



Jeff Landry
Governor

State of Louisiana

OFFICE OF THE GOVERNOR DRUG POLICY

Dr. Shayla Polk, LCSW
Director

Cortalya Muse, M.S.,
B.S.
Prevention Systems
Manager

DRUG POLICY BOARD January 30, 2025; 10:00 AM - 12:00 PM LA State Capitol, House Committee Room 1, 900 N. Third St., Baton Rouge

MINUTES

Call to Order

Dr. Shayla Polk, Executive Director of the Governor's Office of Drug Policy and Chair of the Drug Policy Board, called the meeting to order at 10:20 AM

Welcome and Introductions

Dr. Polk welcomed everyone to the first quarterly meeting of the Drug Policy Board. She asked everyone to introduce themselves. After completing introductions, Dr. Polk announced that the quorum was met with 13 members present. A list of all members and stakeholders who attended the meeting is provided and included at the document's end.

Old Business

- *Review and approve minutes from previous meeting*

Dr. Polk asked everyone to refer to the minutes emailed before the meeting. While doing that, she reminded everyone that a copy of the minutes was in their packets. After a moment of silence to review, A motion to approve was raised by Linda Gauthier and Mr. Rusty Fornea seconded the motion. All who were present agreed with the motion. None disagreed. None abstained.

New Business

- A. *Presentation with Open Discussion: Understanding and Addressing Substance Use Disorder Stigma Among Public Health, Public Safety, Law Enforcement, and Drug Court Professionals* – Dr. Shayla Polk, Office of Drug Policy.**

Dr. Shayla Polk delivered a presentation focused on understanding and addressing the stigma surrounding substance use disorder (SUD) among public health officials, law enforcement, drug court professionals, and public safety personnel. She emphasized the importance of not only fostering awareness within the professional community but also sharing this knowledge with the broader public to promote greater understanding and reduce stigma. Dr. Polk highlighted the need for attendees to become educators within their communities, ensuring that critical information about SUD did not remain confined

within the session's walls. The presentation outlined several objectives, including identifying different types of SUD-related stigma, understanding their impact across various sectors, and learning strategies to reduce stigma and improve health and safety outcomes for affected individuals. Dr. Polk stressed that stigma, shame, and discrimination were significant barriers preventing many people from seeking necessary treatment. She underscored the importance of creating supportive environments where individuals could ask for help without fear or embarrassment. Polk presented 2023 data from SAMHSA, illustrating the prevalence of substance use disorders among individuals aged 12 and older. She highlighted that 21.3 million people were affected by alcohol use disorder, 19.6 million by drug use disorder, and 28.9 million by combined alcohol and drug use disorder. The age group with the highest reported rates was individuals aged 18 to 25, with evidence suggesting that many began using substances between the ages of 12 and 17.

The presentation also addressed specific substance use trends, including marijuana use disorder, which had the highest prevalence among individuals aged 18 to 25, and prescription pain reliever misuse. Dr. Polk noted that prescription medications were frequently obtained from friends, relatives, or healthcare providers, underscoring the need for more outstanding public education on responsible prescription practices and medication security. Dr. Polk encouraged participants to take an active role in combating SUD-related stigma. She urged them to promote empathy, advocate for better access to care, and collaborate across sectors to improve health outcomes. By fostering understanding and reducing discrimination, professionals in public health, law enforcement, and other sectors could contribute to more supportive communities for individuals facing substance use challenges.

Dr. Shayla Polk emphasized the critical role of language in reducing the stigma around substance use disorder (SUD). She underscored the importance of adopting non-stigmatizing, person-centered terminology to foster empathy and understanding. Terms such as "substance abuse" should be replaced with "substance use" or "substance misuse." Similarly, dehumanizing terms like "addicts," "alcoholics," "junkies," and "users" were discouraged in favor of "people with SUD" or "people who use drugs." Dr. Polk highlighted that language choices matter in reinforcing or dismantling negative stereotypes. For instance, "dirty" and "clean" drug screens should be reframed as "positive" or "negative UDS" and "relapse" as "return to use" or "reoccurrence." In the context of newborns, the term "addicted babies" should be replaced by "substance-exposed newborns."

Dr. Polk reiterated these points across several slides to ensure participants internalized and adopted the recommended language changes. She stressed that repeated exposure to these terms would increase the likelihood of their appropriate use in professional and daily settings.

Dr. Polk began by outlining actionable strategies for addressing stigma and improving care for individuals with substance use disorders (SUD). She emphasized the importance of ongoing education for law enforcement, drug court professionals, and public health officials, focusing on harm reduction and trauma-informed approaches. Dr. Polk advocated policy and practice reforms, urging the identification and elimination of policies that criminalize addiction while promoting treatment-based solutions over

incarceration. She also stressed the need for standardized, stigma-free language in reports, court proceedings, and public communications.

Dr. Polk highlighted the value of cross-sector collaboration, pointing to the Governor's Task Force on Impaired Driving as an example of successful partnerships aimed at expanding rehabilitation and diversion programs. She discussed the promotion of diversion programs and crisis intervention, which are crucial to reducing recidivism and prioritizing rehabilitation.

The presentation ended with Dr. Polk sharing upcoming changes to outdated language and practices, signaling a shift toward more positive approaches. She encouraged continued advocacy and collaboration to reduce stigma and improve treatment outcomes. After her presentation, she opened the floor for questions and further discussion.

B. A Look Ahead for 2025 – Dr. Shayla Polk, Office of Drug Policy.

Lisa Freeman, Executive Director of the Louisiana Highway Safety Commission, shared the need for proactive and comprehensive approaches to addressing substance use disorders (SUD) and mental health challenges within Louisiana's justice and public health systems. She emphasized the importance of early screening and intervention for DWI offenders, advocating for a preventive strategy that identifies underlying health and behavioral issues rather than solely addressing legal infractions. Freeman noted that early detection of SUD, much like early medical screening for illnesses like cancer, could prevent more severe issues. She explained that waiting until the third DWI offense to intervene put individuals at repeated risk, both to themselves and others.

Freeman also referenced a pilot program in Louisiana that revealed significant findings: more than half of the screened offenders presented with an SUD, and many had co-occurring mental health conditions such as PTSD, bipolar disorder, or gambling addiction. This underscored the need for holistic assessments that consider both substance use and mental health. She stressed that addressing only substance use without considering co-occurring conditions had proven insufficient, highlighting that effective interventions must address the entire spectrum of an individual's needs to reduce recidivism and promote recovery.

Additionally, Freeman emphasized the importance of cross-sector collaboration, involving courts, prosecutors, defense attorneys, and mental health providers to create individualized treatment plans. By collaborating early, professionals can address the root causes of offenders' behaviors rather than relying solely on punitive measures. She concluded by advocating for systemic change, urging the justice system to adopt proactive measures that focus on early, comprehensive interventions, which have demonstrated better outcomes for both individuals and public safety.

Quinetta Womack, Assistant Deputy Secretary, LDH/OBH, expressed her gratitude for Dr. Polk's presentation and Lisa's insights regarding the data shared. She noted that at the beginning of each year, it would have been beneficial for the board to receive this type of data to guide their direction for the rest of the year. She thanked them for that information. In addition, she emphasized that screening early was one of their missions across all training programs offered statewide, regardless of the project or funding

source. They consistently discussed the importance of screening and trained on Screening, Brief Intervention, and Referral to Treatment (SBIRT), which is accessible to anyone. They engaged with law enforcement, hospitals, and various community stakeholders about the significance of screening and referral to treatment. Womack highlighted their support for peers in recovery who actively engaged with individuals, providing coaching and mentorship. These peers maintained hope for those who might not yet be ready for treatment, encouraging them to screen and refer for treatment while waiting for their readiness. She also mentioned various initiatives aimed at addressing stigma, which is a significant barrier to treatment as individuals often feel judged due to their substance use. Womack appreciated all the feedback and insights shared during the discussion.

Public Comments

Dr. Will Hall, Director for the Office of Public Policy- LA Baptist Convention raised critical concerns about Louisiana's youth substance use data. He highlighted that Louisiana high school seniors rank number one nationally in alcohol use and illicit drug injection and previously ranked 14th in marijuana use before medical marijuana legalization. Landry emphasized the need for comprehensive, state-specific data to understand how changing marijuana regulations might impact youth substance consumption. He recommended developing a more detailed breakdown of substance use trends among Louisiana youth, stressing the importance of gathering granular information to inform policy decisions and protect young people from potential substance abuse risks.

Dr. Shayla Polk responded to Will Hall concerns about youth substance use data by emphasizing the Drug Policy Board's commitment to comprehensive information gathering. She directed board members' attention to the Hope Council's 2023 end-of-year report, which she had included in each participant's packet, complete with a QR code for easy access to Louisiana-specific data. Acknowledging Landry's points about youth substance use trends, particularly regarding marijuana consumption, Polk highlighted the board's active efforts to gather and analyze critical information. She noted the packet contained detailed data to help inform understanding of substance use patterns among Louisiana youth. Polk also referenced the VA's policy of labeling cannabis use disorder, which aligns with the board's ongoing efforts to use precise, non-stigmatizing language when discussing substance use. She emphasized the importance of tracking and understanding these trends, especially as cannabis regulations continue to evolve. Her primary goal was to provide board members and stakeholders with the most current, accurate data possible to support informed policy decisions. Polk encouraged everyone to review the Hope Council report and utilize the QR code for additional insights into Louisiana's substance use landscape, demonstrating the board's proactive approach to addressing complex substance use challenges.

Dr. Peter Croughan, LDH Deputy Secretary + Interim State Health Officer, shared that he was pleased to see MOUD used in the presentation and spoke on the clinical evidence in evolving language around medication for opioid use disorder (MOUD). He highlighted the transition from MAT (medication-assisted treatment) to MOUD, specifically focusing on methadone and buprenorphine treatments. LeBlanc noted that despite long-standing use of the term MAT, the shift to MOUD is driven by significant

research findings. He pointed out that studies demonstrated a substantial mortality reduction for patients receiving medication, even without concurrent counseling. The National Academy of Medicine's guidance further supports the view that medication itself constitutes treatment. From his professional perspective, LeBlanc observed that prescribing Suboxone is often more straightforward than arranging counseling, and many patients successfully manage their condition with medication alone. His commentary underscored the importance of reducing stigma and changing institutional understanding of opioid use disorder treatment. By advocating for more precise terminology and recognizing medication as a primary treatment method, LeBlanc aims to improve patient outcomes and challenge existing perceptions about substance use disorder management. His insights reflect a nuanced, evidence-based approach to addressing complex healthcare challenges.

Tony Landry from the Veterans Action Council delivered a passionate critique of Louisiana's medical cannabis testing protocols. He urged the State Police to upgrade their testing equipment and challenged the health department's apparent reluctance to test cannabis products, sharing personal experiences of purchasing potentially compromised medical cannabis. Landry emphasized the critical need for a comprehensive testing compliance program, arguing that patients currently lack a reliable method to verify the safety and quality of their medical cannabis. Expanding his initial concerns, Landry stressed the importance of rigorous regulatory oversight, insisting that regulations must include thorough compliance checks to ensure patient safety. He highlighted potential risks such as post-packaging contamination, including mold growth, and argued for the creation of a dedicated state testing compliance section. Landry demanded a systematic approach where patients could easily submit cannabis products for professional testing and verification, underscoring the need to proactively identify and address potential health hazards in medical cannabis products. His testimony centered on protecting patient safety and ensuring product integrity, presenting a compelling case for immediate regulatory improvements in Louisiana's medical cannabis program. Landry's advocacy called for a transparent, accessible mechanism to test and validate the quality and safety of medical cannabis, challenging current regulatory practices and pushing for more robust consumer protection measures.

Rebecca Chaisson from the Louisiana State Police Crime Lab responded to Mr. Landry and provided a detailed perspective on medical cannabis testing protocols. She recalled that since the inception of the medical marijuana program, testing responsibilities were assigned to the Department of Agriculture and the LSU lab, which she noted maintains an extensive testing menu. Chaisson confirmed that all medical cannabis products intended for dispensaries undergo batch testing before distribution, and to her knowledge, this process has been consistently implemented without reported issues. However, Chaisson clarified the limitations of her laboratory's testing capabilities. She explained that the State Police Crime Lab can only test for controlled dangerous substances, and any testing involving contaminants like fungus, mold, or pesticides would require specialized equipment and staffing not currently available in her lab. To conduct such tests, she emphasized that a separate, dedicated laboratory would be necessary. Chaisson also noted that for her lab to test any substance, it must be associated with a criminal offense, further highlighting the constraints on comprehensive medical cannabis product testing. Her testimony provided a nuanced view of the current testing infrastructure, acknowledging both the existing testing protocols and the significant gaps in comprehensive product safety verification for medical cannabis in Louisiana.

A local small business owner delivered a pointed critique of Louisiana's cannabis regulations, expressing deep frustration with the inconsistent enforcement of laws affecting different businesses. He highlighted the stark contrast between his experience as a small business owner and the perceived lenient treatment of medical marijuana organizations. The speaker detailed how he was compelled to remove a substantial amount of product from his store on January 1st, despite previously having Department of Health approval and an ATC license. In contrast, he observed that medical marijuana organizations appeared to operate with significantly more flexibility, citing a specific example of the O'Neill location distributing medical marijuana cards directly from their parking lot. His testimony suggested that the medical marijuana card system seemed more like a casual membership program than a strictly regulated medical treatment pathway. He questioned the rigor of the card approval process, noting that, to his knowledge, no one had been denied a card. This led him to characterize the medical marijuana program as resembling a "Sam's Club membership" that offers minimal tangible benefits. The speaker's comments underscored a broader concern about regulatory inconsistency, highlighting the disparate treatment of small businesses versus larger medical cannabis organizations in Louisiana's evolving regulatory landscape. His testimony reflected frustration with what he perceived as uneven enforcement and a lack of clear, consistent standards across different sectors of the cannabis industry.

Tony Landry began his remarks by thanking the Louisiana Office of Drug Control Policy for the opportunity to speak. He introduced himself not just as an advocate, but as a voice for the countless Louisianans; especially veterans and patients who are deeply affected by the recent restrictions on hemp-derived THC products.

He acknowledged the board's role in promoting public health and safety but urged them to also consider the human impact of these regulations. He emphasized that for many, veterans with PTSD, individuals with chronic pain, and those with debilitating conditions hemp-derived THC is not a luxury but a necessity.

Landry stated that Louisiana veterans, who have served the country with honor, often return home to face ongoing battles with pain, trauma, and a healthcare system that fails to meet their needs. Many of them have turned to hemp-derived THC as a safe, legal alternative to opioids and other addictive medications. However, due to the new restrictions, access to that relief has been significantly reduced. He questioned what message this sends to those who have sacrificed so much.

He further explained that it's not just veterans who are impacted. He mentioned hardworking individuals, elderly residents, and people with disabilities who now face an impossible choice: spend more money to achieve relief with lower-potency products or turn to underregulated and potentially unsafe alternatives. He warned that some may even return to substances like opioids or alcohol, which pose far greater health risks.

Landry highlighted that Louisiana sees 300 to 400 alcohol-related traffic deaths each year, yet high-potency alcohol products like "nips" and Sunny D vodka seltzers are sold openly on candy aisles in grocery and gas stations. He referenced an email he had sent that included photos of these alcohol products placed next to candy. He contrasted this with the treatment of hemp products, which are now required to be hidden behind counters, and said, "Something's wrong with that."

He stated clearly that severely restricting hemp-derived THC does not protect health, as no one is dying from THC. Rather, these policies force vulnerable citizens into desperate situations.

Landry also addressed the economic consequences, pointing out that Louisiana's hemp industry has the potential to create jobs, increase tax revenue, and offer a safe, regulated market for consumers. He warned that other states are capitalizing on this industry, and if Louisiana continues down a restrictive path, it risks pushing businesses out and missing out on valuable economic opportunities; ultimately failing the very people it seeks to protect.

He closed by urging the board to reconsider the restrictions, not only as policymakers but as compassionate leaders. He called for a balanced approach that ensures public safety without removing access to necessary relief. He asked that the board recommend rescinding the recent restrictions on the hemp industry and restoring access to hemp-derived THC products that meet the needs of Louisiana residents.

He concluded by saying that together, the state could build a future where compassion and public safety go hand in hand and thanked the board for their time.

Dr. William Hall, Director for the Office of Public Policy- LA Baptist Convention, although he had not originally planned to speak, he emphasized his perspective as a veteran, noting that veteran-related issues are deeply important to him. However, he cautioned against forming public policy based on anecdotal information.

He referenced a study conducted by Yale involving 2,772 veterans with PTSD who were using marijuana. The study found that marijuana exacerbated violent behavior rather than decreasing it. Furthermore, it indicated an increase in opioid use and alcoholism among the veterans who participated in the study. Dr. Hall urged the audience not to be swayed by personal testimonies, but rather to examine the research carefully, which he stated is very clear regarding the use of marijuana for PTSD.

He also addressed the issue of THC-derived products and referenced the HOPE report. Dr. Hall expressed concern that the report did not include data on THC-related adverse events among youths. He recalled that Dr. Warren Throckmorton, a now-deceased former member of the committee, had gathered data showing a 645% increase in adverse events among children over two years. Dr. Hall emphasized that this data was missing from the HOPE report and argued that it would be particularly helpful in light of recent regulatory changes affecting cannabis and CBD products.

In clarifying terminology, Dr. Hall acknowledged the technical classifications of marijuana and hemp as cannabis. He then called on the board to recommend to the governor and the Department of Health that all health professionals be mandated to report data on adverse THC events among children. He stressed the need for systematic data collection from clinics, private practices, and hospitals to inform sound legislative decisions. He cited a surge in incidents involving children consuming THC-infused gummy products in Rapids as a pressing example.

Dr. Shayla Polk responded to Dr. William Hall with a brief clarification, noting that the HOPE Report originates from the Heroin and Opioid Council and is managed by individuals at the Office of Behavioral Health. She mentioned that there were individuals present in the room at the time and reiterated the information for clarity. Dr. Polk suggested that this may be a topic worth bringing up at one of the Council's board meetings for discussion among its members.

Dr. William Hall shared that he has reached out regarding the individuals in question but has not yet received any callbacks. Before the new year, he had made multiple attempts to contact them.

Regarding the question about data related to youth, Dr. Hall sought clarification on whether there is a need to document any adverse event in which a child is taken to a medical professional, clinic, or hospital. He emphasized the importance of collecting this information in order to build a strong data foundation that can guide future efforts to protect children, even as adults continue to have access to these products.

Lisa Freeman responded to Dr. Hall with a brief comment about the State Child Death Review Panel, a board she serves on. One growing concern the panel is discussing is the rise in THC poisonings among children under the age of 14. Freeman suggested this issue could be of interest, noting that Dr. Hall's expertise could help foster important dialogue. The panel meets quarterly, as does Dr. Hall's board, and Freeman believes Dr. Hall's insights would be valuable to their discussions.

Freeman also highlighted concerning statistics, stating that high school seniors in Louisiana currently rank number one nationally for alcohol use and injecting illicit drugs. Before the legalization of medical marijuana, the state ranked 14th for marijuana use, but since then, access has become easier for both adults and youth. Freeman noted that this issue is not limited to Louisiana, as other states, including Colorado, Oregon, Washington, and California, are tightening marijuana regulations due to the impact on young people. She referenced a *Los Angeles Times* series on the issue and mentioned that Colorado's attorney general is leading efforts to restrict THC access solely to adults in response to the rising problems among youth.

Tony Landry, representing the Veterans Action Council, expressed concerns regarding the safety and regulation of THC gummies accessible to children. Mr. Landry stated that the contents of such products were often unknown, raising the risk that additional, unregulated chemicals could be included by unlicensed manufacturers. He emphasized the need for a statewide testing and compliance system to ensure the safety and proper labeling of THC products.

Mr. Landry noted that while current testing could determine the presence of THC, it did not reliably measure THC concentration levels. He urged the state to establish a facility or process where products could be independently tested for potency and contaminants. He concluded by stating that, as the state collects tax revenue from cannabis and hemp sales, it has a responsibility to ensure product safety through proper compliance measures.

B. Office of Drug Policy Updates

Dr. Shayla Polk announced that the Office of Drug Policy had scheduled their next meeting with the governor's task force on impaired driving for November 5. She clarified that the following meeting would take place on February 5, held at the capitol in the press room on the fourth floor. This was the next item on their agenda. Dr. Polk mentioned that there were some remarkable work groups in progress and encouraged anyone who heard relevant information during the meeting to attend. She noted that participation in the workgroup was open to the public, including individuals with expertise in data analysis

C. Member agency updates

Rebecca Chiasson from the Louisiana State Police Crime Lab and the Louisiana Board of Pharmacy had been working together. A draft bill had been prepared to mirror federal regulations by adding three compounds to the controlled substances schedule: two benzodiazepine drugs, which are opioids, and one stimulant. It was noted that Representative Mack would author the legislation.

Dr. Joe Fontenot with the Board of Pharmacy further noted that an annual event had been established between the Board of Pharmacy and the State Police Crime Lab to ensure that all federal scheduling actions were mirrored at the state level, maintaining consistency between the federal and state lists of controlled substances.

During the agency updates portion of the meeting, Tony Landry, representing the Veterans Action Council, interrupted to state that Louisiana had had a medical cannabis program since 2015 and began distributing cannabis in the state in 2019. Dr. Polk, the Chair, responded by noting that she had previously asked for public comments and, hearing none, moved forward to the "member agency updates" portion of the agenda.

Dr. Polk then asked if any other agencies had updates to provide. With no further updates from agencies, she moved forward and called for a motion to adjourn the meeting.

Upcoming Meetings

- State Epidemiology Workgroup- February 27, 2025, @10 AM- 12 PM Virtual/Teams
- Task Force on Impaired Driving February 5, 2025 (10 AM- 12 PM) LA Capitol 4th Floor Press Room
- Prevention Systems Committee- March 5, 2025, Virtual/Zoom/Teams
- Heroin and Opioid Prevention and Education (HOPE) Council- April 10, 2025
- Drug Policy Board- April 17, 2025 (10 AM- 12 PM) LA Capitol 4th Floor Press Room

Adjournment

A motion to adjourn was made by Michael Comeaux and seconded by Linda Gautier. Dr. Polk thanked everyone for their participation and the meeting was adjourned at 11:20 A.M.

MEETING ATTENDEES

VOTING MEMBERS

Member Agency	Appointee/Designee	In Attendance
Alcohol industry representative	Kody Thompson	Yes
Attorney General's Office	Michael Dupree, Public Protection Division (John Kelley Proxy-Complex Litigation Officer)	Yes
Board of Pharmacy	Joe Fontenot	Yes
District Court Judge	Shayna Beevers Morvant	No
Federal agency with AOD ed/ treat/prev responsibilities	Vacant	--
Governor's Office of Drug Policy	Dr. Shayla Polk, Director and Chair of the Drug Policy Board	Yes
House member, Committee on Health and Welfare	Stephanie Berault, LA State Representative, Dist. 76	No
Louisiana Commission on Alcohol and Other Drug Abuse	Vacant/Comm does not exist	--
Louisiana Commission on Law Enforcement	Linda Gautier	Yes
Louisiana Department of Children and Family Services	Dr. Rebecca Hook	No
Louisiana Department of Education	Michael Comeaux	Yes
Louisiana Department of Health	Quinetta Womack	Yes
Louisiana Department of Public Safety and Corrections	Blake LeBlanc	Yes
Louisiana District Attorneys Association	J. Collin Simms	No
Louisiana Highway Safety Commission	Lisa Freeman, JD	Yes
Louisiana Office of Alcohol & Tobacco Control	Ernest Legier, JD, Commissioner (Paola Ochoa as Proxy)	Yes
Louisiana Public Defenders Board	Remy Starns, JD	Yes
Louisiana Sheriffs' Association	Shannon Dirmann	No
Louisiana State Police	Rebecca Chiasson	Yes
National Guard	Lt. Colonel Beverly Coutto, Coordinator, Counterdrug Program (MSgt Amy Thomas as proxy)	Yes
Physician	Peter W. Croughan, MD, LA Department of Health	Yes
Private organization involved in SA prevention	Dan Schneider, RPH Tunnel of Hope	Yes
Senate member, Committee on Health and Welfare	Senator Bob Owens- District 1	No

OF-COUNSEL MEMBERS

Member Agency	Appointee/Designee	In Attendance
LA State Board of Medical Examiners	Dr. Vincent Culotta	No
Advisory Council on Heroin and Opioid Prevention and Education	Dr. Rebecca De La Cruz	No
Drug Enforcement Administration, NOLA Office	Keith Bakewell	No
Gulf Coast High Intensity Drug Trafficking Area	Greg Lowther	No

STAFF

GUESTS

NAME	ORGANIZATION
Catherine Childers	Louisiana Highway Safety Commission
David Johnson	Seymore's Foundation
Dara Johnson	Seymore's Foundation
Rusty Fornea	ADAPT, INC
Ben White	LSA
Emily Tilley	O'Brien House
Jacqueline Sanchez	LDAA
Aimee Moles	LSU/SREC
Joshua Blossom	LA National Guard Counterdrug
Bridget Bailey	Tangipahoa Parish Government
Taylor Addison	Tangipahoa Parish Government
Dr. William Hall	Office of Public Policy- LA Baptist Convention
Tony Landry	Veterans Action Council