 meetings focused on policy work in their communities.**

Interagency collaboration is a key component of the Community-Based Process strategy. This approach helps coalitions build the skills and structures needed to effectively prevent substance use and misuse by strengthening how organizations work together. Interagency meetings bring diverse partners together to coordinate efforts, align resources, and improve planning and service delivery throughout a community.



During FY 25, coalitions in the CBPS sector met with a total of **182 unique partner organizations** for inter-agency collaboration efforts and **held 788 meetings** focused on strengthening these partnerships.



# CROSS-CUTTING

## COMMUNITY BASED PREVENTION SERVICES (CBPS)

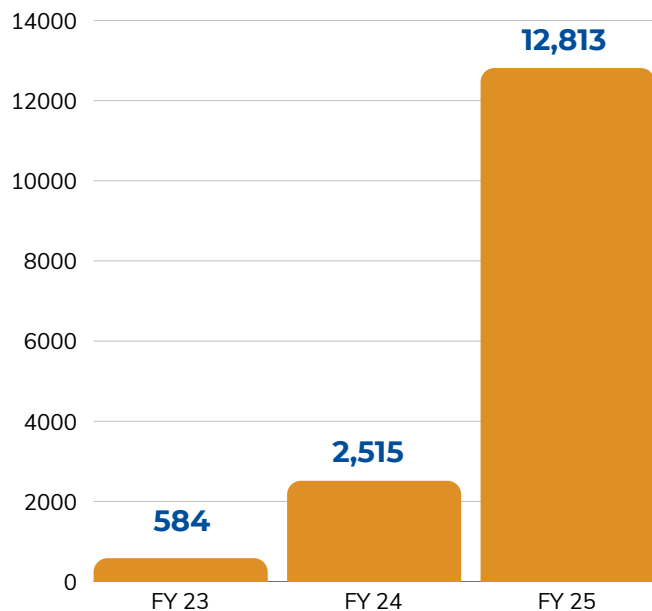
Coalitions use information dissemination as a key strategy to increase public knowledge and awareness about substance misuse within their communities. This strategy helps promote awareness of available prevention programs and services through various methods such as print materials and billboards as well as media outlets like newspapers, television or radio. Social media is often used to reach younger audiences and expand visibility quickly and cost-effectively. Coalitions also conduct trainings and presentations that cover a range of prevention topics and are designed to engage participants and encourage dialogue. This approach goes beyond simply sharing information by creating opportunities for community members to actively participate in learning which strengthens their understanding and involvement in prevention efforts.



**34,650,344 impressions** through print and traditional media outlets such as TV or Radio in FY 25 across the CBPS sector. There were **665,927 impressions through social media** in FY 25 across the entire CBPS sector

The **reach of trainings and presentations increased significantly from FY 24 to FY 25, with a total of 12,813 individuals reached in FY 25, representing a 409% increase** compared to the previous year. During FY 25, 125 trainings and presentations were conducted, delivering primary prevention programming across the entire CBPS sector. This growth in trainings and presentations reflects increased demand for in-person programming following COVID, as well as strengthened relationships with community organizations.

**Number Reached through CBPS Presentations and Trainings by Fiscal Year**





# CROSS-CUTTING

## HEALTHCARE BASED PREVENTION SERVICES

The ODMHSAS has begun full implementation of their Collaborative Care program, which allows adults who have a serious mental illness, those who have a co-occurring mental illness and physical health condition or chronic disease, and those who have a substance use disorder, to receive/access behavioral health services within their primary care setting. SSM Family Medicine in Oklahoma City is serving as one of the inaugural implementation sites and they have begun screening and seeing patients for treatment. In the future, the ODMHSAS looks to expand this partnership to additional sites and additional populations, bringing mental and behavioral healthcare to patients in a familiar, comfortable environment.



# CROSS-CUTTING

## FAITH BASED PREVENTION SERVICES (FBPS)

In FY 2025, Oklahoma’s faith-based prevention efforts strengthened community resilience by empowering faith communities to address substance use and support behavioral health. Through the Oklahoma Faith Network and the Moving Forward with Faith (MFWF) Initiative, five microgrants supported grassroots outreach, including youth mentoring, opioid misuse education, and collaboration with schools, nonprofits, and recovery centers. **Faith providers conducted 36 interagency meetings and delivered more than 50 training and technical assistance sessions** to clergy, lay leaders, and congregants, helping congregations assess local needs, implement prevention strategies, and build sustainable ministry teams.

ODMHSAS provided additional technical support to enhance local partnerships, improve reporting and planning, and expand interfaith collaboration. The Statewide Advisory Council, composed of faith leaders and behavioral health experts, guided these efforts and helped shape major events like the Statewide Faith Leader Summit and Congregational Training in Oklahoma City. These coordinated efforts reflect the vital role of faith communities in strengthening prevention infrastructure and ensuring long-term, community-based solutions to substance use across Oklahoma.



# CROSS-CUTTING

## FAMILY BASED PREVENTION SERVICES

Family-based risk factors are shown to be predictive of future mental, emotional, and behavioral problems. However, families can also offer high levels of protection from risks. ODMHSAS offers evidence based prevention services targeting families through the Strengthening Families Program (SFP), as well as other parent education and support. SFP gives participants the opportunity to develop skills in communication, conflict resolution and empathy. The protective factors provided by strong, healthy, and connected families are many and ODMHSAS is invested in giving families the tools and skills they need to thrive.

### Strengthening Families Program

- 59 families graduated from the program in FY 25 which is a large increase from 20 in FY 24
- 60 adults and 111 youth completed the program

“There was a parent during this cycle who struggled with a lot of behaviors from her teenage boys. She expressed that this program has saved their relationship.”

-SFP Participant







# CROSS-CUTTING

## SCHOOL BASED PREVENTION SERVICES

Botvin LifeSkills Training (LST) is a nationally recognized, evidence-based prevention program shown to reduce the risk of alcohol, tobacco, and drug use, as well as violence among children and teens. The program teaches students practical skills in areas such as drug resistance, self-management, healthy decision-making, and positive social interaction.

While Botvin LST is implemented within some contracted LEAs, it is also available as a statewide program that schools can opt into voluntarily. The ODMHSAS partners with school districts and youth service agencies across the state to support the implementation of Botvin LST and expand its reach beyond contracted LEAs. In FY 25, the program was delivered at 124 school sites across 72 school districts, reaching students in grades 3 through 12.


-  In FY 25, **3,047 students completed the Botvin LifeSkills Training** throughout the state.
-  Elementary students showed the greatest improvement in anti-smoking and life skills knowledge, along with a significant positive shift in attitudes toward alcohol use.
-  Middle school students demonstrated the greatest gains in anti-drug knowledge, along with notable improvements in drug refusal and relaxation skills.
-  High school students showed the most significant shift in anti-marijuana attitudes, along with meaningful improvements in relaxation skills.

# CROSS-CUTTING

## SCHOOL BASED PREVENTION SERVICES

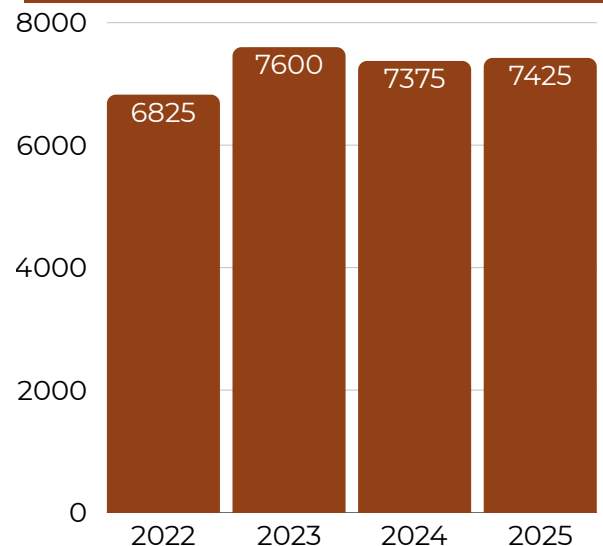
The PAX Good Behavior Game (PAX GBG) is a classroom-based strategy designed to promote positive behavior and improve emotional and behavioral self-regulation among elementary students. The program helps reduce classroom disruptions, off-task behavior, and social withdrawal, creating a more effective learning environment. Research has shown that PAX GBG has long-term positive effects on student outcomes, including reductions in substance use, suicide attempts, and violence, as well as improvements in mental health and academic performance.

PAX GBG is available statewide and any interested school district in Oklahoma can choose to participate in the program. The ODMHSAS delivers PAX GBG in partnership with the OSU Center for Family Resilience (OSU-CFR). Through a state contract, OSU-CFR provides a comprehensive system of support that includes training, technical assistance, and evaluation services to ensure successful implementation and sustainability of the program across participating school sites.

 **80% of educators reported calmer classrooms after PAX implantation**

 **PAX Educators reported less time on behavior management and more time on instruction and teaching (75% and 77% respectively).**

**Students Reached Through PAX GBG by Year**



"PAX fosters an educational environment for my students - challenging each student to try their best."

- Oklahoma PAX Educator

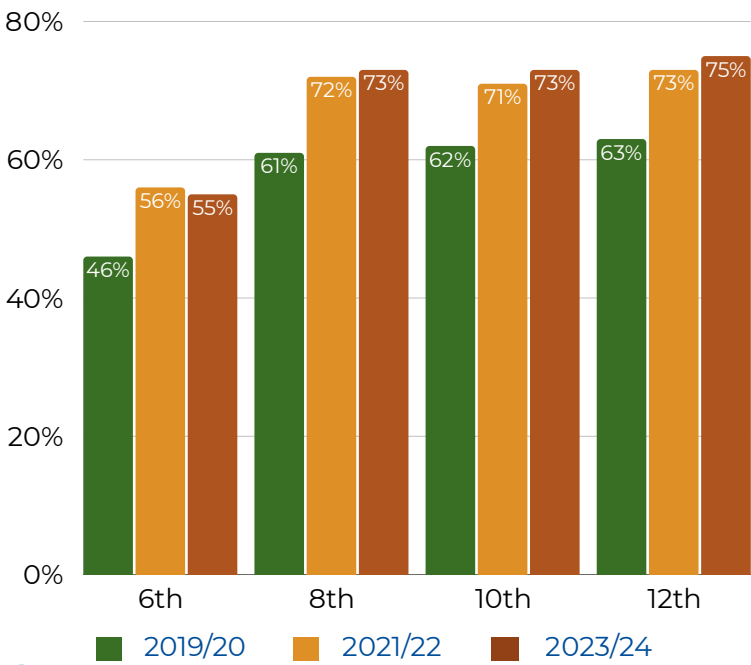


# CROSS-CUTTING

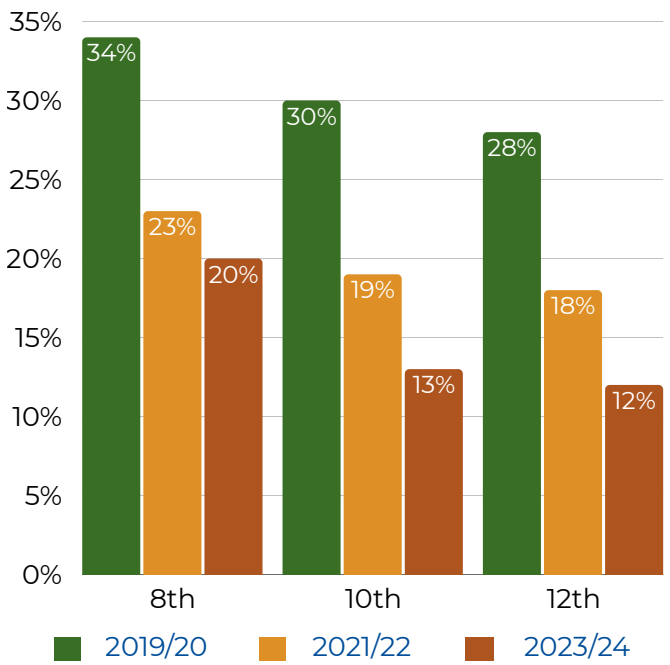
## STATEWIDE OUTCOME DATA

The Risk and Protective Factor Model of Prevention is an evidence-based approach for reducing substance misuse and its associated consequences. Protective factors help reduce the likelihood of youth engaging in problem behaviors by buffering against risks. Research shows that strong connections to family, school, peers, and community, combined with clear expectations and opportunities to contribute, play a key role. **Since the 2019–20 school year, student opportunities for prosocial involvement in schools have significantly increased across all grade levels, strengthening these critical protective factors.** According to the CDC, risk factors, such as peer drug use, are conditions in a student’s environment that increase the likelihood of substance misuse and other problem behaviors. **Encouragingly, from the 2019-20 to 2023-24 school years, the percentage of students at risk for future problem behavior was reduced due to a decrease in substance use by their four best friends.** These trends reflect the impact of ongoing prevention efforts and highlight the importance of continued support for youth-focused education, community programs, and policies that promote protective factors and reduce risk factors.

**Percentage with High Protection Based on the School Opportunities for Prosocial Involvement Scale by Year**



**Percentage at High Risk Based on the Friends' Use of Drugs Scale by Year**



# CONCLUSION

The Fiscal Year 2025 Prevention Division End-of-Year Report reflects meaningful progress across multiple fronts of Oklahoma’s statewide substance use prevention strategy. This year’s data and programmatic outcomes underscore a continued commitment to evidence-based prevention, cross-sector collaboration, and data-informed decision-making. The report highlights steady and encouraging progress in reducing youth substance use across Oklahoma, with statewide survey data showing notably lower levels of past 30-day use of alcohol, tobacco, and marijuana among students. These trends reflect the strength of local prevention coalitions, schools, faith-based organizations, and state partners working in alignment to deliver evidence-based education, expand access to resources, and build safer, healthier communities. Innovations such as on-demand prevention education, virtual training options, and faith-based outreach have enhanced engagement and widened the impact of prevention messaging across diverse communities. Progress is also evident in key system-level indicators, including increased compliance in underage tobacco sales, reduced non-fatal opioid-related hospitalizations, and improved protective factors among youth.

While survey data show fewer students are using substances, hospital discharge rates related to marijuana and alcohol remain concerning. The persistently high number of marijuana-related hospitalizations and steady rates of alcohol-related incidents suggest that while overall use is declining, the substances being used may be more potent or consumed in more dangerous ways, especially among adults. These indicators reinforce the need to maintain a dual focus: reducing use rates through early prevention while also addressing the severity of outcomes among those who do use.

Mental health remains a critical area of concern, with more than half of surveyed students reporting moderate to high levels of psychological distress. However, for the first time in recent years, data shows a slight improvement, signaling that expanded mental health supports in schools and communities may be starting to take hold. Continued investment in comprehensive prevention, including mental health education, substance use awareness, and community capacity-building, is essential to sustain these gains. As Oklahoma moves forward, a strong prevention infrastructure, responsive to both data and community needs, remains key to protecting the well-being for all Oklahomans.