

City of Lawrence
2008 Alcohol Tax Funds
Request for Proposals
Calendar Year 2008 (January – December)
Cover Page

Agency Name: Elizabeth Ballard Community Center, Inc.

Program Name: Ballard Community Center Early Education Program

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Request is for funding in the following categories and amounts:

<u> X </u>	Prevention	\$ <u>25,000</u>
<u> </u>	Treatment	\$ <u> </u>
<u> </u>	Intervention	\$ <u> </u>
<u> </u>	Coordination	\$ <u> </u>

City of Lawrence
2008 Alcohol Tax Funds
Request for Proposal
Ballard Community Services
Narrative

Program Description:

Ballard Community Services is proposing to continue with the implementation of the pre-school conflict resolution/interpersonal skills program called AI's Pals: Kids Making Healthy Choices. In addition to continuing with the implementation at our Ballard Center site we would like to expand our project to include an additional site, Brookcreek Learning Center. The number of children that we will be serving goes from 58 at the Ballard Center site to a total of 121 children. Brookcreek Learning Center serves essentially the same demographic of children and families as Ballard Community Services.

We are proposing to continue with this particular project because research has shown that children who are classified as "undercontrolled" (i.e. impulsive, restless, and distractible) at age 3 are twice as likely as those who were "inhibited" or "well-adjusted" to be diagnosed with alcohol dependence at age 21. Aggressiveness in children as young as ages 5 has been found to predict alcohol and substance use in adolescence. Childhood antisocial behavior is associated with alcohol-related problems in adolescence and alcohol abuse or dependence in adulthood. The National Institute on Drug Abuse (NIDA) has stated that "the risk of becoming a drug abuser involves the relationship among the number and type of risk factors such as, deviant attitudes and behaviors and protective factors, parental support." The NIDA also states that "early intervention with risk factors (e.g., aggressive behavior and poor self-control) often has a greater impact than later intervention by changing a child's life path (trajectory) away from problems and toward positive behaviors." The population of children that are served by our Ballard Center site and the Brookcreek early education program includes children that typically fall in the highest category for those destined to become substance and alcohol abusers. These children come from very low income families, there is often a high rate of substance abuse occurring in a number of the households where these children reside and approximately 45% of these children exhibit aggressive, impulsive, distractible and antisocial behavior. Unfortunately, there are currently no programs that are targeted towards these types of behaviors. The most serious of cases are referred to the school district for behavioral screening. However, there are a very low number of children who actually receive services due to the factor that the parents are required to participate by completing paperwork that is often overwhelming and stipulates that the child is being screened for "special education services." To the parents of these children, this identifies that their child has a learning disability and they refuse to participate so that their child is not "labeled" as they enter the public school system. Often, early education programs will refer children to Bert Nash Mental Health Center. Again, the parents of our children are those that are very low income families and they do not understand the system of working with a mental health facility and are often overwhelmed by the fact that their child is being referred in the first place. They often believe that their child may be removed from the home or that they will be judged on their parenting skills if they participate. That is why we are proposing to continue our project and reach a greater audience of children by expanding to incorporate Brookcreek Learning

Center. This curriculum will involve parents and their children and will provide us with an opportunity to be proactive in the way that we deal with behavioral issues instead of dealing with the child's negative behavior. This curriculum is rated by the United States Department of Justice as Effective in meeting the standards for Conflict Resolution/Interpersonal Skills in the school/classroom environment. It is appropriate for all ethnicities and both male and female students and can be adapted for children ages 3 to 8.

Al's Pals: Kids Making Healthy Choices curriculum is an early education program designed to increase the protective factor of social and emotional competence in young children and to decrease the risk factor of early and persistent aggression of antisocial behavior. The program follows the premise that by intervening during the early years when children are forming patterns of behaviors and attitudes, reductions can be made in the likelihood of their later developing aggressive, antisocial, or violent behavior. Al's Pals is based heavily on resiliency research as a framework for developing an intervention. This curriculum is designed to build resiliency by presenting children with real-life situations that introduce them to health-promoting concepts and pro-social skills. The program also recognizes the ongoing nature of resilience-building and trains teachers to use resilience-promoting concepts in their teaching and classroom management practices.

Al's Pals uses 46 interactive lessons to teach children how to practice positive ways to express feelings, relate to others, communicate, brainstorm ideas, solve problems, and differentiate between safe and unsafe substances and situations. Several studies conducted in preschools, elementary schools, and childcare centers since the Al's Pal's program was first piloted in 1993 show very promising results. For example, a pilot evaluation study conducted in Virginia during the 1994–95 school years used a quasi-experimental design to assess program impacts on child social-emotional competence. This study was conducted with 10 intervention group classrooms (n=173) and 4 comparison group classrooms (n=48) in a variety of settings (rural, urban, suburban). Participating classrooms were chosen because they had children with similar characteristics, teachers with similar skill levels, and no other prevention or teacher training programs active in the school that year. Classrooms were randomly assigned a condition to the extent possible. There were no significant differences in demographic characteristics between intervention and control group children and teachers. Children were assessed by teachers before and after program participation using the project-developed Child Behavior Rating Scale (CBRS), a measure of social-emotional competencies in behavior, including appropriate expression of feelings, demonstration of self-control, and use of pro-social methods of problem-solving.

Another pilot study conducted in Virginia during the 1995–96 school years used a quasi-experimental design to assess program impacts on child social-emotional competence and coping skills. This study was conducted with 16 intervention group classrooms (n=230) and 7 comparison group classrooms (n=103). Classrooms were randomly assigned to intervention and control groups. There were no significant differences in demographic characteristics between intervention and control group children and teachers. Children were assessed by teachers before and after program participation using the CBRS and the Teacher Report of Child Coping, an instrument used to measure coping styles.

In another study, an experimental design was used to evaluate Al's Pals in a large Michigan Head Start program during the 1996–97 school year. Seventeen classrooms (n=218) were randomly assigned to receive the intervention, and 16 classrooms (n=181) served as controls. The classroom sites were selected based on comparability and randomly assigned to intervention and control conditions. There were no

significant differences in demographic characteristics between intervention and control group children and teachers. For both intervention and control groups, the mean age of children entering the study was around 52 months, and gender was roughly evenly divided. About half of each group was white, one fourth African-American, and one fourth Hispanic, biracial, or another ethnic group. Teachers assessed the children in the fall and spring of that school year, about 7 months apart. Measures used include the CBRS, the Teacher Report of Child Coping, and the Preschool and Kindergarten Behavior Scale, the last of which includes measures of social skills and problem behaviors.

Evaluation Outcome:

For the 1994–95 study, results of repeated measures analysis of variance (known as ANOVA) showed that intervention children had significantly greater improvements in behavior than control group children. A similar analysis used in the 1995–96 study showed that intervention children had significantly greater improvements in behavior than control group children, as well as higher postscores for positive coping and lower postscores for negative coping.

Data from the 1996–97 Michigan study was analyzed using independent t–tests, paired t–tests, and repeated measures of variance to assess differences between intervention and control groups, to examine within-group pre–post changes, and to compare the degree of change experienced by both groups. The results of the analysis showed statistically significant improvements in prosocial skills in the intervention group. There was no significant improvement in prosocial skills for control group participants. In terms of problem behavior, there was no change for the intervention group, while problem behavior for the control group increased. As in previous studies, this analysis revealed a higher degree of positive change for the intervention group than for the control group. Findings from additional one-group pre–post replication studies conducted in Iowa, Michigan, Missouri, and Virginia from 1997 to 2000 had similar results, including higher degrees of positive change in the intervention groups, increases in prosocial behaviors and positive coping behaviors, and decreases in antisocial and negative coping behaviors.

Needs Assessment

In May of 2006, Dr. Michael Arthur, Dr. Eric Brown and John Briney published the report, Relationships between Student Substance Use, Risk, and Protection in Kansas Schools and Students' Academic Test Scores. This report documents the following for students in the Lawrence Public Schools: 45.7% of eighth graders said that at least one of their four best friends has used alcohol when his/her parents didn't know about it in the year prior to the survey. 10.9% of eighth graders report having five or more alcoholic drinks in a row at least once in the two weeks prior to the survey and 42.9% of twelfth graders report having five or more alcoholic drinks in a row at least once in the two weeks prior the survey. When asked "How old were you when you first began drinking alcoholic beverages regularly, that is, at least once or twice a month?" the average age was 14.69 years old and 25.4% of 8th graders said that there was a very good chance that they would drink at a party if a friend offered it to them. In regard to tobacco use 25.5% of eighth graders report having smoked cigarettes at least once, 46.1% of twelfth graders report having smoked cigarettes at least once and when asked "How old were you when you first smoked a cigarette, even a puff?" the average age was 12.47 years old. 28.2% of twelfth graders reported having used marijuana during the past 30 days and when asked "how wrong would most adults in your neighborhood think it is for kids your age to use marijuana?" 2.7% of eighth graders responded not wrong

at all. In addition, when asked "How old were you when you first smoked marijuana?" the average age was 13.78 years old. 16.8% of eighth graders reported having used marijuana at least once in their lifetime and 9.5% of eighth graders reported having used marijuana at least once in the past 30 days. In October 2005, the Lawrence Journal World reported that alcohol useage at the high school dances were a Serious Matter – Saturday, October, 2005 JW Editorials – "According to the staffer who oversees drug and alcohol prevention efforts in the district, 42.9 percent of Free State seniors indicated in a survey last year that they had consumed five or more alcoholic drinks in a single sitting at least once in the previous two weeks. This year, that figure dropped to 42.2 percent but that's well above the state average of 36.6 percent." As reported in a February 2005 Journal World article by Joel Mathis, a 2004 survey by the Greenbush Institute, 10% of sixth graders said that they had at least one alcoholic drink in the past 30 days.

As stated above, there are currently no programs available to children in community based early education programs. There are no services that community based early education programs can call to help with children who exhibit the violent and anti-social behaviors that are common predictors of alcohol and substance abuse. The most serious of cases are referred to the school district for behavioral screening. However, there are a very low number of children who actually receive services due to the factor that the parents are required to participate by completing paperwork that is often overwhelming and stipulates that the child is being screened for "special education services." To the parents of these children, this identifies that their child has a learning disability and they refuse to participate so that their child is not "labeled" as they enter the public school system. Often, early education programs will refer children to Bert Nash Mental Health Center. Again, the parents of our children are those that are very low income families and they do not understand the system of working with a mental health facility and are often overwhelmed by the fact that their child is being referred in the first place. They often believe that their child may be removed from the home or that they will be judged on their parenting skills if they participate. In particular, during the summer months there are absolutely no services available for any children needing intervention for anti-social and behavioral issues. These are the times when most early education program struggle the most.

Outcomes

The Al's Pals: Kids Making Healthy Choices program teaches staff members to identify the following:

- A. The risks that children face today and protective factors that shield them.
- B. How to apply the concepts of prevention, resiliency, risk and protective factors to early childhood education.
- C. Key skills to effectively deliver the program such as techniques to guide children to brainstorm ideas, solve problems, make healthy decisions, and cope.
- D. Ways to establish an accepting, caring, cooperative classroom environment that fosters positive social-emotional growth and development in children and,
- E. Effective ways to communicate with families.

We will continue to evaluate our progress in implementation of this curricula and success with our children by the following outcome measurements:

Process Outcomes:

1. 100% percent of all teaching staff of the Ballard Community Center and Brookcreek Learning Center early education programs will be trained by July of 2008.
2. 95% percent of all teaching staff of the Ballard Community Center and Brookcreek Learning Center early education programs has incorporated the AI's Pals curriculum into the teaching strategies of their classrooms by August 31, 2008.

Behavioral Outcomes:

1. During the first quarter of 2009 there will be a 25% reduction in the number of violent and aggressive outburst by the children enrolled in the Ballard Community Center and Brookcreek Learning Center's early education programs.
2. During the 2nd quarter of 2009 there will be a 50% reduction in the number of phone calls to parents reporting violent behavior by the children enrolled in the Ballard Center and Brookcreek early education programs.

Impact Outcome:

There will be a 100% reduction in the number of children leaving the Ballard Center and Brookcreek early education programs (either by administrative dis-enrollment or parental dis-enrollment) due to violent and aggressive behavior.

Organizational Capacity

Ballard Community Services is an independent human services agency with a rich tradition of serving the needs of low-income Douglas County residents. The Ballard Center works to serve the "whole child" by providing early childhood education, food security programs, homelessness prevention programs such as rent and utility assistance, and health maintenance programs. The Ballard Center's early education program specifically serves the children of low-income working families. These children are often determined to be "at risk" due to the particular family's socioeconomic and educational levels. Our early education program has been providing structured learning for children ages 1-5 for over 40 years, while meeting families' sustenance needs through our human service programs. The organization is led by Dianne Ensminger, the President/CEO, who has led early education programs (including Head Start programs) for over 18 years. This particular project will be overseen by Ms. Ensminger and will incorporate the program director for the Ballard Community Center early education program and the program director for Brookcreek Learning Center. The Ballard Center maintains a professional teaching staff that includes teachers with specific training in early and special education. Our teaching staff also includes a trained literacy coach who works on early literacy projects with the children in our program. The proposed program would fit seamlessly into the curriculum currently provided to our children, while increasing the scope of the educational and emotional content provided to these children to specifically address risk factors identified with later alcohol and substance abuse.

Budget

Category	Amount	Justification
Personnel	\$ 19,500	Float teachers to cover classrooms for training/ partial continued salary for classroom teacher trained to implement Al's Pals – due to the addition of another site, this teacher will have to move to this position full time during the initial implementation of Al's Pals at the Brookcreek location.
Fringe Benefits	\$ 1,500	Health Insurance, employer's share
Travel	\$ 0	
Office Space	\$ 0	
Supplies:	\$ 0	Office
Supplies:	\$ 4,000	Other: Teaching and curriculum supplies for additional program.
Equipment:	\$ 0	
TOTAL	\$ 25,000	

Other sources of funding for this specific program and amount

The requested personnel funding will cover 50% of the wages and fringe benefits for this special position. We will match this funding with donations from private donors and other grantees, the attainment of which will be aided by publicity for this program. We will also provide volunteers, primarily university student volunteers, to assist with the provision of this program. The Ballard Center and the Brookcreek facilities will be utilized without charge to this project. All of the teachers in our program will participate in this project, whose wages and benefits are provided through other fundraising and donations. We expect this program to continue beyond the funded year, and we would likely seek similar assistance for this program through the alcohol tax fund in future years.

ASSESSMENT DATA	GOALS/OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
<p>The undercontrolled, aggressive or antisocial behavior of preschool children.</p>	<p>The Goals and Objectives are to increase the protective factors of social and emotional competence in young children while decreasing risk factors including undercontrolled behavior.</p>	<p>Preschool age children in the Ballard Center and Brookcreek early education programs.</p>	<p>Training and implementation of AI's Pals curriculum in our program.</p>	<p>1. 100% of all teaching staff of the Ballard Center and Brookcreek early education program will be trained by the end of July, 2008.</p> <p>2. 95% of all teaching staff of our program will incorporate the AI's Pals curriculum into the teaching strategies of their classrooms by August 31, 2008.</p>	<p>1. During the last quarter of 2009 there will be a 25% reduction in the number of violent and aggressive outbursts by children enrolled in the Ballard Community Center and Brookcreek Learning Center early education programs.</p> <p>2. During the second quarter of 2009 there will be a 50% reduction in the number of reports to parents of violent behavior by children enrolled in the Ballard Center and Brookcreek early education programs.</p>	<p>There will be a 100% reduction in the number of children leaving the Ballard Center and the Brookcreek Learning Center early education programs (either by administrative or parental disenrollment) due to violent and aggressive behavior.</p>