

Goals	Objectives	Strategies
<b>Goal MW1: Reduce the impact of adult mental, emotional and behavioral health disorders.</b>		
	<b>By December 31, 2026, reduce the rate of hospitalizations attributable to mental disorders for adults aged 18 years and older from 1,009.2 per 100,000 population (2020) to 908.3 per 100,000 population</b>	
		<p>Improve care coordination and increase health care settings that integrate behavioral health and primary care.</p> <p>Improve mental health screening and assessment rates for adults for mental, emotional, and behavioral health condition.</p> <p>Improve access to evidenced-informed and evidence-based treatment for adults diagnosed with a mental, emotional, or behavioral health condition.</p>
	<b>By December 31, 2026, reduce the percentage of adults aged 18 years and older who had poor mental health on 14 or more of the past 30 days from 12.3% (2020) to 9.2%.</b>	
		<p>Implement initiatives for families, post-secondary institutions, employers, and communities on mental, emotional, and behavioral health to promote and support resiliency.</p> <p>Increase screening specifically for depression, anxiety and suicidality.</p>
	<b>By December 31, 2026, decrease the number of adults aged 18 years and older with involuntary examinations (Baker Act) from 173,119 examinations (2019) to 121,183 examinations</b>	
		<p>Increase training and education of state and local agencies, stakeholders and organizations on approaches, evidence-based practices, and initiatives for de-escalating mental health crisis.</p> <p>Improve data on Baker Act examinations.</p> <p>Increase resources for crisis response (e.g., MRTs).</p>
<b>Goal MW2: Reduce the impact of pediatric mental, emotional and behavioral health disorders</b>		
	<b>By December 31, 2026, decrease the number of children aged 17 years and under with involuntary examinations (Baker Act) 37,873 examinations (2019) to 26,511 examinations.</b>	
		<p>Increase training and education of state and local agencies, stakeholders and organizations on approaches, evidence-based practices, and initiatives for de-escalating mental health crisis for youth and children.</p> <p>Improve data collection on Baker Acts examination.</p> <p>Increase resources for crisis response (e.g., MRTs).</p>
	<b>By December 31, 2026, reduce the percentage of students who feel sad or hopeless over the last two weeks from 34.3% (2021) to 29.6%</b>	
		<p>Implement and enhance initiatives to train and educate families, schools, and communities on mental, emotional, and behavioral health to improve awareness and prevention.</p> <p>Increase screening specifically for depression and suicidality.</p> <p>Implement initiatives that promote and support resiliency in schools and communities.</p>
	<b>By December 31, 2026, increase the percentage of children aged 3 to 17 years with a mental/behavioral condition who receive treatment or counseling from 45% (2020) to 55%.</b>	

Goals	Objectives	Strategies
		<p>Improve care coordination and increase health care settings that integrate behavioral health and primary care.</p> <p>Improve mental health screening and assessment rates for youth and children for mental, emotional, and behavioral health condition.</p>
<b>Goal MW3: Reduce substance use disorders and drug overdose deaths.</b>		
		<b>3.1 By December 31, 2026, reduce current inhaled nicotine** prevalence in youth aged 11 through 17 years from 14.4% (2021) to 11.1%.</b>
		<p>Decrease use of inhaled nicotine products among Florida youth through state and local education and advocacy</p> <p>Increase the number of tobacco control policies that prevent youth access to tobacco and nicotine products and promote tobacco free norms.</p> <p>Expand availability and increase use of tobacco cessation treatment.</p>
		<b>3.2 By December 31, 2026, decrease current inhaled nicotine***prevalence in adults aged 18 years or older from 23.4% (2020) to 19.3%.</b>
		<p>Increase awareness, knowledge, and support for policies that promote cessation</p> <p>Work with Health Care and Social Services to institutionalize recommended cessation screening and referral interventions.</p>
		<b>3.3 By December 31, 2026, increase the percentage of pregnant women who have been screened and/or received a brief intervention for alcohol and/or substance abuse from 0% (2021) to 25%.</b>
		<p>Increasing the number of providers who routinely do screening, brief intervention, and referral to treatment will improve opportunities to engage pregnant women in treatment for opioid disorders.</p> <p>Promote availability of reimbursement for screening and brief intervention to encourage providers to add SBIRT to routine care.</p>
		<b>3.4 By December 31, 2026, reduce deaths caused by opioid overdose from 29.9 per 100,000 population (2020) to 15 per 100,000 population.</b>
		<p>Increase access to naloxone for individuals at risk of experiencing or witnessing an overdose by engaging key stakeholders throughout the state</p> <p>Expand and increase the number of MAT service providers/ x-waivered prescribers in operation as well as the number operating at capacity</p> <p>Expand the number of recovery support and bridge programs in operation to assure persons at risk of overdose receive appropriate care to reduce risk of overdose</p>
		<b>3.5 By December 31, 2026, increase the number of comprehensive substance use data systems that integrates data from multiple stakeholder agencies from 0 (2022) to 1.</b>
		Improve access to current data across systems that track overdoses and overdose deaths, including PDMP data, health systems data from EHRs and through health information technology infrastructure data integration and alignment.
		<b>3.6 By December 31, 2026, increase the number of formal addiction stabilization centers statewide from 1 (2021) to 25.</b>

Goals	Objectives	Strategies
		Provide services for individuals with substance use disorder or having experienced addiction with the goal of stabilizing the patient and providing additional mental health and long-term treatments in a coordinated centralized effort. Counties will be selected to replicate the three-prong Palm Beach County Addiction Stabilization Center model.

**Goal MW4: Reduce suicide behaviors and death.**

	<p><b>4.1 By December 31, 2026, reduce the number of high-school students who indicate they have attempted suicide from 7.9% (2019) to 5.4%.</b></p>	<ul style="list-style-type: none"><li>● Enhance awareness of and improve access to suicide prevention and education resources.</li><li>● Improve and expand state and public health capacity to routinely collect, analyze, report, and use suicide-related data to implement prevention efforts and inform policy decisions.</li><li>● Implement suicide prevention trainings and increase suicide prevention efforts, including high-risk and special populations, using evidence-based frameworks.</li></ul>
	<p><b>4.2 By December 31, 2026, decrease the rate of suicide deaths for adults aged 65 years and older from 19.1 per 100,000 population (2020) to 15.5 per 100,000 population.</b></p>	
	<p><b>4.3 By December 31, 2026, reduce the rate of veteran suicides from 37.7 per 100,000 veterans</b></p>	

	<b>(2020) 27.7 per 100,000 veterans</b>	
--	---	--