Report on Alcohol and Other Drug Abuse Grant Distribution, Training, and Education Programs in Wisconsin School Districts From 2016 to 2018

Developed by
Student Services/Prevention and Wellness Team
Division for Learning Support

Wisconsin Department of Public Instruction
Tony Evers, PhD, State Superintendent
Madison, Wisconsin
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Part One - Introduction

Background on the Wisconsin Department of Public Instruction’s Alcohol and Other Drug Abuse Program

The role of the Department of Public Instruction’s (DPI) Alcohol and Other Drug Abuse (AODA) program, first authorized under Act 331, Laws of 1979, is to help local school districts better utilize their staff and program resources to develop comprehensive AODA programs to prevent or ameliorate students’ alcohol or other drug abuse. The department provides access to a wide range of AODA-related resources including grants, training, educational materials, networking opportunities, and technical assistance. DPI acknowledges that schools have educational expertise and the ability to provide a wide range of programs and services for students. Maximizing the development and use of these school-based resources is the most effective and efficient way to prevent and/or resolve the problems youth experience related to alcohol and other drug abuse. In addition, DPI implements and monitors activities related to grant applications, fund disbursement, project implementation, and project evaluation.

Program staff provide consultation and technical assistance concerning the development, expansion, and evaluation of school-based AODA programs and services. Assistance to local education agencies, regional cooperative educational service agencies (CESAs), and other local or regional organizations, includes on-site visitation, presentations, training, workshops, and liaison activities on an ongoing basis. Information about available AODA-related resources is disseminated to school staff. Specialized resources are developed or adapted to meet identified needs of school staff in areas where appropriate resources do not exist.

Evaluation and monitoring of grant activities includes interim and end-of-year reports, ongoing review of project implementation, and intensive evaluation of key strategies and program components. The results of these monitoring activities and evaluations are detailed in this report.

Part Two – Overview of AODA Program Activities

The Department of Public Instruction is pleased to present this evaluation report on its 2016-2018 school-based AODA prevention and intervention initiatives. DPI’s AODA program consists of grant-making, training, and technical assistance. A brief description of each, for the period of July 2016 through June 2018, follows.
AODA Grant Programs

The total DPI AODA allocation was divided among school districts and the state’s 12 CESAs under the program categories described here.

AODA Prevention Program Grants - This program provided grants for the development and expansion of district-wide comprehensive, kindergarten through grade 12, AODA prevention curricula as well as K-12 prevention and early intervention programming as part of a coordinated school health program. As such, these programs also include parent and community education. Projects funded under this program follow guidelines established in Wis. Stat. sec. 115.36(3). AODA program grants were awarded for a three-year cycle for 2008-2011 in order to realign the funding cycle with the state's two-year biennial budget period. In 2011-2012, grants were subsequently awarded for two-year periods. Therefore, the reporting period covered by this report reflects the final year of the 2015-2017 grant cycle, and the first year of the 2017-2019 grant cycle. These grants were awarded on a competitive basis, in contrast with the annual formula-based award each district received under the Federal Safe and Drug Free Schools and Communities Act until that program ended in 2011.

Student Mini-Grants - This program funded projects designed and implemented by students for students, which includes AODA prevention or the prevention of other related youth risk behaviors, such as tobacco use, violence/bullying, suicide attempts, or traffic safety.

AODA Training and Technical Assistance

In addition to funding grants, a portion of this appropriation supported professional development for public and private school staff. This was accomplished through DPI-planned and sponsored events, activities co-sponsored by DPI, including state and regional conferences and workshops, production of web-based training and resources, and the Educator Fellowships Awards.

Part Three - Evaluation Methods and Formats

This report covers the DPI’s AODA program-funded activities for the 2016-2017 and 2017-2018 school years. DPI used a variety of data collection methods to evaluate the impact of the program.

For the AODA Prevention Program Grants, self-reported data were collected, both mid-year and end-of-year, from all grant recipients. This data includes the number of students, school staff, and parents/family members impacted, major strategies used, objectives achieved through the projects, and most significant findings. It included quantitative and qualitative information, both of which were summarized for this report.

For the Student Mini-Grants, Wisconsin Safe and Healthy Schools Center activities, and Educator Fellowships, brief descriptive summaries were collected and are summarized later in the report.
Evaluation for all of the above programs also included informal methods of communication with grantees via telephone, email, and meetings. These communications helped determine the degree of program implementation and possible regional needs for technical assistance. The DPI fiscal review included the appropriateness of expenditures and adherence to standard accounting practices.

Part Four – Evaluation Results of Grant Programs

Alcohol and Other Drug Abuse Prevention Program Grants

DPI awarded $866,326 to 44 grantees in 2016-2017 and $885,591 to 45 grantees in 2017-2018. Grant award maximum amounts for the district were regulated by enrollment category in the following manner:

<table>
<thead>
<tr>
<th>Category</th>
<th>K-12 Enrollment</th>
<th>Maximum Award (per year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Milwaukee Public Schools (MPS)</td>
<td>80,000+</td>
<td>$46,000</td>
</tr>
<tr>
<td>A</td>
<td>3,000-79,999</td>
<td>$25,000</td>
</tr>
<tr>
<td>B</td>
<td>2,999 or under</td>
<td>$13,000</td>
</tr>
</tbody>
</table>

Consortia of several school districts were also able to apply for funds. The consortium was eligible to apply for and be awarded up to $25,000 per member district.

The following grant awards contribute to the total amount distributed during the two-year period that is noted above. For the 2016-17 school year, awards were distributed as follows:

<table>
<thead>
<tr>
<th>Enrollment Category</th>
<th># Projects</th>
<th>Total Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>MPS</td>
<td>1</td>
<td>$ 45,000</td>
</tr>
<tr>
<td>A</td>
<td>17</td>
<td>$ 424,469</td>
</tr>
<tr>
<td>B</td>
<td>21</td>
<td>$ 310,538</td>
</tr>
<tr>
<td>Consortia</td>
<td>5</td>
<td>$ 86,319</td>
</tr>
</tbody>
</table>
For the first year of the following two-year period, 2016-17, awards were distributed as follows:

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<tr>
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<tr>
<td>MPS</td>
<td>1</td>
<td>$ 45,000</td>
</tr>
<tr>
<td>A</td>
<td>16</td>
<td>$ 400,000</td>
</tr>
<tr>
<td>B</td>
<td>25</td>
<td>$ 365,591</td>
</tr>
<tr>
<td>Consortia</td>
<td>3</td>
<td>$  75,000</td>
</tr>
</tbody>
</table>

These grants funded the development or expansion of school district-wide K-12 curricula and programs in prevention and intervention. Districts were able to request funds to do any of the following:

1. Curriculum and instruction that meets all of the requirements of Wis. Stat. sec. 118.01(2)(d)2c and 6, and which does all of the following:
   
a. Provides accurate and up-to-date information on health promotion and risk behaviors.
   
b. Provides accurate information about youth attitudes and behaviors about AODA and related youth risk behaviors.
   
c. Provides a strong focus on life skills development, such as decision making, goal setting, and communication skills.
   
d. Emphasizes key concepts that cut across many health and safety issues.
   
e. Provides multiple instructional strategies.
   
f. Is developmentally appropriate and builds on a pupil’s prior knowledge.
   
g. Provides a sense of safety and community in the classroom.
   
h. Provides clear and consistent messages.
   
i. Involves parents and guardians in instructional programs.
2. A written school district policy which supports comprehensive alcohol and other drug abuse programming including pupil assistance programs, curriculum, instruction, staff development, and youth-oriented activities. The policies shall be widely publicized and be in accordance with appropriate state and federal laws.

3. Programs for pupils including pupil assistance programs, peer programs, student clubs, and drug-free alternatives.

4. Programs for adults including staff development, employee assistance and wellness programs, and parent and community alternatives.

5. Integration of community resources and support services including, but not limited to, human services providers, private treatment providers, law enforcement officers, and judicial personnel.

6. Access to a collaborative pupil services team made up of school counselors, social workers, nurses, and psychologists.

7. An AODA program coordinator who is provided with appropriate time and training.

8. Ongoing monitoring, assessment, and evaluation of AODA program activities.

9. Strategies to develop comprehensive school health programs which include, but are not limited to, a police-school partnership project, a family support project providing parenting skills and family cohesion-building strategies, after-school and summer school tutorial services, student assistance programs, youth-led prevention activities, or any other strategy approved by the state superintendent to meet the statutory objectives of prevention or amelioration of alcohol and drug use by minors. A school district may enter into contracts with public or private non-profit agencies to collaborate on family support programs that include parenting skills and family cohesion-building strategies.

This program coordinates its AODA prevention and intervention projects with other such programs available in the school district, and to the greatest extent possible, involves pupils, parents, professional school staff, treatment professionals, law enforcement officers, and court personnel in both the development and implementation of the program. School boards can establish the program individually or on a cooperative basis with one or more school districts, CESAs, or county children with disabilities education boards (CCDEBs).
AODA Prevention Program Grant Activities and Results During 2016-18

AODA Prevention Program Grant projects impacted a significant number of students, staff, and parents/family members in various ways. Grantees reported the following cumulative numbers for the two years of the grants.

2016-2017

Numbers of students

Disciplined under updated policies under grant funding 1,444
Trained as peer helpers in AODA program 5,198
Received mediation/mentoring/helping services from trained peers 21,110
Received classroom instruction using curriculum purchased, developed, or enhanced through this grant 90,409

Numbers of staff

Trained and/or provided classroom instruction using curriculum purchased through the grant 2,770

Numbers of parents/family members

Received information on AODA issues through grant-funded activities 32,715

AODA grants funded a wide range of activities to prevent student alcohol and other drug abuse and violence. The breadth and scope of these activities are reflected in the following:

The 44 grantees, each submitting one report each year, identified the major strategies on which they spent their grant funds; the following numbers were reported (districts could check more than one item and could check each item more than once). These strategies are consistent with research on effective AODA programs. The reports resulted in the following totals:

22 identified curriculum development/implementation
31 identified adult programs/staff development
22 identified parent/family education and outreach
29 identified healthy school environment
25 identified peer-to-peer program implementation
17 identified community connections/coalition building
14 identified student assistance programs
2 identified policy development/enforcement
When asked if they would continue the programs started or enhanced without these grant funds:
16 indicated they would continue the programs in full
22 indicated they would continue the programs at a reduced level
1 indicated they would not be able to continue the programs without grant funding

Major reasons identified for continuing their programs at reduced levels were lack of money, resources, or staff time.

**Program Objectives Results**

The major objectives of the projects were defined under the following major categories.

- AODA prevention: 25
- Asset building: 6
- School climate: 17
- Violence prevention: 4
- Other: 2

**2017-2018**

**Number of students**

- Disciplined under updated policies under grant funding: 1,091
- Trained as peer helpers in AODA program: 2,754
- Received mediation/mentoring/helping services from trained peers: 13,607
- Received classroom instruction using curriculum purchased, developed, or enhanced through this grant: 105,514

**Number of staff**

- Trained and/or provided classroom instruction using curriculum purchased through the grant: 2,705

**Number of parents/family members**

- Received information on AODA issues through grant-funded activities: 27,321

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The 44 grantees, each submitting one report each year, identified the major strategies on which they spent their grant funds; the following numbers were reported (districts could check more than one item and could check each item more than once). These strategies are consistent with research on effective AODA programs. The reports resulted in the following totals:

29 identified curriculum development/implementation
30 identified adult programs/staff development
24 identified parent/family education and outreach
31 identified healthy school environment
24 identified peer-to-peer program implementation
23 identified community connections/coalition building
12 identified student assistance programs
29 identified policy development/enforcement

When asked if they would continue the programs started or enhanced without these grant funds:
28 indicated they would continue the programs in full
15 indicated they would continue the programs at a reduced level
0 indicated they would discontinue the program

Major reasons identified for continuing district programs at a reduced level were lack of money, resources, or staff time.

**Program Objectives Results**

The major objectives of the projects were defined under the following major categories.

- AODA prevention: 18
- Asset building: 11
- School climate: 22
- Violence prevention: 3
- Other: 0
Significant Findings

When asked to describe the most significant findings from their evaluations of the program effectiveness, responses fell into the categories identified below (with examples).

**State Alcohol and Other Drug Abuse Grants**

**Alcohol and Other Drug Abuse Specific Grants**

The Appleton Area School District used their funding to develop Student Assistance Program (SAP) groups. Post-group surveys indicated 91 percent reported that because of the group, they know “people at school care about me.” Seventy-eight percent of students in a group reported that they “feel less lonely.” Individual responses to the statement “The most helpful thing about this group for me has been” included, “I learned what a friend is” and “Knowing I am not completely alone.”

Lac du Flambeau #1 School District used grant funds to support a “Family Circles Program.” This program used pre- and post-surveys to demonstrate a significant change in relationship to substance abuse prevention/reduction and Native American culture. Positive changes in families involved in the program showed reduced AODA use, better decision making, and closer family bonds.

Sun Prairie School District organized a countywide Life of an Athlete Training with olympic coach John Underwood and two Navy Seals. Twenty-two Sun Prairie High School student leaders attended the two-day training along with coaches, school board members, and community members. Over 250 countywide participants were in attendance. The district also implemented the evidenced-based LifeSkills Training curriculum for 670 fourth grade students, helping them develop skills to avoid AODA use and bullying behavior.

**Coalition Building**

Phillips School District used their funding to build a coalition with county agencies. The district’s AODA Coordinator was an active member of the Price County Mental Health/AODA Coalition and served on the Emerging Drugs and Strong Families/Strong Kids subcommittees. The district also participated in a Phillips kNOw Meth Town Hall meeting informing families of all the resources it provides its students. Collaborations also helped address suicide prevention, intervention and postvention on a county-wide level.

The CESA 5 Consortium is offering and administering the Juvenile Under-Age Drinking Offenders (JUDO) program for member schools. They have also developed a positive social norms campaign which points out that most students do not partake in AODA use or other risky behaviors. They have also provided the suicide prevention training Question Persuade and Refer (QPR) throughout member schools. In total, 465 students and 181 adults have completed the QPR training.
**Violence Prevention/School Climate**

Milwaukee Public Schools used their grant to support the ACT Now! bullying prevention curriculum to grades K-6. On pre- and post-testing, students showed growth in bullying knowledge and more positive attitudes towards reporting bullying. Students also used ACT Now! resources during School-Wide Unity Walks during bullying prevention month.

**Asset Building/Mental Health**

Boyceville School District used the Resilience/Health Realization model to introduce students in grades 3-5 to mental health awareness. The students published two books; “Empathy” by third graders and “The ABC’s of My Health Core” by fifth graders. Through these creative and original books, students demonstrated the knowledge they had gained through the curriculum.

**Student AODA Mini-Grants**

Coordinated school health program efforts benefit from youth involvement as they help to create environments conducive to healthy, resilient, and successful learners. The AODA Student Mini-Grant Program is a part of DPI’s efforts to encourage such youth initiatives. In the 2016-2017 school year, $82,168 was distributed to 86 youth-planned and led projects throughout the state. In 2017-2018, $61,190 was distributed to 64 youth-led projects. Under this program, a total of $143,358 was awarded in the two-year period of 2016-2018. These dollars were available on a competitive basis for schools throughout the state to support AODA prevention projects created and implemented by youth, with project budgets of up to $1,000.

Each year, in mid-October, mini-grant applications were due to the Department of Public Instruction’s Student Services/Prevention and Wellness Team, and for Milwaukee schools to the Milwaukee Public Schools’ Health and Wellness Office (at MPS Administration). Using invited professionals from the field, a grant review process was conducted. Teams of reviewers were given multiple applications to read, comment on, and rank. Besides individual review sheets and comments for each application, each review group developed a group consensus and assigned a project rating of strong, average, or weak.

All individual and group consensus comment and rank sheets were given a final DPI internal review to ensure all proposed project expenditures were allowable and fundable. Recommendations for funding took into consideration educational value as well as statewide geographical distribution of funds.

Based on end-of-year report data, the majority of school districts reported an increase in student awareness of AODA and related issues. In addition, projects reported an increase in student leadership and parent involvement as a result of funded projects.
Student AODA-Focused Mini-Grants

Coleman School District implemented the Cougar Awareness Project. The program included a week long awareness week. Guest speakers and community members reached out to a total of over 350 middle and high school students on a variety of AODA issues. A discussion panel was also provided. The student group grew from 10 to 14 during the year. Results included students being able to identify at least one new way to cope with peer pressure.

Hayward Community Schools’ project SWAY (Students Who Care About You), presented a forum on opioids and hosted two 5th Quarters, which are discussion sessions after sporting events, on drug awareness. The SWAY group reports that students were “excited to be in a safe environment where they could hang out for free.” The SWAY group also went into the community to spread their message and fundraise.

Violence Prevention/School Climate

Kiel Area School District started a Peer Helper program designed to create a more caring school environment. Students in this program were empowered to serve as resources and facilitators and were linked to other students by adult advisors. The program completed 78 peer mediations with the goal of create “win/win” situations all involved. Cases of bullying were referred to adults for follow up. Further, Peer Helpers made 24 referrals to adults for follow ups for such concerns as self-cutting, child abuse, and suicidal threat.

Alcohol Traffic Safety

Augusta School District’s Students Against Destructive Decisions (S.A.D.D.) group did team building activities such as a ropes course to develop a strong core. The group used social media, such as a facebook page, to provide positive non-alcohol related messaging. From Halloween through Prom, the group communicated their positive messages throughout the school and larger community including providing a distracted driving simulator and a S.A.D.D. trivia contest. The local Youth Risk Behavior Survey shows that alcohol use continues to go down among teens in the district.

School Safety/Technology

Marshall Public Schools used their funding for their student led “Tackling Technology” program. Four major events were held as part of a month-long technology awareness project in homeroom classes. Issues addressed included technology addiction, cyberbullying and distracted driving. Over 300 students were positively affected. One particular activity included a day of no technology at all--students turned off their cell phones and the school’s wifi was shut down. After an adjustment period, students learned they could live without technology.
Healthy Choices

Milwaukee Public Schools’ Riverside High School developed an innovative program called The Young Women’s Wellness Group. This group was comprised of 15 female students in grades 9-12 and met weekly throughout the school year. The group addressed making good choices related to their physical, emotional, and social behavior while addressing such issues such as AOD use and other risky behaviors. Students learned to effectively manage emotions such as anger, sadness, stress, and depression.

Part Five - Training and Education Programs

Wisconsin Safe and Healthy Schools Center

Due to a reduction of AODA funds, the former Wisconsin Alcohol, Tobacco, and Other Drug Education Network was transformed into a collaborative statewide training and technical assistance center. The Wisconsin Safe and Healthy Schools Training and Technical Assistance Center, or WISH Center, is a collaboration between the CESA Statewide Network and the Wisconsin Department of Public Instruction as a state-wide delivery mechanism for alcohol, tobacco, other drug, violence, and bullying prevention training. The goal of the Safe and Healthy Schools Center is to provide professional learning opportunities for adults in person, online, and follow-up technical assistance. The WISH Center builds the capacity of Wisconsin schools to plan, implement, and evaluate the programs that most effectively prevent alcohol and other drug abuse and violent behaviors among youth in order to reduce barriers to learning.

The WISH Center Director is Tracy Herlitzke, CESA 4 in West Salem, (608)786-4838 or therlitzke@cesa4.org.

The four regional staff and contact information:

- Jackie Schoening: Central Region, (920)236-0515 or jschoening@cesa6.org (Covering CESAs 2, 3, 6)
- Christine Kleiman: East Region, (920)617-5645 or ckleiman@cesa7.org (Covering CESAs 1, 7, 8)
- Lynn Verage: North Region, (715)453-2141 or lverage@cesa9.org (Covering CESAs 5, 9, 12)
- Carol Zabel: West Region, (715)720-2145 or czabel@cesa10.org (Covering CESAs 4, 10, 11)

The Center’s website can be found at www.wisheathschools.org.
**Educator Fellowships**

During the school years of 2016-2018, funds were utilized by 20 educators statewide to help increase knowledge and skills-related health literacy issues. The 20 educators completed courses related to AODA and met all requirements to receive one graduate credit. The department covered the graduate credit fees for these educators in order to satisfy the statutory requirement to provide an Educator Fellowship Program.

**Other DPI-Sponsored Training and Technical Assistance**

During 2016-2018, DPI supported a wide variety of other training and technical assistance activities and resources using AODA program funds. Examples include annual regional workshops for grantees on AODA program development; statewide conferences on AODA prevention, tobacco, social-emotional learning, mental health and school health, climate and safety issues; and professional development seminars and conferences for school psychologists, school social workers, and school nurses on AODA and related issues. Department consultants provided information sharing and technical assistance for school personnel through regional workshops and networking sessions.