

**City of Lawrence  
2007 Alcohol Tax Funds  
Request for Proposals  
Calendar Year 2007 (January – December)  
Cover Page**

**Agency Name:** Lawrence Public Schools

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**Program Name:** Jr. high Prevention Services

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**Request is for funding in the following categories and amounts:**

<input checked="" type="checkbox"/>	Prevention	\$ <u>98,788</u>
<input type="checkbox"/>	Treatment	\$ _____
<input type="checkbox"/>	Intervention	\$ _____
<input type="checkbox"/>	Coordination	\$ _____

## Program Description

The following proposal requests funding to continue two Jr. High Prevention Specialist (PS) positions and a .25 secretarial support so that research based services currently being provided with Safe Schools Healthy Student funds can continue to reach Jr. High students. The Lawrence Public School (LPS) Jr. High Prevention Specialist Program is in its fifth year. While funded over time by various funding sources, the program has been successfully established and utilized by students, parents, and district personnel. Each Jr. High PS will provide direct services to students in 2 Jr. High buildings, thus all four LPS Jr. High buildings and 2,300+ students and staff will have access to the experience and expertise of a PS.

The LPS prevention programming, embedded in research by the National Institute of Drug Abuse, Hawkins and Catalano, and the Search Institute of Minneapolis, focuses on multiple areas of risk, including tobacco, alcohol, other drugs, and bullying. The programs are age-specific, developmentally appropriate and culturally sensitive. The goal of the program through comprehensive programming is to reduce or delay student risk behaviors by enhancing identified protective factors and addressing risk factors. **Universal, selective and indicated** strategies are employed to accomplish this goal. The array of services/programs provided and implemented by the PS includes but are not limited to the following:

**Universal Services:** *1) Project Alert Booster Lessons*-Project ALERT is a SAMHSA Model Program with proven results including reduced initiation of marijuana by 30% and decreased regular and heavy smoking. The Jr. High PA lessons are an extension of the 6<sup>th</sup> grade Project Alert curriculum. The Jr High lessons have been integrated into the health curriculum and are supported by the PS with technical assistance and updated research. *2) Mix It Up*-A national campaign designed to reduce student violence and promote students crossing barriers to acquaint themselves with students in groups different from their own during lunch time. Prevention Specialists build upon this activity to reduce cliques and bullying that undermine academic success in the Jr. High environment. *3) School Wide Activities*- Prevention Specialists organize school wide activities related to alcohol, tobacco and other drug use, such as the Red Ribbon Week. *4) Parent Newsletter Articles*- All junior high parents receive prevention/youth substance abuse information otherwise unavailable to them without the coordination of the PS.

**Selective:** *1) Girl Power*-Is a national public education campaign sponsored by the U.S. Department of Health and Human Services to help motivate girls to make healthy lifestyle choices. Up to age 8 or 9 girls usually have strong positive attitudes about their health, so Girl Power seeks to reinforce and sustain these positive values among preteen and teenage girls. The bimonthly meetings send a message/lesson to the unique needs, interests and challenges of girls.

The "Girls and Drugs" study released this month shows that drug abuse has a more profound physical and psychological impact on teen girls than boys. Further research trends indicate that girls are catching up with boys with regard to illicit drug and alcohol use. Marijuana is the illicit drug most widely used by girls. Teen girls also surpass boys in their misuse of prescription drugs. (Girls and Drugs, ONDCP, Exec. Office of the President, Feb. 9, 2006). In addition:

- Adolescent girls are more likely than boys to drink to fit in with their friends.(Donovan, 1996)
- Diet pill use among girls has been as high as 4 times the usage of boys.(2005 MTF Survey)
- Girls develop the symptoms of nicotine addiction faster than boys. (DiFranza, et al., 2002)

- Binge-drinking teenage girls are up to 63 % more likely to become teen mothers.(Dee, 2001)

2) Conversation Between Men- The CBM program, developed as a pilot program 2 years ago at WJHS, matches a professional, accomplished African-American adult male from the community with an African-American student as he enters 7<sup>th</sup> grade. The adult volunteer makes a three year commitment to the student for lunch and a conversation with him once a month for the duration of his Jr. High education. The African-American male is one of the most at-risk individuals in terms of academic achievement. CBM allows youth to connect directly with adult role models who share their experience, personal assistance and guidance. This program is modeled on a United States Department of Education Program called "Let Each One Teach One". The latter has been designated a USDE Promising Program. African-American youths in America, especially males, have an urgent need for the advancement of strategies and interventions for overcoming obstacles to healthy development and achievement. **The junior high CBM effort, which was initiated, developed and sponsored by the junior high PS in response to an identified gap in service, incorporates concepts and activities for self-efficacy, including modeling--providing a role model mentor to affect positive changes in academic success.** These cutting edge prevention programs represent the beginning of a research area that empirically addresses whether mentoring enhances academic success in school for a minority population.

3)Peer Mentor Program- The peer mentor program matches incoming 7<sup>th</sup> graders who have social issue difficulties and transitioning concerns with 8<sup>th</sup> & 9<sup>th</sup> grade student mentors trained by the PS and school staff. The peer mentors continue to work closely with their mentees throughout the year, encouraging academic achievement, positive socialization and problem solving. Developmental Asset Research by the Search Institute demonstrates that peer mentoring is an effective prevention strategy and it assists both the older student mentor and the younger mentee. The long-term benefits for the mentor are: to reduce risk factors; enhance protective factors related to the prevention of substance abuse; provide leadership and decision-making opportunities; foster active involvement of students in their community; and create supportive networks and social bonds to both the mentor and mentee. The long term benefits to the mentee: positive attitude towards school, positive peer interaction, cooperation in the classroom, positive self-concept, positive interactions with adults, regular school attendance, and academic progress.

**Indicated: Alcohol and Drug Intervention-** Individual alcohol and drug intervention is provided by the PS directly to identify substance-using students and their parents. The Prochaska Stages of Change Model will be used to measure student movement toward non-use. This intervention is imperative as research shows that people who reported starting to drink before the age of 15 were four times more likely to report meeting the criteria for alcohol dependence later in their lives (Grant, B. F. and Dawson, 1998). Small group interventions are facilitated by the PS with students that may be affected by a family member's use of alcohol /other drugs. Research demonstrates that children of alcoholics are more likely to be truant, drop out of school, experience difficulty bonding with teachers and other students, have anxiety related to performance and at-risk for alcoholism (Caspi, A., 1996) Regular phone contact, family interviews and home visits when necessary are all strategies employed by the PS to form a trusting relationship with families who are then more receptive to new parenting strategies. "The Prevention Specialists are valued as experts in their field." states Joyce Collins, teacher of Family and Consumer Sciences SWJH.

### **Needs Assessment**

Research documents the relationship between student alcohol, tobacco and other drug use with increased absences, poor grades and an increased likelihood for dropping out of school. Therefore, funding is being sought to help sustain Jr. High Prevention Staff and the implemented programming that reduces this barrier to learning, while improving the lives of children.

A three-year Safe Schools/Healthy Students initiative which was funded in 2002 allowed the creation of a district wide prevention program that placed a PS in every district building. The SS/HS initiative, while a short term funding source, provided an opportunity to create a model program that implemented research based programs and to purchase curriculum that otherwise could not have been afforded. At the elementary level PS trained in the science of prevention were available to train and support building staff who will now continue to implement the program.

However at the Jr. High level at a time when students often begin to experiment with destructive behaviors it became obvious that PS was needed on site to provide and support implementation of the prevention curriculum, build connectivity to school for at-risk students, answer those tough questions teens ask about alcohol and drugs and provide direct intervention to those students who are using or deal with use in their families. David Lawrence-Health teacher, SJHS states "The PS is great support by supplementing the curriculum with presentations and by sponsoring activities aimed at making students aware of the dangers of alcohol, tobacco, and other drugs."

Lawrence offers many challenges in addressing drug and alcohol use by our teens. First of all, our teens are well educated and understand the health risks of usage and in many communities this translates into a lower usage level. However in LPS Districtwide, data shows our students use alcohol (CTC: LPS 34.9, State 31%) and marijuana (CTC: LPS 16.2%, State 8.6%) at a level above the state average. Secondly, one way to address teen usage is to build protective factors such as making sure teens have opportunities for involvement. Again contrary to what might be expected, Districtwide students report their opportunities for involvement in school are higher than the state average. (CTC: LPS 95.8%, State 91.5)

Thus it is only through an on-going targeted, well organized, community wide support system that we will be able to reduce the current level of use. We must keep in place those programs and activities that provide teens with well researched information and opportunities for involvement that don't support the use of alcohol and other drugs. The schools have taken many steps in this direction including insuring that Project Alert and other anti-drug information is taught at the elementary level, revising the drug policy, supporting the development of a parent network, and implementing the use of breathalyzers.

By supporting the Jr. High PS the City of Lawrence can further support and build on the LPS and the SS/HS initiative efforts. Lawrence held a "Town Hall Meeting on Underage Drinking" on March 28, 2006, and as a result more junior high and high school parents are joining the new Parent Network. These parents are requesting and receiving monthly presentations from school PS for education on substances, their impact on youth, and parental monitoring techniques. Research demonstrates that teaching parents about "hands-on parenting", a strategy proven to reduce youth substance abuse, makes sense.

### **Need for LPS Jr. High Prevention and Intervention Services**

Research has shown that prevention is not a one time inoculation we can give our youth but an ongoing process over the developmental stages. It is most effective if it involves a young person's family, peer group, school, and community. Jr. High PS's funded by this proposal are in

the unique position to positively impact all of these areas. The **over-arching goal** at the Jr. High level is to provide comprehensive programming to increase knowledge related to alcohol/other drugs use and to promote protective assets. Cheryl Hamilton, CJHS Health/PE teacher, shares "Having a PS present within the building gives us a resource to emphasize the limited amount of prevention information we are able to teach by giving an in-depth presentation and answering questions which she is better equipped to answer."

Following are 2005 CTC survey results for LPS 8<sup>th</sup> grade students that highlight current alcohol and other drug-related risk factors and demonstrate the **need for continued comprehensive (Universal, Selective and Indicated) prevention services.**

- The percentage using marijuana at least once during the past 30 days has increased each year since 2002. (5% increase)
- The percentage smoking at least one cigarette during the last 30 days has increased each year since 2002. (1.3% increase)
- 22.1% report having at least one alcoholic drink in the last 30 days.
- The percentage of students who associated "being cool" with drinking increased each year from 2002 to 2005.
- The percentage of students who associated "being cool" with smoking increased from 2004 to 2005.
- Disaggregated CTC data: 8<sup>th</sup> grade girls report using tobacco, alcohol and other drugs at a higher rate than their male peers.
- 30 Jr. High out of school suspensions related to Tobacco, Alcohol and other drug use occurred in 2004-05.

While Universal programming reaches all students, it's important to note that over 200 Jr. High students were reached by Selective program/activities provided by the PS. These activities provide an important protective factor (involvement in activities) as reflected by the Kansas Communities That Care Survey trends for USD 497 students. The percent of 8<sup>th</sup> graders who respond "yes, there are lots of chances for students to get involved in my school" has increased each year since 2003, reflective of the types of programming opportunities offered by the PS.

### **Outcomes**

The goal of the program through comprehensive programming is to reduce or delay student risk behaviors by enhancing identified protective factors and addressing risk factors. The ability to continue Jr. High prevention programming will insure that there is a link and continuum of services between the prevention services provided by elementary building staff and secondary PS. See the Logic Model Chart for specific outcome information.

### **Coordination**

During the implementation of comprehensive prevention programming through the Safe Schools Initiative, coordination of service between the Jr. High PS and the elementary and high school was a focus. The Project Alert and prevention health curriculum lessons build on the programming provided at the elementary level. The work completed with individuals and small groups at the Jr. High level prepare students for the programming provided at the High Schools.

### **Organizational Capacity**

LPS has a long and successful history of providing comprehensive services based on research and best practice. The three years of prevention implementation provided through the SS/HS initiative provided an opportunity to build the prevention skills of building staff while determining what could be sustained by existing staff and what required the expertise of an experienced trained Prevention Specialist.

**City of Lawrence - 2006 Alcohol Tax Fund  
Jr. High Prevention Staff Proposal  
Budget**

**Personnel**

Prevention Specialist ( 2 FTE)	\$	74,000
Clerical Support (.25)	\$	7,000

**Fringe Benefits**

FICA, Unemployment, WC .0843 X total salary	\$	6,829
Health Insurance \$285/mo. X 2.25 staff	\$	7,695

**Travel**

In-district mileage .40 X 30 X 36 wks X 2 staff	\$	864
Staff development expenses	\$	800

**Supplies**

Instructional and program support	\$	1,600
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**TOTAL \$ 98,788**

## Outcomes

Assessment Data	Goals/Objectives	Target Group	Strategies	Process Outcomes	Behavioral Outcomes	Impact Outcomes
<p>22.1% report having an alcoholic drink in the last 30 days. (State 24.8)</p> <p>10.8% report using marijuana at least once in the last 30 days. (State 5.6)</p> <p>9.3% report having 5 or more drinks in a row at least once over the last two weeks. (State 10%)</p> <p>9.9% report smoking cigarettes in the last 30 days. (State 9.3%)</p> <p>Data from the 2005 Communities That Care Survey, 8<sup>th</sup> grade students.</p>	<p><b>Goal:</b> Reduce or delay student risk behaviors by enhancing identified protective factors and addressing risk factors</p> <p><b>Objective:</b> Provide multiple educational opportunities for students to receive alcohol, tobacco and other drug education.</p>	<p><b>Universal-</b> all Jr. High Students</p>	<p>Project Alert Booster Lessons and other prevention curriculum</p>	<p>100% (approx. 790 students) of 8<sup>th</sup> grade students receive two Project Alert Booster Lessons by January, 2008.</p> <p>100% of students enrolled in Health and Family and Consumer Science classes participate in four prevention lessons by January, 2008.</p>	<p>50% of students will acquire new knowledge related to the harm and risk of tobacco, alcohol and other drug use as measured by a post survey by January, 2008.</p>	<p>The CTC trend data will show a decrease in tobacco, alcohol and other drug usage at the 8<sup>th</sup> grade level over time.</p>
<p>95.8% report there are a lot of chances for students in my school to get involved in sports, clubs, and other school activities outside of class. (State 91.5)</p>	<p><b>Goal:</b> Reduce or delay student risk behaviors by enhancing identified protective factors and addressing risk factors</p>	<p><b>Universal-</b> All Jr. High Students</p>	<p>School wide Prevention Activities such as: Red Ribbon Week, Mix It Up Day, and similar activities as determined by student interest.</p>	<p>100 % of Jr. High Students by January, 2008 are encouraged to participate.</p>	<p>50% of students participating report an increase in new knowledge and awareness as measured</p>	<p>Continued high participation in school activities result in the lowering of student tobacco, alcohol and other drug use.</p>

<p>15.9% report some, pretty good, or very good chance they would be seen as cool if they smoke. 21.1% report some, pretty good, or very good chance they would be seen as cool if they use alcohol. 23.0% report some, pretty good, or very good chance they would be seen as cool if they use marijuana. 21% report they would drink an alcoholic beverage offered to them at a party.</p> <p>Data from the 2005 Communities That Care Survey, 8<sup>th</sup> grade students.</p>	<p><b>Objective:</b> Provide students with opportunities that support abstinence from alcohol, tobacco and other drugs.</p>				<p>by pre- and post surveys by January, 2008.</p>	
<p>LPS Jr. High Schools report office referrals, 405 out of school suspensions, 70 violent acts occurred in 2004-05.</p> <p>The proportion of girls using alcohol, tobacco, and other</p>	<p><b>Goal:</b> Reduce or delay student risk behaviors by enhancing identified protective factors and addressing risk factors</p> <p><b>Objective:</b> Provide opportunities for</p>	<p><b>Selective -</b> Provide support for at-risk students and opportunities for students to be involved</p>	<p>Conversation between Men, Girl Power, Peer Mentoring, and other similar activities as determined by student interest.</p>	<p>100% of self and adult-selected Jr. High students who meet basic eligibility criteria will be encouraged to participate by January, 2008.</p>	<p>50% of students participating in groups will report an increase in personal responsibility by January, 2008.</p>	<p>Students continue in High School drug free while participating in leadership opportunities in the school and community.</p>



<p>drugs (including prescription drugs) is increasing and in some instances surpassing boys reports SAMHSA National Survey on Drug Use and Health. (2004)</p> <p>LPS District 8<sup>th</sup> grade girls report using tobacco, alcohol and other drugs at a higher rate than their male peers. (CTC)</p>	<p>selected students to develop personal responsibility skills.</p> <p><b>Objectives:</b> Multiple leadership opportunities are available for High Risk students</p>					
<p>30 Jr. High out of school suspensions related to Tobacco, Alcohol, and other drug use occurred in 2004-05.</p>	<p><b>Goal:</b> Reduce or delay student risk behaviors by enhancing identified protective factors and addressing risk factors</p> <p><b>Objective:</b> Provide students and families with the education, support and skills needed for the student to become alcohol, tobacco, or other drug, free.</p>	<p><b>Indicated-</b> provided to students who are using alcohol and other drugs</p>	<p>Individual Intervention</p>	<p>100% of students caught using alcohol, tobacco or other drugs will be offered services by January, 2008.</p> <p>Of the students who accept indicated services 25% will show movement on the Prochaska Stages of Change Model. By January, 2008.</p>	<p>30% of participating individuals receiving intervention from the Prevention Specialist will not be suspended during Jr. High for tobacco, alcohol or other drugs use by January, 2008.</p>	<p>Students not use tobacco, alcohol or other drugs illegally or irresponsibly.</p>