# City of Lawrence 2009 Alcohol Tax Funds Request for Proposals Fiscal Year 2009 (January-December)

Agency Name:	Lawrence USD 497
Program Name:	District Prevention Program
<b>Contact Person</b> :	Chris Squier, Diane Ash and Peggy Nelson
Address:	110 McDonald Dr., Lawrence, KS 66044
Phone Number:	785-832-5000 ext. 1835
Fax Number:	785-832-5016
Email Address:	csquier@usd497.org

Request is for funding in the following categories and amounts:

$\square$	Prevention <u>\$57,698.00</u>
	Treatment0
$\Box$	Intervention
	Coordination0

Proposal dated: May 2, 2008

#### I. PROGRAM DESCRIPTION

This proposal is to request support for the continuation of the District High School Prevention program through city alcohol tax funding for the Prevention Specialists at both Lawrence High and Free State High Schools. At the high school level the reduction in Federal Safe Schools Healthy Student funding has resulted in a reorganization of funds. The high numbers of high school students involved in the prevention programs and the positive impact the prevention program has had on every level of district education has made it apparent that this remains a vital program for the health, safety and prevention of drugs and alcohol in the district schools. The position of Prevention Specialist is the <u>only</u> position in the entire school district that targets USD 497 student alcohol and drug use through research-based prevention strategies. **No other position in the district, not WRAP, not district social workers, not district counselors, nor district psychologists target student alcohol and drug use through specific prevention program interventions.** This funding becomes even more essential as the junior high prevention positions funded through a three-year federal Safe Schools Healthy Student Initiative (SS/HS) grant ended on October 1, 2007.

The Prevention Specialists at both high schools will be funded as .5 positions through split funding from the Federal Safe and Drug Free Schools Title IV funding. Our request is that the city fund two .5 high school prevention specialist's positions to ensure the programs continue growth in the district.

The long-term goal of this program is to provide comprehensive programming to increase student and parent knowledge related to alcohol/other drug use, to reduce or delay student risk behaviors by enhancing identified protective factors and developmental assets and to improve school performance. The strategies employed to accomplish this goal include **universal, selective, and indicated prevention services.** 

Universal and Selective Prevention Services provided by the High School's Prevention Specialists which employ these strategies include: FYI Leadership Club-This Club is a strong prevention in regards to drugs, alcohol, and violence by disseminating information, teaching and strengthening leadership skills and by keeping students involved in safe, drug- and alcohol-free activities. Elementary Bullies 2 Buddies program - This program addresses the issues of teasing/bullying at the lower elementary grade levels. The participants explain to the grade school students--via the use of puppets, plays and songs--ways to handle problems/issues in a non-confrontational manner. Link Crew – Trained student mentors are identified to assist in various activities that aid in the transition of sophomores into the high school environment by providing lessons on school rules and regulations, alcohol/drug education, study habits, priorities, resources available regarding prevention and academic support, and team building. Students Teaching about Tobacco - High School STAT teams talk to area 4th and 5th grade students about the benefits of being tobacco-free. Each of these students is a positive role model for the elementary students and provides hope that it is possible for students to go through school tobacco free. Parent Educational Presentations - The prevention specialist provides information to parents on intervention strategies and high school policies, as well as providing parents with information on their student's involvement in the various prevention activities at the school. Youth Against Drinking Alcohol (YADA) - A new panel of students who abstain from alcohol and provide Junior High students with role models and strategies for making healthy choices. YADA is a tremendous breakthrough

for Lawrence peer education because prior to YADA, students have periodically been interested in forming this type of peer education effort yet never fully committed to the process. <u>Cultural Heritage Panel</u> - A group of high school students who have a strong interest in breaking down communication barriers and prejudice among people of different racial, ethnic, religious, and cultural groups. <u>Parent Initiative re Substance Abuse Referrals</u> – This strategy provides alcohol/drug education for parents of students who violate any of the district's alcohol/drug policies. They will be given the option of two hours of prevention education for their student or one-hour prevention services and attendance of their student at an age-appropriate Alcoholics Anonymous meeting accompanied by either the parent or the prevention specialist. <u>Elementary Red Ribbon Presentations</u> – The Prevention Specialist coordinates high school students in assisting elementary schools with their Red Ribbon Week activities, including performing plays and puppet shows, handing out ribbons and candy, and conducting rallies about not smoking. Their participation provides positive role models for the younger students.

The above programs are considered Universal and Selective because while they are open to the general student population staff works to encourage at risk students to participate.

**Indicated prevention services** include alcohol/drug education for students suspended for violation of district alcohol/drug policies, and individualized parent support.

All programs are age-specific, developmentally appropriate and culturally sensitive, with repeat interventions to reinforce prevention goals.

The USD 497 prevention programming is based on research initially done by the National Institute of Drug Abuse, Hawkins and Catalano of Washington and the Search Institute of Minneapolis, Minnesota. Their findings were subsequently supported by the congressionally mandated National Longitudinal Study of Adolescent Health Survey. The assets targeted are school performance, positive school climate, positive peer influences, and involvement in school/community activities, decision-making skills and informed parent involvement.

The program strategies are age-specific; prevention programming looks different at each academic level. However, at each level the program provides an integrated framework which includes correcting student misperceptions about the prevalence of peer use, providing resistance skills training and examining both internal and external factors influencing drug use. At the high school level, the programs designed to reduce risk and/or increase protective factors are the FYI Leadership Club and health resource team services provided to identified at-risk students, individualized student alcohol/drug education, individualized parent support/education, parent group presentations, adjunct classroom instruction, and numerous peer education programs including Students Teaching About Tobacco, the Cultural Heritage Panel, Bullies-2-Buddies, Youth Against Drinking Alcohol, and the LINK CREW mentoring team. Existing research supports the use of peer leaders for this type of prevention programming.

#### II. <u>NEEDS ASSESSMENT</u>

There is clearly a need to continue the current prevention services being provided by the city alcohol tax fund as evidenced by data from multiple sources. Alcohol continues to be a significant concern for teenagers in the state of Kansas as well as in Lawrence. When Kansas students were asked on the Kansas Communities That Care Survey (CTC), "How old were you when you first began drinking alcoholic beverages regularly, that is, at least twice a month?" the average age was 14.47 years old. The Lawrence Public School average age was 14.76 years old while the average for high school students in particular was 15.2 years old in 2004 and 15.0 years old in 2006. This is important information given that the National Institute on Alcohol Abuse and Alcoholism reports that "Youth who drink by age 15 are 4 times more likely to develop alcohol dependence than those who begin drinking at age 21." The resulting underage dependence/abuse of alcohol has staggering individual, family and societal costs. In 2001, the Kansas Department of Transportation reported that alcohol was involved in 18.5% of all fatal traffic accidents in Kansas. The National Highway Traffic Safety Administration

estimates that the average alcohol-related fatal car crash in Kansas costs \$3.4 million: \$1.1 million in monetary costs and \$2.3 million in quality of life losses. Alcoholimpaired drivers ages 14-18 caused 16 car crashes in 2004 in Douglas County alone, resulting in 13 injured people.

As stated, the Communities That Care Survey is an important source of data supporting the continuation of prevention services at the high school level. One area that still poses a challenge is the amount of alcohol that students are drinking once they make the decision to drink. Recent research has shown that the brain continues to make important strides until age 24 and those teens that regularly get drunk will sustain lasting impairment to the brain, making it more difficult for them to do well in school or at work.

In 2006, 76.3% of our sophomore students report that they have <u>never</u> attended school drunk or high. While this number has increased overall since the 1997-1998 school year, it is still too low. The onset of the new Youth Against Drinking Alcohol peer education program is intended to be one more targeted prevention strategy for our incoming sophomores, who will model ways that older students have abstained from alcohol to 8<sup>th</sup> and 9<sup>th</sup> graders. In addition, strengthening the Link Crew mentoring program will be an additional strategy by establishing a more positive school environment with high standards for all of our incoming sophomores.

Research has shown that successful prevention is not a one time inoculation we give our youth. It must be an ongoing process over their development stages. It is most effective if it involves a young person's family, peer group, school, and community. The Prevention Specialist funded by this proposal is in the unique position to positively impact all areas of a young person's life.

#### III. <u>OUTCOMES</u>

The primary goal at the secondary level is to provide comprehensive programming to increase knowledge related to alcohol/other drug use and to promote protective assets such as positive peer influences, decision-making, a sense of personal responsibility, and improved school performance.

The goal for parents is to increase their involvement in addressing individual student at-risk behavior through increased knowledge of adolescent alcohol/drug use, increased knowledge of parental monitoring strategies and the procedures for intervention.

The high school prevention programs will continue to provide peer education programs to elementary students through the Cultural Heritage Panel, Students Teaching about Tobacco, the Bullies-2-Buddies program, Red Ribbon presentations, and our new Youth against Drinking Alcohol program. However, due to the loss of elementary and junior high programs in the absence of the SSHS initiative, we will re-evaluate how to measure elementary prevention program outcomes.

### IV. EVALUATION

Every program comprising the USD 497 Prevention Program is evaluated to ensure that progress is made on the stated goals and to improve the program. Participants in major programs are asked to evaluate program impact on their level of connectedness and responsibility. Grades, attendance, and number of discipline referrals are also used to evaluate program effectiveness.

The evaluation process will monitor process, behavioral and impact outcomes. The long term goal of reducing or delaying student alcohol health-risk behaviors will be tracked by the Kansas Communities That Care Survey. Specific goals/objectives and outcomes are identified on the Logic Model of this proposal (Logic Model Pages 1-4).

#### V. <u>COORDINATION</u>

The seamless coordination of prevention services between identified school district personnel and community resources is a necessary element to the continuation of such services. It is essential that prevention services be woven into the academic process in such a way that they enhance learning and are aligned with district policy and curriculum. This level of coordination is more likely to be accomplished by someone within the educational system whose job it is to provide prevention services. The Prevention Specialist position currently funded by the city alcohol tax fund coordinates prevention services with numerous community agencies including the Douglas County Citizens Committee on Alcoholism (DCCCA), Lawrence Douglas County Fire & Medical, Kansas Department of Transportation, Kansas Department of Health and Environment, KU Med, and various parent groups such the Parent Network, Project Graduation Committee which provides an alcohol/drug free graduation party for all area seniors. This unique position within the educational system coordinates activities and community expertise, thereby reducing fragmentation and avoiding duplication.

Because research states that simply giving students written information on alcohol/drugs does not produce measurable and long lasting changes in substance use, programming must be multi-faceted. To change behavior one must be able to correct misconceptions about the prevalence of use, develop/administer peer-led approaches, give students opportunities to practice newly acquired skills, offer booster sessions, offer training for district personnel and involve parents. In other words it takes a position focused on prevention to produce change.

#### VI. ORGANIZATIONAL CAPACITY

Lawrence Public Schools administers the Safe and Drug Free Schools program. A district administrator, who has extensive experience with grants as well as student services, will supervise this position. The Lawrence Public Schools has a long and successful history of providing prevention services to students. District programs must comply with all Lawrence Board of Education policies/administration and Title IV federal regulations.

## City of Lawrence – 2009 Alcohol Tax Funded Lawrence High School and Free State High School Prevention & Intervention Grant Budget

# **Personnel**

.5 FTE (186 contract days) as per USD 497 negotiated salary schedule Prevention Specialist (Diane Ash)	\$27,350.00
.5 FTE (186 contract days) as per USD 497 negotiated salary schedule Prevention Specialist (Peggy Nelson)	\$21,156.00

# **Fringe Benefits**

Social Security insurance, workman's comp., unemployment insurance, plus the district health and dental plan (.0843 X total salary + \$2001 half insurance) .5 FTE Prevention Specialist (Diane Ash)	\$4,307.00
Social Security insurance, workman's comp., unemployment insurance, plus the district health and dental plan (.0843 X total salary + \$2001 half insurance) .5 FTE Prevention Specialist (Peggy Nelson)	\$3,785.00
<u>Travel</u> In-district mileage	\$300.00
Office Space	\$0.00
Supplies: Office Printer paper, toner, pens/pencils, file folders, etc	\$300.00
<b>Supplies: Other</b> Materials for instruction and presentations including videos, pamphlets, printing of program materials, etc.	\$500.00
<u>Equipment</u>	\$0.00

TOTAL GRANT REQUEST	
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ASSESSMENT	GOALS/	TARGET	STRATEGIES	PROCESS	BEHAVIORAL	IMPACT
DATA	OBJECTIVES	GROUP		OUTCOMES	OUTCOMES	OUTCOMES
DATA On the 2007 CTC Survey, 17.8% of the responding district sophomores reported being drunk or high at school at least once in the past year.	OBJECTIVESGoal: reduce ordelay student riskbehaviors byenhancingidentifiedresearch-basedprotective factors,such asconnectivity toschool andresearch-baseddevelopmentalassetsIncrease studentknowledge relatedto alcohol/otherdrug useObjective:*Provide drug andalcohol relatedmaterials tosophomores.*connect seniormentors tosophomores.	All incoming 10 <sup>th</sup> grade students	Link Crew Mentoring program for all 10 <sup>th</sup> grade students (provides a student "friend" and mentor to help in the transition into high school)	Match 100% of incoming 10 <sup>th</sup> grade students with a senior mentor 120 seniors will participate in the program Senior mentors meet with their sophomore contacts a minimum of 10 times Senior mentors meeting with their staff supervisors a minimum of 20 sessions. 100% of sophomores receive drug & alcohol reduction material	The number of sophomore students participating in peer education and FYI leadership club will be maintained.	By 2015, there will an increase in 10 <sup>th</sup> grade students reporting never being drunk or high at school as measured by CTC trend data. CTC trend data will show a decrease in tobacco alcohol and other drug use at the 10 <sup>th</sup> grade level.

ASSESSMENT DATA	GOALS/ OBJECTIVES	TARGET GROUP	STRATEGIES	PROCESS OUTCOMES	BEHAVIORAL OUTCOMES	IMPACT OUTCOMES
The 2007 CTC survey reported that 98.5% of district sophomores report "there are a lot of chances for students in my school to get involved in sports, clubs and outside activities."	Goal: Reduce or delay student risk behaviors by enhancing identified research-based protective factors and research- based developmental assets Objective: Provide multiple opportunities for students to participate in activities that support abstinence from tobacco, alcohol and other drug use	Available to all high school students	Prevention Peer Programs including: CHP, STAT, FYI Leadership, Bullies-2- Buddies, Red Ribbon Presentations, Youth Against Drinking Alcohol (YADA)	20% of students are involved with 1 or more Prevention Program by January 2013	50% of students surveyed in Peer Programs will report an increase in personal responsibility by January 2013.	The high level of student participation in drug-free opportunities will be maintained

ASSESSMENT	GOALS/	TARGET	STRATEGIES	PROCESS	BEHAVIORAL	IMPACT
DATA	OBJECTIVES	GROUP		OUTCOMES	OUTCOMES	OUTCOMES
During the year 2007, 41 district students were referred for substance abuse issues.	Goal: Facilitate student self awareness of their addiction status. Objective: Assist student movement through the research-based "stages of change" addiction model	Students who violate district alcohol and drug policies	Alcohol and drug education, Smoking cessation and supportive services	100% of students referred and accepting intervention receive individual prevention services by January 2013.	20% of referred students complete a prevention education option by January 2013	50% of referred student who complete a prevention education option will not receive a 2 <sup>nd</sup> discipline referral for substance abuse violation
ASSESSMENT	GOALS/	TARGET	STRATEGIES	PROCESS	BEHAVIORAL	IMPACT
DATA	OBJECTIVES	GROUP		OUTCOMES	OUTCOMES	OUTCOMES
The 2007 CTC survey reports	Goal: Increase parent knowledge	All high school	Sophomore parent night,	100% of parents to secure prevention	20% of parents surveyed at	By January 1, 2013, 30% of
that 79.5% of	on adolescent	parents	parent teacher	information on	parent night can	the surveyed
district	alcohol/drug use		conferences,	alcohol/drugs and	identify the	parents identify
sophomores say			SITE council	the importance of	building	the building
"my family has			meeting, Parent	parental monitoring	prevention	prevention
clear rules about			Network	by January 2013	specialist as a resource for	specialist as a resource for
alcohol and drug use."			Organization, and Project		alcohol/drug	alcohol/drug
use.			Grad		information and	information and
			Cruc		parental	parental
					monitoring	monitoring
					strategies by	strategies
					January 2013	

GOALS/	TARGET	STRATEGIES	PROCESS	BEHAVIORAL	IMPACT
OBJECTIVES	GROUP		OUTCOMES	OUTCOMES	OUTCOMES
Provide	Parents of	Alcohol/drug	100% of parent	10% of the	By January 1,
supportive	referred	education for	accepting services	parents of	2013, 20% of the
services to	students and	parents	will receive services	referred students	parents of
individual parents	parents who		by the Prevention	will choose to	referred student
	self-refer		Specialist by January	receive	will choose to
			2013	prevention	receive
				-	prevention
				January 2013	education
	OBJECTIVES Provide supportive services to	OBJECTIVESGROUPProvideParents ofsupportivereferredservices tostudents andindividual parentsparents who	OBJECTIVESGROUPProvideParents of referredAlcohol/drug education for parents and parents who	OBJECTIVESGROUPOUTCOMESProvideParents of referredAlcohol/drug education for parents100% of parent accepting servicesservices to individual parentsstudents and parents who self-referparentswill receive services by the Prevention Specialist by January	OBJECTIVESGROUPOUTCOMESOUTCOMESProvideParents of referredAlcohol/drug education for parents100% of parent accepting services10% of the parents of referred studentsservices to individual parentsstudents and parents who self-referparentsParents10% of parent accepting services10% of the parentsservices to individual parentsstudents and parents who self-referparentsparentswill receive services by the Preventionreferred students will choose to receive